

**Social
Democrats**

Making Mental Health a Priority

Public Services we can be proud of

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Introduction

Mental health care in this country is currently a piecemeal system that lets many fall through the cracks. Primary and community care is much disorganised and varies greatly across the country, and emergency care is not fit for purpose. This results in unnecessary distress for patients and families, and, too frequently, avoidable tragic outcomes. While the government has repeatedly launched initiatives urging people to 'get help', people in distress often find that that help is not forthcoming.

Recent research shows that almost 10% of the Irish population over the age of 15 has a 'probably mental health problem' at any one time. And that one fifth of young people from 19-24 and 15% of children aged 11 to 13 have had a mental health disorder. Growing demand for mental health services throughout the system has not been met with proportional increases in staff and resources for mental health services. There are huge waiting lists, as we have highlighted many times, for referrals to child and adolescent mental health services, and at the end of 2019, more than 8,000 people were waiting for a primary care psychology appointment, many of whom were children.

The Social Democrats aim to create a mental health care system which is proactive and community-based, while also overhauling acute and in-patient care to ensure those who do reach a crisis point receive the best standard of care possible. Evidence-based practice and compassion would form the backbone of this system, and it would fit within the broader framework of Sláintecare.

Sláintecare is a 10-year fully costed plan to provide for a universal access, single tier health service in Ireland, based on need, not the ability to pay. It was developed by an Oireachtas Committee, chaired by the Social Democrats co-leader following a motion put forward by the Party. However, government implementation is piecemeal and non-committal and proper funding has not been provided, despite all-party support for the plan.

Sláintecare had a key focus on mental health. It recognises that much of the mental health services are difficult to access and focussed on acute services which were significantly understaffed, that community mental health services

remain significantly under-resourced and that services were overly reliant on medication rather than on psychological and counselling services.

The full implementation of Sláintecare is a core part of the Social Democrats approach to addressing mental health. We will make mental health care a high priority within the health system, ensuring that those with mental health issues are no longer treated as second-class patients. A global revolution in mental health care is underway, and Ireland should be a leader in care rather than a country clinging to outdated and under-resourced models.

Approach to Mental Health care

Our approach to addressing mental health is to:

1. **Fully implement Sláintecare**, including increasing the annual budget allocated to mental health services to 10% of the overall health budget. Currently approx. 6%.
2. **Improve public education on mental health** and launch evidence-based prevention strategies.
3. Ensure effective and **timely primary and community mental health care** is accessible to all.
4. Ensure **better funding and organisation of acute and in-patient services**, so that those in crisis receive immediate and compassionate care.

Our commitments on Mental Health:

Sláintecare

Fully funding and implementing the provisions and 10-year plan of Sláintecare. This would include:

- Expand primary care to provide a much wider range of services in the community, including expanded mental health services
- Increasing funding to **10% of health budget for Mental Health**
- **Fully staff Child and Adolescent Mental Health** Teams by year 5.
- **Expand Adult Community Mental Health** Teams by year five
- **Expand Old Age Psychiatry** – by year five

- Expand **Child and Adolescent Liaison service** by year 5.

Education and Prevention:

- Increase and update school **SPHE education on mental health and wellbeing**.
- Emphasis on **mental wellness** as a spectrum within all public campaigns.
- Ensure that all **primary schools have referral access to a child psychologist**, who would also engage with schools and pupils on topics such as mental wellbeing and **anti-bullying**.
- Ensure that all **secondary schools have a guidance counsellor**, and referral access to educational and clinical psychologists.
- Launch a general awareness campaign on **mental illness prevention**, in schools, primary care, etc. There

Primary and Community Care:

- **Significantly reduce waiting times** for Child and Adult Mental Health Services and address the significant regional imbalances in waiting times – an issue the Social Democrats have continually highlighted.
- Massive investment in the **recruitment of extra psychologists** for the National Educational Psychology Service and the Child and Adolescent Mental Health services under Sláintecare.
- More **standardised primary care treatment guidelines** for conditions,

- Expand **Intellectually Disability Mental Health** services by year five

would be an emphasis on proactive mental wellbeing, similar to heart health. This would include a self-care toolkit and web resources.

- Support the mental health of the population **through lifestyle measures in other policies, such as improved work-life balance** and reduced cost of living.
- Promote/Introduce mental health and wellbeing initiatives in the **workplace**
- Ensure good funding for **mental health research**.
- Develop a **new national strategy on Suicide** to replace Connecting for Life which is due to expire this year

to ensure everyone receives the best standard of care.

- **Every GP would have a mental health team to refer to**, consisting of psychologists and a psychiatrist, counsellors, and access to allied professionals.
- **More assisted living and 'step-down' facilities** for those leaving in-patient care, and more supports for independent living for those with chronic mental health conditions.
- Ensure **adequate facilities for all services**.

- Ensure **timely and effective access and referral process** for professionals, e.g. social workers, occupational therapists, mediators and marriage counsellors, etc.
- Provide **support groups and advice/education for family members**.
- Vital services currently provided by state-funded non-profits will be incorporated into more unified public system. **The role of non-profits in advocacy and service provision will still be supported.**
- **Improved dual diagnosis** (addiction and mental illness) counselling and community services.
- **Increased neuropsychology services** (for issues like dementia and brain injury).

Acute and In-patient Care:

- Establish **dedicated mental health emergency services**. These would be co-located with a general emergency department and have access to a sufficient number of psychiatric in-patient beds.
- **Improve links between in-patient and community teams** to ensure cohesive follow-up and care plan after discharge, including tenancy sustainment.
- Provide a greater number of dual-diagnosis beds.
- Establish a **24 hour HSE mental health crisis and advice line**, accessible to all and promoted in particular to vulnerable populations

Legislation:

- Bring forward legislation to update the 2001 Mental Health Act so that it complies with international human rights standards

Please see our other General Election documents for further proposals on Health and Mental Health.



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