



**CANADIAN  
PERINATAL  
MENTAL  
HEALTH  
COLLABORATIVE**  
[www.cpmhc.ca](http://www.cpmhc.ca)

## **Written Brief for Pre-Budget Consultations in Advance of the 2023 Budget**

**By:**

**The Canadian Perinatal Mental Health Collaborative**  
[www.cpmhc.ca](http://www.cpmhc.ca)

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## RECOMMENDATION:

The Canadian Perinatal Mental Health Collaborative (CPMHC) is asking the federal government to invest an initial **\$2 million in funding over two years** to support a broad and inclusive assessment process to inform the development of a national perinatal mental health strategy. *(This number is based on the funding allocated to develop the [national autism strategy](#).)*

The CPMHC is asking for an additional **\$115 million in funding over 5 years** to ensure the strategy is implemented and that Canadian mothers, birthing persons, and partners receive timely access to perinatal mental health services. *(This number is based on the funding allocated to develop and implement the [national diabetes strategy](#).)*

## Introduction:

CPMHC is a national, non-profit organization of perinatal mental health clinicians and persons with lived experience. We are pleased to present our written submission for the pre-budget consultations in advance of the upcoming federal budget regarding support for timely access to perinatal mental health services which was included on the [mandate letter](#) to the federal Minister of Mental Health and Addictions.

## Issue:

Perinatal mental illness refers to the range of issues a woman or birthing person can face during pregnancy and in the year after giving birth. This includes prenatal and/or postpartum anxiety, depression, post traumatic stress disorder, panic disorder, obsessive compulsive disorder, bipolar disorder, and psychosis.

Perinatal mental illness is a critical issue affecting nearly 1 in 4 Canadian families and **rates of self-reported perinatal depression and anxiety have [doubled](#) during the COVID-19 pandemic period.**

**Treating perinatal mental health disorders costs an average \$2 billion per year.**

The calculation of these costs are listed in Appendix A and are based on the London School of Economics report, adjusted for Canada.

The Government of Canada's 2018/2019 survey on Maternal Mental Health showed that an average of 23% of Canadian women experienced postpartum depression alone. Rates are higher for marginalized people. Indigenous mothers are 20% more likely to suffer from prenatal and postpartum depression than white, Caucasian mothers in Canada. In the US, 40% of Black mothers will suffer from postpartum depression and Black mothers are four times more at risk of maternal mortality than white mothers. Ten percent of fathers experience perinatal mental health issues.

Programs and policies have not kept up with best practices, research, or the overarching science. Services currently available to those experiencing a perinatal mental illness in Canada are largely inadequate and issues have been magnified during the COVID-19 pandemic.

Addressing the psychosocial needs of families to enhance ongoing mental, maternal/child health disparities is a major public health issue.

### **Impact:**

Perinatal mental illness can have dire consequences across the family. Untreated perinatal mental health issues can lead to chronic depression. **Suicide is the 4th leading cause of maternal death in Canada.**

A recent [CBC article](#) highlighted that Canada's count of maternal deaths is incomplete and that the true number is closer to 800 deaths between 2000 and 2020 rather than 523. "If those estimates are correct, Canada's maternal mortality rate, while still low by global standards, was in the top third of countries in the Organization for Economic Co-operation and Development (OECD) in 2017 — and was double the rate of other high-income countries such as the Netherlands, Ireland and Japan."

Maternal mental health is the single greatest determinant of a child's health over the life course. Perinatal mental illness negatively impacts parental-infant attachment and can impair the child's cognitive and psychosocial development.

### **Other Jurisdictions:**

Unlike the United Kingdom, Australia, and many parts of the US, Canada does not have a comprehensive national strategy, mandate, or directive to guide how health care practitioners should assess, diagnose, treat, or provide follow-up to individuals suffering from perinatal mental illness.

