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Telegram Forum

Success of new act depends on community support

By Heather Pollett

As policy analyst for the Canadian Mental Health Association (CMHA), Newfoundland and Labrador Division, I feel that Edward Sawdon's Telegram Forum submission in the Jan. 28 edition, headlined "Pharmacare program would benefit health consumers," requires clarification.

Sawdon claimed mental-health consumers were not given adequate time to provide input on the changes to the Mental Health Care and Treatment Act, and Consumers Health Awareness Network Newfoundland and Labrador (CHANNAL) and other stakeholders were not included "in the loop." I have recently confirmed that, along with CMHA, representatives from CHANNAL and the Schizophrenia Society of Newfoundland and Labrador were at the table during stakeholder meetings throughout the policy development process and were given the opportunity to review the draft legislation.

Important input

Consumer involvement was and continues to be an important part of the collaborative planning process, as consumer expertise is intrinsic to building and shaping a better mental-health system in our province. As Geoff Chaulk, executive director of CMHA, expressed in his Telegram Forum submission on Jan. 7, entitled "New mental health act is a step in the right direction," our position on the amendment to the act regarding community treatment orders (CTOs) is that the necessary supports and services must be available in the community in order for a CTO to be successful. This includes psychiatric medication, which is a necessary treatment for many people with serious mental illness. Without treatment, the illness could lead a person to cause harm to himself or herself or to another, or to deteriorate physically and mentally. Because the individual who has been issued a CTO must be capable of complying with the requirements set out in the order's treatment plan, the legislation states that the services the person requires in order to reside in the community, which include treatments such as medication,

exist in the community, are available to the person and will be provided. Currently, individuals with mental illness who qualify for income support are eligible to receive a drug card which covers the total cost of their medication through the Newfoundland and Labrador Prescription Drug Program (NLPDP).

Not available to all

However, not everyone with mental illness receives income support and for those without insurance, the cost of medication can be a significant financial burden. As part of its Poverty Reduction Strategy, the provincial government recently expanded the NLPDP and introduced the Low Income Drug Program which will provide better access to residents who have low income, do not have insurance coverage and would not otherwise be eligible for a drug card; this program was launched on Jan. 31. Residents who apply and are eligible will, depending on their level of income, have a portion of the total cost of their medication covered by this plan. They will co-pay between 20 to 70 per cent of the cost. Sawdon raised some excellent points about access to prescription drug coverage for people with mental illness and meaningful participation of mental-health consumers in policy development. Access and collaboration are two important components of the policy directions laid out in the provincial government's mental-health and addictions-policy framework, Working Together for Mental Health. While the government is taking steps to reduce poverty and provide coverage for medication, there is still much work to be done.

The relationship between mental illness and poverty is still a very real and troubling one, a sad legacy born out of a history of ignorance and fear. Marginalization and discrimination have led to inadequate mental-health services, low income and poor housing which, in turn, reinforce stigma and stereotypes, exacerbate symptoms and prolong suffering, posing a substantial barrier to recovery. But there is hope - these are all current areas of policy research in mental health, many of which I read about every day. In time, and with government support and funding the goal is to be able to definitively address the specific issues affecting all Newfoundlanders and Labradorians with mental illness to enable them to live well in their communities.

In order for a CTO to be successful, it is crucial to take into account and then make available what a person with serious mental illness needs in order to live in the community. This was the reason for CMHA's support of the amendment. Outside of mental-health treatments and services, people living with mental illness have the same needs for income,

housing, social support and community inclusion as everyone else. Success of CTOs will not only be measured in terms of decreased hospitalizations or reduction in severity of symptoms, but by the degree to which both the individual and the community itself benefit from the reintegration of one of its residents. A chance for recovery is something each and every Newfoundlander and Labradorian deserves.

Heather Pollett writes from St. John's.

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