

DETAILED OSDUS FINDINGS

The Mental Health and Well-Being of Ontario Students



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Centre for Addiction and Mental Health
Centre de toxicomanie et de santé mentale

1991-2003

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EDWARD M. ADLAF
ANGELA PAGLIA-BOAK
JOSEPH H. BEITCHMAN
DAVID WOLFE



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Marketing and Sales Services
Centre for Addiction and Mental Health
33 Russell Street
Toronto, Ontario, Canada M5S 2S1

Tel.: 1 800 661-1111 or 416 595-6059 in Toronto

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Web site: www.camh.net

The 2003 OSDUS Mental Health and Well-Being Report

Executive Summary

The Data

The Centre for Addiction and Mental Health's *Ontario Student Drug Use Survey (OSDUS)*, is the longest ongoing school survey of adolescents in Canada. The study, which spans over two decades, is based on 14 surveys conducted every two years since 1977. In the spring of 2003, 6,616 students (grades 7 to 12) from 37 school boards, 126 schools and 383 classes participated in the survey administered by the Institute for Social Research, York University. This report describes physical health and mental health indicators in 2003 and changes since 1991, and is a companion document to the report *Drug Use Among Ontario Students, 1977-2003: Detailed OSDUS Findings*. All data are based on self-reports derived from anonymous questionnaires administered in classrooms.

Topics that are new to this 2003 report are: physical injuries sustained during the past year that required medical attention, trends in medical drug use since 1977, type of bullying involvement, and internet gambling. We also examined the overlap between substance use problems, mental health problems, and delinquent behaviour.

Family and School

- ❑ Almost three-quarters (73%) of Ontario students live with both natural parents, one-in-six (16%) live with a single parent (more often the mother), 9% live in a step-family, and 2% do not live with either natural parent.
- ❑ Almost all students (91%) feel safe in their school. However, 12% are worried about being harmed or threatened at school.

Social Health

- ❑ Just over half (57%) get along very well with their parents, 38% get along "ok", and 5% do not get along at all with their parents.
- ❑ A small percentage (5%) of students have no one to talk to about their problems.

Physical Health

- ❑ Although a majority (54%) of students report that they are in excellent or very good health, about 13% report poor health. Females are more likely to report being in poor health compared to males (15% vs 10%, respectively).
- ❑ A majority (63%) of students were physically active on 3 or more days during the 7 days before the survey. One-in-six (16%) were physically inactive during this time period. There is no significant sex difference regarding inactivity.
- Significantly more students rated their health as poor in 2003 (12%) compared to their counterparts in 1991 (6%; among grades 7, 9, 11 only).
- The percentage of students reporting no physical activity has remained stable between 1997 and 2003.

Health Care Utilization

Physical Health Care

- ❑ Less than two-thirds (60%) of students visited a physician at least once during the 12 months before the survey. Compared to males, females are significantly more likely to report at least one visit to a physician (54% vs 66%, respectively).

- ❑ Over one-third (35%) of students were treated for a physical injury at least once during the past 12 months. Males are more likely to have been treated for an injury compared to females (38% vs 33%, respectively).

Mental Health Care

- ❑ About 11% of students visited a mental health professional at least once during the past 12 months. Females are more likely than males to report visiting a mental health professional (14% vs 8%, respectively).

Medical Drug Use

- ❑ Among all students, 6% used barbiturates for medical reasons (about 53,900 students), 6% used medical stimulants (about 54,700 students), 3% used tranquillizers (about 25,800), and 2.5% used Ritalin (about 24,400).
- ❑ Among these four drugs, only two show a significant sex difference: males are more likely than females to use tranquillizers (3% vs 2%, respectively), and males are more likely than females to use Ritalin (4% vs 2%).
- ❑ A small proportion (2%) of students report that they had been prescribed medication to treat depression in the past year. Just under 1% of students were prescribed medication for anxiety. Another 2% were prescribed medication for both their depression and anxiety.
- Between 1999 and 2003, there was a significant decline in medical barbiturate use among the total sample (from 13% down to 6%). Medical Ritalin use significantly declined among the total sample in 2003 (2%) compared to 1999 (4%). Ritalin use also declined among males (from 6% in 1999 to 4% in 2003) and 8th-graders (5% to 2%). There were no significant changes over the short-term in the medical use of stimulants or tranquillizers.

Internalizing Indicators

Low Self-Esteem

- ❑ One-in-ten (10%) students report indicators of low self-esteem, with females more likely to do so than males (11% vs 7%).
- Between 1995 and 2003, there have been no changes in reported low self-esteem among the total sample.

Depressive Symptoms

- ❑ About 6% of students are at elevated risk for depression. Females are more likely to be at risk than males (8% vs 3%).
- Between 1997 and 2003, there were no significant changes in the risk for depression among the total sample, or among subgroups.

Elevated Psychological Distress

- ❑ Just under one-third (31%) of students indicate elevated psychological distress, with females more likely to do so than males (39% vs 22%, respectively).
- ❑ The most common symptom experienced by students is the feeling of being constantly under stress (38%), followed by losing sleep because of worrying (29%).
- Among the total sample, psychological distress significantly increased from 26% in 2001 up to 31% in 2003. Note that the 2003 level corresponds to the previous 1999 level (30%).

Suicide Ideation

- ❑ About one-in-eight (12%) students had serious thoughts about suicide in the past 12 months, with significantly more females than males reporting so (17% vs 8%, respectively).
- Suicide ideation did not significantly change between 2001 and 2003.

Body Image

- ❑ Over two-thirds (69%) of all students are satisfied with their weight. One-fifth (20%) feel they are too fat, while one-tenth (11%) feel they are too thin.
- ❑ Over one-third (38%) of students are not trying to do anything about their weight. Another third (29%) are trying to lose weight; 21% want to keep from gaining weight, and 12% want to gain weight.
- ❑ Females are significantly more likely to believe that they are too fat, compared to males (26% vs 13%, respectively), whereas males are more likely to believe that they are too thin compared to females (16% vs 7%).

Externalizing Indicators

Overall Delinquent Behaviour

- ❑ About one-in-seven (14%) students report engaging in three or more delinquent acts during the past year. Such behaviour is more prevalent among males than females (18% vs 11%, respectively), and tends to peak in grades 10 and 11.
- ❑ Among the 12 delinquent acts surveyed, the 3 most frequent were: property damage (15%), theft under \$50 (15%), and beating up someone (12%). The least reported act was selling drugs other than cannabis (3%).
- Between 1999 and 2003, the percentage of students reporting at least 3 of the 12 acts significantly declined, from 19% to 14%. There was a significant decline among males during this time period (from 26% in 1999 to 18% in 2003), but not among females.

Non-Violent Acts

- ❑ Males are significantly more likely than females to report each of the non-violent acts (such as theft, vandalism, selling drugs) except for being thrown out of one's home.
- Between 1999 and 2003, only reports of vandalism changed among the total sample,

decreasing from 24% in 1999 to 15% in 2003.

- Reports of vandalism and theft under \$50 are lower in 2003 compared to reports from the early 1990s (among grades 7, 9, 11 only).
- The percentage of students (in grades 7, 9, 11 only) reporting selling cannabis is significantly higher in 2003 (8%) compared to 1991 (3%).

Violent Acts

- ❑ About one in eight (12%) assaulted someone at least once during the past year. One-in-ten (10%) report carrying a weapon, and 6% report participating in gang fighting. Males are significantly more likely than females to report each of these three violent behaviours.
- Over the short-term, the percentage of students reporting assaulting someone significantly declined between 1999 and 2001 (from 20% to 13%), and still remains relatively low in 2003 at 12%.
- Reported weapon carrying significantly declined between 1999 (14%) and 2003 (10%).
- Between 1999 and 2003, no significant changes were found for gang fighting among the total sample of students.

School Violence and Bullying

- ❑ Among all students, 18% report fighting on school property at least once during the past year, with males more likely than females to do so (27% vs 9%, respectively).
- ❑ Among all students, 8% report having been threatened or injured with a weapon on school property at least once during the past year. Males are significantly more likely than females to report experiencing this (10% vs 6%, respectively).

- ❑ About one-third (33%) of students have been bullied at school since September. The most prevalent form of bullying victimization is verbal (27%), while 4% were bullied physically, and 2% were victims of theft/vandalism.
- ❑ Under one-third (30%) of students report taking part in bullying other students at school. The most prevalent form of bullying others is through verbal attacks (25%), followed by physical attacks (4%), and theft/vandalism (1%).
- ❑ Bullying involvement is significantly more likely among males than females, and among the younger grades.

Gambling

Gambling Activities

- ❑ About one-quarter (24%) of students played cards for money at least once in the past year. About one-in-five (22%) played lottery tickets, and the same proportion (20%) bet money in sports pools. The least prevalent activity is casino gambling (2%).
- ❑ Internet gambling was reported by about 2% of students.
- ❑ Among all students, 6% gambled in at least 5 of the 10 activities asked about, and this group can be considered to be heavy gamblers.
- ❑ Males are more likely than females to engage in eight of the ten gambling activities. Males are also more likely to report heavy gambling than females (10% vs 3%).

Gambling Problem

- ❑ About 4% of students report signs of pathological gambling, with males more likely to do so than females (6% vs 1%, respectively).

- The percentage of students reporting a pathological gambling problem significantly declined between 1999 and 2003, from 6% to 4%. This decline was also evident among males (from 10% to 6%).

Co-existing Problems

- ❑ Overall, the majority (52%) of students report none of the following 4 problems examined: psychological distress, hazardous drinking, drug problem, and delinquent behaviour. About 28% report 1 of these problems, 10% report 2 problems, 7% report 3 problems, and 3% report all 4 problems.
- ❑ The percentage reporting 3 or all 4 of these problems is 10%, which represents about 100,200 students across Ontario.

Common Risk Factors

The report also profiles some factors related to nine health risk outcomes: depression; psychological distress; suicide ideation; delinquency; pathological gambling; hazardous drinking; any illicit drug use including cannabis; any illicit drug use excluding cannabis; and co-existing problems.

In order of importance, the factors associated with these outcomes (while controlling for other factors) were as follows:

- ❑ the parent-child relationship (9 of 9 outcomes)
- ❑ parental monitoring (8 of 9 outcomes)
- ❑ school marks (7 of 9)
- ❑ sex (6 of 9)
- ❑ grade; family immigrant status; school attachment (5 of 9)
- ❑ family structure (3 of 9)
- ❑ school safety; region (2 of 9)
- ❑ parents' education; school mobility (0 of 9).

Major Mental Health and Well-Being Indicators, Ontario Students, G7-12, 2003

Indicator	Estimated Number of Ontario Students	Total	Males	Females	
% poor health (current)	122,000	12.6	9.9	15.2	*
% physically inactive (past 7 days)	152,400	16.1	15.6	16.5	
% treated for a physical injury (past year)	336,900	35.4	38.0	33.0	*
% used Ritalin medically (past year)	24,400	2.5	3.5	1.6	*
% reporting 1+ mental health care visits (past year)	103,400	11.0	8.1	13.7	*
% low self-esteem (current)	89,600	9.5	7.3	11.4	*
% at elevated risk for depression (past 7 days)	55,200	5.6	2.6	8.4	*
% psychological distress (past few weeks)	303,300	30.8	22.2	38.7	*
% suicide ideation (past year)	122,100	12.5	7.9	16.8	*
% 3+ delinquent acts (past year)	135,500	14.3	18.4	10.6	*
% carrying a weapon (past year)	90,200	9.6	14.9	4.9	*
% fighting at school (past year)	168,100	17.6	26.8	9.2	*
% threatened/injured with weapon at school (past year)	73,200	7.7	10.1	5.5	*
% been bullied (since September)	310,300	32.7	35.3	30.3	*
% bullied others (since September)	282,900	29.7	34.9	25.1	*
% 5+ gambling activities (past year)	58,000	6.1	9.6	3.0	*
% pathological gambling problem (past year)	33,800	3.5	6.0	1.1	*
% reporting 3 or all 4 co-existing problems	100,200	10.1	10.4	9.8	

Notes: the estimated number of students is based on a student population of about 970,000; * indicates a significant sex difference ($p < .05$), not controlling for other factors.

Indicator	G7	G8	G9	G10	G11	G12	
% poor health (current)	6.8	9.8	11.4	14.8	16.6	14.9	*
% physically inactive (past 7 days)	18.5	11.5	16.2	16.9	16.2	16.5	
% treated for a physical injury (past year)	32.5	36.3	38.3	35.1	36.0	33.6	
% used Ritalin medically (past year)	3.7	2.4	2.8	2.6	2.6	1.1	
% reporting 1+ mental health care visits (past year)	10.0	10.3	9.0	11.1	14.4	11.0	*
% low self-esteem (current)	9.0	7.7	9.9	10.7	9.8	9.1	
% at elevated risk for depression (past 7 days)	4.0	8.1	4.2	5.7	7.3	4.6	
% psychological distress (past few weeks)	20.8	23.6	26.9	34.0	38.6	37.8	*
% suicide ideation (past year)	9.8	16.7	11.1	12.4	14.8	10.5	
% 3+ delinquent acts (past year)	10.9	9.8	13.7	17.4	18.4	13.7	*
% carrying a weapon (past year)	9.9	6.6	12.2	8.6	11.8	8.0	
% fighting at school (past year)	29.7	26.0	19.6	14.5	11.0	8.8	*
% threatened/injured with weapon at school (past year)	7.3	9.8	7.6	10.0	6.8	4.6	
% been bullied (since September)	47.1	38.7	32.8	32.6	28.7	19.8	*
% bullied others (since September)	31.7	32.2	32.7	30.5	29.4	22.1	*
% 5+ gambling activities (past year)	5.8	4.5	5.9	4.8	7.2	7.9	
% pathological gambling problem (past year)	2.4	2.0	3.0	4.2	3.7	5.0	
% reporting 3 or all 4 co-existing problems	3.7	4.6	8.4	12.9	15.5	13.2	*

* indicates a significant grade difference ($p < .05$), not controlling for other factors.

Overview of Selected Trends in Mental Health and Well-Being Indicators among the Total Sample of Ontario Students

Indicator	Period	Among Grades	Change
% poor health (current)	1991-2003	G7, G9, G11	Increased from 6% to 12%
% physically inactive (past 7 days)	1991-2003	G7, G9, G11	Stable
% reporting 1+ physical health care visits (past year)	1999-2003	G7 to G12	Decreased from 70% to 60%
% used Ritalin medically (past year)	1999-2003	G7 to G12	Decreased from 13% to 6%
% used barbiturates medically (past year)	1999-2003	G7 to G12	Decreased from 4% to 2%
% reporting 1+ mental health care visits (past year)	1999-2003	G7 to G12	Stable
% low self-esteem (current)	1995-2003	G7, G9, G11	Stable
% at elevated risk for depression (past 7 days)	1997-2003	G7, G9, G11	Stable
% psychological distress (past few weeks)	1999-2003	G7 to G12	Fluctuated: increased from 26% in 2001 to 31% in 2003, but 2003 % is similar to 1999 (30%)
% suicide ideation (past year)	2001-2003	G7 to G12	Stable
% pathological gambling problem (past year)	1999-2003	G7 to G12	Decreased from 6% to 3.5%
% 3+ delinquent acts (past year)	1993-2003	G7, G9, G11	Peaked in 1997 (21%), decreased to 14% in recent years (2001-2003)
% carrying a weapon (past year)	1993-2003	G7, G9, G11	Peaked in 1993 (16%), steadily decreased to 9% in 2001, and still relatively low (11%)
% assaulting someone (past year)	1991-2003	G7, G9, G11	Peaked in 1997 (22%), decreased to 12% in recent years (2001-2003)
% gang fighting (past year)	1991-2003	G7, G9, G11	Stable
% vandalizing property (past year)	1991-2003	G7, G9, G11	Peaked in 1999 at 23%, decreased to 15% in recent years (2001-2003)
% reporting theft < \$50 (past year)	1991-2003	G7, G9, G11	Peaked in 1995 (21%), decreased to about 14% in recent years (2001-2003)
% selling cannabis (past year)	1991-2003	G7, G9, G11	Increased from 3% to 8%

Notes: the changes presented are based on the total sample of students; subgroup changes are not presented.

Résumé du rapport de 2003 sur la santé mentale et le bien-être selon le SCDEO

Données

Le Sondage sur la consommation de drogues parmi les élèves de l'Ontario (SCDEO), réalisé par le Centre de toxicomanie et de santé mentale, est l'étude scolaire sur la consommation de drogues chez les adolescents qui dure depuis le plus longtemps au Canada. Cette étude, qui couvre plus de vingt ans, repose sur 14 sondages menés tous les deux ans depuis 1977. Au printemps de 2003, 6 616 élèves (de la 7^e à la 12^e année) répartis dans 37 conseils scolaires, 126 écoles et 383 classes ont participé au sondage, qui a été administré par l'Institut de recherche sociale de l'Université York. Le rapport décrit les indicateurs de santé physique et mentale en 2003 et les changements survenus depuis 1991, et accompagne le document intitulé *Drug Use Among Ontario Students, 1977-2003: Detailed OSDUS Findings*. Toutes les données proviennent de questionnaires anonymes que les élèves ont remplis en classe.

Le rapport de 2003 fait état de données sur de nouvelles questions, soit les blessures subies au cours de l'année écoulée nécessitant des soins médicaux, les tendances en matière d'usage de médicaments depuis 1977, les types d'intimidation et le jeu sur Internet. Nous avons également examiné le chevauchement entre les problèmes de toxicomanie, de santé mentale et de délinquance.

Vie familiale et scolaire

- ❑ Environ les trois quarts des élèves (73 %) vivent avec leurs deux parents biologiques ; un élève sur six (16 %) vit uniquement avec son père ou sa mère (le plus souvent avec sa mère) ; 9 % vivent dans une famille reconstituée ; et 2 % ne vivent avec aucun de leurs parents biologiques.
- ❑ La quasi-totalité des élèves (91 %) se sentent en sécurité à l'école. Toutefois, 12 %

craignent d'être blessés ou menacés à l'école.

Santé sociale

- ❑ Un peu plus de la moitié des élèves (57 %) disent s'entendre très bien avec leurs parents ; 38 % s'entendent « assez » bien et 5 % des élèves ne s'entendent pas du tout avec leurs parents.
- ❑ Un faible pourcentage d'élèves (5 %) n'ont personne à qui parler de leurs problèmes.

Santé physique

- ❑ La majorité des élèves (54 %) jugent que leur santé est excellente ou très bonne, mais environ 13 % pensent être en mauvaise santé. Davantage de filles (15 %) que de garçons (10 %) estiment que leur santé est mauvaise.
- ❑ La majorité des élèves (63 %) avaient fait de l'activité physique au moins trois jours au cours des sept jours qui ont précédé le sondage. Un élève sur six (16 %) n'avait pas fait d'activité physique pendant cette période. Il n'y a pas de différence marquée entre garçons et filles sur le plan de l'inactivité physique.
- Le pourcentage d'élèves ayant déclaré qu'ils sont en mauvaise santé a augmenté considérablement en 2003 (12 %) par rapport à celui de 1991 (6 % parmi les élèves de 7^e, 9^e et 11^e années seulement).
- Le pourcentage d'élèves qui ne font aucune activité physique est demeuré stable entre 1997 et 2003.

Recours aux services de santé

Services de santé physique

- ❑ Moins des deux tiers (60 %) des élèves ont consulté un médecin au moins une fois au cours des 12 mois qui ont précédé le sondage. Les filles sont beaucoup plus susceptibles que les garçons de signaler au moins une visite chez le médecin (66 % par rapport à 54 %).
- ❑ Plus du tiers (35 %) des élèves ont été traités pour une blessure au moins une fois au cours des 12 mois écoulés. Les garçons sont plus susceptibles que les filles d'être traités pour une blessure (38 % par rapport à 33 %).

Services de santé mentale

- ❑ Environ 11 % des élèves ont consulté un professionnel de la santé mentale au moins une fois au cours des 12 mois écoulés. Les filles sont plus susceptibles que les garçons de signaler une visite chez un professionnel de la santé mentale (14 % par rapport à 8 %).

Utilisation de médicaments

- ❑ Parmi tous les élèves, 6 % faisaient usage de barbituriques pour des raisons médicales (environ 53 900 élèves), 6 % faisaient usage de stimulants médicaux (environ 54 700 élèves), 3 % prenaient des tranquillisants (environ 25 800 élèves), et 2,5 % prenaient du Ritalin (environ 24 400 élèves).
- ❑ On a constaté une différence significative entre les sexes pour deux de ces quatre médicaments seulement : les garçons sont plus susceptibles que les filles de prendre des tranquillisants (3 % par rapport à 2 %), et de prendre du Ritalin (4 % par rapport à 2 %).
- ❑ Une petite proportion (2 %) d'élèves ont obtenu une ordonnance pour des antidépresseurs au cours des 12 mois écoulés. Un peu moins de 1 % des élèves ont obtenu une ordonnance pour traiter l'anxiété, tandis que 2 % ont obtenu une

ordonnance pour traiter à la fois l'anxiété et la dépression.

- Entre 1999 et 2003, l'usage médical de barbituriques a diminué considérablement parmi l'échantillon total (passant de 13 % à 6 %). L'usage médical du Ritalin a connu une baisse considérable parmi l'échantillon total en 2003 (2 %) par rapport à celui de 1999 (4 %). L'usage du Ritalin a également diminué chez les garçons (passant de 6 % en 1999 à 4 % en 2003) et chez les élèves de 8^e année (passant de 5 % à 2 %). On n'a noté aucun changement significatif sur le plan de l'usage à court terme de stimulants ou de tranquillisants à des fins médicales.

Indicateurs d'intériorisation

Faible estime de soi

- ❑ Un élève sur dix (10 %) présente des indicateurs de faible estime de soi. Les filles sont plus susceptibles que les garçons de présenter de tels indicateurs (11 % par rapport à 7 %).
- Entre 1995 et 2003, on ne note aucun changement sur le plan de la faible estime de soi parmi l'échantillon total.

Dépression

- ❑ Environ 6 % des élèves courent un risque élevé de dépression. Ce risque est plus grand chez les filles (8 %) que chez les garçons (3 %).
- On n'a relevé aucun changement important entre 1997 et 2003 dans le risque de dépression, que ce soit pour l'échantillon total ou pour les sous-groupes.

Détresse psychologique élevée

- ❑ Un peu moins du tiers (31 %) des élèves signalent une détresse psychologique élevée, plus fréquente chez les filles (39 %) que chez les garçons (22 %).

- ❑ Les symptômes les plus fréquents étaient un état constant de stress (38 %) et une perte de sommeil à cause d'inquiétudes (29 %).
- On constate une augmentation importante de la détresse psychologique en 2003 (31 % de l'échantillon total) par rapport à 2001 (26 %). Notons que le pourcentage de 2003 correspond à celui obtenu en 1999 (30 %).

Idées suicidaires

- ❑ Environ un élève sur huit (12 %) a envisagé sérieusement de se suicider au cours des 12 mois écoulés. Beaucoup plus de filles (17 %) que de garçons (8 %) ont dit avoir eu des idées suicidaires.
- Les pourcentages n'ont pas beaucoup changé entre 2001 et 2003.

Image corporelle

- ❑ Plus des deux tiers des élèves (69 %) sont satisfaits de leur poids ; un cinquième d'entre eux (20 %) croient qu'ils sont trop gros et un dixième (11 %) croient qu'ils sont trop minces.
- ❑ Plus du tiers (38 %) des élèves ne font rien pour changer leur poids. Un autre tiers (29 %) essaient de perdre du poids, tandis que 21 % essaient de ne pas en prendre et que 12 % veulent en prendre.
- ❑ Les filles sont beaucoup plus susceptibles que les garçons de croire qu'elles sont trop grosses (26 % par rapport à 13 %), et les garçons sont plus susceptibles que les filles de croire qu'ils sont trop minces (16 % par rapport à 7 %).

Indicateurs d'extériorisation

Délinquance globale

- ❑ Environ un élève sur sept (14 %) a dit avoir commis trois actes de délinquance ou plus au cours de l'année écoulée, phénomène plus courant chez les garçons (18 %) que

chez les filles (11 %) et qui atteint son plus haut niveau en 10^e et en 11^e année.

- ❑ Parmi les 12 actes de délinquance étudiés, les trois plus fréquents étaient les dommages aux biens (15 %), le vol de moins de 50 \$ (15 %) et les agressions (12 %). L'acte de délinquance le moins souvent signalé était le trafic de drogues autre que le cannabis (3 %).
- Le pourcentage d'élèves ayant commis trois actes de délinquance ou plus parmi les 12 cités a diminué considérablement entre 1999 et 2003, passant de 19 % à 14 %. Cette diminution est marquée chez les garçons durant cette période (passant de 26 % en 1999 à 18 % en 2003), mais pas chez les filles.

Actes non violents

- ❑ Les garçons sont beaucoup plus susceptibles que les filles de se livrer à des actes non violents (comme le vol, le vandalisme, le trafic de drogues), sauf en ce qui concerne le fait d'être expulsé de leur foyer.
- Entre 1999 et 2003, seul le pourcentage des actes de vandalisme a changé parmi l'échantillon total, passant de 24 % à 15 %.
- Les élèves ont signalé moins d'actes de vandalisme et de vol de moins de 50 \$ en 2003 comparativement au début des années 1990 (parmi les élèves de 7^e, 9^e et 11^e années seulement).
- Le pourcentage d'élèves (de 7^e, 9^e et 11^e années seulement) qui font le trafic de cannabis a considérablement augmenté en 2003 (8 %) par rapport en 1991 (3 %).

Actes violents

- ❑ Environ un élève sur huit (12 %) a agressé quelqu'un au cours de l'année écoulée. Un élève sur 10 (10 %) dit porter une arme, et 6 % des élèves disent prendre part à des luttes de gang. Les garçons sont beaucoup

plus susceptibles de signaler ces trois comportements violents que les filles.

- La tendance à court terme révèle que le pourcentage des élèves qui disent avoir agressé quelqu'un a considérablement diminué entre 1991 et 2001 (passant de 20 % à 13 %) et demeure relativement peu élevé en 2003 (12 %).
- On note également une baisse importante du port d'armes entre 1999 (14 %) et 2003 (10 %).
- Entre 1991 et 2003, la participation à des luttes de gang est demeurée presque inchangée parmi l'échantillon total d'élèves.

Violence et intimidation à l'école

- ❑ Parmi tous les élèves, 18 % disent s'être battus sur le terrain de l'école ou dans les locaux de l'école au moins une fois au cours de l'année écoulée. Les garçons sont plus susceptibles de se battre que les filles (27 % par rapport à 9 %).
- ❑ Parmi tous les élèves, 8 % disent avoir été menacés ou blessés avec une arme au moins une fois sur le terrain de l'école ou dans les locaux de l'école au cours de l'année écoulée. Les garçons sont beaucoup plus susceptibles d'avoir vécu cette expérience que les filles (10 % par rapport à 6 %).
- ❑ Environ le tiers des élèves (33 %) ont été victimes d'intimidation à l'école depuis septembre dernier. En général, ils faisaient l'objet d'intimidation verbale (27 %), suivie d'intimidation physique (4 %) et de vol ou de vandalisme (2 %).
- ❑ Moins du tiers des élèves (30 %) ont dit avoir intimidé d'autres élèves à l'école. Ils le font par des attaques verbales (25 %), par des attaques physiques (4 %), et par le vol ou le vandalisme (1 %).
- ❑ Les garçons sont plus susceptibles d'être impliqués dans des actes d'intimidation que les filles, surtout les garçons plus jeunes.

Jeu

Activités de jeu

- ❑ Environ le quart (24 %) des élèves ont joué aux cartes pour de l'argent au cours de l'année écoulée. Environ un élève sur cinq (22 %) a participé à des loteries et à des paris sportifs (20 %). Les jeux de casino sont l'activité la moins courante (2 %).
- ❑ Environ 2 % des élèves ont déclaré s'adonner au jeu sur Internet.
- ❑ Parmi tous les élèves, 6 % ont participé à au moins cinq des dix activités de jeu sondées. On peut considérer ce groupe comme des gros joueurs.
- ❑ Les garçons sont plus susceptibles que les filles de s'adonner au jeu dans huit des dix activités de jeu sondées. Ils sont aussi plus susceptibles que les filles de s'adonner très souvent au jeu (10 % par rapport à 3 %).

Problèmes de jeu

- ❑ Environ 4 % des élèves présentent des signes de jeu pathologique, plus particulièrement les garçons (6 %) que les filles (1 %).
- Le pourcentage d'élèves qui disent avoir un problème de jeu pathologique a diminué de beaucoup, passant de 6 % en 1999 à 4 % en 2003. On a aussi remarqué une baisse marquée chez les garçons (de 10 % à 6 %).

Problèmes concomitants

- ❑ Dans l'ensemble, la majorité des élèves (52 %) signalent n'avoir aucun des quatre problèmes examinés, soit la détresse psychologique, la consommation dangereuse d'alcool, la toxicomanie et la délinquance. Environ 28 % des élèves disent avoir un de ces problèmes ; 10 % déclarent en avoir deux ; 7 % disent en avoir trois et 3 % affirment avoir les quatre problèmes.

- ❑ Quelques 10 % des élèves disent avoir trois de ces problèmes ou les avoir tous, ce qui représente 100 200 élèves en Ontario.

Facteurs de risque courants

Le rapport se penche également sur des facteurs liés à neuf résultats en matière de risque pour la santé : dépression, détresse psychologique, idées suicidaires, délinquance, jeu pathologique, consommation dangereuse d'alcool, consommation de toute drogue illicite (cannabis inclus), consommation de toute drogue illicite (cannabis exclu) et problèmes concomitants.

Voici, par ordre d'importance, les facteurs associés à ces résultats de risque (en tenant compte d'autres facteurs) :

- ❑ relation parent-enfant (9 résultats sur 9)
- ❑ surveillance parentale (8 sur 9)
- ❑ résultats scolaires (7 sur 9)
- ❑ sexe de l'élève (6 sur 9)
- ❑ année d'études ; statut d'immigrant de la famille ; sentiment d'appartenance à l'école (5 sur 9)
- ❑ structure familiale (3 sur 9)
- ❑ sentiment de sécurité à l'école ; région (2 sur 9)
- ❑ scolarité des parents ; changements d'écoles (0 sur 9)

Principaux indicateurs de santé mentale et de bien-être, élèves de l'Ontario de la 7^e à la 12^e année, 2003

Indicateur	Nombre estimatif d'élèves de l'Ontario	Total %	Garçons %	Filles %	
<i>Santé mauvaise ou acceptable (actuellement)</i>	122 000	12,6	9,9	15,2	*
<i>Inactivité physique (7 jours écoulés)</i>	152 400	16,1	15,6	16,5	
<i>Traitement d'une blessure (année écoulée)</i>	336 900	35,4	38,0	33,0	*
<i>Usage médical de Ritalin (année écoulée)</i>	24 400	2,5	3,5	1,6	*
<i>1 consultation ou plus – santé mentale (année écoulée)</i>	103 400	11,0	8,1	13,7	*
<i>Faible estime de soi (actuellement)</i>	89 600	9,5	7,3	11,4	*
<i>Risque élevé de dépression (7 jours écoulés)</i>	55 200	5,6	2,6	8,4	*
<i>Détresse psychologique (dernières semaines écoulées)</i>	303 300	30,8	22,2	38,7	*
<i>Idées suicidaires (année écoulée)</i>	122 100	12,5	7,9	16,8	*
<i>3 actes de délinquance ou plus (année écoulée)</i>	135 500	14,3	18,4	10,6	*
<i>Port d'armes (année écoulée)</i>	90 200	9,6	14,9	4,9	*
<i>Batailles à l'école (année écoulée)</i>	168 100	17,6	26,8	9,2	*
<i>Menace/blessure avec arme à l'école (année écoulée)</i>	73 200	7,7	10,1	5,5	*
<i>Victime d'intimidation (depuis septembre)</i>	310 300	32,7	35,3	30,3	*
<i>Intimidation (depuis septembre)</i>	282 900	29,7	34,9	25,1	*
<i>5 activités de jeu ou plus (année écoulée)</i>	58 000	6,1	9,6	3,0	*
<i>Jeu pathologique (année écoulée)</i>	33 800	3,5	6,0	1,1	*
<i>3 ou 4 problèmes concomitants</i>	100 200	10,1	10,4	9,8	

Nota : Le nombre estimatif d'élèves est basé sur une population étudiante d'environ 970 000 personnes. * L'astérisque dénote une différence importante selon le sexe ($p < 0,05$), sans tenir compte d'autres facteurs.

Indicateur	7 ^e	8 ^e	9 ^e	10 ^e	11 ^e	12 ^e	
<i>Santé mauvaise ou acceptable (actuellement)</i>	6,8	9,8	11,4	14,8	16,6	14,9	*
<i>Inactivité physique (7 jours écoulés)</i>	18,5	11,5	16,2	16,9	16,2	16,5	
<i>Traitement d'une blessure (année écoulée)</i>	32,5	36,3	38,3	35,1	36,0	33,6	
<i>Usage médical de Ritalin (année écoulée)</i>	3,7	2,4	2,8	2,6	2,6	1,1	
<i>1 consultation ou plus – santé mentale (année écoulée)</i>	10,0	10,3	9,0	11,1	14,4	11,0	*
<i>Faible estime de soi (actuellement)</i>	9,0	7,7	9,9	10,7	9,8	9,1	
<i>Risque élevé de dépression (7 derniers jours)</i>	4,0	8,1	4,2	5,7	7,3	4,6	
<i>Détresse psychologique (dernières semaines écoulées)</i>	20,8	23,6	26,9	34,0	38,6	37,8	*
<i>Idées suicidaires (année écoulée)</i>	9,8	16,7	11,1	12,4	14,8	10,5	
<i>3 actes de délinquance ou plus (année écoulée)</i>	10,9	9,8	13,7	17,4	18,4	13,7	*
<i>Port d'armes (année écoulée)</i>	9,9	6,6	12,2	8,6	11,8	8,0	
<i>Batailles à l'école (année écoulée)</i>	29,7	26,0	19,6	14,5	11,0	8,8	*
<i>Menace/blessure avec arme à l'école (année écoulée)</i>	7,3	9,8	7,6	10,0	6,8	4,6	
<i>Victime d'intimidation (depuis septembre)</i>	47,1	38,7	32,8	32,6	28,7	19,8	*
<i>Intimidation (depuis septembre)</i>	31,7	32,2	32,7	30,5	29,4	22,1	*
<i>5 activités de jeu ou plus (année écoulée)</i>	5,8	4,5	5,9	4,8	7,2	7,9	
<i>Jeu pathologique (année écoulée)</i>	2,4	2,0	3,0	4,2	3,7	5,0	
<i>3 ou 4 problèmes concomitants</i>	3,7	4,6	8,4	12,9	15,5	13,2	*

Nota : Ces chiffres sont des pourcentages. * L'astérisque dénote une différence importante selon l'année d'études ($p < 0,05$), sans tenir compte d'autres facteurs.

Aperçu de tendances choisies sur le plan des indicateurs de santé mentale et de bien-être parmi l'échantillon total des élèves de l'Ontario

Indicateur	Période	Année d'études	Changement
Santé mauvaise ou acceptable (actuellement)	1991-2003	7 ^e , 9 ^e , 11 ^e	Hausse de 6 % à 12 %
Inactivité physique (7 jours écoulés)	1991-2003	7 ^e , 9 ^e , 11 ^e	Stable
1 consultation ou plus – santé mentale (année écoulée)	1999-2003	7 ^e à 12 ^e	Baisse de 70 % à 60 %
Usage médical de Ritalin (année écoulée)	1999-2003	7 ^e à 12 ^e	Baisse de 13 % à 6 %
Usage médical de barbituriques (année écoulée)	1999-2003	7 ^e à 12 ^e	Baisse de 4 % à 2 %
1 consultation ou plus – santé mentale (année écoulée)	1999-2003	7 ^e à 12 ^e	Stable
Faible estime de soi (actuellement)	1995-2003	7 ^e , 9 ^e , 11 ^e	Stable
Risque élevé de dépression (7 jours écoulés)	1997-2003	7 ^e , 9 ^e , 11 ^e	Stable
Détresse psychologique (dernières semaines écoulées)	1999-2003	7 ^e à 12 ^e	Fluctuation : hausse de 26 % en 2001 à 31 % en 2003, mais pourcentage de 2003 similaire à celui de 1999 (30 %)
Idées suicidaires (année écoulée)	2001-2003	7 ^e à 12 ^e	Stable
Jeu pathologique (année écoulée)	1999-2003	7 ^e à 12 ^e	Baisse de 6 % à 3,5 %
3 actes de délinquance ou plus (année écoulée)	1993-2003	7 ^e , 9 ^e , 11 ^e	Sommet en 1997 (21 %), baisse jusqu'à 14 % au cours des dernières années (2001-2003)
Port d'armes (année écoulée)	1993-2003	7 ^e , 9 ^e , 11 ^e	Sommet en 1993 (16 %), baisse progressive jusqu'à 9 % en 2001, demeure relativement peu élevé (11 %)
Agression (année écoulée)	1991-2003	7 ^e , 9 ^e , 11 ^e	Sommet en 1997 (22 %), baisse jusqu'à 12 % au cours des dernières années (2001-2003)
Lutte de gang (année écoulée)	1991-2003	7 ^e , 9 ^e , 11 ^e	Stable
Vandalisme (année écoulée)	1991-2003	7 ^e , 9 ^e , 11 ^e	Sommet en 1999 à 23 %, baisse jusqu'à 15 % au cours des dernières années (2001-2003)
Vol de moins de 50 \$ (année écoulée)	1991-2003	7 ^e , 9 ^e , 11 ^e	Sommet en 1995 (21 %), baisse jusqu'à environ 14 % au cours des dernières années (2001-2003)
Trafic de cannabis (année écoulée)	1991-2003	7 ^e , 9 ^e , 11 ^e	Hausse de 3 % à 8 %

Nota : Les changements indiqués sont fondés sur l'échantillon total des élèves; les changements dans les sous-groupes ne sont pas indiqués.

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Edward M. Adlaf
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Joseph H. Beitchman
David Wolfe

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1.0

INTRODUCTION

The *World Health Organization* defines optimum health as “physical, mental, and social well-being, and not merely the absence of disease and infirmity.”¹ Thus, good health should reflect not only the absence of physical problems, but also the presence of positive personal and interpersonal resources that help foster a better quality of life.

Physical, emotional, and social well-being among youth are important for numerous reasons, not the least of which are the long-lasting effects into adulthood. Childhood and adolescence are pivotal developmental stages during which many life-long health behaviours, beliefs and attitudes become established. Therefore, healthy children will likely become healthy adults.

Physical Health

Generally, youth is a period of optimal physical health. Health problems tend to increase with age, as does physical inactivity. On the positive side, over three-quarters of Canadian children and adolescents report “excellent” or “very good” health. Further, a majority report vigorous activity at least three times per week.^{2,3} However, childhood obesity in Canada has been increasing over the past two decades, with about 10% of children now considered obese.⁴ Between 1990 and 1998, the frequency of physical activity declined among both Canadian boys and girls in grades 6, 8, and 10.⁵ Interestingly, Canadian girls are more likely to report poorer health and inactivity compared to boys,³ yet a larger percentage of boys are overweight or obese.⁶

Mental Health

Significant life transitions occur during adolescence, such as puberty and entering high school, and for most it is a stressful and emotionally turbulent period. These transitions can lead to academic, behavioural and emotional difficulties.⁷ Mental health is critical to all aspects of life, and impairment during the formative years can adversely impact personal and social functioning throughout life. In fact, the onset of most mental illnesses occur during adolescence or young adulthood.⁸

About 20% of children and adolescents show symptoms of a mental disorder during any given year, and that 5% have a serious emotional disturbance with functional impairment.⁹ Similarly, Canadian studies show that the prevalence of a psychiatric problem among children and adolescents ranges between 18% and 22%,^{10,11} and is about 25% for young adults.¹² Among adolescents in Canada and the U.S., suicide is the third leading cause of death after motor vehicle fatalities and other accidents.^{2,9}

Recent Canadian statistics show that:

- About 5% to 7% of adolescents have a depressive disorder, with young females being the most likely of any age-sex group to report symptoms.^{11,13,14} One recent Canadian study found that just under 10% of adolescent girls experience major depressive symptoms.¹⁵
- Low self-esteem is reported by over half of Canadian adolescents, again with females more likely to report this problem.^{14,16}
- Psychological distress – symptoms of anxiety and depression – is reported by about 40% of youth.¹⁴
- One national study found that about 7% of 12- and 13-year-olds had seriously considered suicide.¹⁷ Another found that 6%

of 15 to 24 year-olds Canadians had suicidal thoughts.¹¹

- In general, Canadian youth experience poorer mental health compared to adults.^{11, 14}

The prevalence of mental health problems among children and adolescents may actually be increasing over time. Some examples:

- In the U.S., the identification of mental health problems, such as emotional and conduct disorders, by family physicians increased during a twenty-year period among children aged 4 to 15 years.¹⁸
- Between the 1950s and the 1990s, anxiety among children had increased substantially, likely due to a decrease in social connectedness.¹⁹
- The prevalence of lifetime depression increased throughout the 20th century.²⁰
- In Canada, childhood trauma (e.g. parental divorce, parental substance abuse) has increased over the last few decades, and corresponding increases in mental and physical health problems in adulthood are foreshadowed.²¹
- Between 1970 and 1996 there was a steady and significant increase in the suicide rate among Canadian 15 to 19 year-olds, mainly accounted for by males.¹³

Risky and Problem Behaviours

For a majority of youth, risky behaviour is experimental and a natural manifestation of emerging independence. Behaviours such as drug use, gambling, and criminal activity are typically “adolescent limited” – most likely to emerge during this period and then subside over time.²² However, for a minority, these risky behaviours are the beginning of a life-course trajectory leading to further problems in adulthood.²³ Multiple risk behaviours, such as concurrent alcohol use, drug use, and gambling, are particularly prevalent among young males.²⁴

The magnitude of youth crime and violence can be measured by two sources – confidential self-report data, and official police records. Both methods present problems (e.g., arrest data will reflect more serious offences), yet both are necessary to complete the picture.

A 1999 national survey found that 40% of youth aged 15 to 19 were victims of at least one crime during the previous year, and that youth experience more victimization than older age groups.²⁵ A 1996 Canadian survey found that 35% of 12- and 13-year-olds reported physical fighting in the previous year, 22% reported threatening to assault someone, about 15% reported theft, 12% reported vandalism, and 8% reported carrying a knife.²⁵

Official Canadian criminal statistics show that the overall youth crime rate – as measured by the number of youth charged by the police – dropped over the 1990s, primarily due to a drop in property offences.²⁵ The youth violent crime rate, however, increased between the late-1980s and the mid-1990s and decreased somewhat in recent years, yet the current level is higher than that in the late-1980s.^{2, 25, 26}

Although there are no Canadian national survey trend data, American data from a high school survey show that weapon carrying and assault declined over the last decade.²⁷

Gambling among youth, which is illegal in Ontario, is a growing concern given that a large majority of North American adolescents gamble.²⁸ More worrisome is that the rates of gambling problems tend to be higher among adolescents than adults,²⁹ and that future gambling disorders likely originate during this time period.³⁰ Estimates of pathological gambling among North American youth range from about 3% to 7%,³¹ and rates have been increasing over the last decade.³²

Social Health

Social well-being is a relatively recent addition to the definition of health. It refers to adequate

integration and adjustment in a person's social environment, the extent of social support available, and the quality of one's relationships. Indeed, studying quality of life is increasingly becoming a popular approach in health research.

A strong social support network is important in its own right, and it also appears to be a buffer against physical and mental health problems at all ages. Social support has been correlated with lower reported depression and anxiety.³³ Similarly, a strong bond with one's parents has been associated with better mental and physical health.^{34, 35} The degree school connectedness is another area of increasing study, and may be an important protective factor against poor mental health and health risk behaviours.³⁶⁻³⁸

Risk and Protective Factors

Studies of risk and protective factors in the areas of mental health and risk behaviour among youth have identified several crosscutting predictors at the level of the individual, the family, the peer context, and the broader environment.

In addition to age and sex, **individual**-level factors include genetics, temperament, problem-solving and coping skills, social skills and a sense of self-efficacy. **Family**-related factors include family structure, marital discord, parent-child attachment, frequency and quality of communication, parental monitoring, parental modelling, and abusive or neglectful treatment. In the **peer and school context** such factors as peer behaviour, peer rejection and level of social support, and academic achievement and attitudes toward school have been shown to be influential.

Some **environmental** factors associated with psychosocial problems and risk behaviours include poverty, legal policies affecting availability and access (e.g., in the cases of substance use, gambling), the media and wider cultural norms (e.g., in the cases of substance use, eating disorders). Of course, experiencing a

stressful or traumatic event during childhood, such as the death of a parent or a natural disaster, can also lead to subsequent emotional and behavioural problems. (For overviews of risk and protective factors see the following citations³⁹⁻⁴²

Why Monitor the Mental Health and Well-Being of Students?

Health Canada defines the "Population Health Approach" as follows:

*Population health refers to the health of a population as measured by health status indicators and as influenced by social, economic and physical environments, personal health practices, individual capacity and coping skills, human biology, early childhood development, and health services.*²⁴

This broad approach to health is evidenced-based, and as such, requires the surveillance of health indicators and determinants. The resulting body of knowledge is applied to develop and implement policies and programs to improve the well-being of the population.

Surveys are one source of information on health indicators and determinants among the general population. Important reasons for survey monitoring include:

- ❑ to assess changes in health status.
- ❑ to assess changes among the determinants of health (e.g., family structure).
- ❑ Because surveys have a scientific basis and a known representativeness, they can provide data that can confirm or challenge anecdotal and media reports.
- ❑ Surveys also provide a basis for program and policy evaluation of goals established by governmental and non-governmental agencies, such as Health Canada's Goals for

Healthy Child and Youth Development,⁴³ and Healthy People 2010 objectives.⁴⁴

- ❑ Other specific initiatives such as active lifestyle government programs and media campaigns or changes in the youth criminal justice system can be assessed using scientific survey trend data.
- ❑ Ultimately, we are hopeful that the information provided in this report and subsequent reports will enrich our ability to enhance the well-being of children and adolescents.

What Do Student Health Surveys Tell Us?

Student health surveys provide important information that serves as a basis for understanding:

- ❑ the size of the adolescent student population (both the percentage and absolute number) currently experiencing physical and mental health problems.
- ❑ the changes in physical and mental health indicators over time.
- ❑ the factors that correlate with these problems.
- ❑ the identification of groups at high risk.

It is also important to note that repeated cross-sectional surveys (repeated surveys interviewing different students each time) such as the *OSDUS* can assess only specific types of change. Because the same students are not surveyed over time, repeated cross-sectional surveys cannot evaluate developmental patterns or individual change (e.g., how self esteem changes with increasing age), nor can they fully resolve issues of causal order (e.g., whether poor grades cause low self esteem or vice versa). However, repeated cross-sectional surveys are especially efficient at *identifying and measuring* aggregate

period trends (e.g., changes in the percentage of the population reporting low self-esteem). Indeed, in comparison to longitudinal follow-up designs, the advantages of repeated cross-sectional designs are, firstly, that each survey takes into account populations changes; and secondly, that estimates combine effects of changing beliefs and behaviours and changing populations, and therefore provide an efficient estimate of net (i.e., population) change.

What Student Health Surveys Do Not Tell Us?

Because school-based surveys are based on adolescents only, their data cannot fully measure the totality of health problems among youth. Student surveys cannot address the following:

- ❑ the extent of problems among non-students, such as youth who are homeless, incarcerated, in group homes, or have left school.
- ❑ the definite causes of any problem or of the changes in the problem over time.

History of the Ontario Student Drug Use Survey

The *Ontario Student Drug Use Survey (OSDUS)* is the longest ongoing school survey in Canada. In 1967, several school boards in Metropolitan Toronto approached the Addiction Research Foundation (now CAMH) for assistance in determining the extent of drug use among Toronto students. Under the direction of Dr. Reginald Smart, four surveys from 1968 to 1974 monitored the extent of alcohol, tobacco and other drug use among Toronto students in grades 7, 9, 11 and 13 (Ontario Academic Credit; OAC).

In 1977, the study was expanded to include students throughout the province of Ontario. This change allowed for province-wide estimates and for comparisons among broad geographical regions. Moreover, the ongoing nature of the study serves as a vehicle for professionals to address contemporary public-health matters related to substance use and other health issues. Since 1977, the study has surveyed over 4,000 students every two years.

During the 1990s, the content of the *OSDUS* was expanded to include an array of health measures, in addition to substance use. Expanded areas include mental and emotional well-being, social health, and physical health.

The *OSDUS* Mental Health and Well-Being Report

In this report we describe the current extent and patterns of physical and mental health indicators among Ontario students enrolled in grades 7 to 12 using data from the 2003 *Ontario Student Drug Use Survey (OSDUS)*. The mental health indicators are divided into internalizing and externalizing indicators. By internalizing indicators we mean emotional health problems such as depression and self-esteem. By externalizing indicators we mean overt behaviours such as aggression and drug use. Also examined are potential determinants of these problems, such as the family and school experiences. Further, the findings incorporate trend data spanning back to 1991 where possible.

It is important to note that the mental health indicators in the *OSDUS* generally assess moderate functional impairment, rather than psychiatric disorders based on clinical criteria. Restricting attention to those experiencing current psychiatric disorders would underestimate the extent of mental health problems, since a sizeable percentage experience impaired functioning without meeting the clinical criteria for a diagnosis. Moreover,

restricting attention to psychiatric disorders would overlook the fact that mental well-being exists as a continuum, spanning optimum mental health to mental illness to severe disorders. Finally, screening and monitoring broad mental health indicators provides more useful information to service planners and providers.

Readers should note that there is a separate published report based on the 2003 *OSDUS* detailing the extent of licit and illicit drug use among Ontario students, which also incorporates survey data over 20 years. This report entitled “*Drug Use Among Ontario Students, 1977-2003: Detailed OSDUS Findings*” is available in PDF format at:

http://www.camh.net/research/population_life_course.html

Note to Readers of Prior *OSDUS* Reports

Unlike prior OSDUS surveys, OAC (Grade 13) students were not surveyed in 2003. Thus, to ensure valid comparisons across years, we have made important changes to the 2003 OSDUS report:

- ***All percentages based on samples before 2003 have been recalculated to exclude OAC students.***

This means that percentages found in earlier OSDUS reports cannot be compared to percentages in the 2003 report (the exception to this rule is for percentages based on individual grade levels).

2.0 METHOD

Sampling Design

For each of the 13 surveys, the target population was composed of all students enrolled in the public or Catholic regular school systems. Thus it excludes those enrolled in private schools, special education classes, those institutionalized for correctional or health reasons, those on Indian reserves and Canadian Forces bases, and those in the far northern regions of Ontario (a total of about 7% of Ontario students).

As seen in Table 2.1, each survey was based on a random probability design. The 1977 and 1979 surveys were based on a stratified (region by grade) multistage design. The proportional

allocation of students by grade and region allowed for self-weighted estimates. To incorporate improvements which would provide estimates with greater precision and efficiency, in 1981 the sample design was modified to a stratified single-stage cluster design, which resulted in the selection of more school boards and schools. Since 1981 this survey has been administered by the Institute for Social Research (ISR), York University.

Table 2.1 Twenty-Five Years of the OSDUS

	1977	1979	1981	1983	1985	1987	1989	1991	1993	1995	1997	1999	2001	2003
No. Boards	20	20	31	31	20	24	25	27	25	20	22	38	41	37
No. Schools	104	87	182	227	193	170	171	179	165	137	168	111	106	126
No. Classes	196	195	198	261	205	215	224	221	233	223	234	285	272	383
No. Students	4686	4794	3270	4737	4154	4267	3915	3945	3571	3870	3990	4894	4211	6616
Design Features	Multi-stage selection (board; school; class), stratified by grade and region. Self-weighted estimates. Grades 7, 9, 11 and 13.		Single-stage selection (board clusters), stratified by grade and region. Weighted estimates. Grades 7, 9, 11 and 13 (OAC).									Two-stage selection (school; class), stratified by region and school type (and grade for middle schools). North oversampled. Weighted estimates.		
												Grades 7 to 13 (OAC).		
												Selected schools based on 2001 participating sample. Grades 7 to 12 (OAC dropped).		

Beginning in 1999, a two-stage (school, class), stratified (region and school type) cluster design sample was utilized. Further, rather than surveying students in grades 7, 9, 11 and 13 (OAC) only, the revised design surveyed students in grades 7 through OAC, inclusive. This change provided greater age variation, and thus more developmentally based detail on the relationship between drug use and age. It also allowed for more direct grade comparisons to American and other international studies.

Rather than the selection of school board clusters, the 1999 and 2001 *OSDUS* design was a probability sample of schools, regardless of the school board designation. Consequently, more students per school were sampled. The advantages include a greater geographical dispersion of schools and school boards, and better school-level estimates.

In *OSDUS* designs prior to 1999, the allocation of students from Northern Ontario was proportional to population. Thus, the sample for this region was smaller than other regions. The revised design, beginning in 1999, oversampled Northern students to provide better regional estimates.

The 2003 *OSDUS* *

Like the 1999 and 2001 cycles, the 2003 *OSDUS* employed a two-stage (school, class), stratified (region and school type) cluster sample design, and oversampled students in Northern Ontario.

However, the 2003 *OSDUS* differs from previous surveys in several ways:

1. Students in Grades 7 through 12 were surveyed. Grade 13 (OAC) students were excluded from the 2003 sample, given that this grade will no longer exist in Ontario schools after the 2002/2003 school year.

2. Four classes were selected in each secondary school, representing each grade between 9 and 12. This differs from past surveys in which only three classes were selected in secondary schools, regardless of grade.

3. The sample of schools was based on a longitudinal sample commencing in 2001. The 2003 sample design incorporated a longitudinal sample of schools drawn from the 2001 sample. Forty-three percent (n=54) of the schools in the 2003 survey also participated in 2001. This feature of overlapping schools provides more efficient estimates of change over time.⁴⁵

The sample selection occurred as follows:

a) For the 2001 sample, schools were drawn from the Ministry of Education's 1996/1997 enrolment data, and were stratified according to the four regions used in previous surveys.

b) Within each of the four regional strata, a random selection of schools was chosen with probability proportional to size (thus, larger schools would have a greater probability of being selected). In 2003, these same schools were re-contacted. New replacement schools were selected to replace those that could not participate again. The sampling frame for these new schools was based on the Ontario Ministry of Education and Training's 2000/2001 enrolment data.

c) Within each school, classes were randomly selected. In elementary/middle schools, two classes were randomly selected – one 7th-grade and one 8th-grade. In secondary schools, four classes were randomly selected, one in each grade between 9 and 12.

For all surveys, Ontario was divided into four regions based on the following boundaries: **Toronto**, schools within the former Metropolitan Toronto; **Northern Ontario**, schools within the Parry Sound area and farther north; **Eastern Ontario**, schools within York Region district and farther east; and **Western Ontario**, schools west of and including the Peel Region area.

* In addition to the authors, the 2003 *OSDUS* sample design team, headed by Michael Ornstein, also included John Pollard and David Northrup, all of the *Institute for Social Research*, York University.

Some analyses throughout this report refer to the seven public health planning regions of Ontario. For a breakdown of these seven regions, see page 12.

Procedures

The *OSDUS* protocol was approved by the joint Research Ethics Board of the CAMH and the University of Toronto, and several school board research committees.

For each school board associated with a randomly selected school, permission to survey students was first requested from the Director of Education. Depending upon the policies of each board, agreement to participate was conditional upon approval from research review committees, as well as school principals, classroom teachers, and parents. If a school board decided not to allow their schools to participate, replacement schools from the same stratum were randomly selected and the relative boards were contacted for permission. If an individual class or student did not participate, no substitution took place. Instead, the data were statistically weighted to correct for loss of precision.

All schools were provided with parental consent forms. Consent forms were distributed to students, who, in turn, sought the signature of at least one parent/guardian if they were under age 18. Those without signed consent forms on the day of the survey (16%) were not allowed to participate.

Students responded to the anonymous, self-administered questionnaires in class groups within a 30 to 40 minute session, between January 15th and June 20th 2003. Participation was voluntary and anonymous. ISR field staff provided a short introduction of the study to students prior to its administration. All students recorded their responses directly on the questionnaires, which were then entered and fully-verified by ISR data-entry staff.

The Questionnaire

In addition to alcohol and other drug use, the *OSDUS* covers an array of health-related issues. To cover as many content areas as possible in a fixed time period, we employed two questionnaires, Form A and Form B. In each classroom, half the students were randomly assigned either Form A or Form B. Both forms contained 178 items, with about three-quarters of the content overlapping. On average, the questionnaire took about 30 minutes to complete. An evaluation of the readability of the 2003 questionnaire showed a Grade 7 level according to the Flesch-Kincaid score.

Data Quality

2003 Sample Participation and Characteristics

Initially, 144 schools (48 elementary and 96 secondary) were selected. In total, 126 schools (52 elementary and 74 secondary), represented by 37 school boards, participated in the 2003 survey. Of the 126 participating schools, 54 were also in the 2001 sample, and the other 72 had been randomly selected to replace refusing schools or school boards. Of the 480 classes selected, 383 participated. It is important to note that 35 of the 383 classes were not randomly selected. Rather, these classes were “convenient” same-grade replacements for classes that were originally selected but could not participate for logistic reasons.

Finally, of the 9,411 students enrolled in these classes, 6,730 participated in the survey. The student completion rate was 72% (12% were lost due to absenteeism and 16% were lost due to lack of a parental consent form); the overall response rate was 51% (School rate, $0.88 \times$ Class rate, $0.80 \times$ Student rate, 0.72).

In addition, exclusion criteria were established to enhance data quality. Students were excluded from the final analysis sample if they (1) did not

provide a valid age or sex; (2) reported the use of a fictitious drug; (3) reported using 11 or more of 13 illicit drugs 40 or more times during the past year; or (4) had missing values for all the core drug questions. If a case met one of these criteria, then it was dropped. In 2003, 114 cases were dropped from the data set. This resulted in 6,616 minimally complete cases used for the data analyses, as shown in Table 2.2. Form A was completed by 3,464 students, and Form B was completed by 3,152 students.

the 2001/2002 (most recently available) Ministry of Education enrolment data. Differences do not exceed 1.7% and the average difference is less than 1 percentage point.

Both the single item nonresponse rate and overall, item nonresponse rate were low. Item nonresponse averaged less than 1% overall, and over 96% responded to all 16 core drug questions.

Table 2.3 shows that there is a good correspondence between the 2003 OSDUS weighted sex-by-grade distribution compared to

Table 2.2 Sample Characteristics, 2003 OSDUS

Sample	Number Surveyed	Weighted %	Population
Total	6 616		970 000
Male	3 163	48.3	468 510
Female	3 453	51.7	501 490
Grade 7	947	14.9	144 530
Grade 8	976	14.3	138 710
Grade 9	1 254	18.4	178 480
Grade 10	1 181	18.0	174 600
Grade 11	1 188	18.3	177 510
Grade 12	1 070	16.1	156 170
Toronto	1 097	18.3	177 510
North	1 285	7.9	76 630
West	2 513	44.4	430 680
East	1 721	29.4	285 180

Table 2.3 The 2003 OSDUS Sample vs. Ontario 2001/02 School Enrolment Figures

	OSDUS		ENROLLED	
	<i>Males</i>	<i>Females</i>	<i>Males</i>	<i>Females</i>
Grade 7	6.9	8.0	8.2	7.8
Grade 8	6.6	7.6	8.0	7.7
Grade 9	9.4	8.9	9.0	8.3
Grade 10	8.2	9.8	8.6	8.1
Grade 11	8.9	9.4	8.3	7.9
Grade 12	8.2	8.0	9.6	8.2

Notes: (1) OSDUS cell entries are total sample percentages and are based on weighted data; (2) enrolment cell entries are total enrolment percentages and are based on students enrolled in Ontario public and Catholic schools in 2001/2002.

