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Understanding the Mental Health of Canadians Through the Pandemic and Beyond

June 7, 2023

All data available at www.mhrc.ca

This presentation will be made available to you afterwards.

About MHRC



- National charity
- Co-funded grants, studentships/fellowships, data collection and analysis
- Engagement of stakeholders and people with lived experience in research process

We are THE organization tracking the mental health of Canadians



- Lead a data collection project started March 2020;
- Blind study collecting population level mental health data with demographic and other factors
- 50,000+ responses; 16 data collections; 8,000+ responses from people with lived experience
- Data freely shared; 1,000+ pages of MH content / information

Workplace mental health studies/ Les études sur la santé mentale en milieu de travail









September 2021











March 2022

Psychological Health & Safety
Assessment/ Évaluation de la
santé et de la sécurité
psychologiques

Emotional Intelligence Assessment/ Évaluation de l'intelligence émotionnelle

Psychologically Safe Leaders Assessment/ Évaluation des leaders psychologiquement sûrs

Underlying concepts

- Mental health is health.
- Negative mental health during a crisis is normal.
- Every individual is unique, and composite averages tend to blur these distinctions.
- Resiliency is built through experience (and training).
- The biological components of mental illness did not change as a result of the pandemic.
- Mental health states can be both transitory and/or persistent.
- Psychological harm prevention vs. mitigation.





HEALTHY REACTING **INJURED** ILL

- Normal fluctuations in mood
- Normal sleep patterns
- Physically well, full of energy
- Consistent performance
- Socially active

- Nervousness,
- Trouble sleeping
- Tired/low energy. muscle tension, headaches

- irritability, sadness
- Procrastination
- Decreased social activity

- · Anxiety, anger, pervasive sadness. hopelessness
- Restless or disturbed sleep
- Fatigue, aches and pains
- Decreased performance. presenteeism
- Social avoidance or withdrawal

- Excessive anxiety. easily enraged, depressed mood
 - Unable to fall or stay asleep
 - Exhaustion. physical illness
 - Unable to perform duties, absenteeism
 - Isolation, avoiding social events

Actions to Take at Each Phase of the Continuum

- Focus on task at hand
- Break problems into manageable chunks
- Identify and nurture support systems
- Maintain healthy lifestyle

- Recognize limits
- Get adequate rest. food, and exercise
- Engage in healthy coping strategies
- Identify and minimize stressors
- Identify and understand own signs of distress
- Talk with someone
- Seek help
- Seek social support instead of withdrawing
- Seek consultation as needed
- Follow health care provider recommendations
- Regain physical and mental health



Population Wide Mental Health Indicators

- Higher anxiety and depression
- Missing days at school or work due to Mental Health
- Accessing Services and Meeting Needs

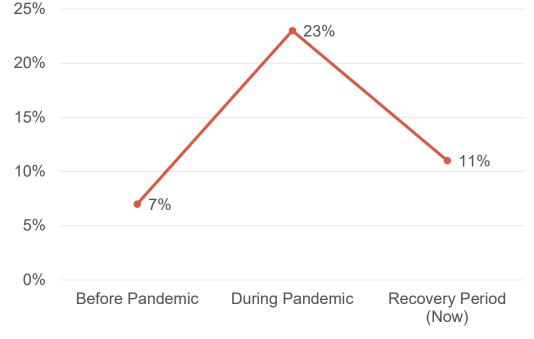


Self-rated anxiety and depression/ Anxiété et dépression auto-évaluées

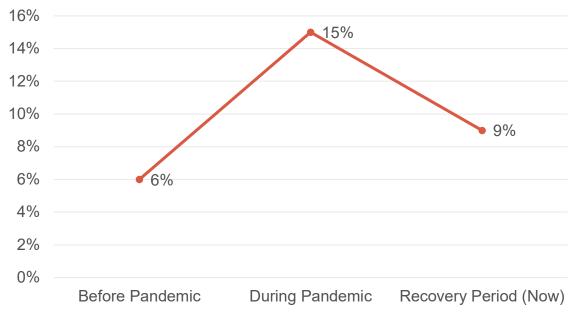


• 7% of people experienced high anxiety before the pandemic increasing to 23% during the pandemic and 11% now.

