

The State of Mental Health in Canada The Canada Health Act in the Spotlight

Why isn't mental health part of universal health care?

Ever wondered why it's so hard to get mental health, addictions or substance use health services? It's because, technically, those services are not part of the law—the *Canada Health Act*—that created universal health care (or Medicare).

WHAT IS THE CANADA HEALTH ACT?

The Canada Health Act ("the Act") is the federal law that shapes our universal healthcare system. It outlines what the healthcare system should look like, and what provinces and territories need to do to receive federal funding for health care. The Act came into effect exactly 40 years ago: before the last three generations of Canadians were even born. It's not surprising that the Act is out of date—but four decades on, it's also completely out of touch with mental health care needs in Canada.

WHAT IS THE CANADA HEALTH ACT?

The *Canada Health Act* doesn't pay enough attention to mental health, addictions and substance use health (MHASU) care. Under the Act, only physicians and hospitals are paid to provide these services. This means that essential mental health care providers are excluded, like counsellors, psychotherapists, peer support workers, and social workers. Some treatments for eating disorders, addictions, and Post-Traumatic Stress Disorder (PTSD) are also excluded.

THE FAULTY CANADA HEALTH ACT CREATES MANY GAPS IN MENTAL HEALTH CARE.

The Act's narrow definition of mental health care creates many gaps:

- **1. Unequal importance:** Mental health, addictions and substance use (MHASU) health services and not treated with the same importance as physical health.
- 2. Having to buy mental health care: While visits to family doctors and psychiatrists are covered under public health insurance, other mental health care comes with a price.

- **3. Inadequate Funding:** Provincial and territorial governments dedicate a small percentage to mental health compared to their overall health budgets.
- 4. Family doctors don't coordinate with other providers, making it harder for people to get the care they need.
- 5. Pressure on Emergency Departments and in-patient services at hospitals: if a person can't find care when they first experience symptoms of illness, they may get sicker.
- 6. Worsening symptoms and risk of death: if people don't get the care they need when they need it, their symptoms get worse, and they may die. The opioid toxicity crisis claimed 8,049 lives across Canada in 2023 and the suicide rate remains high.
- 7. Mental health care varies across provinces and territories.
- 8. **Increased Demand:** The need for mental health care has grown and the pandemic revealed that the system was not prepared for a mental health crisis.

WHAT ELSE IS GETTING IN THE WAY OF MENTAL HEALTH CARE?

- **1.** A lack of family doctors.
- 2. Lack of community-based mental health care and long wait times.
- 3. If you don't live in a city there are fewer providers.
- **4. If you're vulnerable already:** Indigenous, racialized and 2SLGBTQ+ individuals often can't get culturally safe and appropriate mental health care.
- **5. Inadequate data collection:** We can't improve something if we don't know how it's working. Canada needs to collect more and better information on mental health care.

WHAT THE CANADIAN MENTAL HEALTH ASSOCIATION (CMHA) SAYS ABOUT THE ACT.

Millions of Canadians can't get the mental health care they need. The Canadian Mental Health Assocation (CMHA) is calling for reforms to the *Canada Health Act*—or a new law—to make mental health, addictions and substance use health care part of our universal public system.