

Minister of Health



Ministre de la Santé

Ottawa, Canada K1A 0K9

Mr. Eric Janse  
Acting Clerk of the House of Commons  
West Block, Room 233-C  
House of Commons  
Ottawa ON K1A 0A6

Dear Mr. Eric Janse:

I have the honour to present the Response of the Government of Canada to the Sixth Report of the Standing Committee on the Status of Women, entitled "A Step-by-Step Approach to Supporting the Mental Health of Young Women and Girls in Canada".

Pursuant to Standing Order 109, you will find enclosed, two copies, in both official languages, for tabling in the House of Commons.

Yours sincerely,

A handwritten signature in black ink, appearing to read "Ya'ara Saks".

The Honourable Ya'ara Saks, P.C., M.P.

Enclosed

Minister of Mental Health  
and Addictions and Associate  
Minister of Health



Ministre de la Santé mentale  
et des Dépendances et  
ministre associée de la Santé

Ottawa, Canada K1A 0K9

Ms. Karen Vecchio, M.P.  
Chair, Standing Committee on the Status of Women  
House of Commons  
Ottawa, Ontario  
K1A 0A6

Dear Ms. Vecchio,

Pursuant to Standing Order 109 of the House of Commons, I am pleased to respond on behalf of the Government of Canada to the sixth report of the Standing Committee on the Status of Women, entitled “Step-by-Step Approach to Supporting the Mental Health of Young Women and Girls in Canada”, which was tabled in the House of Commons on March 31, 2023.

The Government recognizes the importance of supporting the mental health of young women and girls. As the Minister of Mental Health and Addictions, I have the privilege of speaking with individuals in Canada from coast to coast to coast to learn more about their diverse perspectives and needs when it comes to mental health and substance use. We know that to support the wellbeing of individuals, it is critical to examine the root causes of mental health and substance use issues.

I commend the Committee for delivering a comprehensive report that acknowledges the complex, intersecting factors that contribute to mental health, and how specific populations, such as equity-deserving groups, face disparities in mental health and access to care. Young women and girls face unique mental health challenges. In addition, we know that age has an important relationship to mental health, and that most mental health challenges begin in adolescence. That is why the Government is prioritizing the mental health of children and youth, to help young people receive timely access to the quality care they need and deserve, when and where they require it. As such, we are working closely with provinces, territories, Indigenous partners and other stakeholders to improve access to child and youth mental health care, including for young women and girls. For example, we are making significant investments to expand the availability of Integrated Youth Services hubs across Canada, which are “one-stop shops” of integrated supports in the community that include supports for mental health and substance use.

The Government is supportive of the intent of the Report and its recommendations, which will require continued collaboration across sectors and governments. The government response, which spans the mandates of several departments and agencies, highlights significant federal investments that aim to address the objectives of the recommendations. For example, young women and girls are prioritized in key government strategies, such as the Federal Strategy to Prevent and Address Gender-Based Violence, Federal 2SLGBTQI+ Action Plan, and National Housing Strategy, to ensure their needs are considered across a broad range of federal initiatives. In addition, the Government continues to make significant investments in provinces and territories to improve equitable access to quality services for individuals in Canada, including young women and girls. Through *Working Together to Improve Health Care for Canadians*, the Government will increase long-term health funding to provinces and territories by more than \$198 billion over 10 years. This includes \$25 billion over 10 years through tailored bilateral agreements that target four areas of shared priority, one of which is mental health and substance use. Together, these initiatives demonstrate the Government's commitment to supporting the mental health of young women and girls.

I would like to thank the Committee for their work, and for the thoughtful consideration with which they examined the issue of the mental health of young women and girls in Canada. I extend my gratitude to the members of the Committee and the many witnesses who provided testimony of their valuable and diverse perspectives that are captured in the Report.

Sincerely,



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Minister of Mental Health and Addictions and Associate Minister of Health

Minister of Mental Health  
and Addictions and Associate  
Minister of Health



Ministre de la Santé mentale  
et des Dépendances et  
ministre associée de la Santé

Ottawa, Canada K1A 0K9

**GOVERNMENT RESPONSE TO THE SIXTH REPORT OF THE STANDING COMMITTEE ON THE STATUS OF WOMEN, ENTITLED: “STEP-BY-STEP APPROACH TO SUPPORTING THE MENTAL HEALTH OF YOUNG WOMEN AND GIRLS IN CANADA”**

Pursuant to its mandate under Standing Order 108(2), the Standing Committee on the Status of Women (the Committee) conducted a study exploring the factors affecting the mental health of young women and girls. On March 31, 2023, the Committee tabled a report, entitled “Step-By-Step Approach to Supporting the Mental Health of Young Women and Girls in Canada” (the Report).

The Report made 18 recommendations that broadly address data collection and research, prevention services, online harms, improving education, funding for community organizations and health services, and tailoring services to meet the needs of diverse populations. The recommendations address the complex, intersecting factors that are associated with the mental health of young women and girls, which span many interrelated sectors and social determinants of health.

The Government is pleased to present you with the government response (the response) to the Report. In order to deliver a comprehensive response that addresses the complex, intersecting factors that impact the mental health of young women and girls, the response spans the mandates of Health Canada, Public Health Agency of Canada (PHAC), Canadian Institutes of Health Research (CIHR), Statistics Canada, Canadian Institute of Health Information (CIHI), Women and Gender Equality Canada (WAGE), Canadian Heritage, Public Safety Canada, Department of Justice, Employment and Social Development Canada (ESDC), Innovation, Science and Economic Development Canada (ISED), Canada Mortgage and Housing Corporation (CMHC), Agriculture and Agri-Food Canada (AAFC), Crown-Indigenous Relations and Northern Affairs Canada (CIRNAC), and Indigenous Services Canada (ISC).

The Government is committed to supporting the mental health of young women and girls, including individuals from equity-deserving populations in alignment with the Federal 2SLGBTQI+ Action Plan. The Government is supportive of the intent of the Report and its recommendations, which will require continued collaboration across sectors and orders of government. That is why the Government is working together to improve access to mental health and substance use services with Indigenous partners as well as provinces and territories who have jurisdiction over health and social services for their residents, including the regulation of healthcare workers, teachers, community service providers, and other professionals.

