

The Mental Health Index by LifeWorks™

Special edition: Spotlight on
addictions in collaboration with
the Hazelden Betty Ford Foundation

Canada | May 2021



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May 2021 highlights

Key insight: More than one-third of Canadians that use alcohol have increased their consumption since the pandemic

The May 2021 Mental Health Index report is a special issue, focusing on substance use. The research questions in the spotlight section of this report were developed in collaboration with the Hazelden Betty Ford Foundation.

Drug use among Canadians has increased since the pandemic

- One-quarter of Canadians that use drugs report an increase in drug use since the onset of the pandemic and this group has among the least favourable mental health score (-25.7) as well as the least favourable isolation score (-31.7).
- One-third (33 per cent) would prefer to use drugs less than they currently do.

Substance use affects both job and home-related tasks and responsibilities

- One in five indicate that alcohol or drugs have made it difficult to complete job-related tasks and responsibilities.
- People who use medications more than prescribed are more than seven times likely to report difficulty completing job-related tasks and responsibilities at least once per week than those who use their medication as prescribed.

More than one-third of Canadians that use alcohol have increased their consumption since the pandemic

- More than one-third (34 per cent) of alcohol users have increased their consumption since the onset of the pandemic and this group is among those with the least favourable mental health score (-20.1) as well as the least favourable isolation score (-23.4).
- 8% of alcohol users consume 15 or more drinks per week compared to 2% in the pre-2020 benchmark.
- Nearly one-quarter (24 per cent) would prefer to drink less than they currently do.
- Household income is strongly related to alcohol use. 32% of households with an income of less than \$30,000 report using alcohol at least once per week compared to 56% of households with an income of more than \$150,000.
- People without emergency savings are twice as likely to report that their drinking has increased compared to those with emergency savings.

- 14% miss work or call in sick at least once per week due to alcohol or drug use.
- People missing work due to substance use have significantly lower mental health scores than those who do not miss work.

Full-time post-secondary students continue to struggle

- For the twelfth consecutive month, full-time post-secondary students have the lowest mental health score (-24.7).
- Students are twice as likely to report an increase in drug use since the onset of the pandemic compared to working adults who are not students.
- Students are twice as likely as non-students to regularly use more medication than prescribed or to use in ways that are not prescribed.
- Students using drugs or alcohol are more than 50 per cent more likely to report getting treatment for an alcohol or drug problem than non-students.

Parents report more substance use than non-parents and indicate an impact on their work and home lives

- Parents are twice as likely as non-parents to use medical cannabis, recreational cannabis, and to vape than those who are not parents.
- Parents are twice as likely as non-parents to report an increase in drug use.
- Parents using drugs or alcohol are more than 50 per cent more likely than non-parents to report getting treatment for an alcohol or drug problem.

25%

report that alcohol
or drug use

has had a negative
impact on their job

24%

regret their
spending

on drugs or alcohol

19%

use alcohol
or drugs

because of stress due
to the pandemic

15%

use alcohol
or drugs

because of stress over
money/finances

- Parents who report using drugs or alcohol are nearly four times as likely as non-parents to report calling in sick or being unable to go to work because of alcohol or drug use.
- Parents using drugs or alcohol are three times as likely as non-parents to report that alcohol or drug use has made it difficult to complete home or family-related tasks and responsibilities.
- Parents who report using drugs or alcohol are three times as likely as non-parents to report spending money on alcohol or drugs instead of needed items.

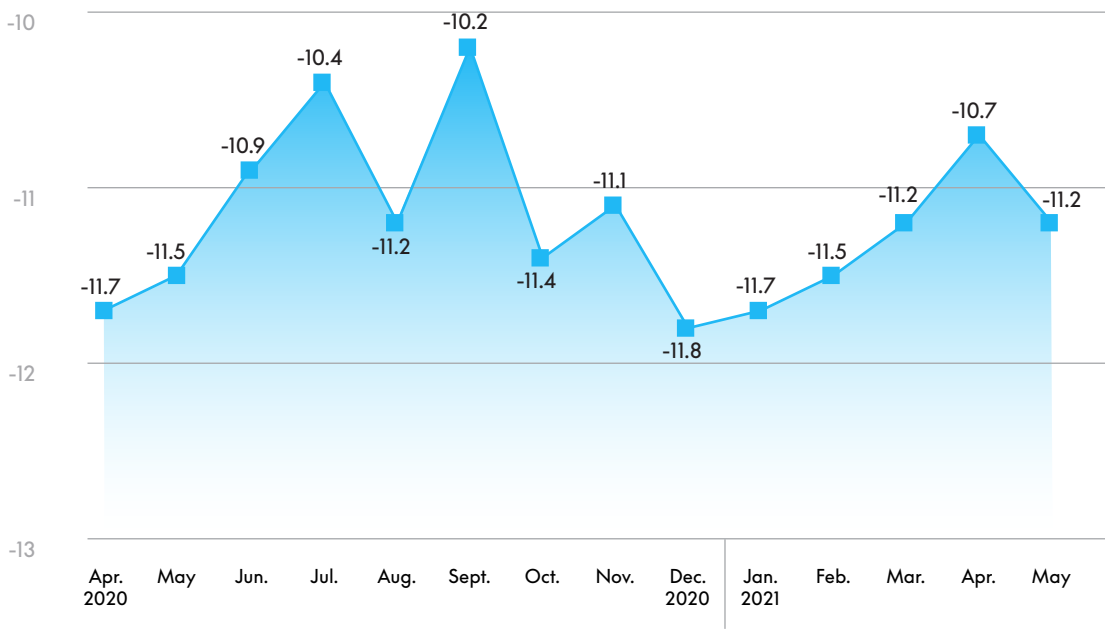
Support for substance use

- Among people acknowledging an alcohol or drug problem, more than half (53 per cent) think they could self-manage or change on their own, 17% did not want to spend the money for treatment, 14% did not believe that they could afford treatment and 14% were concerned about the impact on their job if they were to get treatment.
- An equal number of people report that their employer does (27 per cent) or does not (27 per cent) provide resources to help with problem drinking or drug use. Forty percent either do not know whether their employer offers any resources or are not sure what is offered.

The Mental Health Index™

The Mental Health Index™ (MHI) is a measure of deviation from the benchmark¹ of mental health and risk.

The overall Mental Health Index™ for May 2021 is -11.2 points. An 11-points decrease from the pre-COVID-19 benchmark reflects a population whose mental health is similar to the most distressed one per cent of the benchmark population.



MHI Current Month
May 2021

-11.2

April 2021

-10.7

¹ The benchmark reflects data collected in 2017, 2018 and 2019.

Mental Health Index™ sub-scores

The lowest Mental Health Index™ sub-score is for the risk measure of depression (-13.8), followed by anxiety (-12.5), work productivity (-12.4), isolation (-12.0), optimism (-11.7), and general psychological health (-3.7). The best sub-score, and the only measure above the benchmark is financial risk (4.3).

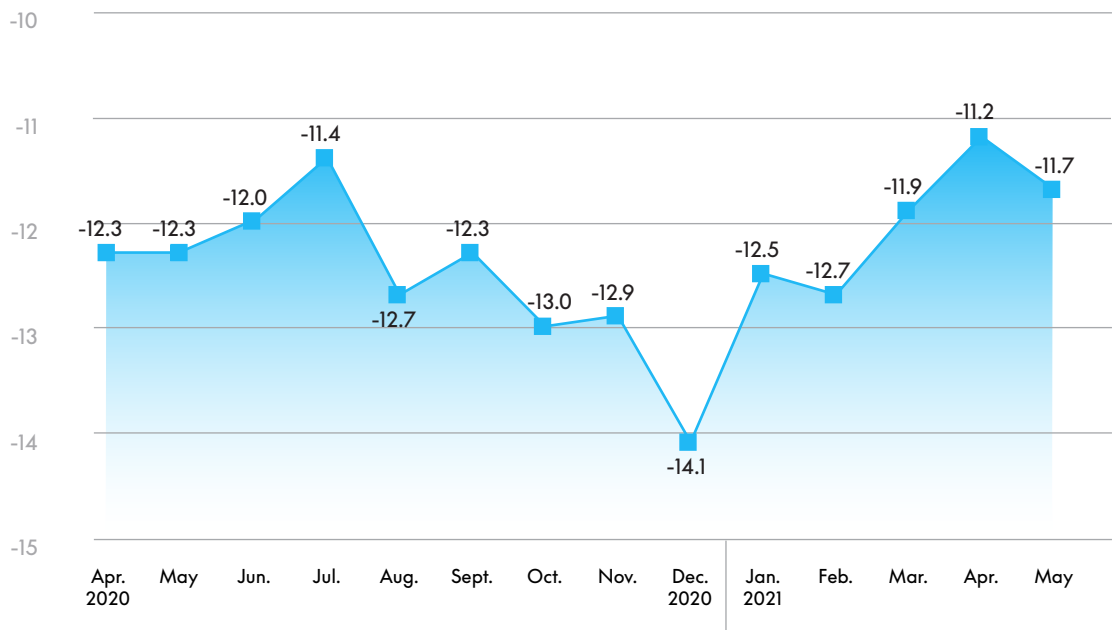
- All mental health sub-scales, apart from financial risk, have declined from the prior month.
- The depression score has seen the most significant decline (-1.3 points) from April 2021.
- The financial risk score has seen an improvement of 1-point over April and is at its highest point since the launch of the Index in April 2020.

Mental Health Index™ Sub-scores ² 2021	May	April
Depression	-13.8	-12.5
Anxiety	-12.5	-11.6
Work productivity	-12.4	-11.8
Isolation	-12.0	-11.5
Optimism	-11.7	-11.2
Psychological health	-3.7	-3.3
Financial risk	4.3	3.3

² The demographic breakdown of sub-scores is available upon request.