Canadians Reporting High Anxiety



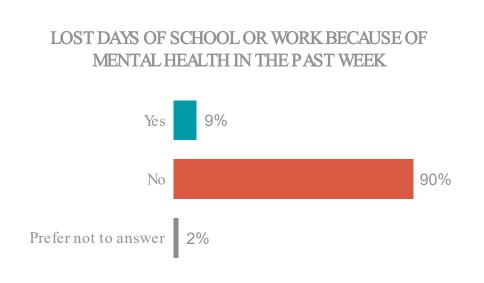
Canadians Reporting High Depression

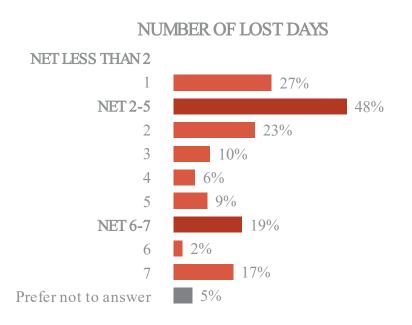


Daily life disruptions/ Perturbations de la vie quotidienne



 One-in-ten of Canadians impacted by mental health challenges have lost days of school/work in the past week.

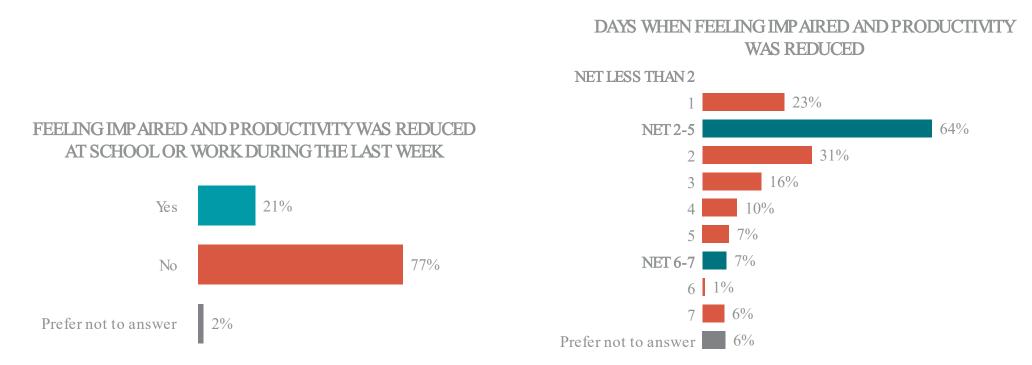






Of the fifth that felt impaired or experienced low productivity, most spent 2-5 days feeling that way

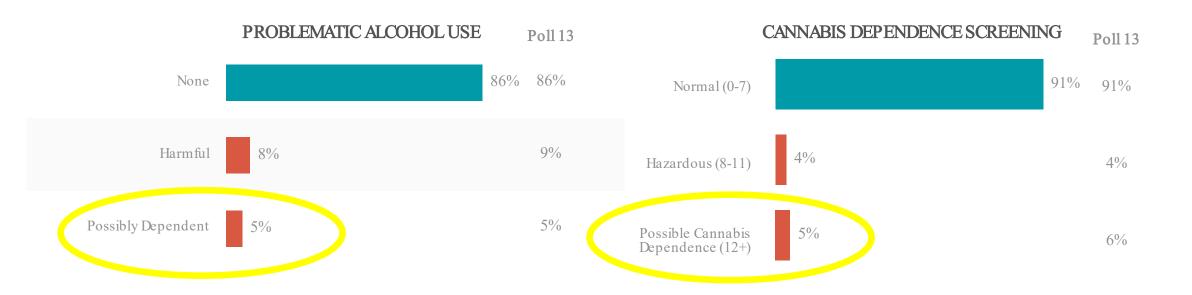
- Overall, feelings of impairment remain consistent in the last 6 months, but have decreased considerably from mid-pandemic levels (26% to 30%)
- Younger Canadians continue to be most prone to feeling impaired (16-17: 45%, 18-34: 27%). This feeling is not as common among older Canadians and has decreased slightly this poll (55+ from 11% to 9%).