To appropriately capture the significant federal investments that address the objectives of the recommendations, the response is organized according to the following priorities:

- *Enhancing Data and Research*
- *Addressing the Social Determinants of Health*
- *Working Collaboratively to Improve Access to Health Services*
- *Resources, Training and Education for Health Professionals*
- *Supporting Indigenous Peoples*

While each recommendation is linked to and primarily addressed under a single priority, content within individual priorities may apply to recommendations that are linked to other priorities.

### ***Enhancing Data and Research (Recommendations 1 and 2)***

The Report notes that for many mental health conditions, there are complex, interrelated social factors that contribute to mental health and that data reflecting specific groups is needed to tailor recommendations and supports. The Government agrees that disaggregation of data is pivotal to understanding and responding to mental health concerns among diverse population groups, and that this information can be obtained through the application of SGBA Plus analyses and frameworks. Throughout the Health Portfolio, stratified analyses by socio-demographic and socio-economic factors are performed to aid in the understanding of how intersecting factors contribute to differences in health outcomes and the accession of resources.

The Committee recommended that the Government support improvements in national mental health data, to strengthen the capacity to understand the mental health issues faced by specific populations. The Government is supportive of **Recommendation 1** and agrees that further work is required and will ensure that existing investments support the improvement of national mental health information that can be disaggregated, while respecting the ownership of healthcare administrative data by appropriate jurisdictions, and the privacy of individuals that data pertain to.

Through its existing surveys, such as the 2022 Mental Health and Access to Care Survey, the 2023 Canadian Health Survey on Children and Youth, and the ongoing Canadian Community Health Survey, Statistics Canada collects detailed demographic information that includes age, gender, Indigenous identity, race, immigration and citizenship, language, education, income, as well as disability status, which allow for data disaggregation. As part of the Disaggregated Data Action Plan announced in Budget 2021, Statistics Canada committed to enhancing the availability of disaggregated data, while maintaining its commitment to protecting the privacy of individuals and confidentiality of their data. Additionally, Statistics Canada is moving forward with developing whole-of-government standards to enable adoption and support consistent collection and disaggregation of data to support the development of equitable and responsive policies and programs.

Mental health and substance use, children and youth, community and primary care, and equity are key priority areas to improve health data collection in CIHI's 2022-2027 Strategic Plan. CIHI

is currently developing a Primary Health Care Data Content Standard for implementation in electronic medical record systems across Canada. The standard will improve national mental health data collection and aims to incorporate many of the data themes outlined in the recommendation, such as women's health, mental health, and experiences with violence. To improve data collection to support equitable care, CIHI is prioritizing disaggregation in all public products and is supporting the collection of data from equity-deserving groups and Indigenous peoples in collaboration with relevant communities. CIHI is also supporting the modernization of sex and gender data collection in cooperation with federal partners and provincial and territorial stakeholders to support equitable care and health system performance reporting.

Additionally, PHAC's Health Inequalities Reporting Initiative (HIRI) continues to monitor mental health and social determinants of health indicators at all stages of life that are disaggregated by sex and gender in addition to other intersecting identities and socioeconomic status. PHAC continues to work with federal partners to improve national mental health-related data collection, including through the United Nations Decade for People of African Descent interdepartmental data and results working group to develop a whole-of-government data strategy for Black communities. Through the Promoting Health Equity: Mental Health of Black Canadians Fund as well as the Supporting the Mental Health of Those Most Affected by COVID-19 Fund, PHAC is also supporting Canadian universities and researchers to, for example, fund ongoing research on the prevalence of mental health challenges in Black communities.

The Government continues to examine opportunities to address data gaps in populations and report on diverse contexts through collaboration with Federal-Provincial-Territorial governments, Indigenous groups and academic partners, with a particular focus on ensuring that health inequities are understood and addressed.

With respect to **Recommendation 2**, the Government agrees that applying an SGBA Plus lens in research is critical to identifying impacts experienced disproportionately by diverse population groups.

CIHR is supporting research on mental health and substance use, including research focused on women and girls and research that takes explicitly into account sex and gender. Between 2017-18 and 2021-22, CIHR invested over \$496 million in mental health and behavioural disorders research, approximately \$180 million on addictions research, and over \$31 million in research related to suicide prevention. In 2016-17 CIHR also developed the Sex and Gender-Based Analysis (SGBA) in Research Action Plan to better integrate SGBA in CIHR's research funding programs. Key elements of the Action plan include 1) Promoting SGBA to the CIHR research community; 2) Enhancing capacity of the CIHR research community to apply SGBA; 3) Embedding SGBA into research programs and initiatives; and 4) Demonstrating the impact of integrating SGBA in health research. Additionally, CIHR includes criteria in funding opportunities that requires applicants to consider a range of variables (e.g., sex, age) and intersecting aspects of identity and social location (e.g., gender, race, disability, 2SLGBTQI+) in their research proposals.

CIHR, in partnership with WAGE, is investing \$20 million over 5 years in the National Women's Health Research Initiative (NWHRI). This initiative will advance a coordinated research program that addresses under-researched and high-priority areas of women's health and will ensure new evidence improves women's and gender-diverse people's care and health outcomes.

In addition, the Federal 2SLGBTQI+ Action Plan, through WAGE, will support community-based research and systematic collection of new data disaggregated for sexual orientation, gender identity and expression, and additional intersecting factors. The enhanced data improve and better target federal interventions to address those issues most important to communities, including housing, homelessness, and health. The Government will continue to explore opportunities to expand the scope of data collection and support policy developments that meets the needs of 2SLGBTQI+ communities.

***Addressing the Social Determinants of Health (Recommendations 4, 6, 7, 9, 12, and 16)***

**Recommendation 4** reinforces that young women and girls are experts in identifying and understanding their own needs and should be consulted in the development and implementation of policies and programs. The Government recognizes the importance of meaningfully engaging people with lived and living experience (PWLE), including through the implementation of the National Conversations on Gender Equality with Young Canadians, and related federal initiatives.

