

# Mind the Gap

*Addressing the Mental Health and Addictions  
"Echo Pandemic" in Ontario*

**Simranzeet Singh Vig**

Senior Policy Analyst, Ontario Chamber of Commerce

## Table of Contents



03	• Executive Summary
04	• Summary of Recommendations
07	• I . <i>Small Business, Big Burden</i> : Small and Medium-Size Enterprise Impacts
17	• II . <i>Invisible Echoes</i> : Social and Community Impacts
24	• III . <i>Echoes in the System</i> : Health System Impacts
32	• Conclusion



## Executive Summary

The COVID-19 pandemic had far-reaching implications for Ontario communities, small businesses, and the provincial health care system. Lockdowns and limits on gathering induced anxiety and stress due to fears of contracting the virus, concern for loved ones, and financial hardship. The crisis disproportionately impacted small and medium-sized enterprises (SMEs), frontline workers and underserved populations like Indigenous Peoples and northern, remote, and racialized communities.

Despite the abatement of the public health crisis, the demand for mental health and addiction-related support remains high in Ontario. Experts have termed this phenomenon a mental health “echo pandemic.” With growing waitlists to access mental health services in the community and SMEs juggling post-pandemic recovery with increased demand for employee mental health supports, this “echo pandemic” will have long-term socio-economic consequences.

Informed by robust consultations with mental health experts and its members, the Ontario Chamber of Commerce (OCC) is building on [previous policy work](#) related to mental health to investigate the interconnected impacts of the “echo pandemic” on SMEs, communities, and the provincial health care system.

This policy brief notes that in contrast to larger organizations, SMEs have limited capacity and resources to respond to the growing workplace impacts of the pandemic and have been placed at the forefront of the ensuing mental health crisis without adequate support. To respond to the outsized challenges faced by smaller businesses, the brief provides a practical set of resources to help them address their staff's rising mental health and well-being needs. Additionally, in response to [SME requests for a comprehensive strategy to address mental health and addiction issues in communities across the province](#), this brief examines the pandemic's ongoing effects on Ontario communities and the provincial health care system. It explores how these effects inevitably impact business resiliency.

We acknowledge the ongoing work by the Governments of Ontario and Canada to address these challenges but believe more needs to be done to prioritize workforce, business and community resilience. This brief offers tangible recommendations for decision-makers in business and government to navigate the evolving mental health landscape and enable a comprehensive socio-economic recovery.

# Summary of Recommendations



	Recommendation	Business	Gov't
<b>I.</b> <b>Small and medium-sized enterprises (SMEs)</b>	1. Develop a comprehensive mental health strategy that reflects modern workplace values.		
	2. Offer a diverse range of accessible mental health and addictions support programs for employees.		
	3. Implement outcome measurement and progress monitoring of the organization's mental health strategy.		
	4. Prioritize employee education to bridge the gap in utilizing mental health resources.		
	5. Consider mental health initiatives as part of developing a broader organizational Equity Diversity and Inclusion (EDI) strategy.		
	6. Equip leaders with mental health, addictions and cultural sensitivity training by providing access to ready-to-use resources.		
	7. Increase awareness of and improve small business access to mental health resources and tools by: <ul style="list-style-type: none"> <li>a. Coordinating education and communication campaigns about workplace mental health supports with regional business associations, chambers of commerce, and/or boards of trade to...include easy-to-use toolkits available for small businesses.</li> <li>b. Recognizing mental health within the workplace as a primary focus for occupational health and safety research grants and innovation project funding.</li> <li>c. Engaging in discussions with businesses and employers to identify opportunities for expanded provision of workplace benefits and Employee Assistance Programs (EAPs) through an overarching policy framework.</li> </ul>		

## Summary of Recommendations

	Recommendation	Business	Gov't
<b>I. Small and medium-sized enterprises (SMEs)</b>	8. Accelerate the delivery of a portable benefits plan, of which mental health coverage should be a key component.		
	9. Introduce tax incentive(s) to encourage small business spending on employee mental health.		
	10. Explore opportunities to improve flexibility for repayment of the Canada Emergency Business Account (CEBA) loans to enable more SMEs to qualify for partial loan forgiveness.		
	11. Take a whole-of-government approach to addressing mental health and addictions challenges for Ontario's business community and workforce.		
<b>II. Social and Community</b>	12. Involve people with lived experience in the design and delivery of mental health and addiction tools and supports.		
	13. Work with Indigenous business leaders and communities to review and bolster the effectiveness of existing Indigenous mental health and business programs and pave a pathway for an Indigenous mental health strategy.		
	14. Supplement resources for supportive housing initiatives.		

## Summary of Recommendations

	Recommendation	Business	Gov't
III. Health Systems	15. Continue to scale up evidence-based solutions and boost funding for community mental health providers.		
	16. Leverage data to improve oversight and patient outcomes.		
	17. Enhance the primary care sector's capacity to establish interprofessional care teams.		
	18. Develop a coordinated, evidence-based Health Human Resources (HHR) strategy for Ontario that includes the mental health and addictions sector.		
	19. Incentivise investment in education and training on mental health and addictions among primary care providers.		
	20. Prioritize funding and incentivise private sector investment toward mental health research and innovation.		
	21. Partner with other provinces and territories to advocate for additional mental health resources from the federal government as part of the Canada Mental Health Transfer (CMHT).		



SORRY  
WE ARE  
CLOSED  
PLEASE

## Small Business, Big Burden



Unpacking the direct impacts of the mental health "echo pandemic" on Ontario's small and medium-sized enterprises.



SMEs in Ontario make significant contributions to the province's economy. A majority of Ontario businesses are SMEs (totalling 494,000 businesses)<sup>i</sup> and are distributed across the goods and services sector.<sup>ii</sup> Over 98% of SMEs in Ontario have fewer than 100 employees and collectively employ over four million individuals, accounting for 71 percent of the private sector workforce in the province.<sup>iii</sup> The health of our communities is directly tied to the resilience of businesses – and SMEs continue to face outsized challenges compared to large businesses in the “echo pandemic.”

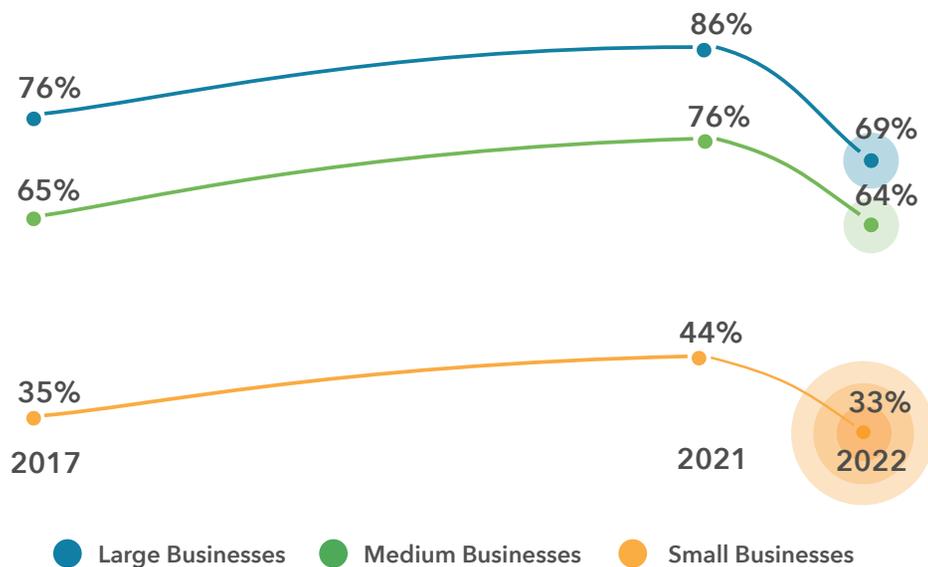
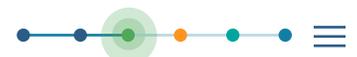
Most policy conversations surrounding workplace mental health have centred on larger corporations, given their workforce size and financial capacity to implement changes. However, SMEs face unique mental health challenges, which have been exacerbated by the lingering impacts of the pandemic and current economic uncertainty. Many small business owners and employees have been facing higher-than-usual stress levels for a sustained period, necessitating a genuine and earnest conversation around this issue.

This section sheds light on workplace mental health challenges within the context of Ontario SMEs and outlines the disproportionate impact of the pandemic on their owners and employees. Additionally, it identifies practical tips and ready-to-use resources that SMEs can leverage to help employees reach their full potential and reap the benefits of a psychologically healthy and safe work environment.

**494,000** small businesses  
**4 million** employees  
**71%** of private sector workforce

### **SMEs encounter distinct mental health challenges.**

While many entrepreneurs start a business with enthusiasm and passion, working in a small business setting day-to-day can induce stress and anxiety due to the dynamic nature of the work, where roles shift frequently for both employers and employees. Small business owners often struggle with time constraints and heavy responsibilities, leading to reduced well-being and unattended mental health issues.<sup>iv</sup> Research indicates that within SMEs, employees and founders often lack access to EAPs for timely support.<sup>v</sup> In addition, the absence of a human resources function (common in smaller organizations) can hinder discussions around workplace mental health.



**Percentage of businesses with a formal mental health strategy <sup>viii</sup>**

**In Ontario’s context, while small businesses acknowledge the importance of employee well-being, there exists an “action gap” when formalizing workplace mental health supports.**

According to the [OCC’s 2023 Ontario Economic Report](#),<sup>vi</sup> while 78 percent of businesses in Ontario recognize the significance of mental health investments, only 37 percent have established a formal strategy. Additionally, a considerable difference exists between small and large businesses, as merely 33 percent of SMEs possess strategies in contrast to 69 percent of their larger counterparts, a gap which has remained steady since 2017.<sup>vii</sup>

## The COVID-19 pandemic hit Ontario SMEs particularly hard, negatively affecting the mental well-being of both business owners and employees.

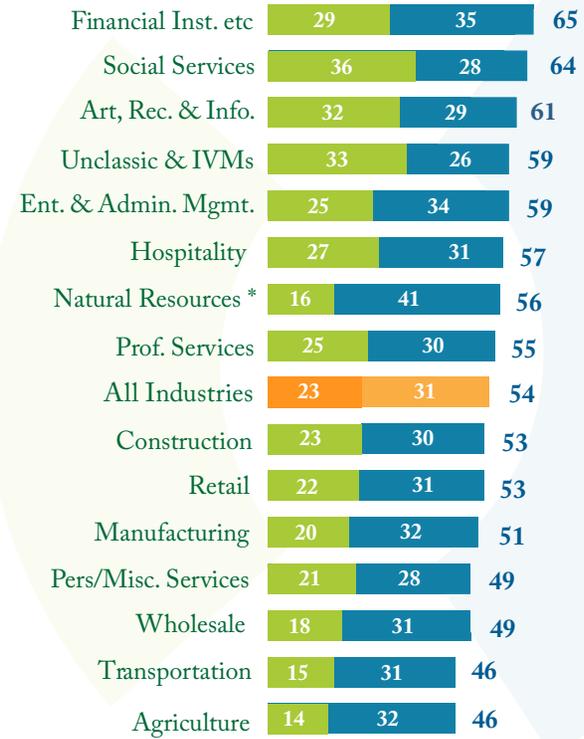
SMEs were at a disproportionate risk of business failure due to the negative economic impacts of the COVID-19 pandemic.<sup>ix</sup> Even among the ones that survived, around 45 percent of small business owners noted overwhelming stress among their top concerns, as they juggled to keep their business from failing, including meeting payroll, paying suppliers and dealing with staff issues (like labour shortages).<sup>x</sup>

Faced with the necessity to adapt, Ontario SMEs, which could afford to go online shifted their operations to remote environments to ensure their employees' safety and comply with health guidelines. These abrupt changes and transition to remote work presented challenges and opportunities, requiring businesses to implement new business models, services, technologies, communication strategies, and flexible work arrangements to sustain their operations. Boundaries between personal and professional life blurred,<sup>xi</sup> and workplace interactions were limited or replaced by increased screen time and digital demands.<sup>xii</sup> This rapid digital shift further contributed to disruption in work-life balance.