Alcohol and cannabis use/ La consommation d'alcool et de cannabis



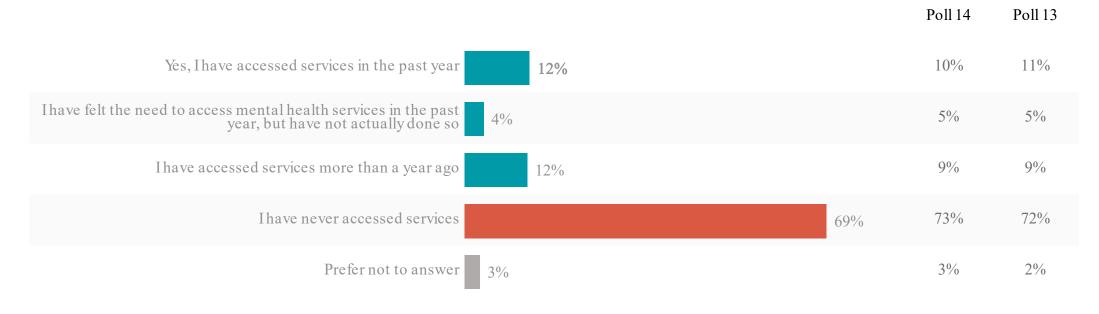
- 5% of Canadians show signs of possibly being dependent on alcohol;
 5% possible cannabis dependence.
- Correlates with Depression indicator



One-in-ten Canadians still report accessing mental health support in the last year



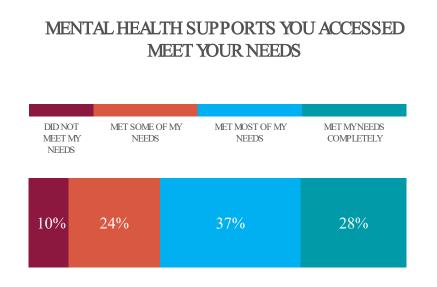
- One-in-ten (12%) reported accessing mental health services in the last year while 4% thought to access it but didn't. 12% accessed services more than a year ago, with 3% doing between 1 and 2 years ago and 9% more than 2 years ago. Results are consistent with Poll 13 findings.
- Seven-in-ten (69%) reported they never accessed any mental health services.
- Younger Canadians (18-34: 16%, 35-54: 14% vs. 55+: 8%), Students (15%), those who identify as 2SLGBTQIA+ (27%), those with physical impairments (30%), those with high anxiety (24%) and depression (27%); those with financial troubles (27%); and those who are dependent on cannabis (25%) or alcohol (22%) are more likely to have accessed the mental health services in the past year.
- It peaked around 20% during the middle of the pandemic.

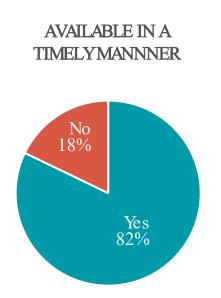


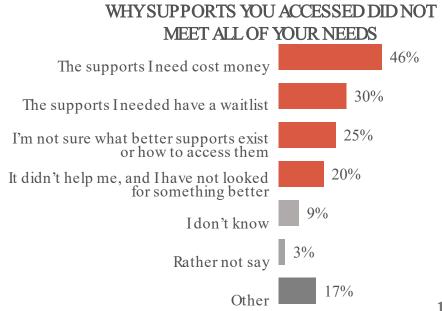
Accès aux soins de santé mentale



- 56% of people who need care are not getting their needs met.
- Reasons needs were unmet: affordability, long waitlists and lack of awareness of alternatives.
- 56 % des personnes qui ont besoin de soins ne voient pas leurs besoins satisfaits.
- Raisons pour lesquelles les besoins n'ont pas été satisfaits : prix abordable, longues listes d'attente et manque de connaissance des alternatives.