The Government recognizes that youth will experience mental health challenges in different ways, depending on intersectional identity factors. Through Budget 2018, WAGE received \$7.2 million over five years for the initiative, National Conversations on Gender Equality with Young Canadians. With this, WAGE convened a Youth Working Group (YWG) to accelerate youth-led dialogue on gender equality. The YWG developed recommendations for the Department and highlighted that one of the most important gender equality issues for youth was mental health. In December 2022, WAGE also launched the "It's Not Just" national campaign to raise youth awareness about gender-based violence, to help inform youth that gender-based violence is more than just physical and sexual violence.

Budget 2021 also committed \$126.7 million over 3 years to take action to foster health systems free from racism and discrimination where Indigenous Peoples are respected and safe. This investment includes capacity funding for National Indigenous Women's Organizations to address Indigenous women's health and anti-Indigenous racism issues, as well as to help ensure that women's voices and perspectives are included in policy development.

**Recommendations 6 and 7** address the significant and disproportionate impacts of online harms to young women and girls, including sexual exploitation, harassment, and cyberbullying, and propose an awareness campaign and legislation to combat these issues.

The Government remains committed to protecting children from online child sexual exploitation through legislative means. The Minister of Canadian Heritage's mandate letter in

December 2021 directed him to continue efforts with the Minister of Justice and Attorney General of Canada to develop and introduce legislation to combat serious forms of harmful online content. In March 2022, the Ministers of Canadian Heritage and Justice established an expert advisory group on online safety, which held a series of workshops to discuss a legislative and regulatory framework for online safety. Consultations to inform the regulatory framework have now concluded. Protections for children online is a priority element of the Government's approach to online safety.

The Government continues its efforts to protect children from online child sexual exploitation through the National Strategy for the Protection of Children from Sexual Exploitation on the Internet (National Strategy), established in 2004 and led by Public Safety Canada in partnership with the Royal Canadian Mounted Police (RCMP), Justice Canada and the Canadian Centre for Child Protection, a not-for-profit organization. Public Safety Canada is investing \$41.6 million over five years, starting in 2022-23, and \$8.9 million ongoing, to better protect children from online sexual exploitation through the National Strategy. This funding supports efforts to raise awareness of this serious issue, reduce the stigma associated with reporting, increase Canada's ability to pursue offenders, enhance knowledge and understanding of this crime, and advance collaboration with partners and stakeholders. Public Safety Canada also launched a National Awareness Campaign and has developed resources on the harms of online child sexual exploitation, which contain information for parents, caregivers, educators, and youth.

These efforts are supported through other investments under the Federal Strategy to Prevent and Address Gender-Based Violence, such as a further \$22.2 million over three years through Budget 2019 to combat child sexual exploitation online. PHAC also contributes to raising awareness of online harms through its ongoing activities, including the Stop Family Violence website, and invests in diverse projects aimed at preventing family violence, supporting survivors and building the evidence base.

The Government also recognizes that specific populations are at higher risk of experiencing online harms. As reported in the the 2SLGBTQI+ Action Plan Survey, 2SLGBTQI+ communities have experienced an alarming rise in online harassment and violence, which threatens their safety and security. The Government will continue to build upon progress made through the Federal 2SLGBTQI+ Action Plan, including an awareness campaign to reduce stigma and discrimination by raising awareness and improve understanding of 2SLGBTQI+ communities and issues.

**Recommendations 9, 12 and 16** aim to address poverty reduction, affordable housing, and educational supports for professionals, which requires collaboration across all orders of government.

The Government remains committed to reducing poverty, as is reflected in the legislated targets of *Opportunity for All – Canada's First Poverty Reduction Strategy*. The *Poverty Reduction Act* set targets to reduce the rate of poverty by 20% by 2020 compared to 2015, and by 50% by 2030, as measured by Canada's Official Poverty Line. These targets are aligned with

the first United Nations Sustainable Development Goal to reduce poverty by 50% by 2030. Several measures have been taken to help Canada meet these targets. The Canada Child Benefit provides support to about 3.5 million families and over 6 million children, putting over \$25 billion, tax free, in the hands of Canadian families each year. For Canadian seniors, the Old Age Security program and Guaranteed Income Supplement benefit play significant roles in providing income security for seniors, including individuals who are low-income. In addition, the recently enhanced Canada Workers Benefit is a refundable tax credit that supplements the earnings of low-income workers, letting individuals take home more money while working. The Disability Inclusion Action Plan (DIAP) also includes actions to improve the immediate and long-term financial security of persons with disabilities and address long-standing financial exclusion and systemic inequities. The cornerstone of DIAP is Bill C-22, the Canada Disability Benefit Act. The goal of the proposed benefit is to increase financial security and reduce poverty among working-age Canadians with disabilities. The enabling framework legislation for the benefit is currently before Parliament. The 2023 federal budget committed \$21.5 million in 2023-24 to continue work on the future delivery of the proposed benefit, including engagement with the disability community and provinces and territories on the regulatory process.

In recognition of the ongoing hardships that First Nations individuals and families on reserve are facing, the Government has provided additional funding to First Nation communities and organizations to supplement the On-reserve Income Assistance Program. Budget 2021 invested \$618 million over two years to address essential needs and increased program demand, including as a result of COVID-19, and continue providing case management supports. The 2022 Fall Economic Statement announced an additional \$339.2 million over two years to address essential needs and continue providing case management support to clients transitioning to employment and education opportunities. This funding has helped First Nations individuals and families on reserve who rely on income assistance to cover their essential living expenses.

The Government recognizes that poverty and food insecurity are intrinsically linked, as reflected in *Opportunity for All's* use of food insecurity rates as a key indicator of progress. Additionally, during the COVID-19 pandemic, the Government provided \$330 million through the Emergency Food Security Fund (EFSF) and \$50 million through the Surplus Food Rescue Program to address acute disruptions for the community food sector to respond to pandemic-related food security issues at a time of increased need. Under EFSF, funding was provided for the purchase, storage and distribution of food and other essentials to more than 8,000 food initiatives across Canada. These emergency supports were in addition to longer-term, community-led initiatives delivered through a \$70 million Local Food Infrastructure Fund over five years launched under the Food Policy for Canada to improve access to healthy, nutritious food for communities at higher-risk of food insecurity, which includes Indigenous peoples, persons with disabilities, women, youth and visible minorities.

