



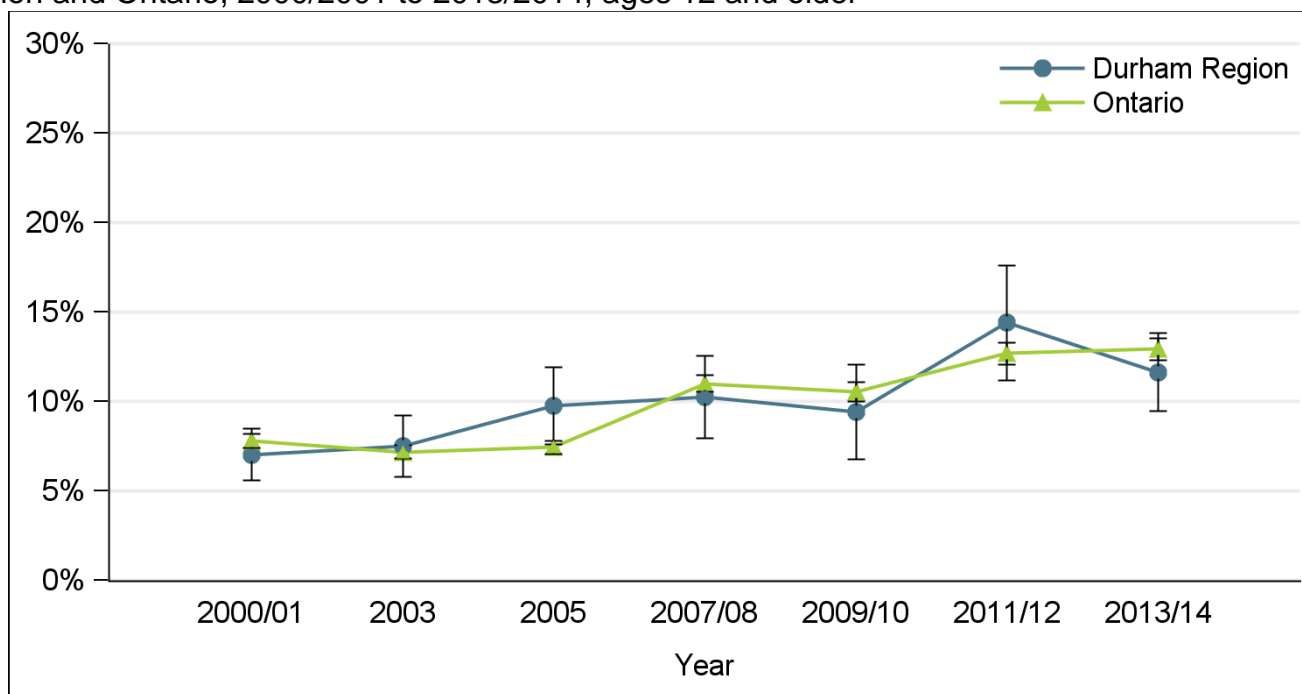
September 2016

Highlights

- In 2013/2014, 12% of Durham Region residents 12 and older reported consulting with a mental health professional in the past year. Rates for both Durham Region and Ontario have increased since 2000/2001.
- Among the 36 Ontario public health units, the proportion of respondents who reported having a consultation with a mental health professional ranged from 8% to 18%.
- Those most likely to report consulting with a mental health professional were females, those 25-44 years of age, middle income earners, and those with a post-secondary education.

Trend Over Time

Figure 1. Proportion who consulted with a mental health professional in the past year, Durham Region and Ontario, 2000/2001 to 2013/2014, ages 12 and older