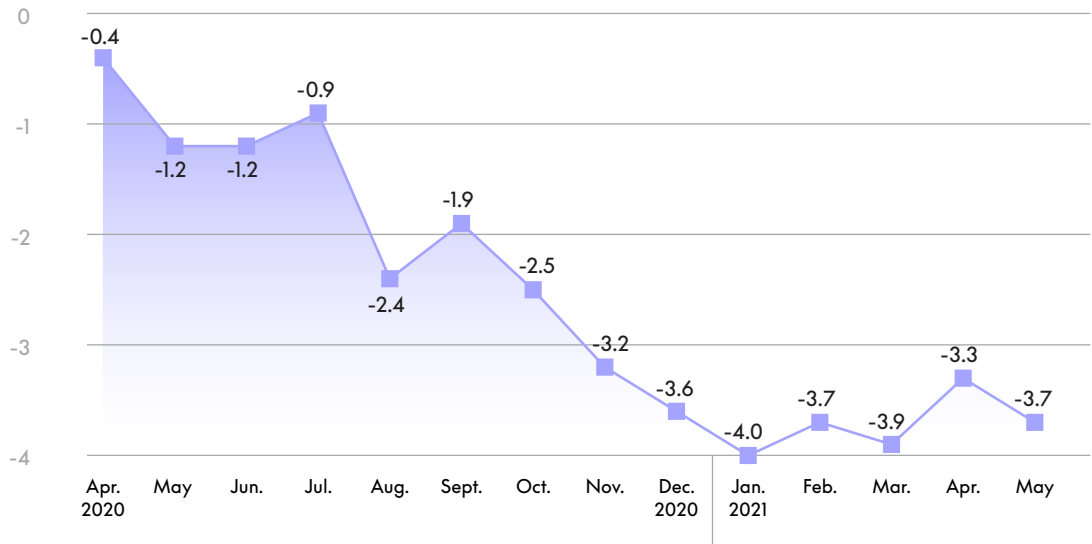
Optimism

Optimism scores since April have remained significantly below the benchmark. Despite some months of modest improvement, including a peak in July 2021 (11.4), there was a general decline until December 2020 (-14.1). Since December, there has been an improvement in the optimism score, reaching a high of -11.2, in April 2021. In May, the optimism score declined to -11.7, nearly 12-points below the pre-2020 benchmark.



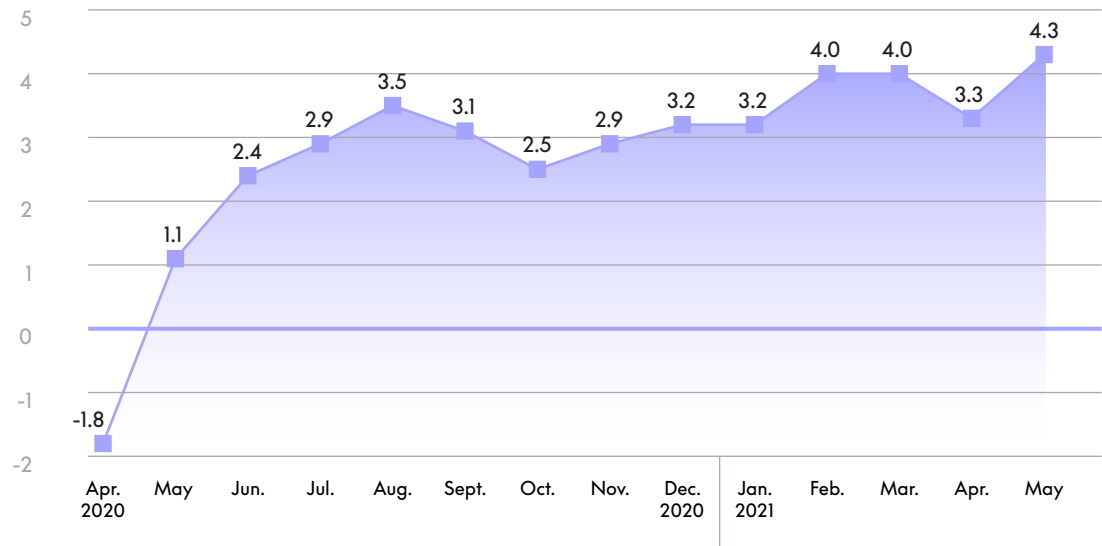
General psychological health

From the launch of the MHI in April 2020 to January 2021, the general psychological health of Canadians has declined to a low of 4-points below the pre-2020 benchmark. Since January, scores have fluctuated modestly to a current score of -3.7 below the pre-2020 benchmark in May 2021. The psychological health measure assesses individuals' self-perception of their overall level of psychological health.



Financial risk

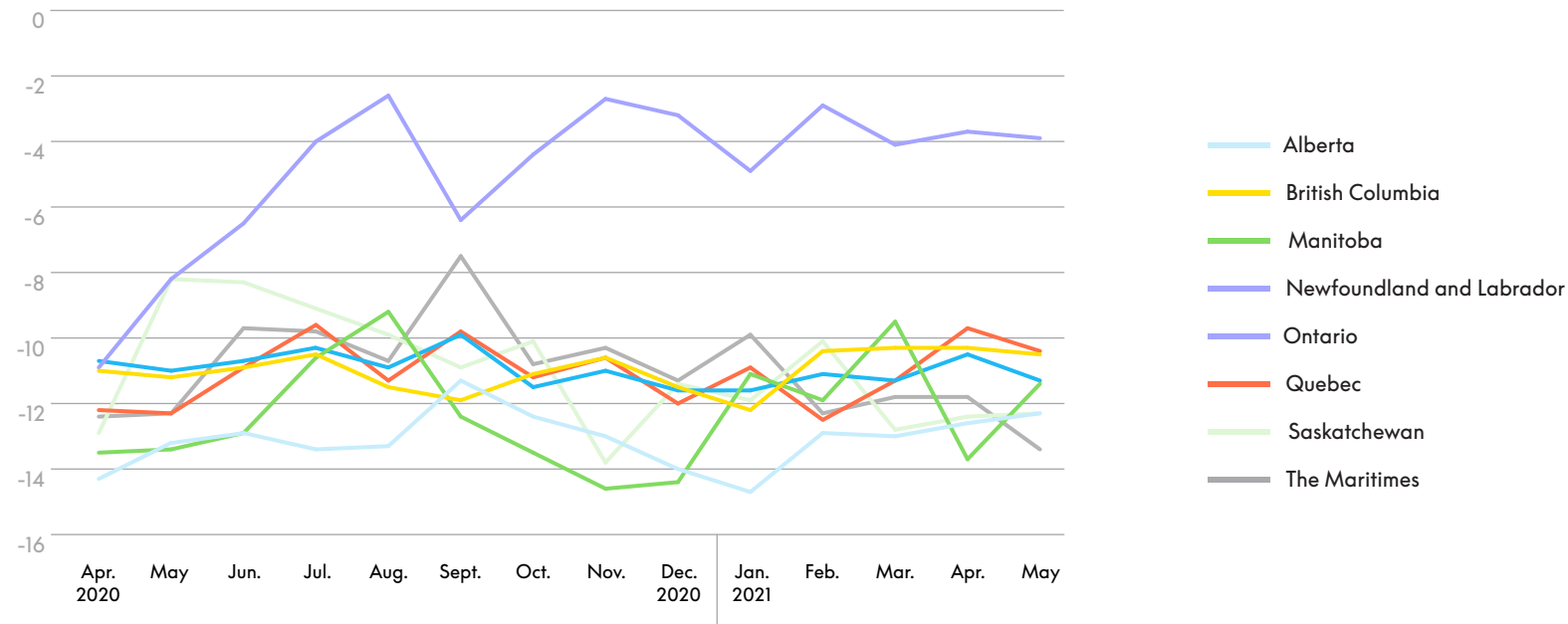
The financial risk score has shown general improvement since launch of the MHI in April 2020. In May 2021, the financial risk score of Canadians is at its highest point, 4.3 points above the pre-2020 benchmark and remains the strongest of all mental health sub-scales.



Mental Health Index™ (provincial)

Provincial mental health scores showed general improvement between April and July 2020, with several regions showing declines from July to August. Since August, scores have been inconsistent.

- Despite a 0.1-point decline from the prior month, the mental health score in Newfoundland and Labrador continues to be the strongest provincial score.
- The Maritime provinces report the greatest decline in mental health from the prior month, with a 1.7-points decrease from April to May, resulting in the lowest provincial score (-13.4).
- Despite a 2.3-points improvement over the prior month, the mental health score in Manitoba remains more than 11-points below the pre-2020 benchmark.



Demographics

- Since the start of the MHI, women have had a significantly lower mental health score than men. In May 2021, the mental health score of women is -13.5 compared to -9.0 for men.
- In each of the past fourteen months, mental health scores have improved with age.
- Differences in mental health scores between people with and without children have been seen since the launch of the Index in April 2020. More than one year later, this pattern continues with a lower score for those with at least one child (-12.7) compared to those without children (-10.5).

Employment

- Overall, five per cent of respondents are unemployed³ and fifteen per cent report reduced hours or reduced salary.
- Individuals reporting fewer hours compared to the prior month (-20.8) have the lowest mental health score, followed by those not currently employed (-17.9), and those reporting reduced salary compared to the prior month (-17.4).
- Managers have a lower mental health score (-11.7) than non-managers (-10.4).
- Self-employed/sole proprietors have the highest mental health score (-8.1).
- Respondents working for companies with 51-100 employees have the lowest mental health score (-14.9).

Emergency savings

- People without emergency savings continue to experience a lower score in mental health (-24.9) than the overall group. Individuals with emergency savings have a mental health score of -6.2.

