



United Way
Bruce Grey

Give. Volunteer. Act.

Mental Health and Addictions Task Force

Francesca Dobbyn
Executive Director

April 19th 2022 - Zoom



Salvation Army - Community Services

- Locations in Hanover, Owen Sound, Port Elgin and Wiarton
- Each are autonomous organizations so specialized programs vary location to location
- Application and documentation of income status required to maximize supports



Salvation Army – typical services

- Food Bank – once per month, 3-5 days of food
- Income Tax Clinic(s)
- Christmas assistance
- Emergency relief in food, clothing and household furnishings - may also be able to assist in personal hygiene items such as incontinence supplies.
- Services also include assistance with budgeting, form filling and referral to other community agencies as needed.



OSHaRE

Offers meals to whomever requests one.

Pandemic operations: Provides a take-out lunch and supper on weekdays and a bagged lunch on Saturday.

Non-pandemic operations: Sit down evening meal, with seating capacity for 150 (rotating)



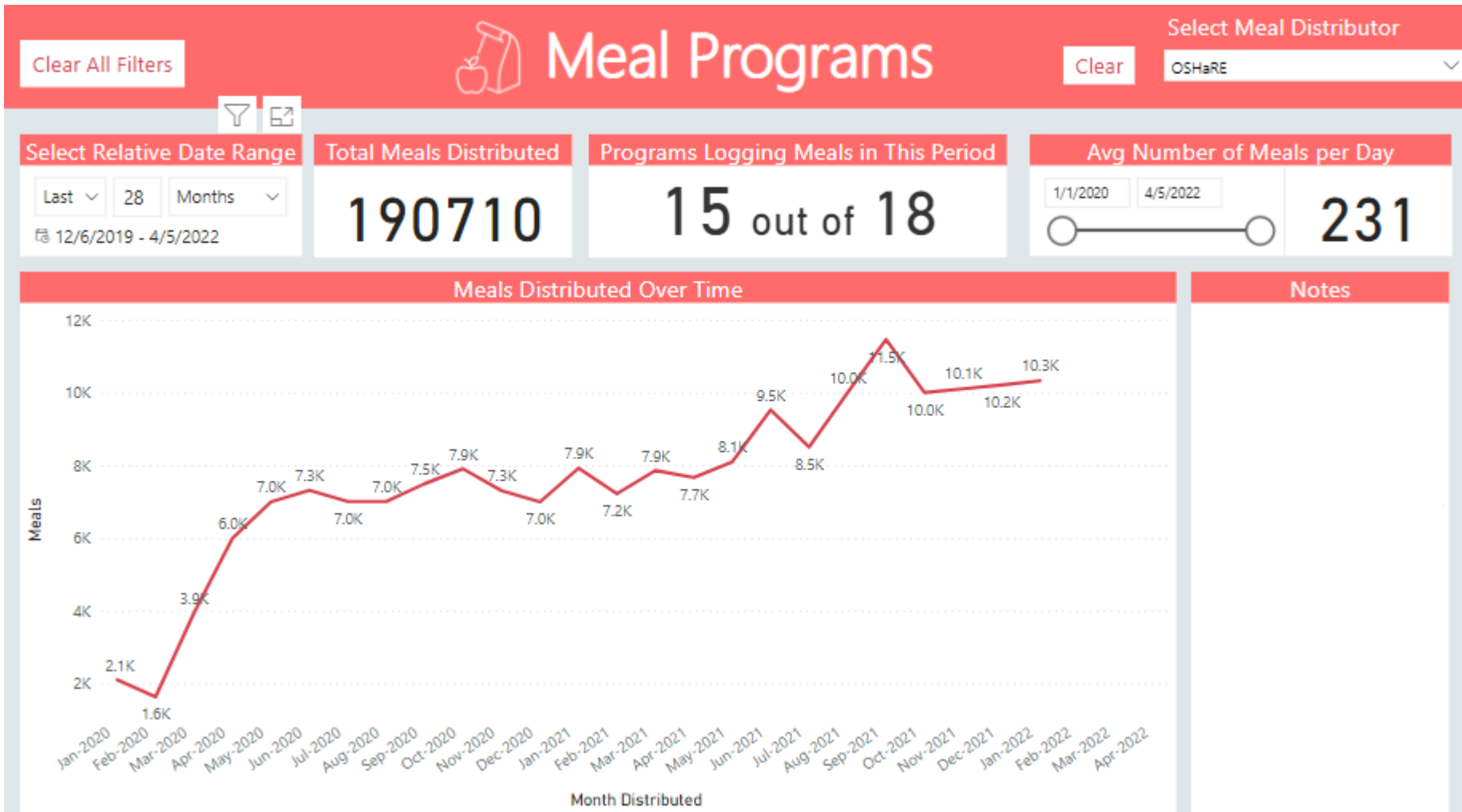
Above and beyond

- Provided 12 731 “Meals to Motels” for people without housing that were sheltered in motels May 2020 to September 2021.
- Provided meals for people isolating with Covid-19 during the Delta outbreak June and July 2021
- Provided meals to the Rooming House Delta outbreak June of 2021

Change starts here.



190 710 meals served January 2020 to February 2022





Mental Illness

Often defined by behaviours, not diagnosis

Causes are varied – medical and situational

Not visible to the medical system

Diagnosis defines supports available

What is preventable or recoverable **vs** what can be managed **vs** irreversible and chronic

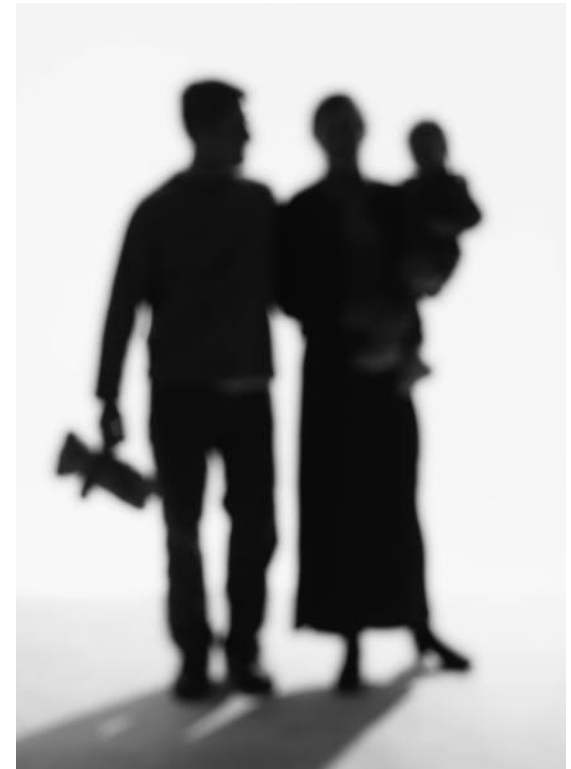
