

# *Growing Together*

Advancing Health Equity in  
Ontario's Community Child and  
Youth Mental Health System

A Provincial Health Equity Strategy



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# Executive Summary

## OUR VISION FOR IMPROVING EQUITY

Our vision for improving equity in child and youth mental health is a transformed community child and youth mental health and addictions system that actively addresses and dismantles inequities and barriers so that infants, children, youth, and families from equity-deserving communities get the mental health supports and services they need.

## OUR PRINCIPLES

**Embracing** collective learning and responsibility  
**Cultivating** shared power, privilege, and accountability  
**Centering** lived experiences with youth and family voice  
**Addressing** structural barriers to systemic change

## STRATEGIC DIRECTIONS

**Create and foster** the conditions needed to advance anti-racism and anti-oppression across the child and youth mental health system.

**Collect and use identity-based data** to drive equitable service delivery and system improvements in child and youth mental health.

**Prioritize increasing diversity** in the child and youth mental health workforce so that the system reflects the diverse communities it serves.

**Advocate for and support** the development and advancement of culturally-adapted and responsive services in child and youth mental health.

## STRATEGIC ACTIONS

Develop a sector-wide EDI commitment statement; identify and build knowledge and capacity; and provide guidance and support to identify and develop EDI standards.

Work with system partners and data experts; build on best practices; and address barriers by developing strategies, policy solutions, and sharing best practices.

Identify capacity-building and education opportunities; prioritize targeted knowledge mobilization and capacity building; and support current and emerging leaders from underrepresented groups.

Prioritize the imperative of EDI in system capacity building; support the development, implementation, and scaling of trauma-informed, culturally responsive services; and build on the standards of youth and family engagement.

## OUR JOURNEY DEVELOPING THE STRATEGY

2020–2021

Setting  
Foundations

2021–2022

Learning  
Together

2022–2023

Engaging &  
Collaborating

2023–2024

Reflecting

2024–2025

Prioritizing



# **Our Vision for Improving Equity**

A transformed community child and youth mental health and addictions system that actively addresses and dismantles inequities and barriers so that infants, children, youth, and families from equity-deserving communities get the mental health supports and services they need.

# Message from the CEO

Children's Mental Health Ontario (CMHO) is committed to addressing systemic barriers and racism within Ontario's community child and youth mental health system. In 2020, a new and brighter light was shone on systematic racism, oppression, and longstanding inequities in Ontario and beyond. Since then, together with members and youth in our network, CMHO has committed to holding conversations and reflecting on those inequities in recognition that, as a provincial association, there is so much more work to do in partnership to advance equity.

When we began our journey to advance equity, diversity, and inclusion (EDI), a focus was initially placed on racial health equity to recognize the deeply rooted and ongoing inequities that racialized communities face when accessing mental health services. Foundational documents such as the Youth Action Committee's (YAC) policy paper on race and mental health and a scan of the sector's organizational practices on racial equity gave us invaluable insights. As work progressed and priorities emerged through consultations, there was also recognition of the fundamental role that social justice and the social determinants of health play in advancing equitable approaches.

***When taken as a whole and executed fully, the strategic directions and related actions anchored in a health equity approach through the Provincial Health Equity Strategy for Community Child and Youth Mental Health will benefit all Ontario children and youth, including those experiencing racism and oppression.***

As an organization and a community child and youth mental health sector, we have been on a journey of learning, unlearning, building, and growing, motivated by the lived experiences of youth and families. We recognize that this strategy is our starting point, and we anticipate that different and more expansive actions will be required as we collectively continue this work. Together, we are committed to building and developing an equitable system for Ontario's infants, children, youth, and families.

CMHO's recently released [Strategic Plan \(2024–27\)](#) highlights our commitment to advocate with and for all those in our system, regardless of their background and intersecting needs, to ensure access to mental health and addictions services and supports. This Provincial Health Equity Strategy marks an important step toward system change and improving child and youth mental health. We look forward to continuing this work through the established directions and related activities of this strategy in collaboration with our sector, youth, families, and system partners.

