



Mental Health
Commission
of Canada

Commission de
la santé mentale
du Canada

RCPS
Réseau canadien des
personnels de santé



CHWN
Canadian Health
Workforce Network

Athabasca
University

International Scan: Highlights

Mental Health and Substance Use Health Workforce Strategies



About the issue

The mental health and [substance use health](#) (MHSUH) impacts of COVID-19 and the overdose crisis have increased the gap between what the population needs and what the service system can provide. Now more than ever, Canada needs a MHSUH workforce strategy to coordinate planning across jurisdictions, provider types, and public and private sectors.



To identify planning trends in different countries, we conducted a rapid environmental scan of workforce strategies and reforms published between 2012 and 2023, identifying 311 policy documents and 39 academic papers in the United Kingdom (U.K.), Australia, New Zealand, Italy, Germany, the United States, and Canada. The scan will inform *Policy Options for a Pan-Canadian MHSUH Workforce Strategy*, a Canadian Institutes of Health Research-funded project.

Why it's important for Canada

Increased MHSUH concerns during the pandemic:

1 in 3 [Canadians](#)
reported moderate-to-severe
mental health concerns,

1 in 4 [who used](#)
[alcohol](#) or [cannabis](#) reported
problematic use.

Decreased MHSUH workforce capacity overall
during the pandemic ([43% decreased](#), [33% increased](#), [24% no change](#)).

No significant MHSUH workforce plans and strategies, unlike the [U.K.](#), [Australia](#), [New Zealand](#), and the [U.S.](#)

Highlights of international MHSUH workforce initiatives

The U.K. has a flexible statutory model ([Right-Touch Regulation](#)) that supports quality assurance across the full range of MHSUH providers and allows for self-governance.

New Zealand's Ministry of Health funds [Te Pou](#), a national MHSUH workforce development centre that helps providers to access grants and specialized training.

Victoria, Australia, has a [Jobs That Matter](#) hub that makes it easier for people to enter the MHSUH workforce.

In the U.S.:

- The federal government is investing \$700 million to strengthen MHSUH (called “behavioral health”) workforce capacity in [underserved areas](#).
- Up-to-date MHSUH workforce forecasts are available through [dashboards](#).
- A federally funded network includes a dedicated MHSUH health [workforce research centre](#).
- 39 states reimburse MHSUH peer support services through [Medicaid](#).

Key MHSUH workforce priorities from international strategies

- Increasing recruitment and ensuring retention, including the setting of MHSUH workforce targets
- Strengthening education, training, and professional development for MHSUH providers across all career stages
- Diversifying the MHSUH workforce by developing new roles (e.g., peer support workers, personal well-being professionals) and supporting their integration into the sector
- Addressing gaps in MHSUH workforce representation and cultural competence
- Fostering collaboration and integration between mental health, substance use health, primary care, and other sectors
- Improving MHSUH workforce data collection to enable effective planning, especially for unregulated occupations
- Protecting the safety and well-being of the MHSUH workforce
- Enhancing digital infrastructure and ensuring that MHSUH workers are trained to provide virtual care



Emerging MHSUH workforce policy opportunities in Canada

As Canada builds on the lessons learned internationally to address gaps in workforce planning, several policy opportunities can be considered:



- 1** Fully include the MHSUH workforce in implementing new tailored federal health transfers, including broader health workforce reforms and family health services.
- 2** Prioritize closing MHSUH workforce data gaps through new Health Workforce Canada data.
- 3** Leverage the GST/HST elimination to accelerate the regulation of psychotherapists/counselling therapists across the country, as part of a range of flexible regulatory approaches.
- 4** Prioritize the workforce when developing new national standards for MHSUH services.



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