

**Written Submission for the Pre-Budget
Consultations in Advance of the Upcoming
Federal Budget**

By: Schizophrenia Society of Canada (SSC)



August 2020

Recommendations

- **Recommendation 1:** SSC recommends that the Federal Government evaluate current federal policing procedures for training in mental health crisis intervention and that new training programs be considered. Standardized, sustained, and frequent training for RCMP and other law enforcement officers in de-escalation and mental health crisis response is urgently needed to save lives.
- **Recommendation 2:** That the Federal Government improve access to mental health care through a Mental Health Parity Act. Mental health care supports should be broadly inclusive of individuals with schizophrenia and early psychosis.
- **Recommendation 3:** SSC recommends that the Federal Government create and evaluate measurement performance for spending for primary care for those living with schizophrenia and other psychotic disorders.

Submission

About SSC

The Schizophrenia Society of Canada (SSC) is a non-profit, charitable organization established in 1979. SSC exists to "Build a Canada where people living with early psychosis and schizophrenia achieve their potential." This is possible with early intervention and recovery focused mental health services.

SSC has a strong conviction that things can definitely be different and better for those experiencing early psychosis and for the one in one hundred who will develop schizophrenia. Significant advances in our understanding of mental illness and treatment modalities, alone with early intervention and access to person-centred and recovery-focused mental health services, have demonstrated that there is life after a diagnosis of early psychosis and schizophrenia. Tailored mental health services and supports for individuals can help them to live beyond the limitations of their mental illness with purpose, hope, meaning, and significance.

We recognize the long overdue need for funding parity between mental and physical health across Canada, and we hope the Federal Government will takes steps towards parity so that Canadians have timely access to a range of recovery-oriented mental health services and supports.

Recommendation 1: SSC recommends that the Federal Government evaluate current federal policing procedures for training in mental health crisis intervention and that new training programs be considered. Standardized, sustained, and frequent training for RCMP and other law enforcement officers in de-escalation and mental health crisis response is urgently needed to save lives.

Over the last three years, SSC has been involved in a nationally-funded research study, *Training to Improve Interactions between Police and Individuals in Mental Crisis: Impacts and Efficacy*, alongside Ryerson University, Wilfrid Laurier University, and the University of Victoria to evaluate the effectiveness of scenario-based training in teaching police officers in Southern Ontario how to engage in de-escalation when dealing with a person in mental health crisis. Our analysis indicates that scenario-based training involving high intensity mental health crisis simulations is successful in bringing about marked improvements in officer's de-escalation skills in pre-post-testing.

Currently, police training in mental health crisis intervention is haphazard. The most current source for police involved fatality rates (a CBC investigation), identified 461 cases involving a fatal police encounter, and found that more than 70 per cent of these victims suffered from mental health and substance abuse problems. There is currently no government mandate for publicly available aggregated information from police services when one of their members kills a civilian.

In the absence of provincial standards in this area, it is vital that new training programs be evaluated and are shown to work. SSC urges the government to be a leader in this area, and to increase the number and availability of mobile crisis teams and front-line mental health experts to respond to those in mental health crisis. Standardized, sustained, and frequent training for officers in de-escalation and mental health crisis response is urgently needed to save lives. Our project also confirms that an evaluation framework to assess officer competencies in de-escalation is vitally needed.

Recommendation 2: That the Federal Government improve access to mental health care with the introduction of a Mental Health Parity Act. Mental health care supports should be broadly inclusive of individuals with schizophrenia and early psychosis.

SSC joins other mental health organizations in recommending that the Federal Government implement a Mental Health Parity Act. A parity act would demonstrate the government's commitment to mental health and that they value mental health equally to physical health. It would send a strong statement to provincial governments, workplaces and organizations and ensure that they treat mental health equally to physical health.

As mental health has long been viewed secondary to physical health, mental health has been continuously underfunded by governments in Canada and issues such as long wait times for care persist. Other countries such as the United Kingdom have already enacted parity acts and it is time that Canada follow suit and be a leader in this area. A parity act that enshrines mental health standards of care and support across Canada would set a new precedent and signal that Canada truly values mental health equally to physical health.

SSC would be pleased to work with the Canadian Government alongside other mental health organizations to produce a Mental Health Parity Act and improve mental health for Canadians struggling not only with schizophrenia and early psychosis, but with any mental illness.

Recommendation 3: SSC recommends that the Federal Government create and evaluate measurement performance for spending for primary care for those living with schizophrenia and other psychotic disorders.

Access to quality primary health care is essential to ensure the well-being of those struggling with their mental health. There exists an inequity of access and expenditure for this group that dies on average between 10 to 20 years earlier than the rest of the population. Primary care should be equitable and accessible to people with schizophrenia and other psychotic disorders in order to save lives.