

EVIDENCE SNAPSHOT

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Patterns of mental health and substance use in adults with low income and education

Research suggests that mental health and illness are not on opposite ends of a spectrum. Instead, they can co-occur, and are better understood as part of a continuum: one person may have good mental health while having a mental illness, while another may not have a mental illness yet experience a poor state of mental health.

Some groups also appear to be more susceptible to poor mental health and mental illness. The health equity literature suggests that these differences in health outcomes are related

to disparities in access to social and economic resources.

In light of these differences, it may be helpful to use a health equity lens to explore the 2013 CAMH Monitor findings on mental health and substance use among low-income and less-educated groups.

How is health equity relevant to mental health and substance use?

Central to this discussion are the social determinants of health – the social, economic, and political factors that influence people's health. Some factors that influence mental health and substance use include:

- stigma and discrimination;
- socioeconomic status (SES), which considers income, employment, and/or level of education;
- housing;
- social inclusion.

Equity and mental health also reinforce and intersect with each other:

- Health inequity means unequal access to these social and economic resources, which

About CAMH Monitor

CAMH Monitor is the longest running, ongoing survey of mental health and substance use among Canadian adults. The 2013 edition of this annual survey was based on data from 3,021 Ontario adults, and reported on substance use as well as mental health and well-being. The mental health indicators included: psychological distress, self-rated mental health, and use of anti-depressants and anti-anxiety medications. The substance use indicators included: use of alcohol, tobacco, cannabis, cocaine, and prescription opioid pain relievers.



puts people at an increased risk of poor mental health;

- People living with mental illness may experience stigma and discrimination (for example by employers, landlords and mental health professionals) that can limit their access to these resources;
- People living with mental illness who also experience marginalization may have limited access to appropriate services, which can further compromise their mental health.

Substance use patterns may also be linked to the social environment. For instance, those with low socioeconomic status:

- have limited access to educational resources on harm reduction, so they may have higher rates of substance use;
- are less likely to seek medical help for substance use problems.

On the other hand, social determinants of health can have a positive influence. For instance:

- Those who are employed are more likely to recover from mental health issues and have a greater sense of well-being;
- People with substance use problems are more likely to seek help if they are employed.

Summary

The CAMH Monitor results suggest that adults with low household income and education may have higher rates of poor mental health and substance use. This is a complex health issue

CAMH Monitor Results

- Those with the lowest household income (<\$30,000) had the highest rates of smoking and cannabis use.
- This group was also significantly more likely to have higher psychological distress and use antidepressants than those with highest incomes (>\$80,000)
- Individuals who did not complete high school were significantly more likely to smoke and to report high-risk or harmful drinking than those with a university degree.
- This group was also significantly more likely to have fair or poor mental health, and to have had at least 14 days of mental distress in the previous month.

with multiple and overlapping factors that have social and economic underpinnings.

References

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