

# MENTAL HEALTH RESEARCH CANADA



**Our Strategic Focus**  
April 1, 2019 - March 31, 2022

# Our Strategic Focus 2019-2022



## WHO WE ARE

Mental Health Research Canada (MHRC) is a national charity dedicated to improving the lives of Canadians living with mental illness, their families and caregivers, and we do this by advancing mental health research that is driven by stakeholders and focused on outcomes.

## OUR VISION

A Canada with the best mental health for all.

## OUR MISSION

To improve mental health in Canada by building collaborative partnerships to advance innovative, stakeholder-driven research.

All projects are put through a collaborative process that ensures sound research methods including thorough dissemination and follow-up. As part of this approach, MHRC works to build the human resource research capacity needed in the field to fulfill its vision. MHRC is committed to funding research that begins with the end user and will have impact in the real world.

## OUR GOAL

To build MHRC into a sustainable organization that achieves its mission through partnerships and the funding of rigorous, innovative and outcomes-focused mental health research.

## MAKING A DIFFERENCE IN THE LIVES OF CANADIANS

We all have mental health.

Mental health is the foundation for our emotions, thinking, communication, learning, resilience and self-esteem. It allows us to form healthy personal and professional relationships, sustain our emotional well-being, and contribute to our workplace and society.

At one point, however, almost every Canadian will experience mental health issues. That's why, at MHRC, we put stakeholders and in particular those with lived experience at the centre of our research process – to advance mental health research that will generate useful knowledge for application in the real world.

## WHAT WE DO

We are a nimble, “open stance” organization, and our work falls into three categories:

- Engaging with stakeholders to understand their priorities;
- Using these priorities to support innovative research with practical application; and
- Managing the entire research process, from shaping the call to sharing the outcomes.

## OUR STAKEHOLDERS

Mental illness is the disruption of the normal functioning that leads to mental health conditions. It has affected or will affect 50% of Canadians by the time they have reached age 40. This statistic does not include family members and caregivers. Our stakeholders, with a close connection to our work, include:

- **PEOPLE WITH LIVED EXPERIENCE** – people who have or have had mental health issues.
- **FAMILIES AND CAREGIVERS** – people directly impacted in the care and support of those with mental health issues.
- **COMMUNITY GROUPS** – the ecosystem that supports and represents those impacted by mental health issues.
- **THOSE AT HEIGHTENED RISK** – including Indigenous groups, LGBTQ+, racialized groups and others.
- **RESEARCH COMMUNITY** – researchers, institutions, associations, centres and hospitals.
- **CANADIAN WORKPLACES AND ASSOCIATIONS** – leaders, managers and employers who benefit from and aspire to cultivate healthy workplaces and policies for Canadians.
- **GOVERNMENT** – federal and provincial bodies that focus on health and mental wellness for Canadians.
- **DONORS AND FUNDING SOURCES** – our partners who help to fund the research of MHRC.

## OUR HISTORY

MHRC has evolved from the Ontario Mental Health Foundation (OMHF), which was established over 55 years ago and was a leading funder of mental health research in Canada.

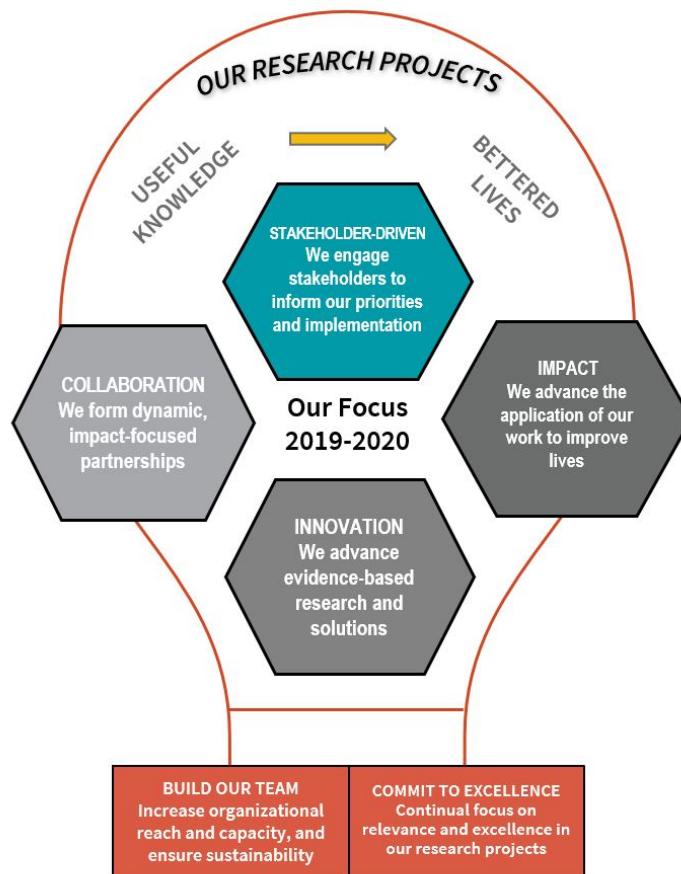
This experience, along with the continuity of some members of OMHF’s Board of Directors being on MHRC’s Board, means that MHRC is well-positioned to immediately impact the research landscape in Canada, with capacity to evaluate and support transformative, stakeholder-driven research projects.