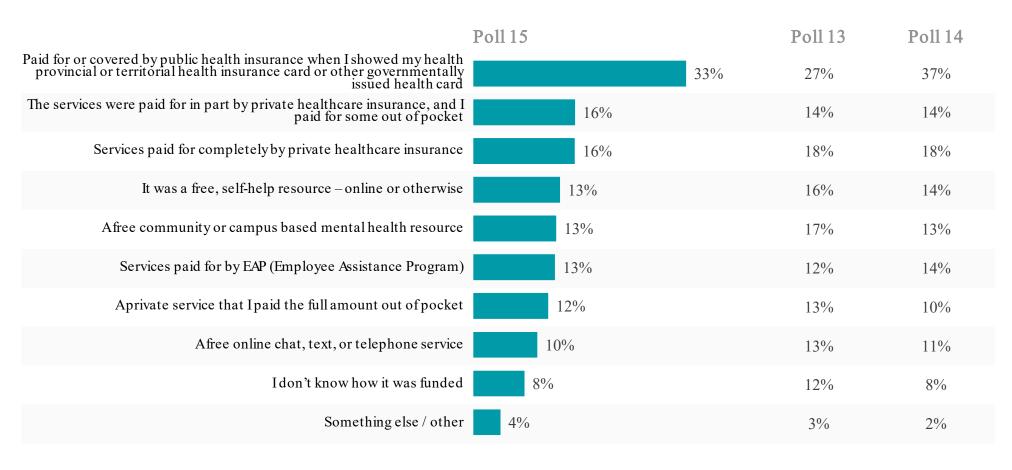




Health supports accessed have remained consistent since Poll 13



• While there was an increase in the use of government funded supports in Poll 14, this has declined slightly this poll.





Workplace Mental Health Indicators

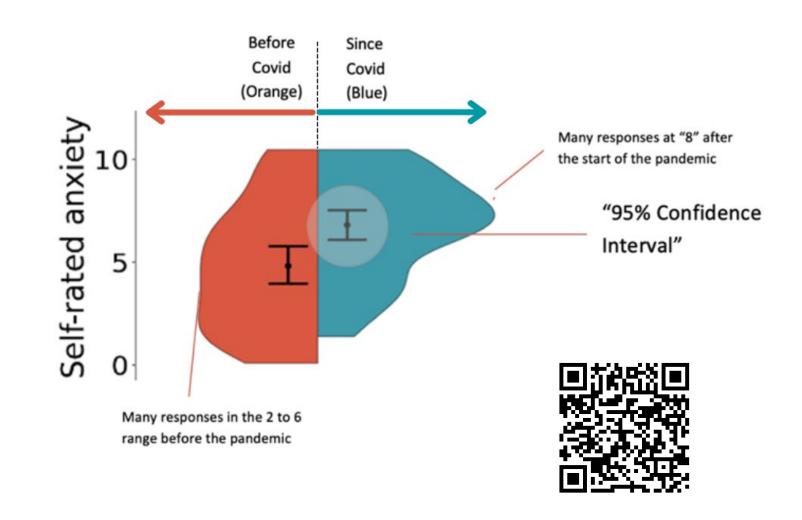


- Mental Health benefit use is increasing (up 40% from pre-pandemic levels)
- In addition, many group benefit insurers are now providers of mental health service (Inkblot, MindBeacon, etc.)
- Short and Long Term disabilities claims are up significantly.
- Secondary mental health disability claims also rising (and higher rejection rates).