Data Weighting

For several reasons, including the oversampling of Northern Ontario students, the sample design requires weights to ensure the proper representation of students to the Ontario student population. For each student, the weight is based on the product of three factors: (1) the probability of a school being selected; (2) the probability of a class being selected and (3) a student non-response correction factor. Our sample of 6,616 students represents about 970,000 Ontario students in grades 7 through grade 12.

Survey Estimates

Before turning to the survey results, it is important to first briefly discuss the meaning, interpretations and limitations of survey results as they pertain to our data. The main goal of sample surveys is to estimate the “true” value of a particular characteristic in the population – in our case, the percentage of Ontario students who report using a given drug. Because we do not survey all students in the province, this “true” population percentage is unknown and must be estimated from a sample. Consequently, every estimate from a sample has associated with it some degree of sampling error. The accuracy of a percentage, i.e., the difference between the obtained sample percentage and the “true” population percentage is determined by the degree of precision and bias.

Precision refers to the “probable accuracy” of a percentage; those summarized in the present report include a range, or confidence interval, around percentage values, which indicate the interval within which the true population percentage probably lies. The reason for employing confidence intervals arises from the uncertainty, or sampling error, associated with using the results obtained from a single sample to draw conclusions about the entire population from which the sample was drawn. If we had surveyed another sample, using identical procedures, the results would probably have

differed slightly from those we obtained from our present sample.

The confidence interval around a percentage indicates the range of variation in percentage values that would have been obtained from most (in our case, 95 out of 100) of the other equivalent samples that we might have studied. The confidence interval (in our case, a 95% confidence interval) can also be interpreted as being 95% likely to include the percentage value we would have obtained if we had studied every member of the target population. In reporting that the percentage of students who had contemplated suicide at least once in the past year was 12.5% (11.1%-14.2%) (see Figure 3.5.6), we mean that there is a 95% chance that the actual or true percentage of students in the population of Ontario students who contemplated suicide lies between 11.1% and 14.2%. Smaller confidence intervals imply greater precision, or less sampling error.

In our case, the size of the interval depends on three factors: the number of students interviewed – other things being equal, the larger the sample size the smaller or more precise is the interval; second, the size of the percentage – other things being equal, percentages around 50% have the largest interval while percentages approaching 0% and 100% have the smallest interval; and third, design effects – in our design, other things being equal, the greater the similarity (or correlation) of responses within schools and classrooms the wider is the interval. Changes in any of these three factors affect the size of the confidence interval. Also, because of this last factor the confidence intervals can vary, even though both the size of sample and percentage remain constant.

Bias, in contrast to precision, refers to sources of error that may inflate or deflate estimates from the true percentage. Such sources include under-reporting of drug use, memory effects, and other sources of systematic error. Thus, a percentage may have a high degree of precision (a small confidence interval) but may still be biased (not covering the true value).

The research evidence suggests that self-reported drug use estimates and other illegal behaviours are generally under-reported and, thus, should be viewed as conservative.

However, assuming that this bias remains more or less constant across years, estimates of change or trends remain unbiased. The degree of survey error we present in this report is restricted to precision and not bias.

The margin of error, or confidence intervals, we present in this report include only sampling error. Confidence intervals do not include errors due to nonsampling factors such as the under-reporting of drug use or errors of memory or recall.

2003 Analysis

All 2003 confidence intervals are corrected for characteristics of the sampling design (i.e., stratification, clustering and weighting) using Stata 7.0 Taylor series survey routines.⁴⁶ The analysis is based on a design with 8 strata (4 regions * 2 school types), 126 primary sampling units (schools) and 6,616 students.

All confidence intervals since 1991 were also corrected for the respective survey design effects.

Trend Analysis

Although we highlight dominant long-term trends, we pay particular attention to changes between the last two surveys – 2001 and 2003. To statistically test for differences between the 2001 and 2003 percentages, we calculated 95% confidence intervals around the difference and assessed whether the confidence interval spanned the value zero – i.e., no significant difference.⁴⁷

It is important to note that the tests comparing 2001 and 2003 estimates are based on grades 7 to 12. Short-term trend tests (1999-2003) are

also based on grades 7 to 12, but the long-term trend tests (1991-2003) are based on only grades 7, 9, and 11.

Because only a sample of all students in Ontario is surveyed, sampling error is involved in every drug use estimate. Consequently, absolute differences between two percentages cannot necessarily be interpreted as indicating true or real differences in the population.

For example, in 2001, 16.3% (11.1%-23.3%) of Toronto students reported no physical activity during the past 7 days. In 2003, this percentage increased to 21.3% (17.5%-25.6%), representing an increase of 5.0 percentage points. However, because these two 95 % confidence intervals overlap, we cannot be certain that they are different in the population. For this reason, we restrict the word “significant” (e.g., a significant decline or difference) to indicate a statistically discernible difference, one that is less than 5% likely to occur by chance (i.e., $p < .05$).

Readers should also note the following regarding our analysis:

- Statistically significant differences must be carefully evaluated. First, our analysis does not consider the large number of statistical tests performed. For example, for every 20 statistical tests, 1 significant difference could occur by chance.
- Second, outcomes that are statistically significant tell us only that the difference is probably not due to chance. Whether a difference is of a practical importance to public health policy is a matter that requires both statistical and non-statistical evaluation.
- Our report is descriptive. Associations found in these data should not necessarily imply causal relationships. For example, regarding regional differences, we can only determine if a difference in depressive symptoms exists and describe the difference. Because many other factors may cause regional differences (e.g., socio-economic status), we cannot

attribute such differences solely to the geographical location of students.

- We have suppressed estimates for unreliability if they meet any of the following conditions:
 - the base sample size was less than 30 students;
 - or, the estimate was less than 0.5%.

East

- Ottawa-Carleton
- Renfrew, Prescott & Russell, Stormont, Dundas & Glengarry
- Lanark/Leeds/Grenville, Hastings, Prince Edward, Frontenac, Lennox, Addington

North

- Algoma, Cochrane
- Manitoulin, Sudbury (R.M.), Sudbury (T.D.)
- Muskoka, Parry Sound, Nipissing, Timiskaming
- Thunder Bay, Kenora, Rainy River

Public Health Planning Regions

The Ontario Ministry of Health's seven public health planning regions⁴⁸ are reported on throughout this report, and an overview is provided in Chapter 3.8. The seven regions are delineated as such:

Toronto

Southwest

- Essex
- Kent, Lambton
- Elgin, Oxford, Middlesex
- Bruce, Grey, Perth, Huron

Central South

- Niagara
- Hamilton-Wentworth
- Brant, Haldimand-Norfolk

Central West

- Halton
- Peel
- Wellington, Dufferin
- Waterloo

Central East

- Northumberland, Victoria, Haliburton, Peterborough
- Durham
- York
- Simcoe

The following table outlines the topics covered in this report:

Table 2.4 Outline of Topics Presented in the Report, by Survey Year

	1991	1993	1995	1997	1999	2001	2003
3.1. Family & School Life							
Family Living Arrangement	✓	✓	✓	✓	✓	✓	✓
Family Mobility	•	•	✓	✓	✓	✓	✓
School Mobility	•	•	•	•	•	✓	✓
School Performance & Attitudes	✓	✓	✓	✓	✓	✓ ^B	✓ ^B
School Climate	•	•	•	•	✓	✓	✓
3.2. Social Health							
Parental Support	✓ ^B	✓ ^B	✓ ^B	✓ ^B	✓ ^B	✓ ^B	✓ ^B
Friends & Social Support	•	•	✓	✓	✓	✓	✓
3.3. Physical Health							
Self-Rated Health	✓	✓	✓	✓	✓	✓	✓
Missed School Days Due to Health	•	•	•	•	•	✓	✓
Physical Inactivity	•	•	•	✓ ^A	✓ ^A	✓ ^A	✓
Nutrition	•	•	•	•	•	✓ ^B	✓ ^B
3.4 Health Care Utilization							
Doctor/Health Care Visits	•	•	•	•	✓	✓	✓
Injury Treated by Doctor/Nurse	•	•	•	•	•	•	✓ ^A
Medical Drug Use	✓	✓	✓	✓	✓	✓	✓ ^B
Prescription for Depression/Anxiety	•	•	•	•	•	✓ ^A	✓ ^A
3.5 Internalizing Indicators							
Low Self-Esteem	•	✓	✓	✓	✓	✓	✓
Depression	✓ ^A	✓ ^A	✓ ^A	✓ ^A	✓ ^A	✓ ^A	✓ ^A
Elevated Psychological Distress	•	•	•	•	✓ ^A	✓ ^A	✓ ^A
Suicide Ideation	•	•	•	•	•	✓ ^A	✓ ^A
Body Image	•	•	•	✓ ^A	•	✓ ^B	✓ ^B
3.6 Externalizing Indicators							
Non-Violent Delinquent Acts	✓	✓	✓	✓ ^B	✓ ^B	✓ ^A	✓ ^A
Violent/Aggressive Acts	✓	✓	✓	✓ ^B	✓ ^B	✓ ^A	✓ ^A
Violence on School Property	•	•	•	•	•	✓ ^A	✓ ^A
Bullying Behaviour	•	•	•	•	•	•	✓ ^A
Gambling Activities	•	•	•	•	•	✓ ^A	✓ ^A
Gambling Problems	•	•	•	•	✓ ^B	✓ ^A	✓ ^A
3.7 Co-existing Problems							
Configurations of Risk							✓ ^A
3.8 Overview of Public Health Planning Regions							
3.9 Multiple Outcomes, Multiple Influences							
Multivariate Analyses							

• not available; ^A Form A random half sample; ^B Form B random half sample

3.0 RESULTS

3.1

Family and School

3.1.1 Family Living Arrangement

(Tables 3.1.1, A3.1.1)

Family structure is an important factor in child and youth development. Indeed, family structural factors, such as an “intact” family – defined by the presence of two parents (including a step-parent) – can increase or decrease the economic, emotional and cognitive resources available to children, thereby affecting their well-being.⁴⁹⁻⁵²

Between 1993 and 1995, family living arrangement was measured by the question “Do you currently live with both parents?”. In 1997, this was revised to “With whom are you currently living?” The response options available were: both natural parents, natural father only, natural mother only, one natural and one stepparent, or neither natural parent.

2003 (Grades 7 to 12):

- Overall, 81.8% of students live in an intact family – defined as living with two parents/guardians. Breaking it down, almost three-quarters (72.6%) of students live with both natural parents, one-in-six (15.8%) live with a single parent (more often the mother), 9.2% live in a step-family, and 2.4% do not live with either natural parent.

1993 - 2003 (Grades 7, 9, 11 only):

- Overall, no change in reported living arrangement is evident between 1993 and 2003.

Table 3.1.1 Percentage Living in an Intact Family,* 1993 - 2003

	Grades 7, 9, 11 only						Grades 7 to 12		
	1993 (N=)	1995	1997	1999	2001	2003	1999	2001	2003
	(2,617)	(2,907)	(3,072)	(2,421)	(2,013)	(3,389)	(4,447)	(3,898)	(6,616)
Family Intact	81.9	83.8	83.2	82.1	81.8	82.6	81.5	81.9	81.8
(95% CI)	(79.6-83.9)	(81.6-85.9)	(81.4-84.9)	(79.5-84.5)	(78.8-84.4)	(80.5-84.4)	(79.5-83.4)	(80.0-83.7)	(80.0-83.4)
Not Intact	18.1	16.2	16.8	17.9	18.2	17.4	18.5	18.1	18.2
(95% CI)	(16.1-20.3)	(14.1-18.4)	(15.1-18.6)	(15.5-20.5)	(15.6-21.2)	(15.6-19.5)	(16.6-20.5)	(16.3-20.0)	(16.6-20.0)

Note: * “Intact” family is defined as living with two parents, including a step-parent; no significant differences found over time.

Source: OSDUS, Centre for Addiction and Mental Health

3.1.2 Family and School Mobility

(Table A3.1.1)

The number of family moves is also an important factor in healthy child development. Frequent moves can negatively affect a child's well-being by disrupting social ties, necessitating school changes, and generally requiring an adjustment to new environments.^{50, 53, 54}

The number of family moves was first measured in 1995 using the question "*How many times have you moved to a different home in the last 5 years?*" (response options: never, once, 2 or 3 times, 4 or 5 times, 6 to 9 times, 10 or more times). Starting in 2001, the survey included a question about the number of school changes in the last 5 years, excluding the change from elementary school to high school (response options: never, once, twice, 3 times, 4 times or more).

2003 (Grades 7 to 12):

- ❑ A majority of students (52.7%) have not moved to a different home in the last 5 years. One-quarter (25.7%) of students moved once; 16.3% moved 2 or 3 times; and 5.6% moved 4 or more times.
- ❑ About two-thirds of students (62.2%) have not changed schools in the past 5 years; 22.8% changed schools once; 12.4% changed 2 to 3 times; and 2.6% changed school at least 4 times.

3.1.3 School Performance and Attitudes (Table A3.1.2)

School is one of the major socializing agents in adolescent development. In addition to academic learning, school fosters social skills and a personal sense of competence.

From 1991 to 2003, the *OSDUS* included several questions about students' school experiences including: school marks and performance, expecting to graduate, time spent on homework, and how much students like school.

2003 (Grades 7 to 12):

- ❑ Over one-third (36.2%) of students report an 'A' in their subjects; 45.7% report a 'B'; 13.6% report a 'C' average; 4.1% report a 'D' average; and less than 0.5% report usually receiving marks below 'D'.
- ❑ Just over half (53.5%) report above or slightly above average academic performance relative to other students; one-third (33.3%) report average performance; and 13.2% report performing either slightly below or below average.
- ❑ A vast majority (86.3%) of students expect to graduate high school; 11.6% are fairly likely to graduate, while 2.1% report they are unlikely to graduate.
- ❑ Almost one-in-five students (19.3%) spend less than one hour on homework per week, outside of school. Just over one-quarter (27.0%) spend between one and two hours on homework weekly.
- ❑ Just over one-in-five students (21.8%) indicate that they do not like school very much or at all.

3.1.4 School Climate

(Table A3.1.3; Figure 3.1.1)

School climate is a complex construct, usually referring to the physical, organizational, and cultural elements of a school.⁵⁵ Examples of school climate characteristics include school size, policies and enforcement, teaching quality, level of student misconduct, and level of attachment to school. School climate can influence not only academic performance, but also skill development, social behaviour, and emotional health.^{36, 56}

Starting in 1999, the *OSDUS* asked students to indicate their level of agreement (ranging from strongly agree to strongly disagree) with the following statements:

- *I feel close to people at this school.*
- *I feel like I am part of this school.*
- *I feel safe in my school.*
- *Most teachers in my school are excellent.*
- *Most courses offered in my school are challenging.*

In addition, students were asked “At school, how worried are you that someone will harm you, threaten you, or take something from you?” (response options: very worried, somewhat worried, not very worried, not worried at all).

2003 (Grades 7 to 12):

School Attachment

- A majority of students feel close to people at their school (86.9%), and feel like they are part of their school (82.7%).

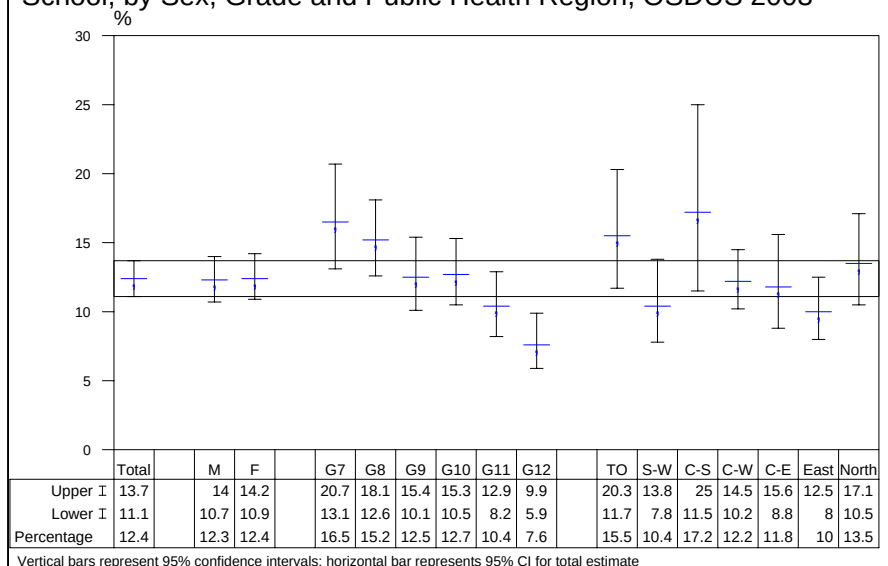
School Academic Rating

- Overall, 75.4% of students rate their teachers as excellent, and 78.1% feel that the courses offered are challenging.

School Safety

- An overwhelming majority (90.9%) of students feel safe in their school. However, 12.4% are worried about being harmed or threatened at school. Males (12.3%) and females (12.4%) are equally likely to be worried about their personal safety at school. Students in the younger grades are more likely to be worried than the older grades (e.g., 16.5% of 7th-graders vs 7.6% of 12th-graders). Among the seven public health regions, students in Toronto and Central-South are the most likely to be worried about their safety at school.

Figure 3.1.1
Percentage Reporting Worry over Being Harmed or Threatened at School, by Sex, Grade and Public Health Region, OSDUS 2003



3.2

Social Health

Our use of the term “social health” refers to aspects of well-being that are related to how people get along and interact with others. One dominant aspect of social health is social support – whether adolescents have significant others on whom they can rely for emotional support.

3.2.1 Parental Support

(Table A3.2.1; Figures 3.2.1 to 3.2.3)

Parents are the most important people in children’s lives, but as children become adolescents, peers will increasingly play an influential role. Nevertheless, the relationship quality between young people and their parents remains a significant factor in healthy psychosocial development.

We use three questions to assess the quality of relationships between adolescents and their parents. Students were asked how well they are getting along with their parents, how frequently they discuss problems with their mother, as well as their father. The first question was included in the surveys from 1993 to 2003, while the latter two were in from 1995 to 2003.

2003 (Grades 7 to 12):

- Just over half (57.0%) of students report getting along very well with their parents, 38.0% get along “OK”, while 5.0% do not get along with their parents. There is a significant sex difference in the quality of the parental relationship, with males (60.8%) more likely to report getting along very well with their parents, compared to females (53.4%). There is a significant grade effect, with 7th-graders most likely to report getting along very well with parents, and those in 10th- and 11th-grades least likely (67% vs about 50%, respectively). There is no significant variation by public health region.

- One-third (32.1%) of students seldom or never discuss problems with their mother. This varies significantly by sex, with more males than females seldom or never discussing problems with their mothers (39.7% vs 25.2%). The percentage reporting infrequent maternal communication increases with grade. No differences among the public health regions are evident.
- More students report seldom or never discussing problems with their father, compared to their mother. Over half (53.0%) indicate that they seldom or never discuss problems with their fathers. This is more likely to be the case among females than males (55.0% vs 50.8%, respectively). The percentage reporting infrequent communication with their father increases with grade. No significant regional variation exists.

3.2.2 Friends and Social Support

(Figure 3.2.4)

Support from family and friends is associated with positive mental and physical health regardless of one’s age. During adolescence, social contact with peers and making friends becomes a fundamental component of well-being.

From 1995 to 2003, students were asked how many close friends they had, as well as the

number of people in their lives that they could talk to about their problems (i.e., confidants).

confidant, while 4.6% have no one to talk to about their problems.

2003 (Grades 7 to 12):

- ❑ 2.5% of students report that they have only one friend, while 0.8% have no friends.
- ❑ 7.0% report that they have only one

- ❑ Compared to females, males are significantly more likely to report having no one to whom they can confide their problems (2.2% vs 7.2%, respectively).
- ❑ There are no significant differences by grade or public health region.

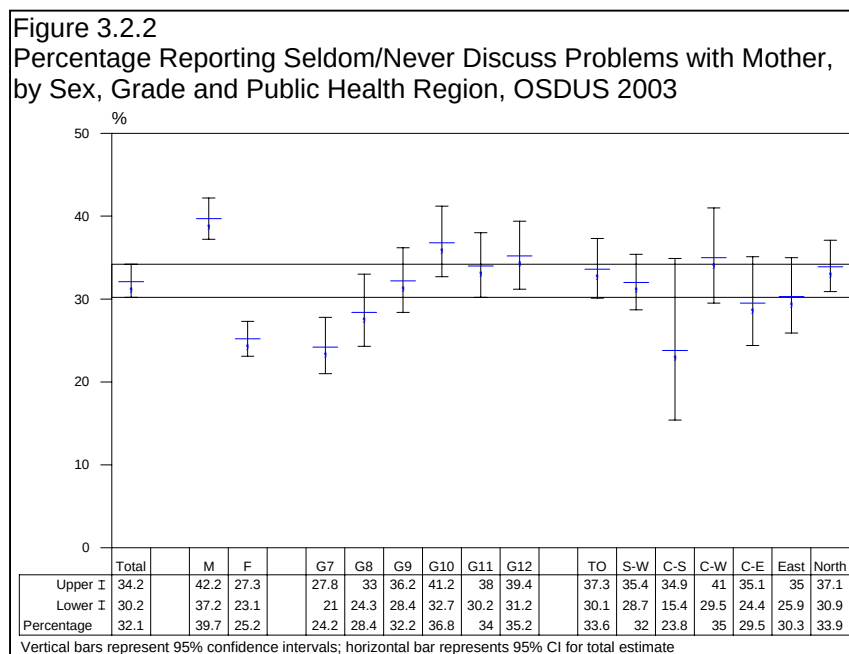
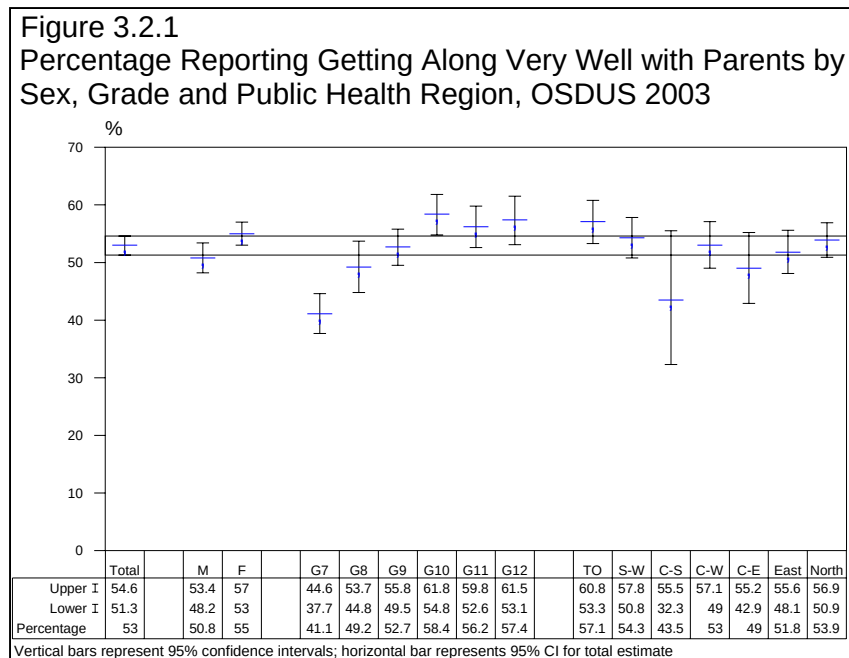


Figure 3.2.3
Percentage Reporting Seldom/Never Discuss Problems with Father,
by Sex, Grade and Public Health Region, OSDUS 2003

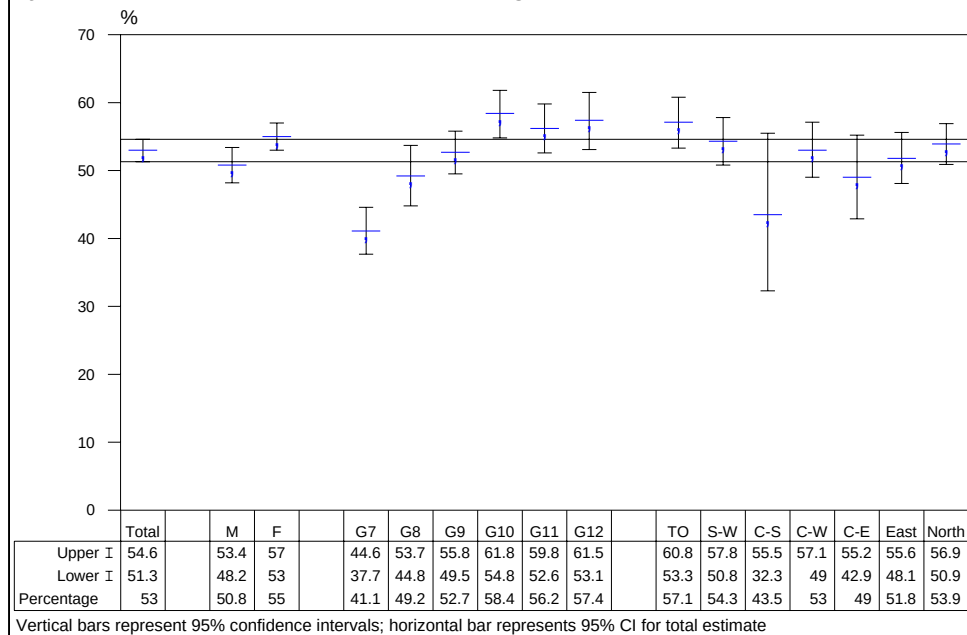
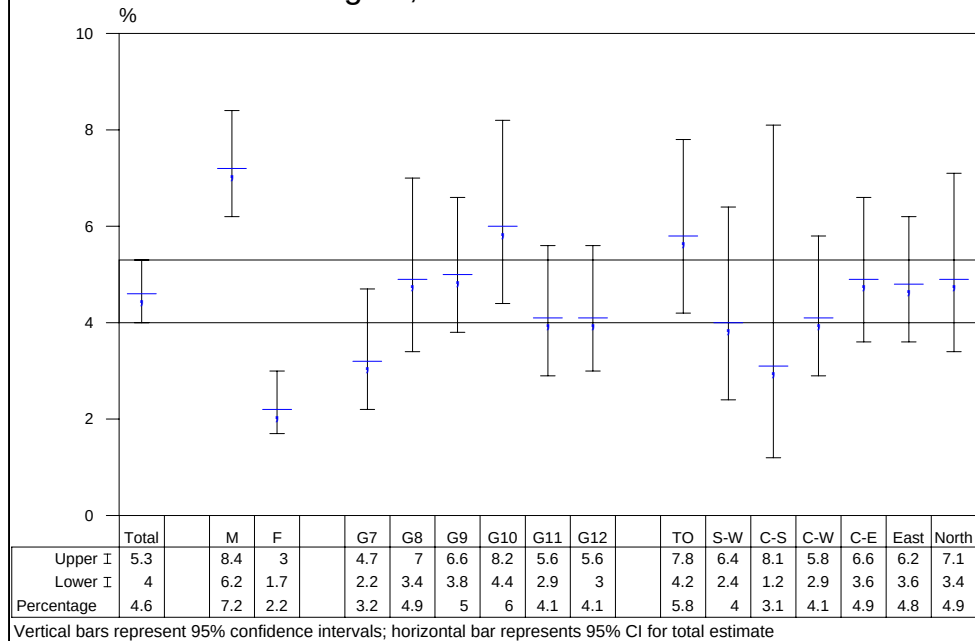


Figure 3.2.4
Percentage Reporting Not Having a Confidant, by Sex, Grade
and Public Health Region, OSDUS 2003



3.3

General Health and Physical Activity

3.3.1 Self-Rated Physical Health

(Tables 3.3.1, A3.3.1; Figures 3.3.1, 3.3.2)

One of the more frequently used indicators of a person's current mental and physical health is perceived or self-rated health. Despite its simplicity, this global assessment of health has been shown to be a reliable indicator of health problems, health care utilization, and longevity.^{44, 57}

From 1991 to 2003, self-rated health was measured with the following question: “*How would you rate your physical health?*” The response options are: poor, fair, good, very good, or excellent. We use the term “poor health” to reflect responses of poor or fair.

2003 (Grades 7 to 12):

- ❑ Over half of students perceive their health as excellent (21.4%) or very good (32.7%). At the risk end, over one-in-ten (12.6%) report poor health.
- ❑ Reported poor health is significantly higher among females (15.2%) than males (9.9%).
- ❑ Poor health significantly varies by grade: 7th-graders (6.8%) are the least likely to report poor health, whereas 11th-graders (16.6%) are the most likely.
- ❑ Reports of poor health do not significantly vary by region.

1999 – 2003 (Grades 7 to 12):

- ❑ Over the short-term, students in 2003 (12.6%) are significantly more likely to be in poor health compared to students in 2001 (10.3%) and 1999 (8.9%).
- ❑ The following subgroups show a significant increase in self-rated poor health between 1999 and 2003:
 - females (from 9.2% to 15.2%)
 - 7th-graders (from 3.8% to 6.8%)
 - 11th-graders (from 11.5% to 16.6%)
 - Toronto students (from 9.2% to 13.7%)
 - Northern students (from 7.9% to 12.9%)
 - Western students (from 9.7% to 13.3%)
 - Eastern students (from 8.0% to 11.0%).

1991 – 2003 (Grades 7, 9, 11 only):

- ❑ Self-reports of poor health among the total sample of students were lowest in 1991, at 5.8%. Poor health has significantly increased to an all-time high in 2003 at 12%.
- ❑ Reports of poor health are currently higher among all sex, grade, and region subgroups except for students in the North and East regions of the province (see Table 3.3.1 on page 26).

3.3.2 Missed School Days

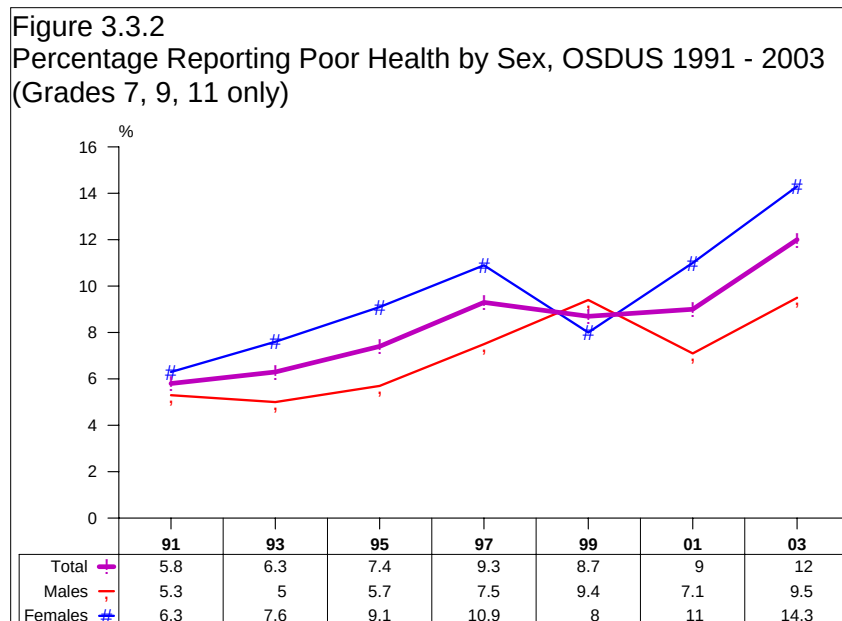
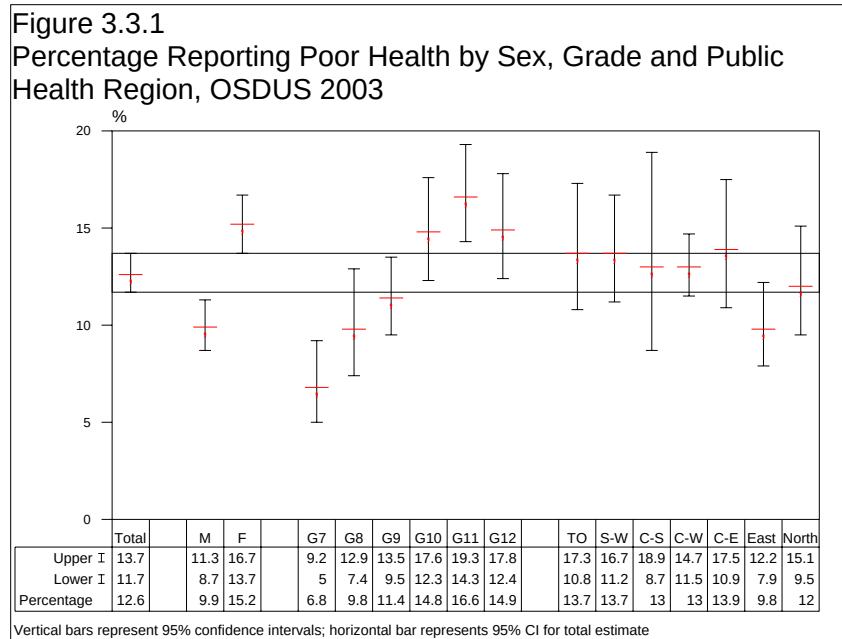
(Table A3.3.2)

Starting in 2001, the OSDUS asked about school days missed due to health reasons, during the past 4 weeks. The question asked was “*In the last four weeks (that is, during the last 20 school*

days), how many days of school did you miss because of your health?"

2003 (Grades 7 to 12):

- During the past 4 weeks, over half (57.4%) of all students did not miss a school day because of health reasons. About one-in-six (15.8%) missed one day, 17.2% missed two or three days, and about one-in-ten (9.5%) missed four or more days.
- Males were less likely to miss a school day for health reasons compared to females: 62.2% of males did *not* miss a day versus 53.0% of females.
- There is no significant grade variation, or regional variation in number of school days missed in the past 4 weeks.



3.3.3 Physical Inactivity

(Tables 3.3.2, A3.3.3; Figure 3.3.3)

Regular physical activity offers short-term physical and mental health benefits, such as reducing the risk of obesity and stress, and improving self-esteem.^{58, 59} Moreover, an active lifestyle established during adolescence is likely to extend into adulthood.^{60, 61}

Starting in 1997, the OSDUS asked students about their participation in physical activity, both in and outside of school. Students indicated on how many days they exercised or played sports “for at least 20 minutes that made you sweat and breathe hard” during the past seven days, as well as in physical education classes during the five school days prior to the survey.

2003 (Grades 7 to 12):

- ❑ About one-in-six (16.1%) did not participate in any form of physical activity at least once during the seven days before the survey. On average, students exercised three and one-half days out of seven. Just under half of all students (46.4%) were physically inactive at school during the previous five school days.
- ❑ Males and females were equally inactive during the past seven days (15.6% and 16.5%, respectively). However, females were more likely than males to be inactive at school during the past five days (49.0% vs 43.5%).
- ❑ Only school-based physical activity varies by grade: older students are more likely to be inactive, ranging from 28% of 7th-graders to 61% of 12th-graders.
- ❑ There is a significant regional difference regarding inactivity over the past seven days, with students in the Toronto (21.3%) public health region and the Central-South (20.7%) region most likely to be inactive.

1999 – 2003 (Grades 7 to 12):

- ❑ Between 1999 and 2003, there was no significant change in the percentage of all students who were inactive during the past 7 days – hovering between 14% and 16%. Nor were there changes among the subgroups.

1997 – 2003 (Grades 7, 9, 11 only):

- ❑ There was no significant change in physical inactivity between 1997 and 2003.

2010 Health Objective: Physical Activity (Figure 3.3.4)

Recent health objectives in the United States have established that, by the year 2010, the target percentage of adolescents engaging in 20 minutes of vigorous physical activity three or more days per week should be 85%.⁴⁴ The percentage of Ontario students reporting this level of activity in 2003 is only 63%.

Figure 3.3.3
Percentage Reporting Physical Inactivity During the Past 7 Days
by Sex, Grade and Public Health Region, OSDUS 2003

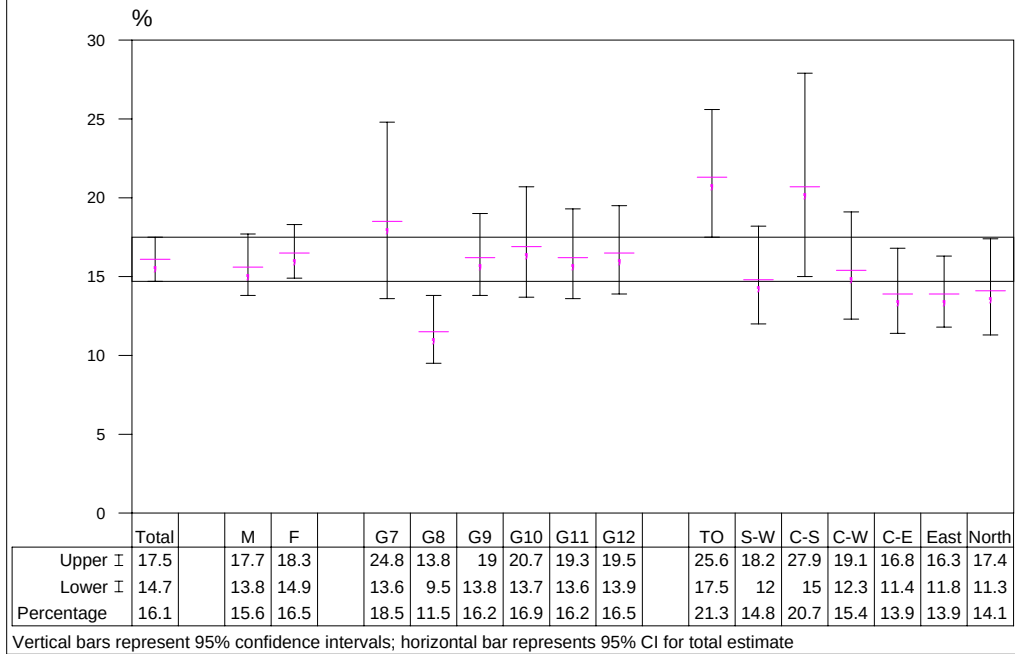
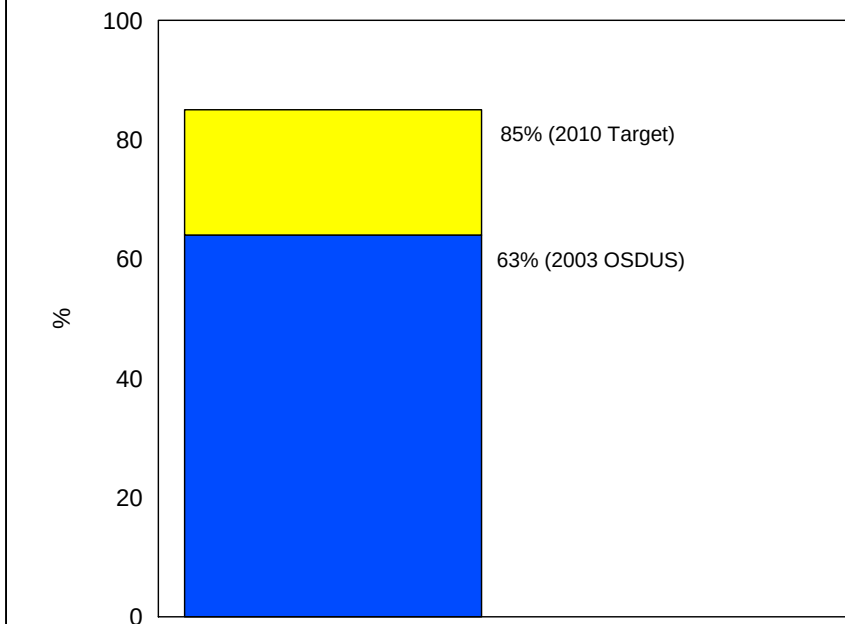


Figure 3.3.4
2010 Health Objective for Adolescents: At Least 20 minutes of
Vigorous Physical Activity 3 or More Times Per Week



3.3.4 Nutrition

(Figure 3.3.5)

Starting in 2001, the *OSDUS* asked students about their eating habits. Students were asked “On a typical day, how many times do you eat fruits or vegetables? (Do not include juices).” Response options were: 0 times, 1 time, 2 times, 3 or more times. Students were also asked “During a typical week, how many times do you eat hamburgers or hot dogs?” Response options were: 0 times, 1-2 times, 3-4 times, 5 or more times.

- ❑ Females eat fruits or vegetables more often than males, whereas males eat hamburgers or hot dogs more often.
- ❑ There are no significant grade or regional differences in the frequency of consuming either food group.

2003 (Grades 7 to 12):

- ❑ Only 3.4% of all students *do not* eat fruits or vegetables on a typical day. Just over one-quarter (28.8%) eat fruits/vegetables at least three times per day.
- ❑ About one-quarter (25.4%) do not eat hamburgers or hot dogs on a weekly basis, while 2.2% eat these foods at least five times weekly.

Figure 3.3.5
Percentage Eating Fruits/Vegetables, and Hamburgers/Hot Dogs,
OSDUS 2003

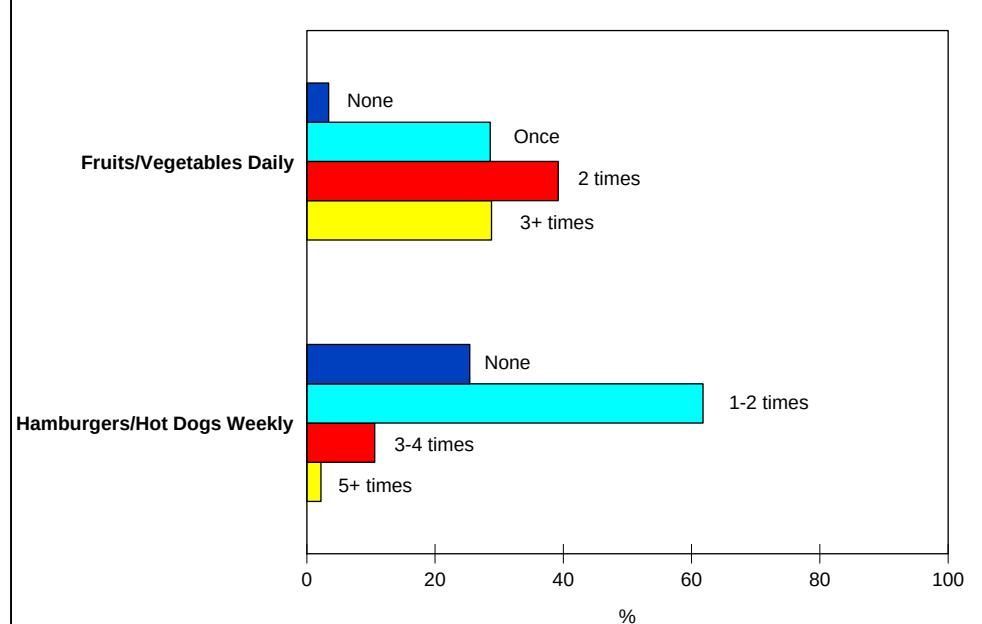


Table 3.3.1 Percentage Reporting Poor Health, 1991 - 2003

	<i>Grades 7, 9, 11 only</i>							<i>Grades 7 - 12</i>		
	1991	1993	1995	1997	1999	2001	2003	1999	2001	2003
(N=)	(2,961)	(2,617)	(2,907)	(3,072)	(2,421)	(2,013)	(3,389)	(4,447)	(3,898)	(6,616)
TOTAL	5.8	6.3	7.4	9.3	8.7	9.0	12.0	8.9	10.3	12.6^{ab}
<i>(95% CI)</i>	(5.0-6.6)	(5.2-7.8)	(6.2-8.9)	(8.1-10.8)	(7.4-10.2)	(7.9-10.4)	(10.7-13.3)	(7.9-10.1)	(9.1-11.7)	(11.7-13.7)
Males	5.3	5.0	5.7	7.5	9.4	7.1	9.5	8.7	8.3	9.9
	(4.1-6.8)	(3.6-7.0)	(4.4-7.2)	(5.8-9.7)	(7.5-11.7)	(5.3-9.3)	(7.8-11.4)	(7.3-10.4)	(6.8-10.1)	(8.7-11.3)
Females	6.3	7.6	9.1	10.9	8.0	11.0	14.3	9.2	12.3	15.2^b
	(5.0-7.9)	(5.7-10.1)	(7.6-10.8)	(9.5-12.5)	(6.3-10.0)	(9.1-13.2)	(12.3-16.6)	(7.8-10.8)	(10.1-14.8)	(13.7-16.7)
Grade 7	3.9	5.5	5.0	5.8	3.8	6.2	6.8	3.8	6.2	6.8
	(2.7-5.0)	(1.5-9.6)	(2.5-7.5)	(4.1-7.5)	(2.7-5.5)	(4.6-8.3)	(5.0-9.2)	(2.7-5.5)	(4.6-8.3)	(5.0-9.2)
Grade 8							9.8	7.2	7.5	9.8
							(7.4-12.9)	(5.5-9.4)	(5.6-9.9)	(7.4-12.9)
Grade 9	6.9	5.8	6.6	10.0	9.8	8.9	11.4	9.8	8.9	11.4
	(5.0-8.8)	(3.0-8.6)	(5.4-7.7)	(7.2-12.8)	(7.7-12.4)	(7.1-11.2)	(9.5-13.5)	(7.7-12.4)	(7.1-11.2)	(9.5-13.5)
Grade 10							14.8	10.0	13.0	14.8
							(12.3-17.6)	(7.2-13.7)	(10.1-16.7)	(12.3-17.6)
Grade 11	6.4	7.5	10.3	11.8	11.5	12.2	16.6	11.5	12.2	16.6
	(3.3-9.6)	(4.0-11.0)	(7.7-12.9)	(9.8-13.9)	(8.8-14.8)	(9.5-15.5)	(14.3-19.3)	(8.8-14.8)	(9.5-15.5)	(14.3-19.3)
Grade 12							14.9	10.9	15.1	14.9
							(12.4-17.8)	(8.3-14.2)	(10.9-20.6)	(12.4-17.8)
Toronto	6.5	6.5	7.4	7.1	7.4	7.5	13.4	9.2	9.3	13.7
	(5.1-8.2)	(4.6-9.1)	(3.9-13.8)	(5.5-9.2)	(5.1-10.7)	(5.6-10.0)	(9.8-17.9)	(7.7-10.8)	(7.1-12.2)	(10.8-17.3)
North	3.4	1.8	6.3	6.3	7.0	11.0	14.2	7.9	10.0	12.9
	(1.1-10.1)	(1.1-2.8)	(2.6-14.4)	(4.8-8.2)	(4.8-10.0)	(7.8-15.2)	(10.3-19.4)	(6.2-9.9)	(7.8-12.7)	(10.1-16.5)
West	5.7	5.9	8.2	10.9	9.4	10.0	13.1	9.7	11.2	13.3
	(4.7-6.8)	(3.7-9.3)	(6.6-10.1)	(8.5-13.9)	(7.3-12.0)	(7.9-12.5)	(11.2-15.3)	(7.8-12.0)	(9.3-13.4)	(12.0-14.6)
East	6.1	8.3	6.6	9.3	8.8	8.5	8.7	8.0	9.7	11.0
	(4.6-8.1)	(7.1-9.6)	(5.6-7.9)	(7.6-11.4)	(6.6-11.7)	(6.6-11.0)	(7.1-10.6)	(6.4-9.9)	(7.3-12.8)	(9.3-12.9)

Notes: (1) Poor health based on response options "poor" or "fair"; (2) entries in brackets are 95% confidence intervals; (3) ^a 2003 vs 2001 significant difference, p<.01; (4) ^b 2003 vs. 1999 significant difference, p<.01.

Q: How would you rate your physical health?

Source: OSDUS, Centre for Addiction and Mental Health

Table 3.3.2 Percentage Reporting *No* Physical Activity During the Past 7 Days, 1997 – 2003

	<i>Grades 7, 9, 11 only</i>				<i>Grades 7 - 12</i>		
	<i>1997</i>	<i>1999</i>	<i>2001</i>	<i>2003</i>	<i>1999</i>	<i>2001</i>	<i>2003</i>
(N=)	(1,545)	(1,253)	(1,060)	(3,389)	(2,299)	(2,061)	(6,616)
<i>TOTAL % Inactive</i> (95% CI)	13.5 (11.4-15.9)	16.1 (13.1-19.6)	13.6 (10.9-16.9)	16.9 (14.8-19.2)	15.1 (13.0-17.4)	13.8 (11.8-16.3)	16.1 (14.7-17.5)
<i>Males</i>	13.5 (10.1-17.7)	17.6 (13.3-23.0)	13.4 (9.8-18.0)	16.4 (13.8-19.4)	15.8 (12.8-19.3)	13.6 (10.7-17.2)	15.6 (13.8-17.7)
<i>Females</i>	13.5 (11.2-16.2)	14.6 (11.3-18.6)	13.8 (10.5-17.9)	17.4 (14.6-20.5)	14.3 (11.7-17.4)	13.9 (11.5-16.8)	16.5 (14.9-18.3)
<i>Grade 7</i>	15.5 (11.6-19.4)	18.5 (13.9-24.1)	11.9 (9.1-15.4)	18.5 (13.6-24.8)	18.5 (13.9-24.1)	11.9 (9.1-15.4)	18.5 (13.6-24.8)
<i>Grade 8</i>					12.8 (9.3-17.2)	11.8 (8.6-16.0)	11.5 (9.5-13.8)
<i>Grade 9</i>	12.7 (10.4-15.1)	11.8 (9.1-15.1)	12.9 (8.7-18.6)	16.2 (13.8-19.0)	11.8 (9.1-15.1)	12.9 (8.7-18.6)	16.2 (13.8-19.0)
<i>Grade 10</i>					15.5 (11.6-20.5)	15.7 (11.7-20.7)	16.9 (13.7-20.7)
<i>Grade 11</i>	12.5 (7.9-17.1)	19.1 (13.1-27.0)	16.4 (11.2-23.6)	16.2 (13.6-19.3)	19.1 (13.1-27.0)	16.4 (11.2-23.6)	16.2 (13.6-19.3)
<i>Grade 12</i>					13.0 (8.7-18.8)	13.6 (8.0-22.1)	16.5 (13.9-19.5)
<i>Toronto</i>	16.7 (15.2-18.3)	19.6 (13.8-26.9)	14.1 (9.3-21.0)	21.4 (16.3-27.6)	19.2 (14.1-25.6)	16.3 (11.1-23.3)	21.3 (17.5-25.6)
<i>North</i>	15.3 (7.7-28.1)	22.2 (12.5-36.4)	18.6 (13.0-25.2)	14.7 (11.1-19.3)	18.0 (12.7-25.0)	17.3 (13.2-22.5)	14.0 (11.4-17.2)
<i>West</i>	13.9 (9.7-19.4)	16.7 (11.2-24.2)	14.2 (9.7-20.1)	17.6 (14.2-21.5)	15.6 (12.1-19.8)	13.0 (9.7-17.1)	15.7 (13.6-18.2)
<i>East</i>	10.3 (9.6-11.0)	12.3 (8.9-16.6)	10.7 (6.3-17.7)	13.6 (10.6-17.1)	11.4 (8.4-15.3)	12.0 (8.3-17.0)	13.9 (12.3-15.7)

Notes: (1) data based on a random half sample in each year except 2003; (2) no significant differences between 1997 and 2003.

Q: On how many of the last 7 days did you exercise or participate in sports activities for at least 20 minutes that made you sweat and breathe hard? No physical activity is based on a response of "0 days."

Source: OSDUS, Centre for Addiction and Mental Health

3.4

Health Care Utilization

In this section we examine students' visits to health care professionals, treatment for an injury, past year use of prescription medication, and whether or not students were prescribed medication for depression or anxiety.

3.4.1 Doctor / Health Care Visits

(Table A3.4.1; Figures 3.4.1, 3.4.2)

Starting in 1999, the *OSDUS* asked students about visits to physical and mental health care professionals during the 12 months before the survey. This provides another snapshot of students' health status. Students were asked: "...how many times have you seen a doctor about your physical health or for a check-up?" and "...how often have you seen a doctor, nurse or counsellor about your emotional or mental health?"

Of course, the number of visits indicative of good versus poor health differs depending on whether one is seeking physical health care or mental health care. For the present report, we examined the proportion of students that did not visit a practitioner, as well as the proportion indicating at least one visit, for both physical and mental health reasons.

2003 (Grades 7 to 12):

- ❑ During the past 12 months, 60.2% of students visited a doctor for their physical health at least once, while 11.0% reported at least one visit for mental health reasons.
- ❑ Compared to males, females are significantly more likely to report at least one physical health visit (53.8% vs 66.2%, respectively), and are also more likely to report a mental health visit (8.1% vs 13.7%).
- ❑ There are no significant grade differences in physical health visits. However, mental

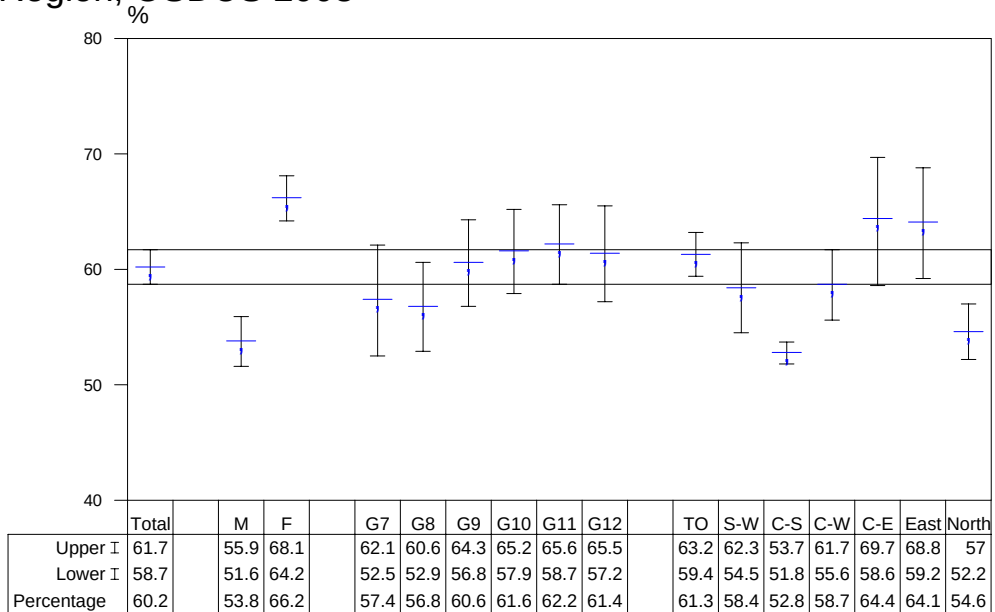
health care visits are most likely among 11th-graders (14.4%) compared to other grades (range from 9% to 11%).

- ❑ Significant regional differences were found: students in the Central-South (52.8%) public health region and the North (54.6%) region are the least likely to seek physical health care. Students in the Toronto (8.3%) public health region are the least likely to seek mental health care.

1999 – 2003 (Grades 7 to 12):

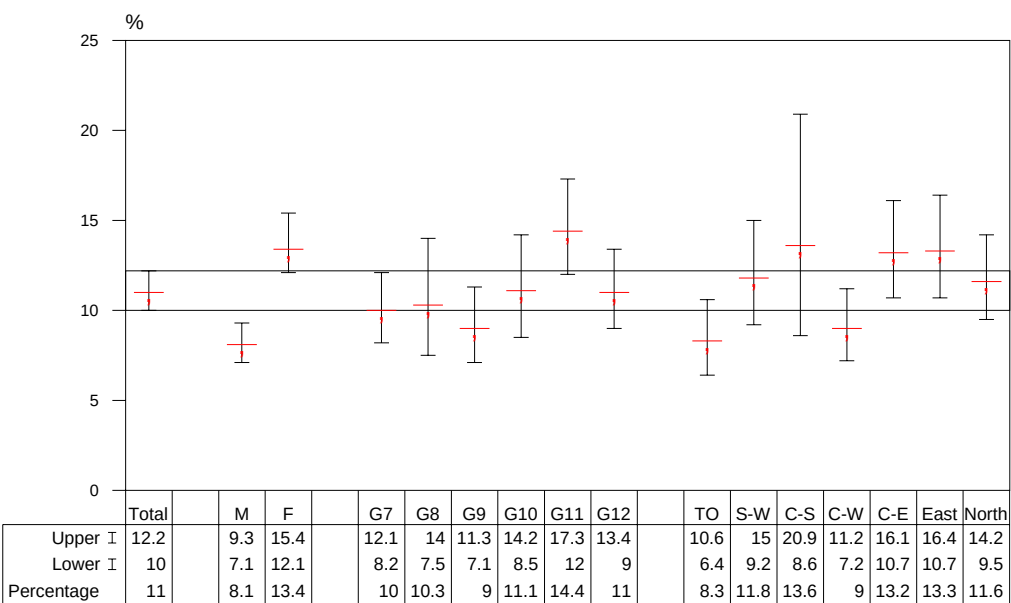
- ❑ Over the short-term, there has been a significant decline in the percentage of students who visited a doctor for their physical health, from 70.0% in 1999 down to 60.2% in 2003.
- ❑ Significant declines between 1999 and 2003 in physical health care visits were also evident for all sex, age, and region subgroups, except for 12th-graders and students in the North.
- ❑ Between 1999 and 2003, there was no change in the number of mental health care visits among the total sample, or within any subgroups.

Figure 3.4.1
Percentage Reporting at Least One Physical Health Care Visit
During the Past 12 Months by Sex, Grade and Public Health
Region, OSDUS 2003



Vertical bars represent 95% confidence intervals; horizontal bar represents 95% CI for total estimate

Figure 3.4.2
Percentage Reporting at Least One Mental Health Care Visit
During the Past 12 Months by Sex, Grade and Public Health
Region, OSDUS 2003



Vertical bars represent 95% confidence intervals; horizontal bar represents 95% CI for total estimate

3.4.2 Treated for a Physical Injury

(Figure 3.4.3)

For the first time, the 2003 *OSDUS* asked students about physical injuries during the past year. The question was: “*In the last 12 months, how many times were you hurt or injured, and had to be treated by a doctor or nurse?*”

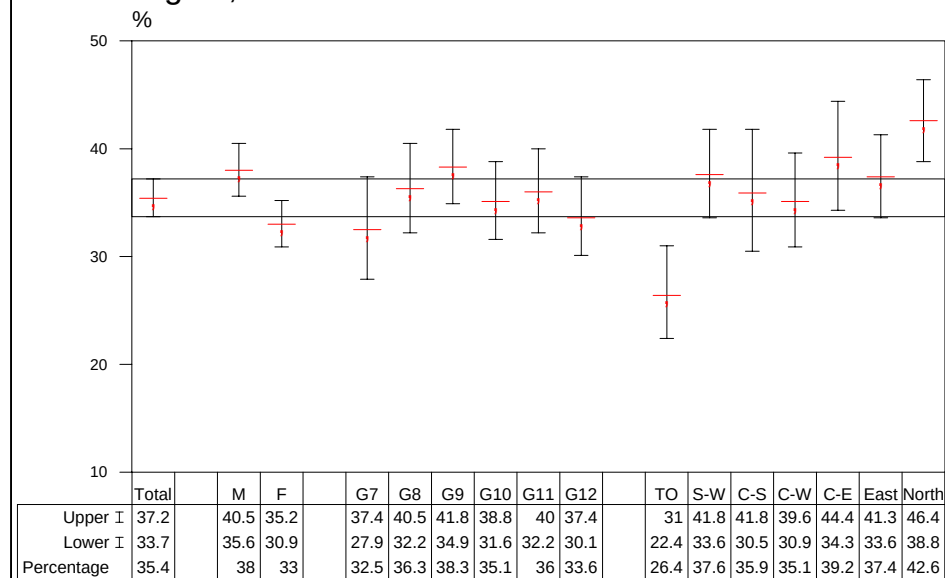
Response options were: not treated for an injury in the last 12 months, 1 time, 2 times, 3 times, 4 or more times.

- ❑ There is no significant grade variation.
- ❑ There is significant regional variation, with students in the Toronto (26.4%) public health region least likely to be treated for an injury, and those in the North (42.6%) public health region most likely.