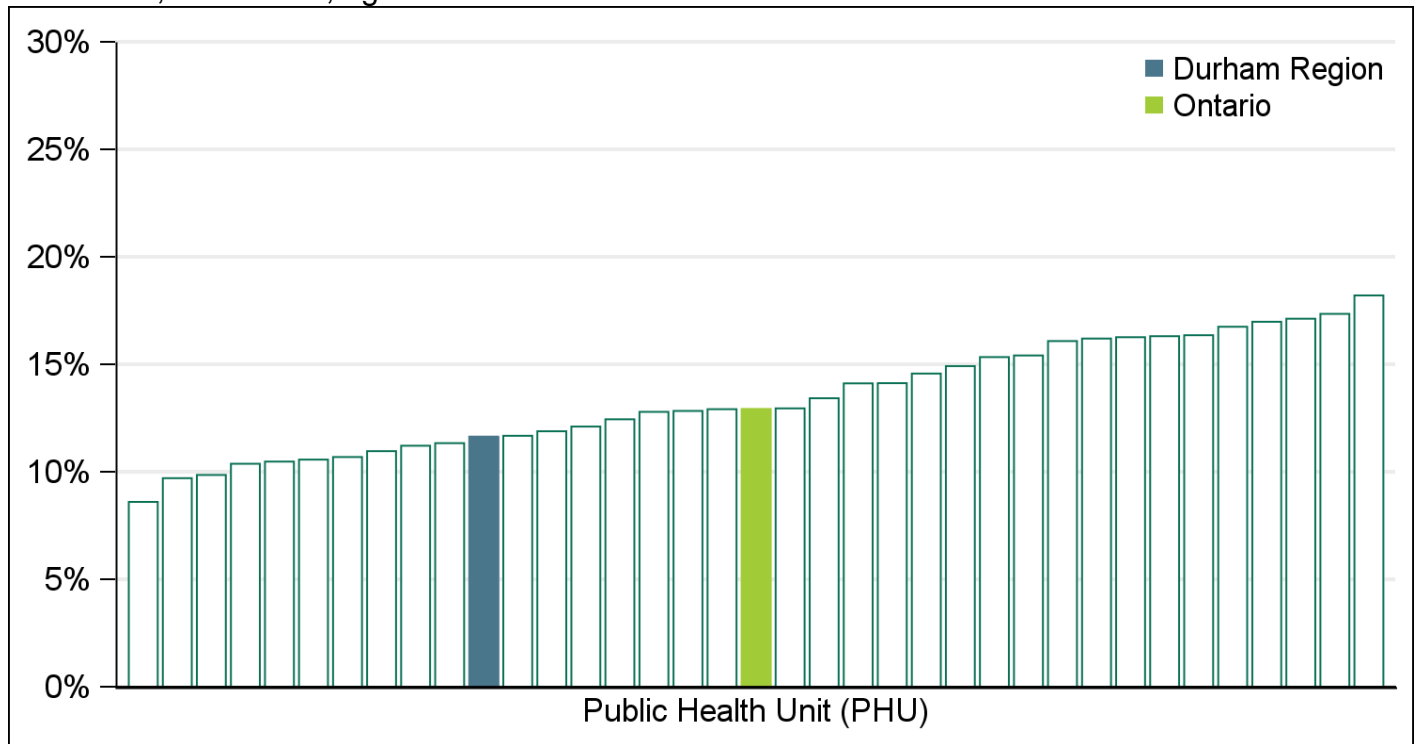


Place of residence	2000/01	2003	2005	2007/08	2009/10	2011/12	2013/14
Durham	7%	8%	10%	10%	9%	14%	12%
95% CI (Durham)	6-9%	6-9%	7-12%	8-13%	7-12%	11-18%	9-14%
Ontario	8%	7%	7%	11%	11%	13%	13%
95% CI (Ontario)	7-8%	6-7%	7-8%	10-11%	10-11%	12-13%	12-13%

In 2013/2014, 11% of Durham Region residents aged 12 and older reported consulting a mental health professional in the past year. This rate is similar than the rate observed for Ontario of 12%. Figure 1 shows that rates for both Durham Region and Ontario have increased since 2000/2001.