3 MHI respondents who have been employed in the past six months are included in the poll.

Employment status	May 2021	April 2021
Employed (no change in hours/salary)	-9.1	-9.2
Employed (fewer hours compared to last month)	-20.8	-17.7
Employed (reduced salary compared to last month)	-17.4	-16.6
Not currently employed	-17.9	-17.2
Age group	May 2021	April 2021
Age 20-29	-20.8	-21.9
Age 30-39	-16.9	-16.0
Age 40-49	-11.7	-10.7
Age 50-59	-8.1	-7.4
Age 60-69	-4.9	-4.9
Number of children	May 2021	April 2021
No children in household	-10.5	-10.3
1 child	-13.2	-12.0
2 children	-12.3	-11.5
3 children or more	-10.5	-10.7

Province	May 2021	April 2021
Alberta	-12.3	-12.6
British Columbia	-10.5	-10.3
Manitoba	-11.4	-13.7
Newfoundland and Labrador	-3.9	-3.7
The Maritimes	-13.4	-11.8
Quebec	-10.4	-9.7
Ontario	-11.3	-10.5
Saskatchewan	-12.3	-12.4
Gender	May 2021	April 2021
Men	-9.0	-9.1
Women	-13.5	-12.3
Household income	May 2021	April 2021
<\$30K/annum	-20.5	-19.8
\$30K to <\$60K/annum	-15.0	-14.7
\$60K to <\$100K	-11.9	-11.8
\$100K to <\$150K	-8.6	-7.5
\$150K or more	-3.1	-2.8

Employer size	May 2021	April 2021
Self-employed/ sole proprietor	-8.1	-6.7
2-50 employees	-9.4	-10.1
51-100 employees	-14.9	-14.4
101-500 employees	-12.6	-10.7
501-1,000 employees	-13.7	-13.3
1,001-5,000 employees	-11.7	-10.7
5,001-10,000 employees	-9.0	-9.8
More than 10,000 employees	-8.6	-9.0
Manager	May 2021	April 2021
Manager	-11.7	-11.1
Non-manager	-10.4	-10.0

Numbers highlighted in **orange** are the most negative scores in the group.

Numbers highlighted in **green** are the least negative scores in the group.

Available upon request:

Specific cross-correlational and custom analyses

Mental Health Index™ (industry)

For the twelfth consecutive month, full-time post-secondary students have the lowest mental health score (-24.7). This score continues to be significantly lower than the next lowest scores: individuals in Arts, Entertainment and Recreation (-17.8), and Information and Cultural Industries (-15.7).

Individuals employed in Real Estate, Rental and Leasing (-6.5), Professional, Scientific and Technical Services (-6.9), and Mining and Oil and Gas Extraction (-7.0) have the highest mental health scores this month.

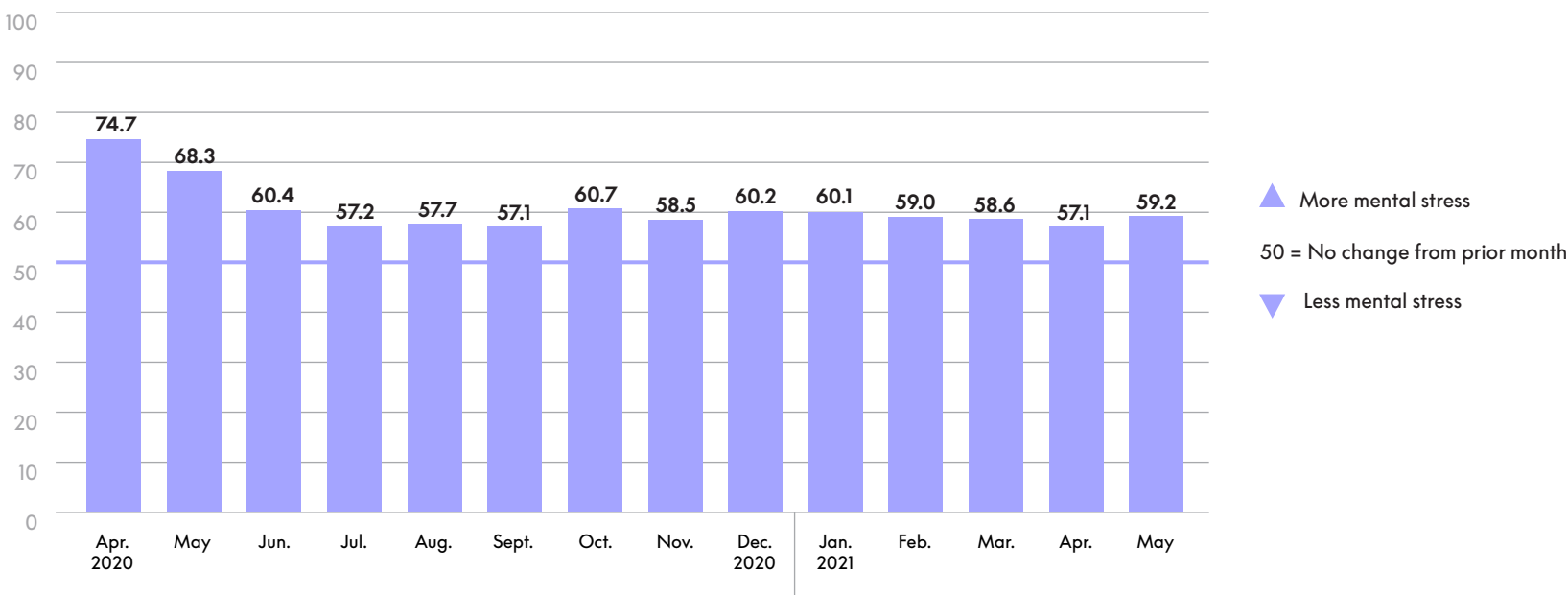
Individuals employed in the Management of Companies and Enterprises, Information and Cultural Industries, and Other services (except Public Administration) have seen the greatest improvement in mental health since last month.

Industry	May 2021	April 2021	Change
Management of Companies and Enterprises	-7.1	-14.4	7.3
Information and Cultural Industries	-15.7	-19.3	3.6
Other services (except Public Administration)	-8.4	-11.3	2.9
Real Estate, Rental and Leasing	-6.5	-9.3	2.8
Transportation and Warehousing	-7.4	-9.9	2.5
Agriculture, Forestry, Fishing and Hunting	-8.2	-9.7	1.5
Full-time student	-24.7	-26.1	1.5
Wholesale Trade	-10.9	-11.3	0.4
Educational Services	-11.4	-11.7	0.3
Professional, Scientific and Technical Services	-6.9	-6.9	-0.1
Retail Trade	-12.5	-12.2	-0.3
Public Administration	-7.7	-7.3	-0.4
Finance and Insurance	-12.9	-12.2	-0.6
Accommodation and Food Services	-13.8	-12.9	-0.9
Construction	-9.9	-9.0	-0.9
Manufacturing	-9.9	-8.0	-1.9
Other	-13.3	-11.3	-2.0
Health Care and Social Assistance	-13.4	-11.4	-2.0
Utilities	-14.9	-12.7	-2.2
Arts, Entertainment and Recreation	-17.8	-15	-2.8
Mining and Oil and Gas Extraction	-7.0	-2.7	-4.3
Automotive Industry	-10.2	-3.4	-6.8

The Mental Stress Change score

The Mental Stress Change score (MStressChg) is a measure of the level of reported mental stress compared to the prior month. **The Mental Stress Change score for May 2021 is 59.2.** This reflects a net increase in mental stress compared to the prior month.

The current score indicates that 24 per cent of the population is experiencing more mental stress compared to the prior month, with 5 per cent experiencing less. A continued increase in mental stress since April 2020 indicates a significant accumulation of strain in the Canadian population.



MStressChg Current
Month—May 2021

59.2

MStressChg
April 2021

57.1

Mental Stress Change (percentages)

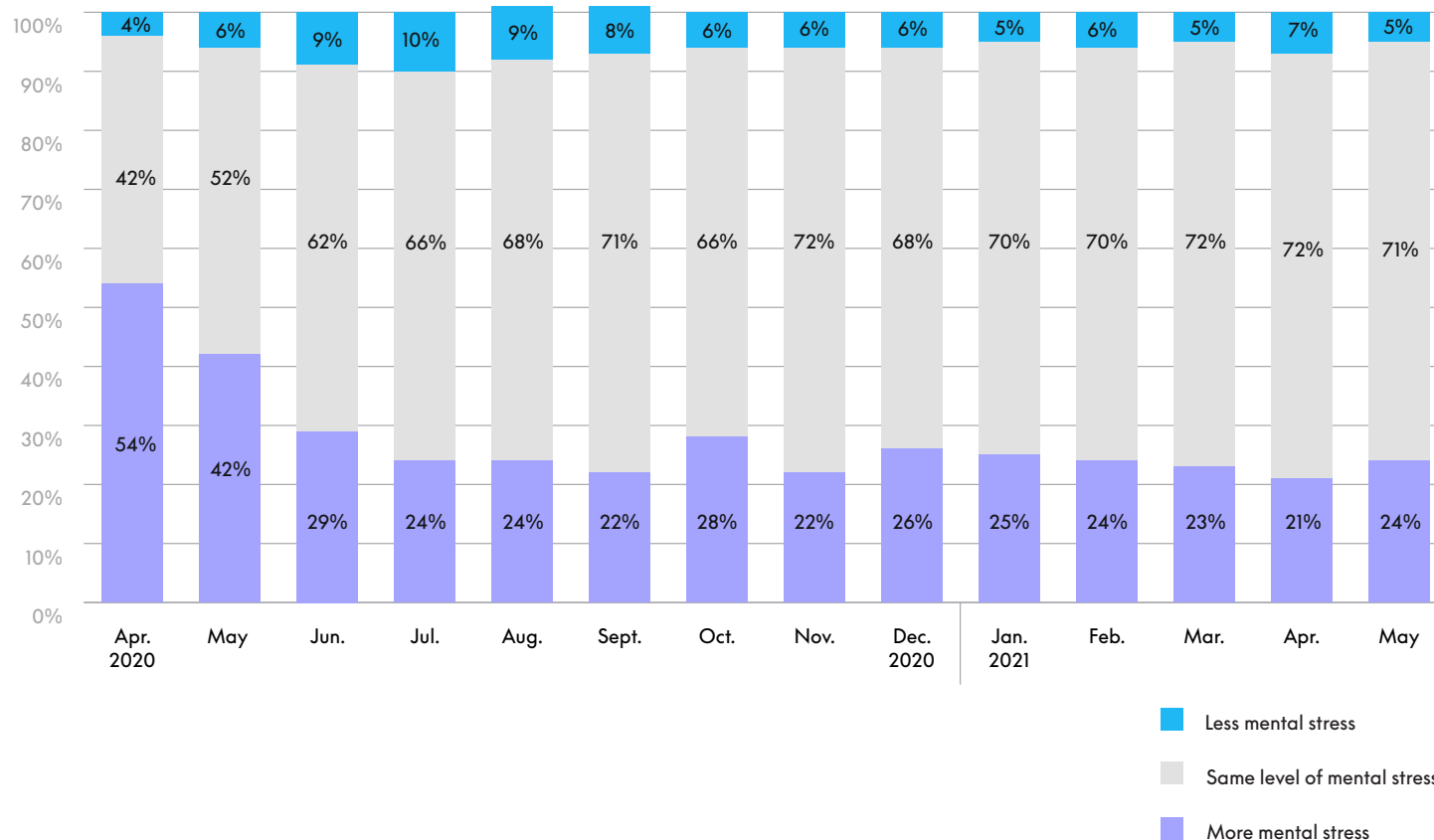
Mental Stress Change tracks stress changes each month.