The federal government and provinces and territories are primary partners in housing. Through bilateral agreements under the Federal-Provincial-Territorial Housing Partnership Framework, all provinces and territories deliver and cost-match housing investments to address their local priorities and housing needs, which may include supportive housing and meeting the needs of

young women, girls and equity-deserving populations. Provinces and territories play a critical role in supportive housing by contributing resources and delivering integrated health, social and other wraparound supports to individuals accessing these services.

In support of increasing affordable housing, the National Housing Strategy (NHS), led by CMHC, is a 10-year, over \$82 billion plan that will give more individuals in Canada a place to call home. It seeks to support access to affordable housing to meet the needs of those who may face barriers to housing, including equity-deserving populations. The NHS also includes programs that address the unique housing needs of specific populations, such as women and their children fleeing violence, persons with disabilities, and Indigenous people.

Of the \$33 billion that has been committed to date to support the creation and renovation of new units with the NHS, CMHC has committed an estimated \$10.4 billion towards meeting the housing needs of women and their children, which includes funding for the construction, repair and support of 265,681 housing units. This includes funding committed and spent under the National Housing Co-Investment Fund, Rental Construction Financing Initiative, Federal Lands Initiative, Affordable Housing Innovation Fund, Rapid Housing Initiative, Federal Community Housing Initiative, Canada Community Housing Initiative, Community Housing Transformation Centre and Research and Data Initiative, Indigenous Shelter and Transitional Housing Initiative as well as funding spent under legacy agreements to support community housing. Of the \$10.4 billion, \$2.2 billion is targeting the needs of women and their children, and \$8.2 billion is supporting the needs of women and their children. This represents 32% of all NHS funding committed.

Housing is an important social determinant of health and provides a foundation for improving socio-economic outcomes and well-being for Indigenous communities. The Government has announced more than \$10.8 billion since 2016 to support the provision of housing for Indigenous peoples through the co-developed First Nations, Inuit and Metis housing strategies as well as the Urban, Rural and Northern (U.R.N.) Indigenous Housing Strategy currently in progress. The Government committed \$300 million over two years to address immediate housing needs in urban, rural and northern Indigenous communities through funding allocated in Budget 2022. Further, Budget 2023 committed \$4 billion over seven years, starting in 2024-25, to implement a co-developed Urban, Rural, and Northern Indigenous Housing Strategy.

Through the NHS, \$3.8 billion has been allocated for Indigenous and northern housing initiatives. One of the most significant of these programs is the current collaboration between CMHC and ISC on a \$724 million project for the Indigenous Shelter and Transitional Housing Initiative to build a minimum of 38 shelters and 50 new transitional homes for Indigenous women, children and 2SLGBTQI+ people escaping gender-based violence. Once shelters are operational, ISC will be providing the funds for ongoing programming services to support the families. CMHC is building these shelters with the participation of an Indigenous-led Steering Committee and an Inuit-led Steering Committee who are selecting locations.

The Federal 2SLGBTQI+ Action Plan, launched in August 2022, also highlights housing and

homelessness as one of the many interrelated challenges that 2SLGBTQI+ people continue to face, jeopardizing their overall mental health and well-being, to raise awareness to this important issue.

While health and social services, including the regulation of professionals, is primarily provincial and territorial jurisdiction, the Government is supportive of **Recommendation 16** and its intent. PHAC has published guidance for trauma and violence-informed approaches to policy and practice, and through its funding programs and initiatives is supporting various school-based projects focused on mental health literacy, trauma-informed mental health promotion and prevention intervention, and gender-based violence. WAGE has also funded various projects that encourage the integration of information on consent, gender-based violence, and cyberviolence within school curricula in the context of addressing barriers to gender equality. Health Canada has also invested in prevention campaigns to educate youth and young adults on the risks and harms of substance use, including vaping, and has also invested in projects that support educators in engaging youth on these topics. This demonstrates the Government's commitment to ongoing support for and engagement on integrating mental health literacy into school curricula.

***Working Collaboratively to Improve Access to Health Services (Recommendations 3, 5, 10, 13, 14, 17, and 18)***

The Report notes access to care challenges among young women, girls and individuals belonging to equity-deserving groups, including inability to pay for private services, long wait times, complicated system navigation, and a lack of equitable care, which includes care that is offered in various languages, culturally competent, violence- and trauma-informed, gender-affirming and equipped to address complex needs. Barriers to care and other systemic inequalities, such as gender inequality and rigid gender norms, can exacerbate mental health challenges and symptoms of mental illness for women, girls, gender-diverse and non-binary people. Further, some youth are impacted differently or disproportionately, depending on their intersecting identity factors. The Government recognizes these significant issues and is working collaboratively with Indigenous partners, provinces, territories and stakeholders to improve access to services, particularly for equity-deserving populations.

The Government has made significant investments in provinces and territories to support the mental health and well-being of the Canadian population. Through *Working Together to Improve Healthcare for Canadians* announced by the Prime Minister, the Government will increase long-term health funding to provinces and territories by more than \$198 billion over 10 years, including \$46.2 billion in new funding; including:

- An immediate, unconditional \$2 billion Canada Health Transfer (CHT) top-up to address immediate pressures on the health care system, especially in pediatric hospitals and emergency rooms, and long wait times for surgeries. This builds on previous CHT top-ups that total \$6.5 billion provided throughout the pandemic.
- The federal government will provide top-up payments to achieve Canada Health

Transfer increases of at least five per cent per year for the next five years. The last top-up payment will be rolled into the Canada Health Transfer base at the end of the five-year period, resulting in a permanent funding increase. This represents an estimated \$17.1 billion over ten years in additional funding through the Canada Health Transfer.

- \$25 billion over 10 years through tailored bilateral agreements that will support the needs of people in each province and territory in four areas of shared priority: 1) family health services; 2) health workers and backlogs; 3) mental health and substance use; and 4) a modernized health system.
- \$1.7 billion over 5 years to support hourly wage increases for personal support workers and related professions.
- \$350 million over ten years to the Territorial Health Investment Fund in recognition of medical travel and the higher cost of delivering health care in the territories.

This builds on Budget 2017 investments to provinces and territories, which include \$5 billion over 10 years to improve access to mental health and addiction services in priority areas that target children and youth, people with complex health needs, and community mental health care and culturally competent interventions.