Workplace mental health data/ Données sur la santé mentale au travail



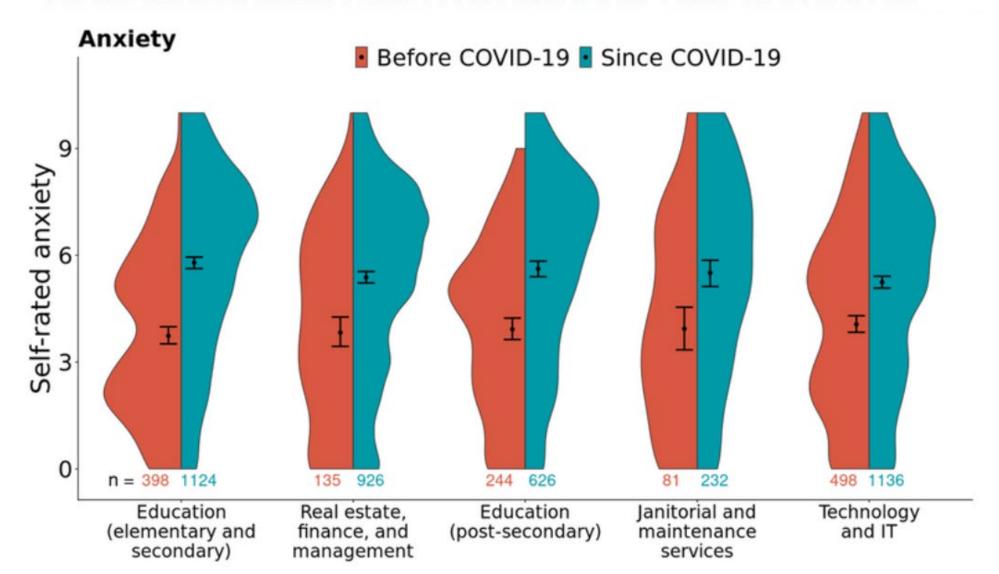
- We built a footprint of each employment sector.
- Displayed using a "double violin graph".
- Nous avons construit une empreinte de chaque secteur d'emploi.
- Affiché à l'aide d'un "graphique à double violon".