Tatum Wilson, CEO, CMHO

A handwritten signature in blue ink that reads "Tatum Wilson". The signature is fluid and cursive, with a long horizontal line extending from the end.

# Shared Strategic Commitment

CMHO, the Knowledge Institute on Child and Youth Mental Health and Addictions (Knowledge Institute), and the Lead Agency Consortium (LAC) in Child and Youth Mental Health are committed to creating a high-quality, equitable, and accessible child and youth mental health and addictions system.

To address health disparities and achieve better mental health outcomes for infants, children, youth, and families across Ontario, we must identify, acknowledge, and work towards addressing the impacts of racism and oppression in all its forms, including anti-Black racism, anti-Indigenous racism, and discrimination. Whenever communities, service providers, partners, and those with lived experience work to target the removal of systemic barriers experienced across equity-deserving communities and populations, everyone benefits.

Health equity is created when individuals have a fair opportunity to reach their fullest health potential (Public Health Ontario, n.d.). As system leaders and collaborators, CMHO, the Knowledge Institute, and the LAC acknowledge that a health equity approach is required to address existing barriers and inequities. **Together, we commit to establishing foundations, directions, and associated actions to embed anti-racism and anti-oppression, improve equity, and expand diversity and inclusion in the sector by developing and implementing this Provincial Health Equity Strategy for Community Child and Youth Mental Health.**

This strategy formally articulates our commitment to supporting infants, children, youth, families, service providers, and communities. We recognize the need to embed social determinants of health and intersectional lenses in all aspects of mental health advocacy, public policy, service delivery, and system design.

***“This is a long-term, ongoing journey requiring commitment from leadership at all levels. The journey will be best supported by continuous learning, sustained motivation for change and a commitment to evaluating...”***

[We Journey Together: How Ontario’s Child and Youth Mental Health Agencies are Addressing Racial Equity](#)

# Our Principles

## Embracing Collective Learning and Responsibility

Acknowledging that there are different starting points among child and youth mental health agencies, our strategy emphasizes collective learning and responsibility in advancing health equity. It centres on the deeper and sustained work of shared capacity-building and knowledge exchange across the system with a commitment to decolonization and dismantling long-standing systemic barriers that equity-deserving groups face.

## Cultivating Shared Power, Privilege, and Accountability

Developing trust and genuine partnerships is central to our efforts. Recognizing the importance of equitable partnerships, our approach emphasizes the sharing of power, privilege, and accountability. It highlights the need to address power dynamics and structural barriers, fostering collective responsibility for achieving health equity with a focus on anti-racist and anti-oppressive approaches.

## Centering Lived Experiences with Youth and Family Voice

At the heart of our strategy lies a commitment to centering the lived experiences of infants, children, youth, and families who are affected by mental health challenges and system inequities. It acknowledges that those with lived expertise are the true experts whose insights, knowledge, and wisdom of broader, holistic worldviews guide efforts to design systemic change and system improvement. This approach prioritizes empowerment and meaningful inclusion of these voices to inform decision-making processes.

## Addressing Structural Barriers to Systemic Change

Our strategy underscores a commitment to addressing historical injustices, dismantling systemic barriers, and producing meaningful system change. It prioritizes truth and reconciliation efforts and recognizes anti-Indigenous racism and anti-Black racism as focal points. This approach emphasizes action to address the social determinants of health and underscores the imperative of systemic change to achieve health equity for infants, children, youth, and families from equity-deserving communities.



# **Strategic Directions and Actions**

# Strategic Direction 1

**Create and foster the conditions needed to advance anti-racism and anti-oppression across the child and youth mental health system.**

## **We will:**

- **Develop a shared sector-wide EDI commitment statement** for the community child and youth mental health system and an approach to actively embed health equity and social determinants of health lenses in policy approaches for child and youth mental health.
- **Identify and build knowledge and capacity** using tools, training, learning, and resources on various topics, including targeted training in anti-racism and anti-oppression and continued development of the Community of Practice for sector leaders to advance EDI in their organizations and community.
- **Provide guidance and support** to identify and develop EDI standards and accountabilities for child and youth mental health service providers.

