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# **Snapshot of unmet mental health needs in the Maritimes during the COVID-19 pandemic**

Summary Findings

October 30, 2024

# Interprovincial research team

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## About this project

- Previous studies COVID-19 pandemic exacerbated gaps in our mental health care systems.<sup>1-4</sup>
- Undertook a follow-up study using Mental Health Research Canada survey data to investigate unmet mental health needs in the Maritimes during COVID-19.

An **unmet mental health need** describes when a person has a mental health need that is not being adequately treated.



## Research questions

1. How common were unmet mental health needs in the Maritimes during the COVID-19 pandemic? How does this compare to before the pandemic?
2. What sociodemographic factors were associated with unmet mental health needs in the Maritimes during the COVID-19 pandemic?
3. What were the mental health characteristics of people living in the Maritimes who had unmet mental health needs during the pandemic?
4. What were the mental health impacts of the COVID-19 pandemic on people living in the Maritimes who had unmet mental health needs?

# Methods at a glance

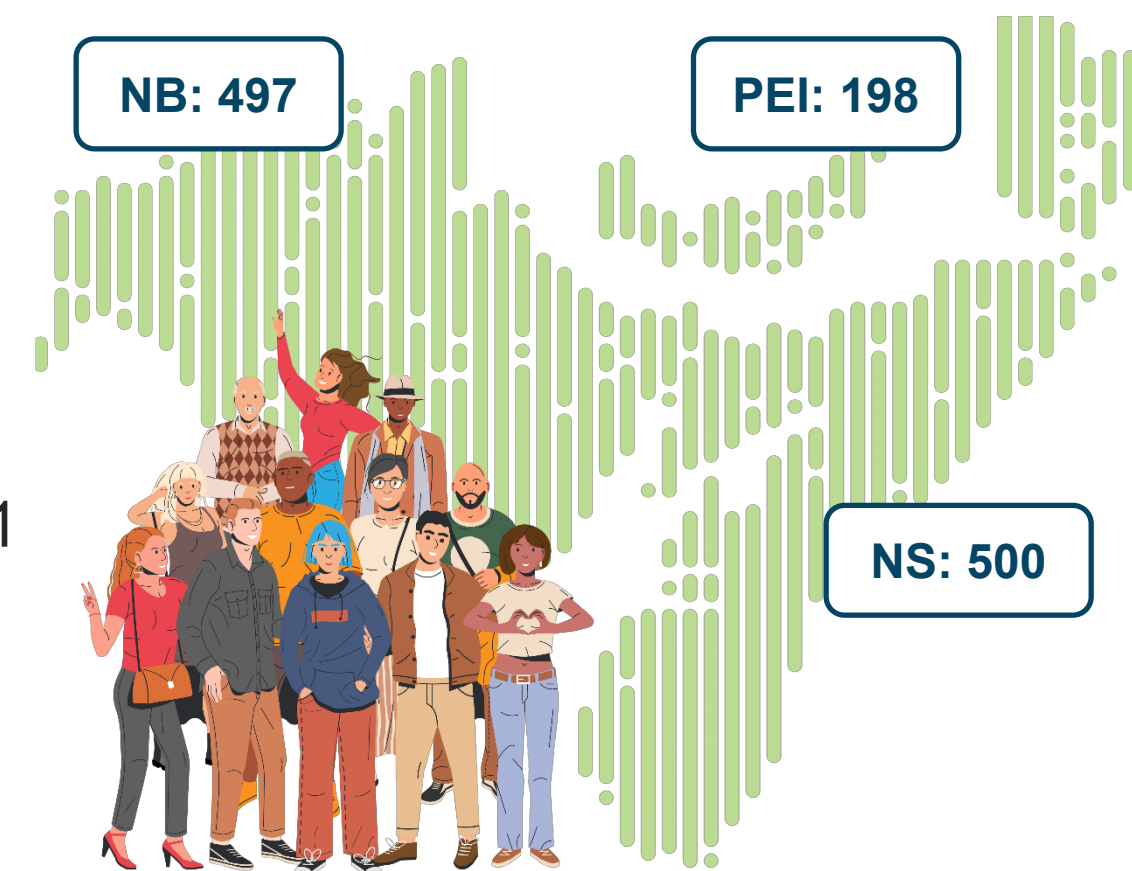
**Patient Engagement:** Co-developed with Patient/Public Partners from NS and NB

## Data source:

- Secondary analysis of survey data collected by Mental Health Research Canada from Maritimers aged 18+
- Data collected:
  - Nova Scotia (NS), Prince Edward Island (PEI) – Dec. 13-22, 2021 (*Poll 10*)
  - New Brunswick (NB) – Oct. 22-Nov. 3, 2021 (*Poll 9*)