The productivity impacts also varied across industries, leading to varying effects on the mental health of employers and employees.



- Somewhat Agree
- Strongly Agree
- Somewhat Disagree
- Strongly Disagree
- Don't Know/ Unsure
- Not Applicable



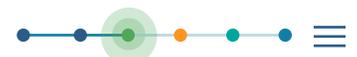
**Mental health challenges resulting from the pandemic are having a negative impact on our business productivity (% responses); February 2022 (Canada)<sup>xiv</sup>**

*Source: CFIB, Your Voice Survey - February 2022, Feb 9-25, (n=3,261)*

Those in the finance and insurance sector, social services, and arts and recreation witnessed the most significant decrease in productivity due to the mental health effects of COVID-19.<sup>xiii</sup>

Service sectors with a client/consumer-facing profile, such as retail and essential services like grocery stores, found it particularly challenging to adapt. Employers and employees of these businesses faced increased

work demands, enduring extended hours while wearing personal protective equipment (PPE), which contributed to burnout, fatigue, and anxiety about contracting the virus. In addition to these challenges, the services sector had to contend with substantial job losses during the initial months of the pandemic, which brought about financial uncertainty and stress, exacerbating mental health concerns.<sup>xv</sup>



As evidence of the prevalence of a mental health “echo pandemic”, the mental health impacts of the early months of COVID-19 have persisted for both small business owners and employees:

54%

*Many SME employers have reported increased cases of poor employee mental health, with 54 percent of owners in 2022 saying they are aware of struggling employees, compared to 35 percent in 2020.*

*Pandemic pressures also took a toll on the mental health of small business owners, with almost two-thirds indicating they are closer to burning out after two years of COVID-19-related stress.<sup>xviii</sup>*

2/3

In the aftermath of the pandemic, small businesses report not feeling adequately prepared to address mental health issues in the workplace.<sup>xviii</sup> COVID-19 also redefined the nature of work, fundamentally changing how employees go about their workdays. In most industries, hybrid work is now the norm (and an expectation).<sup>xix</sup> As SME owners and employees adjust to the new, post-pandemic workplace dynamic, the lingering impacts of COVID-19 will continue to affect their mental health and productivity. In addition, small business owners face new emerging economic pressures in acute labour shortages and inflationary costs.<sup>xx</sup> These pressures will continue to add to and have a bearing on their stress levels and broader mental health. Mental health and economic performance by Ontario’s SMEs are interdependent and critical to economic resilience and growth.

As such, addressing the mental health “action gap” among SMEs is more important than ever and needs to be an integral element of SMEs’ post-pandemic economic recovery.

The onus to act is not limited to the business sector. Governments also have a significant role to play in this domain as they possess legislative and policy authority to establish programs and enforce regulations for workers’ safety and mental health. Taking the lead from France and Belgium,<sup>xxi</sup> Ontario introduced “right to disconnect” legislation intended to safeguard employees’ mental well-being and prevent burnout. Starting in 2023, employers with twenty-five or more employees are required to have a written policy in place for all employees to disconnect from work.<sup>xxii</sup> The provincial government must build on this foundation, acknowledging the vital role of SMEs in the post-pandemic economic recovery and introducing tailored mental health programs and policies to support them.

## Recommendations and Resources for SMEs

We recognize that implementing the following recommendations might vary across sectors, especially given the unique circumstances SMEs encounter as they recover from the pandemic. As such, we have identified practical tips and tools that small businesses can readily use to address the mental health issues at their workplace. Businesses are encouraged to view these as best practices and endeavour to incorporate them to the best extent possible.



### 1. Develop a comprehensive organization-wide mental health strategy that reflects modern workplace values.

This could include promoting hybrid work and flexibility to enhance employee well-being and attract a new generation of workers.

- Great West Life Centre for Mental Health in the Workplace: [Strategies for small business owners](#)
- [Template](#) and [tips](#) to prepare an effective mental health strategy
- [Toolkit](#) to help employers return to in-person work and support employees requiring disability-related accommodation
- Dr. Bill Howatt: [Three Steps for Building a Mental Health Framework](#)
- [Guide](#) to building a mental health committee



### 2. Offer a diverse range of accessible mental health and addictions support programs.

Many Canadian employees report that existing benefit plans are insufficient and too restrictive in the types of mental health care covered.

- Understanding the duty to accommodate, a [guide](#) for employers, and [examples of accommodations](#) to support employees
- Free government resources: [BounceBack](#), [MindBeacon](#), [WellCan](#), and [Wellness Together Canada](#)



### 3. Implement outcome measurement and progress monitoring within the mental health strategy.

Evaluating successful supports, identifying gaps, soliciting employee feedback, and incorporating additional evidence-based resources.

- [Tips](#) for setting performance measures
- [Steps for businesses to measure their organization's mental health program](#)



#### 4. Prioritize employee education.

Bridging the gap in accessing and utilizing mental health resources. Research indicates only four percent of Canadians with access to EAPs through their employer use it due to a combination of stigma and lack of awareness. In addition to raising awareness, an effort should be made to simplify access to supports and streamline resources.

- [Glossary](#) to help employers discuss mental health and [tips](#) to discuss performance and mental health
- [Tips](#) for communicating organizational health plans
- Virtual and face-to-face course offerings by the Mental Health Commission of Canada: [Mental Health First Aid](#)



#### 5. Consider mental health initiatives as part of developing a broader organizational EDI strategy.

Recognizing the potential added stressors faced by racialized and other marginalized employees and emphasizing the importance of inclusivity throughout the strategy.

- Canadian Institute of Diversity and Inclusion: [SME toolkit to develop EDI strategy](#) for those SMEs without an EDI strategy



- [Helpful suggestions](#) for organizations to incorporate mental health initiatives while developing an EDI strategy



#### 6. Equip leaders with mental health, addictions, and cultural sensitivity training by providing access to ready-to-use resources.

Regular training can empower managers to detect distress signals and inform employees about effective internal and external resources/supports.

- [Training videos](#) for managers (or small business owners)
- Mental health first aid [training](#)
- [Information](#) on stigmatizing versus inclusive language

In addition to the resources listed in the table, the [OCC's website](#) can be used as a preliminary resource for employers looking to build a mentally healthy workplace. The page includes a selection of valuable and relevant websites and tools to help employers assess their business, develop appropriate solutions, and discover formal support for their journey.

## Recommendations for Government



### 7. Increase awareness of and improve small business access to mental health resources and tools:

While larger organizations offer comprehensive health benefits programs, including EAPs and wellness programs, SMEs often lack awareness about available mental health supports. Additionally, post-pandemic economic pressures have severely limited the financial capacity of SMEs to offer expanded services.<sup>xxvii</sup> Building upon the pillar of improving access and navigation of mental health services as outlined in the [Roadmap to Wellness Plan](#),<sup>xxviii</sup> the government has an opportunity to fill this gap by:

- a. Coordinating education and communication campaigns about workplace mental health supports with regional business associations, chambers of commerce, and/or boards of trade to include easy-to-use toolkits available for small businesses.
- b. Recognizing mental health within the workplace as a primary focus for occupational health and safety research grants and innovation project funding.
- c. Engaging in discussions with businesses and employers to identify opportunities for expanded provision of workplace benefits and EAPs through an overarching policy framework.



### 8. Accelerate the delivery of a portable benefits plan, of which mental health coverage should be a key component:

The provincial government should prioritize introducing a comprehensive portable benefits framework which should include essential components like mental health coverage, particularly for workers in non-traditional employment arrangements. The portable benefits advisory panel recently concluded its public consultation in December 2022.<sup>xxix</sup> Building on member input and considering the evolving work landscape and challenges in the pandemic's aftermath, the OCC supported the timely introduction of this benefit and, in a submission to the expert panel, [suggested key elements related to program design, including portability, proportionality, flexibility and affordability.](#)



### 9. Introduce tax incentive(s) to encourage small business spending on employee mental health:

Similar to the small business healthcare tax credit in the United States, the provincial and federal governments have an opportunity to fill the mental health investments action gap among SMEs by offering a tax incentive, in the form of a credit or deduction to SMEs that would incentivise businesses spending on workplace mental health, thus contributing to overall resilience and success of small businesses in the post-pandemic landscape.



## 10. Explore opportunities to improve flexibility for repayment of Canada Emergency Business Account (CEBA) loans to enable more SMEs to qualify for partial loan forgiveness:

Around 69 percent of SMEs who accessed the loan have not yet been able to repay any of it, and only 18 percent have repaid their loan in full as of September 2023.<sup>xxxii</sup> Small businesses throughout Ontario and Canada continue to navigate the lasting economic impacts of the pandemic and face new pressures in the form of higher interest rates, inflation and increased labour costs, which has delayed their recovery.<sup>xxxiii</sup> The [recent announcement](#) by the federal government giving businesses an additional year to repay the full balance of the loan is a step in the right direction. However, the new terms only provide businesses until January 18, 2024 (an 18-day extension) to repay the loan and qualify for partial loan forgiveness, putting close to 250,000 Canadian SMEs at risk.<sup>4,xxxiv</sup> More needs to be done to improve the flexibility associated with the repayment of the forgivable portion of the CEBA loans to ensure a fulsome recovery of small businesses.

<sup>4</sup> For CEBA loan holders who make a refinancing application with the financial institution that provided their CEBA loan by January 18, 2024, the repayment deadline to qualify for partial loan forgiveness now includes a refinancing extension until March 28, 2024.