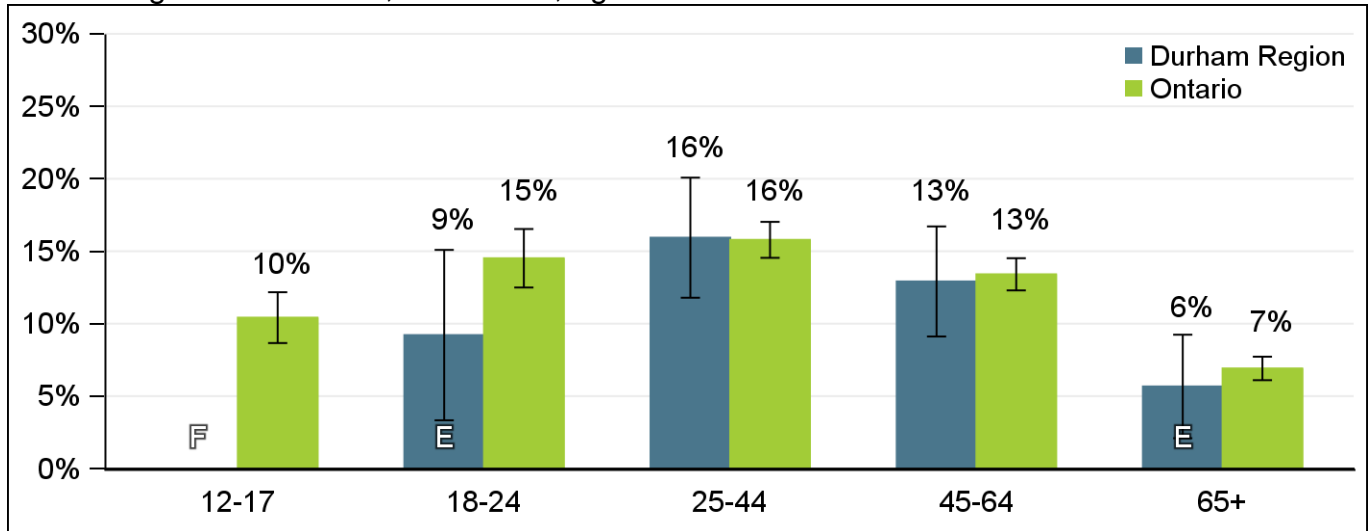
Provincial Comparison

Figure 2. Proportion who consulted with a mental health professional in the past year, by public health unit, 2013/2014, ages 12 and older



Consultation with a Mental Health Professional and the Determinants of Health

Figure 3. Proportion who consulted with a mental health professional in the past year by age, Durham Region and Ontario, 2013/2014, ages 12 and older



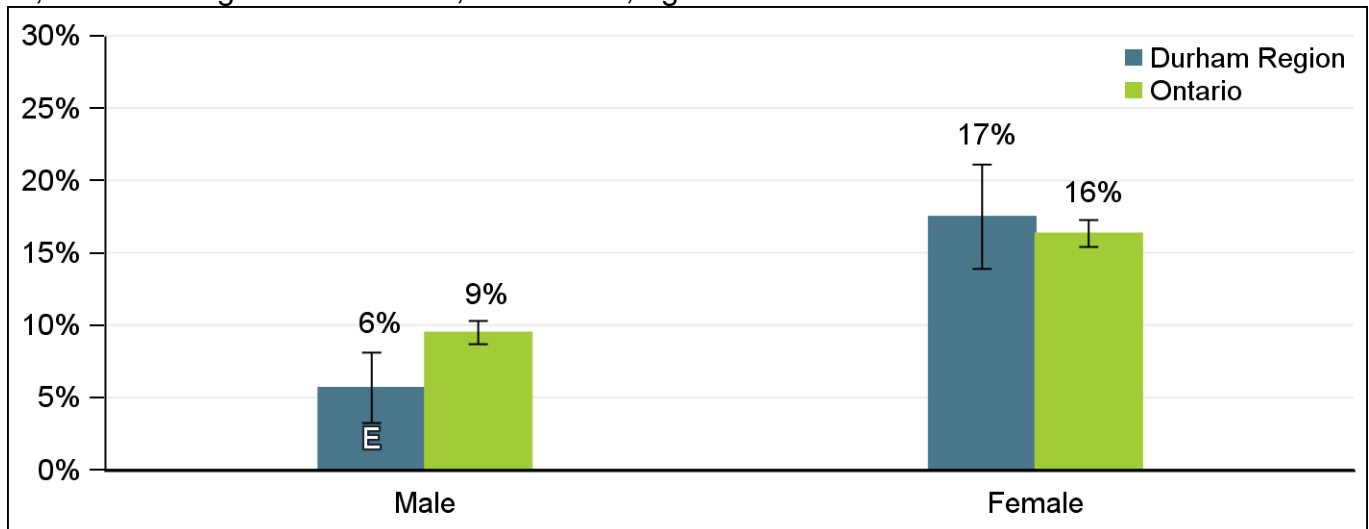
Association between age groups and consultation with a mental health professional is significant for both Durham Region and Ontario.

