



#### The Schizophrenia Society of Canada

2022-2023 SSC Executive Committee

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2022-2023 SSC Board of Directors

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The Schizophrenia Society of Canada works in a collegial partnership with the following organizations across Canada. Our respective organizations strive to increase awareness and understanding about early psychosis and schizophrenia, treatment options, peer support, and the recovery process. We advocate for person-centred, recovery-oriented public policies that support easy access to tailored mental health treatment options, community support and social inclusion. The top executive leaders of each of the following organizations have joined together as "The Early Psychosis and Schizophrenia Leadership Network."

Schizophrenia Society of Saskatchewan

British Columbia Schizophrenia Society

Peer Connections Manitoba

Mental Health Recovery Partners

Schizophrenia Society of Alberta

Schizophrenia Society of Newfoundland and Labrador

Schizophrenia Society of New Brunswick

Hope for Mental Health

Schizophrenia Society of Nova Scotia

Société Québécoise de la schizophrénie

Institute for Advancements in Mental Health

# **OUR MISSION**

Build a Canada where people living with early psychosis and schizophrenia achieve their potential. Construire un Canada où les gens qui sont dans les premiers stades de la psychose et de la schizophrénie atteignent leur potentiel.



The Schizophrenia Society of Canada (SSC) is a national registered charity with a mission to "Build a Canada where people living with early psychosis and schizophrenia achieve their potential." That is the purpose of our advocacy, education awareness, support programs, public policy, and research. Founded in 1979, we are proud to celebrate more than 45 years of hope, change and innovation.

We work with provincial societies to help individuals with early psychosis and schizophrenia, as well as their families, have a better quality of life while we support the search for a cure. Working for the public are committed to:

- Raising awareness and educating the public to help reduce stigma and discrimination,
- Supporting families and individuals as they navigate the mental health system,
- Advocating for legislative change and improved treatment and services, and
- Supporting research through the SSC Foundation.

We've continued this year in offering our existing services and programs though our virtual office near Winnipeg and through our website, as well as through our social media platforms. It has also been a year of strengthening communication and relationships with our provincial schizophrenia societies. This was facilitated by our Leadership Network composed of the executive directors of our provincial counterparts.

Schizophrenia is a serious but treatable brain disorder. Although the exact cause is still a mystery, it is believed combination of a biochemical and environmental factors are believed to contribute to the cause of the illness. Psychosis affects 3% of the population at any given time. While psychosis can be a symptom of a number of illnesses and conditions, it is the main feature of schizophrenia.

Schizophrenia can impact anyone. It usually develops into a full-blown illness in late adolescence or early adulthood and affects an estimated 1 in 100 Canadians and their families.

We realize schizophrenia is one of the most widely misunderstood and feared illnesses in society. The lingering stigma associated with this illness often results in discrimination, lack of social inclusion and, consequently, a reluctance to seek appropriate help by the individual.



The SSC has always been about hope. Hope for help, hope for treatments, hope for families, hope for understanding, hope for recovery, and hope for "getting my life back." We encourage you to join us for a new year of challenges, goals and accomplishments. Working together, we can continue to make a difference for people affected by schizophrenia and psychosis. Our key message: Schizophrenia is treatable and recovery of a quality of life is possible, but it takes the support of a caring community.

Our mission, values and goals are at the heart of everything we do.

We wish to thank our Board of Directors and other volunteers, provincial society partners, members, donors, corporate sponsors, staff, and partner organizations for their important contributions to making our mission a reality.

Below you will find highlights of accomplishments of the last 12 months.



Dr. Chris Summerville, SSC CEO

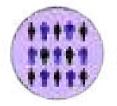


Hazel Meredith, SSC President



#### The SSC values provide further clarity on what the Society stands for and what it sees as important as we seek to "Build a Canada where people living with early psychosis and schizophrenia achieve their potential."

- Early psychosis and schizophrenia and are medical illnesses that, like other medical illnesses, have variable expressions and effects of symptoms, function and response to treatments.
- Early psychosis and schizophrenia are caused by a number of different factors, from multiple genetic and environmental factors.
- The SSC fully supports the important role of research in all areas related to early psychosis and schizophrenia and (biological, psychological, spiritual, and social determinants of health, etc.).
- Persons with early psychosis and schizophrenia are entitled to person-centred, recovery-focused, efficient multi-disciplinary and integrated evidence-informed treatments and community support services.



SEGREGATION



EXCLUSION



INTEGRATION



INCLUSION

- Persons at the early phases of their illness are entitled to real secondary prevention (early intervention and treatment) through specialized first episode psychosis clinics and their collaborators.
- Persons with early psychosis and schizophrenia and psychosis are to be included as full citizens in accessing education, employment, housing, medical services, recreation and social supports.
- Whenever possible families are essential partners in the care and the treatment and recovery plans of persons with early psychosis and schizophrenia, and deserve respect and support.
- Persons with early psychosis and schizophrenia must be included in their treatment planning, care and recovery plans using a shared decision approach.
- Persons with early psychosis and schizophrenia and their families are not to be blamed for this illness.



