

The Intersectionality Between Poverty and Mental Illness: The State of Youth Mental Health in Canada

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Introduction

Canadian youth are the leaders of tomorrow. They have shouldered the COVID-19 pandemic with resilience and determination, but this has come with both mental health and economic costs.

COVID-19 has disproportionately impacted youth with mental illnesses and economic struggles. Canada's recovery from the pandemic relies on our ability to support youth health through economic, healthcare, and social policies.

The Young Canadians Roundtable on Health is a youth-led, youth-serving organization that strives to close the gap between youth and policy makers on topics related to youth health. Our membership is as diverse as the broader Canadian public, and equity, diversity, and inclusion is our top priority.

This report will provide details into the extent of youth poverty in Canada and the intersectionality between poverty and mental illness. A comparison between youth mental health and poverty rates in Indigenous communities will be analyzed in comparison to non-Indigenous communities.

Background

Poverty

Canada's Official Poverty Line is evaluated using the Market Basket Measure (MBM). This measurement reflects a modest, basic standard of living, and is updated regularly to reflect the changing cost of "basket items," such as clothing, food, footwear, transportation, and housing.

Using the Market Basket Measure, it has been determined that 1 in 10 Canadian youth live in poverty¹. This number is significantly higher in some regions of the country, such as Nova

¹ Statistics Canada. (2022, February 18). *Dimensions of poverty hub*. Government of Canada, Statistics Canada. Retrieved February 19, 2022, from <https://www.statcan.gc.ca/en/topics-start/poverty>

Scotia, where 24.3% of children live in poverty². Most notably, poverty rates for minority groups in Canada remain “well above the national average.”³”

Indigenous youth are an example of a minority group that experiences poverty at disproportionately high rates. In fact, Indigenous youth are almost twice as likely to live in poverty than their non-Indigenous counterparts, as shown in Figure 1.

While youth in Canada are less likely to live in poverty than ever before, there have been concerning trends with youth literacy and numeracy rates in recent years. Between 2015 and 2018, the low literacy rate for youth under 15-years-old in Canada increased from 10.7% to 13.8%⁴. Similarly, the low numeracy rate increased from 14.4% to 16.3%. This trend is concerning, as “literacy and numeracy are essential skills that allow individuals to excel in life⁵.” More needs to be done to ensure young people have the opportunities and skills they need to succeed.

Mental illness

An estimated 1.2 million children and youth in Canada are affected by mental illness⁶. Of this number, only 20% will receive treatment. Rates of psychiatric and mood disorders are higher in communities disproportionately affected by poverty. For example, rates of youth mood disorders are 3.4% higher in Indigenous communities⁷.

Youth Poverty Rates

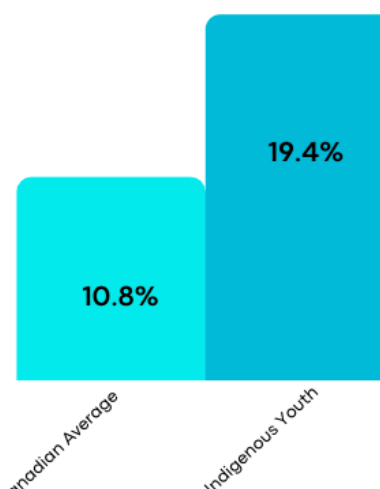


Figure 1: Government of Canada, S. C. (2022, February 19). *Statistics Canada: Canada's National Statistical Agency*. Statistics Canada: Canada's national statistical agency. Retrieved February 20, 2022, from <https://www.statcan.gc.ca/en/start>

² Frank, L., Saulnier, C., & Fisher, L. (2021, November 24). *2021 report card on child and family poverty in nova scotia*. Canadian Centre for Policy Alternatives. Retrieved February 19, 2022, from <https://www.policyalternatives.ca/publications/reports/2021-report-card-child-and-family-poverty-nova-scotia>

³ Employment and Social Development Canada. (2021, June 15). *Government of Canada*. Canada.ca. Retrieved February 20, 2022, from <https://www.canada.ca/en/employment-social-development/programs/poverty-reduction/national-advisory-council/reports/2020-annual.html#h2.03>

⁴ Ibid

⁵ Ibid

⁶ Youth Mental Health Canada. (2022, February 13). *Youth Mental Health Stats in Canada*. Youth Mental Health Canada. Retrieved February 20, 2022, from <https://ymhc.ngo/resources/ymh-stats/#:~:text=An%20estimated%201.2%20million%20children,have%20developed%20a%20mental%20illness.>

⁷ Government of Canada, S. C. (2021, March 4). A portrait of Canadian youth: March 2019 updates. Government of Canada, Statistics Canada. Retrieved January 9, 2022, from <https://www150.statcan.gc.ca/n1/pub/11-631-x/11-631-x2019003-eng.htm>

A growing body of evidence suggests that promotion, prevention, and early intervention produce positive returns on investment when it comes to mental healthcare. More specifically, reports have shown that for every \$1 invested in the early years of a child’s life, the healthcare system will save up to \$9 in future spending⁸.