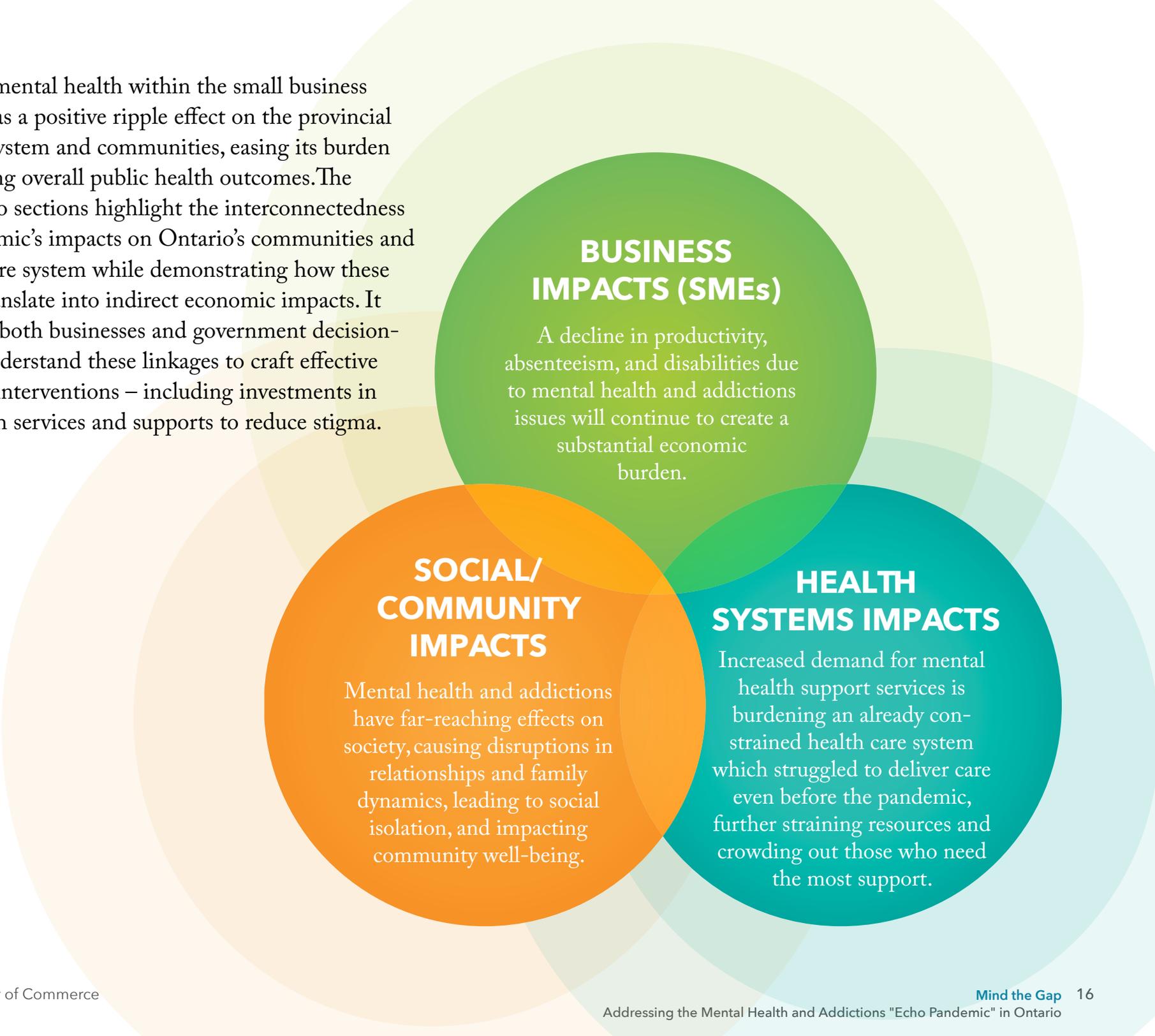


## 11. Take a whole-of-government approach to addressing mental health and addictions challenges for Ontario's business community and workforce:

Mental health and addictions is a cross-cutting issue with direct and indirect economic implications (e.g., housing, immigration, workforce development). Similar to the Gender-based Analysis (GBA) Plus tool at the federal level,<sup>5,xxxv</sup> the provincial and federal governments could consider adopting a “mental health and addictions lens” that provides a rigorous method for assessment of systemic inequalities, as well as a means to assess the mental health impact of policies, programs, and initiatives on diverse groups, with emphasis on SMEs.

<sup>5</sup> GBA Plus is an analytical process that provides a rigorous method for the assessment of systemic inequalities, as well as a means to assess how diverse groups of women, men, and gender-diverse people may experience policies, programs and initiatives. The “plus” in GBA Plus acknowledges that GBA Plus is not just about differences between biological (sexes) and socio-cultural (genders). Using GBA Plus involves taking a gender- and diversity-sensitive approach to policy and program development.

Prioritizing mental health within the small business sector also has a positive ripple effect on the provincial health care system and communities, easing its burden and improving overall public health outcomes. The following two sections highlight the interconnectedness of the pandemic's impacts on Ontario's communities and the health care system while demonstrating how these inevitably translate into indirect economic impacts. It is crucial for both businesses and government decision-makers to understand these linkages to craft effective policies and interventions – including investments in mental health services and supports to reduce stigma.



### **BUSINESS IMPACTS (SMEs)**

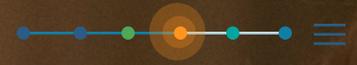
A decline in productivity, absenteeism, and disabilities due to mental health and addictions issues will continue to create a substantial economic burden.

### **SOCIAL/ COMMUNITY IMPACTS**

Mental health and addictions have far-reaching effects on society, causing disruptions in relationships and family dynamics, leading to social isolation, and impacting community well-being.

### **HEALTH SYSTEMS IMPACTS**

Increased demand for mental health support services is burdening an already constrained health care system which struggled to deliver care even before the pandemic, further straining resources and crowding out those who need the most support.



## Invisible Echoes

Tracing the communities impacts of the mental health "echo pandemic".

## The pandemic had different starting lines.

It exacerbated mental health challenges for individuals with pre-existing barriers to accessing social services, like those experiencing homelessness or those with substance dependencies. Its impacts on mental well-being were also severe for those in communities already marginalized by social and economic inequalities (e.g., Indigenous Peoples, racialized groups, northern communities, and members of the 2SLGBTQI+ community).

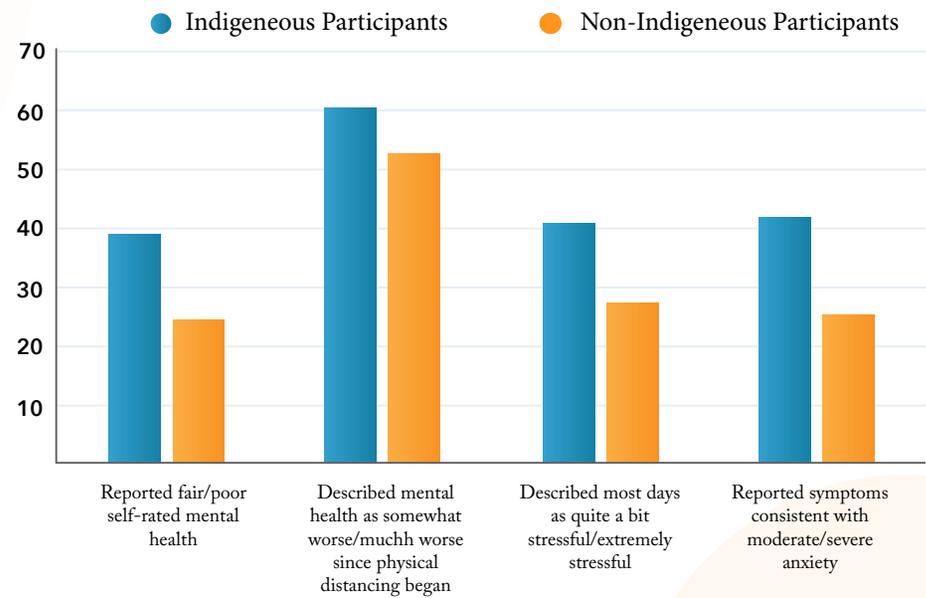
The impact on Ontario's communities intersected with business impacts (especially for SMEs). The pervasive mental health impacts of the "echo pandemic" extended to young professionals finishing university and starting their careers and parents who had to adapt their workplace routines around increased childcare responsibilities. Additionally, SMEs are at the frontlines of this crisis without necessary supports to deal with increased mental health-related community challenges. Several local chambers of commerce and boards of trade across Ontario continue to report concerns about disruption to their members and partners and business operations from those experiencing mental health and substance dependencies and issues with homelessness – complex systemic issues in their own right –made worse by the pandemic.

While the community impact of the "echo pandemic" has not been uniform across regions and population types, for the purposes of this brief, this intersection of community

and business impacts is underscored through the cases of Indigenous Peoples, youth and students, and people experiencing substance dependencies.

## Indigenous Peoples

Indigenous communities in Canada face inequitable impacts on their mental well-being as a result of the ongoing legacy and effects of colonialism, which presents in factors like social determinants of health (e.g., access to affordable and culturally appropriate housing, healthcare, education), intergenerational trauma, and systemic racism.<sup>xxxvi</sup> The pandemic intensified these disparities. As illustrated in the graph below, a larger percentage of Indigenous respondents indicated fair/poor mental health compared to non-Indigenous respondents in the initial months of the pandemic.<sup>xxxvii</sup>



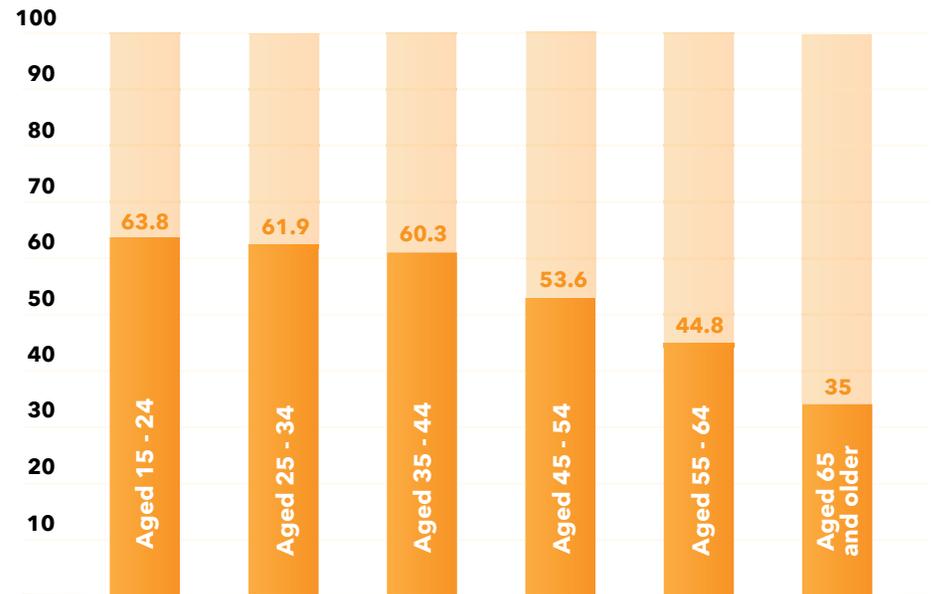
Impact of COVID-19 on mental health for Indigenous and non-Indigenous participants. Apr 24- May 11, 2020.

