



July 30, 2013

Gerry Nott
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Re: [Suicide risk among elderly high](#), July 30.

Mr. McGee's story is on "the good side" since he's getting the care and support he needs. But how many others are left on "the negative side" because psychological care is covered only when delivered in a hospital? Canada must build an alternative solution outside of Canada's overburdened and costly hospitals to effectively provide the mental health services Canadians need.

The median length of stay for mental illness in a Canadian general hospital is less than 10 days. That leaves many more days away from the hospital bubble where a patient might be in need of regular medication, counselling or just a safe environment to cope. Imagine the toll this takes on a senior who may also be dealing with other complex health problems.

Governments have made great strides in building mental-health support for youth, but a dedicated strategy for seniors' mental health is needed because their challenges and opportunities are just as unique. Our system must be able to respond to the needs of Canadians with the right care at the right time delivered by the right provider. The only way we can achieve this effectively is to redistribute support between hospitals and community-based primary care where interprofessional teams of nurses, physicians, psychologists, social workers and others are collaborating in the delivery of care.

Mental health is rarely outwardly visible. That's why we must build supports wherever Canadians are — at home, in the workplace and in their communities.

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