

Highlights from the 2005 *OSDUS* Mental Health & Well-Being Report

This *eBulletin* highlights some of the key findings from the new report “The Mental Health and Well-Being of Ontario Students, 1991-2005: Detailed *OSDUS* Findings.” The *Ontario Student Drug Use Survey (OSDUS)* is an anonymous in-class survey of 7th- to 12th-graders conducted every two years in Ontario schools.

Table 1 presents the 2005 prevalence rates for various indicators of physical health, mental health, and risky

behaviour. Sex differences are also shown. Males are more likely than females to: be physically active daily, experience an injury that requires treatment, use Ritalin medically, report delinquent, violent and fire setting behaviour, bully others, gamble heavily, and be at risk for a gambling problem. Females are more likely to: report poor health, be physically inactive, visit a mental health professional, use a crisis helpline, report low self-esteem, depressive symptoms, psychological distress and suicide ideation, and report being bullied.

Table 1. Percentage of Students in Grades 7 to 12 Reporting Various Mental Health and Well-Being Indicators, Total Sample (N=7,726) and by Sex, 2005 *OSDUS*

| Indicator | Estimated Number | Total % (95% CI) | Males | Females | |
|--|------------------|------------------|-------|---------|---|
| Physical Health | | | | | |
| % fair or poor health (current) | 126,900 | 13.1 (12.0-14.3) | 10.5 | 15.9 | * |
| % physically inactive (past 7 days) | 175,500 | 18.3 (16.4-20.3) | 16.4 | 20.2 | * |
| % daily physical activity (past 7 days) | 159,600 | 16.6 (15.1-18.2) | 21.6 | 11.3 | * |
| % treated for a physical injury (past year) | 323,800 | 33.8 (32.2-35.5) | 37.9 | 29.5 | * |
| Mental Health | | | | | |
| % used Ritalin medically (past year) | 22,800 | 2.4 (1.9-2.9) | 3.3 | 1.3 | * |
| % reporting 1+ mental health care visits (past year) | 110,800 | 11.7 (10.5-12.9) | 8.7 | 14.8 | * |
| % used telephone crisis helpline (past year) | 18,200 | 1.8 (1.4-2.4) | 1.1 | 2.5 | * |
| % low self-esteem (current) | 97,500 | 9.6 (8.5-10.8) | 8.2 | 11.0 | * |
| % at elevated risk for depression (past 7 days) | 54,100 | 5.3 (4.5-6.2) | 1.9 | 8.9 | * |
| % psychological distress (past few weeks) | 303,500 | 29.6 (27.8-31.4) | 22.2 | 37.3 | * |
| % suicide ideation (past year) | 113,800 | 11.2 (10.0-12.5) | 7.0 | 15.5 | * |
| Risky and Problem Behaviours | | | | | |
| % overall delinquent behaviour (past year) | 129,900 | 12.9 (11.4-14.6) | 16.1 | 9.6 | * |
| % carrying a weapon (past year) | 95,200 | 9.6 (8.2-11.0) | 14.9 | 4.0 | * |
| % carrying a handgun (past year) | 18,900 | 1.9 (1.3-2.6) | 3.1 | 0.6 | * |
| % setting something on fire (past year) | 271,800 | 27.2 (25.3-29.2) | 33.8 | 20.4 | * |
| % fighting at school (past year) | 181,600 | 18.1 (16.6-19.7) | 27.1 | 8.7 | * |
| % threatened/injured with weapon at school (past year) | 82,800 | 8.2 (6.9-9.8) | 11.6 | 4.8 | * |
| % been bullied (since September) | 311,000 | 30.9 (29.0-32.8) | 27.8 | 34.0 | * |
| % bullied others (since September) | 275,000 | 27.3 (25.2-29.5) | 29.4 | 25.2 | * |
| % heavy gambling (past year) | 58,800 | 5.9 (4.8-7.1) | 9.1 | 2.6 | * |
| % at risk for a gambling problem | 45,800 | 4.5 (3.5-5.9) | 7.2 | 1.8 | * |
| % reporting 3 or all 4 co-existing problems [†] | 86,200 | 8.4 (7.2-9.8) | 8.7 | 8.0 | |

Notes: the estimated number of students is based on a student population of about 975,200; * indicates a significant sex difference ($p < .05$), not controlling for other factors; † among psychological distress, delinquent behaviour, hazardous drinking, and drug use problem.