Source- Statistics Canada



While many Indigenous communities and organizations tried to reduce isolation and loneliness during the pandemic by creating local support networks on reserves, many communities experienced a marked increase in both suicide deaths and attempts since the beginning of COVID-19. Indigenous Peoples living off reserve also reported encountering systemic racism and discrimination in the health care system, making them feel unsafe to access physicians and preventative care programs due to a fear of mistreatment or general mistrust.<sup>xxxviii</sup> Data indicates Indigenous Peoples were twice more likely than non-Indigenous Peoples to have tried to harm themselves and thrice more likely to have had suicidal thoughts.<sup>xxxix</sup> The adverse mental health impacts have echoed beyond the pandemic, with disproportionate mental health and addictions issues facing Indigenous communities, especially in northern Ontario, where Chiefs of First Nations called for a public emergency and social crisis to be declared.<sup>xl</sup>

These impacts were compounded for Indigenous-owned businesses in Ontario, 99 percent of which are SMEs.<sup>xli</sup> As evidenced by [previous OCC work](#), accessing financing capital and broadband connectivity has been a longstanding barrier to expansion for Indigenous businesses, especially those located in rural, remote, and northern communities. The onset of the pandemic worsened business and mental health outcomes, with 90 percent of Indigenous small business owners reporting facing acute pressures due to lack of finances to cover fixed costs, difficulties accessing government resources online and establishing e-commerce, and ineligibility for some federal programs.<sup>xlii</sup>



Canadian's self-perceived poor mental health by age group during the pandemic (% of respondents)

Source- Statistics Canada

## Youth and Students

Canadian youth, students and young adults were also at higher risk and reported poorer mental health due to the pandemic's impacts compared to other age groups.<sup>xliii</sup>

The pandemic brought about school closures, a transition to online learning, and a general sense of disengagement, which worsened academic performance of students.<sup>xliv</sup> Numerous students encountered disconnection, academic regression, and reduced credit attainment during this period.<sup>xlv</sup> According to a recent report on pandemic impacts, 59 percent of Ontario students reported that the pandemic left them feeling depressed about the future, and 39 percent reported worse mental health.<sup>xlvi</sup>



These adverse mental health impacts have been particularly pronounced for marginalized youth, including young refugees, those living in rural areas, Indigenous, racialized and ethnic minority youth, and young people of diverse sexual orientations, gender identities and gender expressions.<sup>xlvi</sup> For these groups, factors like unstable housing and school closures hindered safe social distancing at home. Moreover, inadequate access to stable internet and necessary devices for virtual learning exacerbated their challenges, especially for those from lower-income families and those living in rural, remote, and northern communities, leading to increased stigma and discrimination.<sup>xlvi</sup>

The impacts have also extended to student cohorts transitioning from high school to university and young professionals starting their careers. This younger demographic forms the future workforce generation, and adverse mental health effects stemming from the pandemic have generated a greater need for assistance, extending into their professional roles. Attracting and retaining a skilled workforce remains a pivotal aspect of business competitiveness, particularly as SMEs recover from the adverse economic impacts of the pandemic. As a result, understanding the mental health impacts of the pandemic on this population segment holds specific significance for Ontario SMEs.

Ontario's Youth Wellness Hub model, an important focus of the [Roadmap to Wellness Plan](#), has helped fill the gap in the care continuum by providing an integrated one-stop shop for youths to access quality, timely and

integrated mental health and addiction and related supporting services (like education and employment). The government also announced the opening of eight new Youth Wellness Hubs to make it faster and easier for young people to connect to mental health and substance use support, primary care, and social services.<sup>xlvi</sup> The future of Ontario's workforce resiliency depends on how these groups are supported through this critical period of their professional lives.



## Individuals with Substance Dependency

Consistent with the findings of the Ontario COVID-19 Science Advisory Table and the Mental Health Working Group,<sup>1</sup> the stress induced by the pandemic, coupled with social isolation and mental health challenges, brought about shifts in substance use patterns. In conjunction, there was a notable reduction in the accessibility and capacity of substance use treatment and harm reduction services during the initial phase of the pandemic due to closures and limitations on the number of clients permitted at facilities.

Ontario, which was already grappling with an opioid overdose crisis prior to the pandemic, faced a deepening of this challenge.<sup>3</sup> Rates of opioid-related harm, particularly fatal overdoses, surged, and these impacts were disproportionately felt by rural and northern communities, individuals experiencing poverty or homelessness, and Black, Indigenous Peoples, and other racialized communities.<sup>li</sup> Between March 2020 and September 2021, the frequency of emergency medical services responding to suspected opioid overdoses jumped by a significant 57 percent, while fatal opioid overdoses escalated by 60 percent across the province.<sup>lii</sup>

<sup>3</sup> *A forthcoming OCC policy primer (in early 2024) will highlight the challenges, impacts, and opportunities to address Ontario's opioid overdose crisis.*

## SUBSTANCE DEPENDENCY IN THE CONSTRUCTION INDUSTRY

Canada's construction industry is grappling with a serious mental health and substance dependency crisis. A 2021 study analyzing opioid-related deaths across professions in Ontario reported that 31 percent were individuals working within the construction industry.<sup>liii</sup> Several distinctive factors contribute to the poor mental well-being of workers within the construction industry, including the seasonal and uncertain nature of employment and the physically demanding nature of the work.<sup>liv</sup> Furthermore, on balance, construction workers tend to have a higher likelihood of encountering work-related injuries and get prescribed different forms of opioids to alleviate pain, which inadvertently creates a pathway to substance dependency.

The pandemic, which exacerbated mental health challenges for all workers, disproportionately affected construction workers. Since the pandemic's onset, drug use among construction workers surged by 31 percent, compared to the 25 percent increase experienced by other Canadian workers. Similarly, alcohol consumption has risen by 35 percent among construction workers, slightly higher than the 34 percent increase observed among Canadian workers.<sup>lv</sup>

## Recommendations



### 12. Involve people with lived experience in designing and delivering mental health and addiction tools and supports:

People with lived experience, including patients, family members, and caregivers, as well as underserved communities (e.g., racialized individuals, residents in rural and remote communities like northern Ontario) can offer crucial insights for crafting comprehensive government strategies related to mental health.<sup>lvi</sup> Countries such as Sweden, the Netherlands, and Norway have already integrated these perspectives to shape people-centred mental health policies.<sup>lvii</sup> Similar to the efforts of the Mental Health and Addiction's Centre of Excellence, which includes people with lived experience on all its committees, meaningful engagement opportunities during policy and program design would enable patient-centred care outcome that aligns with the needs and preferences of vulnerable populations.



### 13. Work with Indigenous business leaders and communities to review and bolster the effectiveness of existing Indigenous mental health and business programs and pave the way for an Indigenous mental health strategy:

The province provides a host of supports for Indigenous wellness, including the Crisis Team Program, mental health and addictions treatment centres and mental health day programs.<sup>lviii</sup> Some of these legacy policies, like the [Indigenous Healing and Wellness Strategy](#) (launched in 1994) could benefit from a refresh to reflect the mental health challenges Indigenous Peoples face today and orient supports accordingly. As part of its commitment in the [Roadmap to Wellness Plan](#) to work collaboratively with Indigenous partners to co-develop programs, the government could start with a focused assessment of existing wellness and business supports – led and informed by Indigenous communities themselves. These could help pave pathways for additional culturally appropriate, evidence-based supports as part of an Indigenous mental health strategy. Embracing hybrid work and flexible work arrangements (where applicable) to bolster employee well-being and appeal to a new generation of workers who want to see these values reflected in the company's mission.



## 14. Supplement resources for supportive housing initiatives:

Supportive housing is pivotal for helping individuals with mental health and addictions concerns, enabling them to attain comprehensive recovery with the appropriate level of assistance. For many of these individuals, access to supportive housing is the difference between a home and homelessness. Within Ontario, insufficient investments in this sector have led to a shortage of available options and extensive waiting lists. According to experts, the province needs to build a minimum of 30,000 supportive housing units by 2026 to begin to tackle the demand.<sup>lix</sup> In addition to funding to build these new units, supplemental funding is required to maintain the existing supportive housing stock. It is recommended that the government expedite the pace and extent of supports in this area to meet the growing demand for supportive housing.

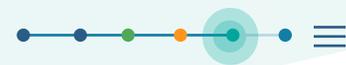




### III.

## Echoes in the System

Tracing the ripple effects of the "echo pandemic" on Ontario's healthcare system.

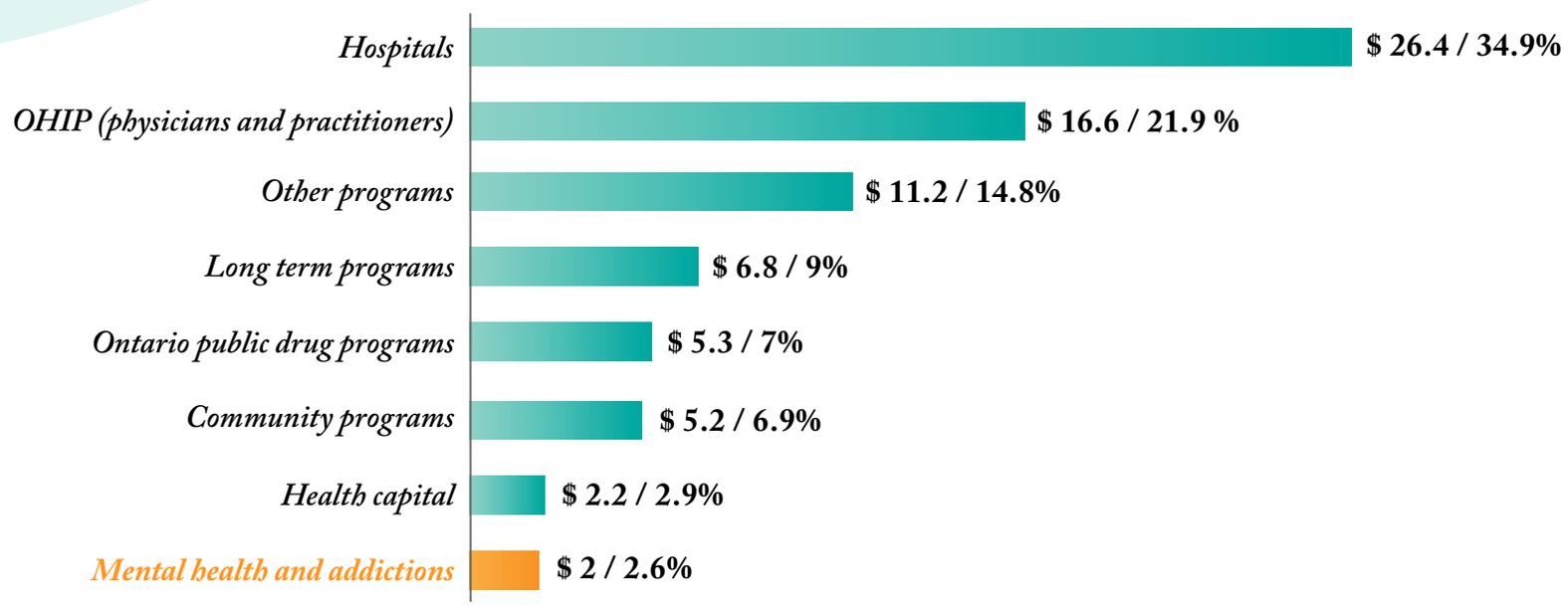


The deteriorating mental health of individuals in communities and SME employers and employees, has significant implications for the provincial healthcare system. As mental health concerns escalated during and after the pandemic, the uptick in demand placed additional strain on an already burdened health care system, potentially leading to longer wait times, reduced access to specialized care, and increased healthcare costs for both the affected individuals and the system itself. The impact extends beyond direct healthcare expenses, encompassing lost productivity, absenteeism, and decreased workplace performance, which in turn can affect the overall economy and the province's fiscal health.

