

COVID-19 is causing a national mental health crisis and Canada needs a national response

By KATHLEEN FINLAY JANUARY 13, 2021

The tragic death by suicide of a frontline physician ought to raise red flags about the mental health pressures of the pandemic. Will it?



What is needed is a more comprehensive education campaign that will reach large numbers of Canadians to help them incorporate mental health awareness and sensitivity into their daily lives, writes Kathleen Finlay. *Unsplash photograph by Anthony Tran*

Canada has never seen a public health crisis like the one caused by COVID-19. It has also never seen anything like the mental health toll the pandemic is taking.

The latest evidence comes with the <u>tragic death by suicide of Dr. Karine Dion</u>, a front-line physician from Granby, Que. Dion's death eerily mirrors the one that shocked much of the health-care world during the https://www.hilltimes.com/2021/01/13/covid-19-is-causing-a-national-mental-health-crisis-and-canada-needs-a-national-response/278508

pandemic's first wave. Last April, Manhattan emergency physician <u>Dr. Lorna Breen took her</u> <u>life</u>, reportedly after the pressures of her job caring for COVID-19 patients became unbearable. May their memories be a blessing.

Suicides and attempted suicides have also increased among Canadians from every walk of life. Crisis lines report a huge spike in calls since the start of the pandemic. That number is expected to swell as projections say the worst phase of the virus is still to come. We also know that only a small per cent of those who need help actually reach out. How does help reach them?

Canada needs a better—indeed, an urgent—response to the mental health crisis and suicide risk the virus is creating. While health care is normally the purview of the provinces and territories, these times are far from normal. A national response by the federal government is required.

That's why I am proposing the immediate creation of an emergency task force of experts, clinicians, and mental health advocates—along with existing users of mental health services—to quickly identify better ways of delivering care. One idea is to fast-track the rollout of a national lifeline for mental health crisis and suicide prevention using the digits 988. <u>I introduced that idea to Canada 18 months ago</u>. In December, the House of Commons voted unanimously to endorse it. It's time for a plan to implement that technology and put its life-saving benefits in the hands of all Canadians as soon as possible.

But to reach out for help, a phone or internet connection is needed. Since the summer, giant telecoms have been disconnecting the telephone, television, and internet services of customers who have fallen behind in paying their bills. That includes the most vulnerable. I've had reports that some low-income Canadians are being forced to choose between making the payments being demanded to keep their services running and paying for prescription medication. Others say they're down to two small meals a day just to keep their phone working.

Cutting people off from their lifelines to the outside world, and making it impossible for them to keep track of the latest news about the virus, places them at unacceptable risk. Creating a barrier that prevents people from reaching out to family, friends, or crisis lines for help at this time is nothing short of mental health negligence, pure and simple.

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The federal government should take immediate steps to ban telecoms from disconnecting the services of customers who are unable to pay their bills during this wave of COVID-19.

Another idea: launch a massive education campaign to acquaint Canadians with the resources that are available when they need help. We also need better tools for family members and co-workers to identify and understand red flags of distress and mental health crisis in the actions of a loved one or colleague, and what they should do when they see them.

It is not enough to include a list of crisis phone numbers appearing at the end of an article dealing with suicide. What is needed is a more comprehensive education campaign that will reach large numbers of Canadians to help them incorporate mental health awareness and sensitivity into their daily lives. We also need to do a better job of reducing the stigma that prevents too many from seeking help. At a time when countless Canadians are struggling to get through each day, a campaign that promotes a culture of compassion and kindness in all our actions could yield untold benefits.

What cannot be disputed is that Canadians are facing an unprecedented wave of emotional turbulence as a result of the pandemic. Just as the virus is overwhelming ICUs in many hospitals, it is also outpacing our capacity to deliver life-saving mental health solutions. Whether they are on the front lines fighting the pandemic, trying to cope with the impact of a lockdown on a floundering family business, or are isolated and alone, Canadians are in desperate need of help and support in dealing with emotional crisis, including the risk of suicide.

It's time for the mental health equivalent of a vaccine that will also save lives. The federal government needs to do a better job of answering that call.

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The Hill Times

If you need help, you can reach Canada's national suicide prevention crisis line toll free at: 1-833-456-4566, or text: 45645.

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