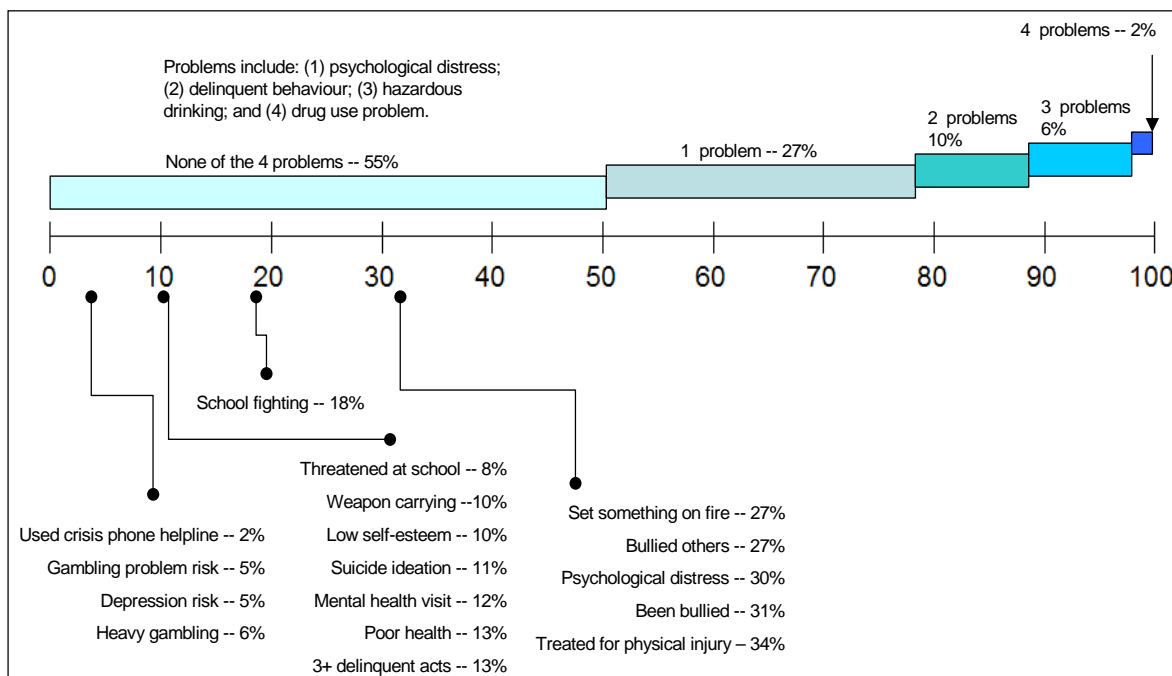
Short-Term Trends, 1999–2005 (Grades 7 to 12)

- Students in 2005 (13%) are significantly more likely to report fair or poor health compared to students in 2001 (10%) and 1999 (9%).
- Medical Ritalin use is significantly lower in 2005 (2%) compared to use in 1999 (4%).
- Overall delinquent behaviour significantly declined between 1999 (18%) and 2005 (13%).
- The percentage reporting assaulting someone significantly declined between 1999 and 2001 (from 20% to 13%), and remains stable in 2005 at 12%.
- The percentage reporting weapon carrying is significantly lower in 2005 (10%) compared to the 1999 estimate (14%).
- Between 2003 and 2005, gambling at card games significantly increased, from 24% to 33%.

Long-Term Trends, 1991–2005 (Grades 7, 9, 11 only)

- Self-reports of fair or poor health were lowest in 1991, at 6%. Poor health has significantly increased to an all-time high in 2005, at 13%.
- Compared to their counterparts in 1997, students in 2005 are more likely to be physically inactive (14% vs. 18%, respectively).
- Compared to rates found in 1993 (17%) and 1995 (18%), delinquent behaviour is significantly lower in 2005 (13%).
- Assault peaked in 1997 (22%), subsequently declined to 12% in 2001, and remains stable in 2005 at 11%.
- Compared to their counterparts in 1993, students today are less likely to carry a weapon (16% in 1993 vs 9% in 2005).
- The percentage reporting selling cannabis is significantly higher in 2005 (7%) compared to a decade ago (3% in 1991).