## Ontarians' mental health needs were not being met pre-pandemic.

Before the onset of COVID-19, more than one million people in the province were already experiencing mental health and addictions challenges.<sup>lx</sup> There are several contributing factors to this trend:

1. Ontario's mental health and addictions programs have been chronically underfunded for decades.<sup>lxi</sup> While mental illnesses account for approximately ten percent of the disease burden in Ontario,<sup>lxii</sup> mental health and addictions programs received less than three percent of total healthcare spending in the 2020 and 2021 provincial budgets.<sup>lxiii</sup>



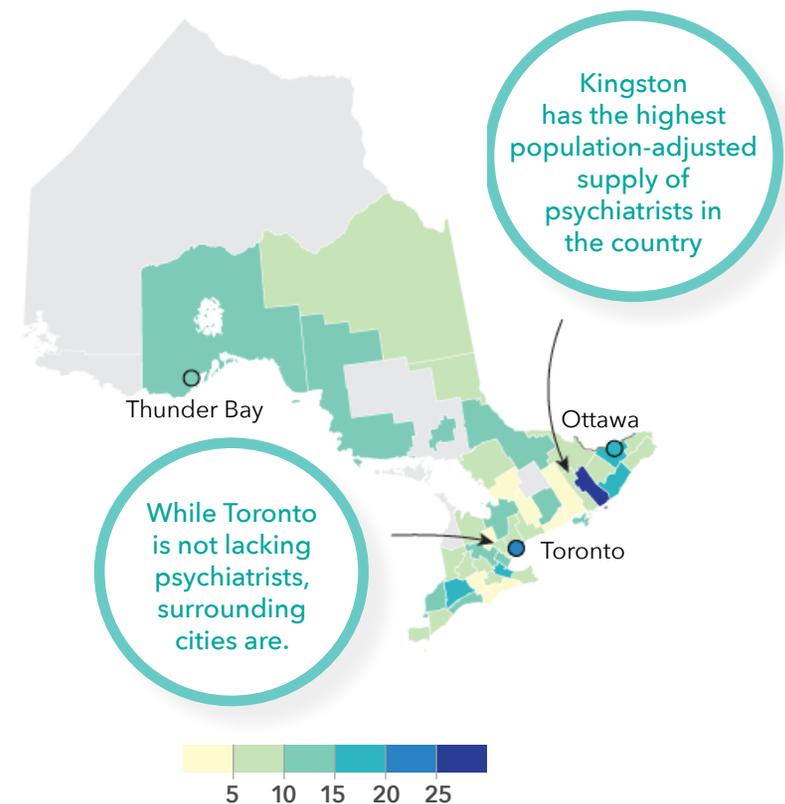
2021-22 Actual Health Sector Spending in Ontario (\$ billions) <sup>lxiv</sup>

2. Lack of sustainable program funding meant the system was already facing capacity challenges pre-pandemic. Providers worked hard to balance mental health service delivery with rising demand year-over-year while at the same time struggling to offer competitive wages to attract and retain staff, resulting in staffing shortages and health human resource challenges.<sup>lxv</sup> According to the Ontario Psychiatric Association estimates,<sup>lxvi</sup> Ontario faced a shortage of two hundred psychiatrists in 2018, a deficit expected to surge to 75 percent by 2030.

Ontario ranks second to last in psychologists per capita compared to other Canadian provinces and territories.<sup>lxvii</sup> The scarcity of specialized mental health practitioners, including psychologists and psychiatrists, intensified during the COVID-19 pandemic. All of this underscores the urgency of deploying the additional funding allocated as part of the 2023 Budget towards community mental health programs and targeted supports like supportive housing.

3. Experts also highlighted the absence of a core service standard among mental health service providers, leading to an “uneven quality of care and support” across providers and regions. The struggle to access specialized mental healthcare is a prevailing issue for millions of Ontarians in underserved areas. Much like other medical specialists, psychiatrists are concentrated in Ontario’s major urban centers, leaving individuals and businesses in smaller communities

and northern regions of the province with limited to no access in the time of increased need.<sup>lxviii</sup> This poses challenges in attracting new doctors to these areas, where they may face long on-call hours, and leaves an already fragile system susceptible to disruptions caused by a single departure, work absence, or retirement.



**Number of Psychiatrists per 100,000 population (for census division)** <sup>lxix</sup>

4. Ontario’s mental health and addictions system has been characterized as poorly coordinated and lacking integration among various primary care providers, specialists, and more than six hundred community-based mental health and addictions organizations.<sup>lxx</sup> Primary care providers such as family physicians (who are often the first point of contact for those seeking help) frequently do not have comprehensive knowledge of available mental health supports. Further, they often lack the required training and sufficient time to treat patients with mental illnesses or to meet the service demand.<sup>lxxi</sup> In turn, patients end up getting referred to specialists, who have extensive wait lists and are costlier, as opposed to supports within the community that are much more affordable. Overall, this creates barriers to access for those seeking support, leading patients to turn to the only immediate supports available — already overwhelmed hospitals and emergency rooms, contributing to even longer wait times and patient backlogs across the healthcare system.<sup>lxxii</sup>

**COVID-19 was a catalyst that magnified existing cracks in the treatment system, and the “echo pandemic” is widening them.**

There is an increased number of people experiencing mental health issues post-pandemic, which has led to an increased demand for supports from a system already operating at capacity. Requests for mental health support for adults in Ontario increased by 47 percent between 2021 and 2022, while the demand for children and youth services in the same period grew by 104 percent.<sup>lxxiii</sup>

This has contributed to average wait times for core mental health and addictions services across Ontario of 27 days for substance use health services, 128 days for mental health support and 317 days for supportive housing.<sup>lxxiv</sup>

A sizeable portion of these people are seeking complex care<sup>4</sup>. Forty-two percent of Ontarians reported increased substance use or gambling,<sup>lxxv</sup> and more than 25 percent reported feeling moderate to severe anxiety in February 2022, up from 19 percent in July 2021.<sup>lxxvi</sup>

Ontario’s health care system and its workforce continues to struggle with funding and health human resource constraints which are pushing capacity to the brink. Several organizations, like the Ontario Medical Association and nursing associations, are reporting severe burnout among formal caregivers (like physicians, nurses, and personal support workers).<sup>lxxvii</sup>

*<sup>4</sup> Individuals with complex mental health requirements are characterized as those grappling with substantial, multiple, infrequent, or enduring mental health issues that affect their abilities across various domains, including their homes, workplaces/educational settings, and within the community. These needs, often interrelated, present a complex challenge, as it can be challenging to simultaneously address all the issues they present.*



The COVID-19 pandemic added novel pressures, such as the constant use of personal protective equipment and ongoing uncertainty surrounding workplace safety.<sup>lxxviii</sup> Sixty percent of physicians said their mental health was worse than before the pandemic due to increased workload, social isolation, and rapidly changing policies and processes.<sup>lxxix</sup>

To respond to these pressures, the Province launched a host of initiatives within the health care system that have helped mitigate some immediate mental health impacts. Some notable examples include:

However, more needs to be done in the wake of the mental health challenges posed by the “echo pandemic.” It is recommended that the implementation of the Roadmap to Wellness Plan account for and reflect the post-pandemic realities of the mental health challenges and needs of Ontarians.



**Launching the Ontario Structured Psychotherapy Program in 2020 which offers publicly funded, short-term, evidence-based cognitive behavioural therapy to adults in Ontario who have depression and anxiety-related conditions<sup>lxxx</sup>**



**Funding for new community-based mobile clinics to provide a full suite of mental health and addiction services in remote, rural, and underserved communities across Ontario.<sup>lxxxilxxxii</sup>**



**Establishing a new addictions recovery fund which will enhance specialized services for mental health and addictions treatment, including in rural, northern, and Indigenous communities and increase the number of province-wide treatment beds.<sup>lxxxiii</sup>**

## Recommendations



### 15. Continue to scale up evidence-based solutions and boost funding for community mental health providers:

As per the latest healthcare spending projections, Ontario has a \$4.4 billion spending envelope available after meeting funding commitments towards existing healthcare programs (until 2025-26).<sup>lxxxiv</sup> The government could consider allocating a portion of this envelope to expand successful mental health programs like the Ontario Structured Psychotherapy Program ([in addition to the increased offerings through regional networks in Central, Northwest, Northeast and Western Ontario recently announced](#)), increase funding for community mental health to address staffing and data reporting challenges, and support evidence-based programs through health grants for better accountability. This will bring Ontario in line with peer jurisdictions like Australia and New Zealand, which allocate an estimated 10 to 11 percent of their health budgets towards mental health.<sup>lxxxv</sup>



### 16. Leverage data to improve oversight and patient outcomes:

The pandemic led to delays in the implementation of Mental Health and Addictions Centre of Excellence's Data and Digital Initiative which aims to establish a centralized data repository for consistent information sharing and outcomes measurement among service providers, similar to practices in some U.S. sectors and the National Health Service in the U.K.<sup>lxxxvixxxvii</sup>



Ontario should enhance ongoing efforts to speed up the data initiative's implementation, including providing financial supports to smaller providers to help cover the expenses of transitioning to new client management systems, along with training for frontline staff to operate these systems effectively. A centralized data governance strategy and integrated back-end systems would ensure effective oversight of the mental health service delivery system and enable evidence-based funding and policy decisions.

Furthermore, there is an opportunity for the government to promote effective data sharing, with robust privacy protections in place, to improve provider and patient outcomes. This could include:

- Incorporating mental health-related data into an integrated health record to facilitate the efficient exchange of health information between patients and healthcare providers, improving access to health records, and reducing administrative burden.
- Using the data repository to identify community needs better and create targeted regional strategies and an asset map of existing supports in a region (e.g., contact information of community health service providers), which primary care providers and small businesses can easily access to coordinate timely and appropriate care.
- Granting industry access to this data, with privacy protections in place, for enhanced research and innovation opportunities.



