

Toward Flourishing for All...

National Mental Health Promotion and Mental Illness Prevention Policy for Canadians

The Pan-Canadian Planning Committee for the Mental Health Promotion and Mental Illness Prevention





“If you want health, you have to focus on health”

(Dr. Corey Keyes, Emory University)

Over the past several years, momentum has been growing worldwide and across Canada with respect to mental health promotion and mental illness prevention. Following a successful international symposium held in Vancouver in 2007, a small group of representatives from governmental and non-governmental agencies convened approximately 80 experts in Calgary in November 2008 to share their perspectives and to provide best advice on mental health promotion and mental illness prevention as part of an integrated mental health strategy for all Canadians. This Think Tank was co-hosted by *Alberta Health Services/Alberta Mental Health Board* and *British Columbia Mental Health and Addiction Services* in partnership with *Public Health Agency of Canada, Mental Health Commission of Canada, Centre for Addiction and Mental Health, Canadian Mental Health Association, Centre for Health Promotion, University of Toronto, Department of Health, New Brunswick, Nunavut Embrace Life Council, Ontario Ministry of Health Promotion, and Winnipeg Regional Health Authority*. Participants included representatives from provincial/territorial as well as federal levels of government, national non-governmental agencies, academics, clinical practitioners, health promoters, consumers and other community members, along with three international experts. A background paper, entitled, *Toward Flourishing for All* allowed participants to review mental health strategies from jurisdictions outside of Canada, with a particular focus on mental health promotion and mental illness prevention, in order to learn from their experiences and to assess potential applications for Canada.

The review of policies from other jurisdictions revealed that mental health promotion and mental illness prevention strategies were most successful when embedded within national-level mental health policies, where there was strong leadership, government commitment, sufficient allocation of resources, multi-sector collaboration, a focus on evidence-based practice, and specific training in mental health promotion and mental illness prevention. At the same time, all jurisdictions encountered challenges with implementation and noted issues such as cross-sector collaboration, achieving a common language and vision of positive mental health, integration of mental health promotion and mental illness prevention, insufficient resources and a return to policy that focused primarily on treatment and service delivery.

The participants at the Think Tank sounded a clear call to action. Their deliberations, along with the learnings from the background paper, have led to the following recommendations.

RECOMMENDATIONS

1. Vision for a Comprehensive Mental Health Policy

A comprehensive mental health policy must be built upon a mental health promotion framework.

- Goal: increase opportunities for positive mental health for the entire population, including those with mental illness
- Reach: Address all levels of need of the full range of Canada’s many population groups across the lifespan
- Values: social justice, self-determination, resilience, empowerment, strengths and capacities
- Strategic approach (to reach goal): reduce inequalities, support engagement and capacity building, ensure access to needed health and social services and supports
- Way of working: Collaboration across departments and sectors (including public health and social policy to address social determinants of health), inclusion of all stakeholder groups.



2. A clear single point of accountability and sustained leadership

In collaboration with potential partners, determine a single point of accountability for the mental health policy, including the mental health promotion and mental illness prevention aspects of the policy. Sufficient and dedicated funding must also be made available for mental health promotion and mental illness prevention. Positive mental health is “everybody’s business” and collaborative leadership is required at all levels: national, provincial/territorial, regional, municipal and neighbourhood.

3. Involvement of multiple sectors and stakeholders

Engage all relevant sectors and stakeholders in developing and implementing the comprehensive mental health policy. These include: Federal/Provincial/Territorial governments, Departments of Health (including public health, chronic diseases), Social Development, Education, Justice, Housing. It is also necessary to engage people with mental illness and those at risk for developing mental illness, different cultures and Aboriginal people, and groups dealing with social determinants of health.

4. Provincial/Territorial role

Collaborate with provinces and territories to implement recommendations. Create mechanisms for ongoing federal/provincial/territorial consultation about the developing policy and its impacts in order to ensure a dynamic policy process, relevant to all regions of Canada, characterized by continuous growth and improvement.

5. A common understanding

Build buy-in for the vision of mental wellness for all, and a shared understanding of mental health and mental illness concepts and language, by engaging the public in processes that enhance mental health literacy, help combat stigma and discrimination, promote community inclusion, and address social determinants of health.

6. Building on strengths

Map existing policies and programs that support mental health and prevent mental illness in Canada in order to identify strengths and gaps and guide future action.

