



A National Action Plan for Mental Illness and Mental Health *A Call for Action*

This consensus statement was drafted at the National Summit on Mental Illness and Mental Health held on October 3, 4, 2002. The consensus statement was ratified subsequently by each of the signatory organizations.

VISION

We envision a country where all Canadians enjoy good mental health. Canadians with mental illnesses*, their families and care providers must have access to the care, support and respect to which they are entitled and in parity with other health conditions.

PRINCIPLES

We are committed to a National Action Plan that upholds the following principles:

1. Mental illness and mental health issues must be considered within the framework of the determinants of health and recognizes the important linkages among mental, neurological and physiological health.
2. Given the impact of mental health issues and mental illness (i.e. on the suffering of Canadians, on mortality, especially from suicide, on the economy, on social services such as health, education and criminal justice), Canadian governments and health planners must address mental health issues commensurate with the level of their burden on society.

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3. Mental health promotion and the treatment of mental illnesses must be timely, continuous, inter-disciplinary, culturally appropriate, and integrated across the full life cycle and the continuum of care (i.e. physical and mental health; social supports and tertiary care to home/community care).

KEY ELEMENTS OF A NATIONAL ACTION PLAN

1. **National Mental Health Goals.** These goals would provide a framework to, for example, evaluate both processes and outcomes, set minimum standards, and assess systemic change.
2. **A Policy Framework.** The framework must provide for a comprehensive health promotion and service delivery plan, an enhanced research program, a surveillance and national data/information system, a public education strategy, a health human resources plan, and an innovations fund that embraces both mental illness and mental health promotion as well as the principles of recovery and citizenship.
3. **Dedicated, Sustained and Adequate Resources** tied to the National Mental Health Goals and specific outcomes.
4. **An Accountability Mechanism,** such as annual reporting on, for example, access, mental health status, systemic change and the application of best practices.

** NOTE: The use of the term "mental illness" in this "Call for Action" includes diseases, disorders, conditions or problems. It also includes the spectrum of addictions.*

A CALL FOR LEADERSHIP AND ACTION

We, the undersigned, urge the federal, provincial and territorial governments to work together with federal leadership to recognize and act upon the compelling moral, social and economic case for mental health promotion and mental illness care.

SIGNATORY ORGANIZATIONS

Canadian Medical Association
Canadian Psychiatric Association

NATIONAL ORGANIZATIONS REPRESENTED AT THE OCTOBER 2002 SUMMIT

Autism Society of Canada
Canadian Academy of Child Psychiatry
Canadian Alliance on Mental Illness & Mental Health
Canadian Association for Suicide Prevention
Canadian Association of Occupational Therapists
Canadian Association of Social Workers
Canadian Coalition for Seniors Mental Health
Canadian Council of Professional Psychology Programs
Canadian Federation of Mental Health Nurses
Canadian Health Care Association
Canadian Medical Association
Canadian Mental Health Association
Canadian Psychiatric Association
Canadian Psychiatric Research Foundation
Canadian Psychological Association
College of Family Physicians of Canada
Mood Disorders Society of Canada
National Network for Mental Health
Native Mental Health Association of Canada
Schizophrenia Society

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