



Disability and Mental Health Consumer/Survivor Businesses

Organizations that train and employ individuals with a history of mental illness or intellectual disabilities often do not realize they are engaging in CED practices. The creation of employment opportunities for these individuals opens the door to improved lifestyles through improved economic health. As any entrepreneur learns, creating a commercially sustainable business is a challenge in itself. Creating a business with a social function compounds the difficulty — and doing so while employing mental-health consumers and the intellectually disabled adds another layer of complexity.

These businesses tend to be social enterprises with three bottom lines: profit, empowerment and health.

Some businesses are linked to a larger social agency (like the Business Venture Group) while others are independent organizations. The businesses tend to be new start-ups.

The business model involves a partnership between consumers and non-consumers. Some approaches have consumers working alongside non-consumers whereas others seek the partnership of non-consumer businesses eg. leasing space.

The sectors involved include:

- food services (catering businesses, cafes, and food kiosks)
- agri-food production
- horticulture
- arts & culture

Replication strategies are already being undertaken. Five projects are building their businesses upon successful models from other regions (including the U.S.). Learning exchanges figure prominently (CEDTAP supported two).

**CEDTAP support ranges from :
\$1,200 - \$20,000**

CEDTAP offers a variety of technical services to organizations at different phases of development. The types of technical service accessed in this cluster include strategic planning, learning exchanges, and product and service development.



“Setting up a few high quality businesses that are successful is more important than several businesses with little chance of success.”

*Sheryl Bergman-Wolfe,
Achievement in Motion, March 1999*

Case Studies:

Achievement in Motion, Kitchener, Ontario

Achievement In Motion is an early-stage, consumer-driven, psychosocial rehabilitation program. Consumers are involved in various capacities as board members, paid staff and committee members. AIM's programs tackle the issue of poverty through enabling consumers who are on social assistance.

Their business-development model for mental health consumer businesses has a built-in financial statement review (undertaken by an advisory committee), while the owners are responsible for income management.

Business Venture Group, Saint John, New Brunswick,

The Business Venture Group (BVG) founded Simply Good Café/Catering in 2000 and also The New Brunswick Tea Company (packages specialty teas in collectible souvenir packs). The BVG is affiliated with the Human Development Council of Saint John and has built extensive community partnerships with business groups and social agencies. The staff are all mental health survivors/consumers.

The CEDTAP Contribution

The program needed a structured training to help achieve the goal of 9 consumer driven businesses in operation by March 2000 (with a target of 60 participants).

CEDTAP support allowed AIM to purchase and receive training on an educational tool developed by Women in Rural and Economic Development (WRED), a leading non-profit organization that has helped over 220 business with a gross income of over \$4 million.

CEDTAP provided funds for two members of the BVG Advisory team to visit the Ontario Council of Alternative Businesses (OCAB), a leader in the field. BVG shadowed and learned from OCAB's growing mental health consumer businesses. The group has served over 900 people and provided employment to more than 20 individuals since its inception.

Other community partners:

1997-2000:

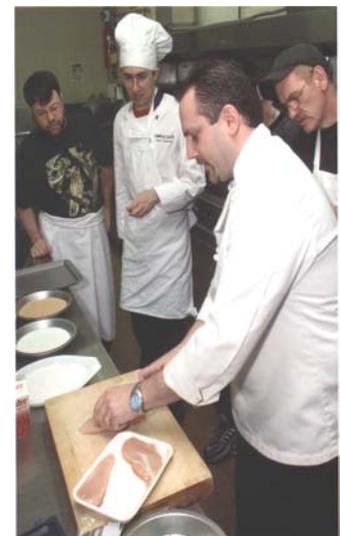
Canadian Mental Health Association, Vancouver-Burnaby, British Columbia
Affirmative Industry Association, Atlantic Region

2001-2003:

Crocus Co-operative, Prairies
Causeway Work Center, Ontario
Common Ground Cooperative, Inc., Ontario

“CEDTAP just ‘got it’ right away, and that allowed the CMHA to leverage money from the health board and other sources.”

*Jonathan Oldman
Acting Executive Director
CMHA-Vancouver/Burnaby
March 2001*



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