



# Mental health in times of pandemic in Canada. Between lack of services and coercion: what about rights?

EMMANUELLE BERNHEIM

FACULTY OF LAW, UNIVERSITY OF OTTAWA

MARCH 3<sup>TH</sup> 2021

# Mental Health in Times of the Covid-19 Pandemic in Canada

- ▶ 65% of Canadians report a deterioration in their mental health since the beginning of the pandemic.
- ▶ 10% of Canadians report having suicidal thoughts and 4% report deliberately harming themselves.
- ▶ Coping strategies include increase of alcohol, cannabis and prescribed medication use
- ▶ Many talk about a mental health 'crisis'.

# Availability of mental health services

- ▶ Upon the declaration of a state of emergency, provinces closed psychiatric beds and allocated them to the COVID-19 response.
- ▶ Telephone or videoconference follow-ups are preferred to face-to-face meetings.
- ▶ Shortages of psychiatrists and other public mental health services mean that physicians have nowhere within the public system to refer their patients with severe or emergency mental health issues.
- ▶ Some hospitals reported a 30% increase in psychiatric admissions.

# Availability of mental health services

- ▶ Police services reports a 13% increase in calls related to mental health issues.
- ▶ Consultation requests increased by 10%.
- ▶ Crisis centers and community groups report receiving increasingly complex cases.
- ▶ Cities and provinces have established online support services; only 2% of Canadians use them.

# Availability of mental health services

The pandemic has exacerbated pre-existing problems created by the physician-first approach to mental healthcare in Canada:

- ▶ Excessive burdens on primary services and primary care providers
- ▶ A limited range of services
- ▶ Unavailability of psychotherapy in the public system
- ▶ Socioeconomic disparities in access to services and care

# Coercion in mental healthcare

- ▶ Hospitalization conditions have greatly deteriorated:
  - ▶ Long periods of isolation
  - ▶ Inability to communicate with loved ones
  - ▶ No outings or visits
- ▶ Mechanisms such as involuntary admission and treatments are used to manage pandemic risk.
- ▶ Remote court proceedings pose several problems.

# Coercion in mental healthcare

The pandemic has exacerbated pre-existing problems in mental healthcare

- ▶ Lack of funding:
  - ▶ Staff shortages
  - ▶ Few local services
- ▶ Prejudices:
  - ▶ People with mental illnesses do not understand the information communicated to them.
  - ▶ They deliberately choose not to follow covid measures.

# What about rights?

- ▶ Hard-to-get or inadequate services
- ▶ Medicalization of care and inaccessibility of psychosocial services
- ▶ Discriminatory practices and intervention
- ▶ Obstacles to judicial rights



'History tells us that the demand for mental-health services will continue to grow in the years to come and that demand will contribute to the pandemic deficit of care we have yet to address.'

- Samantha Hill, president of the Ontario  
Medical Association