Improving access to mental health and addiction services

**Doctors Nova Scotia’s position:** All Nova Scotians need timely access to appropriate mental health and addiction services. With support and resources, psychiatrists and family doctors can play a central role in advancing mental health and addiction care in the province. Family support and education, ease of access to services, and education for primary care physicians are essential elements required to improve mental health and addiction services in the province.

**Why is it important?**

Mental illness or addiction will affect all Nova Scotians indirectly through family members, friends or colleagues at some point in their lives. According to the Mental Health and Addictions Strategy Advisory Committee the total economic costs of mental disorders have been shown to match the economic impacts of heart disease, diabetes and hypertension combined. Of the non-communicable diseases, neuropsychiatric conditions contribute more to the overall burden of illness than either cardiovascular disease or cancer.

**How does our province measure up?**

Nova Scotia, like many other jurisdictions, has suffered from disconnected but well intentioned mental health and addiction services delivery models. It can be challenging to access mental health services in the community, as well as in hospital settings. According to the Mental Health and Addictions Strategy Advisory Committee, in Nova Scotia nearly 200,000 people will experience symptoms ranging from problematic and chronic to acute and debilitating, most of which could and should be treated and relieved.

**How can government fix the problem?**

*Support the role of psychiatrists as educators.* Government should support the work psychiatrists do to educate families, family physicians, and other health professionals, as well as and provide leadership in the field of mental health and addictions services. If given additional and appropriate supports, psychiatrists can play a leading role in capacity building in communities.

*Build mental health and addiction services capacity throughout the system.* Government should invest in developing the capacity of primary care physicians in mental health and addictions services by providing education, training, and support for them, their staff, and other health-care providers. This will allow family physicians and psychiatrists, along with other mental health professionals to establish their own relationships with each other to better serve their communities.

*Improve access to acute care beds.* Government should address hospital bed backlog to ensure mental health and addiction service patients have access to inpatient care. While bed blocking is a problem for many specialties, currently psychiatric acute care bed availability is lower than all other inpatient care bed availability.

*Mental health needs to be integrated into all health strategies.* Government should consider how mental health and addiction services are woven into other provincial plans, such as primary care delivery and physician resource plan. In order for communities to be successful in delivering mental health and addiction services, they need to be connected to the overall health system and consider provider workload, scope of practice, and appropriateness of care when implementing strategies.