

Canadian Community Health Survey, 2019

Released at 8:30 a.m. Eastern time in *The Daily*, Thursday, August 6, 2020

Understanding the perceived mental health of Canadians prior to the COVID-19 pandemic

Since the COVID-19 pandemic reached Canada, Statistics Canada has been reporting on the social and economic impacts on Canadians of the measures to contain its spread. Recently released data collected during the pandemic point to an overall decline in the perceived mental health of Canadians.

Mental health affects how we think, feel and act, and it also has an impact on physical health. People in good mental health are better able to cope with stress and the difficulties they encounter. Understanding the overall mental health of Canadians prior to the pandemic provides important context to the population's ability to face this unprecedented global challenge.

Today, new results from the 2019 Canadian Community Health Survey (CCHS) are compared with results from 2015 to better understand trends in perceived mental health prior to the pandemic. The 2015 CCHS was used for comparison as this is the most recent survey containing similar mental health data. The analysis highlights differences in rates for Indigenous people; people who identify as gay, lesbian or bisexual; and groups designated as visible minorities.

The data from the 2019 CCHS cover the population aged 12 and older living in the 10 provinces. The survey was not conducted on reserves, so the results discussed for First Nations people exclude those living on reserves, in the territories or in remote northern regions of the provinces. Estimates for Inuit cover only those living outside Inuit Nunangat.

Perceived mental health has been declining in Canada

Perceived mental health is an important indicator of overall well-being and provides a general indication of the population experiencing some form of mental or emotional problems or distress. Approximately two-thirds (67%) of Canadians aged 12 and older in the 10 provinces rated their mental health as very good or excellent in 2019, down from almost three-quarters (72%) in 2015. In 2019, a higher proportion of males (70%) than females (64%) reported excellent or very good mental health. Compared with 2015, this was a decline for both males (74%) and females (70%).

In every province except Newfoundland and Labrador and New Brunswick, the proportion of Canadians reporting very good or excellent mental health was lower. This decline in reported mental health was observed for all age groups, except those aged 65 and older. The largest decrease was for Canadians aged 18 to 34, down from 72% in 2015 to 61% in 2019.

Compared with the non-Indigenous population (68%), Indigenous people were less likely to report very good or excellent mental health (54%) in 2019 and experienced a sharper decline since 2015 (9% versus 5%). In 2019, just under half of First Nations people living off reserve (49%) and just under 6 in 10 Métis and Inuit (58% and 59%, respectively) reported very good or excellent mental health. Perceived mental health was lowest among Indigenous people aged 18 to 34, with less than half (47%) rating their mental health as very good or excellent in 2019. Indigenous females (49%) were also less likely than Indigenous males (59%) to report very good or excellent mental health.

Over half of Canadians aged 15 and older identifying as gay or lesbian (58%) and over one-third of those identifying as bisexual (37%) reported very good or excellent mental health in 2019. The proportions for both of these groups were significantly lower than the proportions for those identifying as heterosexual (68%).

Compared with 2015, Canadians designated as visible minorities reported lower rates of very good or excellent mental health in 2019—the decline was similar to that for people who were not visible minorities (from around 73% in 2015 to 67% in 2019). In particular, for Black Canadians, the rate decreased from 74% in 2015 to 66% in 2019.



Table 1
Percentage of Canadians (excluding the territories) reporting very good or excellent mental health, by selected sociodemographic characteristics, 2015 compared with 2019

	2015 ¹	2019
	%	
Canada, excluding the territories	72	67*
Sex		
Males	74	70
Females	70	64
Age group		
12 to 17	78	73*
18 to 34	72	61*
35 to 49	72	67*
50 to 64	72	70*
65 and older	71	71
Indigenous, all ages ²	63	54*
Indigenous, aged 18 to 34	59	47*
Non-Indigenous, all ages	73	68*
Sexual orientation ³		
Heterosexual	73	68*
Gay or lesbian	70	58*
Bisexual	43	37
Canadians designated as visible minorities	73	67
Black Canadians	74	66

* significantly different from reference category (p < 0.05)

1. Reference category.

2. The Indigenous population includes First Nations people living off reserve or in remote northern areas in the provinces, Métis, and Inuit outside Inuit Nunangat.

