

Mental Health Policy Briefing

For mental health, talk and walk are not the same thing

Now is the time for the federal government to deliver on its commitment by introducing a Canada Mental Health Transfer as part of the federal government's 2023 budget.

Kim Hollihan, Ellen Cohen, & Glenn Brimacombe

Opinion



The Liberal government promised to create a Canada Mental Health Transfer with an initial investment of \$4.5-billion over five years beginning in 2022, but the transfer was not included in Finance Minister Chrystia Freeland's 2022 budget. *The Hill Times* photograph by Andrew Meade

In politics, those who seek our vote talk a lot about what they will do if elected or point to what they have accomplished in terms of getting things done. Both are important as one speaks to the talk of tomorrow, and the other to the walk of yesterday.

In the lead up to and since the 2021 federal election, we saw history in the making with all political parties committed to investing in mental health. This was particularly timely knowing that the COVID-19 global pandemic was, and still is, impacting our collective mental health and substance use health. Clearly, more must be done to ensure that the people of Canada have timely, accessible, and inclusive access to publicly funded mental health programs, services, and supports.

The Canadian Alliance on Mental Illness and Mental Health (CAMIMH) strongly applauded the long-overdue talk of such

access to mental health and substance use health care has existed largely in the shadows of medicare. For too long, mental health and substance use health programs, services and supports provided by psychologists, social workers, psychotherapists, counselling therapists, and counsellors have not been covered by provincial and territorial health plans. This must change.

Importantly, the Liberal government promised to create a Canada Mental Health Transfer with an initial investment of \$4.5-billion over five years beginning in 2022. This was viewed as an important down payment which built on the 2017 10-year agreements with the provinces and territories that set aside \$5-billion for mental health and

talk, the walk has yet to follow as the transfer was not contained in Budget 2022.

In CAMIMH's view, there can be no health without mental health. Now is the time for the federal government to walk the talk and deliver on its commitment by introducing a Canada Mental Health Transfer as part of Budget 2023.

Such ongoing funding must be tied to appropriate accountabilities (such as national standards, system performance indicators, and guiding principles) which are set out in CAMIMH's proposed piece of legislation called the *Mental Health and Substance Use Health Care For All Parity Act*.

By investing in our mental health, we will provide the people of Canada with expanded

as well as reap a number of social and economic dividends that will allow this great country to continue to prosper and flourish.

Notwithstanding the importance of the federal commitment, we know there is much more that the provinces and territories can do to invest in and expand access to mental health and substance use health care. While several are actively implementing innovative models of care at the community-based and primary care level, CAMIMH strongly supports the Royal Society of Canada's recommendation that a minimum of 12 per cent of government health budgets be devoted to mental health and substance use health care.

At the same time, given the results from the recent released

2022 Benefits Canada survey, we also know that employers can do much more in terms of providing their employees with better coverage for mental health and substance use health care programs, services and supports.

As we continue to do all that we can to ensure our families and friends and society-at-large are safe and well, COVID-19 has had—and continues to have—a significant impact on our collective mental health and substance use health. As we emerge from the pandemic, the people of Canada will need improved connections to more accessible and inclusive mental health and substance use health programs, services, and supports—not less.

Each day that passes deepens the impact of COVID-19 on those who need care and continues to hurt those with a pre-existing mental health and/or substance use health problems who are in the queue. Bigger and bolder leadership from the federal government, working in collaboration with the provinces and territories, is needed now—not in 12 months time or beyond.

Given the composition of CAMIMH—which includes organizations representing people with lived and living experience, their families and caregivers, and health care providers—we stand ready to work with all levels of governments, employers, and others to make this a reality.

Our mental health matters. The time for talk is over. It is time to walk together.

Dr. Kim Hollihan (EdD) is co-chair of CAMIMH and CEO of the Canadian Counselling and Psychotherapy Association. Ellen Cohen is co-chair of CAMIMH and CEO of the National Network for Mental Health, which advocates, educates and offers expertise and resources to increase the health and well-being of Canadians with lived and living experience. Glenn Brimacombe is CAMIMH chair of the public affairs committee, and director of policy and public affairs at the Canadian Psychological Association, and past CEO of two National Health Associations.

The Hill Times

No more fuel or zest left: burnout

Continued from page 20

Long working hours and not feeling there is time to take a break to recharge batteries. You cannot sleep or rest properly.

Individual interventions

There is a tendency to use maladaptive coping when we face excessive workload and job strains, which in turn, lead to more stress, exhaustion and negative health outcomes. Thus, setting your own individualized pathway to self care and resiliency is essential.

Attending programs and workshops on stress management and mindfulness can be helpful.

Take a proactive personality approach by changing your circumstances, physical or social environments. Be open to opportunities, set realistic goals, seek support, and reach out to maximize your resources. You might have to seek guidance in regards to your work tasks, work responsibilities and demands. At times, a change in work hours or setting limits can become helpful.

Practice emotional intelligence by identifying your emotions and strategies for better managing

and regulating them. When we have emotional intelligence, we feel more tuned in to our own emotions and fatigue level and we are better tuned to others' emotions as well. In turn, we become more proactive in setting goals, seeing support, and making changes needed to better address the problems we are facing.

Set time to recover when you are off work: engage in activities or hobbies, minimize talking about work, try to rest and set time to recharge your batteries when not working.

Practise self-efficacy by breaking down tasks, practising one

task at a time, praising yourself when the job is completed (no matter how small) and then gradually mastering more tasks.

Seek professional help if needed. Evidence-based cognitive behavioural therapy can help with getting support, learning skills, and strategies for better coping.

Organizational interventions

Provide resources and help for employees to better manage any clinical symptoms they might be experiencing and to optimize health. It can help towards

minimizing presenteeism and absenteeism and reducing relapse related to mental health disability.

Provide leadership training on mental health, empathy in the workplace, and support returning to work after a leave of absence or disability. Help your staff to enhance work autonomy, foster supportive relationships with supervisors, encourage employee participation in work tasks and decisions; and nurture professional worthiness by providing recognition and appreciation.

Dr. Katy Kamkar is a clinical psychologist.

The Hill Times