What is episodic vs ongoing? How do we prevent episodic from becoming chronic?



Episodic -> Bob hits a bump in the road

Employed, manages budget,
but there are no savings, no
benefits

Rents a house from a small
landlord





Chronic -> Suzie has depression

Employed, great benefits

Supportive employer

Owens a small house, budget is tight
but manageable while on LTD

Private treatment covered by benefit
program

Returns to work 4 months after
treatment with accommodations



Change starts here.



Change starts here.





Medical and mental health

Access to primary care in a timely manner

Dependence upon Emergency Department

Pandemic access to medical system

No adult dental programs

Non-prescription pain management not covered

Care giver burnout/stress

Treatments that are “nice” not covered



United Way of Bruce Grey

Barriers asked to address

1. Referrals to non-OHIP covered services to get FASTER treatment
2. Extreme poverty
3. Identification (birth certificate, Health Card etc)
4. Connectivity – cell phones, internet access, access to technology
5. Access to safe affordable housing
 1. Cost of housing: rent, utilities, insurance, repairs
6. Transportation
7. Wrong door agency access
8. No centralized case management for all needs



Barriers to supporting these requests

- Fear in the community
- Siloed, restricted or designated funding
- Need exceeds funds available
- Dependence upon fundraising to meet the needs
- Focus on 'emergency' needs, not prevention
- Distrust the of autonomy of those seeking supports
- Complexity of need is growing, level of need is growing
- Agency/Program capacity, connectedness



Solutions

Universal Basic Income

- Assist with episodic and seasonal mental health challenges

More 'in community' supports that meet people where they are at

- SOS is a great example