Sector comparison/ Comparaison des secteurs



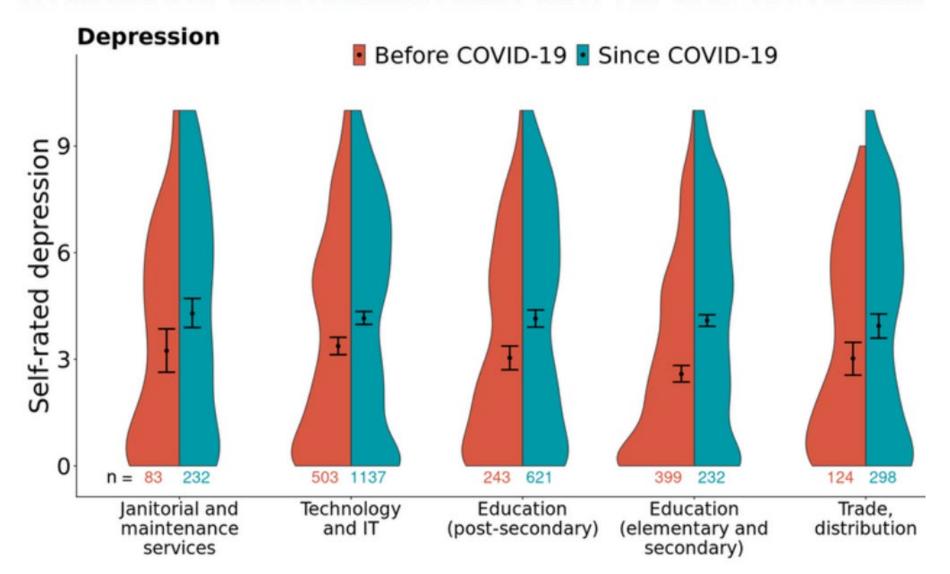
FIGURE A4. SELF-RATED ANXIETY PRE- AND POST-COVID-19 BY SECTOR



Sector comparison/ Comparaison des secteurs



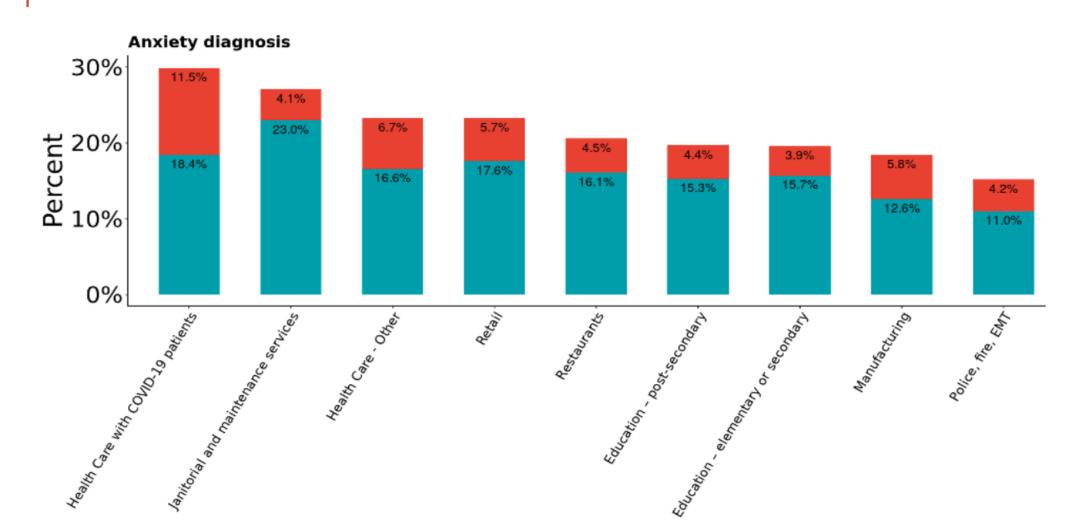
FIGURE B2. SELF-RATED DEPRESSION PRE- AND POST-COVID-19 BY SECTOR



Sector comparison/ Comparaison des secteurs



FIGURE D1. ANXIETY DIAGNOSIS PRE- AND POST-COVID-19 BY SECTOR

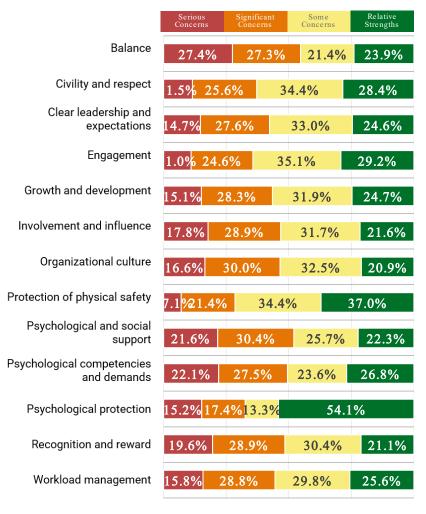


PHSA Summary of ratings

- Brand new study launching launched May 2023
- Demonstrates differences between industries, unionized roles, small and large businesses and particularly challenging issues for those with a mood or pain disorder and those with physical disabilities.



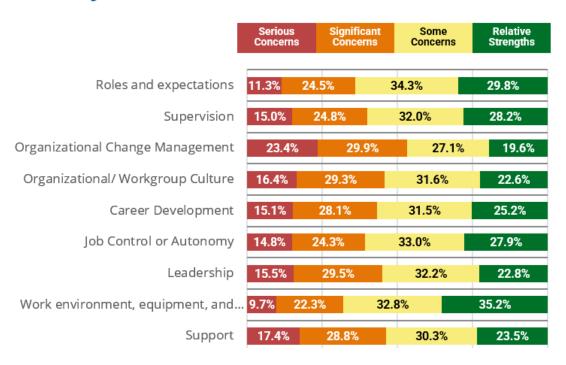


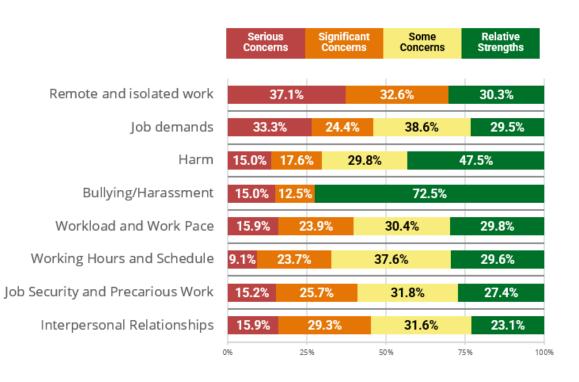


Psychosocial Hazards in the Workplace



Psychosocial Hazards

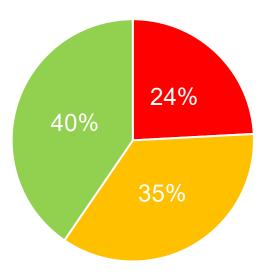




Significantly higher Significantly lower RECHERCHE EN SANTE MENTALE MENTALE CANADA Significantly MENTAL HEALTH RESEARCH CANADA