In keeping with higher rates of poverty, Indigenous youth in Canada also suffer from higher instances of psychiatric and mood disorders. Most notably, they are more likely to suffer tragic outcomes of severe mental illness. This is reflected in Figure 2, which shows suicide rates of Indigenous and non-Indigenous young males.

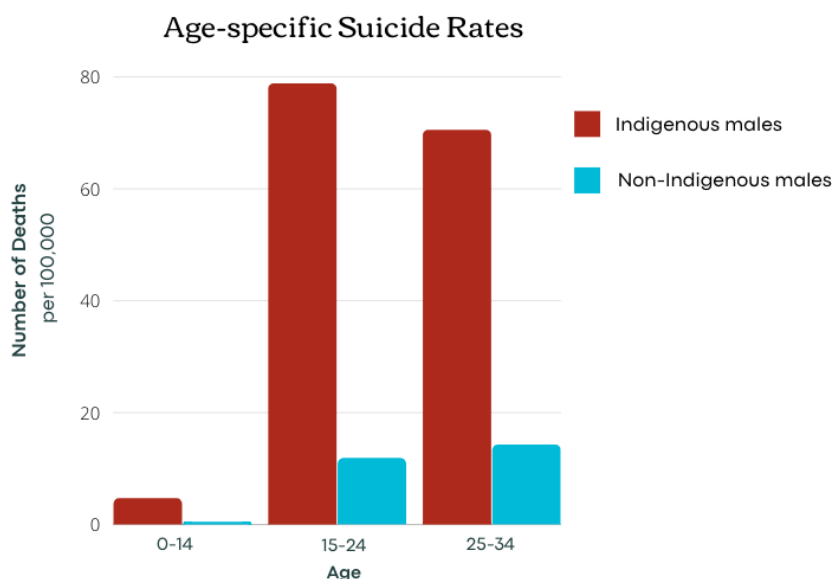


Figure 1: Kumar, M. B., & Tjepkema, M. (2019, June 28). *Suicide among First Nations people, Métis and Inuit (2011-2016)*. Statistics Canada. Retrieved January 9, 2022, from <https://www150.statcan.gc.ca/n1/pub/99-011-x/99-011-x2019001-eng.htm>

Analysis and Considerations

Indigenous youth, one of Canada’s widely dispersed minority groups, are diagnosed with mood disorders only slightly more often than their non-Indigenous peers. However, the difference in suicide rates between these two groups is astounding. This begs the question: why are rates of mood disorders – seen as the primary onset of mental illness -- similar between these two groups,

⁸ Public Health Agency of Canada. (2008, June 6). *Government of Canada*. Canada.ca. Retrieved February 20, 2022, from <https://www.canada.ca/en/public-health/corporate/publications/chief-public-health-officer-reports-state-public-health-canada/report-on-state-public-health-canada-2008/chapter-6.html>

while suicide rates – a tragic outcome of severe mental illness – are exponentially higher for Indigenous groups?

Current data does not adequately answer this question. The 3.4% difference in rates of diagnosed mood disorders between Indigenous and non-Indigenous Canadian youth could be caused by a lack of access to mental healthcare professionals who are able to diagnose mood disorders, heavy stigmatization of those affected by mental illness, or a lack of resources to effectively treat mood disorders in Indigenous communities. After all, studies show that 1 in 10 Canadians cannot afford to fill their medical prescriptions, creating a serious challenge for those affected by mood disorders⁹. These are merely speculations; more research needs to be done to understand why such a large disparity exists between rates of diagnosed mood disorders and suicide in Indigenous communities.

Regardless of socioeconomic background, location, or ethnicity, the COVID-19 pandemic has created unprecedented challenges for Canadian youth, especially when it comes to mental health. Waves of restrictions, changes in learning delivery, and long wait times for mental healthcare have created volatile circumstances for youth across the country. If we are to rebuild a more robust Canada following the COVID-19 pandemic, we must look out for the wellbeing of our youth.

Various reports have proposed solutions to the mental healthcare crisis in Canada. Peace of Mind Ontario's [Provision of Care](#) report has suggested that introducing mental healthcare in schools could be a cost-effective way of preventing and proactively treating mental illnesses in Canadian youth. Similarly, [Frayme's YouthCan IMPACT](#) project introduced a one-stop, walk-in clinic model of care for youth mental health and addiction services. These concepts aim to revolutionize our healthcare system, providing timely, high-quality care to youth in *any* community.

Conclusion

The time to act in support of youth mental health initiatives is *now*. We must ensure that no child is left behind. We must seek to include, support, and proactively address youth mental illness in *all* communities, particularly those impacted by poverty.

The Young Canadians Roundtable on Health is prepared for the challenge of addressing youth mental health. We have already begun working collaboratively with organizations across the

⁹ Public Health Agency of Canada (2008, June 6). *Government of Canada*. Canada.ca. Retrieved February 24, 2022, from <https://www.canada.ca/en/public-health/corporate/publications/chief-public-health-officer-reports-state-public-health-canada/report-on-state-public-health-canada-2008/chapter-6.html>



country to offer a youth voice on policy initiatives, projects, and programs. As a youth-serving, youth-led organization, we are driven to achieve the best results for young Canadians. We look forward to working with you to develop a strategy for addressing mental health disparities in impoverished communities in Canada.