

Youth mental health versus H1N1

1



Cathie Coward, the Hamilton Spectator

Cathie Coward, the Hamilton Spectator

Two Ontario crises: one gets scant resources, the other immediate funding

November 16, 2009

SARAH CANNON

THE HAMILTON SPECTATOR

(Nov 16, 2009)

My daughter suffers from a potentially life-threatening illness. Her father lost his life to the same illness.

The symptoms of her life-threatening illness are the second-leading cause of death among our youth, second only to accidental death. The symptoms, when left untreated, claim the lives of our youth more than any other illness, more than cancer and heart disease, and yet treatment remains difficult to obtain.

It may be surprising that the illness my daughter suffers from, the illness that eventually claimed her father's life, is that of mental illness -- in their cases, bipolar disorder.

Recently, we have been saturated with information on the H1N1 crisis. This crisis is indeed one that is having tragic effects, and without doubt should be addressed immediately to prevent further loss of life.

It strikes me that the attention and urgency it has prompted is another clear demonstration of the lack of equity addressing the child and youth mental health crisis when compared to physical health crises.

Since April, 33 deaths have been attributed to H1N1 in Ontario. Since April, death to children suffering from mental illness is double that.

On average, more than two youths a week take their lives as a result of their mental-illness symptoms not being adequately treated.

As I write this, there are 82 admissions to hospitals attributable to H1N1 in Ontario. Toronto alone has more than 82 admissions in their psychiatric in-patient beds. Approximately 100 clinics have been established to address the H1N1 crisis -- 50 in the last week.

The average wait time for children to receive treatment for mental illness is more than six months.

Our government has committed to setting aside \$600 million to deal with the H1N1 crisis.

In the last 16 years, children's mental health has received only three annual increases and no additional funding. The 2009 budget provided a 3 per cent increase to health care -- children's mental health nothing.

More lives are lost from the symptoms of mental illness than any other physical illness, yet no additional funding, and years of no investment. Lack of investment and funding is causing decreases in the already-scarce services available.

When I learned that \$600 million has been dedicated to addressing the H1N1 crisis, and then considered the lack of funding for nearly two decades to children's mental health services, I was angry.

More lives are lost weekly because of the symptoms of mental illness than to H1N1; more admissions to hospitals have occurred in the same six-month time frame. But still -- nothing.

Our governments are elected to protect and preserve our quality of life, and it is definitely incumbent upon them to react immediately, and to make the lives of those they represent the most immediate priority.

Ask yourself -- are the lives of children and youth diagnosed with mental illness being considered a priority?

The children who suffer and consequently lose the battle to symptoms have a treatable illness. Their deaths are a direct result of preventable symptoms.

It is estimated that one in five children has a mental illness, yet only one in six of those children is receiving treatment.

We are demanding that our governments find a way to ensure all lives are saved and protected from H1N1. Are we doing the same for the children and youth suffering from mental illness?

Perhaps the reason for the urgency in the response to H1N1 is the contagious nature, that if allowed to spread will "infect others;" the snowball effect potentially devastating.

Mental health issues are not contagious in the same way we "catch a virus," but the impact they have on those around the person suffering is devastating, causing a ripple effect that impacts on the province, not only in mortality rates, but the economy as well.

Lack of investment and lack of adequate funding costs Ontario millions of dollars, as well as lives.

If the government has the capacity to react to a crisis that was not allocated funding when the budget was set -- a crisis that in comparison has developed quickly -- then I suggest we are not holding them accountable and demanding answers to explain the lack of urgency, attention and funding to mental health services for more than 30 years.

The comparison is two crises, unnecessary lives being lost, both "infecting" communities -- and one receiving funding and attention.

It may be a completely different perspective, and perhaps not a popular one, but I can't help but think that if we reacted with the same urgency and commitment to the crisis of mental health, perhaps my daughter would be less at risk.

Sarah Cannon lives in St. Catharines. She is executive director of Parents for Children's Mental Health, but notes the opinions expressed here are hers alone.