Burn out rate

- Four-in-ten Canadian employers are say they rarely experience burn out. This sentiment is more prevalent among employees who are above 55 years old, live in Quebec, work in non-unionized positions and do not belong to any minority groups.
- Meanwhile, a quarter of Canadian employees say they experience burn out frequently. This is more prevalent among younger employees, healthcare workers, educators, and those who identify as LGBTQ2S+, have a physical or mental disability or work in a unionised position.



		Age:			Manager		Region						Industry					
	Total	18-34	35-54	55+	Manager	Not manager	ATL	QC	ON	PR	АВ	ВС	Healthc are	First respond ers	Educati on	Finance /legal/in surance	Manufa cturing	Retail
frequently experience burn out	22%	28%	26%	13%	25%	20%	23%	18%	21%	24%	23%	25%	28%	26%	28%	18%	19%	21%
sometimes experience burn out	34%	40%	36%	26%	35%	32%	34%	32%	34%	31%	36%	32%	37%	46%	37%	37%	30%	42%
rarely or never experience burn out	43%	32%	38%	60%	40%	48%	43%	50%	45%	45%	41%	43%	35%	28%	35%	45%	51%	37%

frequently	experience	burn	out
1 /			

sometimes experience burn out

■ rarely or never experience burn

		Margin a lize d							Ethnicity	Unionized Position		
	Total	Visible Minority	LGBTQ2S+	Mental Impairment	Mood Disorder	Chronic Pain	None (Marginalize d groups)	First Nation, Metis or Indigenous	Other Visible Minorities	Not a Visible Minority	Unionized	Not unionized
frequently experience burn out	25%	25%	30%	38%	35%	34%	22%	27%	25%	24%	29%	22%
sometimes experience burn out	38%	38%	36%	29%	37%	31%	34%	37%	38%	35%	37%	34%
rarely or never experience burn out	37%	37%	34%	33%	28%	35%	44%	35%	37%	41%	34%	44%

Takeaways/ À retenir



- Most Canadians, while feeling more challenged during the pandemic, will be able to recover from COVID-19 related mental health challenges.
- Certain groups struggled more throughout the pandemic and are still feeling the effects on their mental health:
 - Younger Canadians
 - 2SLGBTQ+
 - Frontline health care workers (nurses)
 - New or expecting mothers
 - Women (below the age of 55 years old)
 - Those with precarious employment

- Those with a physical impairment
- Transportation & Mental Health Workforce



What does this mean for you?

- Workplace mental health needs your attention.
- Workplace mental health is a like a chair four legs, supporting one another.

Effective Policies

- Tracking mental health
- Fair compensation

Supportive Leadership / Behaviours

- Supervisor Behaviours
- Micro-aggressions
- Sense of Community

Inherent Psychological Risks in Job (Mitigation)

- Dealing with Clients / Customers
- Regular emergencies
- Regular Overtime / Inconsistent hours

Individual Needs

Unique needs / what the employee brings with them

Evidence Informed Predictions



- Workplace wellness will continue to be a focus for employers. They will be encouraged (using various means) to providing more EAP and MH benefits coverage. Mental health claims are already increasing.
- MH will continue to be a discussed topic, with a new generation of employees trying to understand support for it in the workplace.
- Mental Health will continue to slowly improve but at a very slow pace until it settles slightly worse than pre-pandemic levels.
- Workplace mental health and wellness programs will move beyond explaining best practices and into more understanding how behaviours can change and be measured in specific instances.

Where to get more Information

Workplace Strategies for Mental Health



The Working Mind

Mental Health First Aid

WorkplaceMH.ca













Questions / discussion

There is much more information available on our website or by contacting us directly: www.mhrc.ca

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Thank you.