



Canadian Mental
Health Association
Mental health for all



*years of
community*

Mental health key to economic recovery, but we're running out of time

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When COVID-19 forced us all to shut down our way of life as we knew it last spring, the Canadian Mental Health Association (CMHA) warned that Canada must act quickly to prevent an echo pandemic of mental illness.

That echo pandemic is already reverberating.

2020 was supposed to be the year we made real progress on addressing systemic gaps in the mental health system, but people are still falling through the cracks. A recent survey for CMHA found 87 per cent of Canadians don't have access to the mental health support they need and only 35 per cent agree the current public mental health system is meeting demand.

We know that the mental health effects of COVID-19 — including anxiety, depression, suicidal thoughts, substance use — will last long after the pandemic subsides. As we await a fall economic update and federal budget next spring, Ottawa must reform the mental health system for the long haul to ensure people can access care before they reach a crisis point.

The reality is, there can be no economic recovery without ensuring workers and their families are not just physically, but also mentally healthy.

The government should be commended for its Wellness Together portal, funding for mental health and substance use programs and research, and specific investments in Indigenous mental health. However, we already know that won't be enough.

There were two brief mentions of mental health in the recent throne speech and it remains unclear how the government will further increase access to mental health resources.

We need a long-term mental health pandemic recovery plan that is well-coordinated, well-funded and monitored to address persistent and systemic gaps in the system. It must be designed and implemented to reach our most vulnerable and must take into consideration the lived experiences of people with mental illness.

The health system as it exists today publicly funds only treatments deemed medically necessary. This means that other types of basic mental health care, such as psychotherapy, counselling, addiction treatment, and peer support services are not necessarily covered by our “universal” health care system. As a result, many people don’t receive the full range of services they require and the mental health needs of about 1.6 million Canadians go unmet each year.

A one-size-fits-all approach won’t work; not everyone needs a psychiatrist right away. Mental health promotion and prevention efforts at the community level — through investments in evidence-based programs like CMHA’s [Resilient Minds](#) and [BounceBack](#) — have proven very effective at getting people on the road to recovery. They can also prevent intensive and expensive medical treatments down the road. The time to scale up these initiatives is now.

By changing the way we think about mental health care and investing in community-level interventions and supports, we can get people the help they need sooner and alleviate pressure on an acute-care system already hit hard by COVID-19.

Ultimately, improving access to care alone will not be enough. Complete recovery will require scaling up programs that address the widespread inequalities that negatively impact mental health in the first place — homelessness, violence and discrimination, and access to economic opportunity. These are complicated but very important policy considerations as our post-pandemic society takes shape.

With proper funding from the government and the right system of community supports in place across the country, we can meet the overwhelming need for care, help Canadians recover, improve outcomes, and ultimately save lives.

It seems COVID-19 is here to stay. If we truly want to 'build back better,' we must flatten the echo pandemic's curve for good.