Figure 1. Overview of Physical and Mental Health Indicators, Risky Behaviours, and Co-Existing Problems, Grades 7 to 12, 2005 OSDUS



Methods:

The *Ontario Student Drug Use Survey (OSDUS)* is an Ontario-wide survey of elementary (grades 7 and 8) and secondary (grades 9-12) school students conducted every two years since 1977. The 2005 survey, which used a stratified (region) two-stage cluster design (school, class) included 7,726 students in grades 7 to 12 from 42 school boards, 137 schools, and 445 classes. Self-administered questionnaires, which promote anonymity, were administered by staff from the Institute for Social Research, York University on a classroom basis between January and June 2005. The student participation rate was 72%. The 2005 full sample size of 7,726 students represents about 975,200 students in grades 7 to 12 in public and Catholic schools across the province.

All survey estimates were weighted, and variance and statistical tests were corrected for the sampling design. Note that prior to the 1999 survey, only students in grades 7, 9, and 11 were included. Therefore, long-term trends are limited to only these three grades.

Terminology:

- **Low Self-Esteem** is defined as responding negatively to at least 3 out of 6 items adapted from the Rosenberg Self-Esteem Scale.
- **Risk for Depression** is defined as “usually” or “often” experiencing all 4 symptoms from the Center for Epidemiologic Studies Depression Scale (CES-D; past 7 days time frame).
- **Psychological Distress** is measured with the General Health Questionnaire (GHQ), which is a 12-item screening instrument designed to assess current mental health. The items assess the recent frequency of experiencing 12 symptoms (e.g., stress, depression, problem making decisions). Distress is defined as experiencing at least 3 of the 12 symptoms.
- **Overall Delinquent Behaviour** is defined as participating in 3 or more of 11 acts (e.g., theft, vandalism, assault, joyriding) at least once during the past 12 months.
- **Bullying** is defined as “...when one or more people tease, hurt or upset a weaker person on purpose, again and again. It is also bullying when someone is left out of things on purpose.” Students were asked what was the main way they were bullied, and bullied others, since September. The 4 response options were: (1) was not involved in bullying at school; (2) physical attacks (e.g., beat up, pushed or kicked), (3) verbal attacks (e.g., teased, threatened, spread rumours), and (4) stole or damaged possessions. The prevalence rates for bullying victim and perpetrator are based on these modal questions.
- **Risk for a Gambling Problem** is measured with the South Oaks Gambling Screen Revised for Adolescents (SOGS-RA), and is defined as experiencing 2 or more of the 6 symptoms during the past 12 months.
- **Hazardous Drinking** is measured with the Alcohol Use Disorders Identification Test (AUDIT), which is a 10-item instrument that measures heavy drinking and alcohol-related problems during the past 12 months. A score of 8 or more out of 40 is used as a cut-off to indicate hazardous drinking.
- **Drug Use Problem** is measured with the CRAFFT-D screener, which is a 6-item instrument designed to detect a drug problem that requires treatment. Experiencing 2 or more of the 6 problems indicates a potential drug problem.
- **95% Confidence Interval (CI)** can be crudely interpreted as being 95% likely to include the “true” percentage value if every student in grades 7 to 12 in Ontario was surveyed.
- **Significant Difference** refers to a difference between two percentages that is not likely due to chance. For example, a difference found at the $p < .05$ level of statistical significance is one that is less than 5% likely to occur by chance alone.

Source:

Adlaf, E.M., & Paglia-Boak, A., Beitchman, J.H., & Wolfe, D. (2006). *The Mental Health and Well-Being of Ontario Students, 1991-2005: Detailed OSDUS Findings*. CAMH Research Document Series, No. 18. Toronto: Centre for Addiction and Mental Health. (The report is available at <http://www.camh.net/research/osdus.html>.)

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