## 17. Enhance the primary care sector's capacity to establish interprofessional care teams:

Individuals with significant mental health needs require specialized care from interdisciplinary teams. However, in Ontario, many family doctors lack access to such support. Currently, approximately 75 percent of family doctors and their patients operate without access to multidisciplinary team assistance.<sup>lxxxviii</sup> This results in unequal access to care and subpar patient outcomes. Earlier this year, the province announced funding for establishing eighteen new interprofessional primary care teams, which is a step in the right direction.<sup>lxxxix</sup> Expanding these initiatives, particularly with a mental health focus and involving professionals like social workers, nurses, and psychotherapists, can alleviate the care burden and enhance patient outcomes.<sup>xc</sup>



## 18. Develop a coordinated, evidence-based HHR strategy for Ontario that includes the mental health and addictions sector:

Building on our [advocacy letter from January 2022](#), it is recommended that the government prioritize the development of an HHR strategy aimed at fulfilling current and future healthcare requirements, with a specific emphasis on addressing the demand for mental health assistance in underserved regions like northern Ontario. This strategy could include a specific focus on harnessing

technological advancements and health innovations to alleviate the HHR burden, utilizing data to enhance healthcare services and planning, addressing immediate workforce shortages, nurturing the next generation of healthcare professionals through training and supports, and efforts to incentivise healthcare providers and specialized mental health workers to locate to underserved regions in the province.



## 19. Incentivise investments in education and training on mental health and addictions among primary care providers:

Many primary care providers lack knowledge and training in addressing mental health and addictions concerns in patients. To bridge this gap, the government should consider fostering educational and training opportunities focusing on clients' real experiences and self-identified needs, for primary care providers as part of the Ontario Health Team framework.<sup>xcii</sup> Additionally, physicians should have more chances to network and receive mentoring from mental health and substance use specialists to enhance their understanding, confidence, capacity, and comfort in dealing with these issues.<sup>xcii</sup>



## 20. Prioritize funding and incentivise private sector investment toward mental health research and innovation:

Mental health research in Canada receives less funding compared to cancer, neurological diseases, and infectious diseases.<sup>xciii</sup> While there have been improvements in provincial and federal support for mental health research in recent years and setting up dedicated institutions like The Centre for Addiction and Mental Health's Institute for Mental Health Policy Research, efforts have mostly been fragmented and reactive, often triggered by the immediate needs of the COVID-19 pandemic.<sup>xciv,xcv</sup> To position Ontario at the forefront of addressing escalating mental health challenges, a more forward-looking and sustainable funding approach is necessary. Sustainable research funding is vital for evaluating the effectiveness of emerging therapies and technologies and their applicability within Ontario (and Canada), including novel drug therapies for treatment-resistant depression, clinical trials exploring the use of

psychedelics in the treatment of psychiatric disorders, and harnessing technology and digital tools for monitoring mental health indicators.<sup>xcvi</sup>



## 21. Partner with other provinces and territories to advocate for additional mental health resources from the federal government as part of the CMHT:

The CMHT was conceptualized as a new \$4.5B federal transfer to provinces and territories to expand the delivery of accessible mental health services and solve critical backlogs in service.<sup>xcviii</sup> The initiative has been absent from successive federal budgets as well as the recently finalized federal-provincial healthcare funding agreements, which would see only a portion of increased funding go towards mental health supports. Ontario should collaborate with other provinces to urge the federal government for more funding towards mental health supports.

### DURHAM'S MENTAL HEALTH INNOVATION INCUBATOR

The Region of Durham and its eight area municipalities have announced funding to support the creation of Canada's first Mental Health Innovation Incubator at Ontario Shores Centre for Mental Health Sciences (Ontario Shores). This innovative project aims to establish a collaborative environment where clinical experts and private-sector entrepreneurs come together to co-design, develop, and scientifically assess new mental health technologies within a clinical setting. The envisioned incubator will concentrate on accelerating the adoption of mental health-related innovations, enhancing patient care, quality, and accessibility, streamlining healthcare operations, and spurring broader economic growth. It will provide a platform for direct engagement in innovation, foster new research opportunities, and create jobs in the emerging health technology sector.



## Conclusion

As Ontario's businesses continue to adjust to their post-pandemic context, a growing number of them continue to grapple with mental health challenges in the workplace. In contrast to larger organizations, Ontario SMEs have limited capacity to address workplace mental health issues in addition to encountering the ongoing economic pressures. The increased need for support services highlights a clear reality: the mental health "echo pandemic" serves as evidence that the previous state of normalcy before the pandemic is still out of reach.

Productivity decline, absenteeism, and disabilities due to mental health and addictions issues will continue to create financial strain, at a time when many small businesses are struggling to recover from the adverse

economic impacts of the pandemic. In addition, the ripple effects on Ontario's workforce and broader society from our health care system will continue to create a significant burden on the economy through increased healthcare and social service costs.

With the impacts of the "echo pandemic" lingering, and some of these more pronounced than anticipated on small business, the cost of inaction for Ontario's economic resilience, workforce and communities is clear. Mental health and addictions need to be an essential element of Ontario's legacy of post-pandemic economic investment. Partnership among SMEs, community organizations, and all levels of government is required to improve the level of care and service for those who most need it.



## Endnotes

<sup>i</sup> Statistics Canada. 2022. “Canadian Business Counts, with Employees, June 2022.” Table 33-10-0568-01 Canadian Business Counts, with employees.

<sup>ii</sup> Innovation, Science and Economic Development Canada. 2022. “Key Small Business Statistics 2022.” [https://ised-isde.canada.ca/site/sme-research-statistics/sites/default/files/attachments/2022/2022\\_key\\_small\\_business\\_statistics\\_en\\_0.pdf](https://ised-isde.canada.ca/site/sme-research-statistics/sites/default/files/attachments/2022/2022_key_small_business_statistics_en_0.pdf)

<sup>iii</sup> Canadian Federation of Independent Business. 2023. “Ontario and Quebec: Unlocking an economic corridor for SMEs.” <https://www.cfib-fcei.ca/hubfs/research/reports/2023/2023-07-on-qc-unlocking-economic-corridor-sme-en.pdf>

<sup>iv</sup> Australian Institute of Company Directors. 2023. “Mental health and well-being in SMEs.” <https://www.aicd.com.au/leadership/types/management/mental-health-and-well-being-in-smes.html#:~:text=SMEs%20face%20unique%20challenges%20when,%20being%20responsible%20for%20everything.>

<sup>v</sup> Ibid

<sup>vi</sup> Ontario Chamber of Commerce. 2023. “2023 Ontario Economic Report”. <https://occ.ca/ocr2023-2/>

<sup>vii</sup> Ibid

<sup>viii</sup> Ibid

<sup>ix</sup> Canadian Federation of Independent Business. 2022. “Research Snapshot: Two-years of COVID-19 for Canada’s Small Businesses.” <https://20336445.fs1.hubspotusercontent-na1.net/hubfs/20336445/research/2022-03-two-years-of-covid-19-for-canadas-small-businesses.pdf>

<sup>x</sup> Auger Michelle, Corinne Pohlmann. 2022. “Near the Breaking Point: Mental Health in Small Business.” Canadian Federation of Independent Business. <https://20336445.fs1.hubspotusercontent-na1.net/hubfs/20336445/research/Near-the-Breaking-Point-Mental-Health-in-Small-Business.pdf>

<sup>xi</sup> Kronfli, Catrina. 2021. “Mental Wellness in the Workplace a Playbook for Employers.” <https://occ.ca/wp-content/uploads/Mental-Wellness-in-the-Workplace-Employers.pdf>

<sup>xii</sup> Microsoft. 2020. “The Next Great Disruption Is Hybrid Work – Are We Ready?” <https://www.microsoft.com/en-us/worklab/work-trend-index/hybrid-work>

<sup>xiii</sup> Auger Michelle, Corinne Pohlmann. 2022. “Near the Breaking Point: Mental Health in Small Business.” Canadian Federation of Independent Business. <https://20336445.fs1.hubspotusercontent-na1.net/hubfs/20336445/research/Near-the-Breaking-Point-Mental-Health-in-Small-Business.pdf>

<sup>xiv</sup> Ibid

<sup>xv</sup> Financial Accountability Office of Ontario. 2021. “Ontario’s Labour Market in 2020.” <https://www.fao-on.org/en/Blog/Publications/labour-market-2021>

<sup>xvi</sup> Auger Michelle, Corinne Pohlmann. 2022. “Near the Breaking Point: Mental Health in Small Business.” <https://20336445.fs1.hubspotusercontent-na1.net/hubfs/20336445/research/Near-the-Breaking-Point-Mental-Health-in-Small-Business.pdf>

<sup>xvii</sup> Canadian Federation of Independent Business. 2022. “Reporting on the State of Small Business: Key Survey Results from CFIB’s Monthly Omnibus Your Voice Survey.” <https://20336445.fs1.hubspotusercontent-na1.net/hubfs/20336445/research/reports/2022-02-your-voice-survey-key-results.pdf>

<sup>xviii</sup> Auger Michelle, Corinne Pohlmann. 2022. “Near the Breaking Point: Mental Health in Small Business.” Canadian Federation of Independent Business. <https://20336445.fs1.hubspotusercontent-na1.net/hubfs/20336445/research/Near-the-Breaking-Point-Mental-Health-in-Small-Business.pdf>

<sup>xix</sup> Bloom, Nicholas. 2021. “Hybrid Is the Future of Work | Stanford Institute for Economic Policy Research (SIEPR).” [siepr.stanford.edu. https://siepr.stanford.edu/publications/policy-brief/hybrid-future-work.](https://siepr.stanford.edu/publications/policy-brief/hybrid-future-work)

<sup>xx</sup> MacFarlane, Sarah. 2023. “Feds Giving Little Indication They Will Extend CEBA Repayment Deadline – Ottawa Business Journal.” <https://obj.ca/feds-little-indication-they-will-extend-ceba-deadline/>

<sup>xxi</sup> Wood, Johnny, Ian Shine, 2022. “Right to Disconnect: The Countries Passing Laws to Stop Employees Working out of Hours.” World Economic Forum. [https://www.weforum.org/agenda/2023/02/belgium-right-to-disconnect-from-work/.](https://www.weforum.org/agenda/2023/02/belgium-right-to-disconnect-from-work/)

<sup>xxii</sup> Government of Ontario. 2022. “Written Policy on Disconnecting from Work.” <https://www.ontario.ca/document/your-guide-employment-standards-act-0/written-policy-disconnecting-from-work>

<sup>xxiii</sup> Centre for Addiction and Mental Health. 2020. “Review of Workplace Mental Health a Review and Recommendations.” [https://www.camh.ca/-/media/files/workplace-mental-health/workplacentalhealth-a-review-and-recommendations-pdf.pdf.](https://www.camh.ca/-/media/files/workplace-mental-health/workplacentalhealth-a-review-and-recommendations-pdf.pdf)

<sup>xxiv</sup> Morawczynski, Dr. Olga, and Dr. Jessica Roberts. 2023. “Improving Quality of Work in Canada: Prioritizing Mental Health with Diverse and Inclusive Benefits.” Future Skills Centre. [https://fsc-ccf.ca/wp-content/uploads/2023/06/Final\\_Bounce3\\_QOW\\_1.pdf.](https://fsc-ccf.ca/wp-content/uploads/2023/06/Final_Bounce3_QOW_1.pdf)