2003 (Grades 7 to 12):

- ❑ Among the total sample, 35.4% were treated for an injury at least once in the 12 months before the survey. This represents about 336,900 students across Ontario. More specifically, 20.3% were treated just once, 8.6% were treated twice, 3.4% were treated three times, and 3.2% were treated four or more times.
- ❑ Males are more likely than females to report being treated for a physical injury at least once in the past year (38.0% vs 33%, respectively).

Figure 3.4.3
Percentage Reporting Being Treated for a Physical Injury at Least Once During the Past 12 Months by Sex, Grade and Public Health Region, OSDUS 2003



Vertical bars represent 95% confidence intervals; horizontal bar represents 95% CI for total estimate

3.4.3 Medical Drug Use

Spanning back to 1977, the *OSDUS* asked students about their use of certain drugs that were prescribed or advised by a doctor. Specifically, they were asked how often during the 12 months before the survey they had medically used barbiturates, stimulants, and tranquillizers. A question about the use of prescribed Ritalin was asked in more recent years.

2003 (Grades 7 to 12):

(Tables A3.4.2a, A3.4.3a, A3.4.4a, A3.4.5; Figures 3.4.4 to 3.4.7)

- ❑ Among the total sample, 5.7% used barbiturates medically (about 53,900 students), 5.8% used stimulants medically (about 54,700 students), 2.7% used tranquillizers (about 25,800), and 2.5% used Ritalin (about 24,400).
- ❑ Among these four drugs, only two show a significant sex difference: males are more like than females to use tranquillizers (3.4% vs 2.1%, respectively), and males are more likely than females to use Ritalin (3.5% vs 1.6%).
- ❑ There are no significant grade differences in the use of any of these medical drugs.
- ❑ Among the seven public health regions, only the use of medical barbiturates shows significant variation, with Toronto (3.0%) lower than the other regions (about 5%-9%).

1999 – 2003 (Grades 7 to 12):

- ❑ Over the short-term, significantly fewer students in 2003 (5.7%) report medical barbiturates use than in 2001 (11.9%) and 1999 (12.6%). This decline is evident among all subgroups.
- ❑ There are no significant changes over the short-term in the medical use of stimulants, or tranquillizers.
- ❑ Medical Ritalin use significantly declined among all students in 2003 (2.5%) compared to 1999 (3.8%). Among the subgroups, the decline is evident among males (from 5.6% in 1999 to 3.5% in 2003), 8th-graders (5.1% to 2.4%), and Western students (4.8% to 2.9%).

1977 – 2003 (Grades 7, 9, 11 only):

(Tables A3.4.2b, A3.4.3b, A3.4.4b; Figure 3.4.8)

- ❑ Over the long-term, the medical use of barbiturates declined between 1977 to 1997, spiked in 1999, but has since been declining.
- ❑ The medical use of stimulants declined between 1977 and 1991, steadily increased until 1999, at which point it stabilized.
- ❑ Between 1977 and 1995, the medical use of tranquillizers declined, and then increased slightly until 1999. Since that time, use has remained stable.

Figure 3.4.4
Percentage Reporting Medical Barbiturates Use During the Past Year, by Sex, Grade and Public Health Region, OSDUS 2003

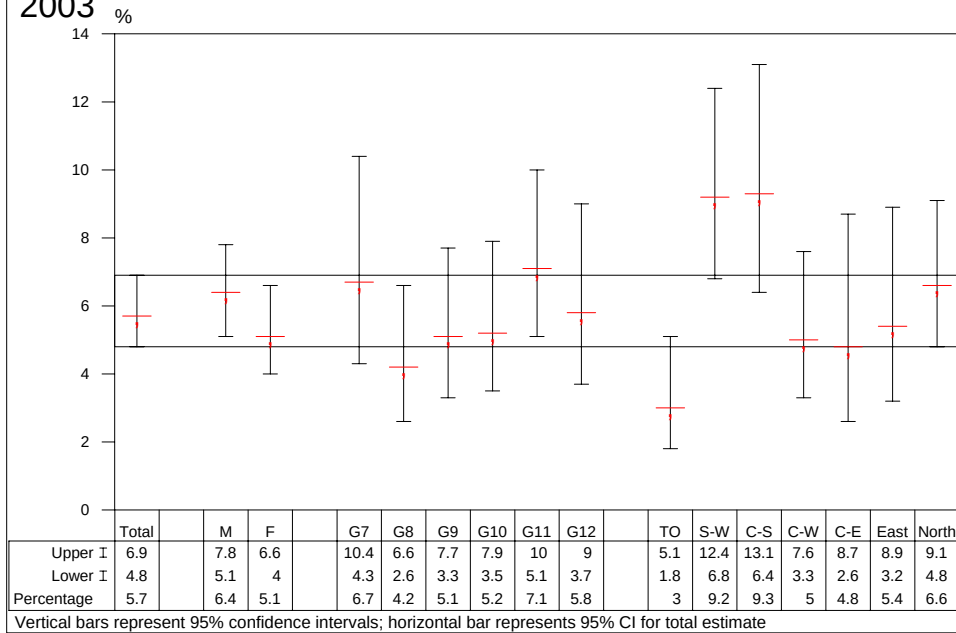


Figure 3.4.5
Percentage Reporting Medical Stimulant Use During the Past Year, by Sex, Grade and Public Health Region, OSDUS 2003

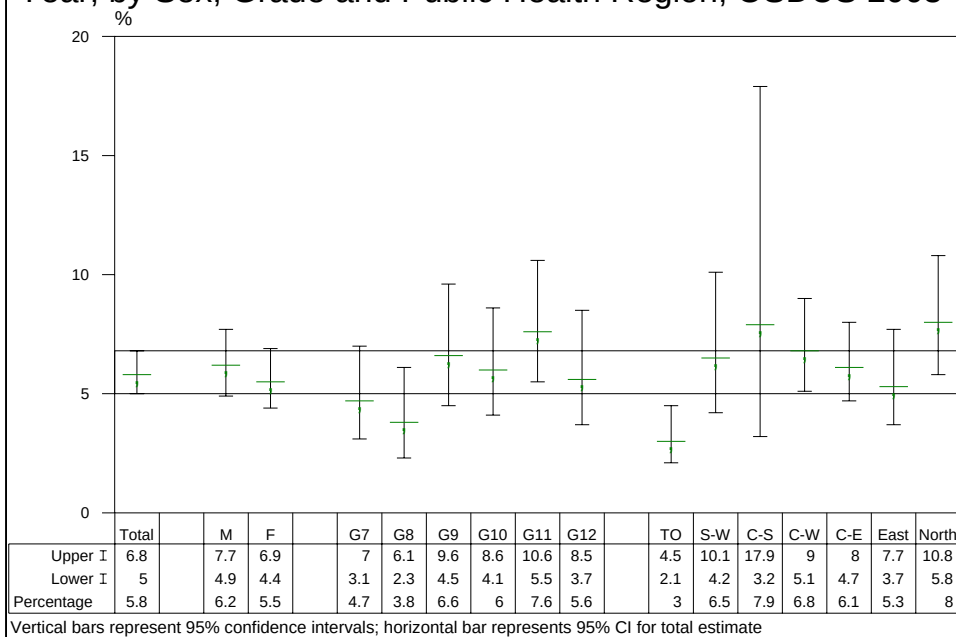


Figure 3.4.6
Percentage Reporting Medical Tranquillizer Use During the Past Year, by Sex, Grade and Public Health Region, OSDUS 2003

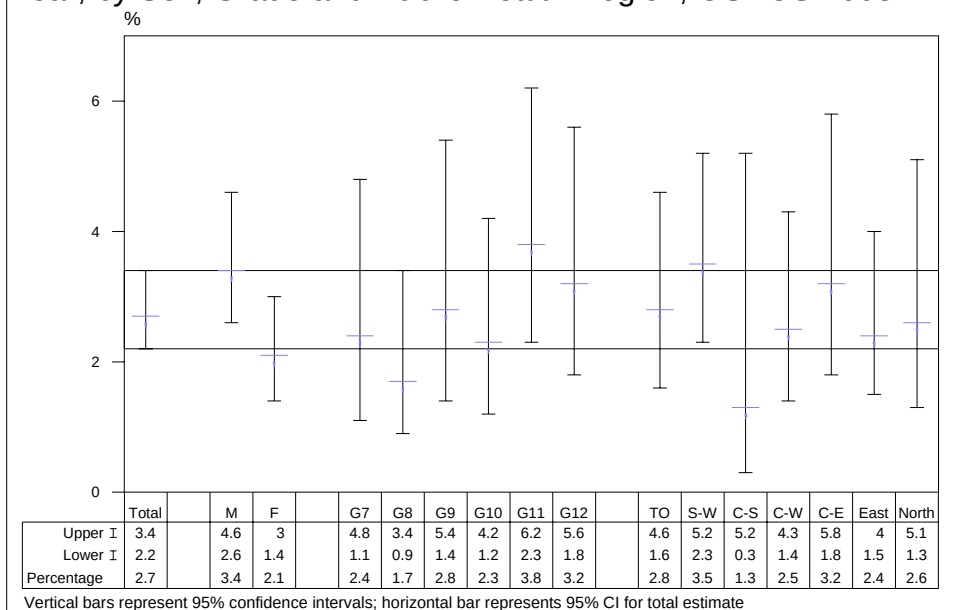


Figure 3.4.7
Percentage Reporting Medical Ritalin Use During the Past Year, by Sex, Grade and Public Health Region, OSDUS 2003

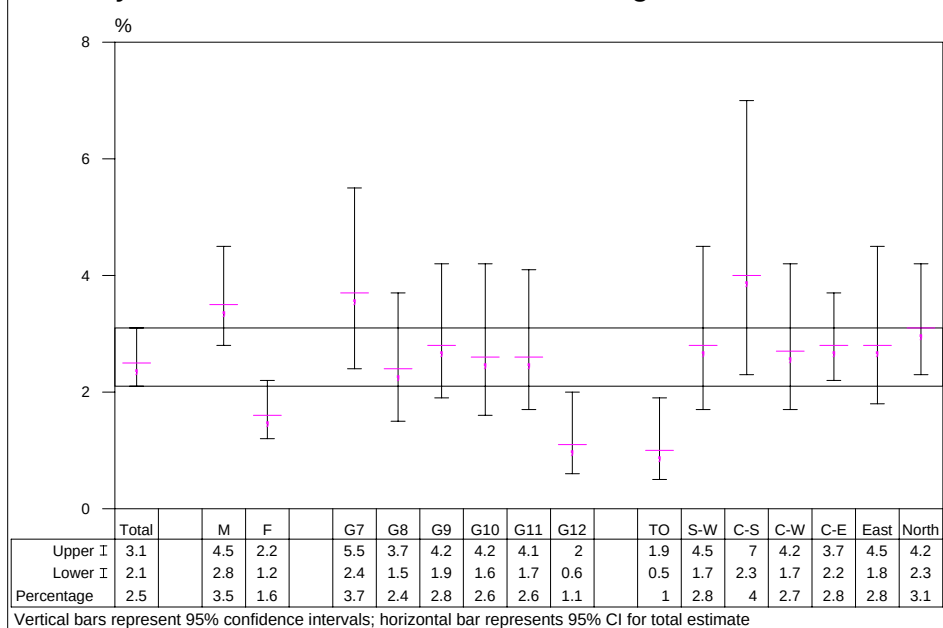
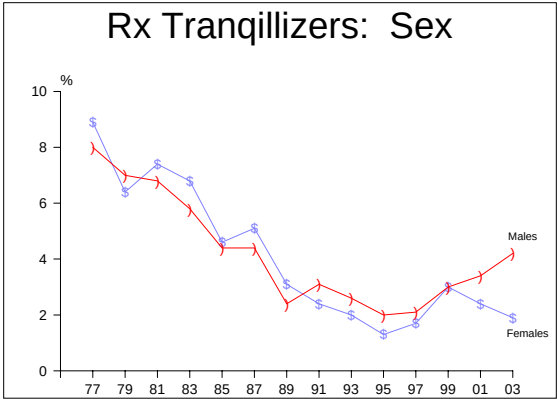
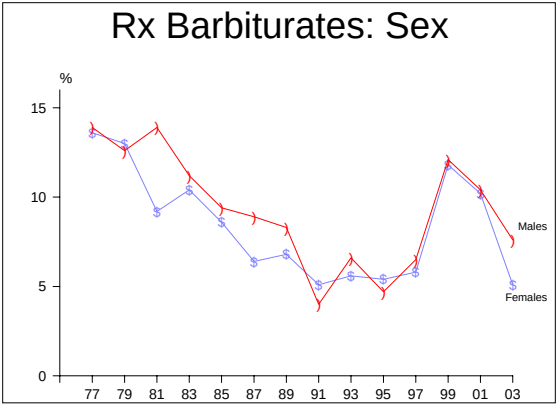
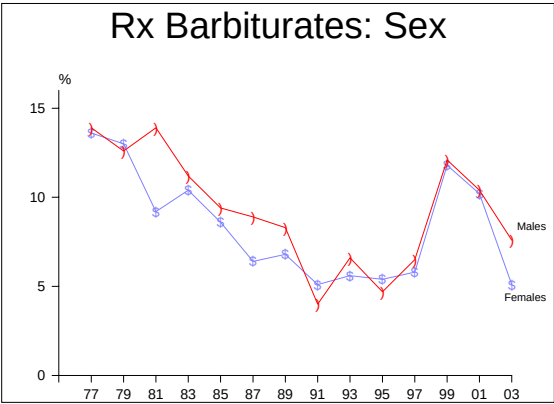
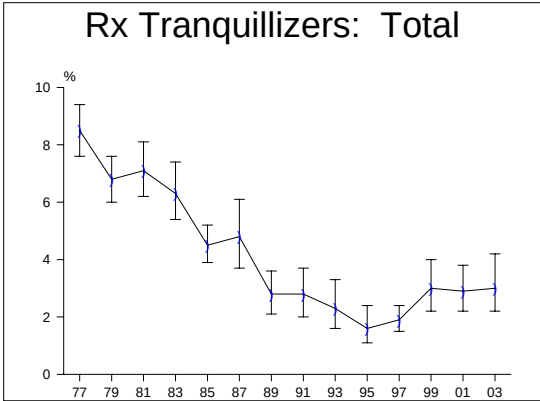
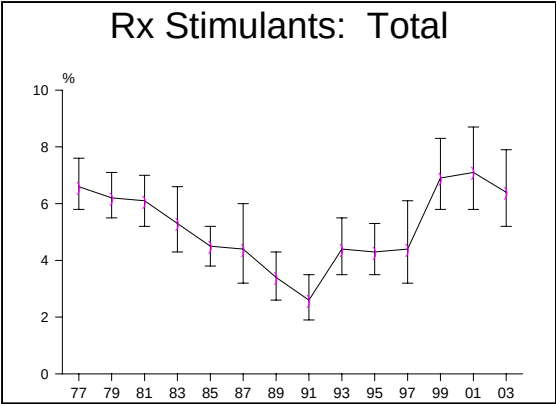
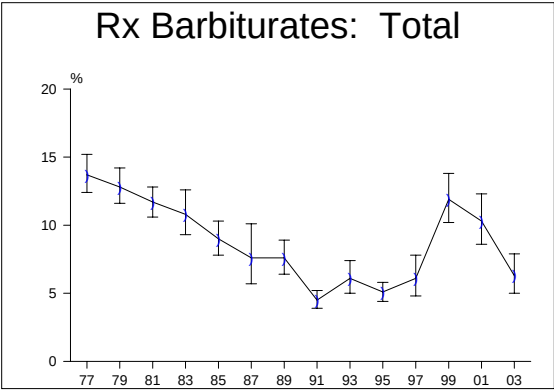
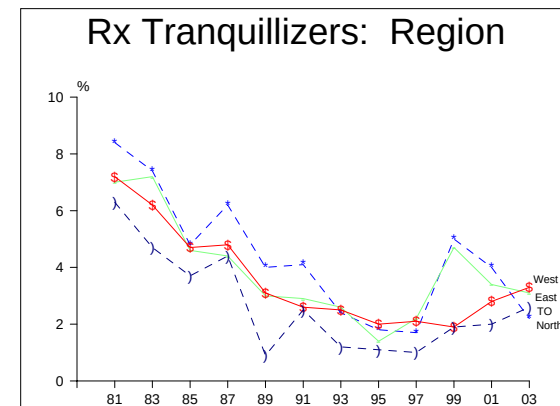
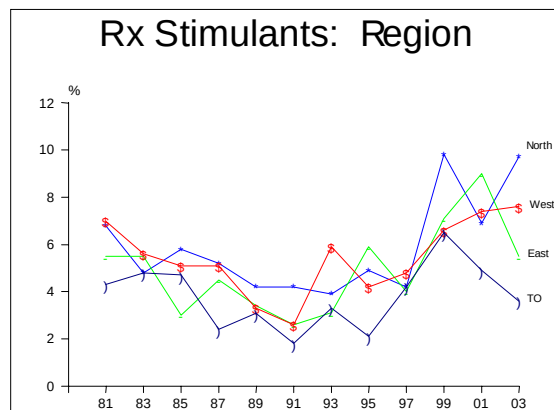
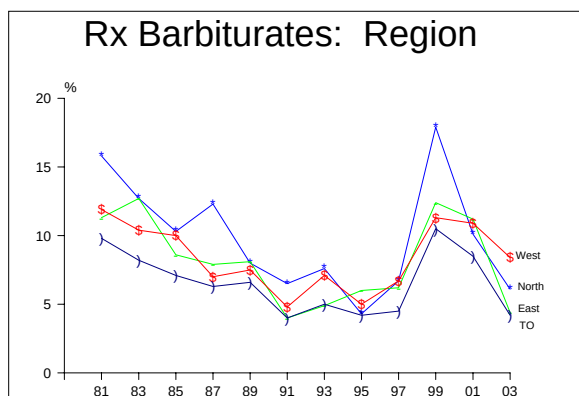
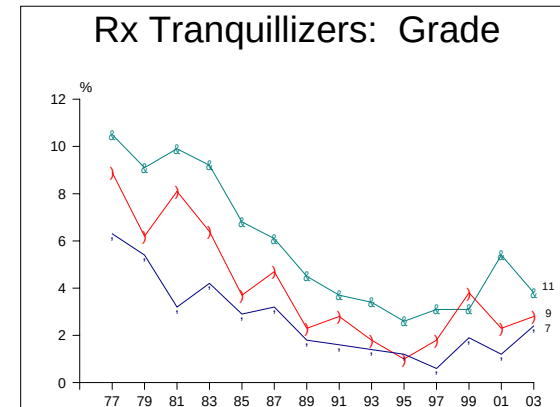
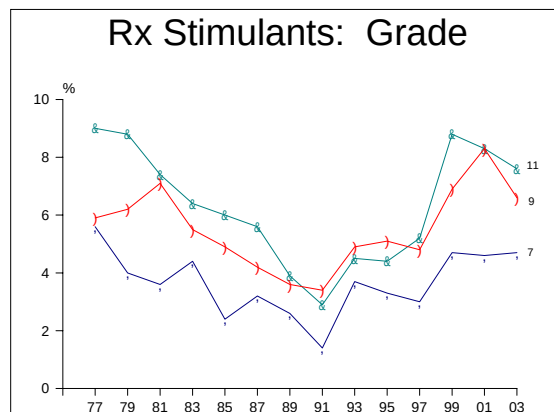
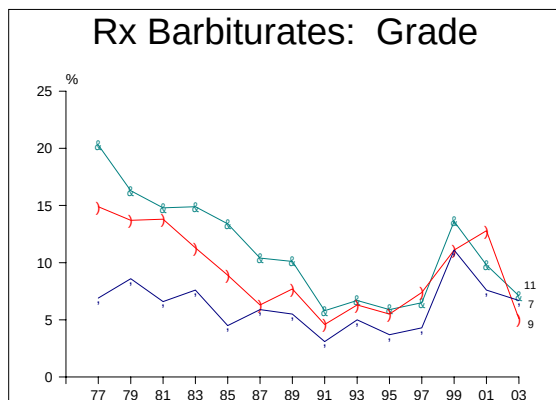


Figure 3.4.8 Past Year Medical Substance Use, OSDUS 1977 – 2003, Grades 7, 9, 11 only





3.4.4 Prescription Medication to Treat Depression or Anxiety

(Figures 3.4.9, 3.4.10)

Starting in 2001, the *OSDUS* asked about prescription medication for depression or anxiety. The question was “*In the last 12 months, have you been prescribed medicine to treat anxiety or depression?*” The four response options were: yes for anxiety only; yes for depression only; yes for both; or no.

2003 (Grades 7 to 12):

- ❑ 1.8% (about 17,000 across Ontario) of students report that they had been prescribed medication to treat depression in the past year. Just under 1% of students (about 6,600) were prescribed medication for anxiety. Another 1.6% (about 15,100) were prescribed medication for *both* their depression and anxiety.
- ❑ Combining these responses, 4.0% of students (about 38,700 students) report they were prescribed medication to treat either depression, or anxiety, or both of these problems.
- ❑ As presented in Figure 3.4.9, compared to males, females are significantly more likely to be prescribed medication to treat depression (1.1% vs 2.3%, respectively), or both depression and anxiety (0.8% vs 2.2%).
- ❑ As presented in Figure 3.4.10, students in grade 10 (6.1%) are most likely to be prescribed medication to treat depression, or anxiety, or both problems.
- ❑ There is no significant variation by public health region.

2003 vs 2001 (Grades 7 to 12):

- ❑ There are no significant changes between 2001 and 2003 regarding reports of prescriptions to treat anxiety, or depression, or both.

Figure 3.4.9
Percentage Reporting Having Been Prescribed Medication to Treat Anxiety, Depression, or Both Problems During the Past 12 Months, by Sex, OSDUS 2003

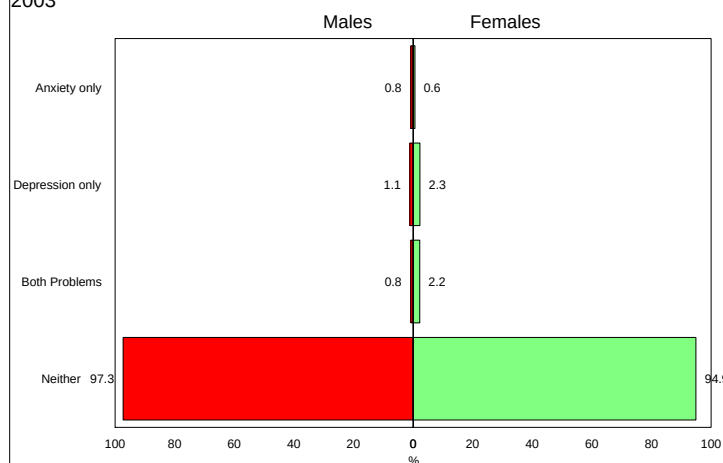
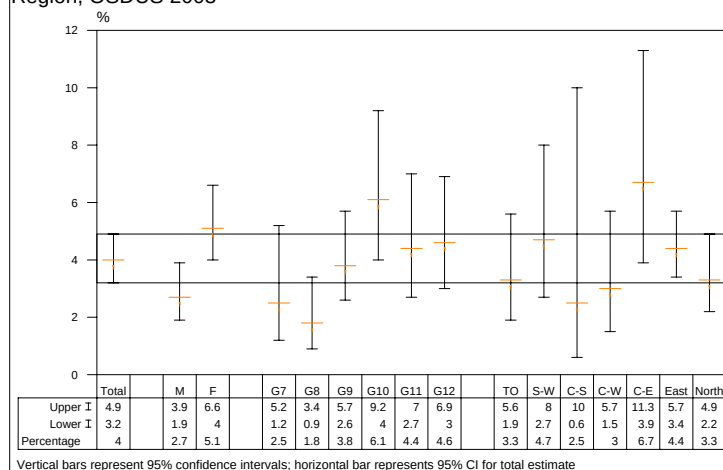


Figure 3.4.10
Percentage Reporting Having Been Prescribed Medication to Treat Either Depression, or Anxiety, or Both Problems, by Sex, Grade and Public Health Region, OSDUS 2003



3.5

Internalizing Indicators

Internalizing mental health indicators are emotional states or psychological traits that can adversely affect all life areas. Some examples include self-esteem, depression and anxiety.

3.5.1 Low Self-Esteem

(Table A3.5.1; Figures 3.5.1, 3.5.2)

Low self-esteem, or self-worth, has been shown to be associated not only with risky health behaviours such as illicit drug use,⁴¹ but also with poor physical and mental health outcomes, and poor school and personal achievement.^{16, 42, 62}

Adapted items from the *Rosenberg Self-Esteem Scale*⁶³ have been in the *OSDUS* since 1993. The following six items were used in the last four survey cycles:

- *I feel good about myself*
- *I feel that I am a person of worth*
- *I am able to do most things as well as other people can*
- *Sometimes I feel that I can't do anything right*
- *I feel I do not have much to be proud of*
- *Sometimes I think I am no good at all*

Each response option was based on a 5-point scale, ranging from “never true” to “almost always true.” An overall indicator for low self-esteem was defined as responding negatively (lower esteem) to at least three of the six items listed above (i.e., “always” or “often true” for negative statements; “never” or “seldom true” for positive statements). The reliability coefficient (α) for these 6 items was 0.76.

2003 (Grades 7 to 12):

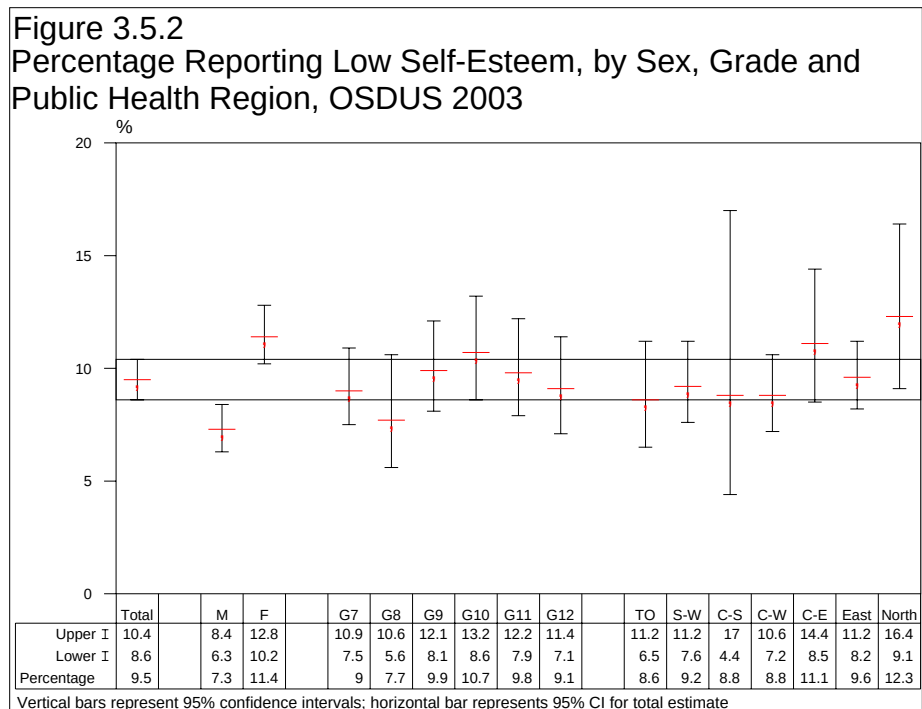
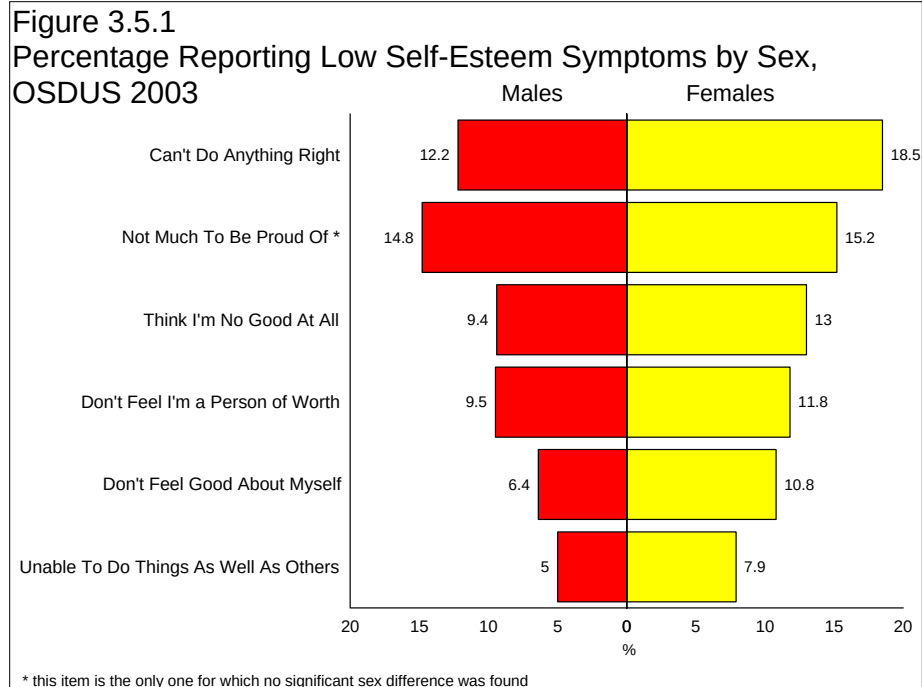
- ❑ About one-in-ten (9.5%) students report low self-esteem.
- ❑ Specifically, under one-in-five (15.5%) students often or always feel that they cannot do anything right; 15.0% feel they do not have much to be proud of; and 11.3% feel that they are no good at all. About one-in-ten (10.7%) do not feel that they are a person of worth; 8.7% seldom or never feel good about themselves; and 6.5% do not feel that they can do most things as well as others can.
- ❑ Females are significantly more likely to report low self-esteem than are males (11.4% vs 7.3%, respectively).
- ❑ There is no significant grade effect regarding low self-esteem, nor is there a significant regional effect.

1999 – 2003 (Grades 7 to 12):

- ❑ Low self-esteem remained stable between 1999 (10.1%) and 2003 (9.5%) among the total sample.

1995 – 2003 (Grades 7, 9, 11 only):

- Between 1995 (10.3%) and 2003 (9.6%), low self-esteem did not change among the total sample.



3.5.2 Depressive Symptoms

(Table A3.5.2; Figure 3.5.3)

Depressed mood is a relatively common occurrence during adolescence and is characterized by pervasive feelings of sadness and worthlessness, loss of interest in activities, and disturbances in sleep, appetite, and concentration. Depression can range from mild to severe, and can adversely affect all areas of life. Typically, the onset of depression occurs during adolescence, affecting more females than males.^{9, 64}

The *Center for Epidemiologic Studies Depression Scale* (CES-D) is a self-report scale used to screen for depressive symptomatology in the general population.⁶⁵ The scale does not make a clinical diagnosis, but it does identify those at risk for a depressive disorder. The *OSDUS* used a shortened version of the CES-D.

The following four CES-D questions were asked of students from 1997 to 2003. The time referent is the “past 7 days.”

- *How often have you felt sad?*
- *How often have you felt lonely?*
- *How often have you felt depressed?*
- *How often have you felt like crying?*

The response options were based on a 4-point scale, ranging from “never or rarely” to “always”. To gain a sense of the prevalence of depression in the student population, we provide a measure of elevated **risk for depression** as indicated by those responding “often” or “always” on *all four* symptoms. The reliability coefficient (α) for these 4 items was 0.83.

2003 (Grades 7 to 12):

- ❑ Overall, 17.1% of students felt sad often or always during the seven days before the survey; 14.1% felt lonely; 12.4% felt depressed; and 15.4% felt like crying.

- ❑ About one-in-twenty (5.6%) students are at risk for depression (this represents about 55,200 Ontario students).
- ❑ Females are significantly more likely than males to report feeling each of the four symptoms. Females, compared to males, are also more likely to be at risk for depression (8.4% vs 2.6%).
- ❑ There are no significant grade differences on the four symptoms, or on the overall depression measure.
- ❑ There is significant variation regarding risk for depression: students in the Toronto (3.0%) public health region are the least likely to be at risk for depression, while students in the Central-South (11.7%) region are most likely to be at risk.

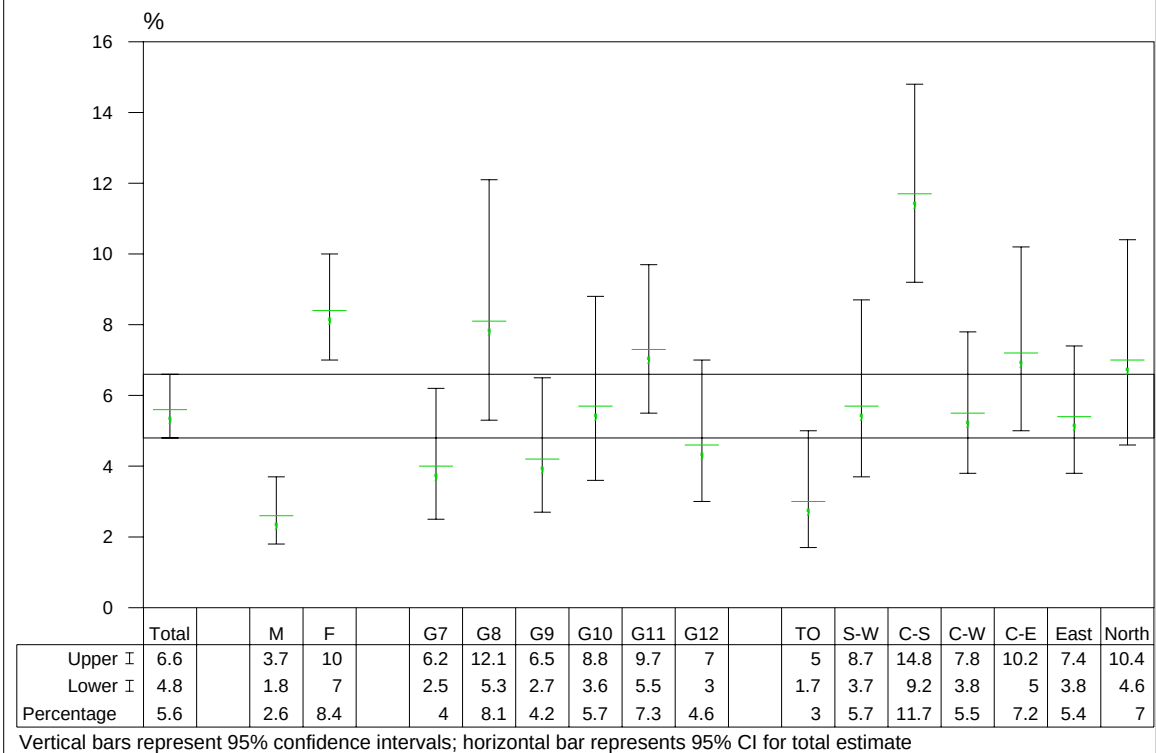
1999 – 2003 (Grades 7 to 12):

- ❑ Between 1999 and 2003, there was no significant change on the depression risk measure among the total sample, or among the subgroups.

1997 – 2003 (Grades 7, 9, 11 only):

- ❑ There was no significant change in risk for depression among the total sample between 1997 and 2003.

Figure 3.5.3
Percentage At Elevated Risk for Depression, by Sex, Grade
and Public Health Region, OSDUS 2003



3.5.3 Elevated Psychological Distress

(Table A3.5.3; Figures 3.5.4, 3.5.5)

The *General Health Questionnaire* (GHQ)^{66, 67} is a screening instrument used to detect current psychological distress. The GHQ-12 uses twelve items to screen for three overarching problems: depressed mood, anxiety, and problems with social functioning. Note that this instrument is used as a screener and not for clinical diagnoses.

The GHQ was first used in the *OSDUS* in 1999. The item wording took the form: “*Over the last few weeks, have you....*”. Response categories are on a 4-point scale ranging from “better [more so] than usual” to “much less than usual”; or “not at all” to “much more than usual.” The following items were used:

- *been able to concentrate on whatever you’re doing*
- *felt that you are playing a useful part in things*
- *felt capable of making decisions about things*
- *been able to enjoy your normal day-to-day activities*
- *been able to face up to your problems*
- *been feeling reasonably happy, all things considered*
- *lost much sleep because you were worried about something*
- *felt constantly under stress*
- *felt you couldn’t overcome difficulties*
- *been feeling unhappy and depressed*
- *been losing confidence in yourself*
- *been thinking of yourself as a worthless person*

The GHQ also yields a summary measure to estimate the percentage experiencing elevated psychological distress, defined as reporting at least 3 of the 12 symptoms (positive statements were reverse-coded). The reliability coefficient (α) for these 12 items was 0.86.

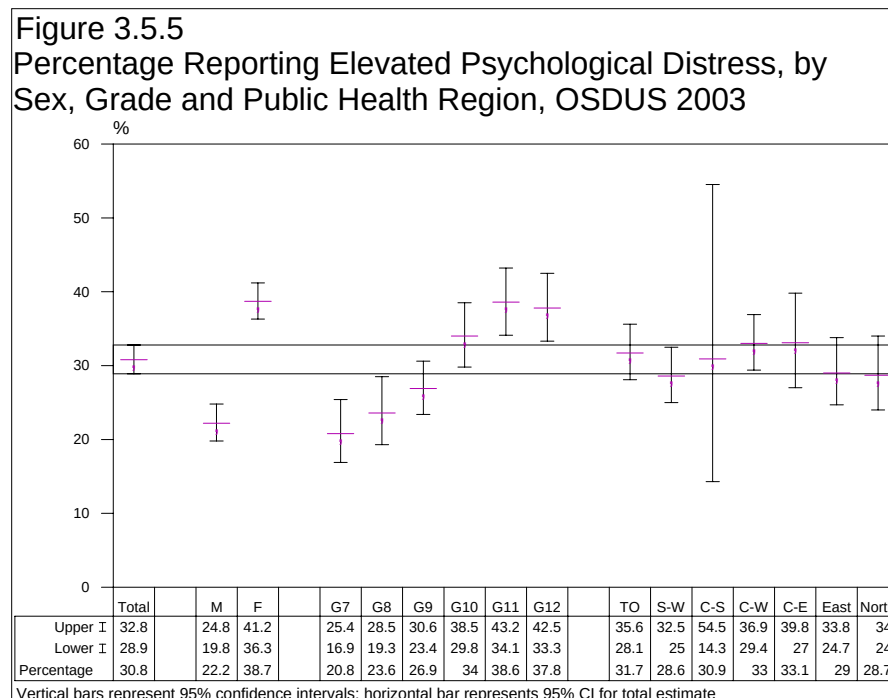
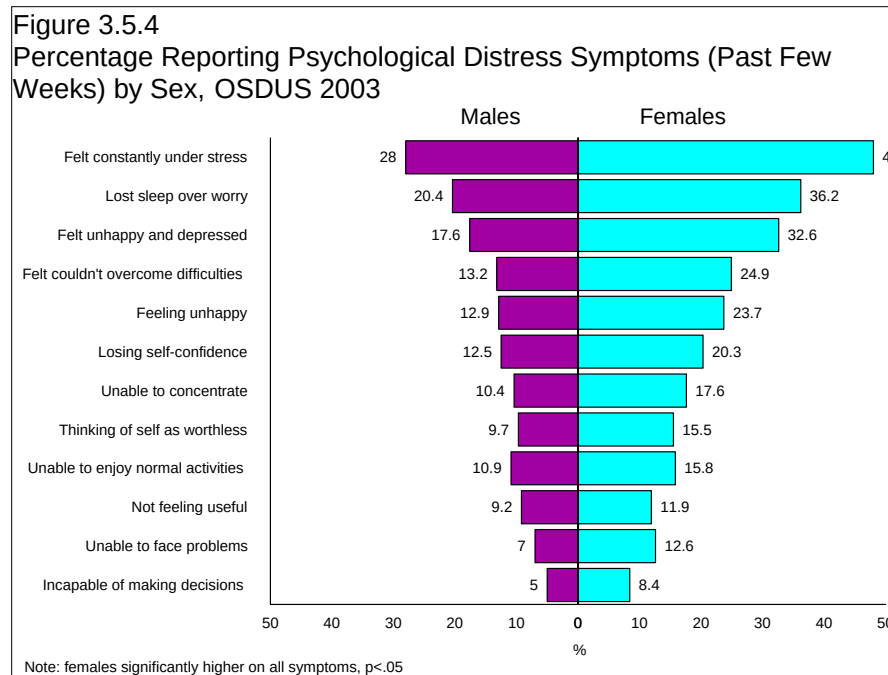
2003 (Grades 7 to 12):

- ❑ Elevated psychological distress is reported by just under one-third (30.8%) of students. This represents about 303,300 Ontario students.
- ❑ The most common symptom experienced by students is the feeling of being constantly under stress (38.5%), followed by losing sleep because of worrying (28.7%). The least cited symptom is feeling incapable of making decisions (6.8%).
- ❑ Females are more likely to report elevated psychological distress compared to males (38.7% vs 22.2%, respectively). Indeed, females are significantly more likely to report *each* of the 12 symptoms.
- ❑ Psychological distress significantly increases with grade, peaking in 11th- and 12th-grades (just under 40% each).
- ❑ There is substantial grade variation on 10 of the 12 symptoms, generally showing inferior mental health with increasing grade. For example, constantly feeling stressed increases dramatically with grade, with only 20.9% of 7th-graders reporting so versus 52.0% of 12th-graders. Symptoms that do *not* significantly differ by grade include feeling like one is playing a useful part in things, and thinking of oneself as a worthless person.
- ❑ There are no significant regional differences on these distress measures.

1999 – 2003 (Grades 7 to 12):

- Among the total sample, elevated psychological distress significantly increased from 26.5% in 2001 up to 30.8% in 2003. Note that the 2003 level corresponds to the previous 1999 level (30.0%).

- Among the subgroups, two significant increases in psychological distress were found. Among females, distress increased from 29.6% in 2001 to 38.7% in 2003; and among 10th-graders, from 23.8% in 2001 to 38.6% in 2003. Both these increases in 2003 are similar to their respective levels found in 1999.



3.5.4 Suicide Ideation

(Figure 3.5.6)

Starting in 2001, the OSDUS included a question about suicide. Specifically, students were asked “During the last 12 months, did you ever seriously consider attempting suicide?” Response options were yes or no.

2003 (Grades 7 to 12):

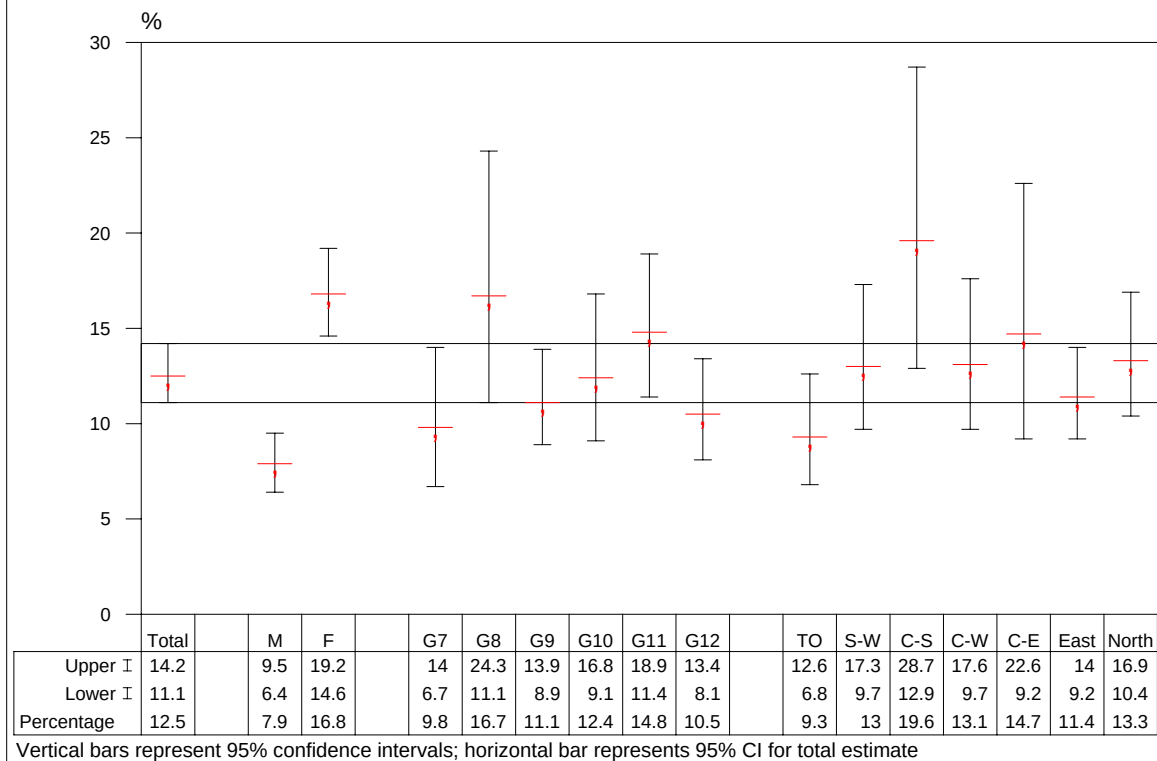
- ❑ About one-in-eight (12.5%) students reported that they had seriously considered suicide in the past year. This represents about 122,100 Ontario students.
- ❑ Females are significantly more likely to think about suicide than males (16.8% vs 7.9%, respectively).

- ❑ There is no significant association with grade or region.

2003 vs 2001 (Grades 7 to 12):

- ❑ Between 2001 (11.1%) and 2003 (12.5%), there was no significant change in the percentage of students who contemplated suicide.

Figure 3.5.6
Percentage Reporting Suicide Ideation, by Sex, Grade and Public Health Region, OSDUS 2003



3.5.5 Body Image and Desired Change in Weight

(Table A3.5.4; Figure 3.5.7)

The issues surrounding body image and weight become increasingly prominent during the adolescent years. Teenagers, especially females, can become preoccupied with achieving an “ideal” body, which can subsequently cause physical and mental health problems. In the extreme, a fixation on body image can lead to eating disorders such as anorexia nervosa or bulimia. In Canada, 4% of young females are considered at high risk for an eating disorder.¹¹

The 2001 and 2003 OSDUS included questions concerning beliefs about personal weight and desired change in weight. Two questions were asked: (1) *“Do you think of yourself as being too thin, about the right weight, or too fat?”* and (2) *“Which of the following are you doing about your weight: not doing anything, trying to lose weight, trying to keep from gaining weight, or trying to gain weight?”*.

2003 (Grades 7 to 12):

- ❑ Over two-thirds (69.0%) of all students are satisfied with their weight. One-fifth (19.9%) feel they are too fat, while one-tenth (11.1%) feel they are too thin.
- ❑ Over one-third (38.5%) of students are not trying to do anything about their weight. Another third (29.1%) are trying to lose weight; 20.8% want to keep from gaining weight, and 11.6% want to gain weight.
- ❑ Females are significantly more likely to believe that they are too fat, compared to males (26.0% vs 13.4%, respectively), whereas males are more likely to believe that they are too thin compared to females (15.8% vs 6.7%).
- ❑ Significantly more females than males want to lose weight (39.2% vs 18.4%,

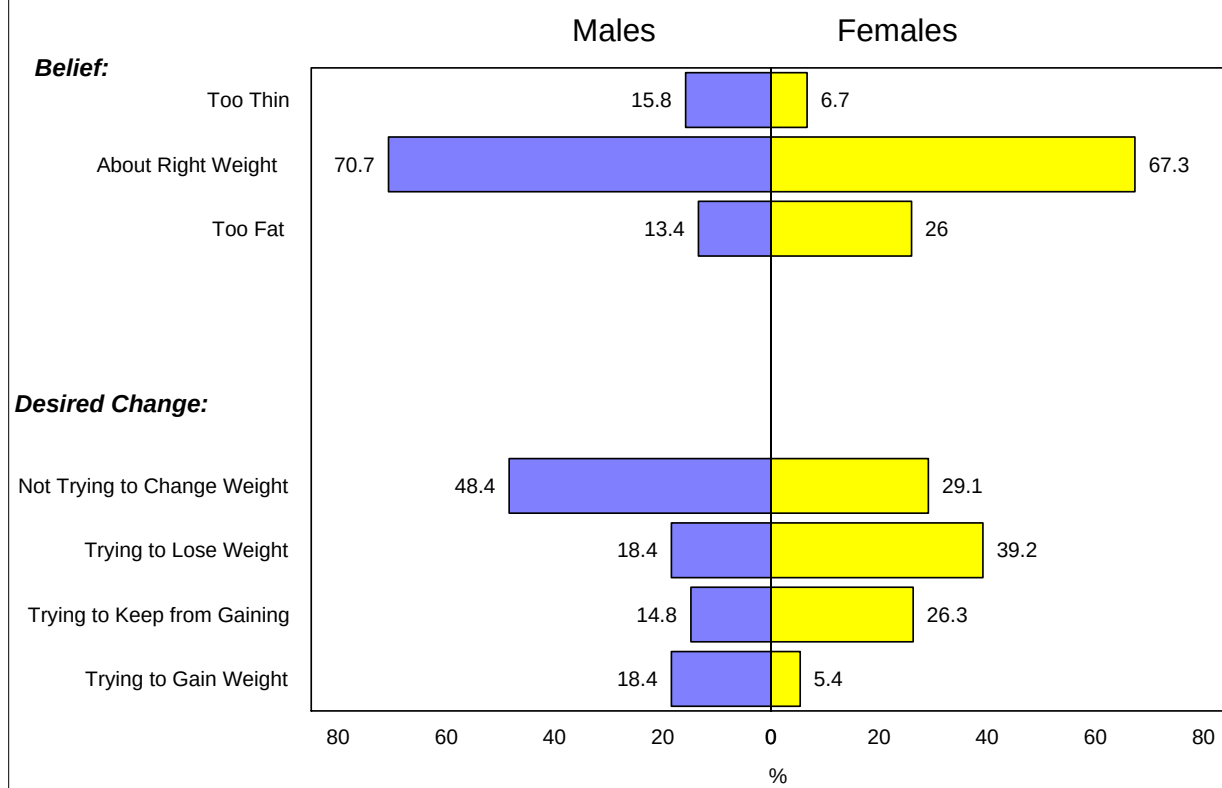
respectively), whereas more males want to gain weight (18.4% vs 5.4%).

- ❑ As grade increases, so does the desire to change one’s weight: reports of trying to lose weight increase with grade, from 22.8% of 7th-graders up to about 32% among older students.
- ❑ There are no significant regional differences for these two items.

2003 vs 2001 (Grades 7 to 12):

- ❑ There are no significant differences between 2001 and 2003 among the total sample regarding body image or the desire to change one’s weight. There are no changes among the subgroups.

Figure 3.5.7
Body Image Belief and Desired Change in Body Weight by
Sex, OSDUS 2003



3.6

Externalizing Indicators

This chapter deals with externalizing indicators that are acting-out behaviours such as delinquency, violence and gambling. Delinquency and violent activities are not only a social problem, but a public health issue as well.^{68, 69} Indeed, not only is violence related to physical injury, but having been a victim of violence or threatened with violence can also negatively impact a person's mental health.

3.6.1 Delinquent Acts

Since 1991, the OSDUS has asked students about their involvement in twelve delinquent acts. Specifically, the questions are as follows: *"How often (if ever) in the last 12 months have you done each of the following...?"*

Non-Violent Acts:

- *taken a car without permission*
- *banged up or damaged something on purpose (vandalism)*
- *sold marijuana or hashish*
- *taken things worth \$50 or less*
- *taken things worth more than \$50*
- *broken into a locked building (excluding home)*
- *sold drugs other than marijuana or hashish*
- *were thrown out of home*
- *ran away from home*

Violent Acts:

- *beat up or hurt anyone (excluding sibling fights)*
- *carried a weapon (e.g., gun or knife)*
- *taken part in gang fights*

Overall Delinquent Behaviour

(Table A3.6.1; Figures 3.6.1, 3.6.2)

2003 (Grades 7 to 12):

- ❑ Among all 12 acts, the 3 most frequent were: property damage (15.1%), theft under \$50 (14.7%), and beating up someone

(11.5%). The least reported activity was selling drugs other than cannabis (2.8%).

- ❑ Overall, 14.3% of students report involvement in at least 3 of the 12 behaviours. More males than females report this level (18.4% vs 10.6 %, respectively). Tenth graders (17.4%) and 11th-graders (18.4%) are the most likely to report at least 3 delinquent acts. There are no significant regional differences.

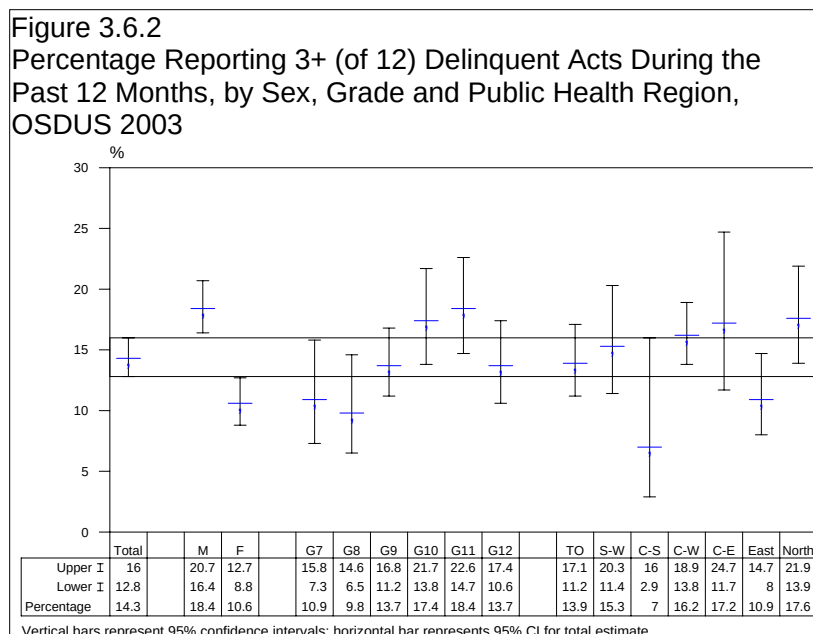
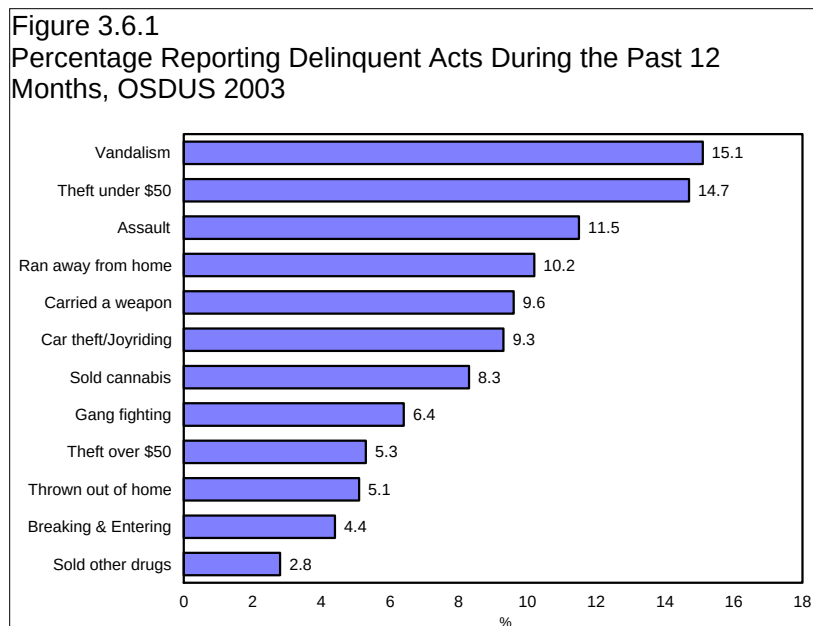
1999 – 2003 (Grades 7 to 12):

- ❑ The percentage of all students reporting at least 3 of the 12 acts significantly declined between 1999 and 2003, from 18.9% to 14.3%.
- ❑ There was a significant decline among males, from 25.9% in 1999 to 18.4% in 2003, but not among females.
- ❑ Among the grades, only 10th-graders showed a significant decline in 3 or more delinquent acts between 1999 (27%) and 2003 (17.4%).
- ❑ Among the four regions, only the West showed a significant decline in 3 or more delinquent acts between 1999 (21.3%) and 2003 (14.9%).

1993 – 2003 (Grades 7, 9, 11 only):

Note: 1991 is excluded in this analysis due to the absence of the weapon carrying question.

- Between 1993 and 2003, the peak in the proportion of students reporting 3 or more acts occurred in 1997 (21.0%). Since that time, the percentage declined and has been holding steady in recent years, at about 14%.



3.6.2 Non-Aggressive and Non-Violent Acts

(Table A3.6.1; Figures 3.6.3 to 3.6.5)

2003 (Grades 7 to 12):

- ❑ Males are significantly more likely than females to report each of the 9 non-violent acts, except for being thrown out of one's home.
- ❑ Participation in 5 of the 9 non-violent acts is significantly related to grade: Generally, the highest rate of activity occurs among 10th-, 11th- and 12th-graders:
 - 10th- and 11th-graders are most likely to report theft of goods worth \$50 or less (17%-18%);
 - 11th-graders are most likely to report car theft (16.2%), theft of goods worth more than \$50 (9.1%), and being thrown out of one's home (7.5%);
 - 11th- and 12th-graders are most likely to report selling cannabis (about 12%); and selling other drugs (about 5%).
 - There is no grade difference for vandalism, break and entering, selling other drugs, and running away from home.
- ❑ Of the 9 non-violent acts, there is a significant regional difference only for running away from home. Students in the North (14.8%) are more likely to report running away from home, while Toronto (6.2%) students are the least likely. Western and Eastern students fall in between at around 11%.

1999 – 2003 (Grades 7 to 12):

- ❑ Over the short-term, only reports of vandalism changed between 1999 and 2003 among the total sample, decreasing from 24.1% in 1999 to 15.1% in 2003.
- ❑ Vandalism also declined between 1999 and 2003 among the following subgroups:
 - males (from 29.3% to 18.2%)
 - females (from 18.9% to 12.3%)
 - 8th-graders (from 26.0% to 12.6%)
 - 9th-graders (from 26.8% to 16.1%)
 - 10th-graders (from 34.2% to 16.3%)
 - Northern students (from 23.0% to 16.6%)
 - Western students (from 25.6% to 14.8%)
 - Eastern students (from 26.1% to 14.4%).
- ❑ Cannabis selling significantly increased among Toronto students, from 4.4% in 1999 to 10.6% in 2003.
- ❑ Breaking and entering significantly decreased among 8th-graders between 1999 (6.8%) and 2003 (2.2%).
- ❑ Running away from home significantly increased among students in the North region between 1999 (8.2%) and 2003 (14.8%).

1991 – 2003 (Grades 7, 9, 11 only):

Over the past decade or so, 3 non-violent acts significantly changed among the total sample of grades 7, 9, and 11:

- ❑ Vandalism increased significantly among the total sample between 1991 (19.8%) and 1999 (22.9%), but then dropped in 2001 (14.8%) and still remains relatively low in 2003 at 15.9%.
- ❑ Among the total sample, theft under \$50 has

been declining since 1995 (21.1%) and is still currently lower at 14.3%.

- The percentage reporting selling cannabis is significantly higher in 2003 (7.8%) compared to a decade ago (3.1% in 1991).