3. The question on sexual orientation is asked to respondents aged 15 and older.

Source(s): Canadian Community Health Survey, 2015 and 2019.

More Canadians report a diagnosed mood or anxiety disorder, especially among young adults

Whereas perceived mental health provides an indication of a person's overall mental health status in which both positive mental health and problems with mental health are likely to be considered, an analysis of diagnosed mental health conditions provides an indication of the proportion of people who live with mental health problems severe enough to prompt them to seek help and a professional diagnosis. Diagnosed mental health conditions, such as depression, bipolar disorder, mania or dysthymia, or panic disorder, can be associated with difficulties in functioning and the ability to cope, but treatment following diagnosis can help people live full and productive lives. In 2019, approximately 4.4 million Canadians (14%) aged 12 and older living in the provinces reported having a diagnosed mood or anxiety disorder, up from 3.7 million people (12%) in 2015. As was the case with perceived mental health, the most notable difference over this period was among young adults aged 18 to 34 (up from 13% to 17%).

In 2019, females (17%) were more likely than males (11%) to report having a mood or anxiety disorder. In comparison, 15% of females and 9% of males reported a mood or anxiety disorder in 2015.

Over one-quarter of Indigenous people (27%) reported having a diagnosed mood or anxiety disorder in 2019, compared with 22% in 2015. Nearly one-quarter of both Métis (24%) and Inuit living outside Inuit Nunangat (24%^E) and 31% of First Nations people living off reserve reported a mood or anxiety disorder in 2019. Each of these Indigenous groups was twice as likely as the non-Indigenous population (13%) to have a diagnosed mood or anxiety disorder. Within the Indigenous population, females (35%) were much more likely than males (19%) to report a mood or anxiety disorder.

Just over one in five Canadians aged 15 and older identifying as gay or lesbian (21%) reported having a diagnosed mood or anxiety disorder, consistent with the proportion of 19% in 2015. For those identifying as bisexual, the proportion was 43% in 2019, consistent with 40% in 2015. This is more than three times the rate reported by those identifying as heterosexual (13%).

While Canadians designated as visible minorities (8%) were less likely than other Canadians (15%) to have a diagnosed mood or anxiety disorder, the pattern was similar in that they too were more likely to report such a condition in 2019 than in 2015 (up from 7%).

In 2019, more than 1 in 10 Canadians reported having had suicidal thoughts in their lifetime, similar to 2015

In 2019, more than 1 in 10 Canadians aged 15 and older (12%), representing about 3.7 million people in the provinces, indicated they had considered suicide in their lifetime, a proportion similar to that observed in 2015. In both years, females (13%) were slightly more likely than males (11%) to have had suicidal thoughts in their lifetime. Of those in 2019 who had contemplated suicide in their lifetime, 23% (843,500 people) reported having seriously contemplated suicide in the previous 12 months.

More than one-quarter of Inuit living outside Inuit Nunangat (29%^E), 22% of Métis, and 27% of First Nations people living off reserve aged 15 and older reported having had suicidal thoughts in their lifetime. Indigenous people living off reserve were twice as likely to report having had suicidal thoughts, both in their lifetime (25%) and in the previous 12 months (6%), compared with non-Indigenous people (12% and 3%, respectively). In 2019, 29% of Indigenous females reported having had suicidal thoughts in their lifetime, compared with 20% of Indigenous males.