E – use with caution (these data have a coefficient of variation between 16.6% and 33.3%).

F – data suppressed (these data have a coefficient of variation >33.3%)

Figure 3 shows an increase in the proportion who consulted with a mental health professional in the past year up to age 25-44, where the proportion declines among older adults. This relationship is observed for both Durham Region and Ontario.

Figure 4. Proportion who consulted with a mental health professional in the past year by sex, Durham Region and Ontario, 2013/2014, ages 12 and older

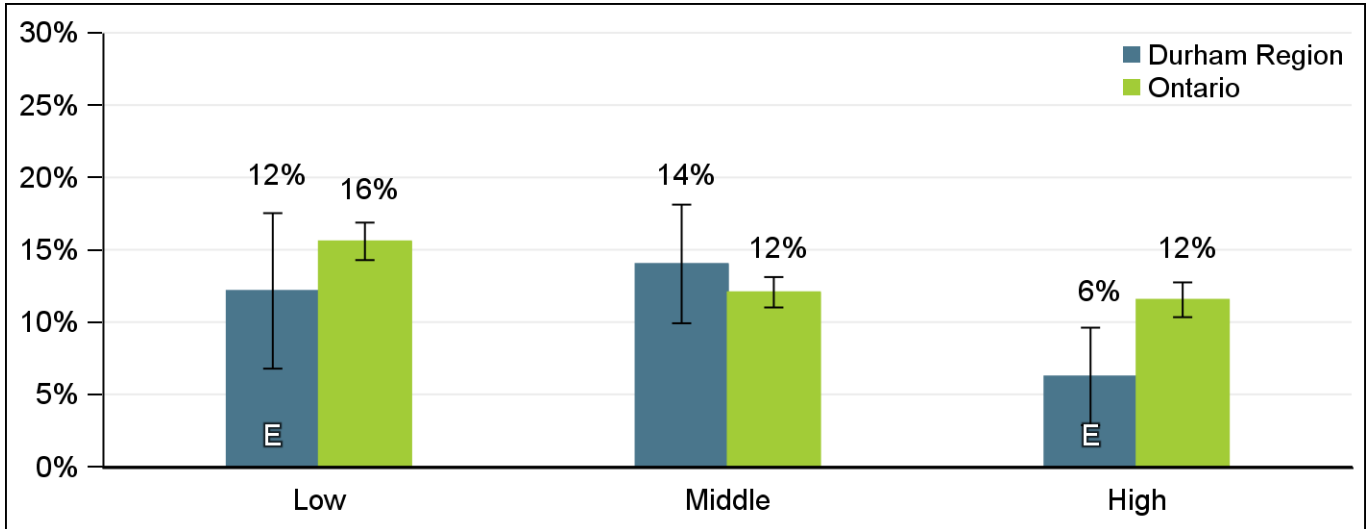


Association between sex and consultation with a mental health professional is significant for both Durham Region and Ontario.

E – use with caution (these data have a coefficient of variation between 16.6% and 33.3%).

Looking at the relationship between consultation with a mental health professional and sex in Figure 4, females in Durham Region and Ontario were more likely to report this behaviour as compared to males.

Figure 5. Proportion who consulted with a mental health professional by household income, Durham Region and Ontario, 2013/2014, ages 12 and older