### SSC INITIATIVES HIGHLIGHTED 23-2024

#### **House of Commons Standing Committee on Finance**

SSC has a strong conviction that things can definitely be different and better and should be for those experiencing early psychosis and for the one in one hundred who will develop schizophrenia. Significant advances in our understanding of mental illness and treatment modalities, alone with early intervention and access to person-centred and recovery-focused mental health services, have demonstrated that there is life after a diagnosis of early psychosis and schizophrenia. Tailored mental health services and supports for individuals can help them to live beyond the limitations of their mental illness with purpose, hope, meaning, and significance.

We recognize the long overdue need for funding parity between mental and physical health across Canada, and we hope the Federal Government will takes steps towards parity so that Canadians have timely access to a range of recovery-oriented mental health services and supports.

Therefore, SSC submitted the following recommendations to the House of Commons Standing Committee on Finance 2023 Pre-Budget Consultation Process.

#### Recommendation 1

That the federal government improve access to mental health care through a Mental Health and Substance Use Health Care for All Parity Act. Mental health care supports should be broadly inclusive of individuals with schizophrenia and early psychosis.

#### Recommendation 2

That the federal government create and evaluate measurement performance for spending for trauma informed oriented care and recovery for those living with schizophrenia and other psychotic disorders. Special attention should be paid to primary care administered to Indigenous peoples through the First Nations and Inuit Health Branch and this is especially relevant during the COVID-19 pandemic as those living with schizophrenia are twice more likely to contract the COVID-19 virus.

#### **Recommendation 3**

That the federal government invest in diversion programs to divert people with mental illness out of the criminal justice system.

#### Recommendation 4

That the federal government provide funding to improve and expand respite care for people caring for those with mental illness.



#### SSC INITIATIVES HIGHLIGHTED

#### SSC and the Canadian Alliance on Mental Illness and Mental Health (CAMIMH)

Both as a member of the CAMIMH and on its own, SSC pursued opportunities to advocate for improved funding for and access to treatment and services by working with various federal departments, groups and organizations throughout the year. (Mental Health Commission of Canada, Canadian Consortium for Early Intervention in Psychosis, Canadian Institute for Health Research, Canadian Centre on Substance Use and Addiction, and the Canadian Research Network for Early Psychosis and Schizophrenia)

As a longstanding member of CAMIMH, SSC gave leadership to the CHAMPIONS of Mental Health initiative during Mental illness Awareness Week in October of 2023.

CAMIMH members shared with Parliamentarians and the Government of Canada the following recommendations aimed at transforming the way in which we care and support people affected by poor mental health and mental illness through a for a Mental Health and Substance Use Health For All Parity Act, which include several financial asks.

# By being at the CAMIMH table, SSC is able to network with these 14 National mental health organizations:

Canadian Association of Social Workers

Canadian Consortium for Early Intervention In Psychosis

Canadian Counselling and Psychotherapy Association

Canadian Federation of Mental Health Nurses

Canadian Medical Association

Canadian Mental Health Association

Canadian Psychiatric Association

HealthCareCAN

Canadian Psychological Association

Medical Psychotherapy Association of Canada

National Initiative for Eating Disorders

National Network for Mental Health

Psychosocial Rehabilitation Canada

College of Family Physicians Canada

Canadian Perinatal Mental Health Collaborative

https://www.camimh.ca/





#### **Mental Health Commission of Canada (MHCC)**

SSC has had a strong relationship with the MHCC since its inception in 2007. Every year SSC has been invited to be part of several working groups. We are at the table to see how the Commission's work aligns with the needs of individuals living with early psychosis and schizophrenia. Our involvement this past fiscal year included:

Hallway Group. The Hallway Group was created in 2009 as part of the Opening Minds Anti-Stigma program with the goal to make a difference in the lives of people living with mental illness or mental health issues. "The Hallway Group is a group of individuals, all of whom are people with lived experience (PWLE) with a mental illness either personally or through a loved one. Their role is to provide expert advice on specific initiatives, projects, and key priority areas through the much needed critical lens of PWLE."All major projects are run through the Hallway group for input.

Mental Health and Substance Use Health Policy Working Group. Mental health and substance use organizations and leaders across the sector have worked to identify, assess, and address intersecting policy issues such as achieving parity, strengthening data collection, centering lived and living experience, supporting capacity at all levels, leveraging the shift to virtual care, and health equity and social determinants of health. This Mental Health and Substance Use Health Policy (MHSUHP) Working Group aims to strengthen policy-oriented collaboration across the mental health and substance use sectors.

The MHSUHP Working Group will involve policy partners whose expertise intersects mental health and substance use health policy, health equity, and lived and living experience. As such, Working Group representation may include policy directors in select national MHSUH organizations, people with lived and living experiences, National Indigenous Organizations, and policy-oriented leaders in other organizations whose work focuses on advancing health equity and social determinants of health.