<sup>xxv</sup> Centre for Addiction and Mental Health. 2020. “Review of Workplace Mental Health a Review and Recommendations.” [https://www.camh.ca/-/media/files/workplace-mental-health/workplacentalhealth-a-review-and-recommendations-pdf.pdf.](https://www.camh.ca/-/media/files/workplace-mental-health/workplacentalhealth-a-review-and-recommendations-pdf.pdf)

<sup>xxvi</sup> Conference Board of Canada and the Mental Health Commission of Canada. 2020. “COVID-19 impact on mental health and how employees are coping.” <https://www.conferenceboard.ca/in-fact/how-has-covid-19-impacted-canadians-mental-health/>



- <sup>xxvii</sup> Auger Michelle, Corinne Pohlmann. 2022. “Near the Breaking Point: Mental Health in Small Business.” Canadian Federation of Independent Business. <https://20336445.fs1.hubspotusercontent-na1.net/hubfs/20336445/research/Near-the-Breaking-Point-Mental-Health-in-Small-Business.pdf>.
- <sup>xxviii</sup> Government of Ontario. 2020. “Roadmap to Wellness: A Plan to Build Ontario’s Mental Health and Addictions System.” <https://www.ontario.ca/page/roadmap-wellness-plan-build-ontarios-mental-health-and-addictions-system>
- <sup>xxix</sup> Government of Ontario. 2022. “Consultation: Portable benefits program.” <https://www.ontario.ca/page/consultationhttps://www.ontario.ca/page/consultation--portableportable--benefitsbenefits--programprogram>
- <sup>xxx</sup> Internal Revenue Service. Internal Revenue Service. 2023. “Small Business Health Care Tax Credit and the SHOP Marketplace.” <https://www.irs.gov/affordable-care-act/employers/small-business-health-care-tax-credit-and-the-shop-marketplace>
- <sup>xxxi</sup> Canadian Federation of Independent Business. 2020. “Ontario small business COVID-19 debt almost \$50B.” <https://www.cfib-fcei.ca/en/media/news-releases/ontario-small-business-covid-19-debt-almost-50b>
- <sup>xxxii</sup> Canadian Federation of Independent Business. 2023. “Not good enough: CFIB statement on CEBA extension.” <https://www.cfib-fcei.ca/en/media/cfib-statement-on-ceba-extension>
- <sup>xxxiii</sup> CTV News. 2023. “Businesses across Canada Plead with the Finance Minister to Extend Emergency Loan Repayment Deadline.” <https://www.ctvnews.ca/politics/businesses-across-canada-plead-with-finance-minister-to-extend-emergency-loan-repayment-deadline-1.6491670#:~:text=RELATED%20LINKS&text=Open%20for%20applications%20between%20April,%2449.2%20billion%20in%20federal%20assistance.>
- <sup>xxxiv</sup> Canadian Federation of Independent Business. 2023. “Not good enough: CFIB statement on CEBA extension.” <https://www.cfib-fcei.ca/en/media/cfib-statement-on-ceba-extension>
- <sup>xxxv</sup> Government of Canada. 2022. “Gender-based Analysis Plus (GBA Plus).” <https://women-gender-equality.canada.ca/en/gender-based-analysis-plus/what-gender-based-analysis-plus.html>
- <sup>xxxvi</sup> Benji, Jocelyn, Gemma Tomasky, Kai Kaufman, and Rosalin Miles. 2021. “Impacts of COVID-19 on Indigenous Communities in Canada.” *The Health & Fitness Journal of Canada* 14 (4): 22–34. <https://doi.org/10.14288/hfjc.v14i4.358>.
- <sup>xxxvii</sup> Statistics Canada. 2020. “Indigenous People and Mental Health during the COVID-19 Pandemic.” <https://www150.statcan.gc.ca/n1/pub/45-28-0001/2020001/article/00035-eng.htm>
- <sup>xxxviii</sup> Ontario Federation of Indigenous Friendship Centres. 2022. “OFIFC’s Report on the Mental Health and Addictions Environmental Scan 2022.” <https://ofifc.org/wp-content/uploads/2020/03/2023-05-16-MHA-Environmental-Scan-Submission.pdf>
- <sup>xxxix</sup> Canadian Mental Health Association. 2020. “COVID-19 effects on the mental health of vulnerable populations.” [https://cmha.ca/wp-content/uploads/2020/12/EN\\_UBC-CMHA-COVID19-Report-FINAL.pdf](https://cmha.ca/wp-content/uploads/2020/12/EN_UBC-CMHA-COVID19-Report-FINAL.pdf)
- <sup>xl</sup> Law, Sarah. 2023. “Staggering mental health, addiction starts push northern First Nations to call for emergency declaration.” <https://www.cbc.ca/news/canada/thunder-bay/first-nations-mental-health-addictions-1.6959555>
- <sup>xli</sup> Catrina Kronfli. 2020. “Small Business, Big Impact – How SMEs are Pivoting During COVID-19.” <https://occ.ca/wp-content/uploads/SME-Report-June22.pdf>
- <sup>xlii</sup> Ibid
- <sup>xliii</sup> Statistics Canada. 2020. “Canadians’ mental health during the COVID-19 pandemic.” <https://www150.statcan.gc.ca/n1/daily-quotidien/200527/dq200527b-eng.htm>
- <sup>xliv</sup> Hammerstein, Svenja, Christoph König, Thomas Dreisörner, and Andreas Frey. 2021. “Effects of COVID-19-Related School Closures on Student Achievement—A Systematic Review.” *Frontiers in Psychology* 12 (September). <https://doi.org/10.3389/fpsyg.2021.746289>.
- <sup>xlv</sup> Whitley, Jess, Miriam H. Beauchamp, and Curtis Brown. 2021. “The Impact of COVID-19 on the Learning and Achievement of Vulnerable Canadian Children and Youth.” Edited by Jules M. Blais. *FACETS* 6 (1): 1693–1713. <https://doi.org/10.1139/facets-2021-0096>.
- <sup>xlvi</sup> Toronto Public Health. 2023. “Addressing Pandemic Health Impacts on Children and Youth.” <https://www.toronto.ca/legdocs/mmis/2023/hl/blgrd/backgroundfile-239143.pdf>
- <sup>xlvii</sup> United Nations. 2020. “Protecting and mobilizing youth in COVID-19 responses.” <https://www.un.org/development/desa/youth/news/2020/05/covid-19/>
- <sup>xlviii</sup> Children’s Mental Health Ontario & Ontario Centre of Excellence for Child and Youth Mental Health. 2020. “Potential impacts of COVID-19 on child and youth mental health: Considerations for service planning during and post-pandemic.” [https://www.cymha.ca/en/projects/resources/covid-19/covid-19\\_pandemic\\_impacts\\_on\\_child\\_and\\_youth\\_mental\\_health\\_wcag.pdf](https://www.cymha.ca/en/projects/resources/covid-19/covid-19_pandemic_impacts_on_child_and_youth_mental_health_wcag.pdf)
- <sup>xlix</sup> Centre for Addiction and Mental Health. 2022. “Youth Wellness Hubs Ontario (YWHO) receives funding for eight new hubs across Ontario.” <https://www.camh.ca/en/camh-news-and-stories/youth-wellness-hubs-ontario-receives-funding-for-eight-new-hubs-across-ontario>
- <sup>l</sup> Friesen, Erik L., Paul A. Kurdyak, Tara Gomes, Gillian Kolla, Pamela Leece, Lynn Zhu, Elaine Toombs, et al. 2021. “The Impact of the COVID-19 Pandemic on Opioid-Related Harm in Ontario.” Ontario COVID-19 Science Advisory Table and Mental Health Working Group. <https://doi.org/10.47326/ocsat.2021.02.42.1.0>.
- <sup>li</sup> Ibid
- <sup>lii</sup> Ibid



<sup>liii</sup> Gomes, T., Gillian Kolla, Pamela Leece, S. Bansal, J. Besharah, T. Cahill, T. Campbell, A. Fritz, C. Munro, L. Toner, K. Watford, et al. 2021. "Changing Circumstances Surrounding Opioid-Related Deaths in Ontario during the COVID-19 Pandemic." Ontario Drug Policy Research Network, Office of the Chief Coroner for Ontario/ Ontario Forensic Pathology Service and Public Health Ontario. <https://www.publichealthontario.ca/-/media/documents/c/2021/changing-circumstances-surrounding-opioid-related-deaths.pdf?la=en>

<sup>liv</sup> York, Mike, Cristina Selva. 2021. "Industry Perspectives Op-Ed: Mental health in the construction industry – the silent crisis." <https://canada.constructconnect.com/dcn/news/ohs/2021/04/industry-perspectives-op-ed-mental-health-in-the-construction-industry-the-silent-crisis>

<sup>lv</sup> Gismondi, A. 2021. "Pandemic a factor in increased substance use among construction industry workers." <https://canada.constructconnect.com/dcn/news/ohs/2021/09/pandemic-a-factor-in-increased-substance-use-among-construction-industry-workers>

<sup>lvi</sup> Addictions and Mental Health Ontario. 2020. "Together We Can: Investing in Addiction and Mental Health Services in Ontario." [https://amho.ca/wp-content/uploads/AMHO\\_BudgetSubmission\\_Feb2020\\_FINAL.pdf](https://amho.ca/wp-content/uploads/AMHO_BudgetSubmission_Feb2020_FINAL.pdf)

<sup>lvii</sup> Organization for Economic Co-operation and Development. 2021. "A New Benchmark for Mental Health Systems: Tackling the Social and Economic Costs of Mental Ill-Health." <https://www.oecd-ilibrary.org/sites/f4382439-en/index.html?itemId=/content/component/f4382439-en> <sup>lviii</sup> Government of Ontario. 2021.

"Mental health and addiction services for Indigenous individuals and families." <https://www.ontario.ca/page/mental-health-and-addiction-services-Indigenous-individuals-and-families#section-1>

<sup>lix</sup> Addictions and Mental Health Ontario. 2017. "Supportive Housing: Recommendations for the Provision of Support Services." [https://amho.ca/wp-content/uploads/AMHO-Supportive-Housing-Report\\_Web-final\\_April-6.pdf](https://amho.ca/wp-content/uploads/AMHO-Supportive-Housing-Report_Web-final_April-6.pdf)

<sup>lx</sup> Statistics Canada. 2014. "Mental Health Indicators." Table 13-10-0465-01 Mental health indicators

<sup>lxi</sup> Canadian Mental Health Association. 2023. "CMHA Ontario Pre-Budget Submission." <https://ontario.cmha.ca/wp-content/uploads/2019/12/CMHA-Ontario-PreBudget-Submission-2023-FINAL-DIGITAL.pdf>

<sup>lxii</sup> Centre for Addictions and Mental Health. 2018. "The Crisis is Real." <https://www.camh.ca/en/driving-change/the-crisis-is-real>

<sup>lxiii</sup> Addictions and Mental Health Ontario. 2023. "No Time to Wait." [https://amho.ca/wp-content/uploads/AMHO\\_2023\\_BudgetSubmission.pdf](https://amho.ca/wp-content/uploads/AMHO_2023_BudgetSubmission.pdf)

<sup>lxiv</sup> Recreated from Finance Accountability Office of Ontario. 2023. "Ontario Health Sector: 2023 Budget Spending Plan Review." <https://www.fao-on.org/en/Blog/Publications/health-update-2023>.