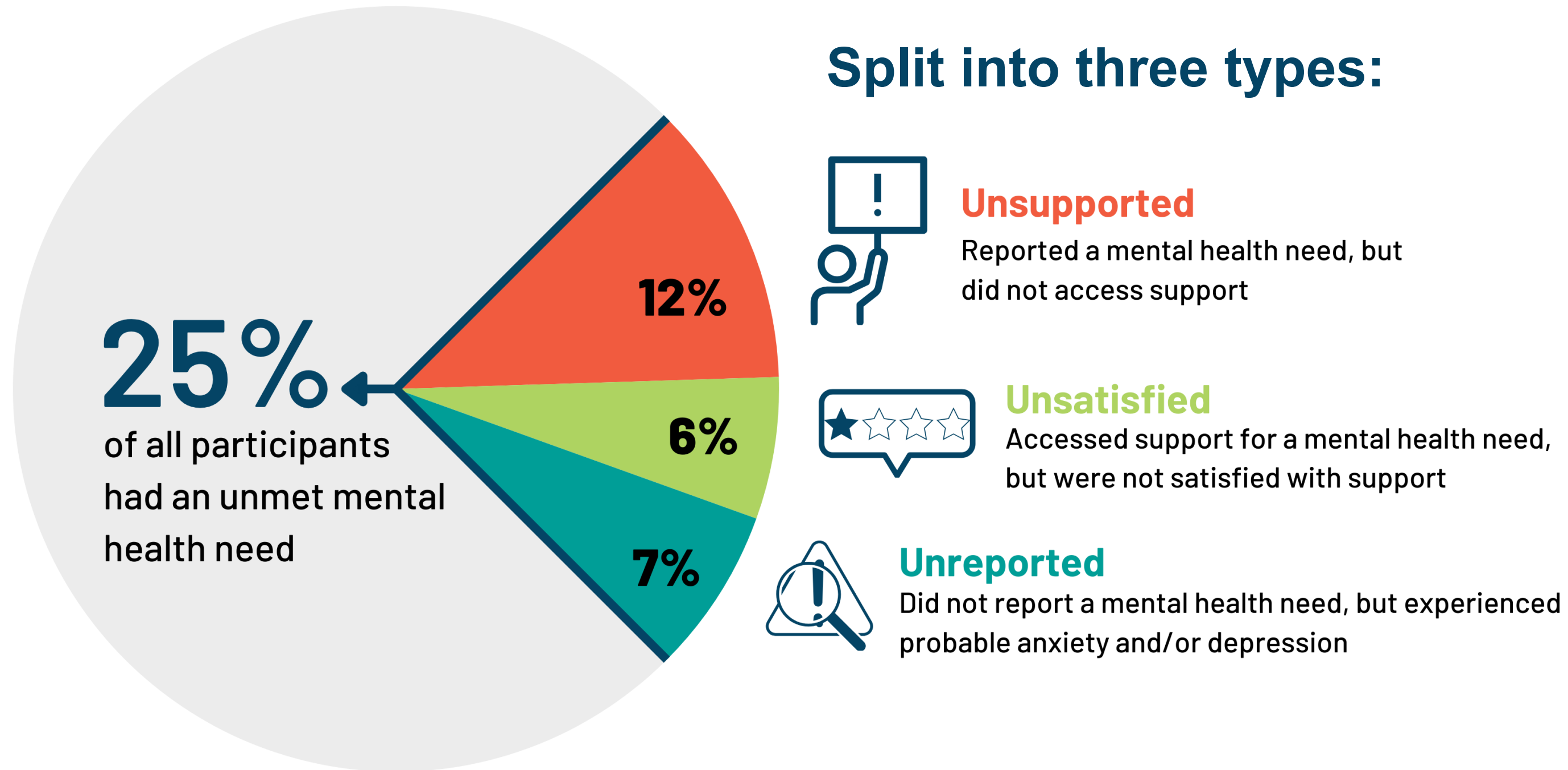
## Statistical Analysis:

- Data was weighted by the 2016 Canadian Census
- Descriptive statistics and chi-square analyses