#### **Schizophrenia Quality Standards**

Through our CEO, SSC is a member of the Schizophrenia Quality Standards Demonstration Project Community of Practice.

The Mental Health Commission of Canada (MHCC) and Ontario Shores Centre for Mental Health Sciences (Ontario Shores) are collaborating on a nationwide demonstration project to advance treatment, strengthen care delivery, and improve outcomes for those living with schizophrenia. Demonstration sites to the project are:

- Adult Forensic Mental Health Services Manitoba
- Hôtel-Dieu Grace Healthcare and Canadian Mental Health Association Windsor-Essex County, Ontario
- Newfoundland and Labrador Health Services Newfoundland and Labrador
- Seven Oaks Tertiary Mental Health Facility British Columbia

These sites will receive tools, education, and training to implement the Standards based on specific regional, cultural, and organizational needs. The co-creation of a national toolkit to expand these Quality Standards across the country will reduce the variability in care for people living with schizophrenia.











#### SSC and Canada's Drug and Health Technology Agency (CADTH)

<u>Canada's Drug and Health Technology Agency (</u>CADTH) is an independent, not-for-profit organization responsible for providing health care decision-makers in Canada with "objective evidence to help make informed decisions about the optimal use of health technologies, including: drugs, diagnostic tests, medical, dental, and surgical devices and procedures."

SSC continued it advocacy for reimbursement of a new medication targeting the negative symptoms of schizophrenia. As Vraylar (cariprazine) was not approved for reimbursement by CADTH in 2022, SSC continues to engage with the provincial schizophrenia societies across Canada, else known as the Leadership Network, and other mental health organizations, associations, and networks that provide services to people with early psychosis, schizophrenia, and family members. Vraylar will be resubmitted again by AbbVie in 2024 and SSC will continue its advocacy.

#### Our call to action is:

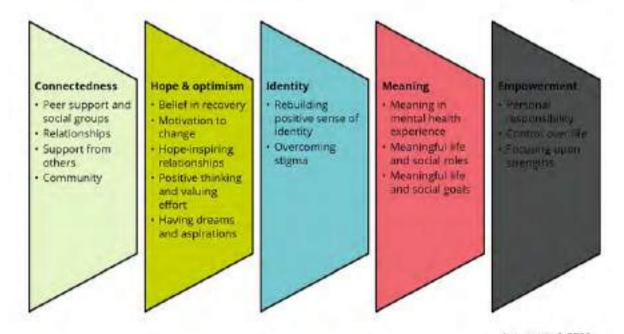
The schizophrenia community, including people living with schizophrenia, their family members, and physicians, urges all provinces to ensure that Vraylar (cariprazine) is made accessible across Canada through public funding without delay.



#### **Your Personal Recovery Journey Project**

We began redeveloping our educational resource, "Your Recovery Journey." Fran Schellenberg who is retired as Executive Director of the Mental Health Branch of Manitoba Health is the project lead. Using the CHIME framework we will develop 6 modules of "Your Personal Recovery Journey" which will be adapted to any mental illness and for use by the target audience: peer support groups. The project will be completed in Spring 2025.

# The CHIME framework for personal recovery





#### **SSC Strategic Work Plan**

We began undertaking a strategic planning exercise for the first time since 2010. As SSC continues to evolve, strategic planning will help set a forward course by bringing together stakeholders to examine the current realities of early psychosis and schizophrenia in Canada and define an organizational vision for the future.

SSC Strategic Work Plan will be lead by Ryan Clarke and Lauren Polak of Eversana. They will work with SSC in developing a strategic work plan that will focus on three goals or initiatives to be engaged with over the next three years. A survey of board members was conducted and eight stakeholder organizations were surveyed. The goal is to create a roadmap for the organization's work over the next three years.



#### **SSC Advocacy Report -Florence Budden**

Advocating for a better Canadian mental health system is an important part of the SSC's work. In 2023-2024, the SSC continued to provide leadership on mental health issues at the federal level through a variety of advocacy initiatives. Our efforts, both independent and collaborative, were aimed at improving treatment and services through legislative and policy changes.

A proud founding member of the Canadian Alliance on Mental Illness and Mental Health (CAMIMH), the SSC was pleased to participate in CAMIMH's efforts and initiatives, including Mental Illness Awareness Week. CAMIMH partners – a balance of family, consumer and professional groups – provide a strong, effective and unified voice to address mental illness and mental health issues a the federal level. CAMIMH's mandate is to develop and maintain a government relations and public affairs strategy specific to advancing federal policy, programs, legislation and regulations related to mental illness and mental health.

During this fiscal year of 2023-2024, the Schizophrenia Society of Canada continued to advance its government relations efforts through meetings with federal officials of all parties, organizing advocacy strategies, and submitting a pre-budget brief to the Standing Committee on Finance. Public Affairs. We continued to engage with the Standards Council of Canada's working group consultations to establishment national mental health standards from the federal government.

