

EDITORIAL

Shared Mental Health Care: For the Benefit of All

Réal Labelle

*Centre de recherche de l'Institut universitaire en santé mentale de Montréal
Université du Québec à Montréal*

Catherine Briand

*Centre de recherche de l'Institut universitaire en santé mentale de Montréal
Université du Québec à Trois-Rivières*

The Centre de recherche de l'Institut universitaire en santé mentale de Montréal (CR-IUSMM) is a renowned mental health research centre contributing to the creation of a world where mental health problems are accepted and treated on a par with physical health problems. Its primary mission is to optimize knowledge and know-how and to develop innovative practices and organizational models of care with the aim of improving mental health promotion and mental illness prevention, treatment, and recovery support.

For years, two of its researchers, Réal Labelle and Catherine Briand, have explored issues concerning health care and service accessibility for persons with mental health problems, be they common or severe. In this regard, a growing number of studies have advanced the idea that primary mental health care can contribute to close the gap between needs for care and access to care (Funk, Benradia et al., 2014; Kates, Arroll, Currie, Hanlon, Gask et al., 2018; Who/Wonca, 2008; Starfield, Shi & Macinko, 2005). What is meant here by primary health care is the frontline of the public healthcare system. It is important to add that, for primary mental health care to be fully effective, it must be complemented by specialized care (secondary care), super-specialized care (tertiary care), and informal community services, which play a key role in self-care, counselling, relapse prevention, social support, and social reintegration (Fleury, 2014).

Réal Labelle, Centre de recherche de l'Institut universitaire en santé mentale de Montréal and Department of Psychology, Université du Québec à Montréal, QC; Catherine Briand, Centre de recherche de l'Institut universitaire en santé mentale de Montréal and Department of Occupational Therapy, Université du Québec à Trois-Rivières, QC.

The co-editors of this special issue would like to thank the Centre de recherche de l'Institut universitaire en santé mentale de Montréal for its financial support for this foundational primary mental health care project, not to mention the *Canadian Journal of Community Mental Health* and especially Tania Lecomte, Janie Houle, and John Higenbottam for their work in preparing this special issue. Thanks also to Nhi Vu, Anne Holley-Hime and Jean-Marie Bioteau for their logistical support and copyediting. Finally, many thanks to Assia Boudjerida for coordinating this project and liaising with the authors and all others involved.

Correspondence concerning this article should be addressed to Dr. Réal Labelle, Department of Psychology, Université du Québec à Montréal, 100 Sherbrooke St. West, Montréal, QC, H2X 3P2, Canada. Email: labelle.real@uqam.ca

In Québec, the 2015–2020 Mental Health Action Plan (PASM) listed among its priorities the consolidation of primary care with the other partners of the healthcare system and demonstrated how the implementation of shared care was associated with a greater effectiveness of healthcare systems (Ministère de la Santé et des Services sociaux, 2015). Other documents have advocated similar strategies on the strength of similar evidence for Canada (Kates et al., 2011) and worldwide (World Health Organization, 2013). In this article, shared care designates integrated services where mental health professionals work in close collaboration with one another at every stage of the case management process, bringing to bear their specific competencies to meet the care/service needs of individuals (Pauzé & Gagné, 2005).

This special issue on primary mental health care sprang out of this context and that of a foundational frontline mental health project at the CR-IUSMM. The aim of this issue was never to take exhaustive stock of the situation. What it does, instead, is present five examples of the research being conducted in this field. In the first article, Lesage and his team report on a study of homelessness aimed at improving care for this population through better coordination between non-government organizations and public services. Next, after examining data on mental health, suicidal behaviour, and homeless youth, Labelle and colleagues highlight the importance of having an integrated primary care framework to better serve the needs of this population, placing the emphasis on the particular reality of young people in temporary shelters. In the third article, Leclerc helps clarify the educational practices recommended for students with Tourette syndrome. Like the other works presented here, this article points out the need to raise awareness among, and to better support, both formal service providers and informal caregivers (teachers, instructors, health professionals, and others who interact with emotionally vulnerable people) so as to boost the effectiveness of screening, referral, prevention, and intervention efforts. Needless to say, the more complex the mental health problems, the more the development of shared care is called for.

The penultimate article penned by Monthuy-Blanc deals with eating disorders, obesity in adolescents, and the principle of integrated prevention programs. This article, like those by Labelle et al. and by Leclerc and colleagues, supports one of the priorities of the 2015–2020 PASM, namely, to assist young people in their living environment and to improve the capacity of the public healthcare system to offer care and services tailored to the youth clientele. Finally, Briand and colleagues present the highly interesting results of a study about how the use of information and communications technology can in no time provide access to best practices, spaces for reflection and exchange, and mechanisms of collaboration. This article, like the one by Monthuy-Blanc, defends the importance of employing technology as an instrument of innovation to meet the needs of today's society.

In sum, the articles on the following pages argue in favour of shared mental health care; that is, developing and delivering modern care and services based on a collaborative model for the benefit of all. We hope that this special issue inspires practitioners and researchers alike. Cheers!

Réal Labelle, PhD, and Catherine Briand, PhD

REFERENCES

- Fleury, M. F. (2014). La réforme des soins primaires de santé mentale au Québec et le rôle et les stratégies de coordination des omnipraticiens [Primary mental health care reform in Québec and the role of and coordination strategies for general practitioners]. *Santé mentale au Québec*, 39(1), 25–45.
- Funk, M., Benradia, I., & Roelandt, J. L. (2014). Santé mentale et soins de santé primaires : une perspective globale [Mental health and primary health care: A global perspective]. *L'Information psychiatrique*, 90, 331–339.
- Kates, N., Mazowita, G., Lemire, F., Jayabarathan, A., Bland, R., Selby, P., Isomura, T., Craven, M., Gervais, M., & Audet, D. (2011). The evolution of collaborative mental health care in Canada: A shared vision for the future. *Canadian Journal of Psychiatry*, 56(5), 1–12.
- Kates, N., Arroll, B., Currie, E., Hanlon, C., Gask, L., Klasen, H., Meadows, G., Rukundo, G., Sunderji, N., Ruud, T., & Williams, M. (2018). Improving collaboration between primary care and mental health services. *The World Journal of Biological Psychiatry*, 20(10), 748–765.
- Ministère de la Santé et des Services sociaux. (2015). *Le plan d'action en santé mentale – PASM 2015-2020 – Faire ensemble et autrement [2015–2020 mental health action plan (PASM): Working together in a new way]*. Québec : Gouvernement du Québec.
- Pauzé, E., & Gagné, M. A. (2005). *Collaborative mental health care in primary health care: A review of Canadian initiatives. Vol. II: Resource guide*. Mississauga, Ontario: Canadian Collaborative Mental Health Initiative.
- Starfield, B., Shi, L., & Macinko, J. (2005). Contribution of primary care to health systems and health. *Milbank Quarterly*, 83(3), 457–502.
- World Health Organization. (2013). *Mental health action plan 2013–2020*. WHO, Geneva, Switzerland.
- World Health Organization/Wonca. (2008). *Integrating mental health into primary care: A global perspective*. WHO, Geneva, Switzerland.