Mental Health Care—How Is Canada Doing?

By Nadeem Esmail

Mental illness is widely recognized to impact a considerable proportion of the population, perhaps affecting as many as one in five Canadians in any given year (Mental Health Commission of Canada, 2013). The prevalence of mental illness, combined with the now well-understood impacts on employment, productivity, and social engagement for ill individuals, helps to explain the increased attention this area of health care has received in recent years and the numerous calls for additional tax-funded expenditures on mental health care.

While much attention has been paid to the impacts of mental illness on Canada’s economy and health care system by the Mental Health Commission of Canada, researchers and various mental health patient advocacy organizations, little information exists on how Canada’s current approach to treating mental illness stacks up internationally. Understanding how well Canada is doing today, in comparison with other high-income nations that have similar policy goals, is important for developing an appropriate policy response to commonly voiced concerns about a lack of access to quality, timely treatment.

While statistics on the performance of mental health care systems are more limited than those measuring the performance of the general health care system, the picture painted by an international review of statistics on the performance of Canada’s mental health care system is not an overwhelmingly positive one. Canada’s mental health care system is not an overwhelmingly positive one. The proportion of health expenditure estimated to be allocated to mental health in Canada ranks highly when looking specifically at government expenditures, but ranks slightly lower as a share of total expenditures. At the same time, Canada’s mental health care system imposes long delays in accessing care on a considerable number of Canadians and makes fewer medical resources available than might be found in peer nations. There is also evidence that
access to mental health care services in Canada has declined over time, particularly in terms of delays imposed on patients in need of services.

The combination of high levels of mental care needs with low availability of physicians, psychiatrists, psychologists, and facilities suggests Canada’s provinces may find value in policy structures that both allow better use of and access to existing resources and also improve access to care through innovative new approaches. Making better use of limited resources, with a focus on improving the availability of services over time, is essential if we are to address Canada’s mental health care gap.