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Report

OPENING EYES, OPENING MINDS: The Ontario Burden of Mental Illness and Addictions Report

Summary

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OPENING EYES, OPENING MINDS: THE ONTARIO BURDEN OF MENTAL ILLNESS AND ADDICTIONS REPORT

You are invited to view the full report which is available for download at www.ices.on.ca or at www.oahpp.ca.



The opinions, results and conclusions reported in this paper are those of the authors and are independent from the funding sources. No endorsement by the Institute for Clinical Evaluative Sciences (ICES), Public Health Ontario (PHO) or the Ontario Ministry of Health and Long-Term Care (MOHLTC) is intended or should be inferred.

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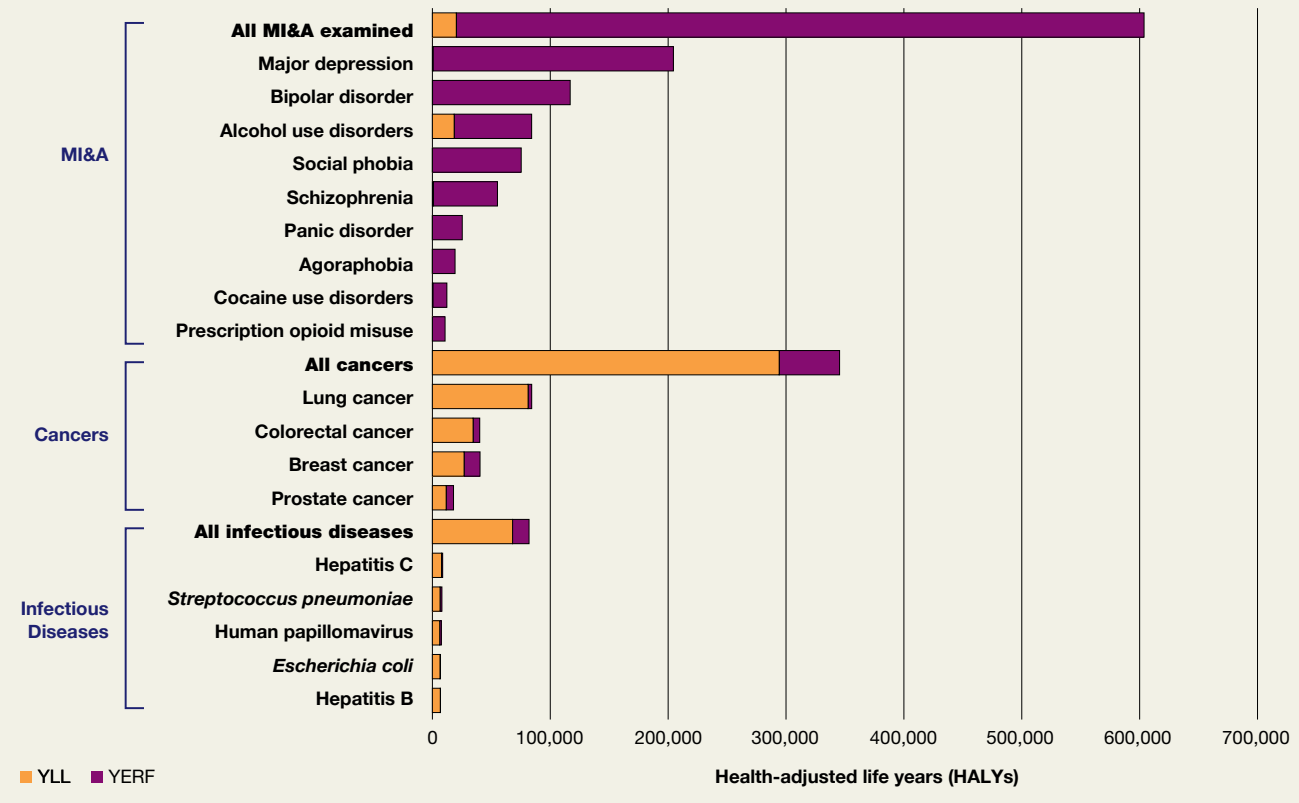
Findings

Most Ontarians are affected, either directly or indirectly, by mental illness and addiction issues. According to the Mental Health Commission of Canada, one in five Canadians is affected by a mental illness or addiction issue every year. Onset often occurs at a young age and can persist throughout life, with a significant impact on social connections, educational goals and workforce participation. The impact of mental illness and addiction on life expectancy, quality of life and health care utilization is significant—in many cases, more so than with other medical conditions—yet is often under-recognized.

The World Health Organization (WHO) defines health as a state of complete physical, mental and social well-being, and not merely the absence of disease or infirmity. Mental health is a critical component of overall health. Measuring the burden of mental illness and addiction is an important step in ensuring that the needs of people who suffer from these conditions are understood and can be addressed. This study quantifies the burden and allows for comparison with other diseases and conditions.

The methods used in this study are conservative; they are based on a group of selected conditions and addictions that are highly prevalent and readily measured. Therefore, the findings do not reflect the total burden of mental illness and addiction in Ontario.

