

FACTS AND STATS



Families and Mental Health in Canada

Mental health and mental illnesses are key measures of well-being, and they have an impact not only on individuals and families, but also in workplaces and communities across Canada. The World Health Organization defines **mental health** as “a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community.”¹

According to the Public Health Agency of Canada, **mental illnesses** are “characterized by alterations in thinking, mood or behaviour associated with significant distress and impaired functioning,” and include mood disorders (e.g. major depression, bipolar disorder), anxiety disorders, schizophrenia, personality disorders, eating disorders, problem gambling and substance dependency.²

It is important to note that mental health and mental disorders/illnesses are not opposite ends of a continuum, and that **people living with mental illnesses can also achieve high levels of well-being** at the same time.³

7 in 10 Proportion of Canadians aged 12 and older who **rated their mental health as “excellent” or “very good”** in 2016 (70.9%). Youth aged 12 to 17 had the highest share reporting excellent/very good mental health (77.4%), and Canadians aged 18 to 34 had the lowest share (69.8%). Men had a higher share reporting excellent/very good mental health among *all* age groups.⁴

1 in 5 Estimated proportion of Canadians **living with a mental illness** each year.⁵ **By 2041**, an estimated 8.9 million people across the country (21%) could be living with a mental illness.⁶

38% Proportion of Canadians who reported in 2012 that they have an immediate or extended **family member** with a mental health problem.⁷ More than 1 in 5 (22%) Canadians had **more than one** family member with a mental health problem.⁸

27% Proportion of **youth reporting an Aboriginal identity** aged 18 to 25 who reported in 2012 having had **suicidal thoughts** at some point in their lives (vs. 15% among non-Aboriginal youth). Within this group, 27% of Inuit, 17% of off-reserve First Nations and 16% of Métis reported having such thoughts.⁹ Off-reserve First Nations youth with a personal/familial history of **residential school attendance** were nearly twice as likely to have had suicidal thoughts as those who did not.¹⁰

1 in 7 Proportion of Canadians aged 12 and older who reported in 2015 having **consulted with a health professional** about their emotional or mental health (13.9%). Women were nearly **twice as likely as men** to report having consulted a professional (17.9% and 9.8%, respectively); this pattern held true for *all age groups* including youth aged 12 to 17 (13.8% of girls vs 8.8% of boys) and seniors (10.0% of senior women and 5.4% of senior men).¹¹

8.4% Proportion of Canadians who reported in 2016 having a **mood disorder**. Women were nearly **twice as likely as men** to report having a mood disorder (10.9% and 5.8%, respectively). This pattern held true for *all age groups* including youth aged 12 to 17 (6.1% of girls vs. 3.2% of boys) and seniors (7.7% of senior women and 4.5% of senior men).^{12, 13}

1 in 10 Proportion of Canadian **youth** aged 15 to 24 who reported in 2012 that they have **experienced depression** in their lifetime (11%), 7% of whom experienced it *in the past year*. More than 6 in 10 (61%) had *talked to a professional* about their symptoms, and another 61% consulted an *informal source* such as friends (48% of those with depression who consulted an informal source) and family (33%).¹⁴

4 in 10 Proportion of Canadians who report having “seriously contemplated” suicide (38.2%) who **later reached a state of complete mental health**.¹⁵ Those who reported having **someone they could confide in** were *7 times more likely* to achieve complete mental health.¹⁶

7 in 10 Among Canadians who reported in 2012 that their lives were affected by a family member’s mental health problem, the proportion who reported they **provided care** to this family member (71%).¹⁷

68% Proportion of Canadians who have been affected by a family member’s mental health who say **they are not embarrassed** by this problem.¹⁸



Research shows that **mental illness usually results from** an interaction of *physical* factors (e.g. genetic makeup, physical trauma, substance abuse), *environmental* factors (e.g. psychological trauma such as war or sexual abuse) and *social* factors (e.g. place of residence, presence of support networks, work environment).¹⁹



Families who *provide care to relatives with mental health conditions* serve a **variety of diverse care roles**, including (but not limited to) assisting with crisis intervention, system navigation and daily living; advocating on behalf of an ill relative; monitoring symptoms and adherence to treatment plans; and maintaining records of previous treatments, medications and hospitalizations.²⁰

This content was reviewed by Dr. Raj Bhatla, Psychiatrist-in-Chief and Chief of Staff at the Royal Ottawa Mental Health Centre, and a member of the Editorial Committee of the Journal of Ethics in Mental Health.