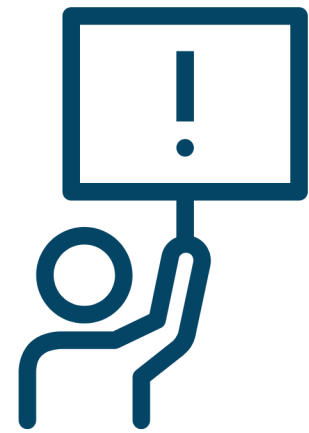


**n=1,195**

# Unmet mental health needs remained high during COVID-19



Weighted percentage of participants with unmet mental health needs

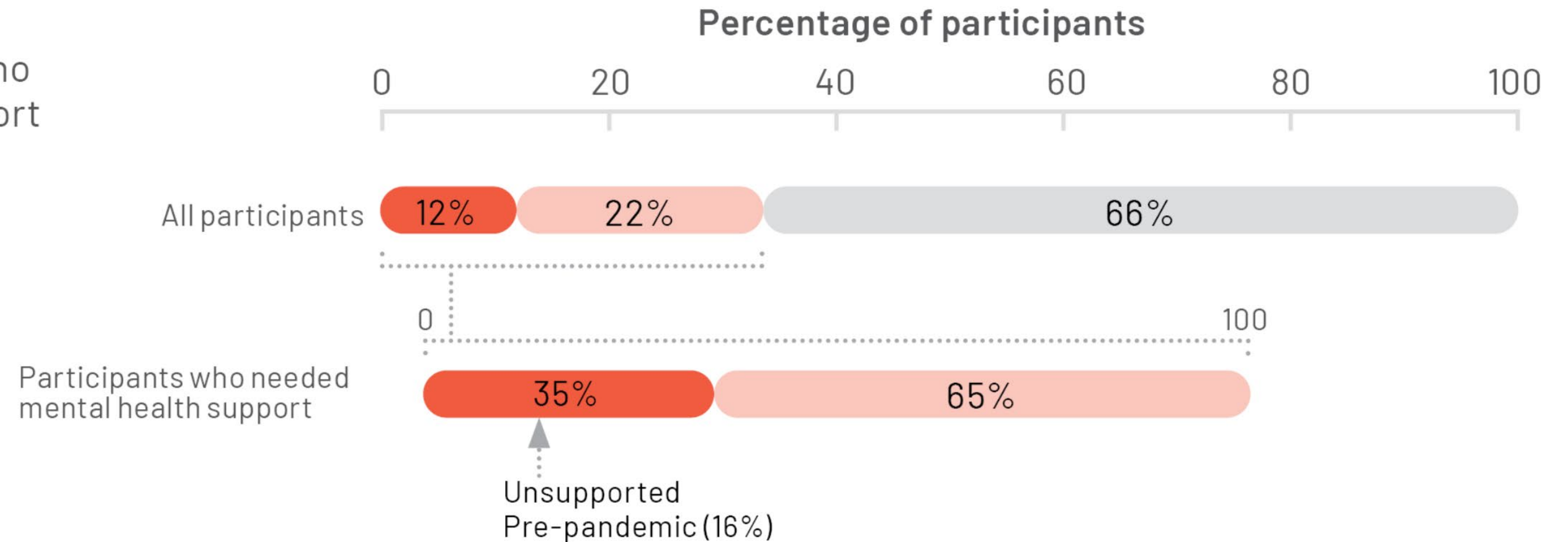


## Prevalence of **Unsupported** unmet mental health needs

Roughly a third of participants (35%) who reported needing mental health support did not access any – **up from 16% pre-pandemic**

**35%** of participants who needed mental health support did not receive any

- Unsupported
- Supported
- All others



# Who was more likely to be Unsupported?



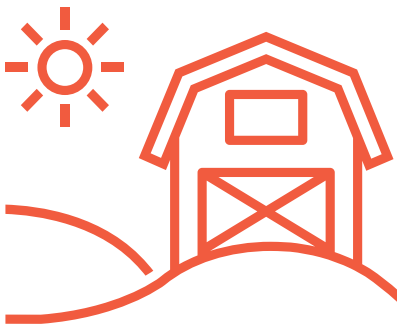
### Women

43% vs 25% in men,  $p < .01$



### People who lived alone

45%; more than double the percentage of those who lived with roommates (17%),  $p = .05$



### People living in rural areas

48% vs 31% in urban areas,  $p = .02$



# Reasons for not seeking help during COVID-19

- **Limited access** was a key barrier during the pandemic
- Fewer participants indicate a **preference to self-manage**
- **Cost** was a persistent and common barrier
- The percentage of people reporting several other reasons (*awareness about where to seek help, confidence*) increased during the pandemic

Select reasons for not accessing support	During pandemic (%)	Pre-pandemic (%)
<b>Access to care was limited</b>	<b>34</b>	<b>7</b>
<b>Couldn't afford to pay</b>	<b>32</b>	<b>32</b>
<b>Preferred to manage oneself</b>	<b>29</b>	<b>42</b>
<i>Didn't know how/where to access help</i>	16	11
<i>Didn't have confidence in the system</i>	14	7
<i>Concerned about exposure to COVID-19</i>	11	n/a