Figure 3.6.3
Percentage Reporting Non-Violent Delinquent Acts During the Past 12 Months by Sex, OSDUS 2003

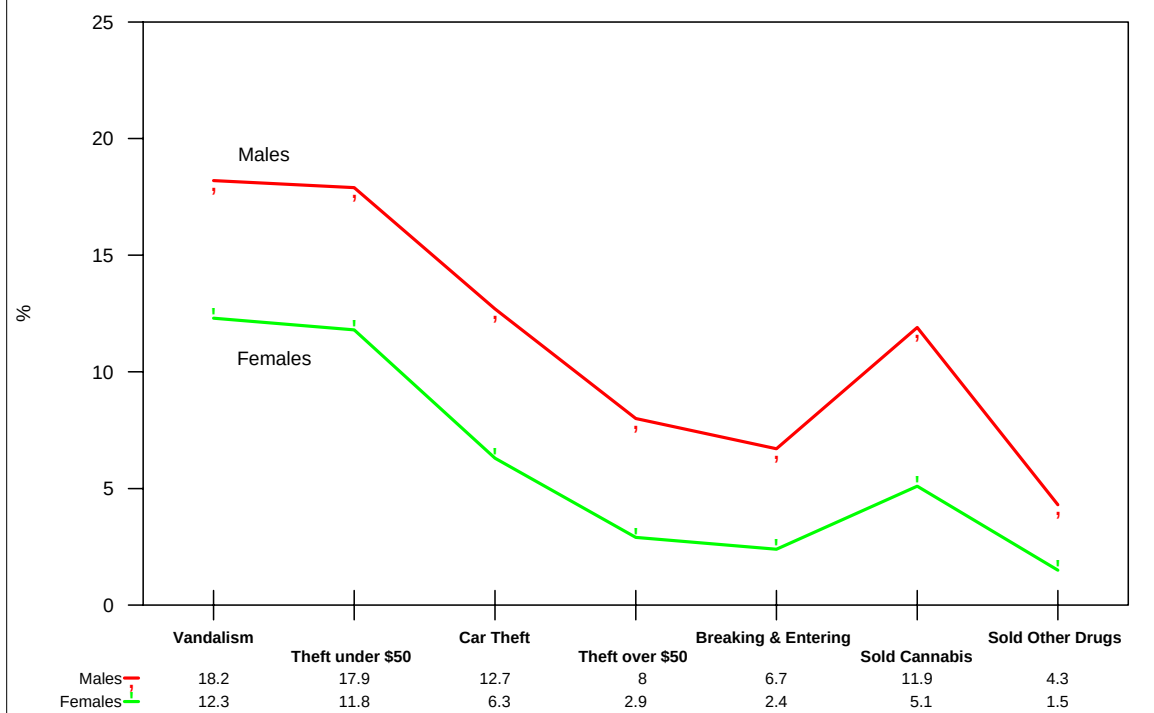


Figure 3.6.4
Percentage Reporting Non-Violent Delinquent Acts During the Past 12 Months by Grade, OSDUS 2003

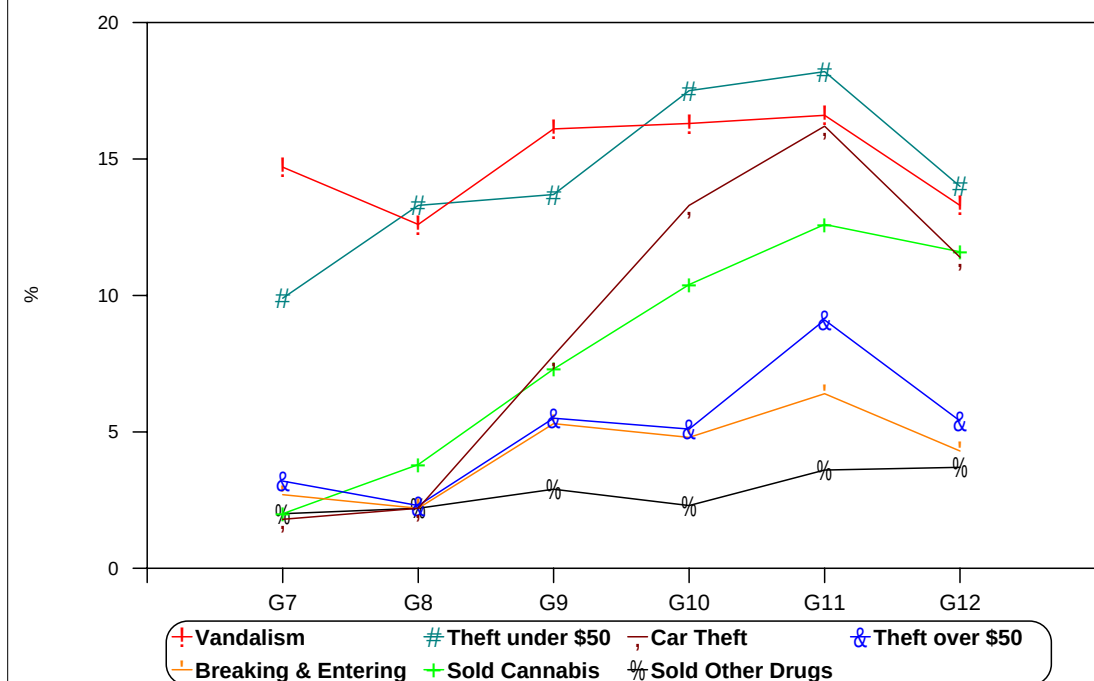
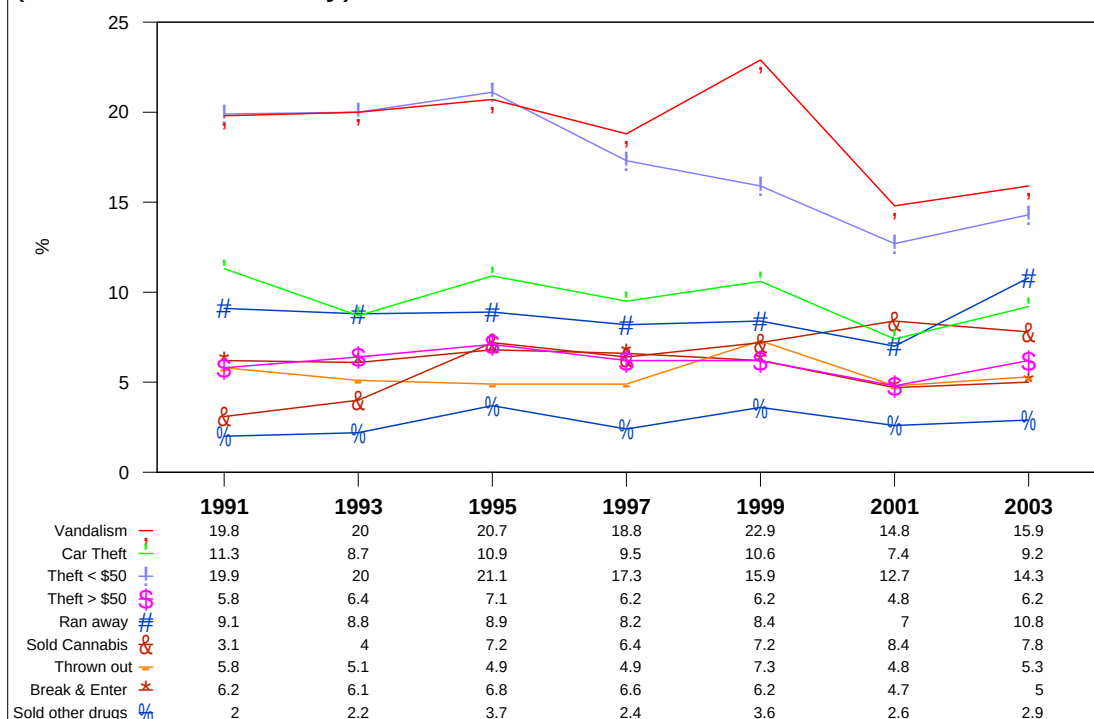


Figure 3.6.5
Percentage Reporting Non-Violent Delinquent Acts, OSDUS 1991-2003 (Grades 7, 9, 11, only)



3.6.3 Aggressive and Violent Acts

(Table A3.6.1; Figures 3.6.6 to 3.6.9)

Violent behaviour among youth is increasingly becoming a major public concern. In this section, we focus on past year prevalence of *assault, carrying a weapon, and gang fighting*.

2003 (Grades 7 to 12):

Assault

- ❑ Among all students, 11.5% (about 108,400) assaulted someone at least once during the 12 months before the survey, with more males than females reporting so (14.4% vs 8.9%).
- ❑ Although there is grade variation in assault (ranging from 9.0% of 12th-graders to 15.1% of 11th-graders), it is not statistically significant.
- ❑ There are significant differences among the seven public health regions, with students in Toronto and the East regions (about 9%) less likely to report assaulting someone, and students in the Central-East (16.7%) and North (15.3%) regions are most likely.

Weapon Carrying

- ❑ Overall, 9.6% of all students (about 90,200) report carrying a weapon in the 12 months before the survey.
- ❑ Males are significantly more likely than females to report carrying a weapon (14.9% vs 4.9%).
- ❑ Although weapon carrying varies by grade (ranging from 6.6% of 8th-graders to 12.2% of 9th-graders), these are not statistically significant differences.
- ❑ No significant regional differences exist.

Gang Fighting

- ❑ Among all students, 6.4% (about 60,500) report participating in gang fighting at least

once during the past 12 months.

- ❑ Gang fighting is more prevalent among males than females (9.0% vs 4.1%).
- ❑ Although 8th-graders (3.7%) are the least likely to report gang fighting, the differences among the grades are not significant
- ❑ Gang fighting does not significantly differ by public health region.

1999 – 2003 (Grades 7 to 12):

- ❑ The percentage of all students reporting assaulting someone significantly declined between 1999 and 2001 (from 19.9% to 12.8%), and still remains relatively low in 2003 at 11.5%.
- ❑ Among all students, reports of weapon carrying significantly declined between 1999 (13.5%) and 2003 (9.6%).
- ❑ No significant short-term changes were found for gang fighting among the total sample of students.
- ❑ Assault declined among the following subgroups:
 - males (from 29.4% in 1999 to 14.4% in 2003)
 - 7th-graders (from 17.1% to 11.1%)
 - 8th-graders (from 24.8% to 12.3%)
 - 9th-graders (from 22.6% to 11.0%)
 - 10th-graders (from 23.5% to 10.1%)
 - Toronto (from 17.9% to 8.8%)
 - the West (from 22.2% to 12.0%)
 - the East (from 18.6% to 11.3%).
- ❑ Weapon carrying declined among:
 - males (from 21.5% in 1999 to 14.9% in 2003)
 - 8th-graders (from 15.2% to 6.6%)
 - 10th-graders (from 18.3% to 8.6%)
 - the West (from 14.5% to 9.5%).

- Gang fighting declined only among 8th-graders (from 9.8% in 1999 down to 3.7% in 2003.)

still remains lower at 12.5% in 2003.

- The percentage reporting carrying a weapon declined steadily over the 1990s (16.2% in 1993 vs 11.4% in 2003).

1991 – 2003 (Grades 7, 9, 11 only):

- Assault peaked in 1997 (22.0%) and subsequently declined to 12.3% in 2001 and

- Gang fighting remained stable between 1991 and 2003 among the total sample, hovering between 5% and 7%.

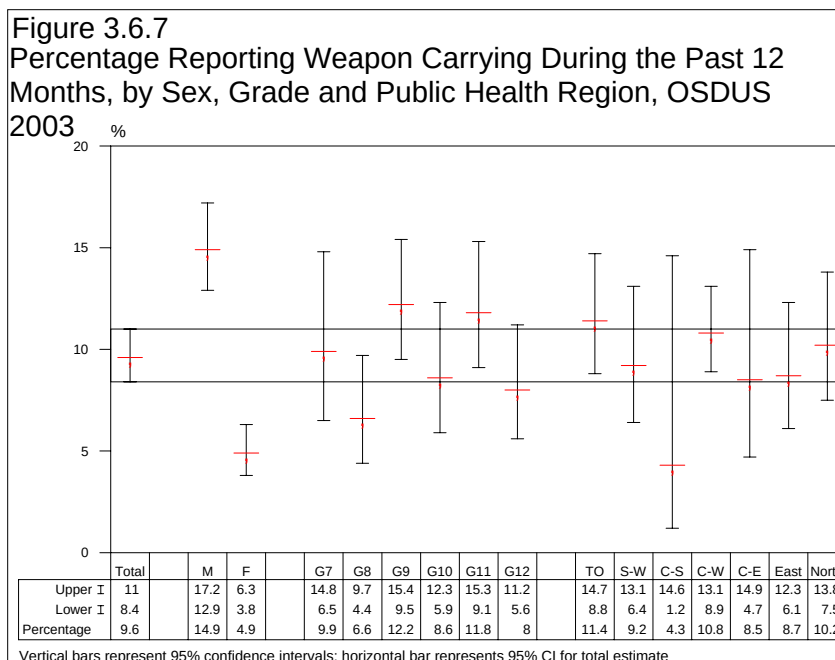
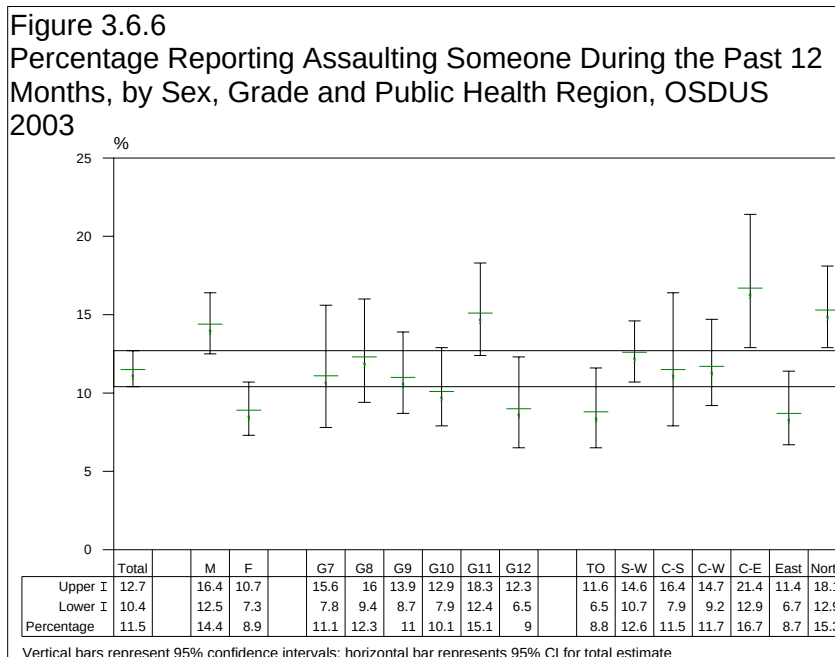


Figure 3.6.8
Percentage Reporting Gang Fighting During the Past 12 Months, by Sex, Grade and Public Health Region, OSDUS 2003

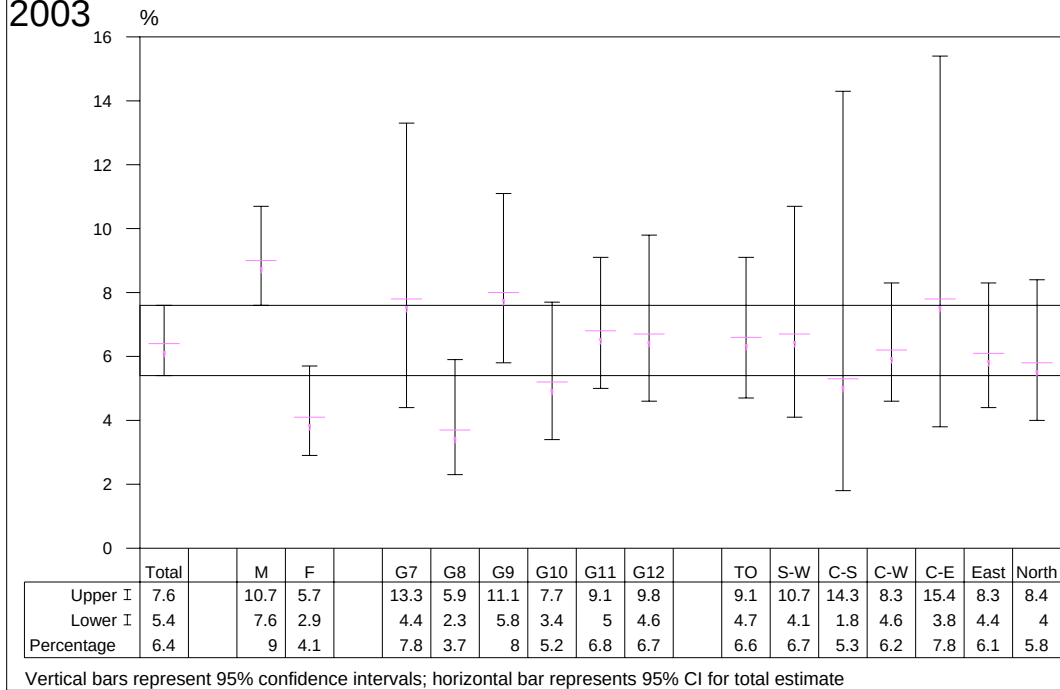
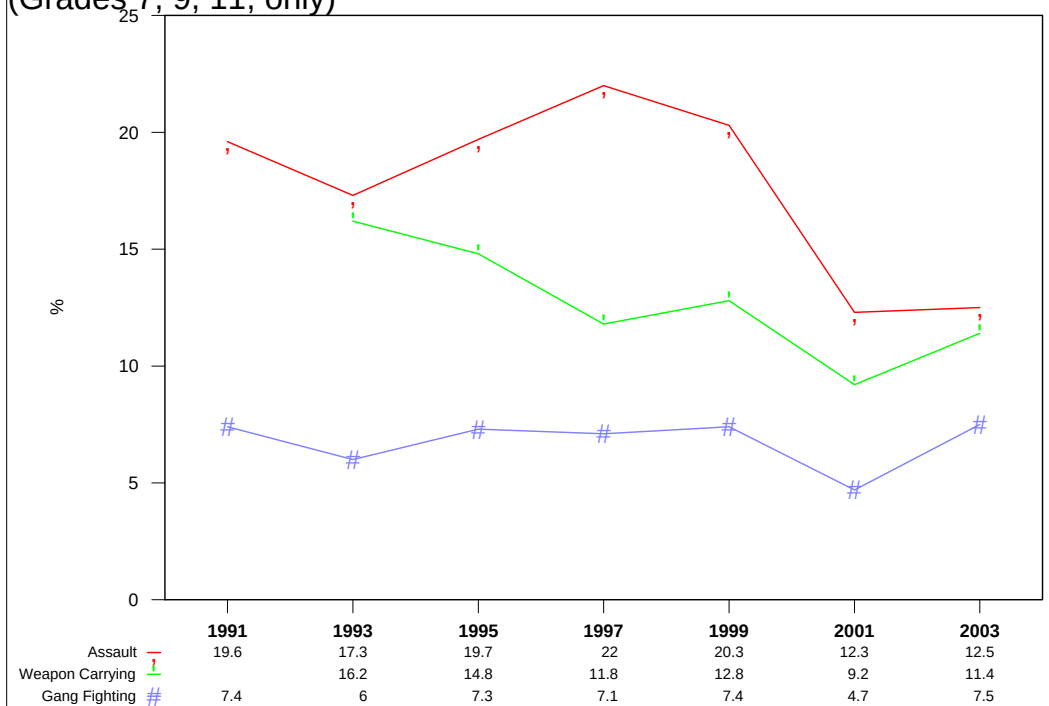


Figure 3.6.9
Percentage Reporting Violent Acts, OSDUS 1991-2003
(Grades 7, 9, 11, only)



3.6.4 Violence on School Property

(Table A3.6.2; Figures 3.6.10, 3.6.11)

Starting in 2001, the *OSDUS* included a question about fighting on school property: “*During the last 12 months, how many times were you in a physical fight on school property?*” In this section, we describe the percentage reporting at least one event (see Appendix Table 3.6.2 for detailed categories: never, once, 2 or more times).

Starting in 2003, the *OSDUS* asked students about being threatened with a weapon on school property. Specifically, the question was: “*During the last 12 months, how many times has someone threatened or injured you with a weapon, such as a gun, knife or club on school property?*”. In this section, we describe the percentage reporting at least one event (see Appendix for detailed categories: never, once, 2 or more times).

2003 (Grades 7 to 12):

Physical Fighting

- ❑ Among the total sample, 17.6% (about 168,100 of students in Ontario) report fighting on school property at least once in the past 12 months (10.6% report one time, while 7.0% report two or more times).
- ❑ There is a significant sex difference, with males much more likely to report fighting than females (26.8% vs 9.2%, respectively).
- ❑ There is significant variation by grade: 7th-graders (29.7%) are the most likely to fight at school, whereas 12th-graders are the least likely (8.8%).
- ❑ There are no significant differences among the public health regions.

Threatened or Injured with a Weapon

- ❑ Among all students, 7.7% (about 73,200 students) report having been threatened or injured with a weapon on school property at least once in the past 12 months (4.5% report that this occurred only once, while 3.2% report two or more occasions).
- ❑ Males are significantly more likely than females to report being threatened or injured with a weapon at school (10.1% vs 5.5%, respectively).
- ❑ Surprisingly, despite some variation, there are no significant differences among the grades.
- ❑ There are no significant differences among the public health regions.

Figure 3.6.10
Percentage Reporting Physically Fighting at School at Least Once
During the Past 12 Months, by Sex, Grade and Public Health
Region, OSDUS 2003

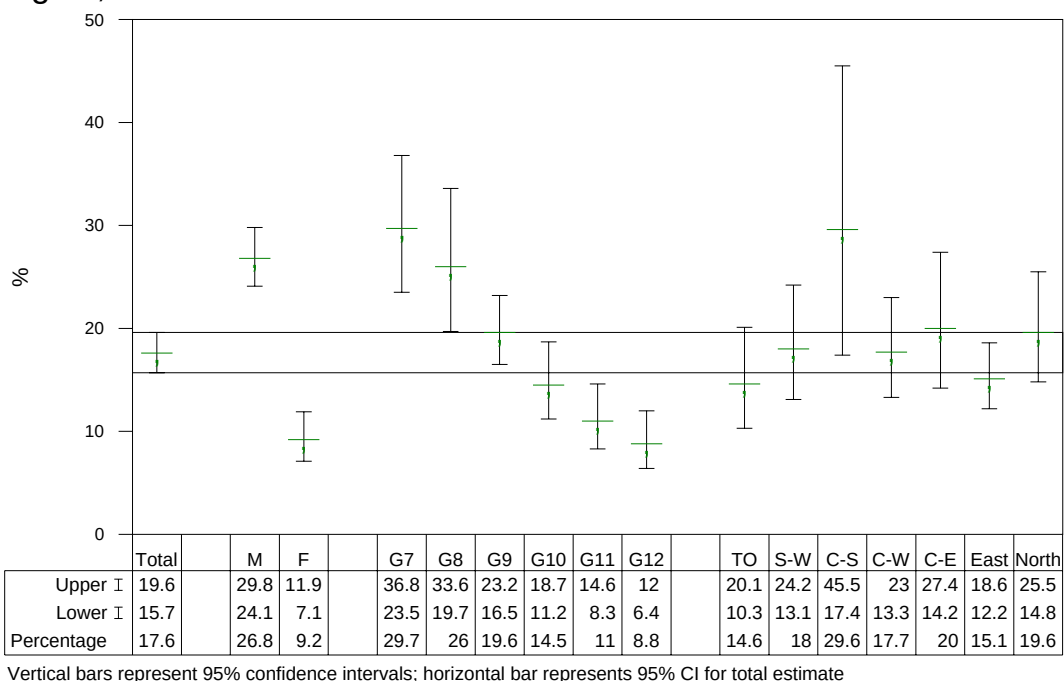
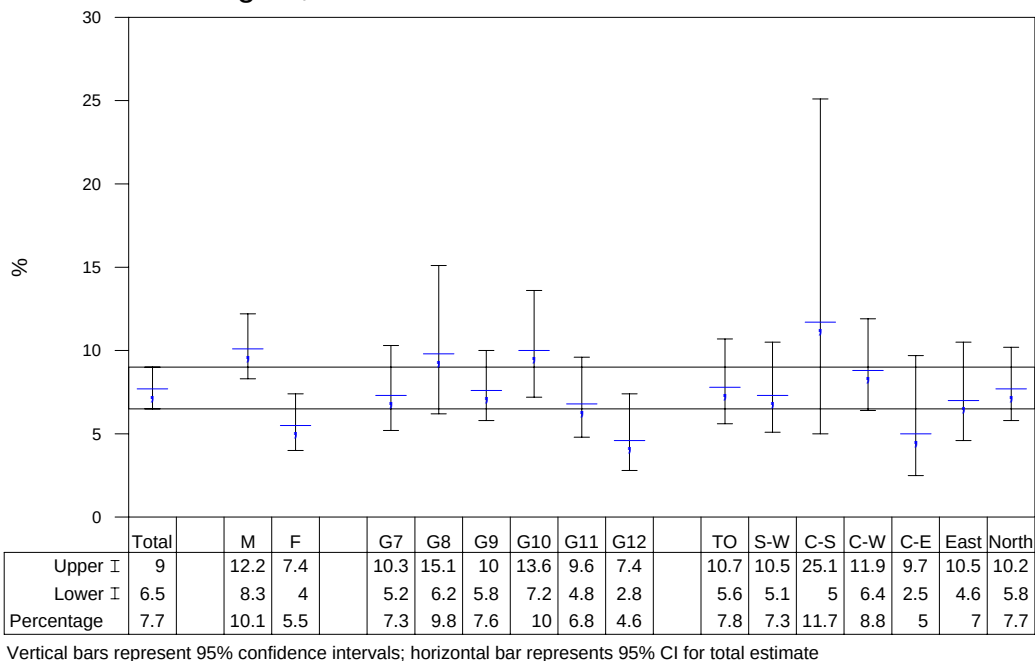


Figure 3.6.11
Percentage Reporting Being Threatened or Injured with a Weapon at
School at Least Once During the Past 12 Months, by Sex, Grade and
Public Health Region, OSDUS 2003



3.6.5 Bullying at School

(Table A3.6.3; Figures 3.6.12, 3.6.13)

The 2003 *OSDUS* included four questions about bullying. Bullying was defined in the questionnaire as "...when one or more people tease, hurt or upset a weaker person on purpose." Students were asked about the typical way they were bullied at school, and the typical way they bullied others, if at all. The questions were: "*In what way were you bullied the most at school?*" and "*In what way did you bully other students the most at school?*" For each of these questions, students were asked to choose only one of the following response options: *physical attacks* (for example, beat up, pushed or kicked), *verbal attacks* (for example, teased, threatened, spread rumours), *stole or damaged possessions*, or not involved in bullying at all.

Students were also asked about the frequency of bullying with the questions: "*Since September, how often have you been bullied at school?*" and "*Since September, how often have you taken part in bullying other students at school?*". For this report, we combined responses into three categories: daily or weekly, monthly or less often, and never.

2003 (Grades 7 to 12):

Bullying Victims

- ❑ Among all students in grades 7 to 12, 32.7% have been bullied at school since September. This represents about 310,300 students in Ontario.
- ❑ The most prevalent form of victimization is verbal (26.5%), while 3.9% were bullied physically, and 2.3% were victims of theft or vandalism.
- ❑ About 8% of students report being bullied on a daily or weekly basis, and about 21% were bullied monthly or less often.

- ❑ Significantly more males are bullied than females (35.3% vs 30.3%, respectively). Males are more likely to be bullied in a physical manner than are females (7.3% vs 0.8%), and also more likely to be victims of theft or vandalism (3.3% vs 1.5%). The frequency of being bullied does not significantly vary between the sexes.
- ❑ There is significant grade variation, with 7th-graders (47.1%) the most likely to be bullied and 12th-graders (19.8%) the least likely. Seventh graders are the most likely to be bullied physically (8.2%) and verbally (35.2%). They are also the most likely to be bullied on a daily/weekly basis (14.7%).
- ❑ Among the public health regions, Toronto students (24.8%) are the least likely to be bullied, whereas students in the Central-South region are the most likely (47.8%).

Bullying Perpetrators

- ❑ Among all students, 29.7% report bullying other students at school. This represents about 282,900 students in Ontario.
- ❑ The most prevalent form of bullying others is through verbal attacks (24.9%), followed by physical attacks (3.9%), and theft/vandalism (1.0%).
- ❑ About 7% of students reported bullying someone on a daily or weekly basis, and about 23% did so monthly or less often.
- ❑ Males are more likely to report bullying someone than are females (34.9% vs 25.1%, respectively).
- ❑ Students in grades 7 to 9 are the most likely to report bullying someone (about one-third in each grade), whereas 12th-graders are the least likely (22.1%).
- ❑ Again, Toronto students (22.0%) are the least likely to report bullying others, whereas students in North (36.3%) region are most likely.

Figure 3.6.12
Percentage Reporting Being Bullied Since September, by Sex, Grade and Public Health Region, OSDUS 2003

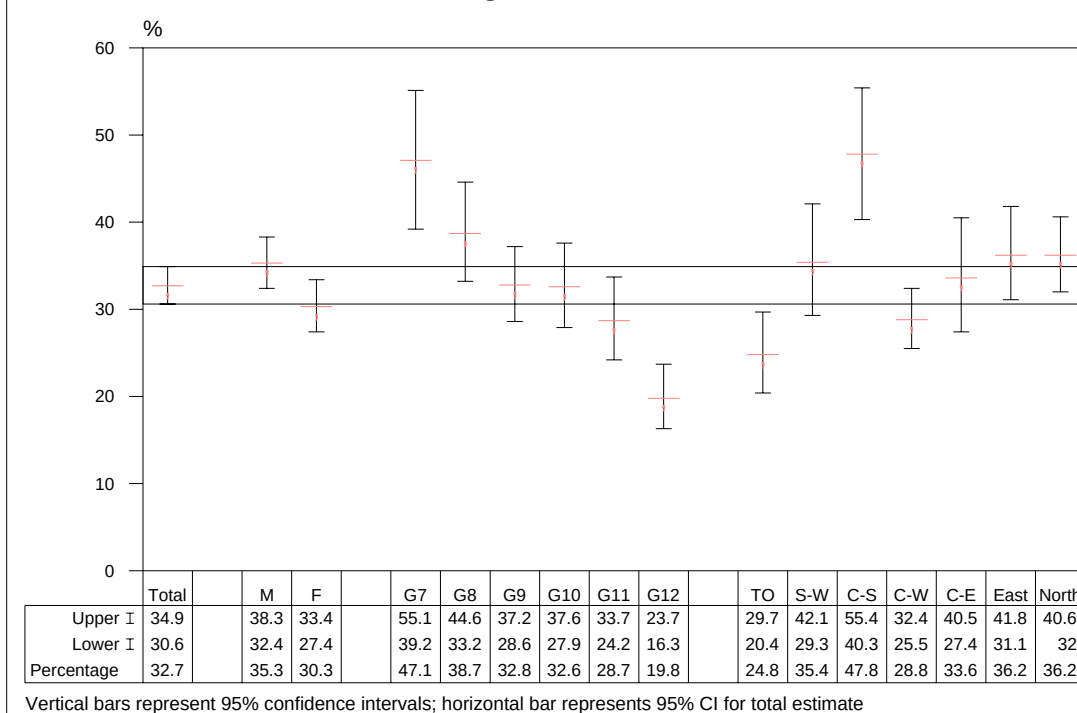
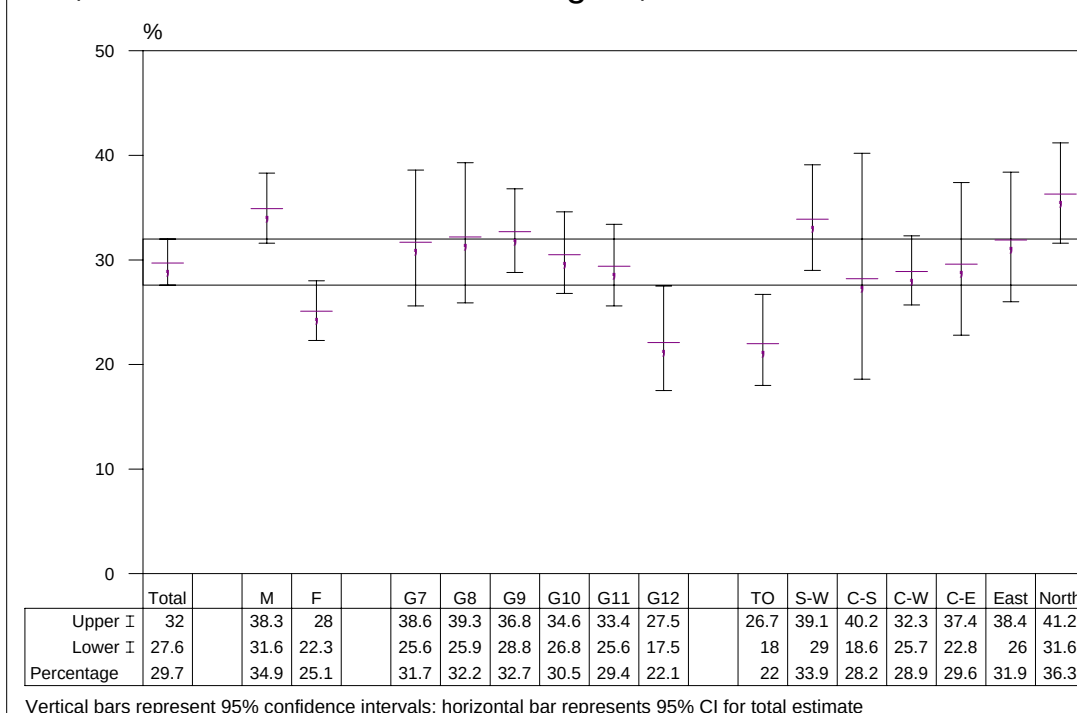


Figure 3.6.13
Percentage Reporting Bullying Someone Since September, by Sex, Grade and Public Health Region, OSDUS 2003



3.6.6 Gambling Activity

(Table A3.6.4; Figures 3.6.14 to 3.6.16)

The 2003 *OSDUS* contained questions about gambling activity during the past year. Students were asked “How often (if ever) in the last 12 months have you done each of the following?” Ten activities were included, seven of which were also asked about in 2001:

- Played cards for money?
- Played bingo for money?
- Played dice for money (new)
- Bet money in sports pools?
- Bought sports lottery tickets (such as *Sports Select* or *Proline*)?
- Bought any other lottery tickets, including instant lottery (such as 6-49, *Scratch & Win*, pull-tabs)?
- Bet money on video gambling machines, slot machines, or other gambling machines?
- Bet money at a casino in Ontario?
- Bet money over the Internet (new)
- Bet money in other ways (new)

The percentage reporting engaging in at least 5 of the above activities is also presented as an indicator of heavy gambling activity.

2003 (Grades 7 to 12):

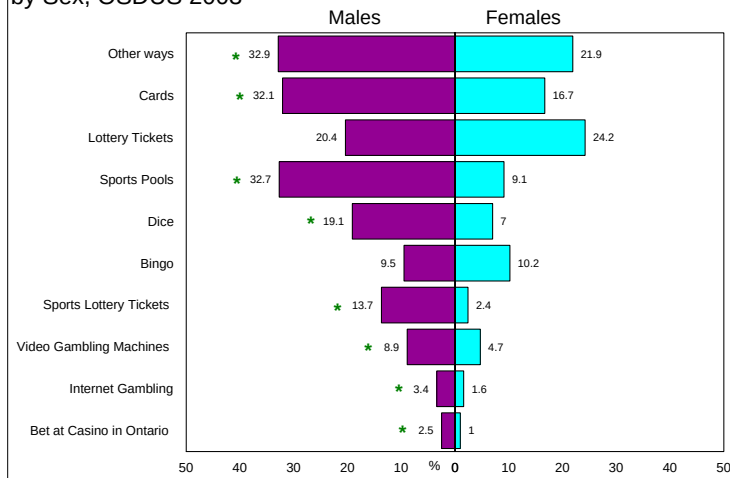
- Among all students, the 10 activities ranked in the following manner, from most to least prevalent:

Gambled in other ways.....	27.1%
Cards	24.0%
Lottery tickets	22.4%
Sports pools	20.3%
Dice	12.7%
Bingo.....	9.9%
Sports lottery tickets.....	7.8%
Video gambling machines.....	6.7%
Internet gambling	2.5%
Casinos.....	1.7%

- Among all students, 6.1% gambled in at least 5 of the 10 activities during the past 12 months, and this group can be considered to be heavy gamblers. The percentage represents about 58,000 students across Ontario.
- Eight of the gambling behaviours vary by sex. Males are significantly more likely than females to play cards for money (32.1% vs 16.7%, respectively); play dice for money (19.1% vs 7.0%); bet in sports pools (32.7% vs 9.1%); buy sports lottery tickets (13.7% vs 2.4%); play video gambling machines (8.9% vs 4.7%); bet money in a casino (2.5% vs 1.0%); bet over the Internet (3.4% vs 1.6%); and to gamble in other ways not listed (32.9% vs 21.9%). Males are also more likely to report heavy gambling activity than females (9.6% vs 3.0%).
- There are significant grade differences for: playing dice for money, sports pools, sports lottery tickets, other lottery tickets, and casino gambling. Generally, these activities gradually increase with grade, with the exception of playing dice, which peaks in grade 9 (16.7%) and sports pool gambling, which peaks in grade 10 (24.1%). Despite some variation, heavy gambling activity does not significantly differ by grade.

- Some gambling activities significantly vary by public health region. Playing bingo for money is most likely among students in the Central-South and Central-East regions (at 16% each). Playing dice is most likely in Toronto and the Central-East (18% each). Sports pool betting is most likely in the Central-East (26%). Central-South students are most likely to gamble at video gambling machines (13%) and to bet over the Internet (7%). There is no significant regional variation in heavy gambling activity.

Figure 3.6.14
Percentage Reporting Gambling Activities During the Past 12 Months
by Sex, OSDUS 2003



Notes: Activities ranked according to total sample percentages; * males significantly higher, $p < .05$

Figure 3.6.15
Percentage Reporting Number of Gambling Activities During the Past
12 Months by Sex, OSDUS 2003

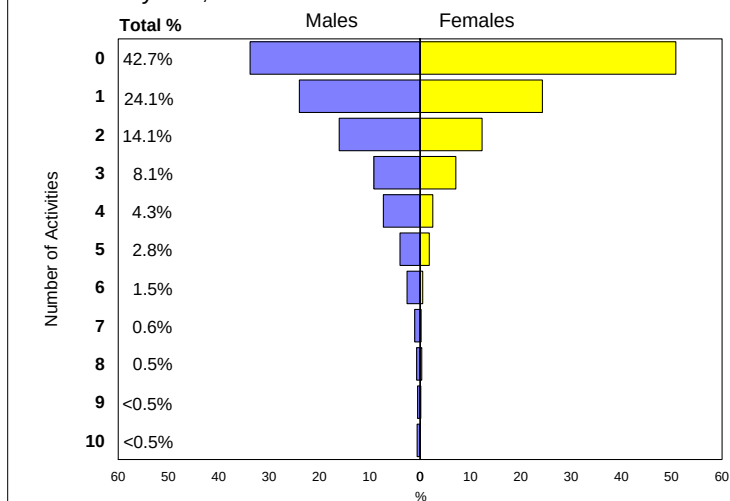
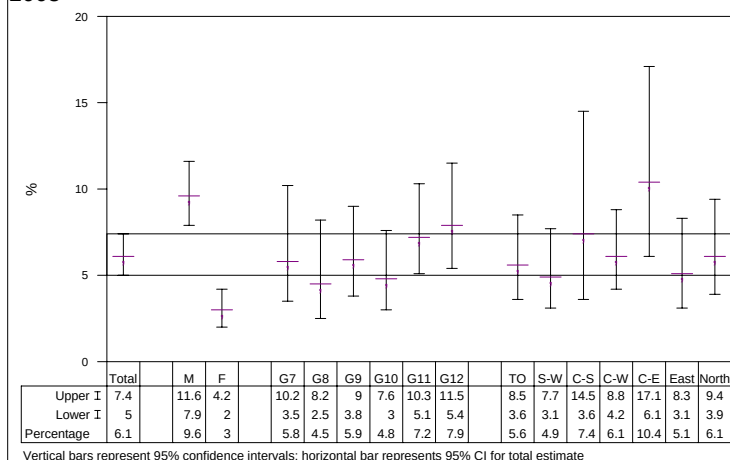


Figure 3.6.16
Percentage Reporting Gambling at 5 or More Activities (of 10) During
the Past 12 Months, by Sex, Grade and Public Health Region, OSDUS
2003



Vertical bars represent 95% confidence intervals; horizontal bar represents 95% CI for total estimate

3.6.7 Gambling Problems

(Table A3.6.5; Figures 3.6.17, 3.6.18)

Starting in 1999, the OSDUS asked students about gambling problems using the *South Oaks Gambling Screen Revised for Adolescents* (SOGS-RA).⁷⁰ The following 12 questions were asked, each referring to the past 12 months:

- *How often have you gone back another day to try to win back the money you lost?*
- *When you were betting, have you ever told others you were winning money when you really weren't?*
- *Has your betting ever caused any problems for you such as arguments with family/friends, problems at school/work?*
- *Have you ever gambled more than you had planned to?*
- *Has anyone criticized your betting or told you that you had a gambling problem, regardless of whether you thought it was true or not?*
- *Have you ever felt bad about the amount you bet, or about what happens when you bet money?*
- *Have you ever felt that you would like to stop betting money but didn't think you could?*
- *Have you ever hidden any betting slips, IOUs, lottery tickets, money that you won, or other signs of gambling from family/friends?*
- *Have you had arguments with family/friends because of the money you spend on gambling?*
- *Have you borrowed money to bet and not paid it back?*
- *Have you ever skipped or been absent from school or work due to betting activities?*
- *Have you borrowed money or stolen something in order to bet or to cover gambling debts?*

Students were also asked what was the largest amount of money gambled in the past 12 months, with response options ranging from \$1 or less, to \$200 or more.

Two indicators of a potential gambling problem are used in this report. The first identifies youth at risk for **any gambling problem**, and is defined by answering positive to 2 or more of the 12 questions. The second identifies those at risk for a **pathological gambling problem**, and is

defined by answering positive to 4 or more questions. The reliability coefficient (α) for these 12 items was 0.82.

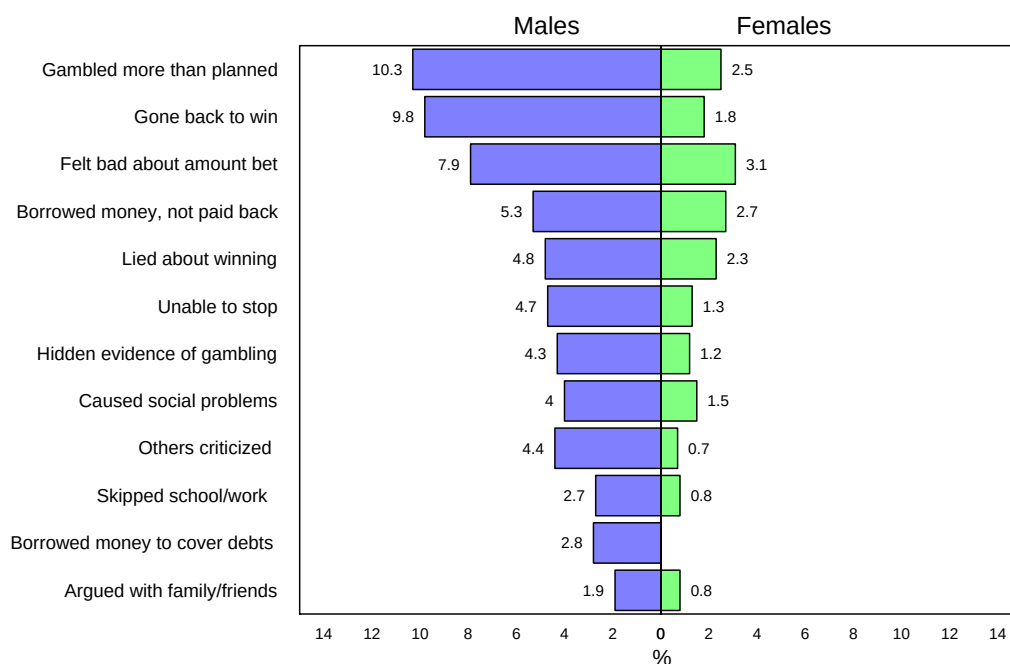
2003 (Grades 7 to 12):

- ❑ Overall, 8.4% of students have any gambling problem, and 3.5% (about 33,800 Ontario students) report signs of pathological gambling.
- ❑ Among those indicating that they gambled in the past year, the majority (85.3%) report that the largest amount of money gambled was less than \$50. About 6% percent report gambling between \$50 and \$99; 3.3% report between \$100 and \$199; and another 5.4% report \$200 or more.
- ❑ Males are more likely than females to indicate a pathological gambling problem (6.0% vs 1.1%).
- ❑ Despite some variation, there are no significant grade differences regarding a pathological gambling problem.
- ❑ The prevalence of a pathological gambling problem does not significantly differ by public health region.

1999 – 2003 (Grades 7 to 12):

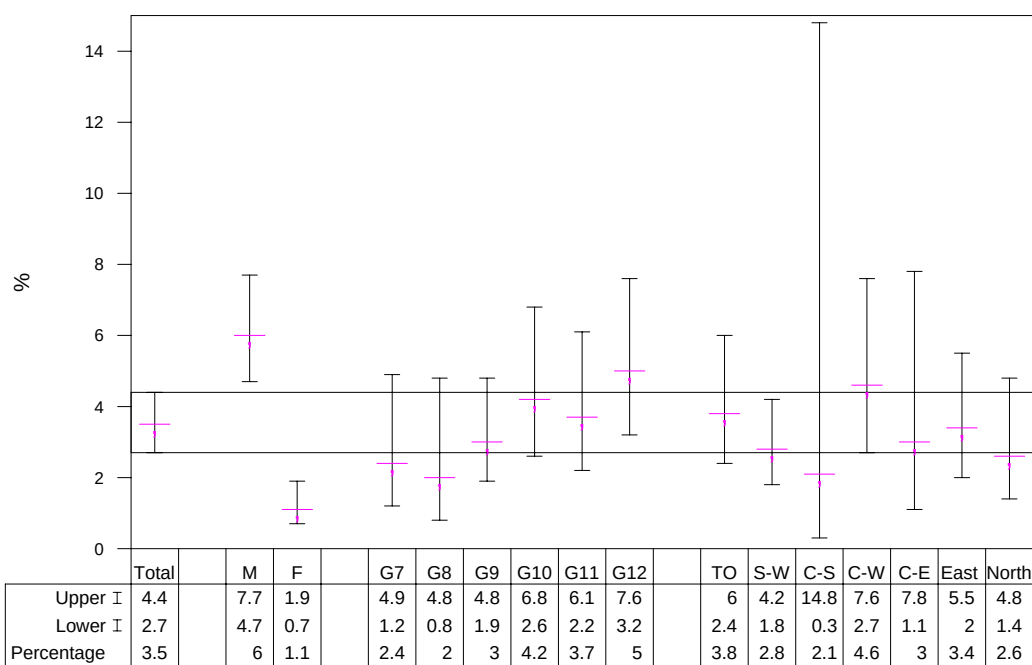
- ❑ The percentage of all students reporting a pathological gambling problem significantly declined between 1999 and 2003, from 6.2% to 3.5%.
- ❑ Among males, the percentage indicating a pathological gambling problem significantly declined between 1999 and 2003 (from 9.6% to 6.0%).
- ❑ Pathological gambling significantly declined among Toronto student between 1999 and 2003 (from 9.1% to 3.8%).

Figure 3.6.17
Percentage Reporting Specific Gambling Problems (SOGS-RA) by Sex, OSDUS 2003



Notes: Problems ranked according to total sample percentages; males significantly higher on all, $p < .05$

Figure 3.6.18
Percentage Reporting Pathological Gambling Problem (Past 12 Months) by Sex, Grade and Public Health Region, OSDUS 2003



Vertical bars represent 95% confidence intervals; horizontal bar represents 95% confidence interval for total estimate

3.7

Co-Existing Problems

This chapter examines the overlap between substance use, mental health, and delinquent behaviour. Given the potential array of mental health and substance use problems, it is important to consider the co-occurrence of problems experienced by students.

Research on co-existing substance use and mental disorders among clinical samples indicate that this problem is not uncommon. Epidemiological estimates, however, are less conclusive mainly due to the lack of general population surveys on adolescents in Canada and the United States. Much is yet to be understood about the prevalence of co-existing disorders, the pattern of age of onset, and about the specific combinations of substances and mental health problems.

A Canadian survey of adolescents aged 12-16 years found a strong association between an existing mental disorder (e.g., conduct disorder) and substance use, especially among females.⁷¹ A U.S. survey found that adolescents aged 12-17 with severe emotional or behavioural problems were much more likely to be dependent on alcohol or illicit drugs, than those without problems.⁷² The U.S. *National Comorbidity Survey* found that half of those aged 15-54 who had a mental disorder during their lifetime also had a history of substance use disorder.⁷³ Notably, studies have shown that younger age groups have a higher risk of co-existing disorders than older age groups.^{73, 74}

In general, mental health problems (e.g., anxiety disorders, conduct disorder, depression) tend to precede the onset of substance abuse.⁷⁵⁻⁷⁷ Some have explained this via the “self-medicating hypothesis” which argues that substance abuse is a coping strategy. Another view is the “common cause hypotheses” that suggests pre-existing factors common to both mental health and substance abuse, such as stress, play a role in the

onset of both conditions.⁹

3.7.1 Configurations of Risk

(Table A3.7.1; Figures 3.7.1, 3.7.2)

This section presents the degree of overlap among the following 4 problems: (1) elevated psychological distress (as indicated by a score of 3 or more on the GHQ-12 screener – see Chapter 3.5); (2) hazardous drinking (indicated by a score of 8 or more on the AUDIT screener); a drug problem (indicated by a score of 2 or more on the CRAFFT-D screener)*; and (4) delinquent behaviour (indicated by engaging in 3 or more of 12 delinquent acts – see Chapter 3.6). This section examines the nature of the overlap, and the group of students who report 3 or all 4 of these problems.

2003 (Grades 7 to 12):

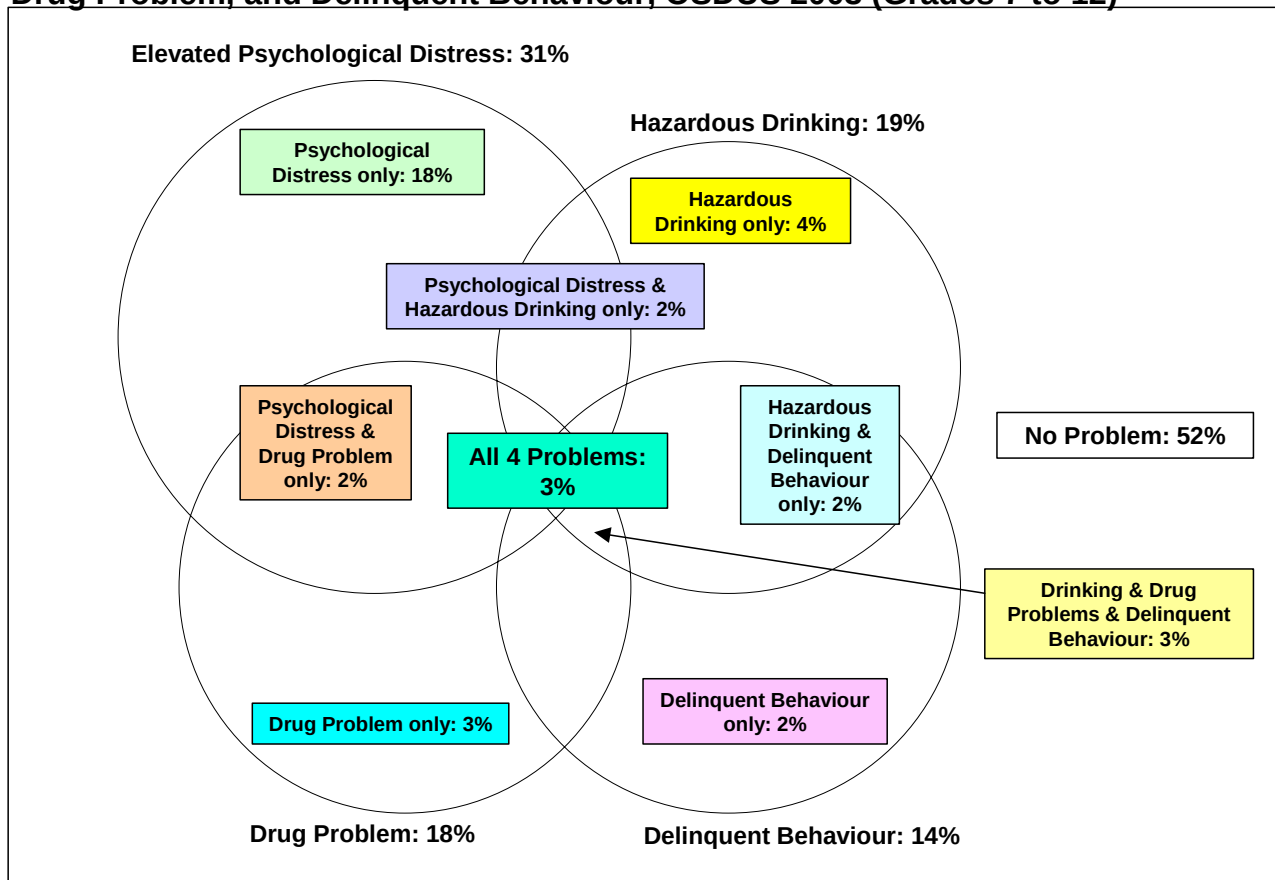
- ❑ Overall, the majority (52.3%) of students report none of these 4 problems. About 27.5% report 1 problem, 10.0% report 2 problems, 7.4% report 3 problems, and 2.7% report all 4 problems.
- ❑ By far, the most prevalent configuration is psychological distress only, reported by 18% of students. The remaining configurations, such as hazardous drinking only or drug problem only, are reported by 4% or less of the sample (see Table A3.7.1).
- ❑ The percentage reporting 3 or all 4 problems is 10.1%. This represents about 100,200 students across Ontario.

* Details on the AUDIT and CRAFFT-D screeners can be found in the companion OSDUS drug report “*Drug Use Among Ontario Students, 1977-2003: Detailed OSDUS Findings*” available on our website:
http://www.camh.net/research/population_life_course.html

- ❑ There is no significant sex difference in reports of 3 or all 4 of these co-existing problems (9.8% for females, 10.4% for males).
- ❑ There is significant grade variation, with 11th-graders (15.5%) most likely to experience 3 or all 4 of these problems.
- ❑ There are no significant differences among the public health regions.

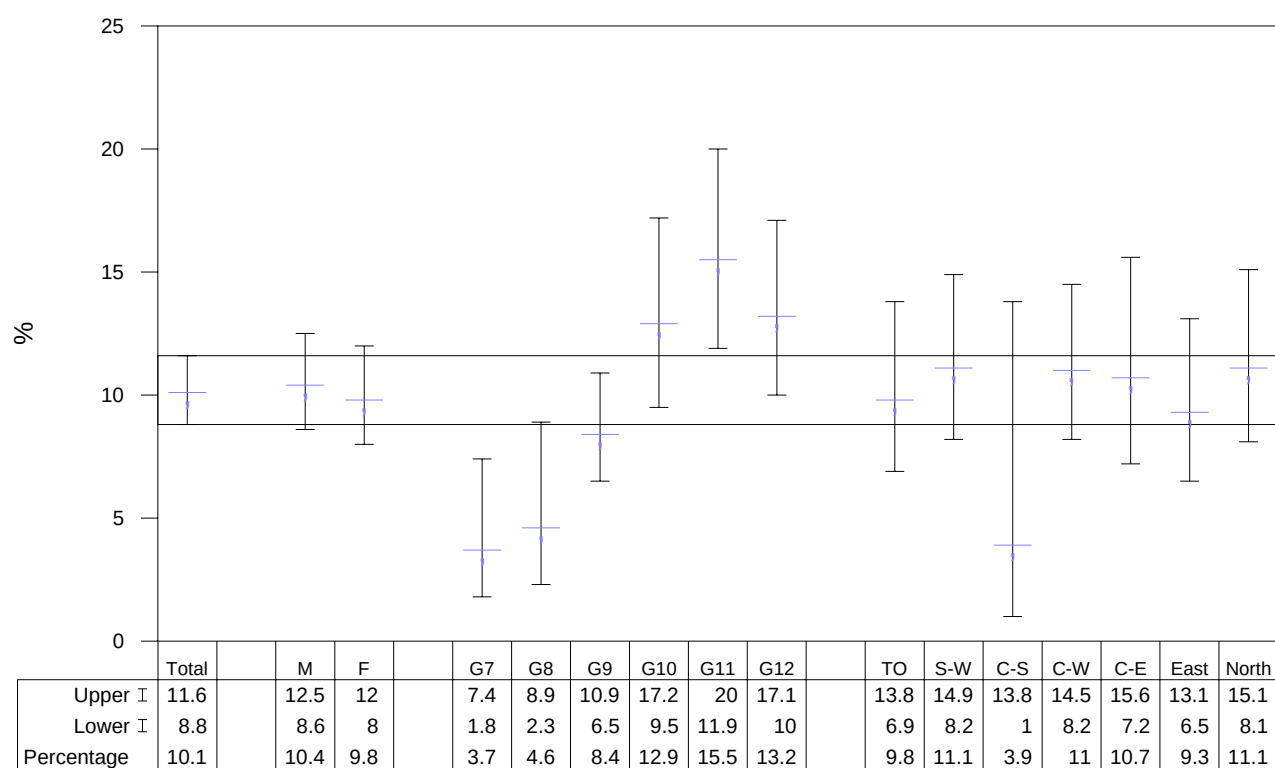
Figure 3.7.1

Co-Existing Problems: Elevated Psychological Distress, Hazardous Drinking, Drug Problem, and Delinquent Behaviour, OSDUS 2003 (Grades 7 to 12)



Note: based on a random half sample (N=3464)

Figure 3.7.2
Percentage Reporting 3 or All 4 Co-existing Problems,* by Sex, Grade and Public Health Region, OSDUS 2003



* among psychological distress, hazardous drinking, drug problem, and delinquent behaviour. Vertical bars represent 95% confidence intervals; horizontal bar represents 95% CI for total estimate

3.8

Public Health Planning Regions

The following table presents an overview of selected outcomes for each of Ontario's seven public health planning regions. See Chapter 2.0 for details on the regions. See individual chapters for outcome definitions.