While a non-profit's sole purpose cannot be advocacy, we are pleased that we continue to give voice to those who look to SSC to advance their concerns for equitable acknowledgement, access to treatment options, and response to those living with the most stigmatized mental illness.

Our pre-budget brief to the Standing Committee on Finance included these four recommendations.

#### Recommendation 1

That the federal government improve access to mental health care through a Mental Health and Substance Use Health Care For All Parity Act. Mental health care supports should be broadly inclusive of individuals with schizophrenia and early psychosis.

SSC joins other mental health organizations in recommending that the federal government implement a Mental Health and Substance Use Health Care For All Parity Act. A parity act would demonstrate the government's commitment to mental health and that they value mental health equally to physical health. It would send a strong statement to provincial governments, workplaces and organizations and ensure that they treat mental health equally to physical health.

As mental health has long been viewed secondary to physical health, mental health has been continuously underfunded by governments in Canada and issues such as long wait times for care persist. Other countries such as the United Kingdom have already enacted parity acts and it is time that Canada follow suit and be a leader in this area. A parity act that enshrines mental health standards of care and support across Canada would set a new precedent and signal that Canada truly values mental health equally to physical health.

We strongly believe the federal government has a leadership role to play with respect to mental health funding and for the drive for parity as it negotiates the current and future health accords with the provinces. Future funding should apply a parity lens that ensures any federal funds are at par.

#### **SSC Advocacy Report -Florence Budden**

#### Recommendation 2

That the federal government increase investment in supportive housing for people with mental illness to better meet the current demand and to improve system coordination.

Supportive housing offers people with mental illness many opportunities for living independent lives, while having access to the supports and services they need to treat their mental illness. However, the overwhelming demand for supportive housing and lack of supply means that many wait for years to be able to live independently while also having the supports they need. In many instances, people who would be well served in supportive housing aren't able to access these life-changing services because of the lengthy wait times, brought on by the extreme demand. Increasing investments in supportive housing would allow for increased supply, to be able to meet the current demand, and demonstrate the government's commitment to making sure that all Canadians can access the quality mental health care services that they need, when they need it.

#### **Recommendation 3**

That the federal government invest in diversion programs to divert people with mental illness out of the criminal justice system.

People with mental illness are disproportionately in contact with the criminal justice system—oftentimes because they are unable to access the health services that they need in order to treat their mental illness. Diversion programs would decrease the number of people with mental illness in the criminal justice system, therefore reducing the burden on our criminal justice system and making sure that people with mental illness are treated by the professionals they need to be seen by, instead of criminalized for illness that is not their fault.

#### Recommendation 4

That the federal government provide funding to improve and expand respite care for people caring for those with mental illness.

Although the caregiving relationship has notable benefits for both the caregiver and the individual, there are many challenges and risks that come along with it. Those in caregiver positions often face increased financial costs, either because of increased costs of providing care at home, or because of lost wages due to needing time off for providing care. Additionally, there are significant personal challenges that come along with providing caregiver services. Increased funding to improve and expand respite care of people in caregiver positions would allow for more services and supports for people with mental illness, and allow for their caregivers to share some of the responsibilities of care.

Florence Budden Mental Health Advocates News Conference - October 3, 2023



# SSC TREASURER'S REPORT -Richard Beachey

I am pleased to report on the Schizophrenia Society of Canada's financial position for the year ending March 31, 2024.

Revenue for the year was \$ 1,137,612.

Expenses were \$ 865,268.

Total net assets: \$ 2,574,414.

It is encouraging how healthy this organization is financially. This is due to significant contributions of donors and bequests that the SSC has received. I wish to thank our CEO, staff and Board Members for the opportunity to serve on the Board. A copy of the SSC's audited Financial Statements for the year ending March 31, 2024 can be found at <a href="https://www.schizophrenia.ca">www.schizophrenia.ca</a>.

# The Schizophrenia Society of Canada Foundation

2023 2024 ANNUAL REPORT

# 2023-2024 SSCF BOARD OF DIRECTORS

Florence Budden (Chair), Nova Scotia Richard Beachey (Treasurer), Ontario

Dr. John Gray, British Columbia

Dr. William Honer, British Columbia

Dr. Trina Montreuil, Quebec

Dr. Tania Lecomte, Quebec

Hazel Meredith, British Columbia

Gregory Zed, New Brunswick

Chris Watkins, Alberta

# A Message from the SSCF Chair, Florence Budden and Chris Summerville, CEO

The SSC Foundation was established in 1994 when the late Dr. Michael Smith made a generous donation of half of his Nobel Prize Laureate monies to the SSC. The donation helped form an endowment fund to which others could contribute and support research. We are forever grateful for Dr. Smith's generosity. His legacy is an inspiration to others to invest in research initiatives.

The Foundation also has another research fund which is called the General Research Fund which can be utilized for psychosocial research.

Research to better understand the biologic basis, psychosocial determinants, as well as pharmacological and non-pharmacological treatment options for schizophrenia is absolutely vital. The SSC Foundation is committed to fostering and supporting research in all areas related to schizophrenia (e.g. biological, psychological, and social) to ensure that recovery is possible.