The impacts of systemic racism and oppression are critical system issues for the community child and youth mental health sector to acknowledge and improve. By setting foundations to prevent further harm and enable equitable approaches, we will prioritize developing a coordinated approach to advance anti-racism and anti-oppression across the system, build knowledge and capacity for child and youth mental health and apply an EDI lens in system policy work.

By prioritizing activities that foster the conditions to learn about systemic inequities, we enable the sector to identify, acknowledge, and address the impacts of racism and oppression to prevent the risk of perpetuating and exacerbating pre-existing inequities. Throughout our engagement, CMHO members and racialized youth in our network reflected on the importance of relevant anti-racist and anti-oppressive training as a critical component in foundational learning to foster continuous development at the individual and organizational level to create system impact (The New Mentality, 2018).

# Strategic Direction 2

## Collect and use identity-based data to drive equitable service delivery and system improvements in child and youth mental health.

### We will:

- **Work with system partners and data experts** to identify, prioritize, and develop identity-based data for the child and youth mental health system.
- **Build on best practices**, utilize existing resources, and develop new resources to support implementation and data collection.
- **Address barriers** by developing strategies and policy solutions and sharing best practices for collecting and using identity-based data to improve outcomes and drive system improvements.

Socio-demographic and identity-based data are crucial for understanding health equity gaps and informing actions and interventions to improve health outcomes among those affected by systemic inequities (Canadian Institute for Health Information, 2022). Consistently and uniformly collected identity-based data helps communities and our sectors identify problems, plan, allocate resources, and streamline services to better care for the population (Ontario Association of Children's Aid Societies, n.d.).

Even with a recognition that demographic and identity-based information is key to planning and enabling system improvement, there is a lack of consistently applied data collection approaches in the child and youth mental health sector. CMHO heard from sector leaders, youth, and families that identity-based data can help agencies measure existing inequities, make changes and evaluate progress to improve mental health equity and outcomes. By building on work to date, aligned with broader health system approaches, we will prioritize identifying and collecting data as an essential tool to address barriers that enable inequities and use the data to make service delivery improvements in the system.

*Identity-based data refers to the socio-demographic information about a person, including, but not limited to, their Indigenous identity, race, ethnic origin, sexual orientation, or gender identity.*

*Ontario Ministry of Children, Community and Social Services, 2021*

# Strategic Direction 3

**Prioritize increasing diversity in the child and youth mental health workforce so that the system reflects the diverse communities it serves.**

## **We will:**

- **Identify capacity building and education** opportunities at leadership levels for boards and CEOs on EDI integration in recruitment and retention practices, succession planning, and creating safer and supportive environments for leaders, emphasizing leaders from underrepresented groups.
- **Prioritize targeted knowledge mobilization and capacity building** in the sector through education and sharing of best practices and success stories within and outside the sector for building representative and inclusive leadership teams and organizations.
- **Support current and emerging leaders from underrepresented groups** by creating dedicated spaces to build skills and seek support, mentorship, and professional growth.

With a known link between diverse representation in healthcare leadership and the health and well-being of those being served (Sinha, Chaudhry & Mah, 2013), the imperative of prioritizing inclusive organizational approaches, including diverse leadership, is a significant undertaking when advancing equitable approaches. Prioritizing workforce diversity was a theme that came up frequently in our consultations. As such, CMHO held an additional engagement session to ensure activities were high-impact and actionable as a starting point.

The need for more representative leadership across the child and youth mental health workforce that reflects the diversity of communities served across Ontario was observed throughout our engagement as a priority area. Youth also reflected that a lack of diversity within child and youth mental health agencies is a barrier to feeling heard and comfortable when accessing mental health services (The New Mentality, 2022).

# Strategic Direction 4

## Advocate for and support the development and advancement of culturally adapted and responsive services in child and youth mental health.

### We will:

- **Prioritize the imperative of EDI in system capacity building** by advocating for and supporting the development of resources for child and youth mental health service providers to better serve racialized and underserved groups.
- **Support the development, implementation, and scaling** of trauma-informed, culturally responsive services in child and youth mental health.
- **Build on the standards of youth and family engagement** to raise awareness and engagement opportunities for learning based on the lived experiences and realities of racialized and underserved youth and families navigating and accessing the child and youth mental health system and services.