For mental health and substance use, this approach combines already planned and new dedicated mental health and substance use funding, in addition to CHT growth that provinces and territories can leverage to support key mental health and substance use priorities. Mental health and substance use integration across other priority areas is key to supporting a multi-disciplinary system of care. These investments demonstrate how the Government of Canada is supporting **Recommendation 18**, which seeks to increase mental health integration into health systems and funding to provinces and territories. Additionally, within tailored bilateral agreements, provinces and territories have flexibility to target areas identified in other recommendations, such as **Recommendation 10**, which involves services adapted to meet the needs of specific populations, as well as **Recommendation 13**, which involves transitional community services. Provinces and territories will also be required to set targets and report annually on indicators related to their chosen initiatives and priority areas, as well as report on a series of common indicators that include mental health and substance use. This will help to promote accountability and transparency in the use of federal funding. The resulting bilateral agreements will mutually respect each government's jurisdiction, and be underpinned by key principles, including efforts to provide equal access for equity-deserving populations, such as official language minority communities.

This demonstrates the Government's commitment to transferring billions of dollars over the coming years to provinces and territories to support mental health and substance use services, including through Budget 2023 investments involving a combination of both increasing the CHT and through \$25 billion over 10 years for tailored bilateral agreements. The tailored bilateral agreements include an integrated, inclusive approach to investments in health services, the health workforce, data and digital tools to meet the health and mental health needs of the Canadian population. Mental health and substance use is one of four shared priorities for investment, and the Government is working with provinces and territories to ensure its

integration into the other three priorities.

Recognizing that mental health often intersects with substance use health, it is important to consider access to substance use health services that are integrated with mental health care. The Canadian Drugs and Substances Strategy (CDSS) sets out the Government of Canada's comprehensive, public health-focused approach to drug policy. Actions have focused on increasing access to harm reduction (e.g., supervised consumption sites, safer supply), treatment, and prevention of substance use related harms for individuals living in Canada, as well as enforcement actions to address illegal production and trafficking of drugs. Budget 2023 announced \$359.2 million over five years for a range of activities to support a renewed CDSS, which includes \$144 million over five years to the Substance Use and Addictions Program (SUAP) for community-based supports. This builds on more than \$800 million the Government has committed since 2017 to directly address the overdose crisis. Federal resources for substance use services and supports are made available and accessible to Canadians, including young women, girls and equity-deserving populations.

The Government continues to make responding to gender-based violence a priority. Budget 2021 provided \$601.3 million over five years to advance toward a National Action Plan to End Gender-Based Violence, including \$30 million over five years for WAGE to support crisis hotlines to serve the urgent needs of more individuals in Canada experiencing gender-based violence. Funding is being distributed through bilateral agreements with provincial and territorial governments who will in turn flow the funding to crisis line(s) within their respective jurisdictions. The majority of provinces and territories now have signed agreements in place. Building on the January 2021 Joint Declaration for a Canada free of Gender-based Violence, federal, provincial and territorial Ministers responsible for the Status of Women launched the National Action Plan to End Gender-Based Violence in November 2022. The Plan includes opportunities for action that can address the needs of different populations, including women and girls. WAGE is currently negotiating bilateral funding agreements with each province and territory to flow the Budget 2022 investment of \$539.3 million to enable provinces and territories to supplement and enhance services and supports within their jurisdictions to prevent gender-based violence and support survivors and to implement the Plan.

The Government is also making significant investments to expand the availability of Integrated Youth Services (IYS) in collaboration with Indigenous partners, provinces, territories, and stakeholders. IYS offer "one stop shops" in the community, providing a suite of integrated health and social services, which can include peer support, mental health and primary care support and employment counselling, as well as support for navigating these systems of care. All 13 provinces and territories have developed or are developing an IYS network in their regions. Additionally, there is an Indigenous IYS network in progress, led by the efforts of Indigenous communities to shift youth mental health towards culturally competent care. Currently, CIHR is committing \$15.2 million over 5 years to provincial, territorial and Indigenous IYS networks to expand IYS in their regions, and to support the development of a coordinated pan-Canadian IYS network-of-networks (IYS-Net) initiative. IYS-Net will help the development of a Pan-Canadian Learning Health System for Integrated Youth Services that aims to bring

together practice, data and research to inform evidence-based care for all youth ages 12-25 including young women and girls. Health Canada is additionally providing support to IYS initiatives through its funding programs and is working collaboratively with provinces and territories to address shared priorities for child and youth mental health, including IYS.

In further support of **Recommendation 13**, CIHR is also supporting research through the Transitions in Care initiative, which includes specific research areas on mental health care for post-secondary students, community mental health care for youth, and mental health care for black youth. One project at Queen's University, Ontario, is developing support pathways and transitions in a stepped care model for the diverse university student population.

**Recommendation 3** calls on the Government to fund and monitor the implementation of national standards for perinatal mental health. Witnesses noted that few pregnant and postpartum individuals have access to appropriate mental health care, particularly from equity-deserving groups. The Government recognizes the importance that standards can play in supporting access to specialized services for pregnant and postpartum individuals. Health Canada recently funded a new project to develop a Canadian National Clinical Practice Guideline for the Treatment of Perinatal Mood, Anxiety and Related Disorders, with a corresponding Patient and Family Guide. The project is being led by Women's College Hospital and will focus on Canadian contexts and themes, including those identified during a roundtable discussion on perinatal mental health that was co-led by the Minister of Mental Health and Addictions and Associate Minister of Health. While implementation of the guideline fall under provincial and territorial jurisdiction, federal mental health investments to provinces and territories provide a source of funds to support implementation.

In addition, CIHR is investing in research on perinatal mental health, such as \$2.4 million towards the health research training platform, Empowering Next-generation Researchers in Perinatal and Child Health (ENRICH), that will equip emerging researchers with the tools to work in a complex and fast-paced world of science and technology, while understanding existing societal disparities that perpetuate poor health and mental health outcomes in children, youth and families. PHAC is also monitoring perinatal and infant health through the Canadian Perinatal Surveillance System (CPSS), which will include measures of perinatal mental health through the upcoming Perinatal Experience Survey (PES).

