



Mood Disorders Society of Canada

La Société Pour **Les Troubles de L'Humeur** du Canada

Pre-Budget Submission

A Comprehensive National Training and Education Program for Canada's Primary HealthCare Providers

A Coordinated Approach to PTSD and Depression

Submitted by Mood Disorders Society of Canada

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Executive Summary

Post-traumatic stress disorder (PTSD) is a major and growing health problem in Canada. For example, a recent survey of more than 6,000 Canadian Forces members in 2013 found the rate of PTSD had almost doubled over the previous decade.

But PTSD is not limited to the military. It is also prevalent among all first responders (ie: police, firefighters, paramedics, 911 operators). It also afflicts Canadians involved in traumatic incidents such as car accidents and concussive sports injuries or those who have been victims of sexual abuse. And it is well known that members of First Nations, Inuit and Métis communities who survived residential school abuse and the “60’s Scoop” suffered and continue to suffer from PTSD.

PTSD inevitably impacts families, caregivers, healthcare providers, support networks and the healthcare system.

In almost every case of PTSD, an associated condition is depression, a growing epidemic in Canada. Depression is implicated in every aspect of Canadian life from the work place to death by suicide of over 4,000 Canadians every year. The leading prescription drugs being given to college and university students are antidepressants. The economic burden of mental illnesses including depression is huge—currently estimated at \$51 billion annually. The additional burden of PTSD, while currently unquantified, is very high with regard to the cost of disability payments made to sufferers of PTSD by Veterans Affairs, Canada Pension Plan Disability, provincial support programs, and private payers. The extreme level of human suffering is now well known to all Canadians. Homelessness, incarceration, broken families and generally the loss to Canada of previously highly functioning and productive citizens is something our society should not tolerate.

Considering the societal, personal and economic toll of PTSD, the Mood Disorders Society of Canada (MDSC) believes that investing in a comprehensive program focused on Canada’s primary healthcare providers to enhance their ability to provide early diagnosis and treatment of PTSD to their patients is a prudent use of public funds that will save significant health care and societal costs and significantly enhance the quality of life of those suffering from PTSD, their families and caregivers.

With a significant track record of working with primary healthcare providers from across Canada and providing educational tools to them, MDSC is seeking a \$5 million investment from the Government of Canada to support PTSD and depression education focused on improving diagnostic tools available to Canada’s primary healthcare providers and improvement of patient outcomes. This will allow MDSC—together with Canada’s leading primary healthcare provider organizations,



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with whom we have partnered in the past on such projects as the Canadian Collaborative Mental Health Initiative (www.ccmhi.ca) and MDSC's highly regarded PTSD Continuing Medical Education (CME) program—to work together to increase the knowledge of early diagnosis and treatment of PTSD for all primary healthcare providers across Canada. We will pay particular attention to providers in smaller centres and in rural and remote areas of Canada. This will directly impact and help veterans, first responders and Canada's Indigenous Peoples suffering from PTSD and depression.

The initiatives proposed by this funding request will deliver education materials and training to a majority of Canada's hundreds of thousands of primary healthcare providers.

A separate complimentary program will also be designed co-operatively with our Indigenous mental health leaders focused on educating Indigenous healthcare providers to better diagnose and treat First Nations, Inuit and Métis persons with PTSD, principally but not exclusively, as a result of the traumas identified by the Report of the Truth and Reconciliation Commission. MDSC's current e-learning initiatives for family doctors and nurses will continue. The proposed program will build upon these initiatives by developing highly specialized and advanced educational programs to “train the trainers,” creating a mental health corps able to deliver professional onsite instruction to doctors, nurses and other primary healthcare providers. MDSC will also create and deploy effective awareness and marketing campaigns to maximize provider uptake of the programs.

Finally, all MDSC projects include performance measurements to ensure that the programs achieve projected outcomes.



The Challenge

Educating Healthcare Providers

Studies show about 85 per cent of Canadians dealing with mental health problems approach their family physician first. Unfortunately, about two-thirds of those suffering from PTSD and/or depression will leave their doctor's office without effective solutions, notwithstanding that:

- between 1.1% and 3.5% of the general population of Canada has PTSD in any given year;
- 9% of Canadian military personnel returning from Afghanistan have been diagnosed with the disorder;
- about 36% of male correctional officers have identified as having PTSD;
- 1 in 5 federal public servants will suffer from a mental health issue;
- rates of PTSD suffered by first responders such as police, firefighters and paramedics are much higher than the national average
- rates of PTSD suffered by Indigenous persons are among the highest in the world.

Evidence continues to accumulate that the majority of those suffering from PTSD are unable to find healthcare providers who can offer early diagnosis and treatment. This is principally because the vast majority of health care providers have never received appropriate education and training regarding PTSD specifically and mental illnesses in general.

Breaking the Stigma

One of the main impediments to the effective treatment of PTSD is the societal stigma surrounding the disorder. A study by the Canadian Medical Association in 2008 found almost half of those surveyed believe that a diagnosis of mental illness is merely an "excuse for poor behaviour and personal feelings."

An MDSC report to the Government of Canada in 2012 concluded: "It is critical that the current real and perceived stigma surrounding PTSD be chipped away. This can only be achieved through sustained dialogue about PTSD and the sharing of personal experiences from a broad group of stakeholders including sufferers, family members, physicians and researchers."