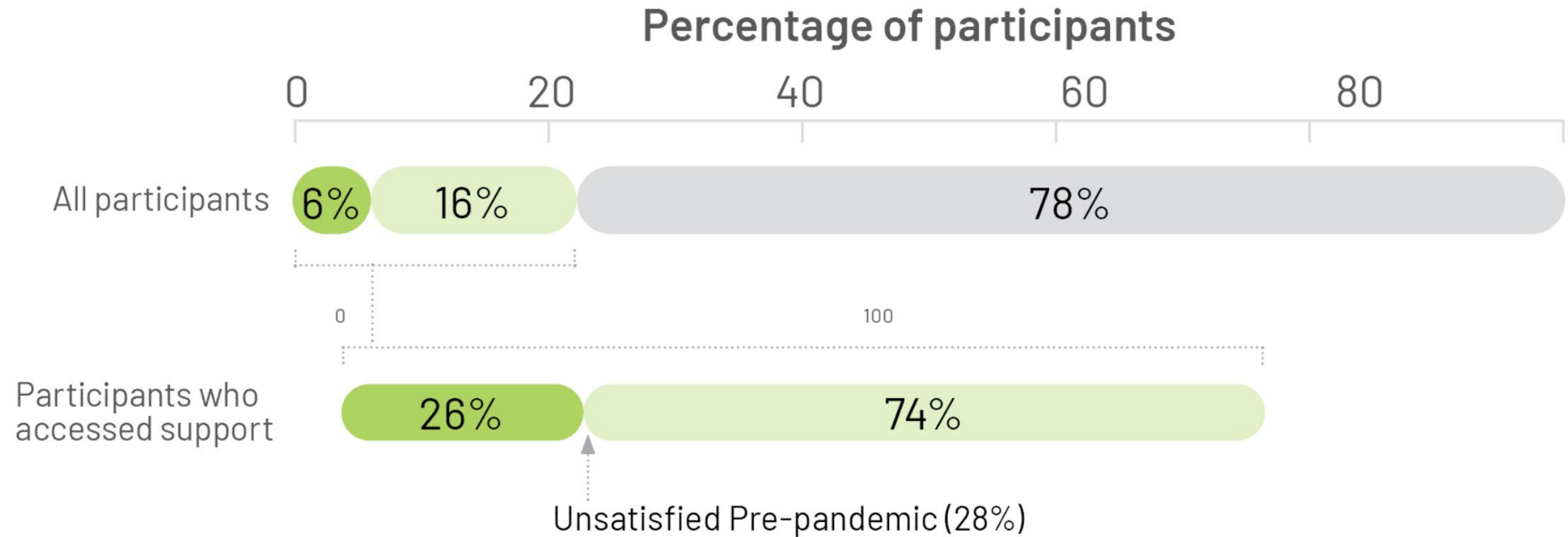


## Prevalence of **Unsatisfied** unmet mental health needs

Of those who accessed mental health support, roughly one in four were unsatisfied with the support they received—**similar to pre-pandemic levels**.

**26%** of participants who received mental health support were unsatisfied with the support they received

- Unsatisfied
- Satisfied
- All others



# Who was more likely to be Unsatisfied?



## Self-employed individuals

70%; more than three times greater than in those who worked part- (20%) or full-time (19%),  $p < .01$



## Without Medical Insurance

37% vs. 20% of those with coverage,  $p = .03$



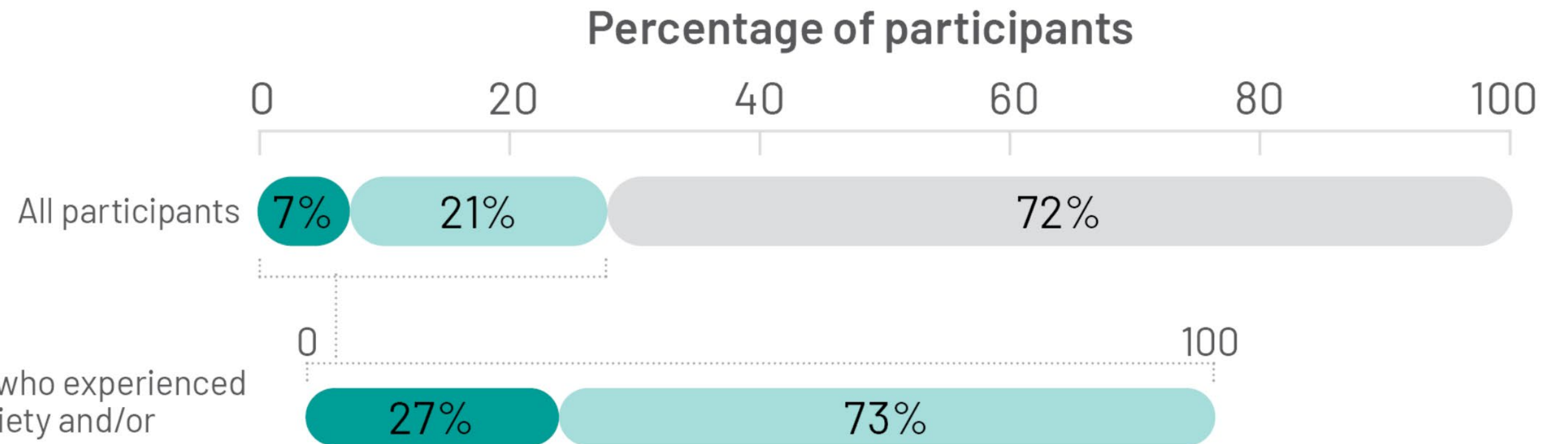
# Prevalence of **Unreported** unmet mental health needs

Nearly a third of participants who had probable anxiety and/or depression did not report needing mental health support.