¹ World Health Organization, *Social Determinants of Mental Health* (2014). [Link: http://bit.ly/2xhiGS2](http://bit.ly/2xhiGS2).

² Public Health Agency of Canada, *Report from the Canadian Chronic Disease Surveillance System: Mental Illness in Canada, 2015* (May 2015). [Link: http://bit.ly/2wRIW5y](http://bit.ly/2wRIW5y).

³ Ibid.

⁴ Statistics Canada, *Canadian Health Characteristics, Annual Estimates, by Age Group and Sex, Canada (Excluding Territories) and Provinces* (CANSIM Table 105-0508), page last updated September 26, 2017. [Link: http://bit.ly/2zXlcMj](http://bit.ly/2zXlcMj).

⁵ Mental Health Commission of Canada, *Making the Case for Investing in Mental Health in Canada* (January 15, 2013). [Link: http://bit.ly/2zq6oui](http://bit.ly/2zq6oui).

⁶ Risk Analytica (Prepared on Behalf of the Mental Health Commission of Canada), *The Life and Economic Impact of Major Mental Illnesses in Canada* (December 2011). [Link: http://bit.ly/2x4iDum](http://bit.ly/2x4iDum).

⁷ Problems with their emotions or mental health, or use of alcohol or drugs.

⁸ Caryn Pearson, “The Impact of Mental Health Problems on Family Members,” *Health at a Glance*, Statistics Canada catalogue no. 82-624-X (October 7, 2015). [Link: http://bit.ly/1Lio1HL](http://bit.ly/1Lio1HL).

⁹ Mohan B. Kumar and Amy Nahwegahbow, “Past-Year Suicidal Thoughts Among Off-Reserve First Nations, Métis and Inuit Adults Aged 18 to 25: Prevalence and Associated Characteristics,” *Aboriginal Peoples Survey, 2012*, Statistics Canada catalogue no. 89-653-X2016011 (October 13, 2016). [Link: http://bit.ly/2x3nR8L](http://bit.ly/2x3nR8L).

¹⁰ Kumar and Nahwegahbow, 2016.

¹¹ Statistics Canada, *Mental Health Characteristics and Suicidal Thoughts, Canada (Excluding Territories) and Provinces* (CANSIM Table 105-0514), page last updated March 21, 2017. [Link: http://bit.ly/2hvP7pt](http://bit.ly/2hvP7pt).

¹² From Statistics Canada: “Population aged 12 and over who reported that they have been diagnosed by a health professional as having a mood disorder, such as depression, bipolar disorder, mania or dysthymia.” [Link: http://bit.ly/2zXlcMj](http://bit.ly/2zXlcMj).

¹³ Statistics Canada, *Canadian Health Characteristics, Annual Estimates, by Age Group and Sex, Canada (Excluding Territories) and Provinces* (CANSIM Table 105-0508).

¹⁴ Pearson, 2015.

¹⁵ “Complete mental health” in this study is defined as being free of symptoms of mental illness, suicidal thoughts or substance abuse in the preceding year, as well as reporting almost daily happiness or life satisfaction and social and psychological well-being.

¹⁶ Philip Baiden and Esme Fuller-Thomson, “Factors Associated with Achieving Complete Mental Health among Individuals with Lifetime Suicidal Ideation,” *Suicide and Life-Threatening Behaviour* 46:4 (January 26, 2016). [Link: http://bit.ly/2jrkEvZ](http://bit.ly/2jrkEvZ).

¹⁷ Pearson, 2015.

¹⁸ Ibid.

¹⁹ Canadian Mental Health Association Toronto, *Understanding Mental Illness* (n.d.), accessed September 14, 2017. [Link: http://bit.ly/2wdpUte](http://bit.ly/2wdpUte).

²⁰ Family Mental Health Alliance, “Caring Together: Families as Partners in the Mental Health and Addiction System,” *Public Policy* (November 1, 2006). [Link: http://bit.ly/2cb0Fsl](http://bit.ly/2cb0Fsl).