The Action Plan

1. Helping Canadians

- MDSC is seeking \$5 million in Budget 2017 to accelerate and expand the reach of our successful Continuing Medical Education program focused on PTSD. The new programs will be developed in partnership with national organizations representing the full spectrum of health care providers and will include the development of educational curricula to assist providers in their primary care capacity to diagnosis and treat PTSD early.
- MDSC will work with organizations to provide greater education, resources, supports and training for families and caregivers who support those living with PTSD.
- MDSC will work with representatives of First Nations, Inuit and Métis peoples to help ensure that these communities benefit from the programs proposed herein.

2. Helping Canadian Business

- MDSC will work with government and stakeholder organizations to address identified learning gaps with programs that are designed to achieve targeted learning objectives. MDSC, together with its partner organizations, will bring together business organizations, employers and government agencies to consider and advise on the necessary foundational input for the development of the curricula.
- Canada's business community, governments and employers generally will benefit significantly from this program due to the improved mental health and productivity of employees and service members. Furthermore, the burden of insurance claims for disability payments currently being paid by private insurance companies, Canada Pension Plan disability payments, and provincial and municipal disability payment programs will be significantly reduced.

3. Helping Canadian Communities

MDSC, and its proposed partners, are positioned to provide resources and training to healthcare providers in urban, rural and remote communities nationwide. Some of the proposed programs are:

- Unique training programs focused on the specific needs of veterans and first responders;



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- Create new e-learning and distance education programs as part of the overall curricula;
- Utilize the “Train the Trainer” methodology;
- Secure accreditation where appropriate;
- Design and deploy promotional programs to build awareness of the project;
- Evaluate all aspects of the program.

MDSC together with its partners is uniquely positioned to assist the Government of Canada in fulfilling its commitments to:

- Make high quality mental health resources and support services more available to Canadians who need them;
- Develop a coordinated national action plan on post-traumatic stress disorder as it affects public safety officers;
- Provide greater education, resources, supports and training for families who are providing care and support to veterans living with physical and/or mental health issues as a result of their service.

Why MDSC

Since partnering with the Public Health Agency of Canada to produce Canada’s first report on mental illness in 2002 and “The Human Face of Mental Illness” in 2006, MDSC has been at the forefront of many successful national programs to change the way mental health issues are dealt with in society and treated in the healthcare system. For example:

Training:

- Development and deployment of leading educational materials and training programs aimed at improving the diagnosis and treatment of mental illnesses including PTSD.
- Supporting the development of family healthcare teams as part of the Canadian Collaborative Mental Health Initiative, now called “Shared Care”.
- Developed a mental health training program for front line staff of the Correctional Services of Canada (CSC).
- Together with the Canadian Bar Association and Bell Let’s Talk developed a Continuing Education Legal Program on Mental Health and Wellness in the Legal Profession. Canada’s lawyers, judges and law students benefit from this program.

Breaking the Stigma:

- Creating and deploying the highly regarded anti-stigma campaign “Elephant in the Room,” aimed at reducing the stigma of mental health through public



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education and by stimulating an informed national conversation about mental illness.

- Created accredited Continuing Medical and Continuing Nursing Educational Programs focused on reducing the stigma of mental illness within Canada's physician and nursing communities.
- Participation as one of the national partners in Bell Canada's "Let's Talk" campaign also aimed at breaking down the stigma of mental health;
- Providing spokespersons for audiences across Canada on the stigma of mental illness;

Research:

- The only national mental health patient organization actively involved in the development and establishment of the Canadian Institutes of Health Research and the first NGO member of the Advisory Board for the Institute of Neuroscience, Mental Health and Addiction.
- A founder of the Canadian Depression Research & Intervention Network (CDRIN), a Pan-Canadian network of over 200 of Canada's leading mental health researchers and academic institutions. Among CDRIN's unique features is the focus on full patient engagement in every aspect of research.

Indigenous Peoples:

- MDSC has a history of working and partnering with Indigenous Peoples and their representative organizations. For Instance, working with the Native Mental Health Association of Canada a ground breaking study was undertaken with the support of the First Nations and Inuit Health Branch of Health Canada. The project was titled "Building Bridges".
- MDSC facilitated the establishment of an Indigenous Peoples mental health research Hub at the University of Saskatchewan.

First Responders:

- MDSC's 26 member national Peer and Trauma Support Team provides peer support training for first responders suffering from PTSD anywhere in Canada.

Community Support and Collaborations

- MDSC developed the Pan-Canadian Defeat Depression campaign in 2012. More than 95 communities across the country hold annual events and tens of thousands of Canadians participate to support local mental health services. This program continues to grow.

In co-operation with prominent partner organizations, MDSC is a leader in innovative and successful programs aimed at helping those afflicted with mental illnesses including PTSD. MDSC is well positioned to undertake this proposed



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program and to ensure it delivers the promised benefits. The proposed funding will permit MDSC, together with its partners, to undertake the necessary consultations and research; design and develop the curricula; role out the program across Canada and train the trainers; develop the materials that will promote the uptake of the program within the various healthcare professions and other organizations that will benefit from this program and conduct evaluations on an ongoing basis.