One-quarter of people identifying as gay or lesbian (24%) reported having had suicidal thoughts in their lifetime. Half of those identifying as bisexual (50%) reported having considered suicide in their lifetime—a rate four times higher than that for people identifying as heterosexual (12%). People identifying as bisexual were over three times more likely (16%) than those identifying as gay or lesbian (5%) to report having had serious suicidal thoughts within the previous 12 months, and four times more likely than those identifying as heterosexual (3%).

In 2019, Canadians aged 15 and older from population groups designated as visible minorities were less likely than other Canadians to report having had suicidal thoughts in their lifetime (8% versus 13%), although they had relatively similar rates of suicidal thoughts in the previous 12 months (2% among groups designated as visible minorities versus 3% among other Canadians). Black Canadians were less likely (7%) than other Canadians (12%) to report having had suicidal thoughts in their lifetime.

More Canadians consulting with health care professionals about their mental health

Access to health care can have a positive impact on Canadians' mental health, including reducing the risk of suicide. In 2019, almost 5 million Canadians aged 12 and older in the provinces (16%) had seen or spoken to a health care professional in the previous year about their mental health, up from 14% in 2015. In 2019, 11% of males and 20% of females reported having seen or spoken to a health care professional about their mental health, compared with 10% of males and 18% of females in 2015.

One-quarter of Métis (26%), 22%^E of Inuit living outside Inuit Nunangat and 28% of First Nations people living off reserve had consulted a health care professional about their mental health in the previous year. Indigenous people living off reserve (27%) were more likely than non-Indigenous people (16%) to have had a consultation in the previous year. Compared with Indigenous males (17%), Indigenous females (36%) were more than twice as likely to report having consulted with a health care professional about their mental health in the previous year. The rate of Indigenous people who reported having consulted a health care professional was also higher in 2019 (27%) than in 2015 (23%).

In 2019, just over one-quarter of people aged 15 and older identifying as gay or lesbian (26%) reported that they had seen or spoken to a health care professional about their emotional or mental health in the previous year. Almost half of people identifying as bisexual (45%) reported the same—a rate three times higher than that for people identifying as heterosexual (15%).

In 2019, 10% of Canadians designated as visible minorities reported having consulted a health care professional in the previous year, an increase from 8% in 2015. The proportion of Black Canadians who had consulted a health care professional was higher, at 12%, but was stable from 2015.

Note to readers

This article features analysis based on data from the 2019 Canadian Community Health Survey (CCHS). The CCHS is an annual population health survey that provides insight into the health conditions and behaviours of the Canadian population.

All estimates in this article exclude the territories, because the 2019 CCHS did not cover the entire population of the territories. Analyses for the territories require two cycles of the CCHS. Also excluded from the CCHS estimates in this article are health care institutions, some remote areas and full-time members of the Canadian Forces (living on or off military bases).

The symbol ^E next to an estimate indicates that the coefficient of variation for this estimate is between 15.1% and 35.0% and the quality is marginal. Users should interpret these results with caution.

In this article, when two estimates are said to be different, this indicates that the difference was statistically significant at a 95% confidence level (p-value less than 5%).

Participants did not self-identify as belonging to the visible minority population, but were asked to mark the population group (or groups) to which they belong. For that reason, "designated as a visible minority" is sometimes used to reflect the fact that the concept of "visible minority" refers to whether a person belongs to the visible minority population as defined by the Employment Equity Act. The Employment Equity Act defines visible minorities as "persons, other than Aboriginal peoples, who are non-Caucasian in race or non-white in colour." The visible minority population consists mainly of the following groups: South Asian, Chinese, Black, Filipino, Latin American, Arab, Southeast Asian, West Asian, Korean and Japanese.

Available tables: [13-10-0096-01](#) to [13-10-0098-01](#) and [13-10-0802-01](#).

Definitions, data sources and methods: survey number [3226](#).

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; STATCAN.infostats-infostats.STATCAN@canada.ca) or Media Relations (613-951-4636; STATCAN.mediahotline-ligneinfomedias.STATCAN@canada.ca).