OMHF had funded mental health research as a special operating agency of the Ontario government, and in 2016 was recognized by a RAND Europe study as being in the top 100 funders worldwide. From 2006 through 2016, OMHF funded 332 research projects totalling more than \$34 million.

## OUR STRATEGIC FOCUS

Our focus, strengthened by organizational growth and a commitment to excellence, will be:

- **STAKEHOLDER-DRIVEN:** We engage stakeholders to inform our priorities and our implementation.
- **COLLABORATION:** We form dynamic, impact-focused partnerships.
- **INNOVATION:** We advance evidence-based research and solutions.
- **IMPACT:** We advance the application of our work to improve lives.



## HOW WE WILL MEASURE OUR SUCCESS

- ✓ We engage people with lived experience in our work and decision-making.
- ✓ We form collaborative, impact-focused partnerships annually.
- ✓ We secure funding partners for evidence-based research and projects.
- ✓ We identify and help to scale innovative projects and solutions.
- ✓ We ensure our work is accessible for practical application.

## WHY OUR WORK IS IMPORTANT

- One in five Canadians will experience mental health problems in any given year that will ripple through their life, affecting loved ones, caregivers and communities.<sup>1</sup>
- In any given week, at least 500,000 employed Canadians miss work due to mental health problems.<sup>2</sup>
- By 2030, depression will be the leading contributor to the burden of disease globally.<sup>3</sup>
- The economic costs of mental illness in Canada – health care spending and lost productivity – were estimated at a minimum of \$50 billion per year. This cost doesn't include other considerations such as the impact on health-related quality of life, which the same study estimated at being an additional \$28 billion.<sup>4</sup>
- Over 30 years (2011-2041), the total cost to the Canadian economy will have added up to more than 2.5 trillion.<sup>5</sup>
- There are groups who face greater risk of mental health issues due to social determinants of health (such as discrimination and poverty), and their voices are often unheard in developing research goals. For example: LGBTQ+ youth face greater risk of suicide and substance abuse; First Nations youth are 5 to 7 times more likely to die by suicide than non-Indigenous youth; and suicide rates for Inuit youth are among the highest in the world, at 11 times the national average.<sup>6</sup>

For more information, visit

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

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<sup>1</sup> Canadian Mental Health Association. (2013). *Fast Facts about Mental Illness*. Toronto, Canada.

<sup>2</sup> Centre for Addiction and Mental Health. (2019). *Mental Illness and Addiction: Facts & Statistics*. Toronto, Canada. Retrieved from <https://www.camh.ca/en/driving-change/the-crisis-is-real/mental-health-statistics>

<sup>3</sup> World Health Organization. (2013). *Mental Health Action Plan 2013-2020* (4-page flyer). Retrieved from [https://www.who.int/mental\\_health/action\\_plan\\_2013/mhap\\_brochure.pdf?ua=1](https://www.who.int/mental_health/action_plan_2013/mhap_brochure.pdf?ua=1)

<sup>4</sup> Mental Health Commission of Canada. (2013). *Making the Case for Investing in Mental Health in Canada*. Toronto, Canada.

<sup>5</sup> Ibid.

<sup>6</sup> Government of Canada. (2019). Retrieved from: <https://www.canada.ca/en/indigenous-services-canada/services/first-nations-inuit-health/health-promotion/suicide-prevention.html>