The SSCF looks forward to fostering out existing research partnerships and establishing new opportunities to advance research into causes, functioning and cure for schizophrenia.

Highlights of the pass year include the following:

The 2nd annual meeting of the Canadian Network for Research in Psychoses and Schizophrenia (CNRPS) was held in Toronto June 9 and 10. The SSC Foundation had 7 people with lived experience and family members attending as well as board members Florence Budden and Chris Watkins, and our CEO. Their feedback was very positive and optimistic about the CNRPS. Over 100 were in attendance from across Canada. Updates from committees were heard and numerous workshops held. One of the main questions posed was, "What do we want research to be about as to psychoses and schizophrenia?" Also, "How do we work together collaboratively to secure funding."

The Canadian Consortium for Early Intervention in Psychosis (CCEIP) and the SSC Foundation agreed to once again collaborate together in creating studentships for this fiscal year. CCEIP provided the administrative support. It was agreed that the Graduate Studentships for Research in Schizophrenia and Psychosis would be:

- One PhD Studentship @\$21,000/year for 2 years (total of \$42,000)
- Two MSC Studentships @\$15,000/year for 2 years (total of \$60,000)

Finally, the SSC Foundation is committed to fostering and supporting research in all areas related to schizophrenia (e.g. biological, psychological, and social) to ensure that those living with early psychosis and schizophrenia achieve their potential.



# SSCF TREASURER'S REPORT -Richard Beachey

I am pleased to report on the Schizophrenia Society of Canada Foundation's financial position for the year ending March 31, 2024.

Revenue for the year was \$ 216,511.

Expenses were \$55,526.

Net assets for the Michael Smith Research Fund: \$1,414,179.

Net assets for the General Research Fund: \$ 246,652.

Total net assets: \$ 1,660,831.

I wish to thank our CEO, staff and Board Members for the opportunity to serve on the Board. A copy of the SSC Foundation audited Financial Statements for the year ending March 31, 2024 can be found at <a href="https://www.schizophrenia.ca">www.schizophrenia.ca</a>.



The Schizophrenia Society of Canada: Who We Are What We Stand For How We Want to Make a Difference

#### OUR MISSION STATEMENT

Build a Canada where people living with early psychosis and schizophrenia achieve their potential.

This mission statement describes the SSC's core purpose and function as an organization and our unique contribution as we strive to achieve our vision. The mission is not exclusive to those who we serve but should be embraced by all Canadians. We are seeking to build a geography with less prejudice and stigma with the goal of reducing discrimination and increased social inclusion of those we represent.

The phrase in the mission statement "people living with early psychosis and schizophrenia" was clarified as composing two groups:

- 1. The person living with the mental illness.
- 2. The family members and friends living in association with schizophrenia.

Again, this statement **encompasses both individuals and families** by saying "people living with early psychosis and schizophrenia."

And the focus is on helping them to be their best selves, whatever that might be, that's why we went with "achieve their potential," so that it is open-ended and many people can see them-selves there, and it is achievable, yet aspirational. This statement is deliberately flexible on the "how" so we have room to make it our own and move forward in a variety of ways. The goal of recovery is achieving one's potential in spite of limitations associated with a mental illness and living a satisfying life with the support of family, friends, service providers, and the community at large.

### **OUR TARGET AUDIENCE**

Our target audiences serve as lenses for the design of the mission and brand tools. They are ways for SSC to think about for whom the mission and brand are defined. We concluded that our target audience includes:

#### Such as CMHA, Mood Disorders Society Canada, Mental Other National Mental Health Commission of Canada, Canadian Centre on **Health Organizations** Substance Use and Addiction, Canadian Consortium for Early Intervention in Psychosis, PSR Canada, and members of the Canadian Alliance on mental Illness and Mental Health. (Such as MPs, Senators, and Deputy Ministers.) We People or groups who should target politicians connected to mental health can influence policy regardless of political affiliation, keeping in mind that and/or funding Senators hold a longer term and Deputy Ministers handle the money. These present opportunities for donations and increased Corporate/Employer awareness. Organizations Younger audiences tend to be more receptive to diverse Younger Audiences ways of understanding and discussing mental health. Younger audiences of the general public are the SSC's priority. There is a need to bring the thoughts and influence of Millennials and Generation 7 into the work of

SSC.



## **OUR DIFFERENTIATING BRAND COMPETENCY**

Transforming how people think, with knowledge and youthful enthusiasm.

Differentiating Competency is something that an organization is really good at, or admired for, address the needs of early that other's lack. As a National Mental Health Organization SSC millennials who have parents feels that its differentiating competency is:

Knowledge speaks to the content we offer that is personcentred, family engagement oriented, strengths based, and recovery focused.

Youthful enthusiasm speaks to our attitude. We desire to psychosis families and living with schizophrenia.

We have come a long ways in our understanding of early psychosis and schizophrenia and its heterogeneity from one person to another, including treatment options, environmental and ethnocultural influences.