**27%** of participants who experienced probable anxiety and/or depression did not report a mental health need

- Unreported
- Reported
- All others

Participants who experienced probable anxiety and/or depression



## Who was more likely to be Unreported?



### Lives with a partner or spouse only

41%, whereas the lowest was in those who live with roommates (11%),  $p = .04$



### Older age groups

50-69 (36%) and 70+ (41%), whereas those aged 40-49 (13%) were least likely,  $p < .01$

# Shifts in mental health needs, access, and satisfaction

- A large proportion of the **Unsupported group** also needed support prior to COVID-19 (85%), but more than half accessed care (62%).
- Many in the **Unsatisfied group** also needed support prior to the pandemic (88%), most received it (96%) and nearly half were satisfied with supports (44%).
- Roughly half of **Unreported group** recognized a need for support prior to COVID-19 (53%), with most accessing care (84%).

	UNSUPPORTED % (95% CI)	UNSATISFIED % (95% CI)	UNREPORTED % (95% CI)
<b>Needed support before COVID-19</b>			
Yes	85 (77,90)	88 (74,95)	53 (40,65)
No	15 (10,23)	12 (5,26)	47 (35,60)
<b>Accessed support before COVID-19 among those who needed support (71%)</b>			
Yes	62 (51,72)	96 (88,99)	84 (65,94)
No	38 (28,49)	4 (1,12)	16 (6,35)
<b>Satisfaction before COVID-19 among those who received support (54%)</b>			
Satisfied before COVID-19	63 (50, 74)	44 (27, 61)	64 (42, 81)
Unsatisfied before COVID-19	37 (26, 50)	56 (39, 73)	36 (19, 59)

# Depression was more common than anxiety

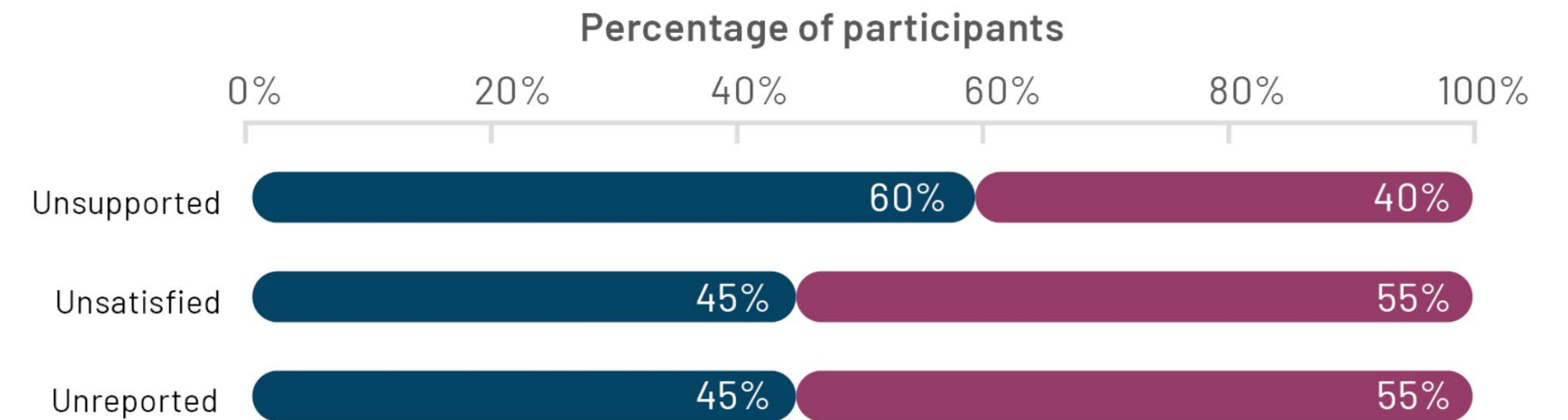
- Probable depression more common than probable anxiety, particularly for Unsatisfied (77%) and Unreported (92%).
- Symptoms expected for Unreported, but noteworthy that depression was far more common in this group than anxiety (92% vs. 55%).

