

SPECIAL  
POINTS OF  
INTEREST:

Why do people become homeless?

- 66% are unable to afford rent
- 34% due to relationship breakdown
- 26% due to evictions

Why can't people find or maintain housing?

- 68% find the cost of rent too high
- 27% cannot find suitable housing

Source

<http://is.gd/azodut>  
(shortened link)

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# Home on the Hill

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## From De-institutionalization to Building Community

*Kathleen Mochnacki*  
Director and Board Secretary

In the 1960s Canada began a policy of de-institutionalization which was intended to remove mentally ill persons from the institutions to which they had been sent and to integrate them into society in the belief that community living is conducive to a person's growth and development. In reality de-institutionalization was driven by a number of other factors including an awareness of the conditions and negative treatment of people living in these institutions, legal challenges to the treatment they received and the introduction of psychotropic drugs that

were able to manage psychotic episodes.

However, the major factor pushing de-institutionalization was saving cost by emptying the institutions and sending mentally ill persons back into the community. The policy worked on the assumption that community supports would evolve to compensate for the removal of institution-based supports.

The inadequate community-based support services which were implemented after de-institutionalization were not planned or intended to provide support to family caregivers. They were actually intended to replace the family just as the

institutions were originally created to replace the family. Family members were often perceived as intruders when they visited their family member. Even today, the voice of the family is marginalized. The Mental Health Commission of Canada has no family caregiver on its advisory council.

De-institutionalization is still occurring. Hospital beds are being closed. According to a 2011 report by the Centre for Addiction and Mental Health the average length of stay in psychiatric hospitals has dropped by 60% since 1994. The number of long-stay psychiatric beds in the GTA has

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## Director Profile—Angelo Minardi, BA, MRE

The current and future editions of the newsletter will include a profile of one of our director or volunteers. This edition includes the following profile of Director Angelo Minardi. Angelo is the facilitator at our Speakers' Series. This year he will be helping to create presentations that we will be making in order to raise

awareness of our activities and goals.

Angelo's personal Mission Statement is: *To provide hope and faith formation to the people and communities I serve. To always be a positive presence in the communities I serve and to provide sound, faith filled direction in one's life and*

*ministry.*

Trained as a Spiritual Director, Angelo is employed by Dufferin-Peel Catholic District School Board as a Chaplain where he is responsible for the Spiritual and Human Development of teachers and students in the school com-

continued on page 4 . . .

# Police Encounters with People in Crisis

Those of us with family members suffering from mental illness often live with anxiety, if not fear, that our loved one will have a deadly encounter with police. Toronto police Chief Bill Blair engaged the

Honorable Frank Iacobucci to conduct a review of the use of lethal force by Toronto police with a particular focus on encounters with persons who are or may be emotionally disturbed, mentally disturbed

or cognitively impaired. The report and executive summary are available online at:

<http://is.gd/yijede>  
(shortened link)

## Speaker Series

### PROMOTING HEALTHY LIVING: BALANCED NUTRITION & PHYSICAL ACTIVITY FOR MENTAL HEALTH

Home on the Hill Supportive Housing hosts a presentation sponsored by *The Schizophrenia Society of Ontario* at St. Mary's Anglican Church, 10030 Yonge St., Richmond Hill at **7:00 p.m., September 10, 2014.**

Admission is free.

The presentation will be by: Dr. Michael Sarin, MD, FRCP, CDE, Associate Professor, Department of Medicine and by Maria Ricupero, RD, CDE, MHSc, Registered Dietician, UHN/Toronto Rehab Institute.

### OVERVIEW

Research has shown that the factors contributing to weight gain, loss and management are variable and complex, going beyond just diet. This is particularly true for people living with mental illness who are

being treated with antipsychotic medications. While these medications can be effective in the management of symptoms, they can also cause patients to be at a greater risk of weight gain, high blood pressure and associated health complications. This education session will present the metabolic influences of physical activity and its contribution to weight management and overall health for people living with schizophrenia and psychotic illness.



## Out of the Cold program at the Jaffari Islamic

The Jaffari Community Centre has been involved in the *Out of the Cold* program for the past couple of years. Part of its interfaith program, they provide shelters for the homeless

within York Region. *Out of the Cold* has not only made positive and significant impacts on those attending, but it has also helped to foster peaceful relations within the community in

Toronto.

Youtube video:

<https://www.youtube.com/watch?v=4zkXXv6Y6bY>

Police,  
Speaker  
Series,  
Out of the  
Cold

310-2673

1-888-777-0979

416-408-4357

# Mind Body and Soul

## THRIFT STORE OPENING

Mind, Body and Soul Self-Help Support Centre has moved to 10165 Yonge Street, Unit 3 in Rich-

mond Hill.

The centre will accommodate a variety of facilities: a coffee shop, a lounge and a thrift shop as well as a board room and program stu-

dio that can be rented to like-minded community based agencies for program purposes. The centre will be opening in August. Partnering with Family Caregivers.

## Your Donation Helps

Home on the Hill supportive Housing has two objectives:

“To provide and operate non-profit residential accommodations and incidental facilities for persons of low or modest income including seniors and disabled persons.”

and:

“To provide training, counselling and other support services to people with disabilities.”