The percentages of those experiencing more stress, the same level of stress, and less stress for each month of the survey are shown in the graph.

For more than one year, the percentage of those experiencing more mental stress than the previous month has steadily decreased; however, the data showing this decline is too insignificant to lower the overall Mental Stress Change score to below 50 (the level at which stress is lower than the previous month). As the proportion of individuals reporting the same level of stress or more stress than the previous month continues to outweigh the proportion reporting less mental stress, the population will continue to feel the effects of significantly increased stress and will not be able to reach a more sustainable and healthy level of stress.

In April 2020, 54 per cent of individuals reported an increase in mental stress. Those reporting increased month-over-month mental stress reduced to 24 per cent in May 2021, while 71 per cent of respondents report the same level of mental stress and only 5 per cent report a decrease in mental stress.

Mental Stress Change by month



Demographics

- Since the start of the MHI in April 2020, younger people are experiencing a greater increase in mental stress month over month, when compared to older respondents.
- Since April 2020, females have had larger increases in mental stress compared with males. In May 2021, the mental stress change score of women is 60.8 compared to 57.8 for men.

Geography

- The greatest increase in month-over-month stress is for respondents living in The Maritimes (60.7), followed by Saskatchewan (60.3), Ontario (60.1), and Alberta (60.0).
- Respondents living in provinces where the increase in mental stress was less, still had significant increases including British Columbia (58.7), Newfoundland (57.8), Manitoba (57.5), and Quebec (56.2).

Employment

- The greatest increase in mental stress is seen in employed people with reduced salary (66.7), followed by employed people with reduced hours (65.6), unemployed people (60.8), and employed people with no change to salary or hours (57.9).
- Managers have a greater increase in mental stress (61.2) than non-managers (57.8).

Employment status	May 2021	April 2021
Employed (no change in hours/salary)	57.9	56.5
Employed (fewer hours compared to last month)	65.6	60.3
Employed (reduced salary compared to last month)	66.7	56.3
Not currently employed	60.8	60.2
Age group	May 2021	April 2021
Age 20-29	62.2	62.9
Age 30-39	63.3	60.1
Age 40-49	59.6	57.3
Age 50-59	57.4	54.8
Age 60-69	55.7	54.8
Number of children	May 2021	April 2021
No children in household	57.9	56.5
1 child	62.0	58.1
2 children	62.9	60.2
3 children or more	59.8	53.9

Province	May 2021	April 2021
Alberta	60.0	60.1
British Columbia	58.7	57.8
Manitoba	57.5	57.2
Newfoundland and Labrador	57.8	50.0
The Maritimes	60.7	53.2
Quebec	56.2	55.0
Ontario	60.1	58.0
Saskatchewan	60.3	57.0
Gender	May 2021	April 2021
Men	57.8	55.6
Women	60.8	58.6
Household income	May 2021	April 2021
<\$30K/annum	62.0	58.9
\$30K to <\$60K/annum	59.6	57.2
\$60K to <\$100K	59.5	56.9
\$100K to <\$150K	58.6	57.4
\$150K or more	57.5	57.3

Employer size	May 2021	April 2021
Self-employed/ sole proprietor	56.5	54.1
2-50 employees	57.2	56.7
51-100 employees	60.5	57.5
101-500 employees	61.2	56.8
501-1,000 employees	62.9	61.9
1,001-5,000 employees	61.4	58.6
5,001-10,000 employees	58.0	57.0
More than 10,000 employees	56.9	55.1
Manager	May 2021	April 2021
Manager	61.2	58.5
Non-manager	57.8	56.1

Numbers highlighted in orange are the most negative scores in the group.

Numbers highlighted in green are the least negative scores in the group.

Available upon request:

Specific cross-correlational and custom analyses

The Mental Stress Change (industry)

Mental Stress Change scores for individuals employed in the Management of Companies and Enterprises (50.0) reflects a stabilization of mental stress from month to month. A score of 50 means that the proportion of the population experiencing more stress is balanced by the proportion experiencing less stress.

Individuals working in the Arts, Entertainment and Recreation have the most significant increase in mental stress (66.2), followed by individuals employed in Utilities (65.0), and Health Care and Social Assistance (63.8).

Mental Stress changes from the last two months are shown in the table.

Industry	May 2021	April 2021
Management of Companies and Enterprises	50.0	64.8
Transportation and Warehousing	53.0	53.5
Agriculture, Forestry, Fishing and Hunting	54.3	50.0
Other services (except Public Administration)	54.6	52.5
Manufacturing	56.3	57.6
Professional, Scientific and Technical Services	56.7	56.0
Construction	57.2	54.5
Automotive Industry	57.3	51.3
Real Estate, Rental and Leasing	57.6	59.4
Full-time student	57.9	71.6
Public Administration	58.3	55.4
Other	58.4	56.6
Mining and Oil and Gas Extraction	58.8	50.0
Wholesale Trade	59.0	60.2
Information and Cultural Industries	59.8	58.6
Educational Services	60.2	58.2
Retail Trade	60.6	56.1
Accommodation and Food Services	60.8	56.8
Finance and Insurance	62.2	57.5
Health Care and Social Assistance	63.8	59.6
Utilities	65.0	62.5
Arts, Entertainment and Recreation	66.2	61.1

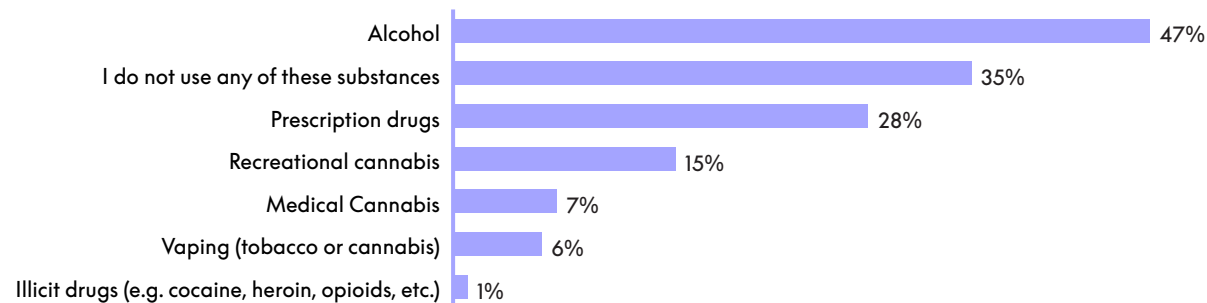
Spotlight

Substance use

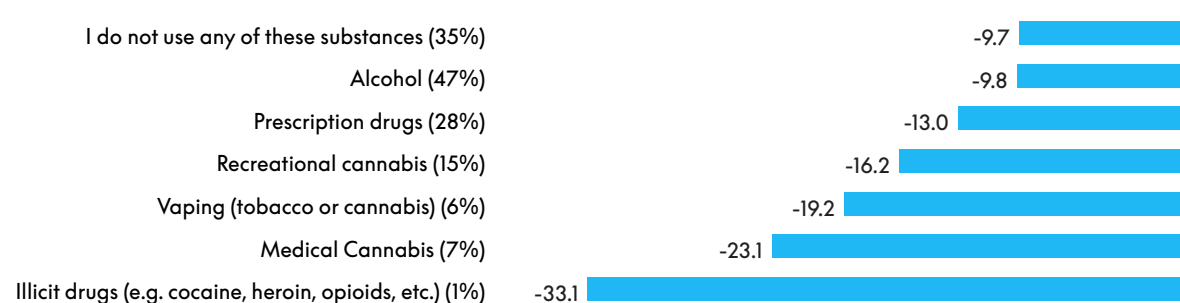
The COVID-19 pandemic impact on mental health has been definitively shown by the MHI. For this month's report, respondents were asked about their substance use since the onset of the pandemic.

- Nearly half (47 per cent) of people use alcohol at least once every week (occasional drinkers are not considered in this proportion), twenty-eight per cent use prescription drugs, fifteen per cent use recreational cannabis, and seven per cent use medical cannabis.
- Thirty-five per cent report not using any substances and this group has the highest mental health score (-9.7).
- Household income is strongly related to alcohol use. Thirty-two per cent of households with an income of less than \$30,000 report using alcohol compared to fifty-six per cent of households with an income of more than \$150,000.
- Parents are twice as likely to use medical cannabis, recreational cannabis, and to vape than to non-parents.
- Respondents under 50 are twice as likely to report using recreational cannabis compared to those 50 and over.
- Managers are twice as likely as non-managers to use medical cannabis or to vape.

