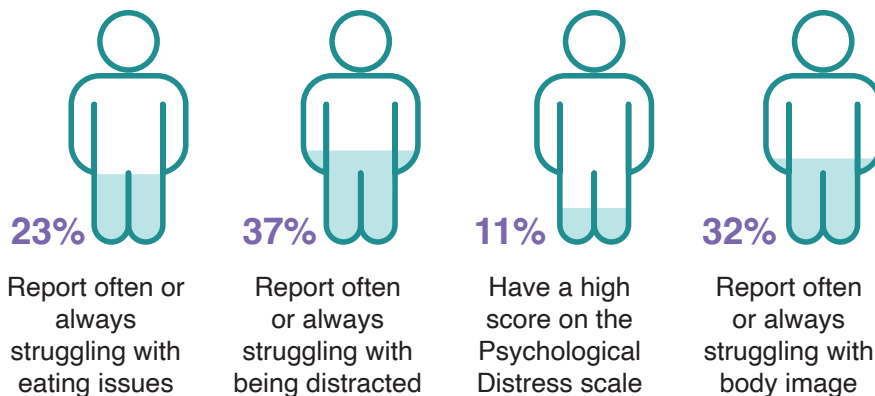


Mental Health

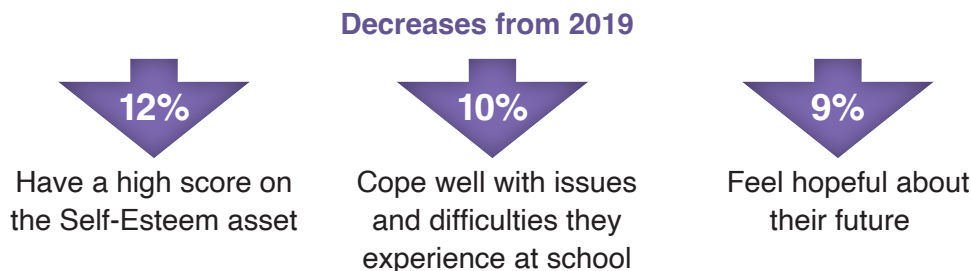
Addressing **pandemic impacts** on children and youth

What is the Problem?

In Wellington-Dufferin-Guelph, there were increases in mental health challenges across every indicator, when comparing Well-Being and Health Youth (WHY) Survey results from November 2019 to February 2022. The **largest increases** among students from grades 4-12 included:



There were **decreases in positive mental health** across every indicator, with the largest decreases being:



In 2022, **1 in 5 (20%)** Wellington-Dufferin-Guelph students **harmed themselves**. This was an 18% increase from 2019. This proportion is similar to the Ontario average reported in 2021 in the Ontario Student Drug Use and Health Survey (OSDUHS).^{1,2}



In 2022, **1 in 6 (15%)** Wellington-Dufferin-Guelph students reported **thoughts of suicide**. This was a 25% increase from 2019. This proportion is smaller than the Ontario average reported in the 2021 OSDUHS.^{1,2}

From 2019 to 2021, rates of mental health and addictions (MHA) related visits to family physicians, psychiatrists and pediatricians significantly increased in children and youth (ages 0-17). Rates in Wellington-Dufferin-Guelph were higher than those in Ontario for family physicians and psychiatrists.³

Since 2018-2019, the proportion of physician visits in Wellington-Guelph where a patient (0-17 years old) has an **MHA diagnosis** has been gradually increasing for the pediatric age group.



OHIP patients with MHA diagnosis

2018-2019	30%
2021-2022	41%

Source: Ontario Health Insurance Plan (OHIP).

In 2021-2022, 15-19-year-olds in Wellington-Guelph were the **largest group of patients in the emergency department for MHA** in comparison to adults and seniors. This age group also sees a higher proportion of patients in the ED as their first contact for MHA (25%) than adults 20-49-years-old.



patients in the emergency department for MHA

15-19	18%
40-44	8%
65-69	5%

Source: National Ambulatory Care Reporting System (NACRS).

Three Recommendations to Address the Problem

1. **Work with community partners** to develop clear pathway(s) for accessing services in Wellington-Dufferin-Guelph that children and youth need for their mental health concerns.
2. **Develop communication materials** for the pathway(s) that are tailored to the audiences that will use this information, such as children and youth, parents, school staff and health care providers.
3. **Continue to promote early identification** of mental health concerns and tools that build resiliency in children and youth as part of efforts to reduce stigma and improve help-seeking behaviours.

References

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