Table 3.8.1 Selected Outcomes by Public Health Planning Region (Percentages & 95% CIs), OSDUS 2003

	<i>Toronto</i>	<i>South-West</i>	<i>Central-South</i>	<i>Central-West</i>	<i>Central-East</i>	<i>East</i>	<i>North</i>	<i>Ontario</i>
(N=)	(1,097)	(934)	(218)	(1,361)	(724)	(1,049)	(1,233)	(6,616)
Poor Self-Rated Health	13.7 (10.8-17.3)	13.7 (11.2-16.7)	13.0 (8.7-18.9)	13.0 (11.5-14.7)	13.9 (10.9-17.5)	9.8* (7.9-12.2)	12.0 (9.5-15.1)	12.6 (11.7-13.7)
1+ Physical Health Doctor Visit	61.3 (59.4-63.2)	58.4 (54.5-62.3)	52.8** (51.8-53.7)	58.7 (55.6-61.7)	64.4* (58.6-69.7)	64.1* (59.2-68.8)	54.6** (52.2-57.0)	60.2 (58.7-61.7)
Treated for a Physical Injury	26.4** (22.4-31.0)	37.6 (33.6-41.8)	35.9 (30.5-41.8)	35.1 (30.9-39.6)	39.2 (34.3-44.4)	37.4 (33.6-41.3)	42.6** (38.8-46.4)	35.4 (33.7-37.2)
Inactive Past 7 Days	21.3** (17.5-25.6)	14.8 (12.0-18.2)	20.7 (15.0-27.9)	15.4 (12.3-19.1)	13.9 (11.4-16.8)	13.9 (11.8-16.3)	14.1 (11.3-17.4)	16.1 (14.7-17.5)
1+ Mental Health Visit	8.3** (6.4-10.6)	11.8 (9.2-15.0)	13.6 (8.6-20.9)	9.0* (7.2-11.2)	13.2 (10.7-16.1)	13.3 (10.7-16.4)	11.6 (9.5-14.2)	11.0 (10.0-12.2)
Low Self-Esteem	8.6 (6.5-11.2)	9.2 (7.6-11.2)	8.8 (4.4-17.0)	8.8 (7.2-10.6)	11.1 (8.5-14.4)	9.6 (8.2-11.2)	12.3 (9.1-16.4)	9.5 (8.6-10.4)
High Risk for Depression	3.0** (1.7-5.0)	5.7 (3.7-8.7)	11.7** (9.2-14.8)	5.5 (3.8-7.8)	7.2 (5.0-10.2)	5.3 (3.8-7.4)	7.0 (4.6-10.4)	5.6 (4.8-6.6)
Elevated Psychological Distress	31.7 (28.1-35.6)	28.6 (25.0-32.5)	30.9 (14.3-54.5)	33.0 (29.4-36.9)	33.1 (27.0-39.8)	29.0 (24.7-33.8)	28.7 (24.0-34.0)	30.8 (28.9-32.8)
Suicide Ideation	9.3* (6.8-12.6)	13.0 (9.7-17.3)	19.6* (12.9-28.7)	13.1 (9.7-17.6)	14.7 (9.2-22.6)	11.4 (9.2-14.0)	13.3 (10.4-16.9)	12.5 (11.1-14.2)
3+ Delinquent Acts	13.9 (11.2-17.1)	15.3 (11.4-20.3)	7.0 (2.9-16.0)	16.2 (13.8-18.9)	17.2 (11.7-24.7)	10.9 (8.0-14.7)	17.6* (13.9-21.9)	14.3 (12.8-16.0)
1+ Fights at School	14.6 (10.3-20.1)	18.0 (13.1-24.2)	29.6 (17.4-45.5)	17.7 (13.3-23.0)	20.0 (14.2-27.4)	15.1 (12.2-18.6)	19.6 (14.8-25.5)	17.6 (15.7-19.6)
Threatened or Injured with a Weapon at School	7.8 (5.6-10.7)	7.3 (5.1-10.5)	11.7 (5.0-25.1)	8.8 (6.4-11.9)	5.0 (2.5-9.7)	7.0 (4.6-10.5)	7.7 (5.8-10.2)	7.7 (6.5-9.0)
Been Bullied	24.8** (20.4-29.7)	35.4 (29.3-42.1)	47.8** (40.3-55.4)	28.8* (25.5-32.4)	33.6 (27.4-40.5)	36.2 (31.1-41.8)	36.2 (32.0-40.6)	32.7 (30.6-34.9)
Bullied Someone	22.0** (18.0-26.7)	33.9 (29.0-39.1)	28.2 (18.6-40.2)	28.9 (25.7-32.3)	29.6 (22.8-37.4)	31.9 (26.0-38.4)	36.3** (31.6-41.2)	29.7 (27.6-32.0)
Heavy Gambling Activity	5.6 (3.6-8.5)	4.9 (3.1-7.7)	7.4 (3.6-14.5)	6.1 (4.2-8.8)	10.4* (6.1-17.1)	5.1 (3.1-8.3)	6.1 (3.9-9.4)	6.1 (5.0-7.4)
Pathological Gambling Problem	3.8 (2.4-6.0)	2.8 (1.8-4.2)	2.1 (0.3-14.8)	4.6 (2.7-7.6)	3.0 (1.1-7.8)	3.4 (2.0-5.5)	2.6 (1.4-4.8)	3.5 (2.7-4.4)
3 or All 4 Co-existing Problems[†]	9.8 (6.9-13.8)	11.1 (8.2-14.9)	3.9 (1.0-13.8)	11.0 (8.2-14.5)	10.7 (7.2-15.6)	9.3 (6.5-13.1)	11.1 (8.1-15.1)	10.1 (8.8-11.6)

Notes: (1) Entries in brackets are 95% confidence intervals; (2) † refers to reporting 3 or all problems among: psychological distress, hazardous drinking, drug problem, and delinquent behaviour (see Chapter 3.7 for details); (3) *p<.05, **p<.01 significant difference, public health region versus Ontario.

Source: OSDUS, Centre for Addiction and Mental Health

3.9

Multiple Outcomes, Multiple Influences

In this section we examine the relationship between certain risk factors and the mental health problems and risky behaviours discussed in this report. The risk factors in these analyses include demographics (sex, grade, region), family factors, and school factors (see Table 3.9.1 for an overview). The impact of each risk factor is assessed, taking other factors into account.

Family Factors

Research on mental health problems among children and youth suggest that the family, especially parents, plays a strong role.⁷⁸⁻⁸¹ The family factors we assessed include family structure, family immigrant status, parents' education, the quality of the parent-child relationship, and parental monitoring.

Family structure was defined by family "intactness," which is the presence of two parents in the home – either biological or step. **Family immigrant status** (based whether the student and parents were foreign-born) was included, as research has shown that children in immigrant-parent families are less likely to experience internalizing and externalizing problems, compared to children of non-immigrant parents.⁸² **Parents' education** was used as a proxy for family socioeconomic status. It was assumed that families with parents who attended university have higher family incomes, as well as more parenting resources and a strong orientation toward academics.

To assess the quality of the **parent-child relationship**, we asked students "How well would you say you are getting along with your parents?" Students not getting along were compared to those indicating they were getting

along "OK" or very well. To assess **parental monitoring** of their child's whereabouts, we asked students "In your free time away from home, how often does your mother or father know where you are?" Students reporting that their parents "always" or "usually" know where they are were compared with those reporting "sometimes," "seldom," and "never."

School Factors

School experience also plays a significant role in a child's development. For instance, academic performance has been shown to be significantly associated with mental health and behaviour problems.^{37, 83} Thus, students' self-reports of overall marks received in school were included as a risk factor.

Two school climate factors were also included, as studies show that perceptions about school plays an important role in a student's well-being.^{36, 56, 84} The first factor we examined, **perceived personal safety in school**, was measured using two questions: (1) "At school, how worried are you that someone will harm you, threaten you, or take something from you?" and (2) "I feel safe in my school" (reported agreement). **School attachment or connectedness**, the second school climate factor, was based on a summation of the level of agreement to two statements: "I feel close to people at this school" and "I feel like I am part of this school."

School mobility was indicated by whether or not students changed schools two or more times during the past five years, excluding the change from elementary to secondary school. It has been suggested that frequent school change

increases the risk for problems, likely because of the inconsistency and the stress from change.⁵³

Outcomes

Nine mental health problems and risky behaviours are assessed (see Table 3.9.2 for outcome definitions):

- risk for depression
- psychological distress
- suicide ideation
- delinquent behaviour
- pathological gambling problem
- hazardous drinking
- illicit drug use, including cannabis
- illicit drug use, excluding cannabis
- 3 or all 4 co-existing problems.

It should be noted that because these data were collected at one point in time, no causal statements can be made and we can only suggest correlational relationships. For example, we cannot determine whether low school marks cause poor mental health or whether poor mental health causes low marks.

Table 3.9.1 Predictors used in the Logistic Regression Analyses

Predictor	%	Subgroup Categories
1) Sex		Male; Female
2) Grade		7, 8, 9, 10, 11, 12
3) Public Health Planning Region (see Chapter 2.0 for details)	(18.3%) (16.8%) (4.7%) (22.8%) (10.3%) (19.7%) (7.4%)	Toronto (TO) Southwest (SW) Central-South (CS) Central-West (CW) Central-East (CE) East (E) North (N)
4) Family Structure	(81.8%) (18.2%)	Intact (two parents; includes step-parent) Not Intact (single parent)
5) Family Immigrant Status	(55.0%) (29.3%) (15.7%)	Native (student and parents born in Canada) Second Generation Immigrant (student born in Canada, parents born outside Canada) First Generation Immigrant (student and parents born outside Canada)
6) Parents' Education	(20.4%) (74.9%) (4.7%)	High (both parents graduated or attended university) Moderate (other) Low (neither parent graduated high school)
7) Parent-Child Relationship	(95.0%) (5.0%)	Good (get along very well or "ok" with parents) Poor (not getting along with parents)
8) Parental Monitoring	(83.4%) (16.6%)	High (parents always/usually know whereabouts) Low (parents sometimes/seldom/never know whereabouts)
9) School Marks	(81.9%) (18.1%)	Overall As or Bs Overall Cs or below
10) Number of School Moves (past 5 years, excludes move from elementary to secondary)	(85.0%) (15.0%)	None or 1 move 2 or more moves
11) Perception of Personal Safety in School	(31.0%) (63.6%) (5.4%)	High Moderate Low
12) School Attachment	(25.3%) (64.3%) (10.4%)	High Moderate Low

Table 3.9.2 Outcome Definitions

Outcome	Definition
<i>Risk for Depression</i>	Reporting “often” or “always” experiencing all 4 symptoms on the Centre for Epidemiological Studies Depression (CES-D) Scale during the past 7 days.
<i>Elevated Psychological Distress</i>	Reporting at least 3 of the 12 symptoms on the General Health Questionnaire (GHQ), which measures three overarching problems: depressed mood, anxiety, and problems with social functioning over the past few weeks.
<i>Suicide Ideation</i>	Reporting having seriously considered suicide during the past 12 months.
<i>Delinquent Behaviour</i>	Reporting at least 3 of 12 delinquent behaviours during the past 12 months.
<i>Pathological Gambling Problem</i>	Reporting at least 4 of 12 items on the South-Oaks Gambling Screen Revised for Adolescents (SOGS-RA), which measures gambling problems during the past 12 months.
<i>Hazardous Drinking</i>	Reporting a score of at least 8 out of 40 on the AUDIT screen, which measures heavy drinking and alcohol-related problems during the past 12 months.
<i>Any Illicit Drug Use</i>	Reporting use of any one of the following 17 drugs during the past 12 months: cannabis, barbiturates, stimulants, tranquilizers, cocaine, crack, methamphetamine, LSD, other hallucinogens, PCP, heroin, ecstasy, ice, GHB, Rohypnol, Ketamine, and non-medical Ritalin. This estimate excludes the use of glue, solvents, and prescription drugs.
<i>Any Illicit Drug Use (excludes Cannabis)</i>	Same as definition above, but also excludes cannabis use.
<i>3+ Co-existing Problems</i>	Reporting three or all four of the following problems: elevated psychological distress, hazardous drinking, drug problem, and delinquent behaviour.

3.9.1 Summary of Common Risk Factors

(Tables 3.9.3 to 3.9.12; Figures 3.9.1, 3.9.2)

Table 3.9.3 presents an overview of the adjusted logistic regression analyses of the nine outcomes (see Tables 3.9.4 to 3.9.12 for the individual results, and Appendix Table A3.9.1 for further details on how to interpret these tables).

The factors most consistently associated with the nine outcomes are ordered as follows:

- ❑ the parent-child relationship (9 of 9 outcomes)
- ❑ parental monitoring (8 of 9 outcomes)
- ❑ school marks (7 of 9)
- ❑ sex (6 of 9)
- ❑ grade; family immigrant status; school attachment (5 of 9)
- ❑ family structure (3 of 9)
- ❑ school safety; region (2 of 9)
- ❑ parents' education; school mobility (0 of 9)

Parent-Child Relationship

Compared to students who report a good relationship with their parents, students with a poor relationship with their parents are more likely to be at risk for depression, report psychological distress, and thoughts about suicide, even after controlling for other factors. They are also more likely to report delinquent behaviour, a pathological gambling problem, hazardous drinking, to use an illicit drug, and to report experiencing co-existing problems.

Parental Monitoring

Students who report that their parents usually do not know their whereabouts are more likely to report all outcomes, except for depression.

School Marks

Compared to students who achieve an A or B average, students with poor marks (C average or below) are more likely to report suicide ideation. They are also more likely to report all the externalizing problems (delinquency,

pathological gambling, hazardous drinking, any illicit drug use including and excluding cannabis), as well as co-existing problems.

Sex

Females are at greater risk for experiencing internalizing problems such as depression, elevated psychological distress and suicide ideation.

Males are more likely to report delinquent behaviour and pathological gambling. Interestingly, after accounting for other factors, there is no difference between males and females in hazardous drinking, illicit drug use, and co-existing problems.

Grade

After accounting for the other factors, grade (age) is related to five of the nine outcomes.

- ❑ Between grade 7 and **grade 8** the likelihood of depression increases.
- ❑ Between grade 8 and **grade 9**, the likelihood of hazardous drinking and illicit drug use (including and excluding cannabis) increases, however the likelihood of depression *decreases*.
- ❑ Compared to 9th-graders, **10th-graders** are more likely to drink hazardously and to use an illicit drug.
- ❑ The move from 10th- to **11th-grade** is accompanied by a higher likelihood of psychological distress and illicit drug use, including and excluding cannabis.

Family Immigrant Status

First-generation immigrant students (those who were born outside of Canada, as were their parents) are more likely to report a gambling problem compared to native students (those born in Canada, as well as their parents).

However, first-generation immigrant students are less likely to report hazardous drinking, illicit drug use, and co-existing problems, compared to native students.

School Attachment

Compared to those who feel very attached to their school, those students who feel low attachment – that is, they feel disconnected to their school – are more likely to report depressive symptoms, psychological distress, suicide ideation, delinquent behaviour, and co-existing problems.

Family Structure

Compared to students in a two-parent family, those in a single-parent family are more likely to report delinquent behaviour, hazardous drinking, and co-existing problems.

School Safety

Students who do not feel safe at school are more likely to report the internalizing problems of depression and psychological distress.

Public Health Region

Compared to the province as a whole,

- ❑ **Toronto** students are less likely to be at risk for depression and less likely to use any illicit drug excluding cannabis.
- ❑ **Southwest** students are more likely to use any illicit drug use excluding cannabis.
- ❑ **Central-South** students are more likely to be at risk for depression.
- ❑ **Central-West** students are more likely use any illicit drug excluding cannabis.

Parents' Education

After controlling for other factors, parents' level of education is not related to any outcome.

School Mobility

Having changed schools two or more times during the past five years is not related to any outcome.

Figure 3.9.1
Percentage Reporting Internalizing and Externalizing Problems
by Sex, OSDUS 2003

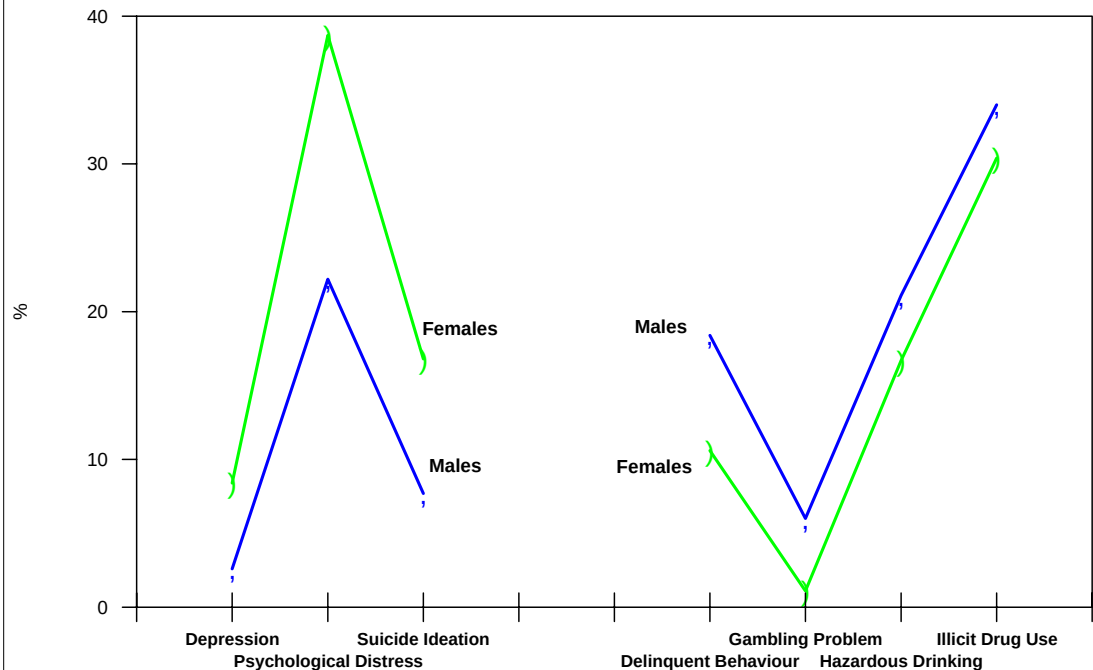


Figure 3.9.2
Percentage Reporting Internalizing and Externalizing Problems
by Grade, OSDUS 2003

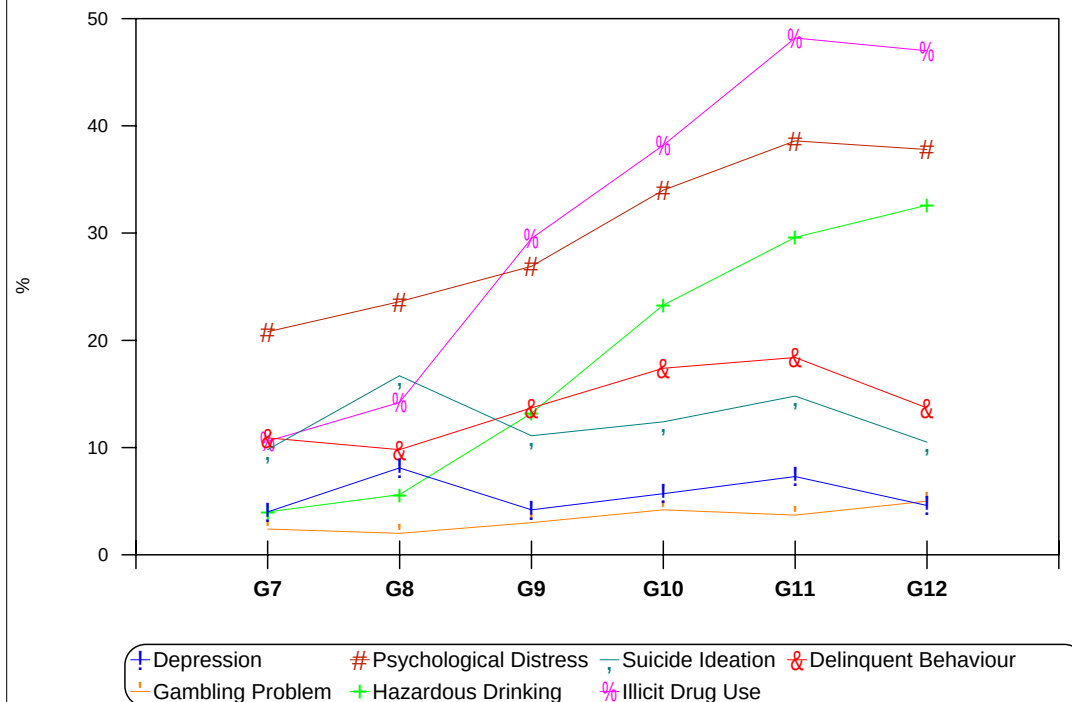


Table 3.9.3 Summary of Multivariate Analysis (Adjusted Logistic Regressions)

Risk Factors	Internalizing			Externalizing					3+ Co-Existing Problems
	Risk for Depression	Elevated Psychological Distress	Suicide Ideation	Delinquent Behaviour	Pathological Gambling Problem	Hazardous Drinking	Any Illicit Drug Use	Any Illicit Drug Use (excl. Cannabis)	
Sex	F	F	F	M	M	▪	▪	▪	▪
Grade	8 ↑ 7 9 ↓ 8	11 ↑ 10	▪	▪	▪	10 ↑ 9	9 ↑ 8 10 ↑ 9 11 ↑ 10	9 ↑ 8 10 ↑ 9 11 ↑ 10	▪
Public Health Region (vs Ontario)	TO ↓ Ont CS ↑ Ont	▪	▪	▪	▪	▪	▪	TO ↓ Ont SW ↑ Ont CW ↑ Ont	▪
Family Life									
Single-Parent Family	▪	▪	▪	+	▪	+	▪	▪	+
First Generation Immigrant	▪	▪	▪	▪	+	—	—	—	—
Low Parent Education	▪	▪	▪	▪	▪	▪	▪	▪	▪
Poor Parent-Child Relationship	+	+	+	+	+	+	+	+	+
Low Parental Monitoring	▪	+	+	+	+	+	+	+	+
School Life									
Poor Marks (Cs or less)	▪	▪	+	+	+	+	+	+	+
2+ School Moves	▪	▪	▪	▪	▪	▪	▪	▪	▪
Perceive School as Unsafe	+	+	▪	▪	▪	▪	▪	▪	▪
Low School Attachment	+	+	+	+	▪	▪	▪	▪	+

+ outcome is significantly more likely

— outcome is significantly less likely

▪ no significant effect on outcome

Table 3.9.4
Risk for Depression: Unadjusted and Adjusted Group Differences

	%	95% CI	Unadjusted Odds Ratio	Adjusted Odds Ratio
Total Sample (N=3464)	5.6	(4.8-6.6)		
1) Sex			***	***
Male (Comparison Group)	2.6	(1.8-3.7)	—	—
Female	8.4	(7.0-10.0)	3.44	3.30
2) Grade (Comparison Group is the previous grade)			*	*
7	4.0	(2.5-6.2)	—	—
8	8.1	(5.3-12.1)	2.13*	2.56*
9	4.2	(2.7-6.5)	0.50*	0.47*
10	5.7	(3.6-8.8)	1.38	1.16
11	7.3	(5.5-9.7)	1.31	1.60
12	4.6	(3.0-7.0)	0.61	0.56
3) Region (Comparison Group is Ontario)			***	*
Toronto	3.0	(1.7-5.0)	0.47**	0.45**
Southwest	5.7	(3.7-8.7)	0.93	0.95
Central South	11.7	(9.2-14.8)	2.06***	1.97**
Central West	5.5	(3.8-7.8)	0.90	0.92
Central East	7.2	(5.0-10.2)	1.20	1.32
East	5.4	(3.8-7.4)	0.88	0.92
North	7.0	(4.6-10.4)	1.16	1.07
4) Family Structure			**	NS
Intact (Comparison Group)	5.0	(4.1-6.0)	—	—
Not Intact (Single Parent)	8.8	(6.5-11.7)	1.84**	1.34
5) Family Immigrant Status			NS	NS
Native (Comparison Group)	6.2	(5.0-7.7)	—	—
Second Generation Immigrant	5.0	(3.6-6.8)	0.79	0.89
First Generation Immigrant	4.6	(3.1-6.8)	0.73	0.82
6) Parents' Level of Education			*	NS
High (Comparison Group)	4.3	(3.0-6.2)	—	—
Moderate	5.7	(4.9-6.7)	1.34	0.96
Low	10.3	(5.8-17.6)	2.53	1.68
7) Parent-Child Relationship			***	***
Good (Comparison Group)	4.5	(3.8-5.4)	—	—
Poor	26.0	(19.6-33.6)	7.45	5.93
8) Parental Monitoring			NS	NS
High (Comparison Group)	5.3	(4.4-6.4)	—	—
Low	7.1	(5.2-9.6)	1.36	0.83
9) School Marks			*	NS
As or Bs (Comparison Group)	5.1	(4.2-6.2)	—	—
Cs or below	7.8	(5.8-10.4)	1.56	1.36
10) Number of School Moves in Past 5 Years			*	NS
None or 1 (Comparison Group)	5.2	(4.3-6.2)	—	—
2 or more	8.4	(5.7-12.2)	1.69	1.08
11) Perception of School Safety			***	*
High (Comparison Group)	2.6	(1.7-3.9)	—	—
Moderate	6.7	(5.6-8.0)	2.71***	2.03*
Low	10.3	(6.1-16.8)	4.35***	2.36
12) Level of School Attachment			***	***
High (Comparison Group)	2.4	(1.5-3.8)	—	—
Moderate	5.8	(4.6-7.1)	2.49**	2.30**
Low	14.1	(9.6-20.3)	6.70***	6.03***

Notes: Asterisks in shaded rows indicate the significance of chi-square tests of association. Odds greater than 1.0 indicate that depression is more likely in that group, compared to the comparison group; odds less than 1.0 indicate that depression is less likely in that group, compared to the comparison group. "NS"= non-significant effect, *p<.05; **p<.01; ***p<.001.

Source: OSDUS, Centre for Addiction and Mental Health

Table 3.9.5
Elevated Psychological Distress: Unadjusted and Adjusted Group Differences

	%	95% CI	Unadjusted Odds Ratio	Adjusted Odds Ratio
Total Sample (N=3464)	30.8	(28.9-32.8)		
1) Sex			***	***
Male (Comparison Group)	22.2	(19.8-24.8)	—	—
Female	38.7	(.36.3-41.2)	2.22	2.34
2) Grade (Comparison Group is the previous grade)			***	***
7	20.8	(16.9-25.4)	—	—
8	23.6	(19.3-28.5)	1.17	1.17
9	26.9	(23.4-30.6)	1.19	1.20
10	34.0	(29.8-38.5)	1.40**	1.31
11	38.6	(34.1-43.2)	1.22	1.34*
12	37.8	(33.3-42.5)	0.97	0.96
3) Region (Comparison Group is Ontario)			NS	NS
Toronto	31.7	(28.1-35.6)	1.05	0.90
Southwest	28.6	(25.0-32.5)	0.90	0.83
Central South	30.9	(14.3-54.5)	1.00	1.43
Central West	33.0	(29.4-36.9)	1.11	1.03
Central East	33.1	(27.0-39.8)	1.12	1.12
East	29.0	(24.7-33.8)	0.92	0.96
North	28.7	(24.0-34.0)	0.91	0.84
4) Family Structure			NS	NS
Intact (Comparison Group)	30.1	(27.8-32.5)	—	—
Not Intact (Single Parent)	34.2	(30.0-38.8)	1.21	0.93
5) Family Immigrant Status			NS	NS
Native (Comparison Group)	28.9	(26.0-32.0)	—	—
Second Generation Immigrant	33.2	(30.0-36.5)	1.22	1.19
First Generation Immigrant	34.2	(29.4-39.3)	1.27	1.11
6) Parents' Level of Education			NS	NS
High (Comparison Group)	28.9	(25.1-33.0)	—	—
Moderate	31.1	(28.8-33.5)	1.11	1.09
Low	34.6	(26.0-44.3)	1.30	1.05
7) Parent-Child Relationship			***	***
Good (Comparison Group)	29.0	(27.0-31.0)	—	—
Poor	66.1	(57.9-73.5)	4.78	3.54
8) Parental Monitoring			***	*
High (Comparison Group)	28.8	(26.5-31.2)	—	—
Low	41.8	(36.4-47.3)	1.77	1.42
9) School Marks			*	NS
As or Bs (Comparison Group)	29.9	(27.8-32.0)	—	—
Cs or below	35.0	(31.1-39.0)	1.26	1.08
10) Number of School Moves in Past 5 Years			*	NS
None or 1 (Comparison Group)	30.0	(28.0-32.1)	—	—
2 or more	35.9	(30.7-41.4)	1.31	1.24
11) Perception of School Safety			***	***
High (Comparison Group)	24.4	(21.2-27.8)	—	—
Moderate	32.4	(29.8-35.1)	1.48	1.31*
Low	49.6	(41.0-58.3)	3.06	2.46***
12) Level of School Attachment			***	***
High (Comparison Group)	21.0	(18.0-24.3)	—	—
Moderate	32.2	(29.9-34.7)	1.79	1.58***
Low	49.7	(42.8-56.6)	3.72	2.67***

Notes: Asterisks in shaded rows indicate the significance of chi-square tests of association. Odds greater than 1.0 indicate that psychological distress is more likely in that group, compared to the comparison group; odds less than 1.0 indicate that psychological distress is less likely in that group, compared to the comparison group. "NS"= non-significant effect, *p<.05; **p<.01; ***p<.001.

Source: OSDUS, Centre for Addiction and Mental Health

Table 3.9.6
Suicide Ideation: Unadjusted and Adjusted Group Differences

	%	95% CI	Unadjusted Odds Ratio	Adjusted Odds Ratio
Total Sample (N=3464)	12.5	(11.1-14.2)		
1) Sex			***	***
Male (Comparison Group)	7.7	(6.4-9.5)	—	—
Female	16.8	(14.6-19.2)	2.36	2.48
2) Grade (Comparison Group is the previous grade)			NS	NS
7	9.8	(6.7-14.0)	—	—
8	16.7	(11.1-24.3)	1.85	1.90
9	11.1	(8.9-13.9)	0.62	0.56
10	12.4	(9.1-16.8)	1.13	1.00
11	14.8	(11.4-18.9)	1.22	1.37
12	10.5	(8.1-13.4)	0.68	0.65
3) Region (Comparison Group is Ontario)			NS	NS
Toronto	9.3	(6.8-12.6)	0.67*	0.61*
Southwest	13.0	(9.7-17.3)	0.98	0.94
Central South	19.6	(12.9-28.7)	1.60*	1.86*
Central West	13.1	(9.7-17.6)	0.99	0.98
Central East	14.7	(9.2-22.6)	1.13	1.16
East	11.4	(9.2-14.0)	0.84	0.89
North	13.3	(10.4-16.9)	1.00	0.92
4) Family Structure			NS	NS
Intact (Comparison Group)	12.2	(10.7-14.0)	—	—
Not Intact (Single Parent)	14.1	(10.9-18.0)	1.17	.81
5) Family Immigrant Status			NS	NS
Native (Comparison Group)	13.1	(11.2-15.3)	—	—
Second Generation Immigrant	11.7	(9.3-14.6)	0.88	0.90
First Generation Immigrant	12.4	(9.4-16.1)	0.93	1.03
6) Parents' Level of Education			**	NS
High (Comparison Group)	9.2	(7.0-11.8)	—	—
Moderate	13.1	(11.4-15.0)	1.49*	1.26
Low	18.3	(12.2-26.4)	2.21**	1.63
7) Parent-Child Relationship			***	***
Good (Comparison Group)	11.1	(9.7-12.7)	—	—
Poor	39.6	(31.0-48.9)	5.25	3.48
8) Parental Monitoring			***	**
High (Comparison Group)	11.1	(9.5-12.8)	—	—
Low	20.5	(16.5-25.1)	2.07	1.73
9) School Marks			***	***
As or Bs (Comparison Group)	10.9	(9.3-12.7)	—	—
Cs or below	20.0	(16.4-24.1)	2.05	1.87
10) Number of School Moves in Past 5 Years			*	NS
None or 1 (Comparison Group)	11.9	(10.3-13.7)	—	—
2 or more	16.6	(12.9-21.2)	1.48	1.14
11) Perception of School Safety			**	NS
High (Comparison Group)	9.1	(6.8-12.1)	—	—
Moderate	13.3	(11.7-15.1)	1.53**	1.33
Low	22.6	(15.4-32.0)	2.91**	1.84
12) Level of School Attachment			***	**
High (Comparison Group)	8.2	(6.2-10.8)	—	—
Moderate	12.9	(11.2-14.8)	1.66**	1.49*
Low	22.8	(17.5-29.2)	3.31***	2.53**

Notes: Asterisks in shaded rows indicate the significance of chi-square tests of association. Odds greater than 1.0 indicate that suicide ideation is more likely in that group, compared to the comparison group; odds less than 1.0 indicate that suicide ideation is less likely in that group, compared to the comparison group. "NS"= non-significant effect, *p<.05; **p<.01; ***p<.001.

Source: OSDUS, Centre for Addiction and Mental Health

Table 3.9.7
Delinquent Behaviour: Unadjusted and Adjusted Group Differences

	%	95% CI	Unadjusted Odds Ratio	Adjusted Odds Ratio
Total Sample (N=3464)	14.3	(12.8-16.0)		
1) Sex			***	***
Female (Comparison Group)	10.6	(8.8-12.7)	—	—
Male	18.4	(16.4-20.7)	1.91	1.91
2) Grade (Comparison Group is the previous grade)			NS	NS
7	10.9	(7.3-15.8)	—	—
8	9.8	(6.5-14.6)	0.90	1.00
9	13.7	(11.2-16.8)	1.45	1.05
10	17.4	(13.8-21.7)	1.32	1.35
11	18.4	(14.7-22.6)	1.07	0.97
12	13.7	(10.6-17.4)	0.70	0.68
3) Region (Comparison Group is Ontario)			NS	NS
Toronto	13.9	(11.2-17.1)	1.03	0.92
Southwest	15.3	(11.4-20.3)	1.15	1.04
Central South	7.0	(2.9-16.0)	0.48	0.71
Central West	16.2	(13.8-18.9)	1.24	1.19
Central East	17.2	(11.7-24.7)	1.33	1.31
East	10.9	(8.0-14.7)	0.78	0.84
North	17.6	(13.9-21.9)	1.36	1.11
4) Family Structure			***	*
Intact (Comparison Group)	12.6	(11.0-14.4)	—	—
Not Intact (Single Parent)	22.5	(18.7-26.8)	2.00	1.51
5) Family Immigrant Status			NS	NS
Native (Comparison Group)	14.2	(12.1-16.7)	—	—
Second Generation Immigrant	15.3	(12.4-18.8)	1.09	0.95
First Generation Immigrant	13.2	(9.5-17.9)	0.91	0.75
6) Parents' Level of Education			**	NS
High (Comparison Group)	9.7	(7.6-12.3)	—	—
Moderate	15.6	(13.7-17.8)	1.72***	1.45
Low	12.9	(7.9-20.3)	1.37	0.94
7) Parent-Child Relationship			***	***
Good (Comparison Group)	12.7	(11.3-14.3)	—	—
Poor	43.2	(35.3-51.4)	5.23	2.77
8) Parental Monitoring			***	***
High (Comparison Group)	8.9	(7.6-10.4)	—	—
Low	42.4	(37.8-47.4)	7.50	5.70
9) School Marks			***	**
As or Bs (Comparison Group)	11.5	(10.0-13.2)	—	—
Cs or below	27.4	(23.4-31.7)	2.89	1.67
10) Number of School Moves in Past 5 Years			**	NS
None or 1 (Comparison Group)	13.5	(11.8-15.3)	—	—
2 or more	20.0	(16.0-24.7)	1.60	1.36
11) Perception of School Safety			*	NS
High (Comparison Group)	12.9	(10.3-15.9)	—	—
Moderate	14.3	(12.6-16.3)	1.13	1.16
Low	22.4	(15.2-31.7)	1.95*	1.11
12) Level of School Attachment			***	**
High (Comparison Group)	7.6	(5.9-9.8)	—	—
Moderate	16.0	(14.1-18.1)	2.30***	1.76**
Low	22.2	(17.0-28.6)	3.45***	2.13**

Notes: Asterisks in shaded rows indicate the significance of chi-square tests of association. Odds greater than 1.0 indicate that delinquent behaviour is more likely in that group, compared to the comparison group; odds less than 1.0 indicate that delinquent behaviour is less likely in that group, compared to the comparison group. "NS"= non-significant effect, *p<.05; **p<.01; ***p<.001.

Source: OSDUS, Centre for Addiction and Mental Health

Table 3.9.8
Pathological Gambling Problem: Unadjusted and Adjusted Group Differences

	%	95% CI	Unadjusted Odds Ratio	Adjusted Odds Ratio
Total Sample (N=3464)	3.5	(2.7-4.4)		
1) Sex			***	***
Female (Comparison Group)	1.1	(0.7-1.9)	—	—
Male	6.0	(4.7-7.7)	5.54	6.00
2) Grade (Comparison Group is the previous grade)			NS	NS
7	2.4	(1.2-4.9)	—	—
8	2.0	(0.8-4.8)	0.85	1.00
9	3.0	(1.9-4.8)	1.48	1.34
10	4.2	(2.6-6.8)	1.42	1.53
11	3.7	(2.2-6.1)	0.88	0.78
12	5.0	(3.2-7.6)	1.36	1.47
3) Region (Comparison Group is Ontario)			NS	NS
Toronto	3.8	(2.4-6.0)	1.22	0.78
Southwest	2.8	(1.8-4.2)	0.89	0.75
Central South	2.1	(0.3-14.9)	0.68	1.59
Central West	4.6	(2.7-7.6)	1.50	1.21
Central East	3.0	(1.1-7.8)	0.97	0.85
East	3.4	(2.0-5.5)	1.08	1.36
North	2.6	(1.4-4.8)	0.84	0.76
4) Family Structure			*	NS
Intact (Comparison Group)	3.1	(2.3-4.1)	—	—
Not Intact (Single Parent)	5.2	(3.6-7.4)	1.72	1.38
5) Family Immigrant Status			***	**
Native (Comparison Group)	2.5	(1.8-3.5)	—	—
Second Generation Immigrant	3.6	(2.4-5.4)	1.47	1.24
First Generation Immigrant	6.9	(4.7-10.0)	2.91***	2.64**
6) Parents' Level of Education			NS	NS
High (Comparison Group)	4.3	(3.0-6.2)	—	—
Moderate	3.1	(2.3-4.1)	0.71	.61
Low	5.8	(3.0-11.2)	1.37	1.36
7) Parent-Child Relationship			***	**
Good (Comparison Group)	3.0	(2.4-3.9)	—	—
Poor	10.2	(6.0-16.6)	3.60	2.94
8) Parental Monitoring			***	***
High (Comparison Group)	2.4	(1.8-3.2)	—	—
Low	9.2	(6.5-12.8)	4.16	2.66
9) School Marks			***	**
As or Bs (Comparison Group)	2.6	(2.0-3.6)	—	—
Cs or below	7.2	(5.0-10.2)	2.85	2.06
10) Number of School Moves in Past 5 Years			NS	NS
None or 1 (Comparison Group)	3.3	(2.5-4.4)	—	—
2 or more	4.2	(2.6-6.7)	1.28	1.02
11) Perception of School Safety			*	NS
High (Comparison Group)	2.6	(1.6-4.1)	—	—
Moderate	3.6	(2.7-4.7)	1.42	1.65
Low	7.3	(3.8-13.7)	3.00**	1.92
12) Level of School Attachment			NS	NS
High (Comparison Group)	2.4	(1.6-3.8)	—	—
Moderate	4.0	(3.0-5.3)	1.67	1.02
Low	2.9	(1.5-5.7)	1.20	0.66

Notes: Asterisks in shaded rows indicate the significance of chi-square tests of association. Odds greater than 1.0 indicate that a gambling problem is more likely in that group, compared to the comparison group; odds less than 1.0 indicate that a gambling problem is less likely in that group, compared to the comparison group. "NS"= non-significant effect, *p<.05; **p<.01; ***p<.001.

Source: OSDUS, Centre for Addiction and Mental Health

Table 3.9.9
Hazardous Drinking: Unadjusted and Adjusted Group Differences

	%	95% CI	Unadjusted Odds Ratio	Adjusted Odds Ratio
Total Sample (N=3464)	18.8	(16.7-21.1)		
1) Sex			*	NS
Female (Comparison Group)	16.7	(14.6-19.0)	—	—
Male	21.1	(17.8-24.9)	1.33	1.26
2) Grade (Comparison Group is the previous grade)			***	***
7	4.0	(2.0-7.7)	—	—
8	5.6	(2.5-12.1)	1.45	1.64
9	13.2	(10.8-16.2)	2.55*	2.22
10	23.3	(18.8-25.5)	1.99***	2.02***
11	29.6	(24.5-35.2)	1.38*	1.36
12	32.6	(27.0-38.7)	1.15	1.27
3) Region (Comparison Group is Ontario)			*	NS
Toronto	13.7	(10.1-18.4)	0.77	0.77
Southwest	25.1	(19.1-32.6)	1.63*	1.22
Central South	7.0	(1.8-23.6)	0.37	0.86
Central West	19.9	(15.1-25.7)	1.20	1.30
Central East	19.6	(14.0-26.8)	1.18	1.12
East	17.7	(12.6-24.2)	1.04	0.83
North	23.1	(18.7-28.3)	1.46*	1.02
4) Family Structure			***	***
Intact (Comparison Group)	17.0	(15.0-19.3)	—	—
Not Intact (Single Parent)	27.1	(22.7-32.0)	1.81	1.75
5) Family Immigrant Status			***	***
Native (Comparison Group)	22.3	(19.5-25.3)	—	—
Second Generation Immigrant	15.3	(12.5-18.6)	0.63***	0.57**
First Generation Immigrant	12.5	(9.1-16.9)	0.50***	0.37***
6) Parents' Level of Education			*	NS
High (Comparison Group)	15.9	(13.0-19.4)	—	—
Moderate	19.3	(17.1-21.8)	1.26*	1.05
Low	23.4	(16.3-32.4)	1.61*	1.41
7) Parent-Child Relationship			***	**
Good (Comparison Group)	17.6	(15.6-19.8)	—	—
Poor	39.9	(31.9-48.4)	3.10	1.79
8) Parental Monitoring			***	***
High (Comparison Group)	13.8	(12.0-15.8)	—	—
Low	45.1	(39.5-50.9)	5.14	4.16
9) School Marks			***	***
As or Bs (Comparison Group)	16.1	(13.9-18.5)	—	—
Cs or below	31.4	(27.4-35.8)	2.39	1.80
10) Number of School Moves in Past 5 Years			NS	NS
None or 1 (Comparison Group)	19.1	(16.8-21.6)	—	—
2 or more	17.5	(14.3-21.2)	0.90	0.98
11) Perception of School Safety			**	NS
High (Comparison Group)	23.0	(19.6-26.8)	—	—
Moderate	16.8	(14.7-19.3)	0.68**	0.81
Low	19.4	(13.0-28.0)	0.80	0.71
12) Level of School Attachment			NS	NS
High (Comparison Group)	17.1	(14.2-20.6)	—	—
Moderate	19.0	(16.7-21.6)	1.14	0.86
Low	22.3	(17.1-28.6)	1.39	0.93

Notes: Asterisks in shaded rows indicate the significance of chi-square tests of association. Odds greater than 1.0 indicate that hazardous drinking is more likely in that group, compared to the comparison group; odds less than 1.0 indicate that hazardous drinking is less likely in that group, compared to the comparison group. "NS"= non-significant effect, *p<.05; **p<.01; ***p<.001

Source: OSDUS, Centre for Addiction and Mental Health

Table 3.9.10

Any Illicit Drug Use[†] During the Past 12 Months: Unadjusted and Adjusted Group Differences

	%	95% CI	Unadjusted Odds Ratio	Adjusted Odds Ratio
Total Sample (N=3152)	32.1	(29.8-34.5)		
1) Sex			NS	NS
Female (Comparison Group)	30.4	(27.6-33.3)	—	—
Male	34.0	(30.6-37.7)	1.18	0.90
2) Grade (Comparison Group is the previous grade)			***	***
7	10.6	(8.0-14.0)	—	—
8	14.2	(10.6-18.8)	1.39	1.24
9	29.5	(25.3-34.0)	2.52***	2.43***
10	38.2	(32.0-44.7)	1.48*	1.50*
11	48.2	(42.8-53.8)	1.51*	1.62*
12	47.0	(40.7-53.4)	0.95	0.92
3) Region (Comparison Group is Ontario)			NS	NS
Toronto	25.6	(19.4-32.8)	0.77	0.82
Southwest	40.5	(34.2-47.1)	1.53	1.12
Central South	18.2	(6.6-41.3)	0.50	0.94
Central West	32.0	(26.7-38.0)	1.06	1.11
Central East	35.6	(27.7-44.3)	1.24	1.26
East	31.3	(26.4-36.6)	1.02	0.95
North	36.0	(29.0-43.7)	1.26	0.87
4) Family Structure			**	NS
Intact (Comparison Group)	30.4	(28.1-32.8)	—	—
Not Intact (Single Parent)	39.5	(33.7-45.7)	1.50	1.29
5) Family Immigrant Status			***	***
Native (Comparison Group)	37.1	(34.2-40.1)	—	—
Second Generation Immigrant	30.0	(26.1-34.1)	0.72**	0.73*
First Generation Immigrant	20.6	(15.9-26.2)	0.44***	0.37***
6) Parents' Level of Education			NS	NS
High (Comparison Group)	29.2	(25.2-33.6)	—	—
Moderate	32.6	(29.8-35.6)	1.17	0.84
Low	37.2	(28.6-46.8)	1.44	0.99
7) Parent-Child Relationship			***	***
Good (Comparison Group)	30.7	(28.4-33.0)	—	—
Poor	59.8	(50.9-68.2)	3.36	2.14
8) Parental Monitoring			***	***
High (Comparison Group)	26.1	(24.0-28.4)	—	—
Low	62.2	(56.8-67.2)	4.65	3.67
9) School Marks			***	***
As or Bs (Comparison Group)	28.0	(25.7-30.4)	—	—
Cs or below	52.0	(46.7-57.3)	2.79	2.34
10) Number of School Moves in Past 5 Years			NS	NS
None or 1 (Comparison Group)	31.8	(29.4-34.3)	—	—
2 or more	33.8	(27.7-40.5)	1.09	1.19
11) Perception of School Safety			***	NS
High (Comparison Group)	39.2	(35.1-43.4)	—	—
Moderate	28.3	(25.5-31.2)	0.61***	0.67
Low	35.3	(27.2-44.4)	0.85	1.00
12) Level of School Attachment			**	NS
High (Comparison Group)	30.6	(26.4-35.1)	—	—
Moderate	31.2	(28.5-34.0)	1.03	0.94
Low	41.1	(35.9-46.5)	1.58**	1.02

[†] excludes glue, solvents, and prescription drugs.

Notes: Asterisks in shaded rows indicate the significance of chi-square tests of association. Odds greater than 1.0 indicate that a illicit drug use is more likely in that group, compared to the comparison group; odds less than 1.0 indicate that illicit drug use is less likely in that group, compared to the comparison group. "NS"= non-significant effect, *p<.05; **p<.01; ***p<.001.

Source: OSDUS, Centre for Addiction and Mental Health

Table 3.9.11

Any Illicit Drug Use (excluding cannabis)[†] During the Past 12 Months: Unadjusted and Adjusted Group Differences

	%	95% CI	Unadjusted Odds Ratio	Adjusted Odds Ratio
Total Sample (N=3152)	17.3	(15.5-19.2)		
1) Sex			**	NS
Female (Comparison Group)	15.2	(13.2-17.5)	—	—
Male	19.4	(16.9-22.2)	1.34	1.00
2) Grade (Comparison Group is the previous grade)			***	***
7	7.8	(5.6-10.8)	—	—
8	8.5	(6.1-11.7)	1.09	0.99
9	13.8	(10.8-17.6)	1.73*	1.49*
10	19.0	(15.2-23.6)	1.46	1.48*
11	25.9	(21.5-30.9)	1.49*	1.60*
12	26.3	(22.0-31.0)	1.02	1.01
3) Region (Comparison Group is Ontario)			**	*
Toronto	11.4	(7.9-16.1)	0.67*	0.67*
Southwest	23.9	(18.5-30.2)	1.64**	1.39*
Central South	8.8	(2.9-23.8)	0.50	0.74
Central West	19.2	(14.9-24.3)	1.24	1.31*
Central East	17.7	(12.9-23.8)	1.12	1.15
East	15.0	(12.5-18.0)	0.92	0.89
North	21.3	(17.2-26.1)	1.41*	1.08
4) Family Structure			**	NS
Intact (Comparison Group)	16.2	(14.4-18.2)	—	—
Not Intact (Single Parent)	22.0	(17.7-27.0)	1.46	1.22
5) Family Immigrant Status			***	***
Native (Comparison Group)	20.1	(17.8-22.7)	—	—
Second Generation Immigrant	15.8	(12.8-19.3)	0.74*	0.78
First Generation Immigrant	11.0	(8.2-14.7)	0.49***	0.44***
6) Parents' Level of Education			NS	NS
High (Comparison Group)	15.4	(12.7-18.6)	—	—
Moderate	17.6	(15.3-20.0)	1.17	0.80
Low	20.4	(13.6-29.2)	1.40	0.84
7) Parent-Child Relationship			***	***
Good (Comparison Group)	15.8	(14.1-17.7)	—	—
Poor	45.2	(37.0-53.8)	4.40	2.73
8) Parental Monitoring			***	***
High (Comparison Group)	12.3	(10.6-14.3)	—	—
Low	41.5	(36.8-46.5)	5.06	3.75
9) School Marks			***	***
As or Bs (Comparison Group)	14.3	(12.6-16.2)	—	—
Cs or below	31.4	(27.2-35.9)	2.75	2.11
10) Number of School Moves in Past 5 Years			NS	NS
None or 1 (Comparison Group)	16.6	(14.7-18.6)	—	—
2 or more	21.0	(16.3-26.5)	1.34	1.36
11) Perception of School Safety			**	NS
High (Comparison Group)	20.1	(17.1-23.4)	—	—
Moderate	15.2	(13.3-17.4)	0.71**	0.86
Low	23.8	(17.2-32.0)	1.25	1.62
12) Level of School Attachment			**	NS
High (Comparison Group)	15.2	(12.5-18.5)	—	—
Moderate	16.9	(14.9-19.2)	1.13	0.96
Low	23.4	(18.6-29.0)	1.70**	0.89

[†] also excludes glue, solvents, and prescription drugs.

Notes: Asterisks in shaded rows indicate the significance of chi-square tests of association. Odds greater than 1.0 indicate that illicit drug use is more likely in that group, compared to the comparison group; odds less than 1.0 indicate that illicit drug use is less likely in that group, compared to the comparison group. "NS"= non-significant effect, *p<.05; **p<.01; ***p<.001.

Source: OSDUS, Centre for Addiction and Mental Health

Table 3.9.12

Reporting 3 or All 4 Co-existing Problems: Psychological Distress, Hazardous Drinking, Drug Problem, and Delinquent Behaviour: Unadjusted and Adjusted Group Differences

	%	95% CI	Unadjusted Odds Ratio	Adjusted Odds Ratio
Total Sample (N=3464)	10.1	(8.8-11.6)		
1) Sex			NS	NS
Female (Comparison Group)	9.8	(8.0-12.0)	—	—
Male	10.4	(8.6-12.5)	1.06	0.96
2) Grade (Comparison Group is the previous grade)			***	**
7	3.7	(1.8-7.4)	—	—
8	4.6	(2.3-8.9)	1.25	1.29
9	8.4	(6.5-10.9)	1.91	1.45
10	12.9	(9.5-17.2)	1.60	1.57
11	15.5	(11.9-20.0)	1.24	1.21
12	13.2	(10.0-17.1)	0.83	0.83
3) Region (Comparison Group is Ontario)			NS	NS
Toronto	9.8	(6.9-13.8)	1.09	1.06
Southwest	11.1	(8.2-14.9)	1.24	0.94
Central South	3.9	(1.0-13.8)	0.40	0.85
Central West	11.0	(8.2-14.5)	1.23	1.29
Central East	10.7	(7.2-15.6)	1.19	1.15
East	9.3	(6.5-13.1)	0.98	0.97
North	11.1	(8.1-15.1)	1.24	0.81
4) Family Structure			***	*
Intact (Comparison Group)	8.7	(7.6-9.9)	—	—
Not Intact (Single Parent)	16.7	(12.9-21.5)	2.12	1.50
5) Family Immigrant Status			NS	*
Native (Comparison Group)	11.5	(9.6-13.7)	—	—
Second Generation Immigrant	9.0	(7.0-11.4)	0.76	0.63*
First Generation Immigrant	7.9	(5.0-12.1)	0.66	0.46*
6) Parents' Level of Education			**	NS
High (Comparison Group)	6.6	(5.1-8.6)	—	—
Moderate	10.9	(9.4-12.6)	1.72***	1.32
Low	12.0	(6.7-20.6)	1.92*	1.22
7) Parent-Child Relationship			***	***
Good (Comparison Group)	8.8	(7.6-10.1)	—	—
Poor	35.6	(26.7-45.6)	5.73	2.77
8) Parental Monitoring			***	***
High (Comparison Group)	5.9	(4.8-7.1)	—	—
Low	32.3	(27.2-37.9)	7.65	5.32
9) School Marks			***	***
As or Bs (Comparison Group)	7.7	(6.5-9.1)	—	—
Cs or below	21.0	(17.1-25.4)	3.18	2.04
10) Number of School Moves in Past 5 Years			NS	NS
None or 1 (Comparison Group)	9.8	(8.4-11.4)	—	—
2 or more	12.4	(9.4-16.0)	1.30	1.15
11) Perception of School Safety			NS	NS
High (Comparison Group)	10.1	(8.2-12.3)	—	—
Moderate	10.1	(8.5-12.1)	1.00	1.05
Low	10.3	(6.1-17.8)	1.02	0.59
12) Level of School Attachment			***	**
High (Comparison Group)	5.0	(3.7-6.6)	—	—
Moderate	11.3	(9.7-13.2)	2.43***	1.86**
Low	16.8	(12.2-22.6)	3.82***	2.46**

Notes: Asterisks in shaded rows indicate the significance of chi-square tests of association. Odds greater than 1.0 indicate that co-existing problems are more likely in that group, compared to the comparison group; odds less than 1.0 indicate that co-existing problems are less likely in that group, compared to the comparison group. "NS"= non-significant effect, *p<.05; **p<.01; ***p<.001.

Source: OSDUS, Centre for Addiction and Mental Health

4.0

Discussion

The Public Health Approach towards Mental Health and Risk Behaviour Problems

Designating mental health problems and risky behaviours as public health issues enables health professionals from various disciplines to work together on prevention. Preventing problems from occurring, or at least reducing the risk, is preferable over treating problems, both on an individual and a societal level.

The public health approach involves: identifying the pervasiveness of a given problem among the general population; identifying its timing and pattern during the life course; tracking trends in the prevalence and incidence over time; identifying risk and protective factors; designing preventive programs and active health promotion programs; and disseminating findings to the general public.

Study Limitations

Before addressing some of the public health implications of our findings, it is important to first highlight some of the limitations of this study. First, we must recognize that these data are based on self-reports. Thus, they are subjective and not based on clinical evaluation. Second, the data reflect a snapshot in time; consequently, because we do not follow the same students across time, we cannot identify causes of change or the temporal ordering of effect (e.g., whether low school attachment precedes depressive symptoms). Also, we cannot determine from these data to what extent our findings are adolescent-limited, for example, to what extent delinquent activities decline or cease with transition into young adulthood.

Despite these limitations, such monitoring studies excel at identifying the extent and change of various health outcomes that have important current and future implications for adolescent well-being. Indeed, such studies help to identify which groups of the population are at the greatest risk for poor health outcomes, help to identify areas requiring more research and help to identify potential future trends that may have implications for future service needs.

Some Encouraging Findings

There are many findings in this report that should be viewed as encouraging. Indeed, the majority of students:

- ❑ rate their health as excellent or very good;
- ❑ are satisfied with their weight;
- ❑ get along very well with their parents;
- ❑ report a positive school climate – that is, a feeling of connectedness to their school, feeling that the teachers are excellent, and feeling safe at school;
- ❑ do not report internalizing problems (e.g., depressive symptoms) or externalizing problems (e.g., violent behaviour).

In addition, we found several improvements in well-being over time:

- ❑ Compared to 1999, fewer students today report a pathological gambling problem.

- ❑ Compared to 1999, fewer students today report medical Ritalin use, and medical barbiturates use.
- ❑ Fewer students today report carrying a weapon compared to their counterparts in 1993. A similar decline in self-reported weapon carrying has been found in the U.S.²⁷ Reports of assaulting someone have also declined among students since 1997.
- ❑ Reports of vandalism and theft under \$50 are lower today than a decade ago.

About one-in-three students report...

- ❑ they were treated for one or more physical injuries in the past year
- ❑ elevated psychological distress
- ❑ they were bullied at school
- ❑ bullying someone at school.

About one-in-five students report...

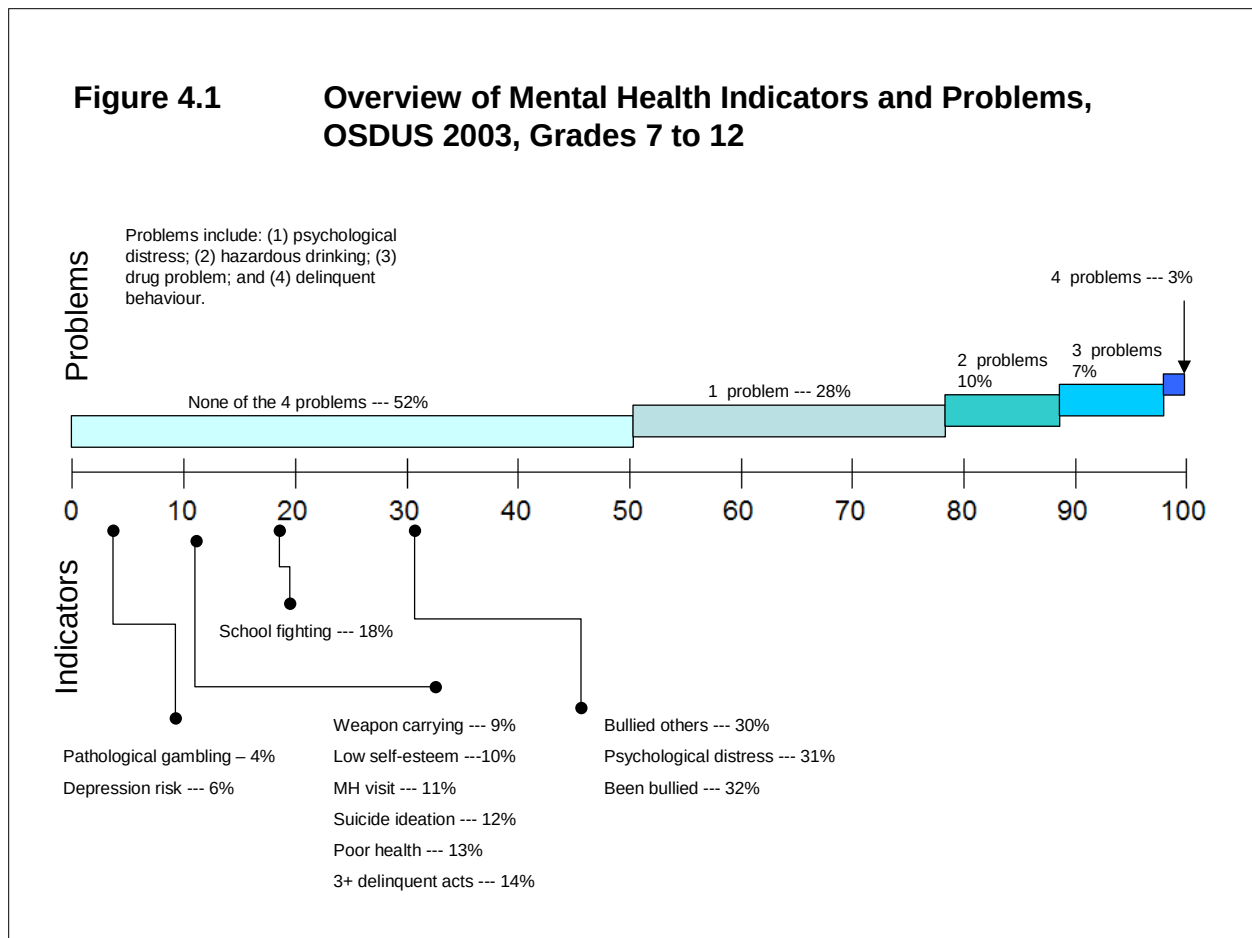
- ❑ fighting at school
- ❑ they do not like school.

About one-in-eight students report...

- ❑ suicide ideation
- ❑ delinquent behaviour
- ❑ assaulting someone
- ❑ concern about personal safety at school.

Some Public Health Flags

Although the majority of students do not report a problem, a considerable minority report some form of impaired well-being or functioning:



About one-in-ten students report...

- ❑ poor health
- ❑ physical inactivity
- ❑ low self-esteem
- ❑ visiting a mental health professional
- ❑ carrying a weapon
- ❑ co-existing problems.

About one-in-twenty students ...