PHAC also recently released *Your Guide to Postpartum Health and Caring for Your Baby*, which aims to provide parents and caregivers credible, easy to read information about postpartum health and parenting a new baby. An important topic in the guide is postpartum mental health. The mental health section outlines information on common emotions after giving birth, the importance of self-care, the types of mental health concerns during the postpartum period and how to recognize when to seek help.

**Recommendations 5, 10 and 17** focus on prevention, meeting the needs of diverse young women and girls, and funding to community organizations. The Government recognizes the unique mental health challenges faced by young women and girls, particularly from equity-

deserving populations, and the importance of prevention and community-based programming that is tailored to local and diverse needs. There are several federal funding programs and initiatives that are helping to advance these and related priorities, such as mental health, substance use and related harms, and health equity.

The Government has made significant investments in the areas of early intervention and prevention for mental health. For example, PHAC's Mental Health Promotion Innovation Fund provides funding to support the delivery of innovative, community-based programs in mental health promotion, with a focus on children, youth, young adults and equity-deserving populations. Budget 2021 also provided PHAC \$100 million to support projects that promote mental health and prevent mental illness in populations disproportionately impacted by the COVID-19 pandemic, such as youth, Indigenous peoples, workers, and equity-deserving groups as well as an additional \$50 million to address post-traumatic stress disorder and trauma in health care workers, front-line and other essential workers. Additionally, as part of Budget 2023's commitments under the renewed CDSS, the Government announced \$20.2 million over five years, to PHAC for a new community-based program to prevent substance use among young people. PHAC also supports community-based programming through the Promoting Health Equity: Mental Health of Black Canadians Fund as well as the Supporting the Mental Health of Those Most Affected by COVID-19 Fund to build community capacity and generate culturally focused knowledge and evidence to improve the mental health of Black Canadians. Funded projects integrate a health equity lens throughout their design, implementation and evaluation that considers and addresses unfair and avoidable differences in determinants of health, health outcomes, and reach and impact of interventions for various subgroups with diverse Black communities in Canada, including a focus on Black 2SLGBTQI+ Canadians.

At Health Canada, SUAP provides funding to other orders of government, community-led and not-for-profit organizations for a wide range of innovative and evidence-informed projects addressing substance use prevention, harm reduction and treatment initiatives across the country. Many projects include a focus on supporting the needs of young women, girls and equity-deserving populations, and are helping to promote health equity and address issues such as homelessness, transitional care, and chronic pain. Health Canada has also invested in prevention campaigns to educate youth and young adults on the risks and harms of substance use, including vaping, and continues to work with pain stakeholders to support projects to expand successful pain management programs and resources. The Health Care Policy and Strategies Program (HCPSP) also provides funding to non-profit organizations and other orders of government to support projects that improve access to mental health care by addressing barriers and inequities, building knowledge and capacity, improving the quality of care delivered and supporting innovative models. Several HCPSP-funded projects specifically target the mental health of children and youth, including Indigenous children, and are helping to expand the availability of IYS across Canada.

Health Canada established its Sexual and Reproductive Health Fund to support access to care for underserved populations who are at increased risk for poorer sexual and reproductive health outcomes through an initial investment from Budget 2021 of \$45 million over three

years. Budget 2023 extended this initiative to 2027 with a further \$36 million investment. A number of projects funded through this initiative will help support diverse girls and young women. Several are focused on creating or adapting comprehensive sexuality education resources focused on underserved populations, including 2SLGBTQI+ youth, Indigenous youth, and Autistic youth and physically disabled youth. Other projects support training, tools and resources for service providers who work with girls, young women, Two-Spirit, transgender, and gender-diverse people in the context of sexual and reproductive health. Finally, four projects support improved access to abortion, including funding for travel and logistics, as well as the development of training, tools, and resources to support health care providers.

WAGE will continue to fund projects and organizations that support the guiding principles of the National Action Plan to End Gender-Based Violence as well as seek to improve the mental health of young women, girls and 2SLGBTQI+ youth by addressing barriers to gender equality. WAGE's Gender-Based Violence Program is also supporting organizations working in the gender-based violence sector to develop and implement promising practices that address gaps in supports for victims, survivors, and their families. PHAC is also supporting early intervention and prevention initiatives through its Family and Gender-Based Violence Prevention programming, by funding projects that are supporting the mental and physical health of individuals who have experienced, are experiencing, or are at risk of experiencing family and gender-based violence.

As part of consultations that informed the Federal 2SLGBTQI+ Action Plan, 2SLGBTQI+ people reported facing barriers to culturally competent mental health services and supports, even as they experience poorer mental health outcomes than the general population due to interconnected social determinants, rooted in longstanding stigma and discrimination. Through the 2SLGBTQI+ Projects Fund, the Federal 2SLGBTQI+ Action Plan invests in community-informed initiatives aimed at addressing specific barriers to 2SLGBTQI+ equality and enhancing support for 2SLGBTQI+ people and challenge harmful norms and attitudes. The Federal 2SLGBTQI+ Action Plan also commits to engagement with provinces and territories, to advance 2SLGBTQI+ equity across Canada.

The Support for the Wellbeing of Families and Survivors of Missing and Murdered Indigenous Women, Girls and 2SLGBTQI+ People Contribution Program funds projects that provide assistance and services for the healing journeys of individual Indigenous family members and survivors who have missing or lost loved ones due to violence against Indigenous women, girls and 2SLGBTQI+ people. The program guidelines emphasize the importance of culturally competent service delivery.

ESDC's Social Development Partnership Program (SDPP) makes strategic investments to support government priorities related to children and families, people with disabilities and equity-deserving populations, that further broad social goals. For example, SDPP Disability Component provides support to not-for-profit disability organizations at the national and regional level through operating and project funding to increase the social inclusion and participation of persons with disabilities in all aspects of Canadian society. Funded projects include

organizations that support people with lived experience of psychosocial disabilities in Canada. Their primary mandate is to promote social inclusion of diverse communities, from the deaf community including 2SLGBTQI+ racialized and marginalized communities, who are struggling with psychosocial disabilities and substance issues.