The lived experience of the person, the lived experience of families are diverse. A knowledge of various demographics is important. For example, millennials who are becoming caregivers to their baby-boomer parents. SSC wants to be transformative and also be seen as transformative in how people think through our knowledge and youthful enthusiasm.

## **OUR BRAND CHARACTER**

An inspirational visionary.

Our brand character is a statement that describes the SSC's aspirational personality of the brand. If SSC had a personality, what would it be? As a leading national organization we want be known as an inspirational visionary. With schizophrenia been the most stigmatized mental illness, we want to communicate a vision of hope! Hope changes everything.



#### **OUR BRAND ESSENCE**

Conviction that things can be better

Brand essence is the heart and soul of the brand, or the brand's most fundamental nature or quality. It is the ingredient without which, all other aspects of the brand would fall apart. SSC lives by the conviction that a recovery-oriented and person-centred mental health system would serve individuals and families much better as the emphasis would not just be on symptom reduction but helping the person to live a quality of life in the community.

This applies to people impacted by early psychosis and schizophrenia, but it is also a deeper idea than that. It is a world view, a philosophy. It is the heartbeat of SSC as a national leader. It's the key message of our advocacy. When we create better mental health care in partnership with primary health care and social health care, then we can "Build a Canada where people living with early psychosis and schizophrenia achieve their potential."

Conviction that things can be better

An inspirational visionary

Transforming how people think, with knowledge and youthful enthusiasm

# SSC CORE VALUES

The SSC values provide further clarity on what the Society stands for and what it sees as important we seek to "Build a Canada where people living with early psychosis and schizophrenia achieve their potential."

- Early psychosis and schizophrenia and are medical illnesses that, like other medical illnesses, have variable expressions and effects of symptoms, function and response to treatments.
- Early psychosis and schizophrenia are caused by a number of different factors, from multiple genetic and environmental factors.
- The SSC fully supports the important role of research in all areas related to early psychosis and schizophrenia and (biological, psychological, spiritual, and social determinants of health, etc.).
- Persons with early psychosis and schizophrenia are entitled to personcentred, recovery-focused, efficient multidisciplinary and integrated evidenceinformed treatments and community support services.
- Persons at the early phases of their illness are entitled to real secondary prevention (early intervention and treatment) through specialized first episode psychosis clinics and their collaborators.

- Persons at the early phases of their illness are entitled to real secondary prevention (early intervention and treatment) through specialized first episode psychosis clinics and their collaborators.
- Persons with early psychosis and schizophrenia and psychosis are to be included as full citizens in accessing education, employment, housing, medical services, recreation and social supports.
- Whenever possible families are essential partners in the care and the treatment and recovery plans of persons with early psychosis and schizophrenia, and deserve respect and support.
- Persons with early psychosis and schizophrenia must be included in their treatment planning, care and recovery plans using a shared decision approach.
- Persons with early psychosis and schizophrenia and their families are not to be blamed for this illness.

#### CONTACT

For more information on the Schizophrenia Society of Canada and the Schizophrenia Society of Canada Foundation, please contact us at:

Mailing Address: Schizophrenia Society of Canada 103 Harvest Drive Steinbach, MB R5G 2C6

For help and assistance call Tel: 1 (204) 223-9158

For Donations call our Toll-Free Number: (855) 927-3880

Tel: 1-204-320-3188 Fax: 1-204-320-5441

Cris Summerville, CEO Chris@schizophrenia.ca PO Box 29113 RPO Eaton Place

Winnipeg, MB R3C 4L1

Email: info@schizophrenia.ca Website: www.schizophrenia.ca

Facebook: @SchizophreniaSocietyCanada

Twitter: @SchizophreniaCa

Hope changes everything.





# IMPACT REPORT

# **ACKNOWLEDGING THE LAND & BEYOND**

We would like to acknowledge the land upon which we live, work, and play. As a national project we recognize that our work takes place in communities across different lands and territories.

We invite you to take this time to reflect upon your positionality and the lands that you are on in Turtle Island. You can view a traditional territory, language and treaties map created by <u>Native Land Digital</u>, a registered Canadian not-for-profit organization. You can use the map by entering your address or navigating and clicking around on the map.



Our Youth Action Committee members created this awesome video. Please take a few minutes and <u>watch it here.</u>





"This was a brilliantly executed land acknowledgement. Miigwech."

# INTRODUCTION



There are so many competing claims and questions out there about the risks and potential benefits of cannabis use. Is cannabis harmless? Does cannabis cause schizophrenia? How can I start a conversation with my teen about cannabis use? Is cannabis a gateway drug? Can cannabis help with anxiety symptoms? How can I use cannabis more safely? It can be hard to navigate through all the information out there and find trustworthy, evidence-based youth and family-friendly resources.

That's where our project comes in; Cannabis and Mental Health is a project by the Schizophrenia Society of Canada (SSC). Created for youth by youth, and supported by our scientific and strategic advisors, the Cannabis and Mental Health Project includes a free <u>online course</u> and <u>mentor guide</u> with activities for educators, peer support and youth workers, guardians and youth allies.

