

# Canadian Community Health Survey's Canadian Forces Supplement on Mental Health, Statistics Canada

**Friday, September 5, 2003**

On September 3, 2003, the Canadian Community Health Survey (CCHS) released the first national results on mental health and well-being. Data are available today from the Canadian Forces Mental Health Survey, a special supplement to the CCHS.

The target population of the CCHS itself does not include full-time members of the Canadian Forces. As a result, the Department of National Defence commissioned Statistics Canada to conduct a supplemental survey of armed forces personnel, including personnel on reserve status.

This survey measured the prevalence of five mental disorders: major depression, social phobia, post-traumatic stress disorder, panic disorder, and general anxiety disorder. It also measured the prevalence of alcohol dependence. [Information and definitions related to this release](#) can be found on the Statistics Canada website.

According to the data, 15.1% of the Canadian regular military forces reported symptoms consistent with one or more of the five mental disorders covered in the survey, or alcohol dependence, at some time during the 12 months prior to the interview. The prevalence among the reserves was lower (12.7%).

The survey found differences in the prevalence of various disorders between regular and reserve forces, and also found differences between rank and gender.

For example, 7.6% of regular forces reported major depression, the most common disorder. It was followed by alcohol dependence (4.2%), social phobia (3.6%), post-traumatic stress disorder (2.8%), panic disorder (2.2%) and lastly general anxiety disorder (1.8%).

However, among reservists, alcohol dependence was most commonly reported at 6.2%, followed by major depression (4.1%). Post-traumatic stress disorder (1.2%) dropped to fifth place for the reserves.

The rate of reporting symptoms was generally higher in the lower ranks. As with the general population survey, the Canadian Forces supplement found the rate of reporting symptoms was higher for women than for men, except for alcohol dependence, where it was higher for men.

Preliminary analysis suggests there may be a relationship between higher numbers of deployments and the prevalence of only one of the surveyed disorders, post-traumatic stress disorder, among members of the forces. For example, 4.7% of regular forces who

had served on three or more deployments reported symptoms consistent with post-traumatic stress disorder. This prevalence was different than the comparable numbers for those serving on one or two deployments (2.7%) and for those with none (1.7%).

For the reserves, there was also a difference in prevalence for post-traumatic stress disorder for those with one or more deployments (2.4%) from those with none (0.9%). Further study is required on this aspect of the survey results.

The survey also asked if respondents had sought help for problems with their emotions, mental health or use of alcohol or drugs. Of those reporting symptoms consistent with one or more of the surveyed disorders or alcohol dependence, 24.5% of the members of the regular forces reported receiving at least one type of help during the 12 months prior to the survey, and found the help sufficient.

A similar number (27.3%) received help, but reported a need for either different or additional services in the area where help was received. Some 12.4% did not receive any help but reported needing it. Finally, 35.0% neither received nor reported needing help, yet they were classified as having symptoms consistent with one of the surveyed disorders.

The comparable numbers for the reserves were: 13.4% reported receiving at least one type of help, and found the help sufficient; 21.8% received help, but reported a need for either different or additional services in the area where help was received; 14.0% did not receive any help but reported needing it, and 50.8% neither received nor reported needing help, yet they were classified as having symptoms consistent with one of the surveyed disorders.

In another aspect of the survey, 7% of regular force members who had any of the disorders reported at least one disability day during the two weeks prior to the survey. This was an occasion in which they had to stay in bed or cut down on their activities because of their emotional or mental health or use of alcohol or drugs. About 4% of the reserves reported at least one disability day, as did 6% of the general population.

Comparison was also made with the broader Canadian civilian population for those disorders covered by both surveys: major depression, social phobia, panic disorder and alcohol dependence. In this case, two disorders were found to have significantly different prevalence among regular force military personnel, after adjustments for differences in the age and sex profiles of the two populations. The rate for major depression was significantly higher than for the general population, as was the rate for panic disorder. The reserve forces were very similar to the Canadian population. The only difference was that they were found to have significantly lower rates of social phobia disorder than were found in the civilian population.

For more information on the survey content and these analyses, contact Colonel Randy Boddam (613-945-6308), Department of National Defence.

For more information on methodology, data collection activities or how to obtain additional information from the survey database, contact Client Services (1-800-461-9050; 613-951-3321; [ssd@statcan.ca](mailto:ssd@statcan.ca)) or Edward Praught (613-951-5386; [edward.praught@statcan.ca](mailto:edward.praught@statcan.ca)), Special Surveys Division, Statistics Canada.

For more information visit StatsCanada Website  
<http://stcwww.statcan.ca/english/sdds/5015.htm>

For more information on the mental health of the Canadian Armed Forces visit the Department of National Defense and the Canadian Armed Forces Website at:  
[http://www.forces.gc.ca/health/information/op\\_health/stats\\_can/engraph/MH\\_Survey\\_e.asp](http://www.forces.gc.ca/health/information/op_health/stats_can/engraph/MH_Survey_e.asp)

### **The CF 2002 Supplement of the Statistics Canada Canadian Community Health Survey**

- [Statistics Canada CF Mental Health Survey: A "Milestone"](#)
- Technical Briefing, 5 September 2003
  - [Speaking notes from Col Scott Cameron, CF Surgeon General \(MS Word Format\)](#)
  - [Speaking notes from Col Randy Boddam, Director of Mental Health Services \(MS Word Format\)](#)
  - [Canadian Community Health Survey Version 1.2 Canadian Forces Supplement \(PPT Presentation Format\)](#)
  
- Mental Health - Stats Can Survey Results in Tabular Form
  - [Table 1 - Comparison between CF Regular Force and Canadian General Populations](#)
  - [Table 2 - Comparison between CF Regular and Reserve Force Male and Female Members](#)
  - [Table 3 - Comparison between CF Regular Force Member's Annual Household Income](#)
  - [Table 4 - Comparison between CF Regular and Reserve Force Member's First Official Language](#)
  - [Table 5 - Comparison between the total of CF Regular and Reserve Force Member Deployments](#)
  - [Table 6 - Comparison between the amount of social support of CF Regular and Reserve Forces](#)
  - [Table 7 - Comparison between of rank between CF Regular and Reserve Forces](#)