- ❑ are at risk for depression
- ❑ have no one to talk to about their problems
- ❑ were prescribed medication to treat depression, anxiety, or both problems
- ❑ report gang fighting
- ❑ report a pathological gambling problem.

In addition, some findings point to potentially disturbing trends:

- ❑ Self-rated poor health has increased over the past decade and is currently at an all-time high at about 13%.
- ❑ The percentage of students reporting selling cannabis is higher today than it was in 1991.

Year 2010 Health Objectives

American public health professionals have outlined health objectives for the year 2010.⁴⁴ Two estimates in this report pertain to these objectives.

First, the 2010 target set for the percentage adolescents engaging in vigorous activity at least three times weekly is 85%. In 2003, only 63% of Ontario students reported meeting this criterion.

Second, the 2010 target to reduce physical fighting among American adolescents in grades 9 to 12 is 33%. In 2003, 11% of Ontario students in these grades reported assaulting someone during the past 12 months.

Important Factors Related to Adolescent Mental Health and Well-Being

Understanding the risk and protective factors surrounding mental health and well-being is essential to designing appropriate prevention programs and allocating resources effectively.

The present report found that well-being varies greatly depending on sex, even after controlling for other factors. One general pattern is that females are more likely to experience internalizing problems (such as depression, psychological distress, and suicide ideation), whereas males exhibit risky or externalizing behaviours (such as delinquent acts and pathological gambling).

Age is also significantly related to mental health and well-being. The general pattern found is that psychological distress, poor health, delinquent behaviour, and co-existing problems increase with grade and tend to peak in late adolescence. Bullying behaviour and fighting at school peak in early adolescence and subside as grade increases.

Other significant risk factors that are not static, and thus can be addressed by interventions, relate to the family and school settings. Specifically, the quality of the parent-child relationship and the level of parental monitoring show consistent associations with both internalizing and externalizing problems. We also found that being in a family with a single-parent increases the likelihood of some externalizing problems, such as delinquent behaviour and hazardous drinking.

Being an immigrant or having immigrant parents seems to be a protective factor against hazardous drinking, illicit drug use, and co-existing problems, even after controlling for other variables such as parental supervision. This finding is consistent with other Canadian and American research showing that immigrants have improved mental health and physical health compared to those who are native-born. {Beiser, 2002 #183; Fuligni, 1997 #203; Harker, 2001

#204 Researchers posit that this improvement may be due to better lifestyle habits, increased religiosity, or increased social support experienced by recent immigrants. However, one opposing finding in this report, which requires future monitoring, is that immigrant students are more likely to report a gambling problem.

School marks and school climate factors – such as the degree of connectedness, concern over personal safety – are associated with well-being. Students who do not do well academically are likely to engage in risky behaviours. Students who do not feel connected to their school, and those who feel that their personal safety is somehow threatened, are likely to experience internalizing problems. We cannot know from our data, however, whether school connectedness influences poor grades, or whether the reverse holds.

Possibilities for Prevention

Mental health promotion programs are emerging in schools across North America. Factors such as school connectedness and academic achievement are malleable and can thus serve as underpinnings for prevention programs. Programs that foster academic achievement and a sense of competence have shown positive results, either preventing or reducing conduct problems in young children, or delinquent behaviour and substance use in older children.^{36, 37, 85}

Another avenue for promoting mental health and well-being is through parent programs. Some research has shown that improving parenting skills (e.g., monitoring), increasing parent-child communication and strengthening bonds can reduce antisocial and problem behaviour in children.^{34, 35, 86} Ideally, any prevention program should be comprehensive – that is, involving school and family, as well as the wider community (i.e., policies).

Over the past decade or so, research has examined the role of physical activity in the prevention and treatment of mental health

problems. Studies have shown that exercise can prevent and treat depression and anxiety, although the mechanisms underpinning these positives effects are not well established.⁸⁷ Therefore, promoting exercise to adolescents could be a worthwhile strategy on various fronts.

Selected prevention programs are those that specifically target special populations who have been found to have an increased risk for a given problem. One consistent finding in this report is the vulnerability of young females to emotional health problems. The higher prevalence of depression, psychological distress, thoughts of suicide, and body image issues among young females underscores the need for prevention programs that specifically target the needs of this group.

Future OSDUS Monitoring

In order to assess the public health implications of some of our findings, careful monitoring of the following is necessary:

- the level of physical inactivity and self-rated health,
- psychological distress, and
- cannabis selling.

Further, given the expansion of legalized gambling in Ontario, another indicator worthy of continued monitoring is the rate of gambling and related problems among adolescents – who tend to display more problems than adults.²⁹

The purpose of this report was to provide a snapshot of Ontario students' well-being and to assess whether such indicators have changed over time. A major strength of these data is that they are not based on a selective sample of adolescents already experiencing emotional or other difficulties – they are based on a large representative sample of the population. Consequently, our findings should be highly generalizable.

Our findings are consistent with many expectations of the adolescent period. The majority of students report positive indicators of well-being and a minority report negative

indicators. However, this minority can be sizeable – over one-in-ten students (about 122,100) report suicide ideation and just under one-in-three (about 303,300) report elevated distress. These types of results should remind us of the vulnerability of this age group. Although several recent initiatives have been made in the area of early intervention programs with infants and children (e.g., Healthy Babies, Healthy Children, a prevention/early intervention initiative funded by the Ontario government), few widespread programs have been directed toward early adolescence, a period known for the increasing onset of emotional difficulties and psychological disorders. Indeed, health professionals have also commented on the relative lack of research on adolescent psychopathology compared to children and adults.⁸⁸

Regarding trends over time, our data pointed to some *potentially encouraging* results, with some declines in gambling problems and weapon carrying. However, many of these changes occurred only in recent years; consequently, it is too early to know with confidence whether these changes represent the beginning of a new trend or the existence of a brief downward episode. It is only with continued monitoring that these questions can be addressed.

5.0

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**APPENDIX
TABLES**

Table A3.1.1 Family Living Arrangement, and Family and School Mobility During the Past Five Years, 1991 – 2003

	Grades 7-9-11							Grades 7-12		
	1991 %	1993 %	1995 %	1997 %	1999 %	2001 %	2003 %	1999 %	2001 %	2003 %
TOTAL SAMPLE (N=)	(2961)	(2617)	(2907)	(3072)	(2421)	(2013)	(3389)	(4447)	(3898)	(6616)
Currently Live With:										
both natural parents	79.2	73.9	75.0	72.8	73.2	72.6	73.2	72.7	72.2	72.6
one natural parent only	—	15.1	13.7	14.8	15.1	16.0	15.6	15.8	16.2	15.8
one natural and one step-parent	—	8.0	8.8	10.4	8.9	9.1	9.4	8.8	9.6	9.2
neither natural parent	—	3.0	2.4	2.0	2.8	2.3	1.8	2.7	1.9	2.4
Number of Family Moves (past 5 years)										
0	—	—	52.9	53.8	51.0	53.3	52.5	53.1	54.1	52.7
1	—	—	26.5	24.7	26.6	25.5	25.9	25.3	25.3	25.7
2-3	—	—	14.5	15.5	16.4	15.8	15.7	15.8	15.3	16.3
4+	—	—	6.1	6.0	6.0	5.4	5.9	5.8	5.3	5.6
Number of School Moves (past 5 years)										
0	—	—	—	—	—	—	—	—	62.4	62.2
1	—	—	—	—	—	—	—	—	23.2	22.8
2-3	—	—	—	—	—	—	—	—	12.3	12.4
4+	—	—	—	—	—	—	—	—	2.1	2.6

Notes: ¹ The question used in 1991 was “Do you currently live with both parents?”; numbers in parentheses are the number of interviews; — indicates data not available for that year.

Qs: With whom are you currently living?

How many times have you moved to a different home in the last 5 years?

During the last 5 years, how many times have you changed schools (Do not include changing from elementary school to high school)?

Source: OSDUS, Centre for Addiction and Mental Health

Table A3.1.2 School Performance and Attitudes, 1991 – 2003

	Grades 7-9-11							Grades 7-12		
	1991 %	1993 %	1995 %	1997 %	1999 %	2001 %	2003 %	1999 %	2001 %	2003 %
TOTAL SAMPLE (N=)	(2961)	(2617)	(2907)	(3072)	(2421)	(2013)	(3389)	(4447)	(3898)	(6616)
Marks Usually Receive in All Subjects										
A (80%-100%)	28.4	29.0	32.3	35.5	39.1	37.5	34.8	37.8	36.4	36.2
B (67%-79%)	46.3	48.8	44.9	42.3	42.0	46.0	46.2	43.5	45.1	45.7
C (60%-66%)	20.2	18.5	17.6	17.9	13.4	12.1	13.8	13.8	13.6	13.6
D (50%-59%)	4.7	3.4	4.9	3.8	5.0	3.6	4.7	4.3	4.2	4.1
< D (below 50%)	†	†	†	0.6	0.5	0.7	0.5	0.5	0.6	†
Likely to Graduate										
very likely	83.3	85.2	85.8	84.7	85.6	85.0	84.6	85.8	86.4	86.3
fairly likely	15.0	13.1	12.8	13.6	12.0	12.4	12.9	11.7	11.2	11.6
not at all/not very likely	1.7	1.7	1.4	1.7	2.4	2.6	2.5	2.5	2.5	2.1
School Performance (relative to other students) *		(1241)	(1453)	(1527)	(1168)	(953)	(1618)	(2148)	(1837)	(3152)
above average	—	28.8	35.3	32.7	30.2	31.2	29.4	30.6	31.0	30.5
slightly above	—	27.8	25.5	26.8	25.6	24.8	23.3	24.2	24.7	23.0
average	—	35.5	30.8	31.0	32.6	32.5	34.7	33.8	33.1	33.3
slightly below	—	5.9	6.6	6.4	7.8	7.8	8.9	7.7	7.7	8.9
below average	—	1.9	1.7	3.1	3.8	3.7	3.7	3.7	3.6	4.3
Hours Spent on Homework Per Week *										
0 or less than 1 hour	—	16.9	15.3	17.6	21.2	15.0	19.7	22.2	16.3	19.3
1-2 hours	—	24.3	27.2	24.6	28.7	28.3	28.6	28.4	27.5	27.0
3-4	—	27.6	29.4	28.8	26.1	28.6	26.1	24.8	28.6	25.8
5-6	—	19.5	18.2	18.4	14.9	16.6	14.9	15.0	16.6	15.9
7+	—	11.7	9.9	10.6	9.1	11.5	10.8	9.6	10.9	12.1
Feelings about School *										
like it a lot/very much	—	36.0	34.7	35.6	32.2	28.7	28.6	29.6	26.8	28.3
like it somewhat	—	51.1	49.7	47.4	50.7	51.6	49.4	51.8	52.8	49.9
do not like it very much/at all	—	12.9	15.5	17.0	17.2	19.8	22.0	18.5	20.4	21.8

Notes: * Question asked of a random half sample in each year; numbers in parentheses are number of interviews; — indicates data not available for that year; † indicates data suppressed (<0.5%).

Qs: Overall, what marks do you usually get in school?; How likely is it that you will stay in school until you graduate?; Compared to other students in your school, how do you rate yourself in the school work you do?; On average, how much time do you spend doing homework each week outside school?; How do you feel about going to school?

Source: OSDUS, Centre for Addiction and Mental Health

Table A3.1.3 School Climate, 1999 – 2003, Grades 7 – 12

	1999	2001	2003
	% Agreeing *	% Agreeing	% Agreeing
TOTAL SAMPLE	(N=4447)	(N=3898)	(N=6616)
I feel close to people at this school	85.4	87.8	86.9
I feel like I am part of this school	83.8	84.9	82.7
Most teachers in my school are excellent	72.5	74.4	75.4
Most courses offered in my school are challenging	78.2	79.6	78.1
I feel safe in my school	90.4	91.4	90.9
% worried that will be harmed, threatened at school	14.2	13.1	12.4

Notes: * Strongly agree or somewhat agree; numbers in parentheses are the number of interviews.

Source: OSDUS, Centre for Addiction and Mental Health

Table A3.2.1 Parental Support, 1993 – 2003

	Grades 7-9-11						Grades 7-12		
	1993 %	1995 %	1997 %	1999 %	2001 %	2003 %	1999 %	2001 %	2003 %
TOTAL SAMPLE (N=)	(1241)	(1453)	(1527)	(1168)	(953)	(3389)	(2148)	(1837)	(6616)
How well would you say you are getting along with your parents?									
very well	52.6	51.6	52.4	58.4	54.1	58.1	56.9	53.8	57.0
OK	41.9	42.4	42.2	35.7	40.6	37.7	37.7	40.5	38.0
not getting along	5.5	5.9	5.4	5.9	5.3	4.2	5.5	5.7	5.0
When you have problems can you talk to your <i>mother</i> about them?									
always	—	20.9	21.5	29.9	10.2	12.9	29.6	12.1	12.6
usually	—	28.8	31.5	27.9	26.3	27.3	27.5	26.3	27.2
sometimes	—	26.6	24.6	22.9	32.9	29.2	23.4	29.9	28.1
seldom	—	14.6	13.6	9.7	16.2	18.2	10.8	17.2	18.3
never	—	9.0	8.8	9.6	14.4	12.4	8.7	14.5	13.8
When you have problems can you talk to your <i>father</i> about them?									
always	—	11.4	12.3	18.3	5.1	5.8	18.2	5.5	5.1
usually	—	19.9	22.6	20.6	14.5	14.5	20.9	14.5	14.6
sometimes	—	26.6	25.4	26.5	27.0	29.0	24.7	25.7	27.4
seldom	—	20.7	22.3	16.9	27.5	25.9	18.1	27.8	27.4
never	—	21.4	17.3	17.7	25.9	24.8	18.1	26.4	25.5

Notes: Data based on a random half sample in each year between 1993 and 2001; numbers in parentheses are number of interviews; — indicates data not available

Source: OSDUS, Centre for Addiction and Mental Health

Table A3.3.1 Self-Rated Physical Health, 1991 – 2003

	Grades 7-9-11							Grades 7-12		
	1991 %	1993 %	1995 %	1997 %	1999 %	2001 %	2003 %	1999 %	2001 %	2003 %
TOTAL SAMPLE (N=)	(2961)	(2617)	(2907)	(3072)	(2421)	(2013)	(3389)	(4447)	(3898)	(6616)
poor	0.9	1.0	1.3	1.5	1.5	1.5	2.4	1.6	1.9	2.6
fair	4.9	5.4	6.4	7.8	7.2	7.5	9.5	7.4	8.4	10.1
good	22.9	26.2	28.6	28.5	27.8	29.1	31.7	27.6	29.4	33.2
very good	39.9	40.1	39.6	37.6	37.6	37.6	33.2	38.9	37.0	32.7
excellent	31.4	27.3	24.2	24.5	25.9	24.2	23.1	25.6	23.2	21.4
MALES	(1554)	(1270)	(1884)	(1438)	(1196)	(1004)	(1670)	(2195)	(1917)	(3163)
poor	0.9	1.0	1.2	0.9	1.8	1.1	1.6	1.5	1.4	1.8
fair	4.4	4.0	4.5	6.6	7.6	6.0	7.8	7.2	6.9	8.1
good	20.2	23.8	24.4	24.1	24.1	24.3	27.4	23.6	25.8	29.1
very good	39.2	38.5	39.2	37.9	36.3	40.8	35.4	37.9	37.9	34.4
excellent	35.3	32.6	30.6	30.4	30.2	27.8	27.8	29.8	28.0	26.6
FEMALES	(1407)	(1347)	(1974)	(1634)	(1225)	(1009)	(1719)	(2252)	(1981)	(3453)
poor	0.9	0.9	1.3	2.0	1.3	2.0	3.2	1.6	2.4	3.2
fair	5.4	6.7	8.1	8.9	6.7	9.0	11.1	7.6	9.9	11.9
good	26.0	28.6	32.4	32.4	31.7	34.0	35.8	31.8	33.0	37.0
very good	40.6	40.7	39.9	37.3	38.8	34.3	31.2	37.8	36.2	31.1
excellent	27.1	22.1	18.3	19.4	21.5	20.7	18.7	21.2	18.6	16.7
GRADE 7	(943)	(896)	(929)	(851)	(766)	(750)	(947)	(766)	(750)	(947)
poor	0.8	1.0	1.4	0.9	1.0	1.8	1.7	1.0	1.8	1.7
fair	3.1	4.5	3.6	4.9	2.9	4.4	5.1	2.9	4.4	5.1
good	17.6	19.7	19.9	23.1	21.9	19.8	26.6	21.9	19.8	26.6
very good	36.6	40.1	39.8	38.1	39.9	42.0	36.0	39.9	42.0	36.0
excellent	41.9	34.7	35.3	33.1	34.4	32.1	30.5	34.4	32.1	30.5
GRADE 8								(798)	(691)	(976)
poor								1.7	1.8	1.6
fair								5.5	5.7	8.2
good								20.2	25.9	26.7
very good								40.5	39.2	35.0
excellent								32.1	27.4	28.5
GRADE 9	(902)	(1,006)	(1,054)	(1,153)	(905)	(702)	(1254)	(905)	(702)	(1254)
poor	1.1	0.7	1.0	1.8	2.2	1.0	2.0	2.2	1.0	2.0
fair	5.8	5.2	5.6	8.2	7.6	7.9	9.3	7.6	7.9	9.3
good	22.3	25.8	28.9	28.7	28.7	33.6	29.7	28.7	33.6	29.7
very good	41.9	42.9	41.4	38.0	37.9	35.4	35.9	37.9	35.4	35.9
excellent	28.9	25.4	23.1	23.3	23.6	22.1	23.0	23.6	22.1	23.0
GRADE 10								(638)	(806)	(1181)
poor								1.5	3.5	3.4
fair								8.5	9.6	11.4
good								32.4	31.4	36.7
very good								35.3	34.6	29.4
excellent								22.3	21.0	19.1
GRADE 11	(1125)	(721)	(932)	(1,069)	(750)	(561)	(1188)	(750)	(561)	(1188)
poor	0.7	1.2	1.2	1.8	1.3	2.0	3.4	1.3	2.0	3.4
fair	5.7	6.3	9.1	10.0	10.2	10.2	13.2	10.2	10.2	13.2
good	28.4	32.1	33.7	33.1	32.0	33.2	37.7	32.0	33.2	37.7
very good	41.1	37.3	37.3	36.9	35.2	35.9	28.3	35.2	35.9	28.3
excellent	24.0	23.1	18.7	18.2	21.4	18.8	17.4	21.4	18.8	17.4

	Grades 7-9-11							Grades 7-12		
	1991 %	1993 %	1995 %	1997 %	1999 %	2001 %	2003 %	1999 %	2001 %	2003 %
GRADE 12								(590)	(388)	(1070)
poor								1.4	0.7	2.8
fair								9.5	14.4	12.0
good								30.6	32.2	39.8
very good								38.7	36.2	32.7
excellent								19.8	16.5	12.6
TORONTO	(601)	(642)	(763)	(715)	(437)	(353)	(567)	(740)	(533)	(1097)
poor	1.0	†	1.5	1.3	0.5	1.5	2.8	1.8	1.7	3.1
fair	5.5	6.1	6.9	5.8	6.9	6.0	10.5	7.3	7.6	10.6
good	22.9	26.6	28.4	26.8	26.2	29.6	31.8	26.7	29.1	35.5
very good	39.9	38.8	40.4	35.7	37.7	38.6	32.0	35.4	38.1	31.0
excellent	30.7	28.0	22.8	30.4	28.6	24.3	22.8	28.8	23.5	19.7
NORTH REGION	(256)	(156)	(290)	(291)	(321)	(466)	(655)	(808)	(1014)	(1285)
poor	0.7	†	†	1.1	0.7	0.5	2.4	1.0	1.2	1.9
fair	2.7	1.8	6.1	5.2	6.3	10.4	11.8	6.9	8.8	11.0
good	20.0	29.7	28.6	26.8	31.3	28.6	32.6	30.2	31.5	31.6
very good	42.8	47.2	37.7	35.7	40.4	32.8	30.8	39.4	33.0	35.3
excellent	33.8	21.3	27.3	30.4	21.3	27.7	22.4	22.5	25.5	20.1
WEST REGION	(1252)	(1122)	(1717)	(1163)	(822)	(710)	(1308)	(1532)	(1425)	(2513)
poor	0.9	0.7	1.7	1.5	1.2	2.0	3.0	1.3	2.2	2.8
fair	4.8	5.2	6.4	9.4	8.2	7.9	10.1	8.4	9.0	10.4
good	24.3	25.4	27.6	28.8	27.7	28.5	30.3	27.3	29.8	32.2
very good	38.8	40.0	39.4	37.8	35.5	36.2	31.9	36.9	36.3	31.2
excellent	31.2	28.7	24.9	22.5	27.4	25.3	24.7	26.1	22.6	23.3
EAST REGION	(852)	(697)	(1088)	(903)	(841)	(484)	(859)	(1367)	(926)	(1721)
poor	0.9	2.0	0.8	1.8	2.7	1.1	1.3	1.8	1.8	1.9
fair	5.2	6.3	6.0	7.6	6.1	7.4	7.3	6.2	7.9	9.0
good	21.6	26.3	30.2	28.8	28.4	29.9	33.5	27.8	28.4	33.7
very good	40.7	39.0	39.8	38.4	39.5	40.0	36.7	40.3	38.7	35.2
excellent	31.6	26.5	23.4	23.5	23.3	21.6	21.0	23.8	23.2	20.1

Notes: Numbers in parentheses are the number of interviews; † estimate suppressed (<0.5%).

Qs: How would you rate your physical health?

Source: OSDUS, Centre for Addiction and Mental Health

Table A3.3.2 Days of School Missed Due to Health, 2001 – 2003, Grades 7 to 12

Number of Missed School Days in Past 4 Weeks	2001	2003
	%	%
TOTAL SAMPLE	(N=3898)	(N=6616)
0 days	53.7	57.4
1 day	17.3	15.8
2 days	12.1	12.0
3 days	6.0	5.2
4 or more days	11.0	9.5
MALES	(1917)	(3163)
0 days	59.9	62.2
1 day	15.0	14.1
2 days	10.0	10.9
3 days	5.4	4.6
4 or more days	9.6	8.2
FEMALES	(1981)	(3453)
0 days	47.6	53.0
1 day	19.5	17.5
2 days	14.1	13.0
3 days	6.5	5.8
4 or more days	12.4	10.8
GRADE 7	(750)	(947)
0 days	55.7	60.9
1 day	18.3	15.8
2 days	10.8	11.9
3 days	5.1	4.8
4 or more days	10.1	6.6
GRADE 8	(691)	(976)
0 days	53.4	61.0
1 day	17.6	14.4
2 days	11.9	11.1
3 days	6.2	6.1
4 or more days	10.9	7.4
GRADE 9	(702)	(1254)
0 days	57.9	60.1
1 day	14.6	14.6
2 days	10.9	10.2
3 days	5.8	5.2
4 or more days	10.8	9.9
GRADE 10	(806)	(1181)
0 days	49.9	53.4
1 day	17.1	18.8
2 days	13.6	12.4
3 days	7.5	5.0
4 or more days	11.8	10.3
GRADE 11	(561)	(1188)
0 days	53.3	56.9
1 day	17.0	15.0
2 days	13.0	12.1
3 days	6.3	5.4
4 or more days	10.4	10.5

Number of Missed School Days in Past 4 Weeks	2001	2003
	%	%
GRADE 12	(388)	(1070)
0 days	51.1	53.3
1 day	21.1	16.2
2 days	12.0	14.0
3 days	3.5	4.9
4 or more days	12.4	11.6
TORONTO	(533)	(1097)
0 days	58.6	57.4
1 day	15.0	13.0
2 days	13.2	12.7
3 days	4.2	4.8
4 or more days	9.0	12.1
NORTH REGION	(1014)	(1285)
0 days	54.8	54.6
1 day	14.5	18.7
2 days	11.2	10.9
3 days	6.2	6.0
4 or more days	13.4	9.8
WEST REGION	(1425)	(2513)
0 days	52.3	59.8
1 day	16.8	15.0
2 days	13.1	11.7
3 days	7.2	5.1
4 or more days	10.6	8.4
EAST REGION	(926)	(1721)
0 days	52.0	54.7
1 day	20.5	18.0
2 days	10.0	12.2
3 days	5.2	5.5
4 or more days	12.3	9.6

Note: Numbers in parentheses are the number of interviews.

Qs: *In the last four weeks (that is, during the last 20 school days), how many days of school did you miss because of your health?*

Source: OSDUS, Centre for Addiction and Mental Health

Table A3.3.3 Days of Physical Activity, 1999 – 2003, Grades 7 to 12

	1999		2001		2003	
	Physical Activity Past 7 Days %	In-School Physical Activity Past 5 Days %	Physical Activity Past 7 Days %	In-School Physical Activity Past 5 Days %	Physical Activity Past 7 Days %	In-School Physical Activity Past 5 Days %
TOTAL	(N=2299)		(N=2061)		(N=6616)	
0 days	15.1	43.8	13.8	44.2	16.1	46.4
1 day	8.7	8.5	10.6	10.8	9.5	8.8
2 days	12.9	13.4	11.0	12.1	11.4	12.4
3 days	13.1	13.4	14.5	11.6	13.8	10.3
4 days	12.5	6.4	13.0	4.7	11.1	5.9
5 days	14.4	14.4	12.7	16.3	12.8	16.3
6 days	6.6		7.5		7.2	
7 days	16.7		16.9		18.2	
Mean number of days (95% CI)	3.53 (3.38-3.67)	1.73 (1.60-1.86)	3.55 (3.40-3.70)	1.71 (1.58-1.85)	3.52 (3.43-3.62)	1.69 (1.60-1.79)
MALES	(1151)		(1018)		(3163)	
0 days	15.8	41.2	13.6	39.0	15.6	43.5
1 day	6.5	7.4	7.4	8.4	7.2	8.1
2 days	10.0	11.9	7.5	11.6	9.3	11.4
3 days	12.6	14.2	13.2	14.2	11.3	11.0
4 days	12.0	7.2	13.2	5.8	10.7	5.8
5 days	14.6	18.2	13.2	20.9	13.9	20.3
6 days	7.6		9.6		8.6	
7 days	20.9		22.2		23.3	
Mean number of days (95% CI)	3.77 (3.58-3.96)	1.93 (1.77-2.09)	3.94 (3.73-4.16)	2.02 (1.82-2.22)	3.87 (3.75-3.99)	1.88 (1.76-2.00)
FEMALES	(1148)		(1043)		(3453)	
0 days	14.3	46.5	13.9	49.4	16.5	49.0
1 day	10.9	9.5	13.8	13.1	11.6	9.5
2 days	15.8	15.0	14.4	12.6	13.3	13.2
3 days	13.6	12.7	15.7	9.0	16.1	9.7
4 days	13.0	5.7	12.8	4.1	11.4	6.0
5 days	14.2	10.5	12.2	11.8	11.8	12.6
6 days	5.7		5.4		5.9	
7 days	12.5		11.7		13.4	
Mean number of days (95% CI)	3.28 (3.10-3.46)	1.53 (1.39-1.67)	3.16 (3.00-3.32)	1.41 (1.27-1.55)	3.20 (3.07-3.34)	1.52 (1.40-1.64)
GRADE 7	(397)		(404)		(947)	
0 days	18.4	30.0	11.9	20.0	18.5	27.9
1 day	10.0	13.5	8.2	18.8	7.7	14.0
2 days	9.6	21.5	12.6	23.2	11.8	22.8
3 days	8.6	15.1	12.5	15.8	12.7	13.6
4 days	14.4	6.9	13.2	5.9	9.6	6.8
5 days	13.5	13.0	11.9	16.3	13.1	14.8
6 days	5.0		6.5		6.1	
7 days	20.5		23.2		20.4	
Mean number of days (95% CI)	3.53 (3.23-3.83)	1.94 (1.71-2.18)	3.85 (3.55-4.14)	2.18 (1.92-2.43)	3.53 (3.20-3.86)	2.02 (1.84-2.20)

	1999		2001		2003	
	Physical Activity Past 7 Days %	In-School Physical Activity Past 5 Days %	Physical Activity Past 7 Days %	In-School Physical Activity Past 5 Days %	Physical Activity Past 7 Days %	In-School Physical Activity Past 5 Days %
GRADE 8	(407)		(379)		(976)	
0 days	12.8	23.9	11.8	21.8	11.5	22.3
1 day	8.4	11.9	6.4	13.8	8.8	16.4
2 days	10.6	23.8	12.1	23.6	9.7	22.3
3 days	16.1	18.6	13.6	16.4	14.8	16.5
4 days	10.8	8.6	10.2	7.2	12.1	7.3
5 days	13.5	13.1	15.4	17.2	13.0	15.1
6 days	9.4		8.0		8.8	
7 days	18.5		22.6		21.4	
Mean number of days (95% CI)	3.74 (3.43-4.06)	2.16 (1.95-2.36)	3.95 (3.63-4.27)	2.25 (1.97-2.53)	3.88 (3.70-4.06)	2.15 (1.95-2.35)
GRADE 9	(463)		(368)		(1254)	
0 days	11.8	35.6	12.9	44.9	16.2	43.5
1 day	8.4	7.8	10.9	11.4	6.3	8.2
2 days	10.4	12.4	9.7	6.2	10.0	7.8
3 days	14.4	18.7	13.5	12.5	12.7	10.5
4 days	13.2	5.3	10.7	5.0	10.3	7.1
5 days	16.9	20.2	12.5	20.1	13.3	23.0
6 days	6.8		10.1		6.9	
7 days	18.3		19.7		24.4	
Mean number of days (95% CI)	3.78 (3.50-4.05)	2.11 (1.80-2.41)	3.75 (3.41-4.08)	1.81 (1.53-2.10)	3.83 (3.65-4.01)	1.98 (1.81-2.16)
GRADE 10	(342)		(422)		(1181)	
0 days	15.5	55.7	15.7	57.6	16.9	55.9
1 day	7.8	5.5	13.0	7.3	9.9	5.6
2 days	19.0	8.5	10.0	6.6	11.9	7.9
3 days	12.7	9.2	13.0	8.3	12.0	7.0
4 days	9.2	6.1	13.5	5.2	12.0	5.3
5 days	15.3	15.0	12.8	15.1	13.2	18.3
6 days	6.8		7.0		7.0	
7 days	13.7		15.1		17.2	
Mean number of days (95% CI)	3.34 (3.02, 3.66)	1.50 (1.23, 1.76)	3.38 (3.06, 3.69)	1.42 (1.17, 1.66)	3.47 (3.22-3.69)	1.55 (1.29-1.81)
GRADE 11	(393)		(288)		(1188)	
0 days	19.1	57.2	16.4	61.3	16.2	59.8
1 day	9.6	7.2	12.0	5.6	10.2	5.1
2 days	11.1	8.6	11.2	7.0	11.8	9.2
3 days	13.6	10.0	17.2	9.7	17.9	8.2
4 days	14.1	6.1	16.0	3.6	10.0	4.0
5 days	12.0	11.0	12.4	12.8	11.4	13.5
6 days	5.7		5.1		8.0	
7 days	14.7		9.7		14.3	
Mean number of days (95% CI)	3.26 (2.94-3.58)	1.34 (1.10-1.57)	3.10 (2.73-3.48)	1.27 (0.89-1.64)	3.33 (3.13-3.53)	1.32 (1.17-1.47)

	1999		2001		2003	
	Physical Activity Past 7 Days %	In-School Physical Activity Past 5 Days %	Physical Activity Past 7 Days %	In-School Physical Activity Past 5 Days %	Physical Activity Past 7 Days %	In-School Physical Activity Past 5 Days %
GRADE 12	(297)		(200)		(1270)	
0 days	13.0	64.7	13.6	62.2	16.5	60.8
1 day	7.8	4.6	13.5	7.0	14.0	6.2
2 days	19.1	5.7	10.9	8.6	13.1	8.1
3 days	12.2	6.6	20.0	5.3	12.4	7.9
4 days	12.5	6.0	16.1	1.6	12.5	5.1
5 days	15.1	12.3	11.0	15.2	13.0	12.0
6 days	6.3		7.8		6.5	
7 days	13.9		7.1		12.0	
Mean number of days (95% CI)	3.44 (3.12-3.75)	1.22 (0.94-1.49)	3.11 (2.77-3.45)	1.23 (0.93-1.52)	3.15 (2.95-3.35)	1.26 (1.03-1.49)
TORONTO	(371)		(267)		(1097)	
0 days	19.2	44.3	16.3	39.6	21.3	48.5
1 day	10.4	13.0	12.2	15.8	10.0	8.0
2 days	16.8	15.1	14.4	16.2	13.6	13.9
3 days	13.0	13.8	12.5	10.5	14.8	10.5
4 days	9.4	6.2	13.9	4.8	8.9	4.0
5 days	10.8	7.6	11.4	13.1	13.0	15.2
6 days	5.2		7.9		4.0	
7 days	15.2		11.3		14.4	
Mean number of days (95% CI)	3.12 (2.86-3.38)	1.47 (1.17-1.77)	3.18 (2.80-3.56)	1.64 (1.46-1.83)	3.07 (2.87-3.27)	1.59 (1.40-1.78)
NORTH	(424)		(599)		(1285)	
0 days	18.0	49.1	17.3	46.9	14.0	45.6
1 day	7.4	7.1	8.4	9.7	10.4	7.2
2 days	9.4	12.7	9.0	9.2	11.1	13.0
3 days	11.0	9.9	15.1	8.6	13.3	7.7
4 days	14.6	5.7	10.6	5.2	9.4	6.6
5 days	12.7	15.4	14.7	20.4	13.2	19.9
6 days	11.3		7.4		8.0	
7 days	15.7		17.4		20.6	
Mean number of days (95% CI)	3.58 (3.23-3.94)	1.62 (1.36-1.88)	3.54 (3.12-3.96)	1.77 (1.38-2.16)	3.68 (3.52-3.84)	1.82 (1.63-2.01)
WEST	(769)		(718)		(2513)	
0 days	15.6	45.6	13.0	44.1	15.7	46.4
1 day	7.7	6.7	9.8	10.5	9.6	9.6
2 days	13.3	11.0	10.6	12.3	11.0	12.2
3 days	12.7	12.1	16.1	12.0	12.7	9.9
4 days	11.9	7.0	13.0	5.3	11.8	6.4
5 days	15.0	17.7	14.1	15.8	12.2	15.5
6 days	6.2		7.3		8.1	
7 days	17.6		16.1		18.9	
Mean number of days (95% CI)	3.55 (3.30-3.81)	1.81 (1.57-2.05)	3.59 (3.36-3.81)	1.71 (1.52-1.90)	3.59 (3.42-3.76)	1.67 (1.53-1.80)

	1999		2001		2003	
	Physical Activity Past 7 Days %	In-School Physical Activity Past 5 Days %	Physical Activity Past 7 Days %	In-School Physical Activity Past 5 Days %	Physical Activity Past 7 Days %	In-School Physical Activity Past 5 Days %
EAST	(735)		(477)		(1721)	
0 days	11.4	39.8	12.0	46.7	13.9	45.2
1 day	9.4	8.6	11.6	8.2	8.8	8.6
2 days	11.2	15.9	9.9	10.1	10.8	11.4
3 days	14.2	16.1	13.1	12.7	14.9	11.5
4 days	14.4	6.1	13.1	4.5	11.8	6.0
5 days	16.0	13.5	10.9	17.8	13.5	17.2
6 days	6.7		7.5		7.6	
7 days	16.8		21.8		18.8	
Mean number of days (95% CI)	3.69 (3.46-3.93)	1.80 (1.61-2.00)	3.75 (3.46-4.05)	1.74 (1.40-2.08)	3.66 (3.52-3.81)	1.76 (1.53-1.99)

Notes: (1) numbers in parentheses are the number of interviews; (2) data based on a random half sample in 1999 and 2001; (3) percentages for In-School Activity include students not enrolled in Physical Education classes.

Qs: *On how many of the last 7 days did you exercise or participate in sports activities for at least 20 minutes that made you sweat and breathe hard?*

On how many of the last 5 school days did you participate in physical activity for at least 20 minutes that made you sweat and breathe hard in physical education class in your school?

Source: OSDUS, Centre for Addiction and Mental Health

Table A3.4.1 Health Care Utilization During the Past 12 Months, 1999 – 2003, Grades 7 to 12

	Physical Health Care Visits			Mental Health Care Visits		
	1999	2001	2003	1999	2001	2003
	% (95% CI)			% (95% CI)		
TOTAL SAMPLE (N=)	(4447)	(3898)	(6616)	(4447)	(3898)	(6616)
0 visits	30.0 (28.2-31.9)	34.0 (31.8-36.2)	39.8 (38.3-41.3)	87.6 (86.3-88.7)	89.1 (87.8-90.2)	89.0 (87.8-90.0)
1+ visits	70.0 (68.1-71.8)	66.0 (63.8-68.2)	60.2 (58.7-61.7)	12.4 (11.3-13.7)	10.9 (9.8-12.2)	11.0 (10.0-12.2)
Mean number of visits (95% CI)	1.91 (1.74-2.08)	1.75 (1.61-1.89)	1.57 (1.48-1.65)	0.75 (0.54-0.96)	0.49 (0.37-0.61)	0.62 (0.48-0.77)
MALES	(2252)	(1917)	(3163)	(2252)	(1917)	(3163)
0 visits	34.0 (31.7-36.5)	38.9 (35.9-41.9)	46.2 (44.1-48.4)	90.5 (88.8-92.0)	91.9 (90.5-93.1)	91.9 (90.7-92.9)
1+ visits	66.0 (63.5-68.3)	61.1 (58.1-64.1)	53.8 (51.6-55.9)	9.5 (8.0-11.2)	8.1 (6.9-9.5)	8.1 (7.1-9.3)
Mean number of visits (95% CI)	1.79 (1.49-2.09)	1.45 (1.28-1.62)	1.31 (1.18-1.43)	0.66 (.27-1.04)	0.32 (0.23-0.41)	0.49 (0.34-0.63)
FEMALES	(2195)	(1981)	(3453)	(2195)	(1981)	(3453)
0 visits	25.9 (23.6-28.4)	29.2 (27.0-31.6)	33.8 (31.9-35.8)	84.5 (82.4-86.4)	86.4 (84.6-88.0)	86.3 (84.6-87.9)
1+ visits	74.1 (71.6-76.4)	70.8 (68.4-73.0)	66.2 (64.2-68.1)	15.5 (13.6-17.6)	13.6 (12.0-15.4)	13.7 (12.1-15.4)
Mean number of visits (95% CI)	2.03 (1.86-2.20)	2.04 (1.85-2.23)	1.81 (1.69-1.92)	0.84 (0.63-1.06)	0.65 (0.44-0.86)	0.75 (0.57-0.93)
GRADE 7	(766)	(750)	(947)	(766)	(750)	(947)
0 visits	33.6 (29.5-38.0)	33.8 (29.0-38.9)	42.6 (37.9-47.5)	91.1 (88.7-93.0)	92.6 (90.6-94.2)	90.0 (87.9-91.8)
1+ visits	66.4 (62.0-70.5)	66.2 (61.1-71.0)	57.4 (52.5-62.1)	8.9 (7.0-11.3)	7.4 (5.8-9.4)	10.0 (8.2-12.1)
Mean number of visits (95% CI)	1.67 (1.50-1.85)	1.71 (1.43-2.00)	1.51 (1.16-1.87)	0.22 (0.15-0.30)	0.34 (0.17-0.52)	0.57 (0.17-0.97)
GRADE 8	(766)	(691)	(976)	(766)	(691)	(976)
0 visits	31.5 (27.9-35.2)	33.0 (28.4-38.0)	43.2 (39.4-47.1)	88.7 (85.7-91.1)	90.7 (88.1-92.8)	89.7 (86.0-92.5)
1+ visits	68.5 (64.8-72.1)	67.0 (62.0-71.6)	56.8 (52.9-60.6)	11.3 (8.9-14.3)	9.3 (7.2-11.9)	10.3 (7.5-14.0)
Mean number of visits (95% CI)	1.96 (1.62-2.28)	1.78 (1.41-2.15)	1.32 (1.21-1.44)	0.86 (0.337-1.34)	0.43 (0.21-0.65)	0.56 (0.28-0.83)
GRADE 9	(905)	(702)	(1254)	(905)	(702)	(1254)
0 visits	31.4 (28.6-34.3)	35.3 (31.3-39.5)	39.4 (35.7-43.2)	85.6 (81.9-88.6)	89.0 (86.4-91.1)	91.0 (88.7-92.9)
1+ visits	68.6 (65.7-71.4)	64.7 (60.5-68.7)	60.6 (56.8-64.3)	14.4 (11.4-18.1)	11.0 (8.9-13.6)	9.0 (7.1-11.3)
Mean number of visits (95% CI)	1.64 (1.45-1.82)	1.87 (1.57-2.18)	1.58 (1.39-1.77)	0.74 (0.44-1.03)	0.34 (0.21-0.47)	0.46 (0.26-0.67)
GRADE 10	(638)	(806)	(1181)	(638)	(806)	(1181)
0 visits	26.9 (22.5-31.9)	36.0 (31.3-41.0)	38.4 (34.8-42.1)	85.2 (80.9-88.7)	87.6 (85.4-89.4)	88.9 (85.8-91.4)
1+ visits	73.1 (68.1-77.5)	64.0 (59.0-68.7)	61.6 (57.9-65.2)	14.8 (11.3-19.1)	12.4 (10.6-14.6)	11.1 (8.5-14.2)
Mean number of visits (95% CI)	2.07 (1.72-2.41)	1.68 (1.34-2.02)	1.61 (1.43-1.79)	0.92 (0.49-1.35)	0.63 (0.39-0.88)	0.62 (0.16-1.07)
GRADE 11	(750)	(561)	(1188)	(750)	(561)	(1188)
0 visits	26.9 (22.6-31.6)	29.3 (24.2-34.9)	37.8 (34.4-41.3)	85.4 (81.2-88.8)	87.6 (85.4-89.4)	85.6 (82.7-88.0)
1+ visits	73.1 (68.4-77.4)	70.7 (65.1-75.8)	62.2 (58.7-65.6)	14.6 (11.2-18.8)	12.4 (10.6-14.6)	14.4 (12.0-17.3)
Mean number of visits (95% CI)	2.40 (1.62-3.17)	1.82 (1.47-2.16)	1.74 (1.52-1.95)	1.21 (0.22-2.20)	0.66 (0.20-1.12)	0.84 (0.58-1.10)
GRADE 12	(590)	(388)	(1070)	(590)	(388)	(1070)
0 visits	29.6 (24.2-35.5)	35.0 (29.6-42.8)	38.6 (34.5-42.8)	90.7 (87.9-92.8)	87.0 (79.0-92.2)	89.0 (86.6-91.0)
1+ visits	70.4 (64.5-75.8)	64.0 (57.2-70.4)	61.4 (57.2-65.5)	9.3 (7.2-12.1)	13.0 (7.8-21.0)	11.0 (9.0-13.4)
Mean number of visits (95% CI)	1.72 (1.38-2.06)	1.55 (1.27-1.84)	1.56 (1.38-1.76)	0.46 (0.26-0.66)	0.53 (0.26-0.80)	0.66 (0.41-0.91)

	Physical Health Care Visits			Mental Health Care Visits		
	1999	2001	2003	1999	2001	2003
	% (95% CI)			% (95% CI)		
TORONTO	(740)	(533)	(1097)	(740)	(533)	(1097)
0 visits	25.5 (21.7-29.8)	30.3 (26.7-34.2)	38.7 (36.8-40.6)	89.5 (86.8-91.7)	89.2 (87.2-91.0)	91.7 (89.4-93.6)
1+ visits	74.5 (70.2-78.3)	69.7 (65.8-73.3)	61.3 (59.4-63.2)	10.5 (8.3-13.2)	10.8 (9.0-12.8)	8.3 (6.4-10.6)
Mean number of visits (95% CI)	1.92 (1.79-2.05)	2.13 (1.90-2.36)	1.60 (1.34-1.85)	0.38 (0.23-0.53)	0.54 (0.10-0.97)	0.44 (0.27-0.61)
NORTH REGION	(808)	(1014)	(1285)	(808)	(1014)	(1285)
0 visits	39.5 (35.4-43.7)	39.7 (35.1-44.4)	45.9 (43.5-48.2)	88.3 (84.7-91.1)	89.0 (86.4-91.2)	88.0 (85.6-90.0)
1+ visits	60.5 (56.3-64.6)	60.3 (55.6-64.9)	54.1 (51.8-56.5)	11.7 (8.9-15.3)	11.0 (8.8-13.6)	12.0 (10.0-14.4)
Mean number of visits (95% CI)	1.64 (1.32-1.95)	1.44 (1.20-1.68)	1.47 (1.27-1.66)	0.86 (0.41-1.32)	0.54 (0.32-0.76)	0.57 (0.37-0.76)
WEST REGION	(1532)	(1425)	(2513)	(1532)	(1425)	(2513)
0 visits	32.4 (29.2-35.7)	37.5 (34.1-41.1)	42.0 (39.9-44.2)	86.5 (84.0-88.6)	89.2 (86.8-91.3)	89.4 (87.5-91.1)
1+ visits	67.6 (64.3-70.8)	62.5 (58.9-65.9)	58.0 (55.8-60.1)	13.5 (11.4-16.0)	10.8 (8.7-13.2)	10.6 (8.9-12.5)
Mean number of visits (95% CI)	1.83 (1.57-2.10)	1.58 (1.40-1.75)	1.52 (1.40-1.63)	0.67 (0.47-0.86)	0.42 (0.30-0.54)	0.60 (0.36-0.84)
EAST REGION	(1367)	(926)	(1721)	(1367)	(926)	(1721)
0 visits	26.6 (23.8-29.6)	29.2 (24.9-33.9)	35.5 (31.9-39.2)	87.7 (85.8-89.4)	88.8 (86.8-90.4)	86.8 (84.6-88.8)
1+ visits	73.4 (70.4-76.2)	70.8 (66.1-75.1)	64.5 (60.8-68.1)	12.3 (10.6-14.2)	11.2 (9.6-13.2)	13.2 (11.2-15.4)
Mean number of visits (95% CI)	2.09 (1.67-2.50)	1.85 (1.50-2.21)	1.65 (1.50-1.80)	1.04 (0.45-1.63)	0.54 (0.32-0.76)	0.79 (0.48-1.10)

Notes: Numbers in bold parentheses are the number of interviews.

Qs: In the last 12 months, how many times have you seen a doctor about your physical health or for a check-up?

In the last 12 months, how often have you seen a doctor, nurse or counsellor about your emotional or mental health?

Source: OSDUS, Centre for Addiction and Mental Health

Table A3.4.2a: Percentage Reporting *Barbiturates Use for Medical Purposes* During the Past Year, 1999 – 2003, Grades 7 to 12

		1999	2001	2003
(N=)		(4447)	(3898)	(3152)
Total		12.6	11.9	5.7^{ab}
(95% CI)		(11.1-14.1)	(10.3-13.6)	(4.8-6.9)
Sex	Male	12.9	12.8	6.4
		(11.2-14.8)	(10.4-15.6)	(5.1-7.8)
	Female	12.2	10.9	5.1
		(10.4-14.4)	(9.2-12.9)	(4.0-6.6)
Grade	7	11.1	7.6	6.7
		(7.8-15.6)	(5.5-10.6)	(4.3-10.4)
	8	13.9	10.9	4.2
		(11.6-16.5)	(8.6-13.7)	(2.6-6.6)
	9	11.1	12.8	5.1
		(9.3-13.2)	(10.0-16.3)	(3.3-7.7)
	10	13.7	16.1	5.2
		(10.1-18.2)	(11.6-21.8)	(3.5-7.9)
	11	13.6	9.8	7.1
		(10.2-17.9)	(6.8-14.1)	(5.1-10.0)
	12	12.5	12.5	5.8
		(9.6-16.3)	(9.0-16.9)	(3.7-9.0)
Region	Toronto	10.4	8.8	3.0
		(7.8-13.6)	(7.1-11.0)	(1.8-5.1)
	North	15.9	11.4	6.1
		(9.3-25.8)	(9.3-13.8)	(4.4-8.5)
	West	13.0	11.9	7.1
		(10.7-15.6)	(10.3-13.7)	(5.5-9.1)
	East	12.4	14.1	5.2
		(10.4-14.7)	(10.0-19.5)	(3.5-7.8)

Notes: (1) entries in brackets are 95% confidence intervals; (2) question asked of a random half sample in 2003; (3) ^a 2003 vs 2001 significant difference, $p < .01$; (4) ^b 2003 vs 1999 significant difference, $p < .01$.

Q: In the last 12 months, how often did you use barbiturates with a prescription (such as Seconal, Amytal) or because a doctor told you to take them?

Source: OSDUS, Centre for Addiction & Mental Health

Table A3.4.2b: Percentage Reporting *Barbiturates Use* for Medical Purposes During the Past Year, 1977 – 2003, Grades 7, 9, 11 only

	1977 (N=)	1979 (3927)	1981 (3920)	1983 (3010)	1985 (3614)	1987 (3146)	1989 (3376)	1991 (3340)	1993 (2961)	1995 (2617)	1997 (2907)	1999 (3072)	2001 (2421)	2003 (2013)	2003 (1618)
Total		13.7	12.8	11.7	10.8	9.0	7.6	7.6	4.5	6.1	5.1	6.1	11.9	10.3	6.3
(95% CI)		(12.4-15.2)	(11.6-14.2)	(10.6-12.8)	(9.3-12.6)	(7.8-10.3)	(5.7-10.1)	(6.4-8.9)	(3.9-5.2)	(5.0-7.4)	(4.4-5.8)	(4.8-7.8)	(10.2-13.8)	(8.6-12.3)	(5.0-7.9)
Sex															
Male		13.9	12.6	13.9	11.2	9.4	8.9	8.3	4.0	6.6	4.7	6.5	12.1	10.4	7.6
		(12.0-16.0)	(11.2-14.2)	(11.8-16.3)	(9.6-13.1)	(7.7-11.4)	(6.2-12.8)	(6.8-10.2)	(3.4-4.8)	(5.0-8.8)	(3.7-6.1)	(4.6-9.2)	(9.7-14.9)	(8.8-12.2)	(5.6-10.2)
Female		13.6	13.0	9.2	10.4	8.6	6.4	6.8	5.1	5.6	5.4	5.8	11.8	10.2	5.1
		(11.9-15.4)	(11.2-15.2)	(8.1-10.6)	(8.5-12.7)	(7.3-10.0)	(4.9-8.2)	(5.5-8.4)	(4.0-6.3)	(4.5-6.8)	(4.9-6.0)	(4.3-7.6)	(9.6-14.4)	(7.8-13.3)	(3.6-7.0)
Grade															
7		6.9	8.6	6.4	7.6	4.6	5.9	5.5	3.1	5.0	3.7	4.3	11.1	7.6	6.7
		(5.5-8.4)	(6.6-11.2)	(4.8-8.4)	(5.6-10.3)	(2.9-7.2)	(4.9-7.0)	(3.8-8.0)	(2.6-3.5)	(3.6-6.9)	(2.9-4.8)	(2.6-6.9)	(7.8-15.6)	(5.5-10.6)	(4.3-10.4)
9		14.9	13.8	13.8	11.4	8.9	6.3	7.4	4.6	6.2	5.4	7.4	11.1	12.8	5.1
		(12.7-17.4)	(11.8-16.1)	(12.1-15.8)	(9.7-13.3)	(7.1-11.1)	(3.2-12.1)	(6.8-8.2)	(4.0-5.4)	(4.4-8.7)	(4.7-6.2)	(4.6-11.6)	(9.3-13.2)	(10.0-16.3)	(3.3-7.7)
11		20.2	16.3	14.8	14.7	13.4	10.4	9.9	5.8	6.9	5.9	6.5	13.6	9.8	7.1
		(17.3-23.5)	(14.1-18.7)	(12.7-17.2)	(10.8-19.8)	(11.0-16.2)	(6.5-16.4)	(7.1-13.6)	(4.3-7.7)	(5.0-9.5)	(4.5-7.7)	(4.9-8.6)	(10.2-17.9)	(6.8-14.1)	(5.1-10.0)
Region															
Toronto	—	—	9.8	8.2	7.1	6.3	6.6	4.0	5.0	4.2	4.5	10.5	8.5	4.2	
			(7.6-12.4)	(5.0-13.3)	(4.1-12.1)	(4.5-8.9)	(5.5-8.0)	(1.8-8.9)	(4.0-6.2)	(3.0-5.9)	(3.6-5.8)	(7.6-14.3)	(6.2-11.7)	(2.1-8.0)	
North	—	—	15.8	12.7	10.3	12.3	8.0	6.5	7.6	4.3	6.7	17.9	10.1	6.1	
			(10.6-22.7)	(10.1-15.9)	(6.9-15.1)	(10.8-14.1)	(4.2-14.5)	(5.9-7.2)	(4.2-13.5)	(2.3-8.0)	(3.4-12.8)	(8.6-33.6)	(6.4-15.5)	(3.0-11.8)	
West	—	—	11.9	10.4	10.0	7.0	7.5	4.8	7.1	5.0	6.7	11.3	10.9	8.4	
			(10.5-13.6)	(7.9-13.4)	(9.2-10.8)	(3.9-12.5)	(5.5-10.2)	(4.3-5.3)	(5.0-10.0)	(4.0-6.2)	(4.3-10.4)	(8.7-14.6)	(8.2-14.2)	(6.1-11.3)	
East	—	—	11.3	12.7	8.6	7.9	8.1	4.0	4.9	6.0	6.2	12.4	11.2	4.4	
			(9.4-13.5)	(10.1-15.9)	(6.3-11.6)	(4.5-13.3)	(6.7-9.7)	(3.5-4.4)	(3.8-6.3)	(5.0-7.3)	(4.4-8.5)	(9.9-15.3)	(7.8-15.8)	(2.8-6.9)	

Notes: (1) regional stratification differed in 1977 and 1979 and therefore are not presented; (2) entries in brackets are 95% confidence intervals; (3) question asked of a random half sample in 2003.
Q. In the last 12 months, how often did you use barbiturates with a prescription (such as Seconal, Amytal) or because a doctor told you to take them?
Source: OSDUS, Centre for Addiction & Mental Health

Table A3.4.3a: Percentage Reporting *Stimulant Use for Medical Purposes* During the Past Year, 1999 – 2003, Grades 7 to 12

		1999	2001	2003
		(N=)	(4447)	(3898)
			(3152)	
Total		7.0	7.5	5.8
(95% CI)		(6.2-7.9)	(6.5-8.6)	(5.0-6.8)
Sex	Male	7.9	9.2	6.2
		(6.7-9.2)	(7.8-11.0)	(4.9-7.7)
	Female	6.2	5.8	5.5
		(5.0-7.6)	(4.6-7.2)	(4.4-6.9)
Grade	7	4.7	4.6	4.7
		(3.2-7.0)	(3.1-6.9)	(3.1-7.0)
	8	6.3	8.3	3.8
		(4.6-8.4)	(6.0-11.4)	(2.3-6.1)
	9	6.9	8.3	6.6
		(5.3-9.0)	(6.2-11.0)	(4.5-9.6)
	10	7.8	7.1	6.0
		(5.8-10.5)	(5.4-9.4)	(4.1-8.6)
	11	8.8	8.3	7.6
		(6.7-11.7)	(5.8-11.8)	(5.5-10.6)
	12	7.5	8.9	5.6
		(5.5-10.3)	(6.1-12.7)	(3.7-8.5)
Region	Toronto	6.3	5.1	3.0
		(4.7-8.4)	(4.2-6.2)	(2.1-4.5)
	North	9.4	8.8	7.9
		(6.4-13.6)	(6.7-11.5)	(5.9-10.5)
	West	6.5	7.9	6.8
		(5.2-8.1)	(6.4-9.8)	(5.4-8.6)
	East	7.5	8.1	5.6
		(6.4-8.9)	(6.1-10.6)	(4.3-7.2)

Notes: (1) entries in brackets are 95% confidence intervals; (2) question asked of a random half sample in 2003; (3) no significant differences from 1999 to 2003.

Q: In the last 12 months, how often did you use stimulants with a prescription or because a doctor told you to take them?

Source: OSDUS, Centre for Addiction & Mental Health

Table A3.4.3b: Percentage Reporting Stimulant Use for Medical Purposes During the Past Year, 1977 – 2003, Grades 7, 9, 11 only

	1977 (N=)	1979 (3927)	1981 (3920)	1983 (3010)	1985 (3614)	1987 (3146)	1989 (3376)	1991 (3340)	1993 (2961)	1995 (2617)	1997 (2907)	1999 (3072)	2001 (2421)	2003 (2013)	2003 (1618)
Total		6.6	6.2	6.1	5.3	4.5	4.4	3.4	2.6	4.4	4.3	4.4	6.9	7.1	6.4
(95% CI)		(5.8-7.6)	(5.5-7.1)	(5.2-7.0)	(4.3-6.6)	(3.8-5.2)	(3.2-6.0)	(2.6-4.3)	(1.9-3.5)	(3.5-5.5)	(3.5-5.3)	(3.2-6.1)	(5.8-8.3)	(5.8-8.7)	(5.2-7.9)
Sex															
Male		7.0	7.2	7.0	5.6	4.8	4.6	3.8	2.6	4.1	3.9	3.9	7.6	8.6	7.3
		(5.8-8.4)	(6.2-8.3)	(5.9-8.3)	(4.3-7.2)	(3.8-6.1)	(3.1-6.7)	(2.9-4.9)	(1.8-3.8)	(3.1-5.4)	(3.1-4.9)	(2.5-6.2)	(5.9-9.8)	(6.5-11.2)	(5.4-9.9)
Female		6.4	5.2	5.0	5.0	4.1	4.2	3.0	2.5	4.7	4.7	4.8	6.2	5.7	5.6
		(5.3-7.7)	(4.3-6.4)	(3.9-6.4)	(3.8-6.6)	(3.2-5.4)	(3.2-5.5)	(2.1-4.3)	(1.8-3.6)	(3.4-6.5)	(3.4-6.6)	(3.8-6.2)	(4.8-8.1)	(4.0-8.0)	(4.0-7.6)
Grade															
7		5.6	4.0	3.6	4.4	2.4	3.2	2.6	1.4	3.7	3.3	3.0	4.7	4.6	4.7
		(4.4-7.1)	(3.1-5.3)	(2.9-4.4)	(4.0-4.9)	(1.5-3.8)	(2.8-3.7)	(1.6-4.2)	(1.0-2.0)	(2.5-5.5)	(1.7-6.5)	(1.6-5.6)	(3.2-7.0)	(3.1-6.9)	(3.1-7.0)
9		5.9	6.2	7.1	5.5	4.9	4.2	3.6	3.4	4.9	5.1	4.8	6.9	8.3	6.6
		(4.8-7.2)	(5.0-7.5)	(5.8-8.8)	(4.1-7.2)	(3.9-6.2)	(2.4-7.4)	(2.4-5.4)	(1.9-6.1)	(3.3-7.1)	(4.1-6.4)	(3.7-6.0)	(5.3-9.0)	(6.2-11.0)	(4.5-9.6)
11		9.0	8.8	7.4	6.4	6.0	5.6	3.9	2.9	4.5	4.4	5.2	8.8	8.3	7.6
		(6.9-11.6)	(7.1-10.8)	(5.2-10.4)	(3.6-11.1)	(4.8-7.6)	(3.1-10.0)	(2.5-6.0)	(2.2-3.8)	(3.1-6.6)	(3.5-5.4)	(2.7-9.8)	(6.7-11.7)	(5.8-11.8)	(5.5-10.6)
Region															
Toronto	—	—	4.3	4.8	4.7	2.4	3.1	1.8	3.3	2.1	4.2	6.5	4.9	3.6	
			(2.9-6.2)	(3.8-6.0)	(3.4-6.3)	(1.4-4.0)	(1.8-5.4)	(1.2-2.6)	(1.9-5.7)	(1.6-2.6)	(2.5-6.8)	(4.3-9.7)	(3.4-7.0)	(2.2-6.0)	
North	—	—	6.8	4.8	5.8	5.2	4.2	4.2	3.9	4.9	4.2	9.8	6.9	9.7	
			(3.0-15.0)	(3.5-6.5)	(3.4-9.8)	(2.7-9.8)	(2.0-8.5)	(3.0-5.8)	(1.5-9.5)	(2.0-11.9)	(1.7-10.1)	(4.8-18.9)	(4.9-9.7)	(7.5-12.6)	
West	—	—	7.0	5.6	5.1	5.1	3.3	2.6	5.9	4.2	4.8	6.6	7.4	7.6	
			(5.9-8.2)	(4.6-6.7)	(4.0-6.5)	(2.9-8.9)	(2.2-4.9)	(1.5-4.6)	(4.2-8.2)	(2.9-6.0)	(2.7-8.4)	(4.7-9.2)	(5.3-10.1)	(5.4-10.5)	
East	—	—	5.5	5.5	3.0	4.5	3.4	2.6	3.1	5.9	4.0	7.1	9.0	5.5	
			(4.7-6.5)	(3.0-10.0)	(2.7-3.3)	(2.8-7.2)	(2.2-5.4)	(1.6-4.3)	(2.3-4.3)	(4.6-7.6)	(2.4-6.6)	(5.4-9.2)	(6.2-12.9)	(3.6-8.3)	

Notes: (1) regional stratification differed in 1977 and 1979 and therefore are not presented; (2) entries in brackets are 95% confidence intervals; (3) question asked of a random half sample in 2003.