### CPMHC Survey Findings:

- 95.8% of health care practitioners believe that perinatal mental health services are insufficient in Canada.
- 87% of health care practitioners in Canada do not have mandated screening for perinatal mental illness at their workplace.
- 87% of practitioners believe people from diverse backgrounds encounter barriers to accessing perinatal services. These include language, cultural and cost barriers.

### **Conclusion:**

The survey findings underscore a critical need for funding to ensure timely access to perinatal mental health services and the development of a national perinatal mental health strategy to address gaps in identification and treatment.

### **Appendix A:**

#### **The Cost of Perinatal Mental Illness in Canada**

##### **Main Findings**

In Canada,  
the costs associated with perinatal mental  
health problems each year amount to

**6.7 billion \$**



Credibility score



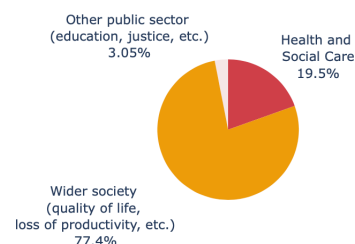
**30%**

of these costs are  
related to the mother

**70%**

of these costs are  
related to the baby

##### **Distribution of costs per sector**



**Global Economic Calculator for Perinatal Mental Health Disorders**

<https://global-economic-calculator.herokuapp.com>

## INTERNATIONAL EXAMPLES OF INVESTMENTS IN PERINATAL MENTAL HEALTH:

Country/Year	Deliverables	Outcomes
<b>UK/2014</b> Cost analysis of lifespan costs of PMHDs	<ul style="list-style-type: none"> <li>Governmental report: <a href="https://www.centreformentalhealth.org.uk/sites/default/files/2018-09/costsofperinatal.pdf">https://www.centreformentalhealth.org.uk/sites/default/files/2018-09/costsofperinatal.pdf</a></li> <li>LSE Appendices/Detailed Methods: <a href="https://www.centreformentalhealth.org.uk/sites/default/files/2018-09/costsofperinatalappendices.pdf">https://www.centreformentalhealth.org.uk/sites/default/files/2018-09/costsofperinatalappendices.pdf</a></li> </ul>	<ul style="list-style-type: none"> <li>Revision of UK National Health Strategy</li> <li>£290M for perinatal mental health services in 2014/2015</li> <li>£365M by 2021</li> </ul>
<b>US/2020</b> 5-year cost analysis of PMHDs after birth	<ul style="list-style-type: none"> <li>Academic publication: <a href="https://ajph.aphapublications.org/doi/abs/10.2105/AJPH.2020.305619">https://ajph.aphapublications.org/doi/abs/10.2105/AJPH.2020.305619</a></li> <li>Private sector public health company funded by federal, provincial, private foundations: <a href="http://www.mathematica.org">www.mathematica.org</a></li> <li>Media coverage in USA today, TIME, and other mainstream outlets</li> </ul>	<ul style="list-style-type: none"> <li>Revision of Texas legislature to extend postpartum Medicaid coverage from 60 days to 6 months post-delivery</li> <li>Promoting advocacy efforts, i.e., from US-based organizations Maternal Mental Health Leadership Alliance and 2020 Mom</li> </ul>
<b>France/2021</b> Online interface based on the UK economic model	<ul style="list-style-type: none"> <li>Provided momentum to unite stakeholders to form a French PMHD Alliance: <a href="https://alliance-psyperinat.org">https://alliance-psyperinat.org</a></li> <li>Meeting with French government officials: "Advocacy Day" event connecting over 250 health care providers, researchers and policy makers, including le Secrétaire d'État à l'Enfance et à la Famille and the Président</li> </ul>	<ul style="list-style-type: none"> <li>Revision of France's National Health Strategy - 22m €</li> <li>10m € for parent-baby</li> <li>12m € for perinatal mental health training</li> </ul>

## Appendix B: Endorsements

The following organizations and individuals endorse a National Perinatal Mental Health Strategy:

This message is supported by:



## Appendix C:

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