<sup>lxv</sup> Addictions and Mental Health Ontario. 2023. "No Time to Wait." [https://amho.ca/wp-content/uploads/AMHO\\_2023\\_BudgetSubmission.pdf](https://amho.ca/wp-content/uploads/AMHO_2023_BudgetSubmission.pdf)

<sup>lxvi</sup> Ontario Psychiatric Association. 2018 "Help Wanted: Ontario psychiatry shortage contributing to Canada's mental health crisis." <https://eopa.ca/sites/default/uploads/files/Ontario%20Needs%20Psychiatrists%20FINAL%20-%20August%207%2C%202018.pdf>

<sup>lxvii</sup> Sylvia Roy Contributors, Karen Milligan. 2020. "Ontario has an opportunity to radically change mental health support." [https://www.thestar.com/opinion/contributors/ontario-has-an-opportunity-to-radically-change-mental-health-support/article\\_a3230735-953f-587c-9b30-0b10ce85ac94.html](https://www.thestar.com/opinion/contributors/ontario-has-an-opportunity-to-radically-change-mental-health-support/article_a3230735-953f-587c-9b30-0b10ce85ac94.html)

<sup>lxviii</sup> Anderssen, Erin. 2022. "Half of Canadians have too few local psychiatrists, or none at all. How can we mend the mental health gap?" [https://www.theglobeandmail.com/canada/article-half-of-canadians-have-too-few-local-psychiatrists-or-none-at-all/?gad=1&gclid=Cj0KCQjw6KunBhDxARIsAKFUGs9yxivHbPPA5ruShLsn80h1mFIUbgmkmc2UP6t5B3S163aaLwfIgaAsKyEALw\\_wcB](https://www.theglobeandmail.com/canada/article-half-of-canadians-have-too-few-local-psychiatrists-or-none-at-all/?gad=1&gclid=Cj0KCQjw6KunBhDxARIsAKFUGs9yxivHbPPA5ruShLsn80h1mFIUbgmkmc2UP6t5B3S163aaLwfIgaAsKyEALw_wcB)

<sup>lxix</sup> Ibid

<sup>lxx</sup> Government of Ontario. 2020. "Roadmap to Wellness: A Plan to Build Ontario's Mental Health and Addictions System." <https://www.ontario.ca/page/roadmap-wellness-plan-build-ontarios-mental-health-and-addictions-system>

<sup>lxxi</sup> College of Family Physicians of Canada, Canadian Psychiatric Association, and Canadian Psychological Association. 2020. "Integrating Mental Health Services in Primary Care." <https://www.cfpc.ca/CFPC/media/PDF/IPC-Mental-Health-Report-2020-Final.pdf>

<sup>lxxii</sup> Ibid

<sup>lxxiii</sup> Strata Health. 2023. "Demand for Psychological Services Grew Over 50% In 2020 as Ontarians Increasingly Turn to Privately Delivered Care for Help." <https://stratahealth.com/news/demand-for-psychological-services-grew-over-50-in-2022-as-ontarians-increasingly-turn-to-privately-delivered-care-for-help/>

<sup>lxxiv</sup> Addictions and Mental Health Ontario. 2023. "No Time to Wait." [https://amho.ca/wp-content/uploads/AMHO\\_2023\\_BudgetSubmission.pdf](https://amho.ca/wp-content/uploads/AMHO_2023_BudgetSubmission.pdf)

<sup>lxxv</sup> Addictions and Mental Health Ontario. 2023. "No Time to Wait." [https://amho.ca/wp-content/uploads/AMHO\\_2023\\_BudgetSubmission.pdf](https://amho.ca/wp-content/uploads/AMHO_2023_BudgetSubmission.pdf)

<sup>lxxvi</sup> Canadian Mental Health Association. 2022. "1 in 4 Ontarians access mental health help - the highest rate during the pandemic." <https://ontario.cmha.ca/news/1-in-4-ontarians-access-mental-health-help-the-highest-rate-during-the-pandemic/#:~:text=The%20survey%20by%20Canadian%20Mental,cent%20almost%20two%20years%20ago.>

<sup>lxxvii</sup> Ontario Medical Association. 2022. "Physicians Burnout." [https://www.oma.org/advocacy/physician-burnout/?gclid=CjwKCAjw69moBhBgEiwAUFCx2C081NdfMndf\\_gfBaF\\_vJgKrrTqYdXuujGA3IgT9GIxgQoIU0o\\_RTGB0C5gYQAvD\\_BwE](https://www.oma.org/advocacy/physician-burnout/?gclid=CjwKCAjw69moBhBgEiwAUFCx2C081NdfMndf_gfBaF_vJgKrrTqYdXuujGA3IgT9GIxgQoIU0o_RTGB0C5gYQAvD_BwE)



<sup>lxxviii</sup> Canadian Mental Health Association. 2023. “CMHA Ontario Pre-Budget Submission.” <https://ontario.cmha.ca/wp-content/uploads/2019/12/CMHA-Ontario-PreBudget-Submission-2023-FINAL-DIGITAL.pdf>.

<sup>lxxix</sup> Canadian Medical Association. 2022. “Physician Wellness: New 2021 National Physician Health Survey findings – burnout, short-staffing and an overburdened system take their toll.” <https://www.cma.ca/physician-wellness-hub/content/physician-wellness-new-2021-national-physician-health-survey>

<sup>lxxx</sup> Centre for Addiction and Mental Health. 2023. “Ontario Structured Psychotherapy (OSP) Program.” <https://www.camh.ca/en/your-care/programs-and-services/ontario-structured-psychotherapy-osp-program>

<sup>lxxxi</sup> Rolph, Dan. 2023. “Mobile mental health clinic coming to Huron-Bruce and Perth-Wellington.” <https://www.lakeshoreadvance.com/news/mobile-mental-health-clinic-coming-to-huron-bruce-and-perth-wellington>

<sup>lxxxii</sup> Government of Ontario. 2021. “Ontario Investing in New Mobile Mental Health and Addictions Clinic in Haldimand-Norfolk and Niagara.” <https://news.ontario.ca/en/release/1001115/ontario-investing-in-new-mobile-mental-health-and-addictions-clinic-in-haldimand-norfolk-and-niagara>

<sup>lxxxiii</sup> Ontario Newsroom. 2022. “Ontario Launches New Addictions Recovery Fund.” <https://news.ontario.ca/en/release/1001596/ontario-launches-new-addictions-recovery-fund>

<sup>lxxxiv</sup> Finance Accountability Office of Ontario. 2023. “Ontario Health Sector: 2023 Budget Spending Plan Review.” <https://www.fao-on.org/en/Blog/Publications/health-update-2023>.

<sup>lxxxv</sup> Centre for Addiction and Mental Health. 2022. “CMHA Ontario Pre-Budget Submission 2022.” <https://ontario.cmha.ca/wp-content/uploads/2019/12/CMHA-PreBudget-Submission-2022v2-final-1.pdf>

<sup>lxxxvi</sup> Mark, Tami L. 2023. “The United states must improve its data infrastructure to ensure high-quality mental health care.” *Frontiers in Health Service*. <https://doi.org/10.3389/frhs.2023.1059049>

<sup>lxxxvii</sup> NHS Digital. 2023. “Mental Health Services Data Set (MHSDS).” <https://digital.nhs.uk/data-and-information/data-collections-and-data-sets/data-sets/mental-health-services-data-set>

<sup>lxxxviii</sup> Ontario College of Family Physicians. 2022. “2022 Advocacy Campaign: Policy Solutions Backgrounder.” <https://lifewithoutadoctor.ca/policy.pdf>.

<sup>lxxxix</sup> Government of Ontario. 2023. “Your Health: A Plan for Connected and Convenient Care.” <https://www.ontario.ca/page/your-health-plan-connected-and-convenient-care>.

<sup>xc</sup> De Sutter, Marieke, An De Sutter, Nora Sundahl, Tom Declercq, and Peter Decat. 2019. “Inter-Professional Collaboration Reduces the Burden of Caring for Patients with Mental Illnesses in Primary Healthcare. A Realist Evaluation Study.” *European Journal*

of General Practice 25 (4): 1–7. <https://doi.org/10.1080/13814788.2019.1640209>.

<sup>xcii</sup> Centre for Addiction and Mental Health. 2016. “Access to Primary Care.” [https://www.camh.ca/-/media/files/atpc-cr-recommendations\\_september\\_16-pdf.pdf](https://www.camh.ca/-/media/files/atpc-cr-recommendations_september_16-pdf.pdf)

<sup>xciii</sup> Ibid

<sup>xciiii</sup> Woelbert, Eva, Rory White, Kierstin Lundell-Smith, Jonathan Grant, and Danielle Kemmer. 2020. “The Inequities of Mental Health Research (IAMHRF).” *DigitalScience*. figshare.com. [https://digitalscience.figshare.com/articles/report/The\\_Inequities\\_of\\_Mental\\_Health\\_Research\\_IAMHRF\\_/13055897](https://digitalscience.figshare.com/articles/report/The_Inequities_of_Mental_Health_Research_IAMHRF_/13055897).

<sup>xcv</sup> Government of Canada. 2020. “Backgrounder: Mental Health Promotion Innovation Fund.” <https://www.canada.ca/en/public-health/news/2020/09/backgrounder-mental-health-promotion-innovation-fund.html>.

<sup>xcvi</sup> Ontario Newsroom. 2020. “Ontario Expanding Innovation Mental Health and Addictions Services.” <https://news.ontario.ca/en/release/58333/ontario-expanding-innovative-mental-health-and-addictions-services>.

<sup>xcvii</sup> World Economic Forum. 2021. “These are the top 10 innovations in mental health.” <https://www.weforum.org/agenda/2021/09/these-are-the-top-10-innovations-tackling-mental-ill-health/>.

<sup>xcviii</sup> Invest Durham. 2021. “Durham Region Supporting Ontario Shores’ Mental Health Innovation Incubator.” <https://www.durham.ca/en/economic-development/news/durham-region-supporting-ontario-shores-mental-health-innovation-incubator.aspx>

<sup>xcix</sup> Racycraft, Richard. 2023. “Canada falling short on mental health despite government efforts, advocates say.” <https://www.cbc.ca/news/politics/canada-mental-health-federal-government-1.6761689>



 [ontchamberofcommerce](https://www.facebook.com/ontchamberofcommerce)

 [@OntarioCofC](https://twitter.com/OntarioCofC)

 [company/ontario-chamber-of-commerce](https://www.linkedin.com/company/ontario-chamber-of-commerce)

 [www.occ.ca](http://www.occ.ca)

ISBN: 978-1-928052-94-4

© 2023. Ontario Chamber of Commerce. All rights reserved.

Design: Arsheen Virani, Junior Designer, Ontario Chamber of Commerce