

EMAIL INSTRUCTION

Master of Social Work: Marie & Chris

A request for email instruction from Marie, a(n) Graduate student who is writing a paper of 3-4 pages for 836 Social Work Mental Health Policy and Practice due 11-15-2011.

The assignment is:

Three - four page paper on mental health system outside the U.S. Pick another country in the world and searching the internet, reviewing the literature, or interviewing someone who has immigrated recently from that country (who can speak to a reasonable level of knowledge about the topic) learn what you can about how mental health services are provided in that country. Write up a 3-4 page summary of what you find. In your summary, address (1) What are some of the underlying values and beliefs reflected in the country's mental health policy? (2) To what extent is treatment defined as a right vs. a benefit based on ability to pay?

My major concerns about this paper are:

Make sure that the paper flows together and answers what the assignment is asking

The parts of my draft I think are working best and the ideas I find interesting are:

I feel like I have a great deal of information about Canada's mental health care and deficits in it.

Hi Marie,

Thanks for sending your Social Work 836 paper to the Online Writing Center! My name is Chris, and I'll be working with you via email to give you comments and feedback. I'm glad you found us online, and I hope you find my comments helpful.

I've made two types of comments (1) overall comments that immediately follow here, and (2) more specific comments inserted into the text of your draft (these should be easy to find because I've left space around these, made them bold, and enclosed them in double square brackets). I suggest that you read the overall comments first, as they help contextualize the inserted comments.

*******OVERALL COMMENTS*******

You've done all the hard work of research, and that really comes through in the draft. This is a really good, condensed snapshot of the Canadian mental health system. However, think about the moments when your paper really answers the two questions of the prompt: "(1) What are

some of the underlying values and beliefs reflected in the country's mental health policy? (2) To what extent is treatment defined as a 'right' vs. a 'benefit' based on ability to pay?" Although your paper certainly addresses the infrastructure change, I think you could do more work to answer these two questions more directly. One way to do this is simply to add to the fourth, fifth, and sixth paragraphs to extend their observations a bit further. For example, when the Commission emphasizes the importance of community-based care, what explicit values does this reflect? A sense that patients have to be treated as a whole person, or in a much larger life context? What kind of beliefs, both in terms of what a health care system should do and, implicitly through that, how it needs to work, does this strategy seem to embody?

The first and third paragraph seem to address very similar things, except the third is a bit more specific about the actual changes in the Canadian system. Think about what kind of work you want the first paragraph to do and compare that to the kind of work the third paragraph does. Can the first be condensed or re-oriented in some ways so that the beginning feels less repetitive when you get to the third paragraph?

So, try focusing on those two things. Remember that your primary objective is to make sure the professor has absolutely no question about how your paper addresses the two parts of the prompt. It's always better to err on the side of giving your reader just a bit too much information rather than not enough.

Good start!

Best regards,
Christopher McVey
UW Writing Center Instructor

*****YOUR DRAFT WITH MY COMMENTS*****

Mental health problems can be found throughout the entire world and are dealt with by countries in many different ways. **[[Maybe rephrase: "In Canada, it was not until recently that there was a plan put into place for mental health care" to something like "It wasn't until recently that Canada developed a strategic plan for mental health care" Or see if you can be more specific about *who* developed this plan; was it the politicians? Some specific office? What do you mean by "put into place"?]].** Prior to the realization that there was a need for a strategy for mental health care, there was little concern for mental health in Canada **[[who had little concern? The public? The national Canadian health system? You might want to make a distinction between a lack of concern and a lack of a strategic plan to address it; those are different things. I find it hard to believe that nobody cared about mental health until recently]].** The goals of the development of Canada's mental health strategy were to increase the quality of life for those with mental illnesses through preventative care and easier access to services, and also to decrease the amount of stigma surrounding mental health and illness. The

strategy has only been set into place within the last few years and has run into some issue in implementing the plan. Since Canada's mental health strategy is so new, the successfulness of the strategy has yet to be determined. **[[You might want to mention what caused this change, or who/which organization decided to change directions and make mental health a priority.]]**

Like the United States, Canada's mental health care system has been deinstitutionalized, and there is a push to develop more community programs and keep individuals closer to their home, if not remain at their homes. **[[who is making this push? Who/what deinstitutionalized mental health?]]** This occurred in from 1960-1975 (Moran, 2010).