*Distribution of anxiety and depression symptoms across unmet mental health needs groups*

## Anxiety symptoms

### Anxiety symptoms

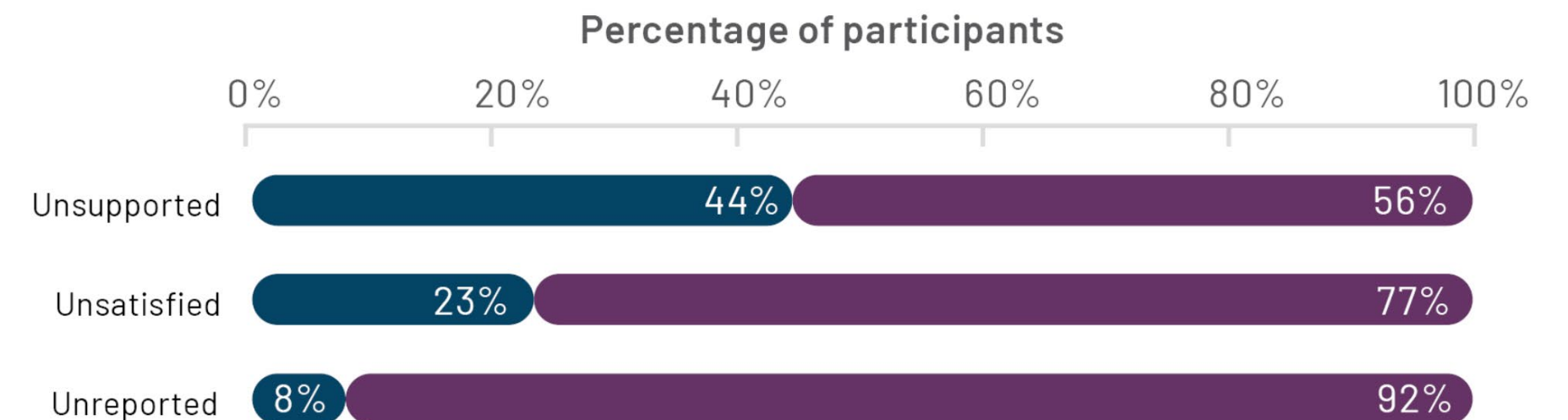
- None/Minimal
- Probable anxiety based on moderate to severe anxiety symptoms (GAD-7 score  $\geq 10$ )



## Depression symptoms

### Depression symptoms

- None/Minimal
- Probable depression based on moderate to severe depression symptoms (PHQ-9 score  $\geq 10$ )



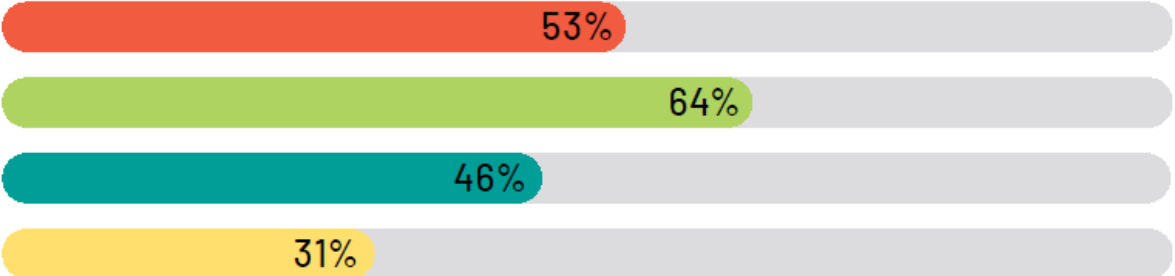
# Pandemic-related factors impacted those with unmet mental health needs more—particularly the Unsatisfied