7. A strong research, knowledge and data base

Create an enhanced mental health promotion and mental illness prevention knowledge base by supporting new areas of research such as Participatory Action Research methodologies, promising practices and economic evaluation. Support incorporation of wellness research into the Knowledge Exchange Centre of the Mental Health Commission as well as additional knowledge exchange strategies in order to inform policy and practice.

Build on existing initiatives such as CIHI and Statistics Canada surveys/reports to create comprehensive data monitoring systems. Develop a common set of indicators, including indicators of positive mental health.



8. An effective, wellness-based mental health system of services and supports that spans the continuum from prevention to early intervention to care and support

Work across sectors to plan a system that recognizes people's varying needs for support at different times and is accessible at every point: identifying the need for help and providing the right intervention at the earliest signs of risk or problem, preventing future problems, celebrating and supporting ongoing recovery, and optimizing wellness.

Use targeted mental health promotion and mental illness prevention interventions with a strong evidence base and measurable outcomes, focusing specifically on areas where there is best available evidence, such as interventions targeting children and youth.

The Think Tank participants, from diverse sectors, jurisdictions and even countries, were strikingly aligned on the basic steps needed for moving forward and the urgent need to take action. Mental health promotion and mental illness prevention are critical, not only in enhancing wellness, but also in reducing rates of mental illness and chronic disease. The importance of a “health” perspective is not a new concept and in fact is often well articulated by researchers, practitioners and policy-makers. Unfortunately, actions do not necessarily follow words; practice and policies still tend to focus on illness and treatment. Illness and disorder of course still need to be addressed, but without a real commitment to promoting and protecting mental health, we will not be able to move forward to achieve positive mental health for all. The challenge is to take action now.

“The science supports you...we can measure it...so let's get on with it!”
(Dr. Corey Keyes, Emory University)



Appendix I

Summary of Think Tank Discussions

The format of the day, structured around five themes, was designed to stimulate dialogue and to allow participants the opportunity to share their own expertise with respect to mental health promotion and mental illness prevention. Results of the small group discussions as well as highlights from the closing comments provided by three international speakers are summarized below.

1) Collaborative Action for Policy Development and Implementation

Numerous groups and organizations need to be involved in policy development, representing a range of sectors, including: all three levels of government, housing, employment, education, justice, health promotion, maternal and child health, public health, and recreation. In addition, the policy development process must involve the broad population that it will serve, i.e. various age groups, people experiencing mental illness and addiction problems, service providers, “well” population, people at risk, new immigrants, and First Nations/Metis/Inuit populations. Strong leadership is required from the national level. The Public Health Agency of Canada and the Mental Health Commission of Canada were identified as potential joint leaders, who have the capability to establish a national level group reflecting the above membership. Numerous government and non-governmental agencies expressed their interest in contributing to this process and working collaboratively to ensure successful implementation.

It is just as important for leadership to come from champions at the provincial/territorial and local levels. Grass-roots engagement and community mobilization will create public support for a national strategy that reflects the needs of the population and increase the likelihood of success. There are many positive examples of health promotion initiatives and strategies to learn from and build upon from across the country and internationally, not just specific to mental health or mental health promotion, but also from other sectors. Collaboration with other sectors is critical to an effective strategy.

If the broad mental health policy builds upon the principles of a recovery framework, which also values hope, empowerment, choice and self-determination similar to a mental health promotion framework, then there is greater potential to bridge the perceived gap between mental health promotion and mental health service provision.

It is also critical to develop a compelling vision that will cross boundaries, make the economic argument, use common language and create a shared understanding.

2) Models for National Policy

An effective national mental health policy should take a whole government approach, involving multiple departments and crossing all sectors. In addition to a focused mental health policy/strategy, mental health should be integrated into broader social policies, in order to ensure that social determinants of health are addressed. Every public policy should be reviewed from a mental health perspective, for example, using a Mental Health Impact Assessment.

Ideally, mental health promotion and mental illness prevention policy should be embedded into national mental health, public health and social policy. Mental health policy should address the whole population, including all people across the lifespan, multiple settings, and special populations. National policy must be modeled on meaningful public participation, and include accountability mechanisms, delivery structures and reporting systems.



3) Elements of Policy

A national policy for mental health must take a balanced approach, reflecting mental health promotion and mental illness prevention, as well as services and supports for mental illness. In order to achieve this balance, it is also necessary to address mental health inequalities and broader social determinants of health. Mental health promotion and mental illness prevention must be completely integrated into the national mental health strategy and not be an add-on. Specific components might include: mental health literacy, suicide prevention, early intervention/prevention of addiction, discrimination and stigma related to mental illness. In addition, the policy should take into account future as well as current mental health needs of the population.