While Canada's population is becoming increasingly diverse, with Ontario being more diverse than the national average (Statistics Canada, 2022), mental health needs still vary significantly between population groups, such as for racialized, Indigenous and Two-Spirit, and LGBTQ+ children and youth, compared with others (Erbach, Danseco & Porath Eves, 2022; Hop Wo et al., 2020). While many programs and services in community child and youth mental health work to address diverse local needs, including those that are cultural and linguistic, there is an overall lack of culturally responsive services in child and youth mental health in Ontario (Erbach, Danseco & Porath Eves, 2022).

A survey of youth in our youth engagement program, The New Mentality (TNM), found additional barriers in the form of racism, discrimination, cultural insensitivity, and stigma when accessing care (The New Mentality, 2022), and our consultations reinforced the importance of culturally accessible and relevant services in child and youth mental health for those from diverse backgrounds, populations, and identities. Developing and advancing culturally responsive services and learning from those with diverse lived experiences are important priorities in this strategy.

*Culturally responsive services encompass evidence-based programs that are adapted to meet the needs of those affected by systemic inequities and culturally-grounded approaches based on a specific group's values, beliefs, and practices.*

*Bernal et al., 2009; Booth & Lazear, 2015*



# **Our Journey**

Developing the Provincial  
Health Equity Strategy for  
Community Child and  
Youth Mental Health

# Our Journey

Setting Foundations	Learning Together	Engaging & Collaborating	Reflecting	Prioritizing
2020–2021	2021–2022	2022–2023	2023–2024	2024–2025
Partnering to understand current state of child and youth mental health racial equity policies, practices, and strategies.	TNM YAC publishes their policy paper, <i>Adjusting the Spotlight</i> . CMHO launches 4-part webinar series and Community of Practice.	Exploring a Health Equity Strategy for the child and youth mental health sector through focus groups and strategic planning.	Reflecting on work to date and work ahead with members at AGM and Provincial Conference.	Re-engaging members and partners on a Health Equity Strategy for child and youth mental health.

## Setting Foundations (2020–2021)

With commitments made to advance EDI in child and youth mental health, it was TNM's YAC that set the early foundations when they began the development of their policy paper on race and mental health. This work provided youth-led policy recommendations about how to establish racial equity within mental health services across Ontario to ensure that youth who identify as Black, Indigenous, or racialized are prioritized in the system.

At the same time, with the Knowledge Institute, an organizational scan was launched in the sector to better assess the current state of racial equity policies and practices, examine existing gaps, and identify opportunities for improvement. [We Journey Together: How Ontario's Child and Youth Mental Health Agencies are Addressing Racial Equity](#) was launched following a [literature review](#), highlighting the best available research and practices to advance racial equity. The data obtained was a critical early step in identifying the support and knowledge needs that could be addressed provincially in a sector strategy.



## **Learning Together** (2021–2022 and ongoing)

The YAC published and released their policy paper, [Adjusting the Spotlight: Re-centering Neglected BIPOC Youth Voices Surrounding Mental Health](#). CMHO prioritized education and awareness building among our member agencies by providing several foundational learning opportunities, including a 4-part equity webinar series that focused on historical and ongoing inequities in Canada and the impacts on Black and Indigenous communities. An EDI Community of Practice was launched, providing space for members to share information and resources and discuss topics related to equity within our sector. After three years, the EDI Community of Practice has grown to define its purpose with more structure under the leadership of co-chairs while recognizing individual and organizational equity journeys.

## **Engaging & Collaborating** (2022–2023)

Beginning in 2022, CMHO started consultation with the sector, hosting seven focus groups with executive directors, youth and parents/caregivers with lived experience, and senior leaders with regional representation among child and youth mental health agencies, as well as a Francophone session and a session with racialized leaders in the sector. It also included individual key informant interviews. From there, the process moved into strategy development, with four strategic planning sessions used to identify priorities and actions to be included in a sector-wide strategy focused on supporting system-level change and improvement. The [YAC's subsequent reflection document](#), published in 2023, provided an additional resource to guide organizations and individuals in reflecting on their anti-racism work.