Our focus is on persons with mental illness and their family caregivers.

Our long term objective, to provide affordable housing, will require

substantial investment from government and the public. We are seeking government support and will be conducting major fundraising drives in the future. In the meantime we are continuing the Speakers Series in which experts in the treatment of mental illness are providing information to family caregivers and others. We are providing and developing support programs in collaboration with *Mind Body and Soul*, a local charitable organization. Although the speakers, the members of the board of directors and volunteers are not paid for their services we do incur expenses for

supplies, rent and specialized services.

In order to continue existing services and to develop new and expanded services we need your help. Please consider a donation to Home on the Hill Supportive Housing as part of your charitable giving.

Home on the Hill Supportive Housing is a registered charity, number 84686 3082 RR0001. Donations are tax deductible.

You can donate by telephone, mailing a cheque, or give online at *Canada Helps* — shortened link: <http://is.gd/ajowet>.

**Although the speakers and volunteers are not paid we do incur expenses.**

## Director Profile—Angelo Minardi, BA, MRE

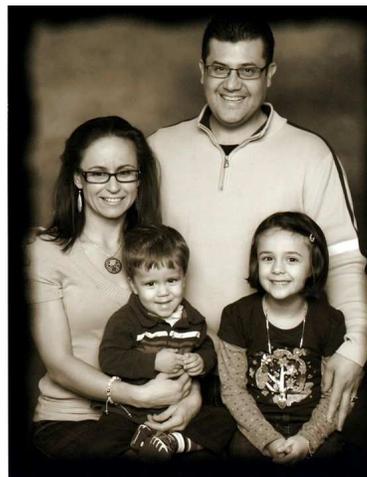
community, and for the over all Pastoral Care of the community.

He has been involved in Street Patrol—feeding the homeless on the streets of downtown Toronto, offering friendship, care and dignity to the most marginalized; Dr. Simone’s Warehouse—providing clothing, medicine, food to children in the third world; leading prayer groups and facilitating retreats.

He is a member of the Catholic School Chaplains of Ontario (CSCO).

At St. Augustine’s Seminary he studied Old/ New Testament, Morality & Ethics, Education Studies, Church History, Sacraments, and Spiritual Direction; and with Dufferin-Peel Catholic District School Board, Suicide Intervention, Bereavement Training/ Facilitation, Religious Education/ Instruction.

He is a Lecturer/Instructor for Additional Qualification Courses with OECTA/ UoIT.



Angelo and his family



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### Vision

A caring home environment that projects a sense of belonging, growth and security for all persons.

### Mission

To provide a quality home environment for people living with serious mental illness in our community, by changing the way people are supported.

## Building Community continued from page 1

dropped from 3857 beds to 761 beds between 1960 and 1994. By 2001 the Ontario Government had closed 500 of the province's 2900 beds without compensating increases in the funds for community-based mental health services.

The current difficulties experienced by families, caused by premature discharge before the patient is stable and has to be readmitted, is a direct result of bed shortages and the policy of de-institutionalization.

On January 17, 2012, Home on the Hill Supportive Housing held a family focus group to learn what families wanted in terms of supportive housing for their loved ones. Here is a synopsis of what they expressed.

Participants indicated that their son/daughter would like an independent unit. Some participants felt that congregate food preparation and dining would be beneficial but it would be important for residents to have the facilities to prepare food in their own

unit.

Participants also expressed an interest in having common spaces for programming, group activities and one-on-one activities. Some participants envision the building interacting with the community where programs including community residents would take place. Art, music, exercise programs and other activities would include community residents.

Some of the family caregivers would like to live in the residents; others wished to contribute to its upkeep.

What the participants demonstrated that evening resembles the "cohousing model" which came out of Denmark in 1988. Cohousing is as much about process as it is a new housing model. The key principles about cohousing are that of a sense in community, participation, shared facilities, affordability of housing and building managed by residents. Residents work together as a collective and share ownership of common areas.

Scattered housing, which can be accommodated in the cohousing model, may be an attractive option for persons with mental illness as they may not want to be segregated with other persons with similar conditions. Some families might like to have housing and support services under one roof for security reasons. Processes are needed for negotiation, compromise and consensus.

For family caregivers, inclusiveness and social support can be more effective in elevating burden and stress than standard medical care. Grass-roots initiatives, with individuals and their families together with other like-minded people in the community, have the potential to alleviate feelings of exclusion and stigma.

In Canada, there is the Canadian Cohousing Network. A workshop sponsored by Design for Sustainability and Regeneration was held on July 15, 2014 at York University. Interest in developing a cohousing project was expressed.

### Help Lines:

Community Crisis Response Service for individual, family, or friend mental health crisis: 310-COPE (310-2673). Krasman Centre Warm Line 1-888-777-0979 for support from individuals with lived experience with mental health concerns, addiction, and/or trauma. Toronto Distress Centre 24/7 line 416-408-HELP (416-408-4357) — you will speak with a trained volunteer who can provide you with emotional support in response to your crisis or distress.