Since 2019, CIHR's Indigenous Gender and Wellness Initiative has invested close to \$10 million in several research projects to support: Indigenous-led research related to gender and wellness; facilitate knowledge sharing as to how Indigenous concepts of gender can affect wellness; and support the implementation of action-oriented, community-based projects to improve wellness among Indigenous communities from a gendered perspective.

In March 2022, Health Canada partnered with Standards Council of Canada to develop standards in priority areas for mental health and substance use health, following commitments in Budget 2021. Standards will promote health equity and the provision of stigma reduction and culturally competent care, and be informed by engagement with diverse stakeholders, including people with lived and living experience. Standards work is providing an opportunity to advance equitable access to high-quality care for equity-deserving populations, including Indigenous peoples, 2SLGBTQI+ communities, and other populations that face barriers to care.

In response to **Recommendation 14**, including calls to enhance digital infrastructure and improve virtual mental health care systems, the Government recognizes the potential of expanding access to safe and appropriate virtually-delivered care as a means to addressing access challenges, including for equity-deserving populations. In May 2020, the Government announced an investment of \$240.5 million to help Canadian health systems to accelerate their efforts to meet health care needs through virtually-delivered care and digital tools. Of this, \$150 million flowed directly to supporting provinces and territories through bilateral agreements to implement virtual care initiatives, such as video conferencing, secure messaging, and remote patient monitoring. The Government continues to work with the provinces and territories to advance progress on the adoption of virtual care in Canada through the Federal-Provincial-Territorial Virtual Care and Digital Health Table. As part of this work, governments have recognized equitable access to virtual care as a key priority. In March 2022, a Pan-Canadian Digital Health Equity Working Group was created to develop pragmatic solutions and principles for key policy barriers to equitable access to digital health and virtual care. The Equity Working Group has explored issues such as culturally competent care, access for rural and remote communities, and more broadly enhancing access for underserved communities.

The Government also recognizes that many individuals in Canada continue to experience challenges accessing reliable and affordable high-speed Internet in their communities. This is why in June 2019, the government released High-Speed Access for All: Canada's Connectivity Strategy. It represents a historic commitment to make affordable, high-speed Internet infrastructure available to the Canadian population and to improve mobile wireless access from coast to coast to coast. The Universal Broadband Fund (UBF) is a key initiative under the Connectivity Strategy and provides \$3.2 billion to support connectivity in underserved rural and remote communities in collaboration with provinces and territories and other partners.

To date, the Government has invested \$7.6 billion in broadband Internet infrastructure to connect communities from coast to coast to coast. As noted in the Report, the Government recognizes there is more to do. Collectively, these investments will ensure that 98% of individuals in Canada are connected to high-speed Internet by 2026, with the goal of connecting the entire Canadian population by 2030. The Government is also taking advantage of other measures to promote access, including investments in low-earth orbit satellites to ensure even the most challenging northern and remote areas have access and spectrum policy tools to support wireless services.

To further support the Canadian population in addressing their mental health and substance use issues, Health Canada invested \$130 million from 2020-22 in Wellness Together Canada, an online mental health and substance use support portal, and received \$140 million in Budget 2022 to support the portal for two more years. Launched in April 2020 as an emergency response to address mental health and substance use impacts of the COVID-19 pandemic, Wellness Together Canada provides free and confidential online mental health and substance use supports accessible 24 hours a day, 7 days a week to individuals across Canada in both official languages. Interpretation services are also available during phone sessions in over 200 languages and dialects. The portal includes resources and supports dedicated to youth and other specific populations and needs.

The Government also recently supported the establishment of Power Over Pain, a national virtual portal providing the Canadian population with rapid access to free evidence-based virtual resources, interventions and peer support for chronic pain, and associated mental health and substance use health. A dedicated platform for youth was recently launched as part of this initiative. Additionally, the Government has funded the National Overdose Response Service (NORS), a virtual overdose prevention service which provides support to people who use drugs from anywhere in Canada.

The integration of virtual platforms into care pathways contributes to improving the ability of healthcare providers to support individuals, including young women, girls and equity-deserving populations, receiving the right care at the right time that is tailored to their needs, motivations, and capacities.

The Government also supports the creation of 9-8-8 as a 3-digit number for suicide prevention and emotional distress. The Canadian Radio-television and Telecommunications Commission is working with PHAC and has set telecommunications requirements for November 30, 2023. The Centre for Addiction and Mental Health (CAMH) has been identified as the lead coordinator for the implementation of 9-8-8. Budget 2023 announced \$158.4 million over three years to support the launch and implementation of 9-8-8, ensuring the service has the quality and capacity to meet demand and connect people to effective crisis support when they need it most. Once implemented, the 9-8-8 service is expected to be accessible to people in crisis, across all provinces and territories, providing 24 hours a day and 7 days a week access to support, in English and French, by phone or text.

Furthermore, the Government is developing a National Suicide Prevention Action Plan to update the Government of Canada's approach to this issue. Over the coming year, we will continue to engage with stakeholders and partners, including with Indigenous communities and organizations, and people with lived and living experience to move the existing Federal Framework for Suicide Prevention to a more action-oriented plan.

### ***Resources, Training, and Education for Health Professionals (Recommendations 8 and 15)***

**Recommendations 8 and 15** recommend increasing human and financial resources as well as mental health and related education and training for health professionals. The Government recognizes the significant toll of the COVID-19 pandemic as well as ongoing health system challenges on health care providers and frontline workers, particularly when supporting patients with complex care needs, such as chronic pain, mental health, and substance use-related issues. The Report emphasizes that women make up the majority of the health workforce and have been on the front lines of the pandemic response since the beginning. Supporting our health workforce is one of the four key shared health priorities identified in *Working Together to Improve Healthcare for Canadians*. Through the plan and Budget 2023, provinces and territories will receive more than \$198 billion over 10 years, including \$46.2 billion in new funding, which includes \$25 billion through tailored bilateral agreements to address the key shared health priorities, and the health workforce is fundamental to success across all areas of the health system, which includes addressing the needs of equity-deserving populations.

