

The ChronicleHerald

Head of mental health commission says suicide in Nova Scotia a 'hidden crisis'

John McPhee (jimcphee@herald.ca)

Published: Sep 25 at 6 a.m.

Updated: Sep 25 at 3:13 p.m.



Louise Bradley, president and CEO of the Mental Health Commission of Canada, right, Stephanie Machel, the commission's director of stakeholder relations speak with The Chronicle Herald Editorial Board on Monday. - Eric Wynne

About 10 Canadians will take their own lives today. And tomorrow. And the next day.

Despite the growing discussion around mental health, there remains a “hidden crisis” of suicide in our country, said Louise Bradley, the president and CEO of the Mental Health Commission of Canada.

“They happen in garages, bedrooms, forests, . . . ” Bradley told members of The Chronicle Herald editorial board on Monday. “Of the nearly 4,000 suicides in Canada every year, the vast majority of them are preventable, which is such a sad situation.

Bradley and other commission officials are in Nova Scotia this week speaking with representatives of the Nova Scotia Health Authority, the Nova Scotia Mental Health Foundation and other organizations to promote a co-operative approach in dealing with mental health issues.

“Canada doesn’t have a suicide prevention strategy but we do have a national mental health strategy,” Bradley said, “and if the various components of the strategy and most provincial strategies like the one in Nova Scotia, if various components of that were implemented, you would see a reduction in suicides. We actually see suicide as a litmus test for how well any different place is doing in terms of providing mental health services.”

According to the commission’s statistics, Canadian provinces and territories spend only an average of 7.2 per cent of their health budgets on mental health programs, compared to 13 per cent in England.

Of the roughly \$4.2-billion spent each year on health care in Nova Scotia, about \$225 million goes toward mental health.

Nova Scotia psychologist [Dr. Simon Sherry recently called on the province to create a co-ordinated strategy to deal with the rising suicide rates](#) in Nova Scotia with firm deadlines and dedicated funding.

According to Statistics Canada, there were 134 suicides in Nova Scotia in 2016, compared to 2000 when there were 75 deaths. Sherry noted that between the years of 2000 and 2012, Nova Scotia’s suicide rate increased more than any other province in Canada.

In just the past two weeks, two young people took their own lives at Eskasoni First Nation.

RELATED: [Cape Breton community of Eskasoni striving to support young people after suicides](#)

“Intergenerational trauma is a huge issue and I think we’ve grossly underestimated its impact,” Bradley said in reference to suicide rates among First Nations people. “(You have) grandparents that have no sense of family, that have been pulled away and grown up abused in so many different ways in residential schools, it doesn’t just stop with that generation. It flows over to their children and to their grandchildren, I think it has a huge impact. It’s one of the complex reasons why we’re seeing this.”

Bradley listed a string of programs created by the Mental Health Commission that offer strategies to reduce suicide and to combat the stigma around mental health problems. One of those programs, called [Headstrong](#), has been implemented in four Nova Scotia communities, including Eskasoni.

The program encourages young people aged 12 to 18 to reach out and speak up about mental health.

“What we found that works is contact-based education,” said Bradley, a Newfoundland native who has been CEO of the mental health commission for seven years and was director of mental health programs in the former Capital Health district in Nova Scotia.

“As an example, my background is nursing: I can give you the signs and symptoms of depression but if I’m able to say at the same time, by the way, my experience has been ... that has a greater impact on who it is you’re talking to. That is particularly so with youth.”

Another program called Roots of Hope specifically targets suicide reduction with strategies such as crisis intervention and using e-health technology. The program, which originated in Europe, was implemented in Quebec and over the past two years has reduced the suicide rate there by 30 per cent.

The commission is talking with the Nova Scotia Health Authority about implementing Roots of Hope here and Bradley said she’s optimistic that will happen.

Resources

Know the risk factors and warning signs for suicide: <https://cmha.ca/documents/preventing-suicide>

How to get help: If you or someone you know needs immediate mental health help, go to the nearest hospital, call 911, or call the Nova Scotia crisis line:

Halifax: 902-429-8167

Toll-free: 1-888-429-8167

Additional services: www.nshealth.ca/mental-health-addictions

<http://www.ementalhealth.ca/Nova-Scotia/>

Anywhere in Canada, you can contact:

Kids Help Phone

- 1-800-668-6868
- <https://kidshelpphone.ca/>

Crisis Services Canada

- Phone:1-833-456-4566
 - Text: 45645
 - Chat: crisiservicescanada.ca
- 