Q: In the last 12 months, how often did you use stimulants with a prescription or because a doctor told you to take them?

Source: OSDUS, Centre for Addiction & Mental Health

Table A3.4.4a: Percentage Reporting *Tranquillizer Use* for Medical Purposes During the Past Year, 1977 – 2003, Grades 7 to 12

		1999	2001	2003
(N=)		(4447)	(3898)	(3152)
Total		3.2	3.2	2.7
(95%CI)		(2.6-4.0)	(2.7-3.9)	(2.2-3.4)
Sex	Male	3.6	4.1	3.4
		(2.6-4.9)	(3.1-5.4)	(2.6-4.6)
	Female	2.9	2.4	2.1
		(2.2-3.8)	(1.8-3.2)	(1.4-3.0)
Grade	7	1.9	1.2	2.4
		(0.8-4.6)	(0.6-2.4)	(1.1-4.8)
	8	3.5	3.7	1.7
		(1.9-6.3)	(1.9-6.9)	(0.9-3.4)
	9	3.8	2.3	2.8
		(2.6-5.4)	(1.4-3.8)	(1.4-5.4)
	10	3.1	2.6	2.3
		(2.0-4.7)	(1.8-4.0)	(1.2-4.2)
	11	3.1	5.4	3.8
		(1.9-5.0)	(3.6-8.0)	(2.3-6.2)
	12	4.0	5.9	3.2
		(2.5-6.4)	(4.1-8.3)	(1.8-5.6)
Region	Toronto	2.8	2.5	2.8
		(1.7-4.7)	(1.5-4.2)	(1.6-4.6)
	North	3.7	3.8	2.4
		(1.7-7.7)	(2.7-5.4)	(1.2-4.7)
	West	2.6	3.3	2.7
		(1.7-4.0)	(2.4-4.5)	(1.9-3.9)
	East	4.2	3.5	2.8
		(3.2-5.5)	(2.6-4.7)	(1.9-4.1)

Notes: (1) entries in brackets are 95% confidence intervals; (2) question asked of a random half sample in 2003; (3) no significant differences from 1999 to 2003.

Q: In the last 12 months, how often did you use tranquillizers with a prescription or because a doctor told you to take them?

Source: OSDUS, Centre for Addiction & Mental Health

Table A3.4.4b: Percentage Reporting *Tranquillizer Use* for Medical Purposes During the Past Year, 1977 – 2003, Grades 7, 9, 11 only

	1977 (N=)	1979 (3927)	1981 (3920)	1983 (3010)	1985 (3614)	1987 (3146)	1987 (3376)	1989 (3340)	1991 (2961)	1993 (2617)	1995 (2907)	1997 (3072)	1999 (2421)	2001 (2013)	2003 (1618)
Total		8.5	6.8	7.1	6.3	4.5	4.8	2.8	2.8	2.3	1.6	1.9	3.0	2.9	3.0
(95% CI)		(7.6-9.4)	(6.0-7.6)	(6.2-8.1)	(5.4-7.4)	(3.9-5.2)	(3.7-6.1)	(2.1-3.6)	(2.0-3.7)	(1.6-3.3)	(1.1-2.4)	(1.5-2.4)	(2.2-4.0)	(2.2-3.8)	(2.2-4.2)
Sex															
Male		8.0	7.0	6.8	5.8	4.4	4.4	2.4	3.1	2.6	2.0	2.1	3.0	3.4	4.2
		(6.8-9.4)	(6.0-8.2)	(5.7-8.0)	(5.1-6.7)	(3.6-5.3)	(2.7-6.9)	(1.4-4.2)	(2.3-4.2)	(1.8-3.8)	(1.3-2.9)	(1.4-3.0)	(1.9-4.7)	(2.2-5.2)	(2.8-6.4)
Female		8.9	6.4	7.4	6.8	4.6	5.1	3.1	2.4	2.0	1.3	1.7	3.0	2.4	1.9
		(7.8-10.2)	(5.4-7.7)	(5.8-9.3)	(5.3-8.7)	(3.5-6.0)	(4.2-6.3)	(2.6-3.8)	(1.4-4.0)	(1.2-3.1)	(0.7-2.4)	(1.1-2.7)	(2.0-4.5)	(1.6-3.6)	(1.0-3.4)
Grade															
7		6.3	5.4	3.2	4.2	2.9	3.2	1.8	1.6	1.4	1.2	0.6	1.9	1.2	2.4
		(5.2-7.5)	(4.2-6.8)	(2.0-5.0)	(3.0-5.9)	(1.8-4.7)	(2.0-5.3)	(1.2-2.6)	(0.7-4.0)	(0.8-2.7)	(0.5-2.7)	(0.2-2.4)	(0.8-4.6)	(0.6-2.4)	(1.1-4.8)
9		8.9	6.2	8.1	6.4	3.7	4.7	2.3	2.8	1.8	1.0	1.8	3.8	2.3	2.8
		(7.4-10.7)	(4.9-7.7)	(6.5-10.0)	(4.6-8.9)	(2.9-4.7)	(3.6-6.2)	(1.4-3.6)	(1.6-4.9)	(0.7-4.4)	(0.5-2.0)	(1.2-2.6)	(2.6-5.4)	(1.4-3.8)	(1.4-5.4)
11		10.5	9.1	9.9	9.2	6.8	6.1	4.5	3.7	3.4	2.6	3.1	3.1	5.4	3.8
		(8.8-12.5)	(7.5-11.1)	(7.9-12.3)	(8.2-10.4)	(5.9-7.9)	(3.7-9.9)	(3.0-6.6)	(2.6-5.4)	(2.2-5.4)	(1.6-4.4)	(2.4-4.2)	(1.9-5.0)	(3.6-8.0)	(2.3-6.2)
Region															
Toronto	—	—	6.3	4.7	3.7	4.4	0.9	2.5	1.2	1.1	1.1	1.0	1.9	2.0	2.6
			(4.9-8.0)	(3.1-7.1)	(3.2-4.3)	(2.7-6.9)	(0.4-2.1)	(1.6-3.6)	(0.6-2.4)	(0.5-2.4)	(0.4-2.2)	(0.8-4.5)	(1.4-3.0)	(0.9-6.8)	
North	—	—	8.4	7.4	4.8	6.2	4.0	4.1	2.4	1.8	1.7	5.0	4.0	2.2	
			(5.3-13.0)	(4.3-12.3)	(3.6-6.4)	(3.5-10.9)	(2.7-6.0)	(1.9-8.5)	(1.2-4.6)	(0.5-7.2)	(1.4-2.2)	(1.3-17.7)	(2.6-6.3)	(1.1-4.4)	
West	—	—	7.2	6.2	4.7	4.8	3.1	2.6	2.5	2.0	2.1	1.9	2.8	3.3	
			(6.1-8.3)	(5.3-7.4)	(3.5-6.2)	(3.0-7.5)	(2.0-4.8)	(1.4-4.7)	(1.5-4.2)	(1.2-3.3)	(1.4-3.1)	(1.1-3.1)	(1.6-4.9)	(2.0-5.3)	
East	—	—	7.0	7.2	4.6	4.4	3.0	2.9	2.6	1.4	2.2	4.7	3.4	3.1	
			(4.6-10.4)	(5.2-10.0)	(3.6-5.8)	(2.7-7.4)	(2.0-4.6)	(1.9-4.4)	(1.2-5.8)	(0.6-3.0)	(1.5-3.3)	(3.3-6.6)	(2.2-5.4)	(1.6-5.8)	

Notes: (1) regional stratification differed in 1977 and 1979 and therefore are not presented; (2) entries in brackets are 95% confidence intervals; (3) question asked of a random half sample in 2003.

Q: In the last 12 months, how often did you use tranquilizers with a prescription or because a doctor told you to take them?

Source: OSDUS, Centre for Addiction & Mental Health

Table A3.4.5: Percentage Reporting *Ritalin Use for Medical Purposes During the Past Year, 1999 – 2003, Grades 7 to 12*

		1999	2001	2003
(N=)		(4447)	(3898)	(6616)
Total		3.8	2.9	2.5^b
(95% CI)		(3.2-4.5)	(2.4-3.6)	(2.1-3.1)
Sex	Male	5.6	4.0	3.5
		(4.4-7.0)	(3.1-5.1)	(2.8-4.5)
	Female	2.0	1.8	1.6
		(1.4-2.8)	(1.2-2.8)	(1.2-2.2)
Grade	7	4.2	4.2	3.7
		(2.9-6.3)	(2.8-6.4)	(2.4-5.5)
	8	5.1	4.2	2.4
		(3.6-7.3)	(2.4-7.3)	(1.5-3.7)
	9	3.9	2.4	2.8
		(2.3-6.6)	(1.4-3.8)	(1.9-4.2)
	10	3.7	2.7	2.6
		(2.4-5.8)	(1.6-4.6)	(1.6-4.2)
	11	3.7	1.8	2.6
		(2.3-6.1)	(1.1-3.0)	(1.7-4.1)
	12	1.8	2.0	1.1
		(0.8-4.2)	(1.0-3.8)	(0.6-2.0)
Region	Toronto	2.5	2.5	1.0
		(1.4-4.4)	(1.6-3.8)	(0.5-1.9)
	North	3.0	3.2	2.9
		(1.9-4.8)	(2.2-4.5)	(2.1-4.0)
	West	4.8	2.7	2.9
		(3.8-6.0)	(2.0-3.9)	(2.1-3.9)
	East	3.5	3.4	2.9
		(2.5-4.7)	(2.2-5.0)	(2.1-4.0)

Notes: (1) Entries in brackets are 95% confidence intervals; (2) ^b 2003 vs. 1999 significant difference, p<.05.
Q: In the last 12 months, how often did you use Ritalin with a prescription or because a doctor told you to take it?
Source: OSDUS, Centre for Addiction & Mental Health

Table A3.5.1: Low Self-Esteem, 1993 – 2003

Rosenberg Self-Esteem Scale	Grades 7-9-11 only						Grades 7-12		
	1993 %	1995 %	1997 %	1999 %	2001 %	2003 %	1999 %	2001 %	2003 %
TOTAL SAMPLE (N=)	(2617)	(2907)	(3072)	(2421)	(2013)	(3389)	(4447)	(3898)	(6616)
Sometimes I feel that I can't do anything right	—	17.6	16.4	16.7	16.3	15.5	16.0	15.4	15.5
I feel I do not have much to be proud of	—	15.8	15.6	16.0	17.5	15.1	15.7	16.9	15.0
Sometimes I think I am no good at all	—	11.4	10.8	10.0	12.4	10.8	10.4	11.7	11.3
I [do not] feel good about myself *	14.6	10.7	10.5	8.7	9.4	8.8	8.8	8.8	8.7
I [do not] feel that I am a person of worth *	12.0	12.9	13.4	12.1	11.8	11.2	12.0	10.5	10.7
I am [not] able to do most things as well as others *	13.6	8.6	8.6	8.5	7.2	6.6	8.2	7.1	6.5
% with Low Self-Esteem (95% CI)	—	10.3 (9.0-11.7)	10.4 (9.3-11.7)	10.0 (8.6-11.5)	10.1 (8.4-12.2)	9.6 (8.6-10.8)	10.1 (9.0-11.3)	9.5 (8.2-10.9)	9.5 (8.6-10.4)
MALES	(1270)	(1412)	(1438)	(1196)	(1004)	(1670)	(2252)	(1917)	(3163)
Sometimes I feel that I can't do anything right	—	14.4	11.7	14.0	15.8	12.1	12.6	14.6	12.2
I feel I do not have much to be proud of	—	13.0	12.7	18.2	17.0	15.0	13.2	16.6	14.8
Sometimes I think I am no good at all	—	8.4	8.3	8.6	10.7	12.3	7.9	10.2	9.4
I [do not] feel good about myself *	7.5	6.0	6.3	6.6	7.0	6.8	5.9	6.2	6.4
I [do not] feel that I am a person of worth *	8.3	10.8	11.4	10.7	10.3	9.8	9.8	9.6	9.5
I am [not] able to do most things as well as others *	8.5	7.1	7.3	8.3	8.2	5.2	7.4	7.5	5.0
% with Low Self-Esteem (95% CI)	—	7.0 (5.9-8.2)	7.5 (6.0-9.3)	7.8 (6.0-10.2)	9.8 (7.5-12.8)	7.4 (6.1-9.0)	7.3 (6.1-8.8)	8.9 (7.2-11.1)	7.3 (6.3-8.4)
FEMALES	(1347)	(1495)	(1634)	(1225)	(1009)	(1719)	(2195)	(1981)	(3453)
Sometimes I feel that I can't do anything right	—	20.7	20.6	19.4	16.9	18.7	19.4	16.1	18.5
I feel I do not have much to be proud of	—	18.4	18.1	13.8	18.1	15.1	18.2	17.2	15.2
Sometimes I think I am no good at all	—	14.3	13.0	11.5	14.0	9.2	12.8	13.2	13.0
I [do not] feel good about myself *	21.6	15.0	14.2	10.8	11.8	10.8	11.8	11.4	10.8
I [do not] feel that I am a person of worth *	15.6	14.8	15.2	13.4	13.3	12.5	14.3	11.5	11.8
I am [not] able to do most things as well as others *	13.6	9.9	9.7	8.8	6.3	7.8	9.1	6.8	7.9
% with Low Self-Esteem (95% CI)	—	13.5 (11.6-15.6)	13.0 (11.5-14.6)	12.1 (10.2-14.2)	10.4 (8.5-12.7)	11.7 (10.1-13.6)	12.9 (11.2-14.8)	10.0 (8.4-12.0)	11.4 (10.2-12.8)
GRADE 7	(896)	(929)	(851)	(766)	(750)	(947)	(766)	(750)	(947)
Sometimes I feel that I can't do anything right	—	20.8	17.7	16.5	15.1	16.4	16.5	15.1	16.4
I feel I do not have much to be proud of	—	15.9	17.1	16.0	16.7	15.0	16.0	16.7	15.0
Sometimes I think I am no good at all	—	12.4	11.8	9.3	11.8	11.5	9.3	11.8	11.5

Rosenberg Self-Esteem Scale	Grades 7-9-11 only						Grades 7-12		
	1993 %	1995 %	1997 %	1999 %	2001 %	2003 %	1999 %	2001 %	2003 %
I [do not] feel good about myself *	12.4	9.0	10.5	6.6	6.3	6.2	6.6	6.3	6.2
I [do not] feel that I am a person of worth *	11.2	15.5	15.2	13.1	10.8	11.4	13.1	10.8	11.4
I am [not] able to do most things as well as others *	11.5	7.8	9.8	6.9	6.2	6.4	6.9	6.2	6.4
% with Low Self-Esteem (95% CI)	—	9.8 (7.2-13.2)	10.4 (8.0-13.4)	8.1 (5.7-11.4)	8.2 (6.2-10.7)	9.0 (7.5-10.9)	8.1 (5.7-11.4)	8.2 (6.2-10.7)	9.0 (7.5-10.9)
GRADE 8							(798)	(691)	(976)
Sometimes I feel that I can't do anything right							16.8	14.5	15.0
I feel I do not have much to be proud of							15.7	18.1	15.0
Sometimes I think I am no good at all							12.6	12.6	10.3
I [do not] feel good about myself *							8.6	5.7	7.5
I [do not] feel that I am a person of worth *							12.9	9.8	9.1
I am [not] able to do most things as well as others *							8.3	5.8	6.1
% with Low Self-Esteem (95% CI)							10.9 (8.9-13.2)	8.5 (6.7-10.6)	7.7 (5.6-10.6)
GRADE 9	(1,006)	(1,054)	(1,153)	(905)	(702)	(1254)	(905)	(702)	(1254)
Sometimes I feel that I can't do anything right	—	18.5	16.2	15.8	18.7	15.0	15.8	18.7	15.0
I feel I do not have much to be proud of	—	17.4	15.2	17.0	20.6	15.0	17.0	20.6	15.0
Sometimes I think I am no good at all	—	12.0	10.5	10.3	14.7	10.3	10.3	14.7	10.3
I [do not] feel good about myself *	15.1	11.6	10.4	10.1	11.5	7.5	10.1	11.5	7.5
I [do not] feel that I am a person of worth *	13.4	14.3	13.2	13.3	14.2	9.1	13.3	14.2	9.1
I am [not] able to do most things as well as others *	12.5	8.7	7.6	9.4	10.3	6.1	9.4	10.3	6.1
% with Low Self-Esteem (95% CI)	—	11.2 (8.8-14.1)	11.0 (9.2-13.2)	10.7 (8.9-12.9)	14.3 (11.4-17.8)	9.9 (8.1-12.1)	10.7 (8.9-12.9)	14.3 (11.4-17.8)	9.9 (8.1-12.1)
GRADE 10							(638)	(806)	(1181)
Sometimes I feel that I can't do anything right							16.0	15.0	16.7
I feel I do not have much to be proud of							16.5	17.5	16.1
Sometimes I think I am no good at all							13.0	12.7	13.4
I [do not] feel good about myself *							11.7	10.0	10.3
I [do not] feel that I am a person of worth *							14.2	9.4	10.7
I am [not] able to do most things as well as others *							7.8	9.1	6.5
% with Low Self-Esteem (95% CI)							12.7 (9.0-17.6)	10.1 (7.8-13.0)	10.7 (8.6-13.2)

Rosenberg Self-Esteem Scale	Grades 7-9-11 only						Grades 7-12		
	1993 %	1995 %	1997 %	1999 %	2001 %	2003 %	1999 %	2001 %	2003 %
GRADE 11	(721)	(932)	(1,069)	(750)	(561)	(1188)	(750)	(561)	(1188)
Sometimes I feel that I can't do anything right	—	14.1	15.6	17.9	14.5	14.7	17.9	14.5	14.7
I feel I do not have much to be proud of	—	14.3	14.6	14.7	14.4	15.1	14.7	14.4	15.1
Sometimes I think I am no good at all	—	10.0	10.2	10.4	9.9	11.5	10.4	9.9	11.5
I [do not] feel good about myself *	15.9	11.2	10.5	8.8	9.8	11.7	8.8	9.8	11.7
I [do not] feel that I am a person of worth *	11.2	9.7	12.3	9.9	9.7	11.3	9.9	9.7	11.3
I am [not] able to do most things as well as others *	9.4	9.0	8.5	8.8	4.3	6.1	8.8	4.3	6.1
% with Low Self-Esteem (95% CI)	—	9.9 (8.8-11.1)	9.8 (8.5-11.3)	10.6 (8.0-13.8)	6.7 (5.0-8.9)	9.8 (7.9-12.2)	10.6 (8.0-13.8)	6.7 (5.0-8.9)	9.8 (7.9-12.2)
GRADE 12							(590)	(388)	(1070)
Sometimes I feel that I can't do anything right							12.2	12.5	14.4
I feel I do not have much to be proud of							13.7	14.4	13.4
Sometimes I think I am no good at all							6.4	4.9	11.1
I [do not] feel good about myself *							6.9	8.1	7.4
I [do not] feel that I am a person of worth *							8.8	7.3	10.5
I am [not] able to do most things as well as others *							7.5	4.5	6.8
% with Low Self-Esteem (95% CI)							7.2 (4.8-10.6)	6.5 (4.2-10.0)	9.1 (7.1-11.4)
TORONTO	(642)	(647)	(715)	(437)	(353)	(567)	(740)	(533)	(1097)
Sometimes I feel that I can't do anything right	—	17.7	16.6	15.8	18.2	14.9	15.7	16.2	14.7
I feel I do not have much to be proud of	—	14.6	18.2	13.6	18.2	16.1	14.3	16.8	16.8
Sometimes I think I am no good at all	—	12.3	11.7	9.0	12.6	12.7	10.5	12.3	11.9
I [do not] feel good about myself *	14.6	8.5	10.6	6.4	10.2	8.1	7.0	9.6	7.7
I [do not] feel that I am a person of worth *	11.7	11.4	14.6	11.4	10.8	11.1	11.4	11.2	9.8
I am [not] able to do most things as well as others *	9.6	8.6	8.7	8.1	9.0	6.8	7.8	8.4	6.1
% with Low Self-Esteem (95% CI)	—	10.2 (6.8-15.0)	10.9 (7.8-15.2)	8.9 (6.1-12.9)	11.5 (7.4-17.5)	9.4 (7.0-12.4)	9.3 (6.5-13.2)	11.4 (8.1-15.8)	8.6 (6.5-11.2)
NORTH REGION	(156)	(220)	(291)	(321)	(466)	(655)	(808)	(1014)	(1285)
Sometimes I feel that I can't do anything right	—	13.9	15.3	16.0	15.0	19.2	15.6	14.5	17.8
I feel I do not have much to be proud of	—	15.7	15.0	14.6	12.9	20.3	13.3	13.2	17.0
Sometimes I think I am no good at all	—	8.2	8.1	11.4	8.5	13.0	11.2	8.8	12.7
I [do not] feel good about myself *	13.2	10.3	9.3	10.7	8.7	14.5	9.6	10.2	11.1
I [do not] feel that I am a person of worth *	19.3	10.4	8.8	12.3	11.5	16.9	11.7	10.7	13.2

Rosenberg Self-Esteem Scale	Grades 7-9-11 only						Grades 7-12		
	1993 %	1995 %	1997 %	1999 %	2001 %	2003 %	1999 %	2001 %	2003 %
I am [not] able to do most things as well as others *	19.4	6.1	6.8	6.6	6.4	9.2	6.1	6.8	7.8
% with Low Self-Esteem (95% CI)	—	8.5 (6.0-11.9)	8.1 (6.9-9.4)	11.5 (8.0-16.4)	8.1 (5.4-12.0)	15.2 (11.0-20.7)	10.3 (7.9-13.3)	9.1 (7.2-11.6)	12.5 (9.5-16.3)
WEST REGION	(1122)	(1242)	(1163)	(822)	(710)	(1308)	(1532)	(1425)	(2513)
Sometimes I feel that I can't do anything right	—	18.8	16.2	16.2	15.8	15.2	15.8	15.4	15.6
I feel I do not have much to be proud of	—	16.9	14.8	16.6	19.1	14.3	16.4	18.3	13.9
Sometimes I think I am no good at all	—	11.5	10.8	9.5	14.1	10.0	9.9	12.6	10.5
I [do not] feel good about myself *	13.5	11.8	10.3	8.1	9.5	8.4	8.6	8.2	7.9
I [do not] feel that I am a person of worth *	11.0	13.5	12.8	13.3	13.0	11.4	12.8	11.4	10.8
I am [not] able to do most things as well as others *	9.7	9.8	9.7	9.2	7.6	5.6	8.8	7.0	5.5
% with Low Self-Esteem (95% CI)	—	10.9 (9.2-12.9)	10.2 (8.4-12.3)	8.9 (6.8-11.6)	11.1 (8.6-14.0)	9.1 (7.8-10.6)	9.6 (7.9-11.6)	9.8 (7.9-12.1)	8.9 (7.7-10.3)
EAST REGION	(697)	(798)	(903)	(841)	(484)	(859)	(1367)	(926)	(1721)
Sometimes I feel that I can't do anything right	—	16.9	17.1	17.8	15.6	15.5	16.6	15.0	15.5
I feel I do not have much to be proud of	—	15.0	15.2	16.7	15.8	14.3	16.2	16.0	15.0
Sometimes I think I am no good at all	—	11.6	10.9	11.0	10.6	10.5	10.7	10.8	11.7
I [do not] feel good about myself *	16.8	10.6	10.9	10.4	8.7	8.6	10.0	8.8	9.8
I [do not] feel that I am a person of worth *	11.4	13.6	14.8	10.9	11.0	9.3	11.5	8.7	10.4
I am [not] able to do most things as well as others *	11.8	7.5	7.4	8.3	5.2	7.3	8.3	6.6	8.0
% with Low Self-Esteem (95% CI)	—	10.0 (7.9-12.6)	11.0 (9.7-12.6)	11.6 (9.4-14.2)	7.9 (5.1-12.1)	9.1 (7.2-11.4)	11.1 (9.4-13.2)	7.9 (6.0-10.3)	10.0 (8.6-11.6)

Notes: (1) For negative esteem statements, item percentages refer to “always true” or “often true”; for positive esteem statements (*) the percentages refer to “seldom true” or “never true”; (2) In 1993, the response options were true/false; (3) The overall low self-esteem percentage is based on indicating low esteem on 3 of the 6 items; (4) Numbers in parentheses are the number of interviews; (5) — indicates data not available; (6) 2003 vs 2001 significant difference, $p < .01$.

Source: OSDUS, Centre for Addiction and Mental Health

Table A3.5.2: Depression, 1997 – 2003

CES-D Items (“Always” or “Often” During the Past 7 Days...)	Grades 7-9-11				Grades 7-12		
	1997	1999	2001	2003	1999	2001	2003
	%	%	%	%	%	%	%
TOTAL SAMPLE (N=)	(1545)	(1253)	(1060)	(1771)	(2299)	(2061)	(3464)
How often have you felt sad?	20.9	15.8	14.2	16.3	16.0	14.4	17.1
How often have you felt lonely?	13.2	11.5	12.2	13.2	12.3	13.1	14.1
How often have you felt depressed?	13.8	11.7	10.4	12.4	11.9	10.3	12.4
How often have you felt like crying?	14.4	12.1	12.1	14.8	12.3	11.9	15.4
% “often” or “always” on all 4 items (95% CI)	6.4 (4.8-8.5)	4.5 (3.4-5.8)	4.4 (3.2-6.1)	5.3 (4.2-6.6)	4.6 (3.7-5.9)	4.5 (3.3-6.1)	5.6 (4.8-6.6)
MALES	(715)	(614)	(529)	(888)	(1151)	(1018)	(1654)
How often have you felt sad?	10.4	10.9	11.3	9.4	10.3	10.4	10.2
How often have you felt lonely?	8.2	8.6	9.9	9.8	8.5	10.9	10.7
How often have you felt depressed?	7.5	8.4	10.0	9.0	8.0	8.5	8.7
How often have you felt like crying?	4.7	5.7	5.4	5.0	4.7	3.9	5.2
% “often” or “always” on all 4 items (95% CI)	2.6 (1.5-4.5)	1.9 (0.9-4.0)	2.8 (1.7-4.7)	2.6 (1.6-4.1)	1.8 (1.0-3.1)	2.0 (1.2-3.5)	2.6 (1.8-3.7)
FEMALES	(830)	(639)	(531)	(883)	(1148)	(1043)	(1810)
How often have you felt sad?	30.2	20.7	17.2	23.1	21.7	18.2	23.4
How often have you felt lonely?	17.6	14.4	14.6	16.4	16.3	15.3	17.2
How often have you felt depressed?	19.5	14.9	10.8	15.7	15.7	12.0	15.8
How often have you felt like crying?	23.0	18.5	18.9	24.4	20.0	19.6	24.7
% “often” or “always” on all 4 items (95% CI)	9.8 (7.3-13.2)	7.0 (5.3-9.2)	6.0 (4.1-8.7)	7.9 (6.1-10.2)	7.6 (5.9-9.7)	6.9 (4.9-9.8)	8.4 (7.0-10.0)
GRADE 7	(420)	(397)	(404)	(497)	(397)	(404)	(497)
How often have you felt sad?	16.6	12.6	12.2	14.6	12.6	12.2	14.6
How often have you felt lonely?	9.4	7.0	9.8	11.8	7.0	9.8	11.8
How often have you felt depressed?	9.7	9.5	7.9	9.3	9.5	7.9	9.3
How often have you felt like crying?	11.6	9.0	12.1	14.8	9.0	12.1	14.8
% “often” or “always” on all 4 items (95% CI)	4.6 (2.4-8.5)	2.6 (1.2-5.7)	4.5 (2.7-7.5)	4.0 (2.5-6.4)	2.6 (1.2-5.7)	4.5 (2.7-7.5)	4.0 (2.5-6.4)
GRADE 8					(407)	(379)	(512)
How often have you felt sad?					16.2	14.1	18.7
How often have you felt lonely?					14.0	10.9	14.9
How often have you felt depressed?					12.5	9.8	13.2
How often have you felt like crying?					15.7	11.1	19.4
% “often” or “always” on all 4 items (95% CI)					6.7 (4.1-10.6)	3.2 (1.7-5.9)	8.1 (5.3-12.1)
GRADE 9	(590)	(463)	(368)	(654)	(463)	(368)	(654)
How often have you felt sad?	23.5	17.4	13.1	14.6	17.4	13.1	14.6
How often have you felt lonely?	14.5	12.7	10.0	10.2	12.7	10.0	10.2
How often have you felt depressed?	14.2	13.2	8.7	11.2	13.2	8.7	11.2
How often have you felt like crying?	14.8	13.8	10.0	11.7	13.8	10.0	11.7
% “often” or “always” on all 4 items (95% CI)	5.7 (4.0-8.2)	5.1 (3.4-7.6)	2.8 (1.5-5.4)	4.2 (2.7-6.5)	5.1 (3.4-7.6)	2.8 (1.5-5.4)	4.2 (2.7-6.5)
GRADE 10					(342)	(422)	(622)
How often have you felt sad?					16.8	15.0	18.2
How often have you felt lonely?					13.9	14.4	15.4
How often have you felt depressed?					12.6	10.0	13.1
How often have you felt like crying?					12.2	12.6	15.6

CES-D Items (“Always” or “Often” During the Past 7 Days...)	Grades 7-9-11				Grades 7-12		
	1997	1999	2001	2003	1999	2001	2003
	%	%	%	%	%	%	%
% “often” or “always” on all 4 items (95% CI)					4.7 (2.9-7.6)	6.3 (3.2-12.3)	5.7 (3.6-8.8)
GRADE 11	(536)	(393)	(288)	(620)	(393)	(288)	(620)
How often have you felt sad?	21.9	16.8	17.9	19.4	16.8	17.9	19.4
How often have you felt lonely?	15.1	13.8	17.9	17.1	13.8	17.9	17.1
How often have you felt depressed?	16.9	11.9	15.4	15.8	11.9	15.4	15.8
How often have you felt like crying?	16.3	12.8	15.1	18.0	12.8	15.1	18.0
% “often” or “always” on all 4 items (95% CI)	8.6 (5.4-13.6)	5.2 (3.5-7.8)	6.5 (4.2-9.9)	7.3	5.2 (3.5-7.8)	6.5 (4.2-9.9)	7.3 (5.5-7.4)
GRADE 12					(297)	(200)	(559)
How often have you felt sad?					15.4	14.0	17.1
How often have you felt lonely?					12.3	18.1	14.9
How often have you felt depressed?					11.1	10.8	11.2
How often have you felt like crying?					9.1	9.8	13.8
% “often” or “always” on all 4 items (95% CI)					3.1 (1.6-5.7)	3.3 (1.2-8.4)	4.6 (3.0-7.0)
TORONTO	(364)	(220)	(179)	(284)	(371)	(267)	(548)
How often have you felt sad?	15.8	12.3	13.0	15.2	13.5	11.3	16.8
How often have you felt lonely?	10.8	8.1	12.3	10.7	8.2	13.9	12.9
How often have you felt depressed?	12.8	7.7	10.3	10.5	7.8	9.8	9.8
How often have you felt like crying?	11.5	7.8	8.2	9.1	8.1	8.0	10.5
% “often” or “always” on all 4 items (95% CI)	5.4 (3.7-7.8)	3.2 (1.4-7.3)	4.4 (1.9-9.8)	2.5 (1.2-5.2)	2.8 (1.3-5.7)	4.8 (2.2-10.4)	3.0 (1.7-5.0)
NORTH REGION	(146)	(170)	(268)	(389)	(424)	(599)	(746)
How often have you felt sad?	17.7	17.8	15.3	20.3	15.6	14.3	20.5
How often have you felt lonely?	12.9	11.3	12.0	16.0	12.5	11.5	16.1
How often have you felt depressed?	13.3	13.6	12.9	15.4	12.9	11.3	15.5
How often have you felt like crying?	13.8	14.4	16.4	17.2	13.2	14.7	16.3
% “often” or “always” on all 4 items (95% CI)	4.8 (2.6-8.6)	5.3 (2.6-10.3)	6.2 (3.7-10.4)	8.2 (5.3-12.3)	4.3 (2.8-6.5)	5.4 (4.1-7.1)	7.1 (4.8-10.4)
WEST REGION	(588)	(416)	(359)	(648)	(769)	(718)	(1259)
How often have you felt sad?	20.8	14.1	14.7	17.0	16.5	15.1	18.0
How often have you felt lonely?	12.1	11.6	14.4	13.7	13.1	13.5	13.9
How often have you felt depressed?	12.6	11.7	9.5	11.6	12.9	9.9	12.6
How often have you felt like crying?	15.1	12.1	14.1	16.5	12.7	13.9	17.7
% “often” or “always” on all 4 items (95% CI)	6.7 (3.8-11.6)	4.3 (2.8-6.6)	4.6 (3.0-7.0)	5.8 (4.1-8.0)	5.1 (3.4-7.5)	4.1 (2.9-5.9)	6.2 (4.9-7.9)
EAST REGION	(447)	(447)	(254)	(450)	(735)	(477)	(911)
How often have you felt sad?	25.2	19.5	14.3	15.0	16.6	15.4	15.1
How often have you felt lonely?	16.4	13.3	9.0	13.0	13.5	12.5	14.5
How often have you felt depressed?	16.5	13.5	11.0	13.6	12.4	10.8	12.8
How often have you felt like crying?	15.5	14.1	11.6	15.3	13.7	10.5	14.9
% “often” or “always” on all 4 items (95% CI)	7.3 (5.2-10.1)	5.2 (3.3-7.9)	3.6 (1.7-7.7)	5.3 (3.4-8.3)	5.2 (3.6-7.4)	4.6 (2.1-9.7)	6.0 (4.6-7.6)

Notes: (1) questions refer to the past 7 days; (2) item percentages refer to “often” or “always” responses; (3) data based on a random half sample in each years; (4) numbers in parentheses are number of interviews; (5) significant difference compared to 2001, * p<.05.

Source: OSDUS, Centre for Addiction and Mental Health

Table A3.5.3 General Health Questionnaire, 1999 – 2003, Grades 7 to 12

“Over the last few weeks, have you....”	1999	2001	2003
	%	%	%
TOTAL SAMPLE	(N=2,299)	(N=2,061)	(N=3,464)
been able to concentrate on whatever you’re doing	13.2	12.9	14.2
felt that you are playing a useful part in things	9.9	9.2	10.6
felt capable of making decisions about things	5.5	5.8	6.8
been able to enjoy your normal day-to-day activities	10.6	11.4	13.4
been able to face up to your problems	10.1	9.4	9.9
been feeling reasonably happy, all things considered	16.0	15.5	18.5
lost much sleep because you were worried about something	28.1	26.4	28.7
felt constantly under stress	34.8	32.0	38.5
felt you couldn’t overcome difficulties	18.1	17.0	19.3
been feeling unhappy and depressed	25.6	22.5	25.5
been losing confidence in yourself	18.3	16.6	16.6
been thinking of yourself as a worthless person	13.4	11.4	12.8
% Elevated Psychological Distress (95 % CI) ¹	30.0 (27.8-32.2)	26.5 (24.2-29.0)	30.8 (28.9-32.8)
MALES	(1151)	(1018)	(1654)
been able to concentrate on whatever you’re doing	10.1	11.1	10.4
felt that you are playing a useful part in things	7.4	9.2	9.2
felt capable of making decisions about things	4.4	5.4	5.0
been able to enjoy your normal day-to-day activities	8.6	10.0	10.9
been able to face up to your problems	9.1	9.0	7.0
been feeling reasonably happy, all things considered	13.0	13.0	12.9
lost much sleep because you were worried about something	23.3	22.7	20.4
felt constantly under stress	28.3	28.3	28.0
felt you couldn’t overcome difficulties	13.9	15.6	13.2
been feeling unhappy and depressed	20.8	18.8	17.6
been losing confidence in yourself	13.7	14.9	12.5
been thinking of yourself as a worthless person	10.4	9.8	9.7
% Elevated Psychological Distress (95 % CI) ¹	24.3 (21.4-27.6)	23.3 (20.1-26.8)	22.2 (19.8-24.8)
FEMALES	(1148)	(1043)	(1810)
been able to concentrate on whatever you’re doing	16.3	14.6	17.6
felt that you are playing a useful part in things	12.5	9.2	11.9
felt capable of making decisions about things	6.6	6.1	8.4
been able to enjoy your normal day-to-day activities	12.7	12.7	15.8
been able to face up to your problems	11.1	10.1	12.6
been feeling reasonably happy, all things considered	19.1	18.0	23.7
lost much sleep because you were worried about something	33.0	29.9	36.2
felt constantly under stress	41.4	35.7	48.0
felt you couldn’t overcome difficulties	22.4	18.4	24.9
been feeling unhappy and depressed	30.4	26.3	32.6
been losing confidence in yourself	23.0	18.3	20.3
been thinking of yourself as a worthless person	16.5	12.9	15.5
% Elevated Psychological Distress (95 % CI) ¹	35.8 (32.8-38.8)	29.6 (26.4-33.2)	38.7 (36.3-41.2)
GRADE 7	(397)	(404)	(497)
been able to concentrate on whatever you’re doing	6.4	7.9	9.9
felt that you are playing a useful part in things	6.8	6.1	9.6
felt capable of making decisions about things	3.4	4.7	6.4
been able to enjoy your normal day-to-day activities	7.8	6.6	9.4

“Over the last few weeks, have you....”	1999	2001	2003
	%	%	%
been able to face up to your problems	5.0	7.6	8.5
been feeling reasonably happy, all things considered	10.6	11.7	16.1
lost much sleep because you were worried about something	17.0	19.7	18.9
felt constantly under stress	18.2	18.6	20.9
felt you couldn’t overcome difficulties	11.1	10.6	9.0
been feeling unhappy and depressed	18.0	16.9	19.0
been losing confidence in yourself	12.5	13.7	11.4
been thinking of yourself as a worthless person	12.9	11.5	13.9
% Elevated Psychological Distress (95 % CI) ¹	20.1 (15.7-25.4)	15.9 (12.3-20.3)	20.8 (16.9-25.4)
GRADE 8	(407)	(379)	(512)
been able to concentrate on whatever you’re doing	8.0	10.1	9.1
felt that you are playing a useful part in things	8.1	7.0	7.3
felt capable of making decisions about things	6.4	4.3	3.8
been able to enjoy your normal day-to-day activities	7.0	7.3	12.1
been able to face up to your problems	10.2	6.5	10.4
been feeling reasonably happy, all things considered	14.4	12.3	14.7
lost much sleep because you were worried about something	25.3	21.8	22.3
felt constantly under stress	23.7	23.6	28.7
felt you couldn’t overcome difficulties	15.3	13.3	15.7
been feeling unhappy and depressed	20.8	20.0	20.8
been losing confidence in yourself	17.4	13.9	14.9
been thinking of yourself as a worthless person	16.2	10.8	14.2
% Elevated Psychological Distress (95 % CI) ¹	24.3 (20.4-28.6)	21.9 (17.3-27.4)	23.6 (19.3-28.5)
GRADE 9	(463)	(368)	(654)
been able to concentrate on whatever you’re doing	12.1	13.7	12.9
felt that you are playing a useful part in things	12.2	11.7	8.9
felt capable of making decisions about things	5.2	8.1	5.3
been able to enjoy your normal day-to-day activities	11.0	11.8	10.7
been able to face up to your problems	9.6	11.9	7.0
been feeling reasonably happy, all things considered	17.8	15.0	14.6
lost much sleep because you were worried about something	25.9	28.3	26.6
felt constantly under stress	30.4	31.5	32.3
felt you couldn’t overcome difficulties	17.1	16.9	17.7
been feeling unhappy and depressed	29.0	23.4	22.9
been losing confidence in yourself	21.0	16.6	15.7
been thinking of yourself as a worthless person	14.1	12.0	11.0
% Elevated Psychological Distress (95 % CI) ¹	30.4 (25.1-36.4)	29.8 (25.6-34.4)	26.9 (23.4-30.6)
GRADE 10	(342)	(422)	(622)
been able to concentrate on whatever you’re doing	14.8	9.2	14.0
felt that you are playing a useful part in things	8.9	9.4	11.5
felt capable of making decisions about things	6.8	5.0	7.1
been able to enjoy your normal day-to-day activities	10.6	12.6	16.2
been able to face up to your problems	14.5	7.4	8.3
been feeling reasonably happy, all things considered	17.1	14.4	19.5
lost much sleep because you were worried about something	30.6	24.9	32.7
felt constantly under stress	41.2	31.2	41.5
felt you couldn’t overcome difficulties	19.9	17.3	21.6
been feeling unhappy and depressed	27.2	20.2	27.0

“Over the last few weeks, have you....”	1999	2001	2003
	%	%	%
been losing confidence in yourself	18.4	17.0	15.7
been thinking of yourself as a worthless person	12.8	11.6	11.8
% Elevated Psychological Distress (95 % CI) ¹	31.9 (26.8-37.5)	23.8 (19.4-28.9)	38.6 (34.1-43.2)
GRADE 11	(393)	(288)	(620)
been able to concentrate on whatever you’re doing	20.8	21.0	19.8
felt that you are playing a useful part in things	12.2	11.8	12.5
felt capable of making decisions about things	7.2	5.3	8.4
been able to enjoy your normal day-to-day activities	13.4	16.7	16.7
been able to face up to your problems	11.5	11.3	12.6
been feeling reasonably happy, all things considered	17.3	22.8	22.7
lost much sleep because you were worried about something	36.1	32.7	34.2
felt constantly under stress	47.6	48.5	50.5
felt you couldn’t overcome difficulties	24.0	23.9	23.6
been feeling unhappy and depressed	28.3	29.4	32.3
been losing confidence in yourself	22.5	16.9	20.1
been thinking of yourself as a worthless person	13.6	11.3	14.1
% Elevated Psychological Distress (95 % CI) ¹	39.8 (33.8-46.0)	37.8 (31.8-44.1)	38.6 (34.1-43.2)
GRADE 12	(297)	(200)	(559)
been able to concentrate on whatever you’re doing	16.3	18.6	17.2
felt that you are playing a useful part in things	9.9	7.8	12.8
felt capable of making decisions about things	3.6	7.3	9.0
been able to enjoy your normal day-to-day activities	13.6	13.8	14.5
been able to face up to your problems	9.9	14.1	12.4
been feeling reasonably happy, all things considered	18.6	18.9	22.6
lost much sleep because you were worried about something	33.8	33.3	34.4
felt constantly under stress	49.1	45.0	52.0
felt you couldn’t overcome difficulties	20.8	22.5	25.4
been feeling unhappy and depressed	28.8	28.3	28.7
been losing confidence in yourself	16.2	24.4	20.6
been thinking of yourself as a worthless person	10.2	10.1	12.0
% Elevated Psychological Distress (95 % CI) ¹	31.7 (27.0-36.7)	32.9 (26.2-40.5)	37.8 (33.3-42.5)
TORONTO	(371)	(267)	(548)
been able to concentrate on whatever you’re doing	11.8	14.8	15.5
felt that you are playing a useful part in things	8.9	10.0	12.6
felt capable of making decisions about things	6.8	5.7	7.8
been able to enjoy your normal day-to-day activities	9.8	12.4	13.9
been able to face up to your problems	14.0	6.6	10.4
been feeling reasonably happy, all things considered	17.7	19.2	17.9
lost much sleep because you were worried about something	30.4	27.4	28.0
felt constantly under stress	37.0	34.9	39.3
felt you couldn’t overcome difficulties	13.8	16.6	19.9
been feeling unhappy and depressed	20.6	20.9	26.8
been losing confidence in yourself	16.0	19.7	17.3
been thinking of yourself as a worthless person	11.4	11.3	14.1
% Elevated Psychological Distress (95 % CI) ¹	31.4 (26.1-37.2)	27.5 (21.8-32.0)	31.7 (28.1-35.6)
NORTH REGION	(424)	(599)	(746)
been able to concentrate on whatever you’re doing	13.4	12.3	12.0
felt that you are playing a useful part in things	9.6	8.2	9.9
felt capable of making decisions about things	5.4	5.0	7.8

“Over the last few weeks, have you....”	1999	2001	2003
	%	%	%
been able to enjoy your normal day-to-day activities	11.0	9.6	13.5
been able to face up to your problems	8.5	9.1	13.0
been feeling reasonably happy, all things considered	16.8	14.5	17.6
lost much sleep because you were worried about something	23.9	26.2	27.0
felt constantly under stress	30.4	29.6	35.3
felt you couldn’t overcome difficulties	15.2	16.0	15.5
been feeling unhappy and depressed	22.2	20.5	25.9
been losing confidence in yourself	18.8	13.6	16.8
been thinking of yourself as a worthless person	11.2	11.3	13.9
% Elevated Psychological Distress (95 % CI) ¹	26.9 (21.8-32.7)	24.5 (20.6-28.9)	29.1 (24.4-34.4)
WEST REGION	(769)	(718)	(1259)
been able to concentrate on whatever you’re doing	14.1	12.7	13.6
felt that you are playing a useful part in things	10.0	8.9	9.6
felt capable of making decisions about things	5.0	6.4	6.4
been able to enjoy your normal day-to-day activities	11.0	12.7	12.9
been able to face up to your problems	9.6	10.2	8.9
been feeling reasonably happy, all things considered	15.5	15.7	18.7
lost much sleep because you were worried about something	29.8	26.6	29.7
felt constantly under stress	36.2	30.9	36.9
felt you couldn’t overcome difficulties	19.7	16.6	19.8
been feeling unhappy and depressed	27.1	24.3	25.2
been losing confidence in yourself	17.9	15.9	16.4
been thinking of yourself as a worthless person	13.4	11.3	12.8
% Elevated Psychological Distress (95 % CI) ¹	30.7 (27.1-34.6)	26.8 (23.0-31.0)	31.2 (28.1-34.4)
EAST REGION	(735)	(477)	(911)
been able to concentrate on whatever you’re doing	12.6	12.0	14.8
felt that you are playing a useful part in things	10.4	9.5	11.0
felt capable of making decisions about things	5.4	5.3	6.4
been able to enjoy your normal day-to-day activities	10.5	9.5	13.9
been able to face up to your problems	9.1	10.8	10.0
been feeling reasonably happy, all things considered	15.6	13.1	18.9
lost much sleep because you were worried about something	25.9	25.4	28.2
felt constantly under stress	33.0	32.6	41.1
felt you couldn’t overcome difficulties	19.1	18.3	19.3
been feeling unhappy and depressed	27.2	21.8	25.1
been losing confidence in yourself	20.0	16.5	16.4
been thinking of yourself as a worthless person	15.2	11.5	11.5
% Elevated Psychological Distress (95 % CI) ¹	29.2 (25.9-32.7)	26.0 (22.3-30.2)	30.2 (26.7-34.1)

¹ “Elevated Psychological Distress” is defined as reporting at least 3 of the 12 items.

Notes: (1) item percentages reflect responses “less/much less than usual” for positive statements, and “somewhat/much more than usual” for negative statements; (2) data based on a random half sample in each year; (3) numbers in parentheses are number of interviews.

Source: OSDUS, Centre for Addiction and Mental Health

Table A3.5.4 Body Image Belief and Desired Change in Weight, 2001 and 2003

		Grades 7-12	
		2001 %	2003 %
TOTAL SAMPLE	(N=)	(1837)	(3152)
Belief:	too thin	10.3	11.1
	about right weight	70.9	69.0
	too fat	18.7	19.9
Trying to:	lose weight	31.3	29.1
	gain weight	12.2	11.6
	keep from gaining weight	18.3	20.8
	not trying to do anything	38.2	38.5
MALES		(899)	(1509)
Belief:	too thin	12.9	15.8
	about right weight	73.4	70.7
	too fat	13.7	13.4
Trying to:	lose weight	21.2	18.4
	gain weight	18.5	18.4
	keep from gaining weight	16.9	14.8
	not trying to do anything	43.4	48.4
FEMALES		(938)	(1643)
Belief:	too thin	7.9	6.7
	about right weight	68.6	67.3
	too fat	23.6	26.0
Trying to:	lose weight	40.9	39.2
	gain weight	6.2	5.4
	keep from gaining weight	19.6	26.3
	not trying to do anything	33.3	29.1
GRADE 7		(346)	(450)
Belief:	too thin	12.1	9.9
	about right weight	76.1	74.3
	too fat	11.8	15.8
Trying to:	lose weight	25.7	22.8
	gain weight	10.5	8.1
	keep from gaining weight	19.2	18.1
	not trying to do anything	44.6	51.1
GRADE 8		(312)	(464)
Belief:	too thin	10.5	9.9
	about right weight	68.1	74.3
	too fat	21.5	15.8
Trying to:	lose weight	32.3	25.2
	gain weight	9.7	8.6
	keep from gaining weight	22.2	25.1
	not trying to do anything	35.8	41.1
GRADE 9		(334)	(600)
Belief:	too thin	7.3	11.6
	about right weight	73.8	70.5
	too fat	18.9	17.9
Trying to:	lose weight	34.3	29.4
	gain weight	9.2	12.3
	keep from gaining weight	18.1	19.6

		Grades 7-12	
		2001 %	2003 %
not trying to do anything		38.4	38.7
GRADE 10		(384)	(559)
Belief:	too thin	7.7	11.7
	about right weight	73.8	64.2
	too fat	18.4	24.1
Trying to:	lose weight	34.3	32.2
	gain weight	11.0	11.9
	keep from gaining weight	16.8	21.6
	not trying to do anything	37.8	34.3
GRADE 11		(273)	(568)
Belief:	too thin	12.2	11.6
	about right weight	66.1	65.5
	too fat	21.7	23.0
Trying to:	lose weight	31.1	31.8
	gain weight	17.1	13.9
	keep from gaining weight	16.5	20.1
	not trying to do anything	35.3	34.2
GRADE 12		(188)	(511)
Belief:	too thin	15.4	11.8
	about right weight	63.0	67.0
	too fat	21.6	21.2
Trying to:	lose weight	27.4	31.5
	gain weight	18.5	13.9
	keep from gaining weight	17.6	20.6
	not trying to do anything	36.4	34.0
TORONTO		(266)	(549)
Belief:	too thin	12.4	13.7
	about right weight	74.6	69.7
	too fat	13.0	16.6
Trying to:	lose weight	28.4	26.1
	gain weight	13.6	11.5
	keep from gaining weight	20.8	18.7
	not trying to do anything	37.2	43.7
NORTH REGION		(415)	(539)
Belief:	too thin	8.3	9.7
	about right weight	67.5	70.4
	too fat	24.3	19.8
Trying to:	lose weight	31.2	26.8
	gain weight	11.9	10.6
	keep from gaining weight	19.5	19.9
	not trying to do anything	37.4	42.7
WEST REGION		(707)	(1254)
Belief:	too thin	9.6	11.4
	about right weight	71.3	67.2
	too fat	19.1	21.4
Trying to:	lose weight	31.4	30.6
	gain weight	11.9	11.7
	keep from gaining weight	20.0	21.2
	not trying to do anything	36.8	36.6
EAST REGION		(449)	(810)

		Grades 7-12	
		2001 %	2003 %
Belief:	too thin	10.6	9.3
	about right weight	68.8	70.9
	too fat	20.6	19.8
Trying to:	lose weight	33.4	29.5
	gain weight	11.7	12.0
	keep from gaining weight	13.5	21.7
	not trying to do anything	41.4	36.8

Notes: (1) numbers in parentheses are number of interviews; (2) data based on a random half sample in each year; (3) no significant differences between 2001 and 2003.

Qs: *Do you think of yourself as being too thin, about the right weight, or too fat?*
Which of the following are you doing about your weight?