In addition, through Budget 2021 investments to support populations disproportionately impacted by the COVID-19 pandemic, PHAC is funding various projects that focus on resilience building, peer support, mental health literacy, addressing stigma, as well as training and resources for service providers, including primary care providers, teachers and frontline community service workers, to enhance trauma-informed practice, remove barriers to care, and improve help-seeking and system navigation. Additionally, as part of the Federal Strategy to Prevent and Address Gender-Based Violence, PHAC supports programs that equip health professionals to recognize and respond safely to family and gender-based violence, for example on trauma-informed practice. PHAC is also funding projects through the Promoting Health Equity: Mental Health of Black Canadians Fund that are developing culturally competent resources, training and education for health professionals and other audiences to help improve the mental health for this community.

WAGE has funded various projects and organizations that seek to ensure trauma-informed interventions among frontline community service providers serving women, girls and 2SLGBTQI+ individuals. This includes funding under the Gender-Based Violence Program to strengthen the gender-based violence sector to address gaps in supports for Indigenous women and underserved populations. ISC has also provided funding to organizations such as the Canadian Association of Schools of Nursing and the National Collaborating Centre for Indigenous Health to create and provide cultural safety and humility training to health care

professionals.

Health Canada recognizes the specific challenges faced by health professionals in supporting patients with complex care needs, such as chronic pain, mental health and substance use-related issues. Several SUAP-funded projects aim to support practitioners in service delivery and help them better navigate the complexities of concurrent disorders including substance use, mental health disorders, and chronic pain. Healthcare and frontline personnel are also an important population for Wellness Together Canada. That is why the portal features a dedicated text line for front line workers, as well as mental health and substance use supports targeted for, and co-designed with, healthcare workers, including peer support, tailored programming, and informational resources.

*Working Together to Improve Healthcare for Canadians* committed \$505 million over 5 years to the Canadian Institute for Health Information (CIHI), Canada Health Infoway and federal data partners to work with federal, provincial and territorial governments on how health information is collected, shared and used to benefit individuals in Canada and their health. This investment will also support the creation of a Centre of Excellence on the Future of the Health Workforce, which will lead a collaborative pan-Canadian approach to improved data collection, analysis, and knowledge mobilization. The Centre of Excellence will enable access to more and better data on the health workforce and support health workforce planning capacity, which will improve Canada's health system, including for mental health.

### ***Supporting Indigenous Peoples (Recommendation 11)***

**Recommendation 11** calls on the Government to continue working with Indigenous peoples, provinces, territories and other partners to implement the Truth and Reconciliation Commission's Calls to Action, and to ending the violence against Indigenous women, girls and 2SLGBTQI+ people as identified in the final report of the National Inquiry into Missing and Murdered Indigenous Women and Girls (MMIWG). The Government collaborates with Indigenous partners through various programs and initiatives and is guided by key documents, such as the First Nations Mental Wellness Continuum Framework, Honouring Our Strengths and the National Inuit Suicide Prevention Strategy.

The Government is investing more than \$1.5 billion over six years, starting in 2021-22, to support trauma-informed, culturally competent, Indigenous-led services to improve mental wellness, including over \$825 million through Budget 2021 and Budget 2022 to support distinctions-based mental health and wellness strategies with First Nations, Inuit, and Métis. Through Budget 2023, an additional \$2 billion over ten years will be distributed using a distinctions-based approach through the Indigenous Health Equity Fund. These investments are flexible to meet the immediate mental wellness needs of communities by supporting Indigenous-led, culturally competent, community-based mental wellness promotion, on-the-land initiatives, suicide prevention, life promotion, crisis response, and substance use treatment and prevention services in Indigenous communities. This funding also supports the provision of essential mental health, cultural and emotional support to former Indian Residential Schools

and federal Day Schools students and their families as well as individuals affected by the issue of Missing and Murdered Indigenous Women and Girls.

The Government is also working with Indigenous partners to establish Indigenous healing centres and programming to address the physical, mental, emotional and spiritual harms caused by residential schools, such as the Nunavut Recovery Centre in Nunavut, the Indigenous Healing and Wellness Centre in the Northwest Territories and the Woodland Wellness Centre in Saskatchewan. Trauma-Informed Health and Cultural Support Programs (HCSPs), such as the Indian Residential Schools Resolution Health Support Program, the Indian Day Schools HCSP, the Missing and Murdered Indigenous Women and Girls HCSP and the expanded Trauma-Informed HCSPs also provide access to mental health counselling and emotional and cultural support services.

To address the under representation of Indigenous peoples in health and medical professions, Budget 2021 provided \$354 million over five years to increase the number of nurses and other medical professionals in remote and isolated First Nations communities and \$126.7 million over three years to take action to foster health systems free from racism and discrimination where Indigenous Peoples are respected and safe. This funding will support patient advocates, health system navigators and cultural safety training for medical professionals. The Government has also provided \$250 million over five years through the 2022 Fall Economic Statement to support the recruitment and retention of health professionals on reserve. Various outreach initiatives are underway to increase the awareness of nursing employment within First Nations communities, with concentrated efforts on increasing Indigenous representation in the delivery of healthcare services.

The Government is also committed to the co-development of distinctions-based+ health legislation, and on June 29, 2021, the Minister of Indigenous Services affirmed that this legislation will be informed by the spirit and elements of Joyce's Principle. The engagement process for this initiative wrapped up in fall 2022, and the Government will continue working with First Nations, Inuit, Métis and intersectional partners to co-develop legislative options through distinctions-based+ tables, with the intention of tabling legislation in winter 2024.

The Government of Canada is committed to ending violence against Indigenous women, girls and 2SLGBTQI+ people through action in the four interconnected thematic areas that address the root causes for this violence identified by the National Inquiry: culture, health and wellness, human safety and security, and justice. The initiatives that are being implemented to support this goal are outlined in the Federal Pathway, the Government of Canada's contribution to the National Action Plan. In 2022, the Government, alongside Indigenous organizations and partners, as well as provinces and territories, released the first annual progress report on the MMIWG National Action Plan. Additionally, in 2022, the Government also released its first annual progress report on the Federal Pathway, which provides an overview of commitments that were announced in the Federal Pathway (June 2021) and funded in the 2020 Fall Economic Statement, Budget 2021 and Budget 2022. It also notes the Calls for Justice and Calls for Miskotahâ (change) to which the initiatives are linked. The 2023 Annual Progress Report on the

Federal Pathway was published on June 3, 2023 and highlighted how the initiatives listed in it are linked to the Calls for Justice.