

Now More Than Ever: Mental Health in Uncertain Times

**CMHA Platform
Federal Election 2025**



As the cost of living soars, Canadians can't help but view mental health care as a luxury. That's because much mental health care is wrongfully excluded from our public health care system. As a result, many Canadians must go without mental health, addiction and substance use health care if they aren't able to pay for it themselves. External threats to our economy will only deepen this reality and if Canadians lose their livelihoods, their mental health will suffer. In fact, a person's income predicts how healthy they will be.

To ensure mental health remains top of mind for all political parties and candidates running in the 2025 federal election, the Canadian Mental Health Association's election platform, **Now More Than Ever: Mental Health in These Uncertain Times**, makes concrete recommendations that will improve access to community supports, help vulnerable Canadians stay housed and reduce unsheltered homelessness, and work toward better mental health outcomes.

By adopting these solutions, political leaders can ensure people in Canada enjoy the best mental health they can, no matter where they live, or how much money they have.

ABOUT THE CANADIAN MENTAL HEALTH ASSOCIATION

The Canadian Mental Health Association (CMHA) is the largest provider of frontline community mental health and addiction services in Canada. Through a presence in more than 330 communities across every province and the Yukon, CMHA provides programs that help prevent mental health problems and illnesses, and support recovery and resilience.

Our workforce of 8,800 staff and 11,000 volunteers includes social workers, specialized nurses, mental health and addiction workers, and peer supporters. CMHAs play a vital role in Canada's healthcare ecosystem with low-barrier addiction programs, recovery-focused mental health treatment, school-based illness prevention and health promotion education, family and caregiver supports and as crisis services responders, including as partners in the national 9-8-8 suicide crisis helpline.

Learn more about our work and find a CMHA in your area at www.cmha.ca





IMPROVE ACCESS TO COMMUNITY SUPPORTS

Support frontline community mental health agencies to continue delivering local crisis response services, addiction treatment initiatives, and free tax clinics.

Hospitals and doctors were not set up to carry the full weight of our mental healthcare system on their own. Family physicians and health teams are ordinarily the front door to accessing mental health care, but 6.5 million Canadians currently do not have a doctor. When family doctors aren't available and people can't get mental health care in time, people have no choice but to turn to hospitals, places designed to respond to emergencies and serious illness. Once treated in hospital, people are often discharged without adequate services in the community to support their recovery.

That's where community-based agencies come in, with social workers, specialized mental health and addiction workers, crisis responders, and peer supporters. These workers and the community organizations that employ them are an important part of our health ecosystem, supporting people's well-being before, during and after medical care. These agencies also help redirect costly hospital, paramedic, and police services and provide long-term savings and reduce pressures on health, judicial, and correctional systems.

However, these community-based agencies are grossly underfunded. Existing programs and supports cannot meet this country's ever-growing mental health needs and without enough resources, many agencies must scale back life-saving services.

Support the delivery of impact-driven frontline mental health and addiction services in communities by:

- Permanently funding and expanding the national 9-8-8 suicide crisis helpline to recruit and train more local crisis line operators. (Helpline funding ends in 2026.)
- Establishing a Care After the Call fund for more mobile crisis intervention teams to respond to emergency calls, providing immediate help to people in crisis.
- Making the Community Volunteer Income Tax Program Grant permanent to help agencies offset the cost of hosting free tax clinics, ensuring more low-income Canadians receive tax refunds and benefits. (The grant ends in 2025.)
- Passing a law to limit athlete and celebrity endorsements in gambling ads and apply gambling revenue to problem-gambling services and education to prevent gambling among youth.
- Adding mandatory labels, including warnings with health and safety messaging, to all alcohol products sold in Canada to encourage responsible alcohol consumption, and increase the alcohol excise tax above the rate of inflation.
- Sustaining funding to tackle local addiction and substance use prevention and treatment initiatives through Health Canada's Substance Use and Addictions Program. (Program funding ends in 2028.)



HELP VULNERABLE CANADIANS STAY HOUSED

Expand supportive housing for people with mental health and addiction issues and improve intergovernmental coordination that funds essential wraparound social and health services.

For some people with serious and persistent mental health, addiction, or other complex challenges in daily living, staying housed and getting well often require supportive services like counseling, social work case management, and ongoing, accessible health care.

Transitional and supportive housing provides affordable (typically below market value) homes for people with high needs, alongside flexible health and other supports. Delivered by non-profit housing providers and other community organizations, supportive housing is foundational for easing symptoms and providing stability during recovery from addiction. It also reduces unsheltered homelessness by helping connect people to employment and social services.

For supportive housing providers, the greatest challenge to maintaining social housing units and developing new ones has been access to operating dollars. This challenge is often a matter of red tape, like burdensome or uncoordinated funding application processes between different levels of government.

Address urgent housing insecurity for people with mental health and substance use health challenges by:

- Reorienting unspent housing program dollars for the dedicated acquisition, conversion, and construction of 100,000 supportive housing units over the next ten years.
- Improving internal bureaucratic alignment of social and employment support services alongside housing.
- Addressing shared priorities by working with provincial, territorial, and other community partners to better coordinate, bolster, and maximize operational funding for supportive housing projects, alongside new capital investment.





DRIVE BETTER MENTAL HEALTH OUTCOMES

Fully integrate mental health, addictions, and substance use health care into Canada's universal health care system and collect better health data to improve health services.

Mental health has been profoundly neglected under universal health care since Medicare was introduced forty years ago. Our mental healthcare system has not evolved to meet contemporary mental health, addiction, and substance use healthcare demands.

Chronic underfunding of mental health and substance use health care means that government-funded services typically serve only a fraction of the population. Everyone else is left to pay for services themselves or through private or employer insurance, if they have it. Those who are not covered and cannot pay often do not get the care they need.

When people cannot afford to pay, they are less likely to receive the care they need, and people who are at-risk end up in crisis, often making hospitals and other emergency responses their only option. Integrating mental health into our universal healthcare system would alleviate the extreme pressures currently placed on acute care and reduce primary care burnout.

Nationally we do not track and collect similar health data that shows what we're doing well, and where we can do better. Data cannot be compared from one province or territory to the next, and data from Canada's northern regions are especially sparse, which is of particular concern given the significant disparities in mental health and access to health care between Canada's Indigenous and non-Indigenous populations.

Improve the mental health outcomes of Canadians by:

- Amending the Canada Health Act or writing a new law with permanent funding that obliges provinces and territories to spend more on mental health and addictions.
- Increasing earmarked funding for mental health, addictions, and substance use health care to \$6.25 billion annually so that spending is in line with peer countries, at no less than 12% of the overall healthcare budget— currently, provinces and territories are only spending 6.3% annually.
- Strengthening consistent data collection with provinces and territories to track results for mental health, addictions and substance use health.