The Cannabis and Mental Health Project offers a suite of evidence-based, engaging resources that address the relationship between cannabis use and mental health and explores a range of issues relevant to youth and families. It explores topics like: understanding why people choose to use cannabis, its impact on adolescent brain development, the history of cannabis prohibition and the impact of cannabis legislation on diverse communities.



## CONTEXT



In the 6 years since the legalization of cannabis, evidence indicates the context of cannabis use among youth is changing, and that there's an ongoing need to engage youth in credible, realistic, and relevant initiatives that are informed and co-developed by youth and their experiences.

The reality of legalized cannabis has shifted the conversations we're having about the relationship between cannabis use and mental health, especially among youth. Canadian youth (aged 15–24) have one of the highest rates of cannabis use worldwide. Research on the impact of legalization on youth use is yielding mixed results: it's highlighting that youth use overall has not declined, and in some instances, has increased. Research also continues to highlight the need for relevant cannabis education targeted to specific age groups, especially youth.

"Increased use among young Canadians is particularly concerning as youth and young adults are more vulnerable to the potential adverse effects of cannabis. The rise in use is accompanied by a corresponding shift toward the consumption of higher-potency cannabis products; this with daily or almost daily use of cannabis can have significant mental health implications."

Dr. Phil Tibbo, President of the Canadian Consortium for Early Intervention in Psychosis, Scientific Advisor to the Cannabis and Mental Health project.

The recently released final report of the <u>Expert Panel on the Legislative Review of the Cannabis Act</u> highlights successes such as the significant reduction in the number of charges for the possession of cannabis and minimizing the negative impact on some individuals from interactions with the criminal justice system.

It also highlights areas of concern with respect to youth: Canada continues to report among the highest rates of youth cannabis use in the world, and cannabis use among young adults has increased. Additionally, the report states that:,

- Young adults (18-24 years old) have the highest cannabis use (38.4%), compared to older age groups.
- Youth feel that there is not enough reliable, unbiased, accurate, and accessible information on cannabis that is tailored to youth.

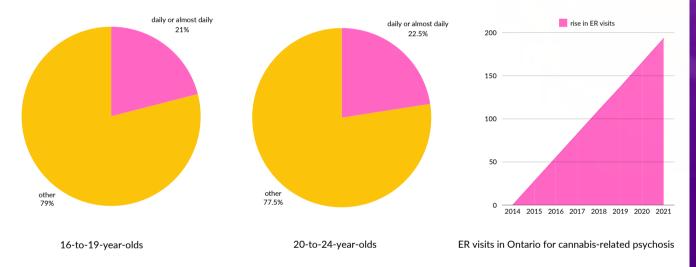


"At SSC we are seeing, on the ground, the struggles youth and their families are facing when it comes to the longer-term risks of cannabis use." It is so important that youth are educated and can make informed decisions about the use of the substance and develop positive coping strategies and resilience." Chris Summerville, CEO of the Schizophrenia Society of Canada (SSC).

#### Recent data

According to Health Canada's 2023 Cannabis Survey:

- 21 % of 16-to-19-year-olds who use cannabis use it daily or almost daily.
- In the 20-to-24-year-old group, that number goes up to 23 %
- ER visits in Ontario for cannabis-related psychosis rose 220% from 2014-21



Recent studies emphasize the need to involve youth in research and public education (including the use of alternative youth-informed methods) to reduce the potential risks and harms of cannabis use and promote positive mental health among youth.

"This is by far the best resource for youth and service providers I have seen in years and years. It is so accessible, relatable, non judgmental, easy to navigate and anti-oppressive. This is the kind of project that deserves funding and resources to continue such great work. I would be excited to see content on more substances and more mental health issues in the same format. Congratulations to the team and all your work on this. I will be referring so many of my youth to this resource."- Workshop participant

# **OUR APPROACH**



SSC has a demonstrated track record of meaningfully engaging diverse youth to co-create best practice-guided knowledge translation and dissemination through its Cannabis and Psychosis and Cannabis and Mental Health projects.

SSC works with key partners, with the support of Health Canada, to develop resources aimed at educating youth and the adults in their lives on safer consumption. <u>Cannabis and Mental Health</u> and <u>Cannabis and Psychosis</u> are free, evidence-based, engaging resources designed with a variety of key audiences in mind.

Centering lived experience and empowering marginalized youth voices has always been essential in our work. We engage and support harder-to-reach youth, especially those who feel their realities aren't reflected by mainstream public health approaches to cannabis and mental health.

"Speaking from my own experience as a young person and in collaboration with peers, we know that cannabis education is most effective when the resources reflect our real-life experiences and maintain a balanced perspective," Vijai Raj, Outreach Coordinator of the Cannabis and Mental Health project.

Youth want public education about cannabis and mental health to incorporate aspects of personal growth and development, meaningful and reflective learning, and opportunities to share findings and experiences with other youth.