Type of substances use



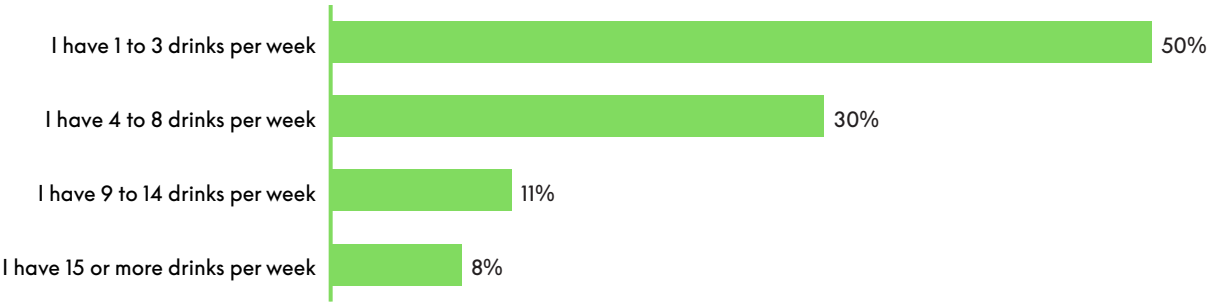
MHI score by type of substance use



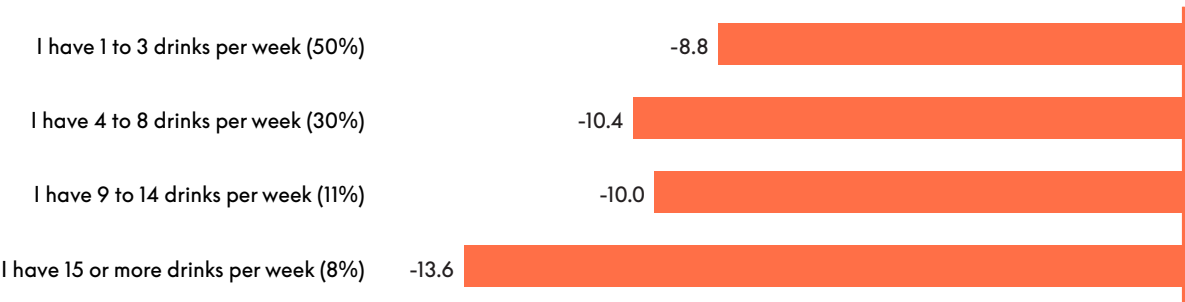
Alcohol use

- Half of the people who use alcohol consume 1 to 3 drinks per week. This group has the highest mental health score (-8.8) and the highest isolation score (-9.3) despite being approximately 9-points below benchmark.
- Eight per cent of people consume 15 or more drinks per week compared to 2% in the pre-2020 benchmark.
- The least favourable mental health score is among eight per cent of people who consume 15 or more drinks per week (-13.6). This group also reports feeling the most isolated (-15.1).
- Men are twice as likely as women to consume 9 or more drinks per week.
- Those consuming 15 or more drinks per week increases with almost every age group from 3 per cent among people 20-29 years to 16 per cent among those aged 70-79.

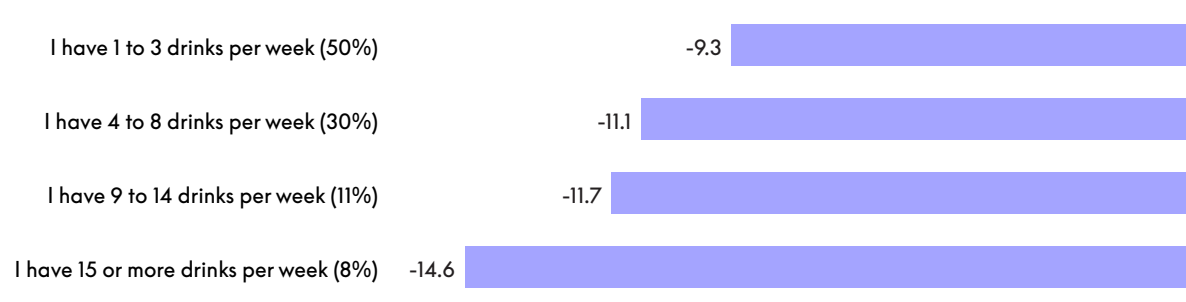
Number of alcoholic drinks consumed per week



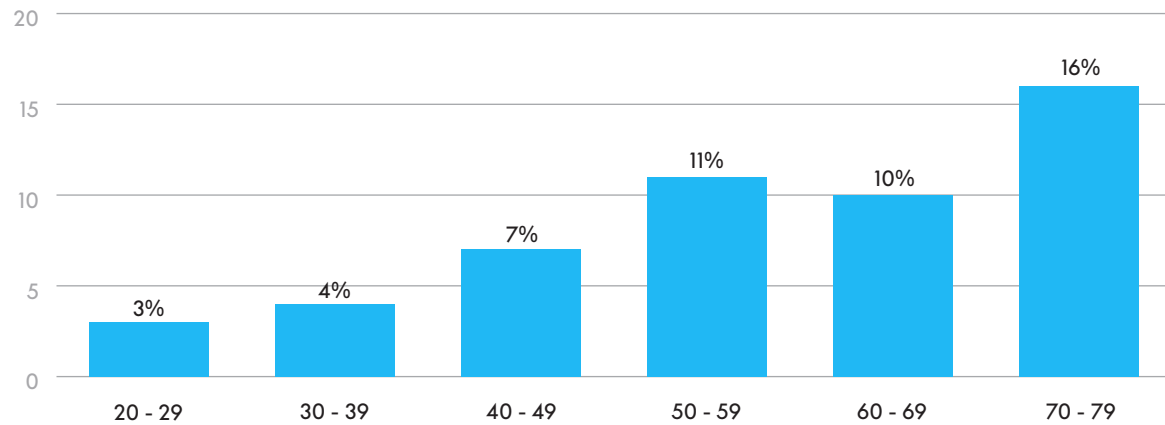
MHI score by number of alcoholic drinks consumed per week



Isolation score by number of alcoholic drinks consumed per week



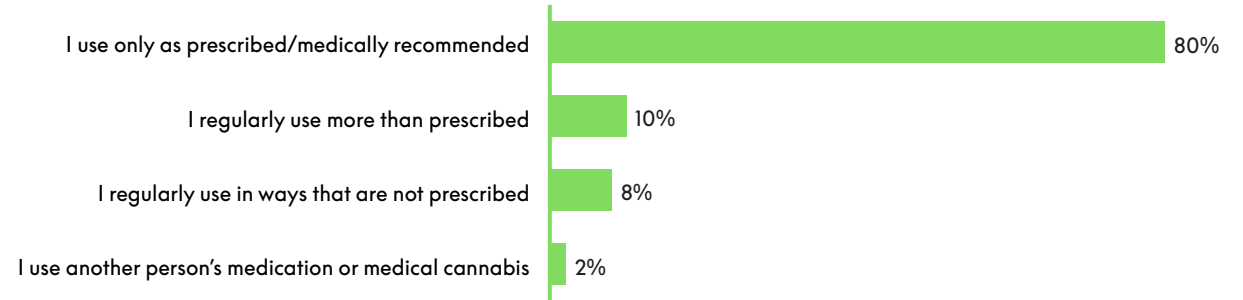
Consumption of 15 or more alcoholic drinks per week by age



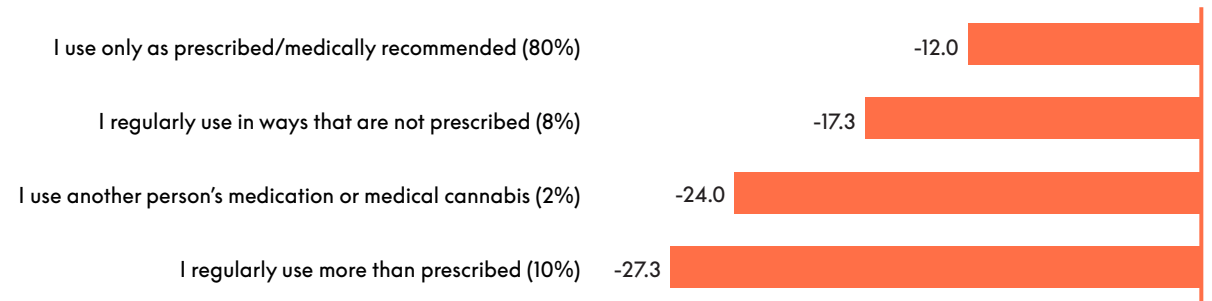
Prescription drugs and medical cannabis

- Eighty per cent of people use prescription drugs or medical cannabis as prescribed, and this group has the best mental health score (-12.0).
- Ten per cent of people regularly use prescription drugs or medical cannabis more than prescribed and eight per cent use these substances in ways that are not prescribed.
- Students are twice as likely as non-students to regularly use more than prescribed or to use in ways that are not prescribed.
- Parents are three and one-half times more likely than non-parents to report regularly using more than prescribed.

Use of prescription drugs or medical cannabis



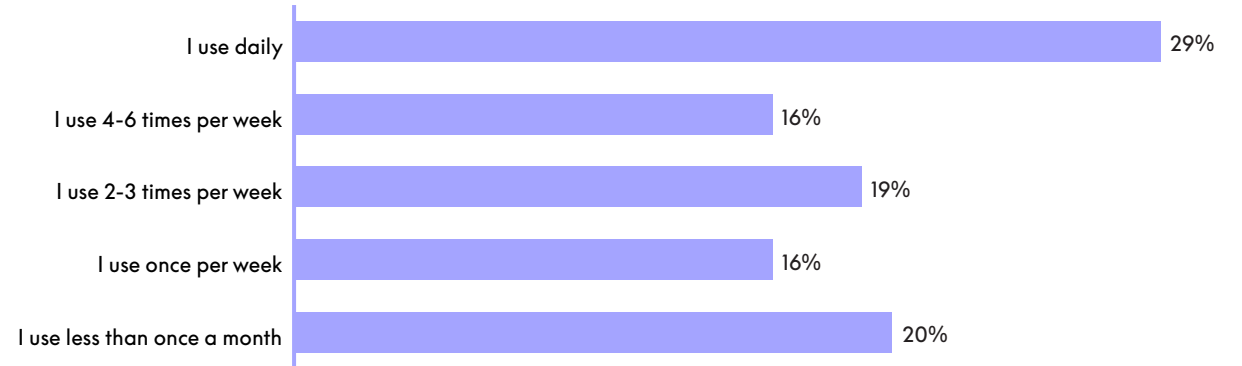
MHI score by use of prescription drugs or medical cannabis



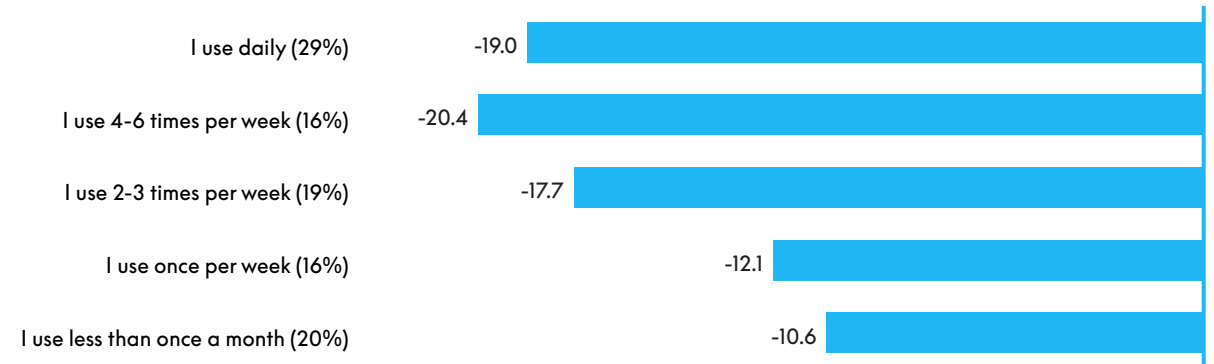
Recreational cannabis

- Among the fifteen per cent of respondents who are recreational cannabis users, nearly one-third (29 per cent) report using recreational cannabis daily, followed by twenty per cent who use it less than once per month, and nineteen per cent that use 2-3 times per week.
- Individuals using recreational cannabis less than once per month have best mental health score (-10.6).
- The least favourable mental health score is among sixteen per cent of people who use recreational cannabis 4-6 times per week (-20.4).
- Individuals living in households with an income lower than \$60,000 are twice as likely to use recreational cannabis daily compared to those living in households with an income over \$60,000.

