Low-income Canadians twice as likely to be hospitalized due to self-harm than the wealthiest

Alexandra Greene 27 August 2020

Research published recently by the Canadian Institute for Health Information (CIHI) found that low-income Canadians are twice as likely to be hospitalized due to self-harm than their counterparts in wealthy neighbourhoods. The study also revealed that 25,000 people were either hospitalized or died due to self-harm last year, the equivalent of about 70 self-harm incidents per day.

Around 3,800 of the total cases proved fatal. The suicide rate was highest among men aged 45 and over, which suggests growing levels of despair among a section of the population that has lived through a period of a drastic deterioration in the social position of the working class and skyrocketing levels of inequality.

The CIHI figures show that residents in Canada's lowest-income neighbourhoods were hospitalized at a rate of 104 per 100,000, compared to 49 per 100,000 in the country's wealthiest areas. Demonstrating the lack of community mental health resources, the study also noted that around one in nine of those hospitalized have had two or more hospital stays due to self-harm within a year.

"People are showing up in emergency departments and they're showing up in hospitals. That's kind of a place of last resort," remarked Tracy Johnson, director of health systems analysis and emerging issues for CIHI. "That says to me that these people require more help than they're getting."

As shocking as these figures are, they are certainly an underestimation of the true extent of the prevalence of self-harm and suicide attempts. The data does not include people who may have been helped by other primary health care providers — family doctors or emergency clinics, or those who went to emergency

rooms but were not admitted into care. Moreover, it was gathered prior to the onset of the coronavirus pandemic, with the ruling elite's disastrous response producing a dramatic rise in mental health problems, drug overdoses, and other signs of social distress. Many of the 4 million people still out of work confront on a daily basis, the fear of long-term joblessness and financial crisis, and uncertainty about what the future will bring—all factors known to impact negatively on one's mental wellbeing.

The disproportionate impact of the mental health crisis on the poorest sections of the population revealed in the CIHI study is a reflection of the glaring levels of social inequality in Canada. This is a society where the richest 1 percent owns 25.6 percent of all wealth, which is equivalent to the wealth controlled by the poorest 80 percent. The poorest 40 percent of the population possesses a mere 1.2 percent of all wealth. (See: New report exposes staggering level of social inequality in Canada).

It is also the product of decades of austerity spending on health care and other critical social services adopted by all of the major parties. Since coming to power in 2015, the federal Liberal government has enforced a mere 3 percent annual increase in the health transfers it makes to the provinces to fund health care services—virtually the same terms imposed by its Conservative predecessors. When population increases and rising health care costs due to an aging population are taken into account, this amounts to a substantial cut in health budgets.

At the provincial level, governments from the hardright Progressive Conservatives to British Columbia's New Democrats have prioritized balanced budgets and low corporate taxes over funding critical social services. With the onset of the pandemic, they all rallied around the Trudeau government's multi-billion dollar bailout of the big banks and financial oligarchy, and are all enforcing a reckless back-to-work drive that is forcing workers to return to unsafe workplaces with totally inadequate protections against the coronavirus.

Warnings about the disastrous consequences for mental health services and social care due to chronic underfunding have been issued repeatedly by professional organizations over recent years, but they are taking on an even more dire tone under conditions of the pandemic.

The Canadian Mental Health Association (CMHA) is calling for resources to cope with the threat of an "echopandemic," a predicted surge of mental illness and self-harm as a result of the pandemic's effects. Experts are already finding a pronounced rise in mental health concerns and suicidal thoughts among surveyed subgroups of socially disadvantaged people, while indicators of social distress, like drug overdoses and homelessness, are worsening. To illustrate the scale of the problem, the CMHA reported that its Nova Scotia branch, which usually processes around 25 requests for help each day, now receives approximately 700.

CMHA chief executive Margaret Eaton warned that a severe toll is also being taken on the mental wellbeing of frontline medical workers due to COVID-19. Dr. Joanne Liu, a former international president of the Doctors Without Borders charity, emphasized that widespread fear, stress, and anxiety among medical staff treating COVID-19 patients is being fueled by the failure of governments to provide personal protective equipment and other support. "This is nerve-racking. I do understand that we have to use carefully our PPE, but if you want us to care for patients, I'm begging you to care for us, to protect us," she told the House of Commons Health Committee.

Canada has registered a significant spike in drug overdoses and deaths since the start of the pandemic. Paramedics responded to 2,706 overdose calls in British Columbia alone in July. Ontario and Manitoba have also been hard hit. Toronto reported 27 opioid-related deaths attended by paramedics in July, which is the highest number on record. Winnipeg recorded a 227 percent increase in opioid-related 9-11 calls in June.

The desperately low levels of funding for overdose

prevention and other critical mental health services are responsible for the worsening crises at overdose prevention sites and other outreach services in Canada's major urban centres. Many of these facilities are staffed by poorly paid workers and volunteers who lack the support and resources to tackle the wide range of social problems their clients face. Thomus Donaghy, a peer worker in Vancouver's West End, was fatally stabbed during his shift on July 27. Peer workers are themselves former drug users and often work on a voluntary basis while continuing to receive government benefits.

Homelessness is also expected to increase sharply, as provinces including British Columbia and Ontario move to lift bans on evictions implemented in March. Underscoring that homelessness is affecting ever broader layers of the population, the recently released homelessness count in Victoria, the capital of British Columbia, found that 17 percent of the city's homeless population were in part-time or full-time employment. Given that the count was performed in March, prior to the impact of the pandemic, it is likely that this figure is now even higher.



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