Source: OSDUS, Centre for Addiction and Mental Health

Table A3.6.1 Delinquent Activity Engaged in At Least Once During the Past Year, 1991 – 2003

	Grades 7-9-11							Grades 7-12		
	1991 %	1993 %	1995 %	1997 %	1999 %	2001 %	2003 %	1999 %	2001 %	2003 %
TOTAL SAMPLE (N=)	(2961)	(2617)	(2907)	(1527)	(1168)	(1060)	(1771)	(2148)	(2061)	(3464)
vandalism	19.8	20.0	20.7	18.8	22.9	14.8	15.9	24.1	16.3	15.1
theft of goods worth \$50 or less	19.9	20.0	21.1	17.3	15.9	12.7	14.3	17.3	14.1	14.7
assault	19.6	17.3	19.7	22.0	20.3	12.3	12.5	19.9	12.8	11.5
ran away from home	9.1	8.8	8.9	8.2	8.4	7.0	10.8	8.4	7.4	10.2
carried a weapon	—	16.2	14.8	11.8	12.8	9.2	11.4	13.5	10.6	9.6
car theft/ joyriding	11.3	8.7	10.9	9.5	10.6	7.4	9.2	10.2	9.1	9.3
sold marijuana or hashish	3.1	4.0	7.2	6.4	7.2	8.4	7.8	7.8	10.1	8.3
gang fighting	7.4	6.0	7.3	7.1	7.4	4.7	7.5	7.7	5.3	6.4
theft of goods worth > \$50	5.8	6.4	7.1	6.2	6.2	4.8	6.2	6.6	5.8	5.3
were thrown out of home	5.8	5.1	4.9	4.9	7.3	4.8	5.3	6.2	5.2	5.1
break and entering	6.2	6.1	6.8	6.6	6.2	4.7	5.0	6.4	5.0	4.4
sold other drugs	2.0	2.2	3.7	2.4	3.6	2.6	2.9	3.3	3.2	2.8
% 1+ activity	44.5	46.3	47.7	46.2	48.3	36.5	39.5	48.7	38.3	38.6
(95% CI)	(41.5-47.6)	(44.3-48.3)	(45.1-50.2)	(43.8-48.5)	(44.2-52.3)	(32.8-40.3)	(36.8-42.3)	(45.6-51.8)	(35.7-41.0)	(36.4-40.8)
% 3+ activities	15.5	17.8	18.7	21.0	18.0	13.5	14.6	18.9	15.0	14.3
(95% CI)	(13.6-17.6)	(16.7-19.0)	(17.3-20.3)	(18.0-24.3)	(15.5-20.9)	(11.6-15.6)	(12.7-16.8)	(16.8-21.1)	(13.2-16.9)	(12.8-16.0)
MALES	(1554)	(1270)	(1412)	(723)	(582)	(529)	(888)	(1101)	(1018)	(1654)
vandalism	26.3	24.1	27.0	21.4	27.7	20.0	18.6	29.3	21.2	18.2
theft of goods worth \$50 or less	26.1	22.0	25.4	19.0	18.8	15.5	17.4	20.9	17.5	17.9
assault	26.1	22.6	27.7	29.6	30.6	16.9	14.6	29.4	17.1	14.4
ran away from home	7.2	5.3	6.6	6.0	6.9	7.6	8.3	5.6	7.4	7.9
carried a weapon	—	23.6	23.7	18.6	20.8	15.3	16.4	21.5	17.0	14.9
car theft/ joyriding	15.6	11.6	14.4	12.5	15.0	10.2	12.9	12.5	12.5	12.7
sold marijuana or hashish	4.9	6.0	10.0	10.1	10.6	12.2	11.0	11.1	13.8	11.9
gang fighting	10.7	8.3	10.7	10.4	9.8	8.7	9.6	11.6	8.4	9.0
theft of goods worth > \$50	8.9	8.8	10.3	9.3	9.0	7.5	8.7	9.1	8.2	8.0
were thrown out of home	6.2	4.3	4.8	5.1	7.6	5.3	4.7	5.6	5.5	4.8
break and entering	9.3	8.9	10.3	8.0	9.2	6.4	6.9	9.6	6.5	6.7
sold other drugs	2.9	2.3	4.8	4.0	5.9	3.9	4.4	5.2	4.8	4.3
% 1+ activity	53.7	52.1	56.2	53.2	58.2	46.7	45.3	57.3	46.9	44.2
(95% CI)	(50.8-56.6)	(49.2-55.0)	(52.6-59.9)	(47.1-59.1)	(52.1-64.1)	(41.5-52.0)	(41.0-49.6)	(53.2-61.4)	(43.0-51.0)	(41.1-47.3)
% 3+ activities	21.2	22.6	25.0	21.0	24.7	18.9	17.4	25.9	20.2	18.4
(95% CI)	(18.8-23.7)	(20.2-25.1)	(22.6-27.7)	(18.0-24.0)	(21.2-28.7)	(15.6-22.7)	(14.7-20.6)	(22.8-29.3)	(17.5-23.3)	(16.4-20.7)

	Grades 7-9-11							Grades 7-12		
	1991 %	1993 %	1995 %	1997 %	1999 %	2001 %	2003 %	1999 %	2001 %	2003 %
FEMALES	(1407)	(1347)	(1495)	(804)	(586)	(531)	(883)	(1047)	(1043)	(1810)
vandalism	12.6	16.1	14.8	16.4	18.2	9.5	13.2	18.9	11.6	12.3
theft of goods worth \$50 or less	13.2	18.2	17.1	15.8	13.2	9.9	11.2	13.7	10.9	11.8
assault	12.5	12.2	12.2	15.1	10.0	7.7	10.5	10.4	8.6	8.9
ran away from home	11.1	12.1	11.1	10.1	9.8	6.5	13.2	11.2	7.4	12.3
carried a weapon	—	9.2	6.7	5.8	4.9	3.2	6.6	5.5	4.5	4.9
car theft/ joyriding	6.8	6.0	7.8	6.9	6.3	4.6	5.5	7.8	5.9	6.3
sold marijuana or hashish	1.2	2.1	4.6	3.2	3.9	4.7	4.6	4.4	6.5	5.1
gang fighting	3.8	3.4	4.1	4.1	4.8	0.8	5.4	3.8	2.2	4.1
theft of goods worth > \$50	2.4	4.0	4.1	3.5	3.4	2.2	3.7	4.0	3.4	2.9
were thrown out of home	5.4	5.9	5.0	4.8	7.0	4.4	5.9	6.8	4.9	5.4
break and entering	2.7	3.4	3.6	5.4	3.2	3.1	3.1	3.2	3.5	2.4
sold other drugs	1.0	2.2	2.6	1.0	1.2	1.2	1.4	1.4	1.6	1.5
% 1+ activity	34.5	40.8	39.7	39.9	38.3	26.3	33.8	40.0	30.0	33.5
(95% CI)	(30.5-38.8)	(37.6-44.0)	(36.2-43.3)	(37.0-42.9)	(33.2-43.7)	(21.7-31.5)	(30.4-37.4)	(36.0-44.1)	(26.7-33.6)	(30.7-36.4)
% 3+ activities	9.3	13.3	12.9	12.7	11.3	8.1	11.8	11.7	9.9	10.6
(95% CI)	(7.3-11.8)	(11.7-15.0)	(10.4-15.8)	(10.7-15.0)	(8.0-15.7)	(5.8-11.2)	(9.3-14.9)	(9.2-14.8)	(8.1-12.2)	(8.8-12.7)
GRADE 7	(941)	(894)	(927)	(431)	(369)	(404)	(497)	(369)	(404)	(497)
vandalism	15.4	19.6	16.3	16.2	18.9	10.3	14.7	18.9	10.3	14.7
theft of goods worth \$50 or less	12.6	13.9	13.5	12.7	9.3	8.1	9.9	9.3	8.1	9.9
assault	18.3	19.6	22.5	27.7	17.1	13.5	11.1	17.1	13.5	11.1
ran away from home	7.2	7.4	7.1	7.5	7.4	7.2	9.7	7.4	7.2	9.7
carried a weapon	—	12.9	12.8	9.2	7.8	5.4	9.9	7.8	5.4	9.9
car theft/ joyriding	1.0	1.7	1.5	1.9	0.5	1.1	1.8	0.5	1.1	1.8
sold marijuana or hashish	†	1.3	1.2	1.3	†	0.8	2.0	†	0.8	2.0
gang fighting	5.8	6.7	5.7	7.7	5.9	4.4	7.8	5.9	4.4	7.8
theft of goods worth > \$50	1.4	2.9	3.1	1.7	2.4	3.2	3.2	2.4	3.2	3.2
were thrown out of home	2.7	2.7	2.1	1.3	2.6	2.9	2.3	2.6	2.9	2.3
break and entering	2.4	5.5	4.3	6.2	3.1	2.1	2.7	3.1	2.1	2.7
sold other drugs	†	0.8	0.7	0.7	†	0.7	2.0	†	0.7	2.0
% 1+ activity	34.0	38.7	38.8	41.5	37.3	29.0	31.4	37.3	29.0	31.4
(95% CI)	(27.8-40.7)	(34.9-42.7)	(36.1-41.6)	(37.0-46.2)	(31.8-43.2)	(23.9-34.8)	(26.0-37.4)	(31.8-43.2)	(23.9-34.8)	(26.0-37.4)
% 3+ activities	8.1	13.3	11.9	11.9	8.8	7.7	10.9	8.8	7.7	10.9
(95% CI)	(6.2-10.4)	(11.1-15.8)	(10.2-13.9)	(9.2-15.3)	(6.4-12.2)	(4.6-12.7)	(7.3-15.8)	(6.4-12.2)	(4.6-12.7)	(7.3-15.8)

	Grades 7-9-11							Grades 7-12		
	1991 %	1993 %	1995 %	1997 %	1999 %	2001 %	2003 %	1999 %	2001 %	2003 %
GRADE 8								(391)	(379)	(512)
vandalism								26.0	19.5	12.6
theft of goods worth \$50 or less								15.6	14.3	13.3
assault								24.8	15.5	12.3
ran away from home								9.2	9.7	9.5
carried a weapon								15.2	9.6	6.6
car theft/ joyriding								4.3	4.4	2.2
sold marijuana or hashish								4.0	4.4	3.8
gang fighting								9.8	4.4	3.7
theft of goods worth > \$50								4.8	5.5	2.3
were thrown out of home								2.4	3.8	2.3
break and entering								6.8	4.0	2.2
sold other drugs								2.3	1.5	2.2
% 1+ activity (95% CI)								46.8 (40.2-53.6)	34.7 (29.0-40.8)	33.4 (27.8-39.5)
% 3+ activities (95% CI)								18.1 (13.0-24.7)	15.4 (11.2-20.9)	9.9 (6.5-14.6)
GRADE 9	(897)	(1,003)	(1,050)	(563)	(442)	(368)	(654)	(442)	(368)	(654)
vandalism	24.0	22.2	22.3	20.7	26.8	17.4	16.1	26.8	17.4	16.1
theft of goods worth \$50 or less	24.5	23.3	23.6	16.6	16.9	15.4	13.7	16.9	15.4	13.7
assault	21.3	17.6	18.1	19.1	22.6	13.4	11.0	22.6	13.4	11.0
ran away from home	9.5	10.3	8.2	7.6	7.8	6.9	9.6	7.8	6.9	9.6
carried a weapon	—	18.9	14.7	12.6	13.4	12.6	12.2	13.4	12.6	12.2
car theft/ joyriding	14.2	9.4	9.3	6.4	9.4	7.2	7.8	9.4	7.2	7.8
sold marijuana or hashish	3.1	2.6	6.7	4.9	6.5	8.8	7.3	6.5	8.8	7.3
gang fighting	8.3	7.1	8.4	5.5	8.7	6.4	8.0	8.7	6.4	8.0
theft of goods worth > \$50	7.1	6.6	8.0	7.3	6.3	6.0	5.5	6.3	6.0	5.5
were thrown out of home	6.3	6.0	5.1	5.0	6.8	5.5	5.4	6.8	5.5	5.4
break and entering	9.0	6.2	6.6	6.5	4.6	5.0	5.3	4.6	5.0	5.3
sold other drugs	2.1	2.5	2.9	2.0	2.0	2.3	2.9	2.0	2.3	2.9
% 1+ activity (95% CI)	48.8 (44.5-53.0)	49.9 (46.5-53.3)	47.5 (44.5-50.6)	43.0 (40.1-46.0)	49.9 (44.0-55.8)	39.2 (32.8-45.9)	39.6 (35.6-43.8)	49.9 (44.0-55.8)	39.2 (32.8-45.9)	39.6 (35.6-43.8)
% 3+ activities (95% CI)	19.0 (16.0-22.5)	19.7 (18.3-21.2)	18.2 (15.7-21.0)	16.4 (13.1-20.3)	18.4 (14.1-23.6)	15.5 (12.6-19.0)	13.7 (11.2-16.8)	18.4 (14.1-23.6)	15.5 (12.6-19.0)	13.7 (11.2-16.8)

	Grades 7-9-11							Grades 7-12		
	1991 %	1993 %	1995 %	1997 %	1999 %	2001 %	2003 %	1999 %	2001 %	2003 %
GRADE 10								(296)	(422)	(622)
vandalism								34.2	20.0	16.3
theft of goods worth \$50 or less								24.8	16.6	17.5
assault								23.5	13.5	10.1
ran away from home								10.6	7.7	11.6
carried a weapon								18.3	15.9	8.6
car theft/ joyriding								12.8	14.5	13.3
sold marijuana or hashish								12.8	15.5	10.4
gang fighting								10.3	6.7	5.2
theft of goods worth > \$50								9.3	8.4	5.1
were thrown out of home								6.8	7.4	6.1
break and entering								8.1	6.7	4.8
sold other drugs								3.5	4.8	2.3
% 1+ activity (95% CI)								55.4 (46.8-63.8)	44.6 (39.0-50.4)	40.6 (35.6-45.7)
% 3+ activities (95% CI)								27.0 (20.8-34.2)	18.4 (14.8-22.7)	17.4 (13.8-21.7)
GRADE 11	(1,123)	(720)	(930)	(533)	(357)	(288)	(620)	(357)	(288)	(620)
vandalism	19.8	18.1	22.7	19.1	21.4	16.0	16.6	21.4	16.0	16.6
theft of goods worth \$50 or less	22.3	21.7	24.8	21.9	20.1	14.0	18.2	20.1	14.0	18.2
assault	19.1	15.2	18.9	19.9	20.1	9.5	15.1	20.1	9.5	15.1
ran away from home	10.3	8.5	11.1	9.3	9.8	7.1	12.6	9.8	7.1	12.6
carried a weapon	—	16.2	16.6	13.3	16.2	8.5	11.8	16.2	8.5	11.8
car theft/ joyriding	18.0	13.9	20.3	19.0	20.1	14.3	16.2	20.1	14.3	16.2
sold marijuana or hashish	5.4	7.8	12.8	12.3	13.8	16.1	12.6	13.8	16.1	12.6
gang fighting	7.9	4.4	7.5	8.0	6.9	2.8	6.8	6.9	2.8	6.8
theft of goods worth > \$50	8.7	9.0	9.4	9.1	9.2	5.1	9.1	9.2	5.1	9.1
were thrown out of home	8.2	6.2	7.1	8.0	11.6	6.1	7.5	11.6	6.1	7.5
break and entering	7.0	6.6	9.0	7.1	10.4	7.2	6.4	10.4	7.2	6.4
sold other drugs	3.3	3.2	6.9	4.2	8.3	5.0	3.6	8.3	5.0	3.6
% 1+ activity (95% CI)	50.2 (45.5-54.9)	48.9 (45.8-52.1)	54.9 (48.9-60.9)	53.0 (48.5-57.5)	55.0 (46.0-63.8)	40.7 (33.3-48.6)	45.6 (40.3-51.1)	55.0 (46.0-63.8)	40.7 (33.3-48.6)	45.6 (40.3-51.1)
% 3+ activities (95% CI)	19.0 (14.8-24.0)	19.5 (17.2-22.0)	24.8 (21.9-27.8)	20.7 (18.5-23.2)	24.8 (19.2-31.4)	16.8 (12.5-22.3)	18.4 (14.7-22.6)	24.8 (19.2-31.4)	16.8 (12.5-22.3)	18.4 (14.7-22.6)

	Grades 7-9-11							Grades 7-12		
	1991 %	1993 %	1995 %	1997 %	1999 %	2001 %	2003 %	1999 %	2001 %	2003 %
GRADE 12								(293)	(200)	(559)
vandalism								16.7	11.9	13.3
theft of goods worth \$50 or less								18.0	15.9	14.0
assault								9.0	9.6	9.0
ran away from home								5.6	5.6	7.5
carried a weapon								9.6	8.3	8.0
car theft/ joyriding								12.9	14.4	11.4
sold marijuana or hashish								10.0	15.5	11.6
gang fighting								4.4	4.9	6.7
theft of goods worth > \$50								7.5	7.1	5.4
were thrown out of home								5.6	4.0	6.0
break and entering								5.5	4.0	4.3
sold other drugs								3.2	5.1	3.7
% 1+ activity (95% CI)								46.4 (39.3-53.8)	40.0 (33.3-48.6)	37.7 (32.5-43.2)
% 3+ activities (95% CI)								15.6 (10.7-22.2)	15.1 (9.3-23.7)	13.7 (10.6-17.4)
TORONTO	(601)	(642)	(647)	(351)	(217)	(179)	(284)	(369)	(267)	(548)
vandalism	18.4	17.0	18.6	17.6	18.6	11.7	17.5	17.6	13.0	16.1
theft of goods worth \$50 or less	22.9	20.2	19.2	16.8	14.9	9.2	12.5	13.0	10.5	14.3
assault	17.5	12.7	15.1	26.1	20.3	7.4	10.2	17.9	9.1	8.8
ran away from home	6.6	7.1	5.0	6.2	5.3	3.4	5.7	5.4	4.5	6.2
carried a weapon	—	16.4	13.5	11.3	15.4	6.8	13.6	11.9	7.9	11.4
car theft/ joyriding	8.7	8.7	8.1	8.4	10.0	4.1	6.9	8.2	4.1	8.3
sold marijuana or hashish	4.4	2.8	5.7	4.9	4.5	5.7	8.9	4.4	5.1	10.6
gang fighting	7.8	5.8	7.7	10.4	10.0	4.2	8.4	8.7	3.7	6.6
theft of goods worth > \$50	7.6	6.2	6.5	4.4	8.1	4.4	9.1	6.0	5.9	7.4
were thrown out of home	5.6	6.1	3.8	4.8	3.5	1.6	4.4	2.6	2.0	4.5
break and entering	4.3	6.1	7.0	5.6	4.0	3.1	4.0	3.3	3.6	3.8
sold other drugs	2.6	1.6	1.8	2.2	2.0	1.2	2.4	1.4	1.7	2.0
% 1+ activity (95% CI)	43.0 (34.3-52.3)	41.8 (37.4-46.3)	39.9 (30.7-50.0)	46.3 (38.1-54.6)	45.3 (36.4-54.6)	27.6 (24.2-31.3)	37.3 (32.3-42.6)	41.4 (33.4-49.9)	28.6 (24.9-32.6)	36.9 (31.7-42.4)
% 3+ activities (95% CI)	14.7 (11.3-18.9)	15.6 (13.3-18.2)	14.4 (10.6-19.3)	17.5 (15.2-20.2)	15.6 (10.8-22.1)	9.8 (7.4-13.0)	13.2 (9.7-17.8)	13.4 (9.6-18.4)	11.4 (7.6-16.6)	13.9 (11.2-17.1)

	Grades 7-9-11							Grades 7-12		
	1991 %	1993 %	1995 %	1997 %	1999 %	2001 %	2003 %	1999 %	2001 %	2003 %
NORTH REGION	(256)	(156)	(220)	(145)	(151)	(268)	(389)	(384)	(599)	(746)
vandalism	23.3	21.4	17.2	15.1	25.9	15.3	19.1	23.0	15.7	16.6
theft of goods worth \$50 or less	17.2	19.6	17.4	14.8	20.3	9.0	16.4	16.7	9.6	15.6
assault	24.0	16.3	15.2	16.0	17.5	10.1	15.6	16.7	13.1	15.1
ran away from home	9.2	10.8	12.7	6.1	11.9	7.5	15.1	8.2	6.2	14.8
carried a weapon	—	14.8	15.9	18.0	13.9	8.6	12.5	12.1	11.3	9.5
car theft/ joyriding	17.7	11.1	11.0	10.1	10.5	6.5	11.0	11.9	8.4	9.4
sold marijuana or hashish	4.4	5.8	11.0	9.6	6.8	5.2	12.3	7.9	5.8	9.8
gang fighting	9.5	9.6	3.6	4.3	3.7	6.2	7.2	4.5	5.4	5.4
theft of goods worth > \$50	4.5	9.2	4.0	5.4	6.0	5.1	6.0	4.1	3.8	4.9
were thrown out of home	7.7	3.4	5.0	3.8	4.3	6.5	9.2	4.7	5.1	7.6
break and entering	10.0	11.0	1.7	10.6	7.1	4.1	8.0	7.8	5.2	7.6
sold other drugs	4.4	2.6	8.2	2.4	1.3	1.3	4.1	3.0	2.1	3.6
% 1+ activity (95% CI)	46.2 (41.2-51.4)	49.1 (37.0-61.3)	43.9 (34.1-54.1)	44.4 (38.7-50.3)	55.0 (44.9-64.6)	31.1 (23.7-39.6)	45.6 (39.6-51.9)	52.5 (47.2-57.8)	38.4 (31.3-46.1)	44.4 (38.7-50.1)
% 3+ activities (95% CI)	19.6 (16.2-23.5)	21.8 (16.2-28.7)	20.5 (14.5-28.2)	15.7 (8.5-27.2)	16.9 (11.4-24.2)	12.4 (8.0-18.5)	17.0 (12.6-22.6)	16.8 (12.8-21.7)	12.5 (9.0-17.2)	16.6 (13.0-20.8)
WEST REGION	(1252)	(1122)	(1242)	(575)	(406)	(359)	(648)	(763)	(718)	(1259)
vandalism	18.5	20.6	21.8	19.7	23.2	15.8	15.4	25.6	16.3	14.8
theft of goods worth \$50 or less	18.1	18.1	21.8	18.7	16.8	15.3	14.2	19.8	16.6	14.4
assault	20.4	19.2	22.1	22.6	22.0	15.6	12.1	22.2	13.3	12.0
ran away from home	9.2	9.2	8.8	8.9	8.7	9.2	11.1	8.6	9.7	10.6
carried a weapon	—	16.3	14.8	10.1	12.8	8.9	11.1	14.5	9.7	9.5
car theft/ joyriding	10.5	8.3	11.2	9.9	11.8	8.8	10.6	10.5	10.9	10.4
sold marijuana or hashish	2.5	4.9	7.7	6.1	7.3	11.0	7.3	9.3	13.2	7.8
gang fighting	7.2	5.1	7.6	6.3	7.9	4.5	7.3	8.9	5.0	6.3
theft of goods worth > \$50	4.9	5.5	7.1	7.0	5.0	5.4	5.6	7.3	5.8	5.1
were thrown out of home	5.4	4.4	5.6	4.6	8.4	7.0	6.1	7.5	7.2	5.4
break and entering	5.8	4.9	6.7	5.8	6.6	6.8	4.8	7.5	5.7	4.0
sold other drugs	1.6	2.6	3.4	2.3	3.9	3.3	3.1	4.2	4.6	3.2
% 1+ activity (95% CI)	42.8 (38.4-47.3)	46.5 (44.1-49.0)	49.5 (46.7-52.4)	46.7 (44.1-49.4)	52.2 (44.8-59.6)	40.2 (34.7-46.0)	38.9 (34.3-43.7)	51.9 (46.4-57.3)	41.6 (37.8-45.6)	38.7 (35.4-42.1)
% 3+ activities (95% CI)	14.4 (11.7-17.6)	20.3 (19.6-21.0)	20.0 (18.0-22.1)	16.4 (13.5-19.8)	19.0 (15.1-23.6)	16.6 (13.3-20.7)	15.2 (12.6-18.2)	21.3 (17.7-25.4)	16.9 (14.2-19.9)	14.9 (12.7-17.5)
EAST REGION	(852)	(697)	(798)	(456)	(394)	(254)	(450)	(632)	(477)	(911)
damaged something on purpose	21.6	20.6	21.4	19.1	24.4	16.1	14.7	26.1	18.8	14.4

	Grades 7-9-11							Grades 7-12		
	1991 %	1993 %	1995 %	1997 %	1999 %	2001 %	2003 %	1999 %	2001 %	2003 %
theft of goods worth \$50 or less	21.3	23.0	22.4	16.4	14.6	13.5	14.9	16.5	14.5	15.2
assault	18.6	17.9	20.4	20.3	18.5	12.8	13.7	18.6	14.4	11.3
ran away from home	10.4	8.9	10.6	8.8	9.0	7.2	12.1	10.0	6.5	10.8
carried a weapon	—	16.3	15.4	12.9	11.2	12.2	10.2	13.4	13.6	8.8
car theft/ joyriding	12.4	8.8	12.5	9.5	9.6	8.8	8.0	10.2	10.3	8.3
sold marijuana or hashish	2.7	3.1	6.5	7.0	8.9	8.3	6.4	7.5	10.5	7.3
gang fighting	6.8	6.6	7.5	7.0	5.7	5.2	7.4	6.4	6.7	6.8
theft of goods worth > \$50	6.5	6.9	8.3	6.3	6.8	4.5	5.3	6.5	6.3	4.5
were thrown out of home	6.0	6.0	4.6	5.8	8.7	4.2	3.5	6.7	4.4	4.4
break and entering	6.9	6.3	8.4	7.3	6.8	3.4	5.0	6.4	4.7	4.6
sold other drugs	1.6	2.0	3.9	2.8	4.4	3.3	2.6	3.2	2.3	2.6
% 1+ activity	47.6	48.3	51.0	45.8	43.4	41.2	40.0	47.2	40.0	37.7
(95% CI)	(43.3-52.0)	(44.4-52.2)	(47.3-54.6)	(41.5-50.1)	(38.6-48.6)	(32.1-51.1)	(35.3-45.0)	(43.2-51.2)	(34.0-46.4)	(33.8-41.7)
% 3+ activities	16.7	20.3	19.0	16.6	18.3	12.6	13.9	19.2	15.5	13.1
(95% CI)	(13.0-21.2)	(19.6-21.0)	(16.6-21.7)	(14.9-18.4)	(13.8-24.0)	(9.2-17.1)	(10.0-19.1)	(15.8-23.0)	(12.2-19.6)	(10.1-16.9)

¹ Activities are listed in descending order according to 2003 total sample percentages.

Notes: (1) numbers in parentheses are the number of interviews; (2) — indicates data not available; (3) † indicates estimate suppressed, <0.5%; (4) data based on a random half sample in each year from 1997-2003.

Source: OSDUS, Centre for Addiction and Mental Health

Table A3.6.2 Violence on School Property: Physical Fighting and Been Threatened or Injured with a Weapon During the Past Year, 2001 – 2003, Grades 7 to 12

		2001	2003
		%	%
TOTAL	(N=)	(2061)	(3464)
Number of physical fights at school:	None	83.1	82.4
	One	10.6	10.6
	2+	6.2	7.0
Number times threatened/injured with a weapon:	None	—	92.3
	Once	—	4.5
	2+	—	3.2
MALES		(1018)	(1654)
Number of physical fights at school:	None	74.9	73.2
	One	15.0	15.5
	2+	10.1	11.3
Number times threatened/injured with a weapon:	None	—	89.9
	Once	—	5.9
	2+	—	4.2
FEMALES		(1043)	(1810)
Number of physical fights at school:	None	91.2	90.8
	One	6.3	6.1
	2+	2.5	3.1
Number times threatened/injured with a weapon:	None	—	94.5
	Once	—	3.2
	2+	—	2.3
GRADE 7		(404)	(497)
Number of physical fights at school:	None	76.2	70.3
	One	16.1	15.6
	2+	7.7	14.1
Number times threatened/injured with a weapon:	None	—	92.7
	Once	—	3.2
	2+	—	4.1
GRADE 8		(379)	(512)
Number of physical fights at school:	None	75.0	74.0
	One	14.1	14.5
	2+	10.9	11.6
Number times threatened/injured with a weapon:	None	—	90.2
	Once	—	5.9
	2+	—	3.8
GRADE 9		(368)	(654)
Number of physical fights at school:	None	80.5	92.3
	One	11.3	4.4
	2+	8.2	3.3
Number times threatened/injured with a weapon:	None	—	80.4
	Once	—	13.0
	2+	—	6.6
GRADE 10		(422)	(622)
Number of physical fights at school:	None	87.8	85.5
	One	8.2	9.6
	2+	4.0	4.9
Number times threatened/injured with a weapon:	None	—	90.0

		2001	2003
		%	%
	Once	—	7.0
	2+	—	3.0
GRADE 11		(288)	(620)
Number of physical fights at school:	None	92.0	89.0
	One	6.7	7.4
	2+	1.3	3.6
Number times threatened/injured with a weapon:	None	—	93.2
	Once	—	3.6
	2+	—	3.2
GRADE 12		(200)	(559)
Number of physical fights at school:	None	88.7	91.2
	One	6.2	5.2
	2+	5.0	3.6
Number times threatened/injured with a weapon:	None	—	95.4
	Once	—	2.7
	2+	—	1.9
TORONTO		(267)	(548)
Number of physical fights at school:	None	86.1	85.4
	One	9.2	8.0
	2+	4.7	6.5
Number times threatened/injured with a weapon:	None	—	92.2
	Once	—	3.9
	2+	—	3.9
NORTH REGION		(599)	(746)
Number of physical fights at school:	None	82.9	80.3
	One	11.1	11.1
	2+	5.9	8.5
Number times threatened/injured with a weapon:	None	—	92.6
	Once	—	4.5
	2+	—	2.9
WEST REGION		(718)	(1259)
Number of physical fights at school:	None	81.6	81.0
	One	11.4	11.7
	2+	6.9	7.3
Number times threatened/injured with a weapon:	None	—	91.5
	Once	—	4.8
	2+	—	3.7
EAST REGION		(477)	(911)
Number of physical fights at school:	None	83.4	83.3
	One	10.2	10.3
	2+	6.4	6.4
Number times threatened/injured with a weapon:	None	—	93.6
	Once	—	4.3
	2+	—	2.1

Notes: (1) numbers in parentheses are the number of interviews; (2) data based on a random half sample in each year.

Qs: During the last 12 months, how many times were you in a physical fight on school property?

During the last 12 months, how many times has someone threatened or injured you with a weapon, such as a gun, knife or club on school property?

Source: OSDUS, Centre for Addiction and Mental Health

Table A3.6.3 Bullying Behaviour at School (since September), 2003, Grades 7 to 12

		2003
		%
TOTAL		(N=3464)
Often you've been bullied at school:	daily/weekly	7.7
	monthly or less	21.4
	never	70.9
Method you were bullied the most:	physical attacks	3.9
	verbal attacks	26.5
	theft/vandalism	2.3
	was not bullied	67.3
Often bullied someone at school:	daily/weekly	7.0
	monthly or less	22.5
	never	70.5
Method you bullied others the most:	physical attacks	3.9
	verbal attacks	24.9
	theft/vandalism	1.0
	did not bully	70.3
MALES		(1654)
Often you've been bullied at school:	daily/weekly	9.1
	monthly or less	22.9
	never	68.0
Method you were bullied the most:	physical attacks	7.3
	verbal attacks	24.7
	theft/vandalism	3.3
	was not bullied	64.7
Often bullied someone at school:	daily/weekly	9.7
	monthly or less	25.9
	never	64.4
Method you bullied others the most:	physical attacks	6.7
	verbal attacks	26.7
	theft/vandalism	1.6
	did not bully	65.1
FEMALES		(1810)
Often you've been bullied at school:	daily/weekly	6.4
	monthly or less	20.1
	never	73.5
Method you were bullied the most:	physical attacks	0.8
	verbal attacks	28.1
	theft/vandalism	1.5
	was not bullied	69.7
Often bullied someone at school:	daily/weekly	4.5
	monthly or less	19.5
	never	76.0
Method you bullied others the most:	physical attacks	1.4
	verbal attacks	23.3
	theft/vandalism	†
	did not bully	74.9
GRADE 7		(497)
Often you've been bullied at school:	daily/weekly	14.7
	monthly or less	30.2
	never	55.0
Method you were bullied the most:	physical attacks	8.2

		2003
		%
	verbal attacks	35.2
	theft/vandalism	3.6
	was not bullied	52.9
Often bullied someone at school:	daily/weekly	6.2
	monthly or less	24.8
	never	69.0
Method you bullied others the most:	physical attacks	4.3
	verbal attacks	27.1
	theft/vandalism	†
	did not bully	68.3
GRADE 8		(512)
Often you've been bullied at school:	daily/weekly	10.9
	monthly or less	25.6
	never	63.4
Method you were bullied the most:	physical attacks	5.9
	verbal attacks	29.2
	theft/vandalism	3.6
	was not bullied	61.3
Often bullied someone at school:	daily/weekly	8.2
	monthly or less	22.6
	never	69.1
Method you bullied others the most:	physical attacks	5.2
	verbal attacks	26.3
	theft/vandalism	0.7
	did not bully	67.8
GRADE 9		(654)
Often you've been bullied at school:	daily/weekly	6.8
	monthly or less	22.6
	never	70.6
Method you were bullied the most:	physical attacks	4.2
	verbal attacks	25.8
	theft/vandalism	2.8
	was not bullied	67.2
Often bullied someone at school:	daily/weekly	6.7
	monthly or less	25.7
	never	67.6
Method you bullied others the most:	physical attacks	3.6
	verbal attacks	28.0
	theft/vandalism	1.1
	did not bully	67.3
GRADE 10		(622)
Often you've been bullied at school:	daily/weekly	8.0
	monthly or less	20.5
	never	71.5
Method you were bullied the most:	physical attacks	2.4
	verbal attacks	28.2
	theft/vandalism	1.9
	was not bullied	67.4
Often bullied someone at school:	daily/weekly	5.9
	monthly or less	24.5
	never	69.6
Method you bullied others the most:	physical attacks	3.2

		2003
		%
	verbal attacks	25.2
	theft/vandalism	2.2
	did not bully	69.5
GRADE 11		(620)
Often you've been bullied at school:	daily/weekly	5.1
	monthly or less	18.8
	never	76.1
Method you were bullied the most:	physical attacks	2.8
	verbal attacks	24.7
	theft/vandalism	1.2
	was not bullied	71.3
Often bullied someone at school:	daily/weekly	8.5
	monthly or less	21.4
	never	70.1
Method you bullied others the most:	physical attacks	3.6
	verbal attacks	25.0
	theft/vandalism	0.7
	did not bully	70.6
GRADE 12		(559)
Often you've been bullied at school:	daily/weekly	2.3
	monthly or less	13.2
	never	84.5
Method you were bullied the most:	physical attacks	1.0
	verbal attacks	17.4
	theft/vandalism	1.4
	was not bullied	80.2
Often bullied someone at school:	daily/weekly	6.3
	monthly or less	16.2
	never	77.5
Method you bullied others the most:	physical attacks	3.6
	verbal attacks	17.8
	theft/vandalism	0.7
	did not bully	77.9
TORONTO		(548)
Often you've been bullied at school:	daily/weekly	4.5
	monthly or less	16.6
	never	78.9
Method you were bullied the most:	physical attacks	2.2
	verbal attacks	20.7
	theft/vandalism	1.8
	was not bullied	75.2
Often bullied someone at school:	daily/weekly	5.7
	monthly or less	14.7
	never	79.6
Method you bullied others the most:	physical attacks	3.1
	verbal attacks	17.6
	theft/vandalism	1.2
	did not bully	78.0
NORTH REGION		(746)
Often you've been bullied at school:	daily/weekly	9.3
	monthly or less	25.7
	never	65.0

		2003
		%
Method you were bullied the most:	physical attacks	4.4
	verbal attacks	29.5
	theft/vandalism	4.2
	was not bullied	61.9
Often bullied someone at school:	daily/weekly	7.4
	monthly or less	27.9
	never	64.7
Method you bullied others the most:	physical attacks	4.9
	verbal attacks	29.4
	theft/vandalism	1.8
	did not bully	64.0
WEST REGION		(1259)
Often you've been bullied at school:	daily/weekly	8.7
	monthly or less	21.6
	never	69.7
Method you were bullied the most:	physical attacks	5.2
	verbal attacks	25.4
	theft/vandalism	2.8
	was not bullied	66.7
Often bullied someone at school:	daily/weekly	7.2
	monthly or less	24.1
	never	68.7
Method you bullied others the most:	physical attacks	3.5
	verbal attacks	26.1
	theft/vandalism	1.0
	did not bully	69.3
EAST REGION		(911)
Often you've been bullied at school:	daily/weekly	7.6
	monthly or less	22.9
	never	69.5
Method you were bullied the most:	physical attacks	2.9
	verbal attacks	30.5
	theft/vandalism	1.5
	was not bullied	65.1
Often bullied someone at school:	daily/weekly	7.3
	monthly or less	23.4
	never	69.3
Method you bullied others the most:	physical attacks	4.5
	verbal attacks	26.1
	theft/vandalism	0.5
	did not bully	68.9

Notes: (1) numbers in parentheses are the number of interviews; (2) data based on a random half sample.

Qs: *Bullying is when one or more people tease, hurt or upset a weaker person on purpose: Since September, how often have you been bullied at school? Since September, how often have you taken part in bullying other students at school? In what way were you bullied the most at school?" and "In what way did you bully other students the most at school?"*

Source: OSDUS, Centre for Addiction and Mental Health

Table A3.6.4 Gambling Activities During the Past 12 Months, 2001– 2003, Grades 7 to 12

		2001	2003
		%	%
TOTAL	(N=)	(2061)	(3464)
Cards		24.9	24.0
Bingo		11.6	9.9
Sports Pools		22.3	20.3
Sports Lottery Tickets		9.9	7.8
Other Lottery Tickets		22.1	22.4
Video Gambling Machines		6.8	6.7
Casino in Ontario		1.7	1.7
Internet Gambling		—	2.5
Dice		—	12.7
Other ways		—	27.1
5+ Gambling Activities (95% CI)		—	6.1 (5.0-7.4)
MALES		(1018)	(1654)
Cards		35.4	32.1
Bingo		12.5	9.5
Sports Pools		38.1	32.7
Sports Lottery Tickets		16.3	13.7
Other Lottery Tickets		23.2	20.4
Video Gambling Machines		8.1	8.9
Casino in Ontario		2.6	2.5
Internet Gambling		—	3.4
Dice		—	19.1
Other ways		—	32.9
5+ Gambling Activities (95% CI)		—	9.6 (7.9-11.6)
FEMALES		(1043)	(1810)
Cards		14.8	16.7
Bingo		10.6	10.2
Sports Pools		7.3	9.1
Sports Lottery Tickets		3.8	2.4
Other Lottery Tickets		21.0	24.2
Video Gambling Machines		5.7	4.7
Casino in Ontario		0.8	1.0
Internet Gambling		—	1.6
Dice		—	7.0
Other ways		—	21.9
5+ Gambling Activities (95% CI)		—	3.0 (2.0-4.2)
GRADE 7		(404)	(497)
Cards		17.1	19.1
Bingo		8.9	10.3
Sports Pools		10.1	15.8
Sports Lottery Tickets		3.8	4.8
Other Lottery Tickets		13.8	13.6
Video Gambling Machines		3.1	7.2
Casino in Ontario		†	1.0
Internet Gambling		—	3.4
Dice		—	9.7
Other ways		—	27.7
5+ Gambling Activities (95% CI)		—	5.8 (3.5-10.2)
GRADE 8		(379)	(512)

	2001	2003
	%	%
Cards	24.3	20.0
Bingo	11.6	10.0
Sports Pools	15.5	14.2
Sports Lottery Tickets	7.9	3.8
Other Lottery Tickets	16.2	14.9
Video Gambling Machines	4.8	6.8
Casino in Ontario	0.6	1.6
Internet Gambling	—	2.9
Dice	—	8.3
Other ways	—	28.9
5+ Gambling Activities (95% CI)	—	4.5 (2.5-8.2)
GRADE 9	(368)	(654)
Cards	24.2	24.1
Bingo	13.7	9.6
Sports Pools	27.0	23.6
Sports Lottery Tickets	9.4	7.0
Other Lottery Tickets	18.7	15.9
Video Gambling Machines	5.1	5.3
Casino in Ontario	1.2	0.6
Internet Gambling	—	3.5
Dice	—	16.7
Other ways	—	31.2
5+ Gambling Activities (95% CI)	—	5.9 (3.8-9.0)
GRADE 10	(422)	(622)
Cards	29.6	25.3
Bingo	11.3	9.8
Sports Pools	28.7	24.1
Sports Lottery Tickets	10.0	6.9
Other Lottery Tickets	23.4	18.2
Video Gambling Machines	10.4	6.6
Casino in Ontario	1.4	1.2
Internet Gambling	—	3.3
Dice	—	12.3
Other ways	—	26.9
5+ Gambling Activities (95% CI)	—	4.8 (3.0-7.6)
GRADE 11	(288)	(620)
Cards	28.4	27.0
Bingo	9.7	9.5
Sports Pools	23.1	20.5
Sports Lottery Tickets	12.8	9.6
Other Lottery Tickets	27.8	28.9
Video Gambling Machines	7.8	5.2
Casino in Ontario	1.6	1.4
Internet Gambling	—	1.0
Dice	—	14.7
Other ways	—	26.8
5+ Gambling Activities (95% CI)	—	7.2 (5.1-10.3)
GRADE 12	(200)	(559)
Cards	25.0	26.6
Bingo	14.7	10.3
Sports Pools	28.7	21.3

	2001	2003
	%	%
Sports Lottery Tickets	19.3	13.8
Other Lottery Tickets	40.3	40.5
Video Gambling Machines	10.9	9.4
Casino in Ontario	7.8	4.5
Internet Gambling	—	1.1
Dice	—	12.8
Other ways	—	21.2
5+ Gambling Activities (95% CI)	—	7.9 (5.4-11.5)
TORONTO	(267)	(548)
Cards	17.8	22.4
Bingo	8.7	8.3
Sports Pools	23.4	16.9
Sports Lottery Tickets	12.1	8.7
Other Lottery Tickets	18.6	19.0
Video Gambling Machines	5.2	7.9
Casino in Ontario	1.1	1.8
Internet Gambling	—	1.9
Dice	—	18.6
Other ways	—	28.3
5+ Gambling Activities (95% CI)	—	5.6 (3.6-8.5)
NORTH REGION	(599)	(746)
Cards	30.1	24.2
Bingo	17.8	12.2
Sports Pools	19.8	17.0
Sports Lottery Tickets	9.4	8.0
Other Lottery Tickets	25.5	27.8
Video Gambling Machines	10.5	8.1
Casino in Ontario	3.1	1.0
Internet Gambling	—	2.7
Dice	—	9.0
Other ways	—	27.1
5+ Gambling Activities (95% CI)	—	6.2 (4.0-9.3)
WEST REGION	(718)	(1259)
Cards	26.4	22.8
Bingo	11.7	8.9
Sports Pools	21.1	20.4
Sports Lottery Tickets	9.4	6.9
Other Lottery Tickets	22.1	22.2
Video Gambling Machines	6.9	5.3
Casino in Ontario	1.7	1.2
Internet Gambling	—	2.4
Dice	—	11.5
Other ways	—	26.2
5+ Gambling Activities (95% CI)	—	5.8 (4.4-7.6)
EAST REGION	(477)	(911)
Cards	25.7	26.6
Bingo	11.1	11.6
Sports Pools	24.3	22.9
Sports Lottery Tickets	9.1	8.5
Other Lottery Tickets	23.3	23.0
Video Gambling Machines	6.6	7.5

	2001	2003
	%	%
Casino in Ontario	1.7	2.5
Internet Gambling	—	2.9
Dice	—	12.1
Other ways	—	27.8
5+ Gambling Activities (95% CI)	—	6.8 (4.6-10.0)

Notes: (1) Numbers in parentheses are the number of interviews; (2) percentages are reports of engaging in the activity at least once in the past 12 months; (3) † indicates estimate suppressed, <.0.5%; (4) based on a random half sample in each year.

Qs: *How often in the last 12 months have you done each of the following: Played cards for money?; Played bingo for money?; Bet money on sports pools?; Bought sports lottery tickets (such as Sports Select or Proline)?; Bought any other lottery tickets including instant lottery (such as 6-49, Scratch & Win, pull-tabs)?; Bet money on video gambling machines, slot machines, or any other gambling machines?; Bet money at a casino in Ontario?; Bet money over the Internet?; Played dice for money?; Bet money in other ways?*

Source: OSDUS, Centre for Addiction and Mental Health

Table A3.6.5 Problem Gambling Indicators (Past 12 Months), 1999 – 2003, Grades 7-12

South Oaks Gambling Screen (SOGS-RA)	1999	2001	2003
	% “yes”	% “yes”	% “yes”
TOTAL (N=)	(2148)	(2061)	(3464)
often gone back another day to try to win back the money you lost ¹	8.0	4.4	5.6
told others you were winning money when you really were not	5.7	3.3	3.5
betting caused any problems such as arguments with family/friends, problems at school/work?	6.2	3.8	2.7
gambled more than you had planned to	9.1	4.7	6.2
anyone criticized your betting or told you that you had a gambling problem, regardless of whether you thought it was true	4.1	1.7	2.4
felt bad about the amount you bet, or about what happens when you bet money	11.9	5.6	5.4
felt that you would like to stop betting money but did not think you could	7.5	3.8	2.9
hidden betting slips, IOUs, lottery tickets, money that you won, or other signs of gambling from family/friends	4.5	2.9	2.7
had arguments with family/friends because of the money you spend on gambling	3.7	2.4	1.3
borrowed money to bet and not paid it back	5.4	3.3	3.9
skipped or been absent from school or work due to betting activities	3.5	1.8	1.7
borrowed money/stolen something in order to bet or to cover gambling debts	3.1	1.9	1.6
% with Any Gambling Problem (95% CI)	13.6 (12.0-15.3)	8.3 (6.7-10.2)	8.4* (7.2-9.8)
% with Pathological Gambling Problem (95% CI)	6.2 (5.0-7.7)	2.4 (1.8-3.3)	3.5* (2.7-4.4)
MALES	(1101)	(1018)	(1654)
often gone back another day to try to win back the money you lost	12.8	7.4	9.8
told others you were winning money when you really were not	8.6	4.9	4.8
betting caused any problems such as arguments with family/friends, problems at school/work?	8.4	5.6	4.0
gambled more than you had planned to	14.4	8.4	10.3
anyone criticized your betting or told you that you had a gambling problem, regardless of whether you thought it was true	6.3	2.9	4.4
felt bad about the amount you bet, or about what happens when you bet money	16.6	8.4	7.9
felt that you would like to stop betting money but did not think you could	10.5	5.2	4.7
hidden betting slips, IOUs, lottery tickets, money that you won, or other signs of gambling from family/friends	7.1	5.5	4.3
had arguments with family/friends because of the money you spend on gambling	6.0	4.0	1.9
borrowed money to bet and not paid it back	7.1	4.2	5.3
skipped or been absent from school or work due to betting activities	5.6	2.8	2.7
borrowed money/stolen something in order to bet or to cover gambling debts	5.4	3.0	2.8
% with Any Gambling Problem (95% CI)	20.9 (18.5-23.5)	13.1 (10.6-16.1)	13.0 (11.1-15.2)
% with Pathological Gambling Problem (95% CI)	9.6 (7.7-12.0)	4.3 (3.1-5.8)	6.0 (4.7-7.7)
FEMALES	(1047)	(1043)	(1810)
often gone back another day to try to win back the money you lost	3.1	1.3	1.8
told others you were winning money when you really were not	2.7	1.6	2.3
betting caused any problems such as arguments with family/friends, problems at school/work?	3.9	2.0	1.5
gambled more than you had planned to	3.7	1.1	2.5
anyone criticized your betting or told you that you had a gambling problem, regardless of whether you thought it was true	1.8	0.5	0.7
felt bad about the amount you bet, or about what happens when you bet money	6.9	3.0	3.1
felt that you would like to stop betting money but did not think you could	4.4	2.4	1.3
hidden betting slips, IOUs, lottery tickets, money that you won, or other signs of gambling from family/friends	1.8	†	1.2
had arguments with family/friends because of the money you spend on gambling	1.2	0.8	0.8
borrowed money to bet and not paid it back	3.7	2.4	2.7
skipped or been absent from school or work due to betting activities	1.4	0.9	0.8
borrowed money/stolen something in order to bet or to cover gambling debts	0.6	0.8	†
% with Any Gambling Problem (95% CI)	6.1 (4.6-8.1)	3.6 (2.4-5.2)	4.3 (3.3-5.6)

South Oaks Gambling Screen (SOGS-RA)	1999	2001	2003
	% "yes"	% "yes"	% "yes"
% with Pathological Gambling Problem (95% CI)	2.7 (1.7-4.3)	0.6 (0.3-1.3)	1.1 (0.7-1.9)
GRADE 7	(369)	(404)	(497)
often gone back another day to try to win back the money you lost	5.2	2.7	3.8
told others you were winning money when you really were not	5.7	3.1	4.2
betting caused any problems such as arguments with family/friends, problems at school/work?	4.4	4.0	2.7
gambled more than you had planned to	3.5	2.8	4.9
anyone criticized your betting or told you that you had a gambling problem, regardless of whether you thought it was true	1.3	1.3	1.2
felt bad about the amount you bet, or about what happens when you bet money	11.2	3.6	3.3
felt that you would like to stop betting money but did not think you could	8.5	6.3	2.6
hidden betting slips, IOUs, lottery tickets, money that you won, or other signs of gambling from family/friends	2.9	1.1	2.4
had arguments with family/friends because of the money you spend on gambling	2.6	1.1	1.5
borrowed money to bet and not paid it back	5.6	2.2	4.0
skipped or been absent from school or work due to betting activities	2.3	1.6	1.1
borrowed money/stolen something in order to bet or to cover gambling debts	1.5	1.6	1.5
% with Any Gambling Problem (95% CI)	11.3 (8.4-15.0)	6.8 (4.6-9.8)	7.6 (4.9-11.6)
% with Pathological Gambling Problem (95% CI)	2.5 (1.3-5.0)	1.7 (0.7-3.9)	2.4 (1.2-4.9)
GRADE 8	(391)	(379)	(512)
often gone back another day to try to win back the money you lost	7.4	3.2	3.3
told others you were winning money when you really were not	7.4	2.1	2.7
betting caused any problems such as arguments with family/friends, problems at school/work?	4.6	2.4	2.5
gambled more than you had planned to	7.7	2.5	4.5
anyone criticized your betting or told you that you had a gambling problem, regardless of whether you thought it was true	3.3	1.4	1.1
felt bad about the amount you bet, or about what happens when you bet money	11.4	4.4	2.1
felt that you would like to stop betting money but did not think you could	7.7	3.2	2.9
hidden betting slips, IOUs, lottery tickets, money that you won, or other signs of gambling from family/friends	5.0	2.8	1.3
had arguments with family/friends because of the money you spend on gambling	2.0	1.2	1.3
borrowed money to bet and not paid it back	4.2	6.0	4.2
skipped or been absent from school or work due to betting activities	2.5	1.2	1.3
borrowed money/stolen something in order to bet or to cover gambling debts	2.8	2.5	1.0
% with Any Gambling Problem (95% CI)	11.3 (8.3-15.0)	6.6 (4.0-10.7)	4.3 (2.6-7.1)
% with Pathological Gambling Problem (95% CI)	5.7 (3.6-9.0)	1.9 (0.9-3.9)	2.0 (0.8-4.8)
GRADE 9	(442)	(368)	(654)
often gone back another day to try to win back the money you lost	5.4	5.6	6.4
told others you were winning money when you really were not	4.6	4.3	3.5
betting caused any problems such as arguments with family/friends, problems at school/work?	9.6	4.3	2.8
gambled more than you had planned to	10.0	4.1	6.5
anyone criticized your betting or told you that you had a gambling problem, regardless of whether you thought it was true	4.5	1.3	2.0
felt bad about the amount you bet, or about what happens when you bet money	11.3	6.0	5.5
felt that you would like to stop betting money but did not think you could	8.1	7.3	3.3
hidden betting slips, IOUs, lottery tickets, money that you won, or other signs of gambling from family/friends	4.7	3.9	2.0
had arguments with family/friends because of the money you spend on gambling	3.3	2.8	0.9
borrowed money to bet and not paid it back	7.1	2.8	4.9
skipped or been absent from school or work due to betting activities	3.5	2.7	1.8
borrowed money/stolen something in order to bet or to cover gambling debts	4.1	2.0	1.4
% with Any Gambling Problem (95% CI)	14.4 (11.5-18.0)	9.0 (6.1-13.0)	9.7 (7.5-12.4)
% with Pathological Gambling Problem (95% CI)	7.2 (4.7-10.8)	3.3 (1.8-6.1)	3.0 (1.9-4.8)
GRADE 10	(296)	(422)	(622)

South Oaks Gambling Screen (SOGS-RA)	1999	2001	2003
	% "yes"	% "yes"	% "yes"
often gone back another day to try to win back the money you lost	12.8	4.1	6.4
told others you were winning money when you really were not	6.8	4.0	4.5
betting caused any problems such as arguments with family/friends, problems at school/work?	7.7	5.3	3.4
gambled more than you had planned to	10.9	6.6	5.6
anyone criticized your betting or told you that you had a gambling problem, regardless of whether you thought it was true	4.5	2.3	3.0
felt bad about the amount you bet, or about what happens when you bet money	12.4	6.4	7.2
felt that you would like to stop betting money but did not think you could	6.8	1.7	3.1
hidden betting slips, IOUs, lottery tickets, money that you won, or other signs of gambling from family/friends	3.2	2.9	3.5
had arguments with family/friends because of the money you spend on gambling	4.2	2.7	0.9
borrowed money to bet and not paid it back	6.5	3.0	3.3
skipped or been absent from school or work due to betting activities	3.8	1.9	1.5
borrowed money/stolen something in order to bet or to cover gambling debts	1.7	1.8	1.6
% with Any Gambling Problem (95% CI)	17.4 (11.7-25.0)	9.7 (5.9-15.4)	9.6 (7.5-12.4)
% with Pathological Gambling Problem (95% CI)	7.1 (4.0-12.5)	2.6 (1.4-5.0)	4.2 (2.6-6.8)
GRADE 11	(357)	(288)	(620)
often gone back another day to try to win back the money you lost	8.8	5.8	6.1
told others you were winning money when you really were not	5.6	2.6	2.6
betting caused any problems such as arguments with family/friends, problems at school/work?	5.6	2.9	1.5
gambled more than you had planned to	11.5	5.8	6.8
anyone criticized your betting or told you that you had a gambling problem, regardless of whether you thought it was true	5.4	2.2	2.6
felt bad about the amount you bet, or about what happens when you bet money	11.0	6.7	6.0
felt that you would like to stop betting money but did not think you could	7.5	2.4	1.6
hidden betting slips, IOUs, lottery tickets, money that you won, or other signs of gambling from family/friends	6.2	3.2	3.2
had arguments with family/friends because of the money you spend on gambling	5.2	3.0	1.2
borrowed money to bet and not paid it back	5.8	2.5	4.2
skipped or been absent from school or work due to betting activities	4.8	1.8	2.2
borrowed money/stolen something in order to bet or to cover gambling debts	4.2	1.8	2.0
% with Any Gambling Problem (95% CI)	13.8 (10.3-18.2)	8.0 (3.5-17.6)	8.8 (6.5-11.7)
% with Pathological Gambling Problem (95% CI)	7.8 (5.0-12.1)	2.6 (0.9-7.3)	3.7 (2.2-6.1)
GRADE 12	(293)	(200)	(559)
often gone back another day to try to win back the money you lost	10.3	4.7	6.8
told others you were winning money when you really were not	4.4	2.7	3.5
betting caused any problems such as arguments with family/friends, problems at school/work?	3.9	2.6	3.2
gambled more than you had planned to	10.7	6.7	8.3
anyone criticized your betting or told you that you had a gambling problem, regardless of whether you thought it was true	5.1	2.0	4.2
felt bad about the amount you bet, or about what happens when you bet money	14.8	6.9	7.1
felt that you would like to stop betting money but did not think you could	6.0	†	3.9
hidden betting slips, IOUs, lottery tickets, money that you won, or other signs of gambling from family/friends	4.0	3.1	3.2
had arguments with family/friends because of the money you spend on gambling	4.9	3.5	2.2
borrowed money to bet and not paid it back	2.6	4.2	3.0
skipped or been absent from school or work due to betting activities	4.2	1.2	2.2
borrowed money/stolen something in order to bet or to cover gambling debts	3.2	1.9	1.8
% with Any Gambling Problem (95% CI)	13.8 (9.4-20.0)	9.3 (4.9-17.0)	9.6 (7.2-12.9)
% with Pathological Gambling Problem (95% CI)	6.4 (3.7-10.7)	2.1 (0.6-6.9)	5.0 (3.2-7.6)
TORONTO	(369)	(267)	(548)
often gone back another day to try to win back the money you lost	6.2	4.0	5.4
told others you were winning money when you really were not	9.1	4.7	4.0

South Oaks Gambling Screen (SOGS-RA)	1999	2001	2003
	% "yes"	% "yes"	% "yes"
betting caused any problems such as arguments with family/friends, problems at school/work?	8.1	4.2	2.8
gambled more than you had planned to	11.0	5.1	7.8
anyone criticized your betting or told you that you had a gambling problem, regardless of whether you thought it was true	4.9	2.1	2.2
felt bad about the amount you bet, or about what happens when you bet money	16.3	6.5	6.0
felt that you would like to stop betting money but did not think you could	10.8	4.6	5.1
hidden betting slips, IOUs, lottery tickets, money that you won, or other signs of gambling from family/friends	6.3	5.7	2.8
had arguments with family/friends because of the money you spend on gambling	5.3	3.8	1.2
borrowed money to bet and not paid it back	6.0	2.6	4.4
skipped or been absent from school or work due to betting activities	2.9	1.4	2.0
borrowed money/stolen something in order to bet or to cover gambling debts	3.6	3.1	2.1
% with Any Gambling Problem (95% CI)	16.4 (12.6-21.0)	10.6 (6.2-17.3)	10.0 (7.6-13.1)
% with Pathological Gambling Problem (95% CI)	9.1 (6.2-13.3)	3.5 (1.9-6.3)	3.8 (2.3-6.0)
NORTH REGION	(384)	(599)	(746)
often gone back another day to try to win back the money you lost	8.4	4.5	5.0
told others you were winning money when you really were not	7.0	3.4	3.0
betting caused any problems such as arguments with family/friends, problems at school/work?	5.8	2.8	3.3
gambled more than you had planned to	8.9	5.9	5.0
anyone criticized your betting or told you that you had a gambling problem, regardless of whether you thought it was true	4.7	2.6	1.5
felt bad about the amount you bet, or about what happens when you bet money	9.9	5.6	3.8
felt that you would like to stop betting money but did not think you could	6.0	3.1	1.7
hidden betting slips, IOUs, lottery tickets, money that you won, or other signs of gambling from family/friends	3.8	2.8	2.7
had arguments with family/friends because of the money you spend on gambling	4.3	2.4	1.5
borrowed money to bet and not paid it back	5.3	3.3	3.1
skipped or been absent from school or work due to betting activities	3.0	3.1	2.2
borrowed money/stolen something in order to bet or to cover gambling debts	3.3	3.1	1.8
% with Any Gambling Problem (95% CI)	12.5 (8.5-17.9)	8.5 (5.3-13.3)	6.9 (4.9-9.6)
% with Pathological Gambling Problem (95% CI)	6.8 (4.2-11.0)	3.8 (2.0-7.0)	2.4 (1.3-4.4)
WEST REGION	(763)	(718)	(1259)
often gone back another day to try to win back the money you lost	9.2	4.9	6.0
told others you were winning money when you really were not	4.3	3.8	3.1
betting caused any problems such as arguments with family/friends, problems at school/work?	5.4	3.5	2.9
gambled more than you had planned to	9.0	5.0	5.8
anyone criticized your betting or told you that you had a gambling problem, regardless of whether you thought it was true	3.4	1.7	2.5
felt bad about the amount you bet, or about what happens when you bet money	11.4	5.9	5.6
felt that you would like to stop betting money but did not think you could	8.4	4.1	2.5
hidden betting slips, IOUs, lottery tickets, money that you won, or other signs of gambling from family/friends	4.1	2.6	2.7
had arguments with family/friends because of the money you spend on gambling	2.8	2.3	1.0
borrowed money to bet and not paid it back	6.6	3.6	4.4
skipped or been absent from school or work due to betting activities	4.3	2.0	1.6
borrowed money/stolen something in order to bet or to cover gambling debts	3.0	1.2	1.4
% with Any Gambling Problem (95% CI)	14.1 (11.6-17.0)	8.4 (6.0-11.7)	8.3 (6.4-10.6)
% with Pathological Gambling Problem (95% CI)	5.7 (3.8-8.4)	2.5 (1.6-4.1)	3.6 (2.5-5.3)
EAST REGION	(632)	(477)	(911)
often gone back another day to try to win back the money you lost	7.2	3.9	5.4
told others you were winning money when you really were not	5.2	1.5	3.8
betting caused any problems such as arguments with family/friends, problems at school/work?	6.5	4.3	2.1
gambled more than you had planned to	8.3	3.6	6.1

South Oaks Gambling Screen (SOGS-RA)	1999	2001	2003
	% “yes”	% “yes”	% “yes”
anyone criticized your betting or told you that you had a gambling problem, regardless of whether you thought it was true	4.5	1.3	2.7
felt bad about the amount you bet, or about what happens when you bet money	10.5	4.8	5.3
felt that you would like to stop betting money but did not think you could	4.6	3.1	2.4
hidden betting slips, IOUs, lottery tickets, money that you won, or other signs of gambling from family/friends	4.0	1.3	2.5
had arguments with family/friends because of the money you spend on gambling	3.8	1.5	1.8
borrowed money to bet and not paid it back	3.4	3.4	3.3
skipped or been absent from school or work due to betting activities	2.9	1.4	1.6
borrowed money/stolen something in order to bet or to cover gambling debts	2.8	1.6	1.3
% with Any Gambling Problem (95% CI)	11.6 (9.3-14.3)	6.4 (4.8-8.6)	8.1 (6.1-10.8)
% with Pathological Gambling Problem (95% CI)	5.1 (3.5-7.5)	1.1 (0.5-2.5)	3.3 (2.1-5.2)

¹ Percentage indicating gone back another day “every time” or “most of the time” to win back money.

Notes: (1) Numbers in parentheses are the number of interviews; (2) † indicates estimate suppressed, <.05%; (3) based on a random half sample in each year; (4) * 2003 vs. 1999 significant difference, p<.01.

Source: OSDUS, Centre for Addiction and Mental Health

Table A3.7.1: Co-Existing Problems: Psychological Distress, Alcohol, Drugs, And Delinquency, Grades 7 to 12 (N=3464)

	2003 %
None of the 4 problems	52%
Psychological Distress only	18%
Alcohol Problem only	4%
Drug Problem only	3%
Delinquent Behaviour only	2%
Psychological Distress + Alcohol Problem	2%
Psychological Distress + Drug Problem	2%
Psychological Distress + Delinquent Behaviour	2%
Alcohol Problem + Drug Problem	2%
Alcohol Problem + Delinquent Behaviour	1%
Drug Problem + Delinquent Behaviour	1%
Alcohol Problem + Drug Problem + Delinquent Behaviour	3%
Psychological Distress + Alcohol Problem + Drug Problem	2%
Psychological Distress + Delinquent Behaviour + Alcohol Problem	1%
Psychological Distress + Delinquent Behaviour + Drug Problem	1%
All 4 Problems	3%

Notes: (1) Psychological Distress is indicated by a score of 3 or more on the GHQ12 screener (see Chapter 3.5); (2) Alcohol Problem refers to hazardous drinking and is indicated by a score of 8 or more on the AUDIT screener; (3) Drug Problem is indicated by a score of 2 or more on the CRAFFT-D screener; (4) Delinquent Behaviour refers to reporting 3 or more delinquent acts, of 12 (see Chapter 3.6); (5) based on a random half sample.

Source: OSDUS, Centre for Addiction & Mental Health

Table A3.9.1: Description of the Logistic Analyses Tables in Chapter 3.9

Below is a brief discussion of the tabular material containing the results of the logistic regressions.

Table 3.9.4 High Risk for Depression: Unadjusted and Adjusted Group Differences

	%	95% CI	Unadjusted Odds Ratios	Adjusted Odds Ratios
Total Sample	5.6	(4.8-6.6)		
1) Sex			***	***
Male (Comparison Group)	2.6	(1.8-3.7)	—	—
Female	8.4	(7.0-10.0)	3.44	3.30
2) Grade (Comparison group is the previous grade)	①	②	③*	④*
7	4.0	(2.5-6.2)	—	—
8	8.1	(5.3-12.1)	2.13*	2.56*
9	4.2	(2.7-6.5)	0.50*	0.47*
10	5.7	(3.6-8.8)	1.38	1.16
11	7.3	(5.5-9.7)	1.31	1.60
12	4.6	(3.0-7.0)	0.61	0.56

① Percentage estimate: This column displays the estimated percentages by subgroup.

② Confidence interval: Displays the probable accuracy of the percentage estimate. The “true” population value would be expected within this range 95% of the time (in 95 of 100 samples). Confidence intervals account for characteristics of the sample design (e.g., design effects). For example, we see that 5.6% report depression. Thus, ignoring non-sampling errors, we can be reasonably confident that, with repeated sampling, the true percentage of students in the Ontario population with low self-esteem would fall within the interval 4.8% and 6.6%.

③ Unadjusted Odds Ratios: Displays the odds ratio of the outcome compared to the comparison group. Unadjusted odds ratios indicate the size of group comparisons when ignoring other factors. For example, the odds of feeling depressed among 9th-graders are 0.50 smaller than those of 8th-graders. Alternatively, one can say that the odds of depression among 9th-graders are 50% (1.00-0.50) lower than 8th-graders. *An epidemiological note is required*: as a general rule, odds ratios should not be interpreted as “risk ratios” unless the prevalence of a given health indicator is relatively low or uncommon (i.e., 10%-15%). In our case most of the prevalence estimates for the mental health and behaviour problems discussed in this report are low, with a few exceptions (e.g., 32% report illicit drug use). Therefore, for most of our outcomes, it is acceptable to interpret the odds ratios in terms of risk.

④ Adjusted Odds Ratio: Displays odds ratios after controlling for the other factors in the table. For example, accounting for all remaining factors, one can say that the odds of feeling depressed are 3.3 times higher among females than males.

Columns ③ and ④ also provide the results of an overall test of association (Wald) between each predictor variable and the predicted outcome variable, both not adjusting and adjusting for the remaining predictors. For example, the *** indicates that sex is statistically significantly related to depression. An “NS” (not shown here) indicates “non-significant” differences, and that in general the predictor variable is not statistically associated with the outcome.

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