## **Reflecting & Prioritizing** (2023–2025)

In 2023, a focus on integrating equity in our approaches, work, and events continued. In 2024, CMHO prioritized finalizing the Provincial Health Equity Sector Strategy. We added two engagement sessions with our equity strategic planning group and released a renewed organizational Strategic Plan. CMHO's 2024-27 Strategic Plan establishes foundational commitments to centering youth and family voice, advancing equity, anti-racism, and anti-oppression, honouring truth and reconciliation, and addressing the social determinants of health.

# Reflecting, Looking Ahead, and Measuring our Progress

Our commitment to building a more equitable system for infants, children, youth, and families across Ontario is primarily driven by the lived experiences of youth and families. Today, when we reflect on early statements condemning racism, as well as the commitments made to improve equity in the child and youth mental health system, we know there is still so much more to do.

In reflection of our work to date, CMHO sought to undertake an inclusive approach to engagement with our sector throughout the strategy's development. Despite efforts to maximize diverse perspectives, the extent and range of insights were not broadly representative of all communities and populations.

As we move forward, there is an ongoing need to better understand and include the perspectives of families and caregivers from diverse communities, address service gaps experienced by Francophone communities, and identify unique challenges for specific populations and intersections with mental health, such as addictions, substance use, and complex needs.



We will actively consider when and how CMHO is best positioned to lead, support, or follow in implementing the strategy and our work going forward, recognizing that members, the Knowledge Institute, the LAC, or other partners may take on these roles. As part of our commitment to honour the principles of truth and reconciliation, we will prioritize learning from Indigenous wisdom and expertise, acknowledging the need for Indigenous-led solutions, and building meaningful relationships with Indigenous partners.

In advancing the directions of this strategy, we seek to address barriers and service system gaps when accessing mental health care and treatment across the continuum of need, including for those who struggle to find treatment that is culturally appropriate, identity-affirming, and responsive to experiences and intersecting needs. We are actively considering the significant influence of the social determinants of health on mental health outcomes for equity-deserving communities as we implement this strategy's directions and related activities.

In year one, we will establish a structure to support implementation planning that includes progress reporting and communication with our members and partners in the sector. We will ensure structures are put in place, working with partners at the LAC and the Knowledge Institute to determine the implementation approach and key milestones to achieve success in moving directions in the strategy forward while also working to adapt and refine approaches to respond to emerging needs.

Ensuring accountability will be a key measure of success for the child and youth mental health sector. Working with our partners, CMHO is committed to advancing the directions and activities above to bring the strategy to life.



# About CMHO

[CMHO](#) is the provincial member association that represents almost 85 community-based child and youth mental health centres across the province. Our member agencies account for the majority of publicly funded child and youth mental health services, serving almost 130,000 infants, children, youth, and families annually.

Our vision is an Ontario where infants, children, youth, and families with mental health needs thrive. As a provincial association, CMHO works in collaboration with members, youth, families, and partners to lead and support provincial system improvement through its public policy work and advocacy.

We believe that policy change and system improvement require priority setting and working in partnership through a provincial systems of care approach. We do this by promoting a coordinated and high-performing system that can provide high-quality, equitable, and accessible mental health services to infants, children, youth, and families in Ontario.

## Acknowledgements

CMHO would like to thank and acknowledge the support and guidance of Dr. Komal Bhasin of Insayva Inc. for partnering with us to lead the consultation process and support the development of the Provincial Health Equity Strategy for the Community Child and Youth Mental Health Sector.

We are thankful for the many perspectives, insights, and reflections captured through our focus groups and strategic planning, including hearing directly from youth and family members. CMHO is especially grateful to the youth in our network who paved the way forward with developing policy recommendations about race in the mental health system—a key foundational piece of policy in our system.

Lastly, this strategy would not have been possible without the support and guidance of CMHO's member agencies across Ontario. The leadership and advice of executive directors from across Ontario's diverse regions were included throughout the engagement process. Our deep partnerships with the Knowledge Institute and the LAC provided the expertise and knowledge to develop a provincial system approach to advancing equity.