Our <u>Youth Action Committee</u> (YAC), comprised of members of diverse communities, BIPOC, LQGBTQ2S+, youth with lived experience and rural youth, are leading our work, and facilitating a holistic approach in developing, displaying, and disseminating educational products by youth, for youth.

Our work builds on a foundation of authentic youth engagement and the effectiveness of peer support models. Central to the project's success, and informed by evidence-based best practice, all messages and materials developed through the project are grounded in youth experience.



# **PROJECT GOALS**



By creating space for learning and dialogue, our resources are designed to support informed decision-making, and encourage teens and young adults to:

- increase their sense of agency over their own health and well-being,
- help themselves and others reduce the risk of harm from cannabis and other substances by focusing on building relationships and life skills,
- and think critically about their ideas and assumptions,
- recognize the wide range of wellness options available, and use harm reduction strategies if/when needed.

The resources are evidence-based and are designed to promote engagement and develop essential skills in health literacy.



"These resources offer an evidence-based and engaging curriculum addressing the relationship between cannabis use and mental health, and explore a range of related issues that are relevant to youth: understanding why people choose to use cannabis, demystifying the endocannabinoid system, examining the theoretical lenses we can use to contextualize the impact of cannabis legislation on diverse communities, and the importance of destigmatizing and harm reduction approaches to substance use and mental health education."

Manager, Mental Health Commission of Canada, June 2022

# WHAT WE'RE WORKING ON



Our team is currently focusing on a range of impactful initiatives, answering communities needs, including:

- engaging leaders within a range of organizations, including educational, recreational, and community-based settings,
- co-creating resources in a format relevant and accessible to young people and those who support them, including parents, educators, and service providers.

WORKSHOPS	The Cannabis and Mental Health team also offers free, customized Workshops to support youth allies, educators, clinicians, family and community members in using the resources to enable critical conversations about mental health and substance use. The activities offer fun ways to help youth build resilience and skills to stay balanced and thrive, now and in the future.
ASK THE EXPERT	Our Ask the Expert Series is a virtual event where we invite people with lived experience and experts on all things cannabis and mental health to share their knowledge with Canada!
BUDDING PROJECTS AWARD	Budding Projects Award of up to \$2,000 for youth-led projects aimed at promoting mental wellness for young people with experience and/or insights about cannabis use in their communities.
COMMUNITY MURAL PROJECT	We partnered with Myths and Mirrors and 2 Indigenous youth to bring a community mural to Ryan Heights in Sudbury Ontario! The mural celebrating mental wellness, harm reduction, and education and has a QR code that links to our website. Photos here.
KNOWLEDGE PRODUCTS	Along with our Cannabis & Mental Health Course and Mentor Guide, our team is always creating new content! Check out our "Where do you stand?" video here.
IN THE MEDIA	Our team of Strategic Advisors and Youth Action Committee Members often are asked to be interviewed. Check out our most recent engagements here, under Blogs + Articles.

# BY THE NUMBERS





Canadian website visits 2022-2024

# **OUR REACH and IMPACT**

We are created by youth for youth. From 2022 to July 2024, 50+ Canadian youth have created our resources. Our strategic and scientific advisory teams ensure that our resources are evidence-based and current.

Our numbers support the need; for a full breakdown, click here.



course sign ups 2022-2024



workshops delivered 2024



organizations attended workshops, serving over 5,000+ youth. 2022-2024

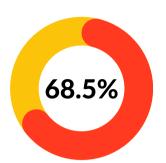




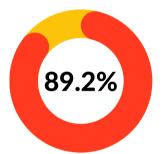
# **BY THE NUMBERS**



Over **5,000** folks have engaged with our website survey. This is what they report:



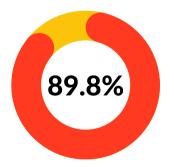
said they have and would implement the tools needed to use cannabis in a safe way;



of participants found the website helped them find answers to their cannabis and mental health-related questions and/or concerns;



say they learned more about how to reduce harms and risks associated with cannabis use; and



said they would likely or very likely recommend the website to a friend or peer.

For more details about the website survey and responses, click here.

# **OUR COMMUNITY**



Our resources are featured and trusted by diverse organizations from across Canada that support youth and harm reduction, including the following: Please reach out if you would like to add us to your resources!

- Big Brothers and Sisters of Canada
- Bloom Zine
- CAMH
- Canadian Nurses Association
- Choices for Youth
- CSSDP
- DrinkSmart
- Drugs Free Kids Canada
- Foundry BC
- Get Sensible
- Government of Yukon
- Metis National Council
- MHCC

- Ontario Cannabis Stores
- PHE Canada
- SideSchool
- TDSB
- The Rural Health Network- Clarity on Cannabis
- <u>Tillicum Lelum Aboriginal Friendship Centre</u>
- Toronto Metropolitan University
- University of New Brunswick
- University of Quebec
- YMCA YCAP
- York University
- YouthRex















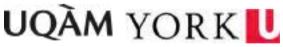


































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