Percentage who reported negative impacts across unmet MH need groups, weighted

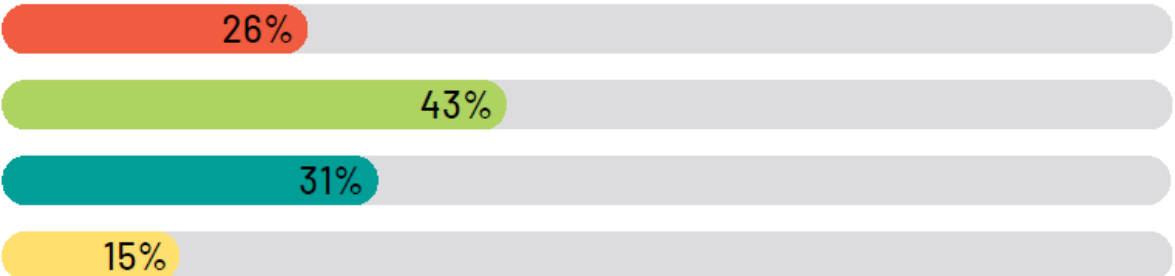


## SOCIAL FACTORS

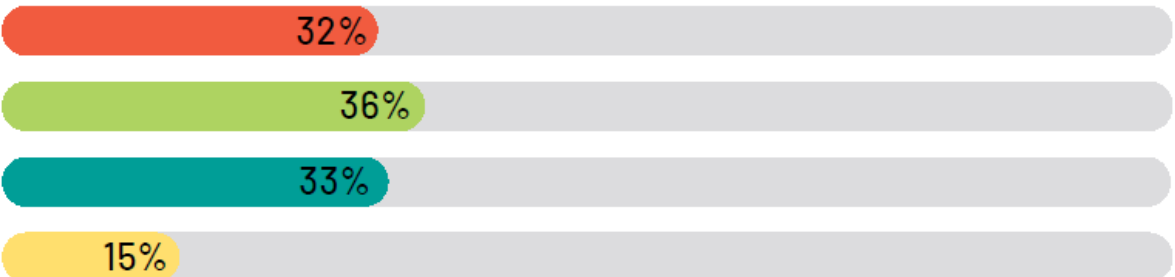
Social Isolation



Social Interactions (within home)

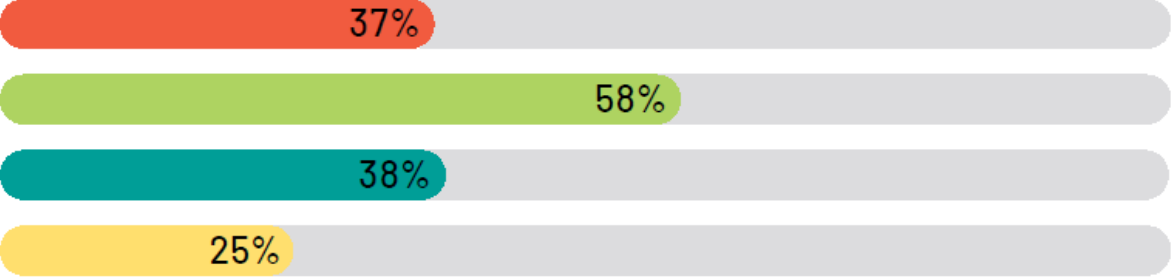


Social Interactions (outside home)