# Abbreviations

**BIPOC** – Black, Indigenous, and People of Colour

**CMHO** – Children’s Mental Health Ontario

**EDI** – Equity, Diversity, and Inclusion

**Knowledge Institute** – Knowledge Institute on Child and Youth Mental Health and Addictions

**LAC** – Lead Agency Consortium in Child and Youth Mental Health

**TNM** – The New Mentality

**YAC** – Youth Action Committee

## Glossary of Terms

*The definitions below, sourced from documents at the Knowledge Institute and Ontario Health, help provide a common understanding as we collectively work on creating a child and youth mental health system that is rooted in EDI, anti-racism, and anti-oppression.*

### Anti-Black Racism

The policies and practices rooted in Canadian institutions, such as education, health care, and justice that mirror and reinforce beliefs, attitudes, prejudice, stereotyping, and/or discrimination toward Black people and communities (Ontario Health, 2020).

### Anti-oppression

Anti-oppression refers to actions, theories, frameworks, and strategies that challenge injustices and inequities that occur at different levels in society (e.g., interpersonal, institutional, systemic) and allow certain groups of people to overpower other groups of people (Schutte, Danseco & Lucente, 2022).

### Anti-racism

Anti-racism is the active process of identifying individual, institutional, and systemic racism. It seeks to challenge and change or eliminate racially inequitable outcomes and the structures that sustain inequity (Schutte, Danseco & Lucente, 2022).

### Diversity

Diversity is the wide range of characteristics and attributes across which people differ. This includes visible ways (such as race, gender, and ethnicity) and non-visible ways (such as language, intellectual ability, religion, etc.) (Lucente, Danseco, Kurzawa & Sundar, 2021).

### Equality

Achieving equality requires providing people with the same opportunities and achieving the same outcomes regardless of social, economic, demographic, or geographic characteristics. Equality doesn’t acknowledge that some people have different needs and only works if everyone needs the same things (Lucente, Danseco, Kurzawa & Sundar, 2021).

## **Equity**

Achieving equity requires identifying and addressing unfair barriers to opportunity. Equity can be defined as both a process and an outcome. As a process, equity can be achieved in many ways, such as co-developing with communities the policies and practices that impact their lives or applying an equity lens or framework to programs and services. As an outcome, equity is the absence of differential outcomes based on social, economic, demographic, or geographic characteristics. It is important to note that equity is not the same as equality (Schutte, Danseco & Lucente, 2022).

## **Inclusion**

Inclusion is the authentic action or state of including others. Inclusion involves appreciating the unique differences of others, their skills, experiences, and thoughts. Inclusion creates a sense of belonging and empowers others to participate within a system or organization (Lucente, Danseco, Kurzawa & Sundar, 2021).

## **Intersectionality**

Intersectionality is a framework that recognizes that people are disadvantaged by many sources of discrimination that result in unique forms of oppression and harmful outcomes. Multiple identity markers do not exist independently and are not simply additive (Schutte, Danseco & Lucente, 2022).

## **Race**

Race categorizes people based on physical characteristics, such as skin colour and hair type. It is a socially constructed system of classification of socially dominant groups that reflects the cultural attitudes of colonial Europeans and is not considered to be determined by biology (Ontario Health, 2020).

## **Social Determinants of Health**

The social determinants of health are the non-medical factors that influence health outcomes. They are the conditions in which people are born, grow, work, live, and age, and the broader set of forces and systems shaping the conditions of daily life. These forces and systems include economic policies and systems, development agendas, social norms, social policies, and political systems (World Health Organization, n.d.).

## **Structural Racism**

Structural racism is racial inequity that occurs across society and is rooted in the operation of major social institutions that exclude people from certain groups. It differentiates people based on race through laws, policies, institutional practices, cultural representations, and other ways (Schutte, Danseco & Lucente, 2022).

## **Systemic Racism**

Systemic racism is the interplay between individual, institutional, and structural racism, which functions as a whole system. It is a dynamic system that produces and replicates discrimination and exclusion of individuals across levels of society that creates unfair barriers and disadvantages to access and opportunity for racialized people (Schutte, Danseco & Lucente, 2022).

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