Following deinstitutionalization, however, there was very little attention paid to how the upkeep and development of beneficial community programs. There were no reports made of the care and conditions of mentally ill patients in treatment. **[[You might want to write a brief sentence or two about how this earlier health system in Canada reflected a certain set of underlying values and beliefs; this will help you to compare/contrast the new set of values & beliefs of the new approach with the old.]]**

It was not until 2007 that Canada recognized the need for the improvement of its nation's mental health care and a national mental health care strategy (Kirby, 2008). **[[repetitive? But this is more specific--good!]]** Up until this point in history, Canada was the only industrialized country that did not have a national health strategy/plan (CAMIMH, 2011). In 2006, the Standing Senate Committee on Social Affairs, Science, and Technology performed an investigation on Canada's mental health care. This investigation led to the creation of the Mental Health Commission of Canada (Kirby, 2008). The main duty of this commission was to develop a strategy for mental health care in Canada. The federal government provided the commission with \$15 million dollars over a ten year span to fund the commissions work towards development and implementation of a mental health strategy (Kirby, 2008). Along with the federal government, the provincial and territorial governments all approved of this plan of action (CAMIMH, 2011).

[[This seems to answer all the questions I had about the first two paragraphs! You might want to connect/combine the third paragraph with the first. It would cut out the slight sense of repetition and give you some more space to reflect on the old system's values/beliefs before comparing it to the new system.]]

This plan, however, is not considered a national plan. The Commission is independent from the federal, territorial, and provincial governments of Canada and can only work to implement and advocate for their beliefs and ideas (Kirby, 2008). The Commission does not make laws but only works to advocate for certain strategies and plans, like their mental health strategy. Each province and territory in Canada is still in control of making the laws and policy as to how to handle mental health and illness (Kirby, 2008). **[[Good! So why does this matter? What are the consequences? Remember the prompt-- what kind of values or beliefs does this infrastructure imply or reflect? What do you think about them?]]**

The mental health strategy created by the Mental Health Commission of Canada had specific main points of concern **[[Why had? Why not had? Are these no longer relevant or official?]]**

Have they changed?]]. There is all large number of individuals in the criminal justice system that suffer from addiction and mental illness (Macqueen & Belluz, 2011). The Commission emphasizes separation between criminals and those suffering from mental illness. The Commission also emphasizes promotion of mental illness instead of covering it up, early intervention, and recovery from illness (Picard, 2011). Another concern was to decrease the amount of stigma towards mental illness and the discrimination against individuals with mental illnesses (Kirby, 2008). The strategy also stresses the importance of community-based care, providing financial assistance to those in need with mental illnesses, and providing proper housing for those with mental illnesses (Picard, 2011). **[[Good! But again, what kind of values or beliefs does this strategy suggest or reflect?]]**

The implementation of the Commission,s mental health strategy is still a work in progress. One major limitation to the implementation of the strategy is the lack of funding. Since only 5-7% of the national health care funding goes to mental health, mental health care is mainly private and funded by the individual and their family (Macqueen & Belluz, 2011). It is those who are wealthy that are able to obtain psychiatric care. The cost of care and the lack of inclusion of mental health in Canada,s health transformation have left many individuals without the ability to access needed care. This has also led to an inadequate amount of housing being produced and provided for those with mental illnesses (Lurie, 2008). **[[So does this mean that mental health treatment is defined as a benefit rather than a right?]]**

There is also a lack of mental health service providers. Due to the lack of providers, many Canadians are unable to seek specialized assistance beyond their primary care providers, who have little experience in the most effective ways of dealing with mental illness (Kirby, 2008). The Canadian population that has received the least amount of adequate mental health care has been children (Berenyi, 2011). There is a lack of providers who specialize in the treatment of children and youth with mental illnesses. **[[So does this mean that mental health treatment is defined as a benefit rather than a right? Take a few sentences to reflect on why this might matter.]]**

More recently there has been greater emphasis on a collaboration between Canadian,s mental health care workers. This increase in collaboration will help to allow general primary care providers to better be able to manage mental health issues (Kates et al, 2011). The Canadian Psychiatric Association and the College of Family Physicians of Canada Collaborative Working Group on Shared Mental Health Care hope that this collaboration will allow for clients to have better access to mental health services. The collaborative approach helps to decrease the need for additional services that would lead to additional costs (Kates et al, 2011). **[[What kind of change in terms of values or beliefs does this collaboration thus reflect or suggest?]]**

Canada is currently considered in a mental health crisis. Today, 1 in 5 Canadians will suffer from mental illness sometime in their lifetime, and the cost of mental illness on Canada,s economy is more than \$51 billion dollars each year (Picard, 2011). Beyond the initial investigation report into Canada,s mental health care, these are other reasons that there is a growing concern for the care of Canadians with mental illnesses. **[[Good!]]**

The Mental Health Commission of Canada's strategy presents criteria to the federal, provincial, and territorial governments on what implementations and services they need to provide for their mental health residences. It also helps bring more awareness to the growing problem of mental health care in Canada. Though Canada has a ways to go before they have fully developed a strong, beneficial mental health care system, and maybe some day a national mental health care system, the Commission's strategy is a starting point. **[[Nice work!]]**

Just as in our face-to-face meetings in the Writing Center, the time we have is finite, and there are always many different levels of feedback that could be offered. The comments I'm sending you represent my best effort, given the time constraints of Online Writing Center work, to show what your next steps might be as you continue to rework and revise the draft.