Burden of mental illness and addictions (MI&A) compared to cancers and infectious diseases in Ontario, by years of life lost due to premature mortality (YLL) and year-equivalents of reduced functioning (YERF)



2 | **The Impact of Mental Illness and Addictions**

- The burden of mental illness and addictions in Ontario is more than 1.5 times that of all cancers and more than seven times that of all infectious diseases.
- The nine conditions identified in this report contributed to the loss of over 600,000 health-adjusted life years (HALYs), a combination of years lived with less than full function and years lost to early death in Ontario.
- Five conditions have the highest impact on the life and health of Ontarians: depression, bipolar disorder, alcohol use disorders, social phobia and schizophrenia.
- Depression is the most burdensome condition with twice the impact of bipolar disorder, the next highest condition. The burden of depression alone is more than the combined burden of lung, colorectal, breast and prostate cancers.
- In terms of deaths, alcohol use disorders contributed to 88% of the total number of deaths attributed to these conditions and 91% of the years of life lost to dying early.

Conclusions and Recommendations

Ontarians experience a high burden of illness related to mental illness and addictions. Individuals may be encumbered by these illnesses at a young age, experiencing the disruption of important life transitions, and challenged by their ongoing burden over a long period of time.

The findings of this study underscore the need for effective collaboration between health care providers, practitioners, policy-makers and researchers to identify effective mental health promotion and mental illness and addiction prevention interventions and improve access to treatment for those suffering from mental illness and addiction. Early detection and timely intervention are critical in reducing the lifelong burden of these conditions.

While effective treatments exist for mental illness and addiction, only a small proportion of affected individuals receive them. Given the significant burden, there is a need to consider population-based prevention, promotion and treatment strategies aimed at reducing the burden of mental illness and addiction in Ontario.

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ABOUT OPENING EYES, OPENING MINDS: THE ONTARIO BURDEN OF MENTAL ILLNESS AND ADDICTIONS REPORT

The Ontario Burden of Mental Illness and Addictions Report is the most thorough evaluation of the impact of mental illness and addictions undertaken to date in Ontario. A joint project of the Institute for Clinical Evaluative Sciences (ICES) and Public Health Ontario (PHO), the study sought to estimate the relative impact of a wide range of mental illnesses and addictions.

The objectives of this study were to:

- 1) Determine the burden of disease related to mental illness and addictions in Ontario;
- 2) Inform priority setting, planning and decision-making;
- 3) Establish a baseline for future evaluation of interventions that have an impact on the burden of mental illness and addictions;
- 4) Engage those working in public health in Ontario in a discussion on how to promote positive mental health and prevent mental illness and substance misuse and their associated health and social harms; and
- 5) Foster a dialogue between those working in mental health and public health on the mutual goal of promoting health and wellness for individuals with mental illness and addictions.

Methodology

The study used health-adjusted life years (HALYs), a composite health gap measure that incorporates both premature death (mortality) and reduced functioning or suboptimal states of health (morbidity) associated with disease or injury. HALYs quantify the amount of “healthy” life lost by estimating the difference between the health experienced within a defined population and some specified norm or goal. HALYs incorporate aspects of quality-adjusted life years (QALYs) and disability-adjusted life years (DALYs). HALYs are calculated by combining years of life lost due to premature death (YLLs) and year-equivalents of reduced functioning from living with the disease (YERFs).

Disease burden was estimated for nine mental illnesses and addictions for which reliable and valid Ontario data were available. Data on the nine conditions were acquired from a variety of different sources, including population health surveys and health administrative data. Deaths were estimated from vital statistics data.



4 | ABOUT ICES

The Institute for Clinical Evaluative Sciences (ICES) is an independent, non-profit organization that produces knowledge to enhance the effectiveness of health care for Ontarians. Internationally recognized for its innovative use of population-based health information, ICES evidence supports health policy development and guides changes to the organization and delivery of health care services.

Key to our work is our ability to link population based health information, at the patient level, in a way that ensures the privacy and confidentiality of personal health information. Linked databases reflecting 13 million of 33 million Canadians allow us to follow patient populations through diagnosis and treatment and to evaluate outcomes. ICES brings together the best and the brightest talent across Ontario. Many of our scientists are not only internationally recognized leaders in their fields but are also practicing clinicians who understand the grassroots of health care delivery, making the knowledge produced at ICES clinically focused and useful in changing practice. Other team members have statistical training, epidemiological backgrounds, project management or communications expertise. The variety of skill sets and educational backgrounds ensures a multi-disciplinary approach to issues and creates a real-world mosaic of perspectives that is vital to shaping Ontario's future health care system.

ICES receives core funding from the Ontario Ministry of Health and Long-Term Care. In addition, our faculty and staff compete for peer-reviewed grants

from federal funding agencies, such as the Canadian Institutes of Health Research, and receive project-specific funds from provincial and national organizations. These combined sources enable ICES to have a large number of projects underway, covering a broad range of topics. The knowledge that arises from these efforts is always produced independent of our funding bodies, which is critical to our success as Ontario's objective, credible source of evidence guiding health care.

ABOUT PHO

Public Health Ontario (PHO) is a Crown corporation dedicated to protecting and promoting the health of all Ontarians and reducing inequities in health. As a hub organization, PHO links public health practitioners, frontline health workers and researchers to the best scientific intelligence and knowledge from around the world.

PHO provides expert scientific and technical support relating to communicable and infectious diseases; health promotion, chronic disease and injury prevention; environmental and occupational health; emergency preparedness; and public health laboratory services to support health providers, the public health system and partner ministries in making informed decisions to improve the health and security of Ontarians. PHO's work also includes surveillance and epidemiology, research, professional development and knowledge services.