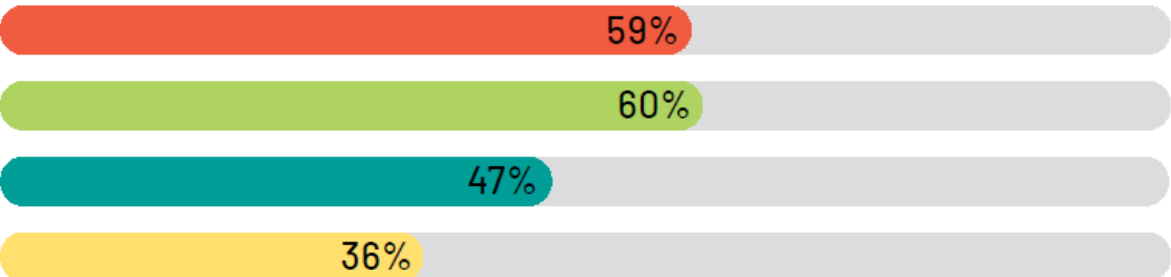


## HEALTH FACTORS

Catching COVID

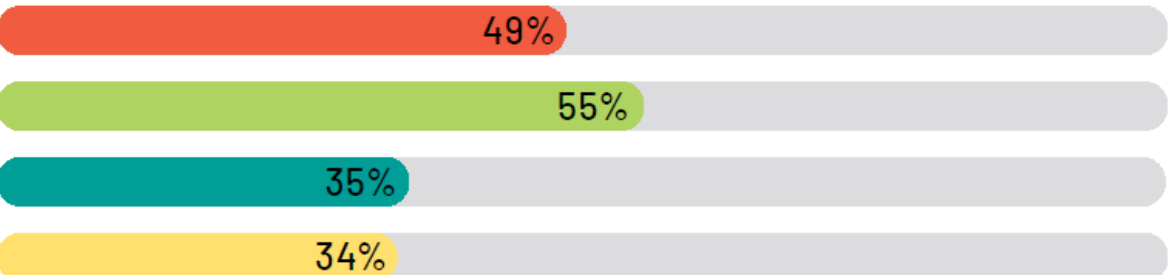


Family Catching COVID

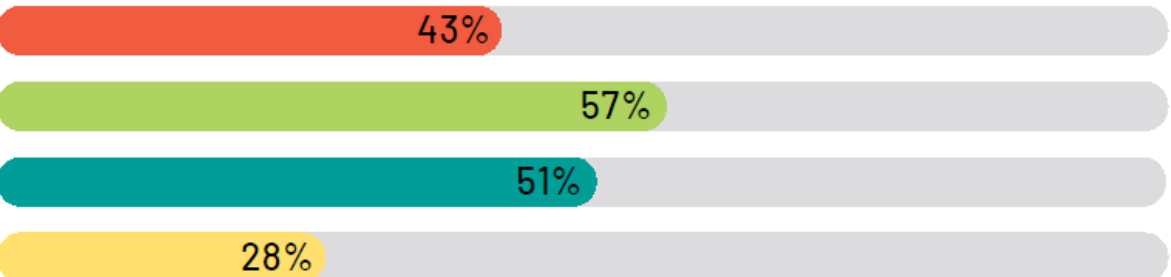


## ECONOMIC FACTORS

Economic Downturn



Job and/or pay loss





# Implications

## Evidence to support multi-pronged policy approaches

- One in four (25%) people in the Maritimes had unmet mental health needs
  - Three types of unmet mental health needs: 12% Unsupported, 6% Unsatisfied, 7% Unreported
- Prevalence of moderate to severe depression symptoms differed between unmet mental health needs groups.
- The most common reasons for not accessing care during pandemic were limited access, affordability, and a preference to self-manage, but the preference to self-manage dropped and limited access rose compared to before the pandemic.
- Differences in type of unmet need, and reasons for not accessing care indicate that multi-pronged policy approaches are needed to get patients the right care, at the right time.

# Implications *(continued)*

## Informing planning and public health emergency response

- The sociodemographic characteristics associated with having a particular type of unmet mental health need and severity of depression symptoms differed across groups.
- There were also shifts in mental health needs before and during COVID-19. For example, more than half of the Unsupported group did access care prior to COVID-19 and more than half of the Unreported group recognized a need for support prior to COVID-19.
- More of those with unmet mental health needs—particularly the Unsatisfied group—reported negative mental health impacts from pandemic-related factors. These groups may be more vulnerable to social and economic stresses during public health emergencies.
- These findings may inform targeted supports during public health emergencies (e.g. climate-related events, pandemics).

# Limitations

- **Cross-sectional study design and online self-report survey data** – Does not fully capture the experience of participants (e.g. perceived lack of access to care could reflect of lack of awareness of care options).
- **Timing of data collection** – Relative to circulation of omicron variants (NB and NS) and agricultural related issues (PEI) may have impacted responses.
- **Small sample size** – Could only study individual factors that predict unmet need, rather than using more sophisticated statistical modeling techniques to determine how various factors work together to affect unmet mental health needs.

# References

1. Xiong J, Lipsitz O, Nasri F, Lui LM, Gill H, Phan L, Chen-Li D, Iacobucci M, Ho R, Majeed A, McIntyre RS. Impact of COVID-19 pandemic on mental health in the general population: A systematic review. *Journal of Affective Disorders*. 2020 Dec 1;277:55-64. <https://doi.org/10.1016/j.jad.2020.08.001>
2. Magalhaes, S., Gorman-Asal, M. & Somayaji, C. (2021). Survey Results on Mental Health Impacts of COVID-19 in New Brunswick. Fredericton, NB: New Brunswick Institute for Research, Data and Training. Access from: <https://www.unb.ca/nbirdt/research/publications/survey-results-on-mental-health-impacts-of-covid19-in-new-brunswick.html>
3. Grant, A., Young-Shand, K., Patterson, S., Baur, K., Boulos, L., Bradley, C., Jeffers, E., Kontak, J., Ricketts, J., Sensi, I., Simon, P., Stoddard, R., Taylor, B., Wozney, L. conducted in partnership with Mental Health Research Canada. Different boats in a stormy sea: The mental health impacts of COVID-19 on Nova Scotians. Halifax, Nova Scotia: Maritime SPOR SUPPORT Unit (MSSU); 2021. [https://mssu.ca/wp-content/uploads/2021/12/MSSU\\_Mental\\_Health\\_Impacts\\_Report\\_Final\\_2021-11-18.pdf](https://mssu.ca/wp-content/uploads/2021/12/MSSU_Mental_Health_Impacts_Report_Final_2021-11-18.pdf)
4. Pulok, M., Anderson, S., Grant, A., Jeffers, E., Mireault, A. conducted in partnership with Mental Health Research Canada. Mental health impacts of COVID-19 on Nova Scotians: An update using survey data from June 2021. Halifax, Nova Scotia: Maritime SPOR SUPPORT Unit (MSSU); 2022. <https://mssu.ca/wp-content/uploads/2022/06/MH-Impacts-COVID19-NS-Update-Summary-Report-20220526.pdf>

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## Download the full report:

<https://mssu.ca/research/reports-and-publications/unmet-mental-health-needs/>

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