

Canadian Forces Mental Health Survey, 2013

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In 2013, about one in six full-time regular members of the Canadian Forces reported experiencing symptoms in the previous 12 months consistent with at least one of six selected mental or alcohol disorders. The six disorders measured by the Canadian Forces Mental Health Survey were: major depressive episode, post traumatic stress disorder, generalized anxiety disorder, panic disorder, alcohol abuse as well as alcohol dependence.

Table 1
Rates of selected mental or alcohol disorders, full-time regular members of the Canadian Forces in the 12 months prior to the 2013 survey

	full-time regular force members
	%
Any selected mental or alcohol disorder¹	16.5
Major depressive episode	8.0
Post traumatic stress disorder	5.3
Generalized anxiety disorder	4.7
Panic disorder	3.4
Alcohol abuse or dependence²	4.5
Alcohol abuse	2.5
Alcohol dependence	2.0

1. Any selected mental or alcohol disorder includes major depressive episode, post traumatic stress disorder, general anxiety disorder, panic disorder, and alcohol abuse or dependence. However, these disorders cannot be added to create this rate because the disorders are not mutually exclusive, meaning that people may have a profile consistent with one or more of these disorders.

2. Alcohol abuse or dependence are mutually exclusive and can be added to create the variable "alcohol abuse or dependence".

Major depressive episode was the most common disorder, with 8.0% of full-time regular force members meeting the criteria in the 12 months prior to the survey.

Symptoms consistent with post traumatic stress disorder were reported by 5.3% of full-time regular force members in the 12 months prior to the 2013 survey, while 4.7% reported symptoms consistent with generalized anxiety disorder and 3.4% reported symptoms consistent with panic disorder.

In 2013, 4.5% of full-time regular force members surveyed met the criteria for alcohol abuse or dependence in the 12 months prior to the survey. Overall, 2.5% of regular force members reported symptoms consistent with alcohol abuse and 2.0% with alcohol dependence.



Note to readers

The 2013 Canadian Forces Mental Health Survey (CFMHS) features information about the mental health status and need for mental health services within the Canadian Forces. Information is collected from both full-time regular members of the Canadian Forces regardless of their deployment history, as well as reservists who have been deployed in support of the mission in Afghanistan.

The CFMHS was developed by Statistics Canada in collaboration with the Department of National Defence. About 6,700 full-time regular members of the Canadian Forces and 1,500 reservists were interviewed from April to August 2013.

This release presents data on all full-time regular members of the Canadian Forces. Further analysis will be available in November 2014.

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Depression (major depressive episode) is identified as a period of two weeks or more with persistent depressed mood or loss of interest in normal activities, as well as other symptoms including: decreased energy, changes in sleep and appetite, impaired concentration, feelings of hopelessness, or suicidal thoughts.

Post-traumatic stress disorder can occur after witnessing or experiencing a traumatic event involving actual or threatened death, serious injury or violent personal assault, such as sexual assault. The response to the event is marked by extreme fear and helplessness. Symptoms must persist for a minimum of one month and could include: repeated reliving of the event, disturbance of day-to-day activity, avoidance of stimuli associated with the event, and irritability, outbursts of anger, or sleeping difficulty.

Generalized anxiety disorder is identified by a pattern of frequent, persistent worry and excessive anxiety about several events or activities lasting at least six months along with other symptoms.

Panic disorder is marked by recurrent, unexpected panic attacks, in the absence of real danger. These attacks are followed by at least one month of concern about having additional attacks or a change in behaviour related to the attacks.

A **panic attack** is characterized by an isolated period of intense fear often associated with feelings of imminent doom. During these attacks, physical symptoms, such as heart palpitations, shortness of breath or sweating develop abruptly and reach a peak within 10 minutes of the start of the attack.

Alcohol abuse is characterized by a pattern of recurrent alcohol use where at least one of the following occurs: failure to fulfill major roles at work, school or home, use in physically hazardous situations, recurrent alcohol-related problems and continued use despite social or interpersonal problems caused or intensified by alcohol.

Alcohol dependence is defined as experiencing at least three of the following in the same 12-month period: increased tolerance, withdrawal, increased consumption, unsuccessful efforts to quit, a lot of time lost recovering or using, reduced activity, and continued use despite persistent physical or psychological problems caused or intensified by alcohol.

Definitions, data sources and methods: survey number 5084.

For more information, or to enquire about the concepts, methods or data quality of this release, contact us (toll-free 1-800-263-1136; 514-283-8300; infostats@statcan.gc.ca) or Media Relations (613-951-4636; mediahotline@statcan.gc.ca).