Use of recreational cannabis



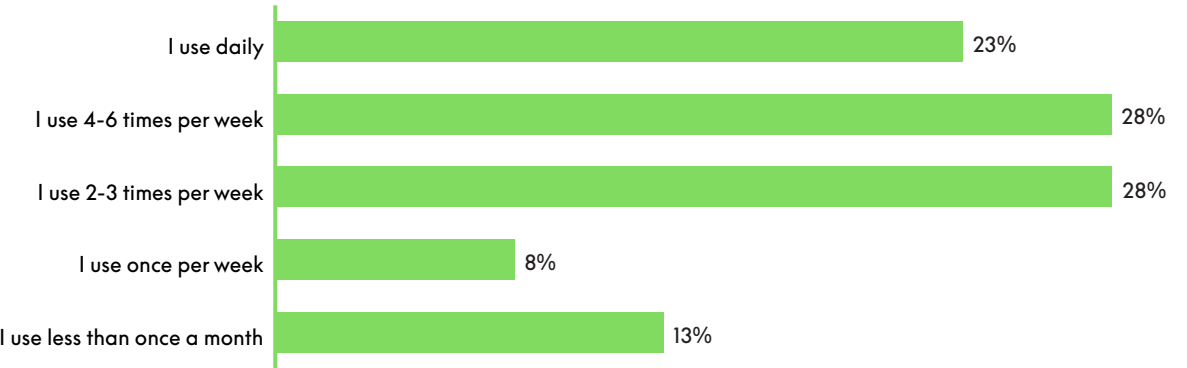
MHI score by use of recreational cannabis



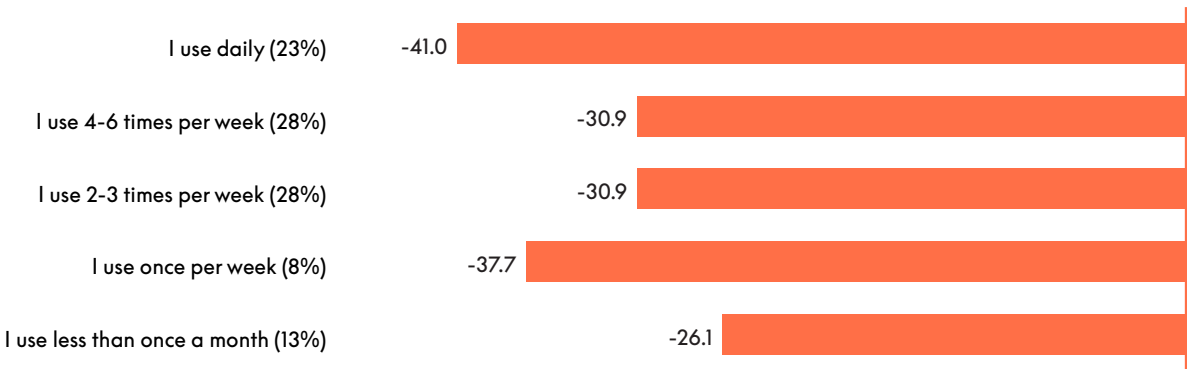
Illicit drugs

- Among the one per cent of respondents who report using illicit drugs, more than one-quarter (28 per cent) report using 4-6 times per week, twenty-eight per cent use 2-3 times per week, and twenty-three per cent use illicit drugs daily.
- Thirteen per cent report using illicit drugs less than once per month and while they have the most favourable mental health score (-26.1), it is nearly 15-points below the overall population (-11.2).
- Those who use illicit drugs daily have the worst mental health score (-41.0), nearly 30-points below the overall average.

Use of illicit drugs



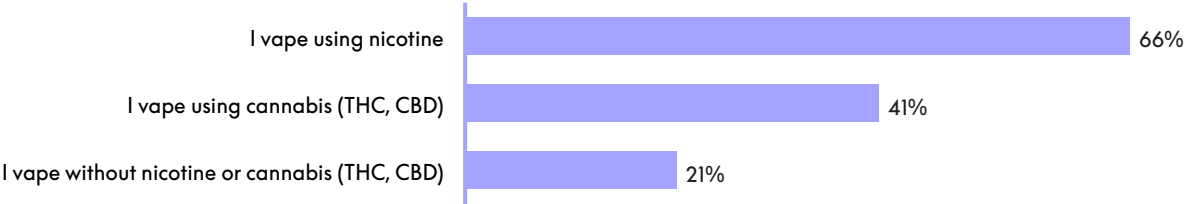
MHI score by use of illicit drugs



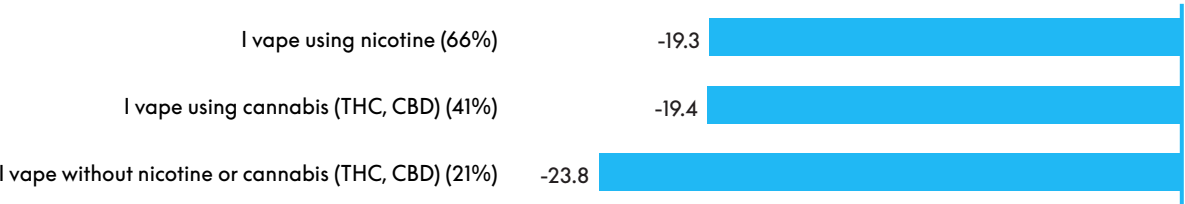
Vaping

- Six per cent report vaping.
- Nearly two-thirds (66 per cent) vape nicotine, forty-one per cent vape cannabis, and twenty-one per cent vape without nicotine or cannabis.

Vape substance



MHI score by vape substance



Effect of the COVID-19 pandemic on substance use

Change in alcohol use

- Respondents who use alcohol were asked about how their consumption has changed since the onset of the pandemic.
- More than one-third (34 per cent) have increased their alcohol use since the onset of the pandemic and this group has the least favourable mental health score (-20.1) as well as the least favourable isolation score (-23.4). Both scores are significantly below the overall Canadian mental health score for May 2021 (-11.2).
- More than half (52 per cent) report that their alcohol use has not changed since the onset of pandemic and this group has the most favourable mental health score (-4.3).
- People without emergency savings are twice as likely than those with emergency savings to report that their drinking has increased.

Change in alcohol use since the onset of the pandemic



MHI score by change in alcohol use since the onset of the pandemic

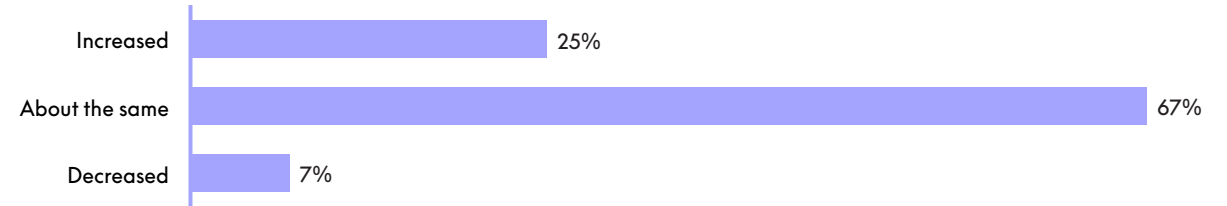


Change in drug use

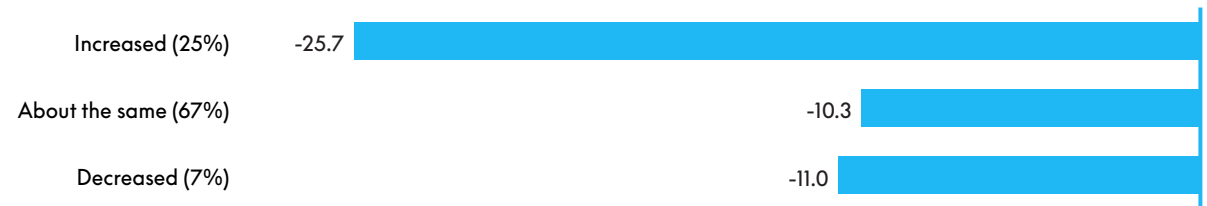
Respondents who use prescription drugs, recreational or medical cannabis, or illicit drugs were asked about how their drug use has changed since the onset of pandemic.

- One-quarter report an increase in drug use since the onset of the pandemic and this group has the least favourable mental health score (-25.7) as well as the least favourable isolation score (-31.7).
- Two-thirds (67 per cent) report that their drug use has not changed since the onset of pandemic and this group has the most favourable mental health score (-10.3).
- Individuals working fewer hours are twice as likely to report an increase in drug use compared to those with no change to salary or working hours.
- Students are twice as likely to report an increase in drug use as working adults who are not students.
- Parents are twice as likely to report an increase in drug use compared to non-parents.