A national mental health policy should be grounded in evidenced-based approaches and interventions, as well as community and consumer experience. For example, a focus on social inclusion, freedom from discrimination and violence, and economic resources has proven to be effective in promoting positive mental health and reducing mental illness in other jurisdictions. Principles of resilience, empowerment, capacity building and a strengths-based approach need to be incorporated. In addition, particular attention must be paid to ensure positive language is used, that it matches the context being addressed (e.g. workplace, crime prevention), and that definitions are clear.

Evaluation and accountability mechanisms must be built into the policy in order to provide opportunities to demonstrate outcomes, including costs and benefits.

4) Policy Implementation

Strong, consistent and sustainable leadership is required not just to develop but also to implement a national strategy. However, it must be collaborative leadership, involving a wide range of partners including provincial/territorial and local stakeholders.

Successful implementation depends upon a broad shared national vision for mental health promotion and mental illness prevention from which strategic directions and shared outcomes have been identified. A strategic action plan must be developed that includes targeted actions built upon areas where the strongest evidence exists, such as programs for children and youth. Successful implementation will also depend upon the level of engagement and allocated resources. Mapping existing mental health promotion and mental illness prevention interventions and activities from across the country, as well as a review of best/promising practices would be helpful in determining who is doing what already and identifying existing strengths to build upon. Implementation must take place at provincial/territorial levels, possibly through an interministerial collaboration. Existing structures, agencies and organizations may be able to be used in order to be cost-effective, but dedicated resources will be required to support such elements as infrastructure, workforce development, knowledge exchange and transfer, demonstration projects, curriculum reform, as well as mechanisms to support uptake. Information must reach the front lines; knowledge exchange among practitioners, academics, health promoters, community members is critical. Training, education and consultation roles must be in place to build professional capacity in mental health promotion and mental illness prevention over the long-term.

Mental health policy must also include clear understanding of roles and responsibilities.

5) Policy Monitoring and Evaluation

A national policy must include specific goals and measurable outcomes – short, medium and long-term, including those related specifically to mental health promotion and mental illness



prevention. It should build upon existing measures and indicators, for example, the Canadian Community Health Survey, the National Longitudinal Survey on Children and Youth, the National Quality Institute Health Card, and other national and provincial surveys. At the same time, there are gaps in data that need to be addressed, such as indicators for First Nations/Metis/Inuit populations. Key partners who are working on similar initiatives include: CIHI, CHEO, Children's Health Policy Centre at Simon Fraser University, and Statistics Canada.

A common framework for positive mental health indicators must be established for Canada, as well as a core set of national indicators along with the capability for local indicators. Indicators should address issues of population well-being, policy change, changes in attitudes/knowledge, resilience, social determinants of health, community mapping/ qualitative stories of well-being in Canadian communities. Indicators should also recognize diversity and address a wide range of populations.

Highlights of Closing Remarks by International Guests and the Mental Health Commission of Canada

- Many academics and policy-makers say they want health, but wind up focusing on illness and treatment. This was referred to as “the wanting/doing gap”.
- There is a dynamic interrelationship between mental health and physical health, and individual's mental health status changes frequently. If we promote mental health, we will not only get lower rates of mental illness, but also lower rates of chronic disease.
- “The science supports you, we can measure this, so let's get on with it”.
- Canada should develop a comprehensive policy that would address treatment, recovery, rehabilitation, mental health promotion and mental illness prevention and would be consistent with World Health Organization standards.
- Canada should go beyond anti-stigma and suicide prevention to promote mental health in the early years and to address health inequalities.
- Public engagement is critical, along with the need to build capacity, expertise and skills - “mental health is everyone's business, but if no one is doing it, it's nobody's business”.
- The economic argument is extremely strong, especially in early intervention with children and in workplace.
- More research is needed with respect to promoting positive mental health and well-being; Canada could take a leadership role with economic research in this area.
- The barrier between public health and mental health can be addressed by focusing on social determinants of health, which are common to both areas.
- Engagement across sectors can be achieved by demonstrating how promoting mental health can benefit other sectors.
- “If you want health you have to focus on health”
- The Mental Health Commission of Canada is committed to mental health promotion and mental illness prevention and sees these as essential for both reducing the burden of mental illness and enhancing the well-being of all Canadians

February 12, 2009