Submission to the Ontario Human Rights Commission on the Human Rights and Mental Health Research and Policy Consultation Paper

The Ontario Secondary School Teachers’ Federation is pleased to provide its comments to the Ontario Human Rights Commission Consultation on Human Rights and Mental Health Research and Policy.

OSSTF/FEESO is a trade union which represents over 60,000 members across the province of Ontario. The union works to protect our diverse membership which is represented in over 140 bargaining units across the province. OSSTF/FEESO bargaining units represent both English and French members in public and separate elementary and secondary school workplaces, private schools and consortia, offering support services to school boards and universities.

OSSTF/FEESO’s comments reflect our members direct experiences with employers, and also those observed by our members in their educational roles. This submission will provide information from both the perspectives of members who themselves are discriminated against as well as the perspectives of members who have viewed discrimination against children, youth and their families.

**What types of discrimination happen based upon mental health disabilities and/or addictions in the areas of housing, services and employment?**

OSSTF/FEESO has voiced concerns on behalf of the well-being of our students. In recent years, our commitment to meet all of their needs has been repeatedly recognized and addressed through initiatives such as our Student Success Plan—which offered a strategic plan to make every student a successful student. OSSTF/FEESO recognizes the importance of having a plan to ensure that all students reach their potential, that all students have what they need to succeed and that all students are offered the right curriculum. First launched in 2002, it was one of many attempts to find ways to best meet any student’s needs.

In 2008, OSSTF/FEESO released *Enhancing Services: Enhancing Success*. This research report, conducted by independent researchers highlighted the critical elements of a best practice model for the delivery of professional and paraprofessional support services in Ontario schools. Student need should determine the range of services that boards must provide. When it comes to the mental health of children and youth, there has been little Ministry direction as to what kind of services should be provided. According to the 2008 Auditor General’s Annual Report, children and youth are provided with “a patchwork of services”.

A student who is diagnosed with cancer or diabetes has ready access to the medical and support services necessary to help treat the illness. Not only is the child or youth provided with such services, but family members also have access to appropriate resources. A student who is suffering from
mental illness often waits for months or years for a diagnosis or in worst cases, goes undiagnosed completely. The most tragic examples result in attempted or completed suicide. Those who finally do find a resource, then face the discontinuation of services upon reaching eighteen years of age. Such systemic discrimination of children and youth suffering mental illness or addictions occurs daily.

Due to the lack of proper resources to assess and treat such students, the education system often faces the unfortunate need to deny students who present a threat, either to themselves or others, access to schools. Other students who suffer from untreated school phobias, undiagnosed depression or psychosis are unable or unwilling to attend on a regular basis.

Of particular importance to OSSTF/FEESO members are the systemic practices carried out by employers. Many employers regularly attempt to have individuals sign letters of consent allowing for full disclosure from physicians. Forms frequently ask for information about “nervous disorders”, which our members, sometimes in a weakened or uninformed state, sign. Employers then sometimes use the information in punitive ways.

Long Term Disability providers generally deny claims based upon mental health concerns, forcing members to go through lengthy and difficult appeals. This unnecessary process often further negatively impacts our members’ mental health and well being.

Are there laws, policies, procedures or systemic practices related to housing, employment or services that disproportionately disadvantage people with mental health issues and/or addictions?

In addition to points identified earlier, access to quality service to support those suffering from mental health and addiction is particularly difficult on the basis of geography. Such inequity has not been addressed for children, youth or adults in Ontario and is the focus of a ten year long term strategy for the Ministry of Health. However, thousands are waiting for easier access to improved services.

Services for children and youth are not mandated in Ontario. Without a clear policy directive, communities have inconsistent approaches to address mental health concerns. Consequently, people who suffer with mental health and/or addiction problems go untreated. When their behavior violates societal norms, they are often dealt with through the legal system, which has few standardized resources for those suffering mental illness. Some children’s mental health agencies have recently established protocols with court services but these resources again are insufficient to meet existing need.

Other marginalized groups who are impacted more so than the regular population are First Nations, single mothers and those with child welfare involvement. Judgmental attitudes about those with mental health concerns are often magnified for groups such as these.
What information do housing, service providers and employers need to help protect the rights of people with mental health disabilities and/or addictions?

In general, the entire population would benefit from a better understanding of the rights of people with mental health disabilities and/or addictions. However, those providing necessities such as housing particularly need to understand that the Human Rights Code provides protections to individuals suffering from such disabilities. In addition, it would be beneficial for such providers to not only better understand mental health issues but also the support networks that are sometimes involved to support diagnosed individuals.

Employers should be encouraged to develop practices that are respectful of an individual’s right to privacy, particularly where medical information is involved. Most staff, particularly those in the role of human resources personnel, are in need of training that would help them understand mental health disabilities and addictions. Information is also needed that would address the daily ridicule that many individuals suffer through inappropriate remarks, jokes, labels or prejudice.

What can the Ontario Human Rights Commission and other bodies do to raise public awareness to prevent and address these human rights violations?

The following recommendations are offered for consideration:

- Within the education sector, the designation of a professional development day for teachers and educational workers about mental health disabilities and addictions;
- Within the education sector, the inclusion of mental health initiatives as part of the Healthy Schools initiatives;
- The development of Public Service Announcements;
- The creation and distribution of power point presentations that could be made available to assist in the education of staff;
- The creation of a Speakers’ Bureau that would provide the names of individuals approved to deliver the message about the human rights of individuals with disabilities related to mental health and addictions;
- The sharing of tools and resources that currently exist and are available at little or no cost.

The implementation of such recommendations would have a broad impact, not only upon school boards and educational institutions, but also upon the general population. Such information and action would be beneficial to those waiting for the development of the promised long term strategy in the Province of Ontario.

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