Change in drug use since the onset of the pandemic



MHI score by change in drug use since the onset of the pandemic



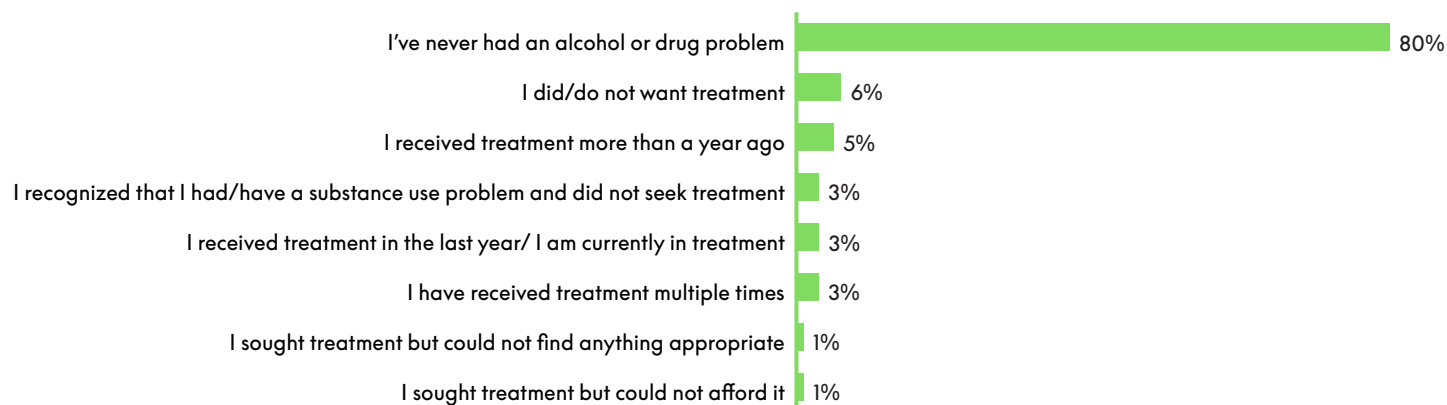
Treatment for substance use

Respondents were asked if they have sought or received treatment for substance use.

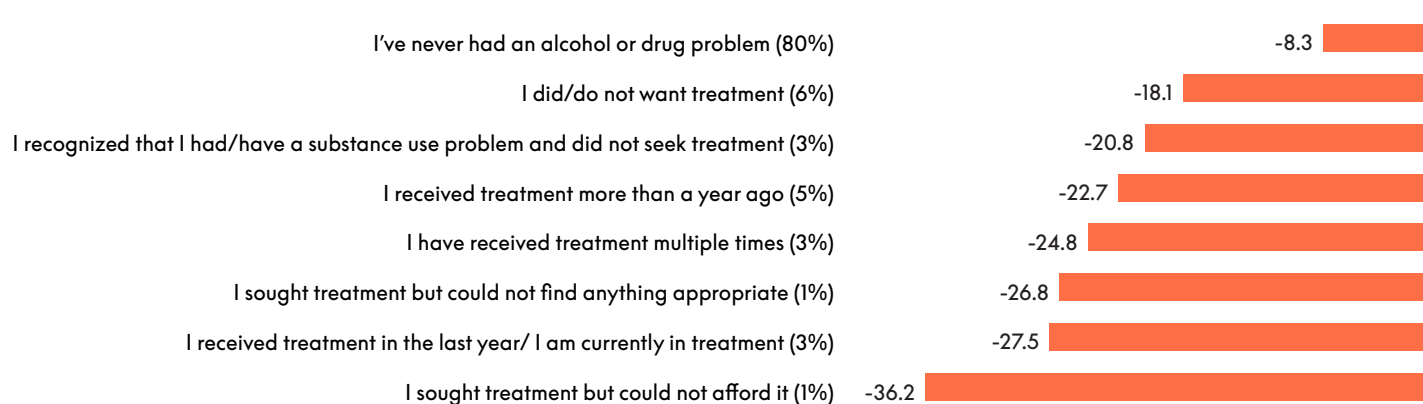
Treatment for alcohol/drug use

- Eighty per cent report not having a drug or alcohol problem, and this group has the most favourable mental health score (-8.3).
- Six per cent do not want treatment and five per cent received treatment more than one year ago.
- The lowest mental health score is among one per cent of people who sought treatment for substance use but could not afford it (-36.2).
- Students using drugs or alcohol are more than 50 per cent more likely to report getting treatment for an alcohol or drug problem than non-students.
- Parents using drugs or alcohol are more than 50 per cent more likely to report getting treatment for an alcohol or drug problem than non-parents.

Seeking or receiving treatment for an alcohol or drug problem



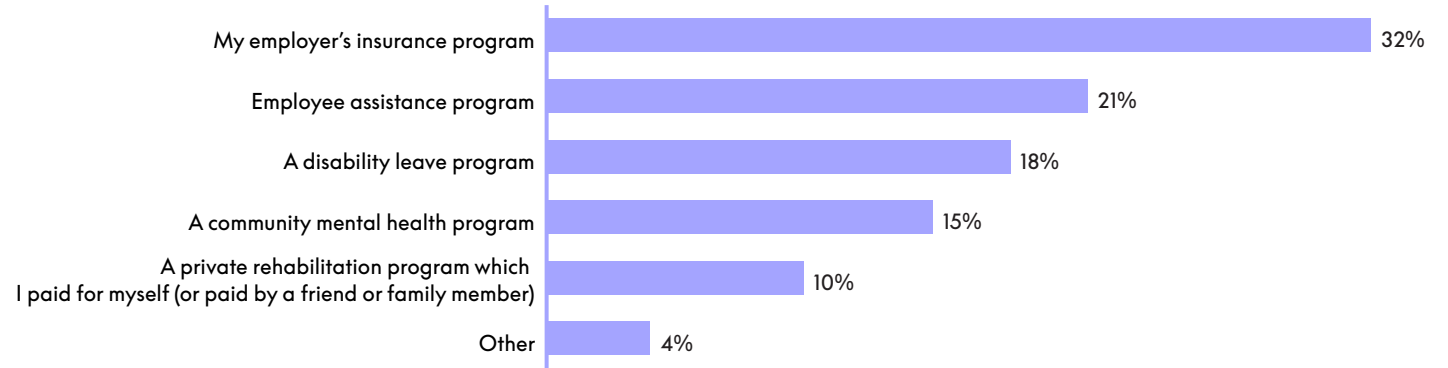
MHI score by seeking or receiving treatment for an alcohol or drug problem



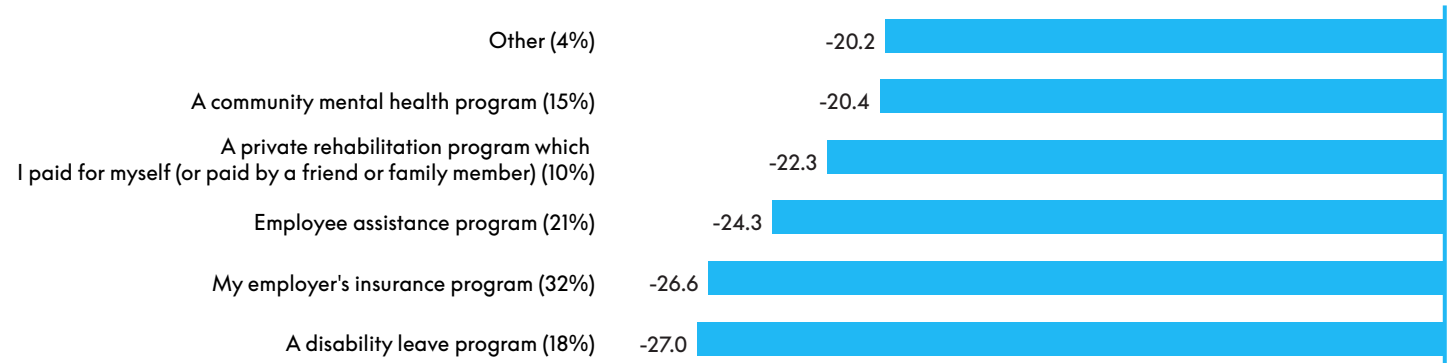
Source of most recent treatment

- Among people who report receiving treatment, nearly one-third (32 per cent) report using their employer's insurance program to get their treatment, followed by twenty-one per cent using the Employee Assistance Program (EAP), and eighteen per cent using treatment through a disability leave program.

Source of most recent treatment program



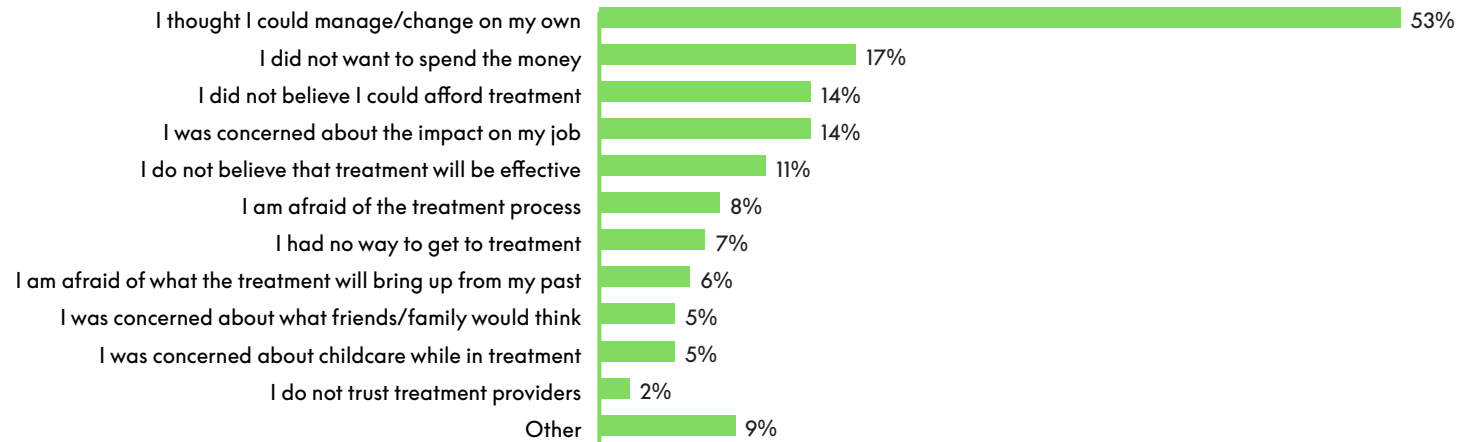
MHI score by source of most recent treatment program