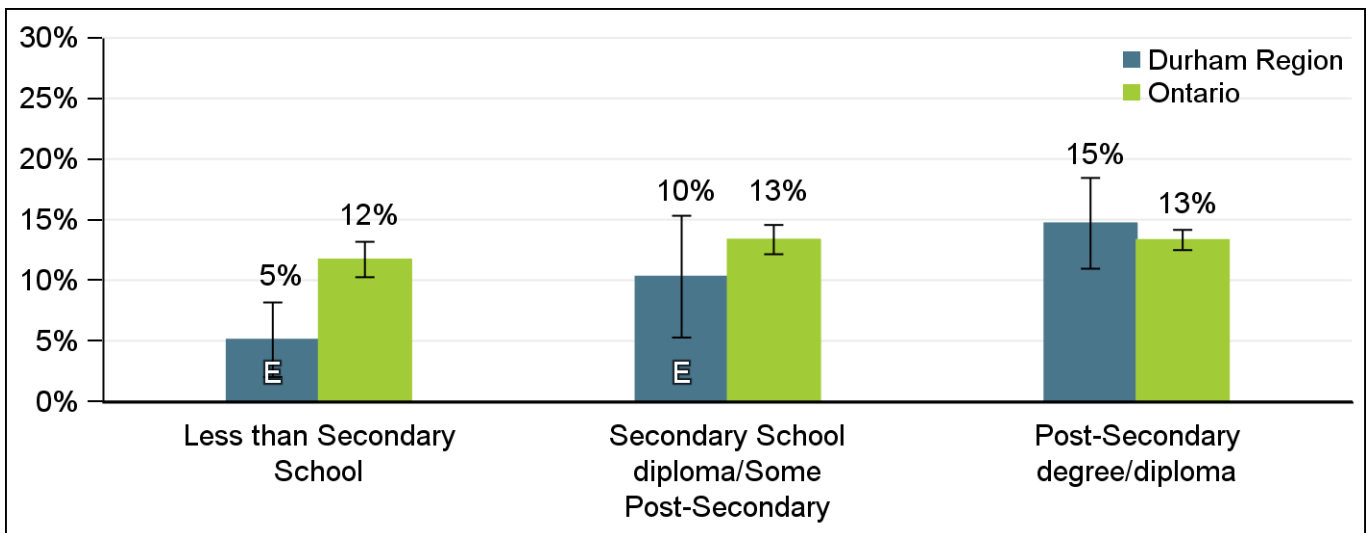


Association between household income group and consultation with a mental health professional is significant for Ontario only.

E – use with caution (these data have a coefficient of variation between 16.6% and 33.3%).

In 2013/2014, there was no observed association between those who consulted with a mental health professional in the past year and household income for Durham Region. Within the highest income group, fewer respondents in Durham Region reported consulting with a mental health professional in the past year as compared with Ontario (see Figure 5).

Figure 6. Proportion who consulted with a mental health professional by education level, Durham Region and Ontario, 2013/2014, ages 12 and older



Association between education level and consultation with a mental health professional is significant for Durham Region only.

E – use with caution (these data have a coefficient of variation between 16.6% and 33.3%).

Figure 6 shows an increase in the proportion who reported consulting with a mental health professional in the past year with increasing educational attainment. In Durham Region, those with a post-secondary degree/diploma reported the highest prevalence of this behaviour.

Data Notes

Data Source: The Canadian Community Health Survey (CCHS) is a cross-sectional survey that collects information related to health status, health care utilization and health determinants for the Canadian population. It surveys a large sample of respondents and is designed to provide reliable estimates at the health region level. Since 2007, data are collected on an ongoing basis with annual releases, rather than every two years as was the case prior to 2007. The CCHS data are collected from persons aged 12 and over living in private dwellings, excluding individuals living on Indian Reserves and on Crown Lands, institutional residents, full-time members of the Canadian Forces, and residents of certain remote regions. Interviews are conducted using computer assisted interviewing, either in person or over the telephone.

Definitions and Survey Questions: Proportion of the population 12 years and older that reported consulting a mental health professional in the past year.

Data Analysis: The CCHS share file obtained from the Ontario Ministry of Health and Long-Term Care was used for analysis. Data were analyzed using SAS version 9.4. Estimates are weighted using the final CCHS sampling weight. Error bars in the graphs represent the 95% confidence interval (CI) around the estimate. The true or actual estimate falls within the range of values 95 out of 100 times. For all analyses, response options of 'Refusal', 'Don't Know', 'Not Stated' and 'Not Applicable' were excluded, unless otherwise stated.

The CCHS 2013/2014 dataset was used for the 'Consultation with a mental health professional and the Determinants of Health' analysis. Statistical significance was assessed based on a chi-square test with a p-value less than 0.05. A statistically significant difference between groups means that the association is not likely due to chance.

The income categories of low, middle and high were based on a CCHS derived variable which distributed residents according to the adjusted ratio of their total household income to the low income cut-off corresponding to their household and community size. The ten categories in this variable were grouped with "low" income corresponding to the lowest 30%, "middle" including the middle 40%, and "high" corresponding to highest 30% of earners.