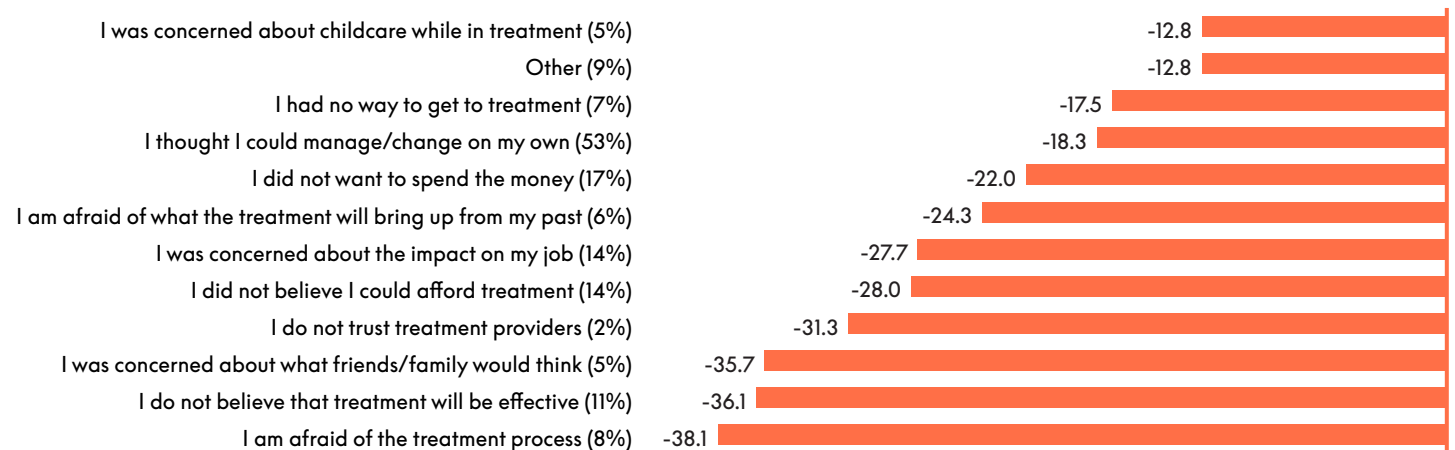
Reasons for not seeking treatment

- Among people acknowledging an alcohol or drug problem, more than half (53 per cent) think they could self-manage or change on their own, seventeen per cent did not want to spend the money, fourteen per cent did not believe that they could afford treatment and fourteen per cent were concerned about the impact on their job.
- Eight per cent of people who are afraid of the treatment process have the least favourable mental health score (-38.1).

Reason for not seeking treatment



MHI score by reasons for not seeking treatment



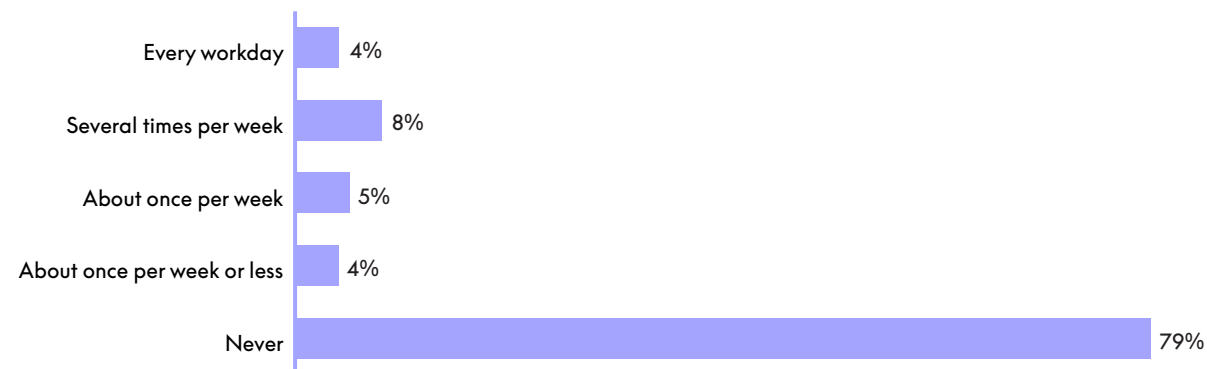
Impact on work and personal life

Those reporting that they use alcohol or drugs were asked if their usage impacted their ability to complete work tasks or responsibilities, caused absence from work, or impacted their ability to complete tasks or responsibilities at home.

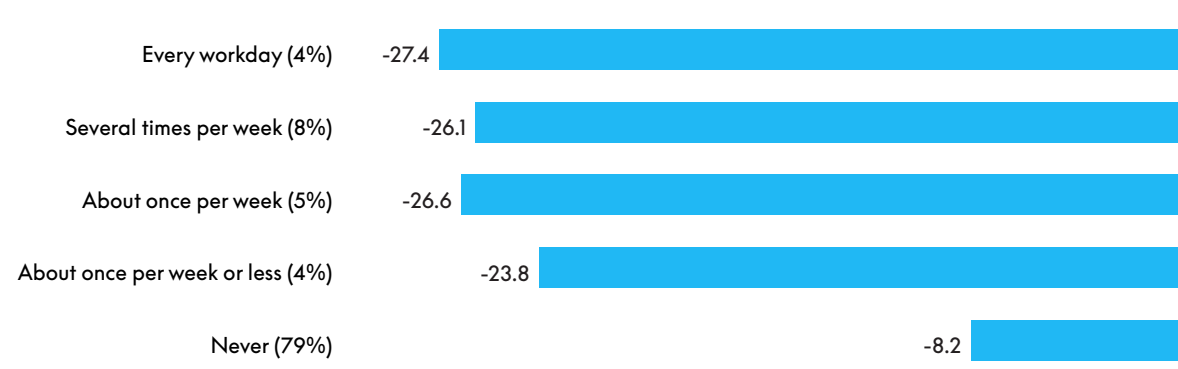
Impact of alcohol or drugs on job-related tasks and responsibilities

- Nearly eighty per cent (79 per cent) of the total population have never had difficulties completing job-related tasks and responsibilities at work because of alcohol or drug use and this group has the most favourable mental health score (-8.2).
- One in five reports that alcohol or drugs have made it difficult to complete job-related tasks and responsibilities.
- People who use medications more than prescribed are more than seven times more likely to report difficulty completing job-related tasks and responsibilities at least once per week than those who use their medication as prescribed.

How often alcohol or drugs have made it difficult to complete job-related tasks and responsibilities



MHI score by how often alcohol or drugs have made it difficult to complete job-related tasks and responsibilities



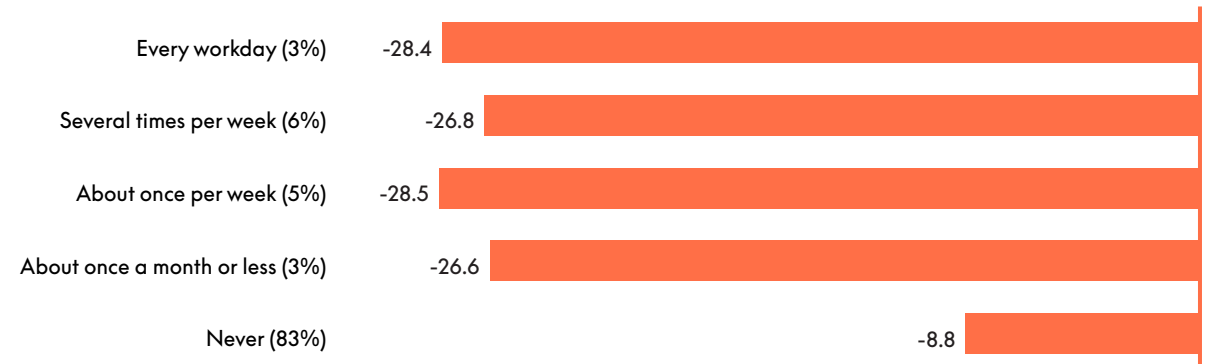
Impact of alcohol or drugs on absenteeism

- Eighty-three per cent of the population have never missed work due to alcohol or drug use and this group has the most favourable mental health score (-8.8).
- Fourteen per cent miss work or call in sick at least once per week due to alcohol or drug use.
- People missing work have significantly lower mental health scores; five per cent who miss work about once per week because of alcohol or drug use have the least favourable mental health score (-28.5), followed by three per cent who miss work every day (-28.4), and six per cent who miss work several times per week (-26.8).
- Parents who report using drugs or alcohol are nearly four times more likely than non-parents to report calling in sick or being unable to go to work because of alcohol or drug use at least once per week.

Absenteeism due to alcohol or drug use



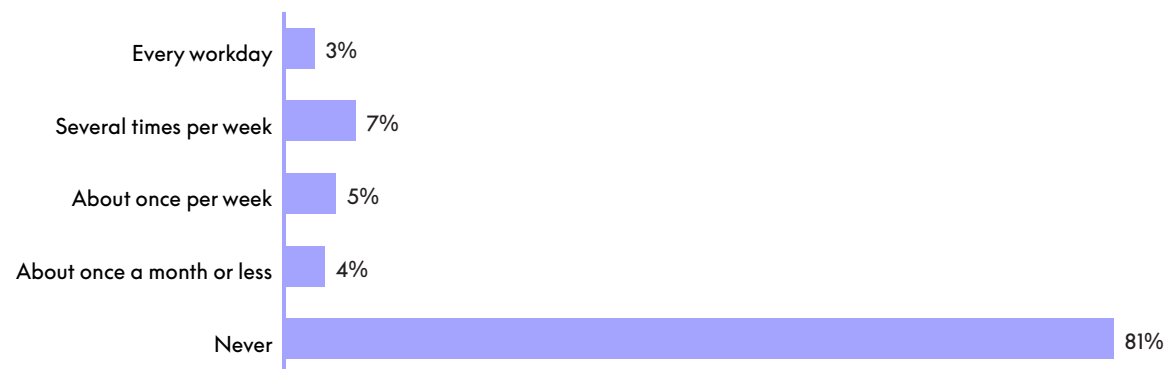
MHI score by absenteeism due to alcohol or drug use



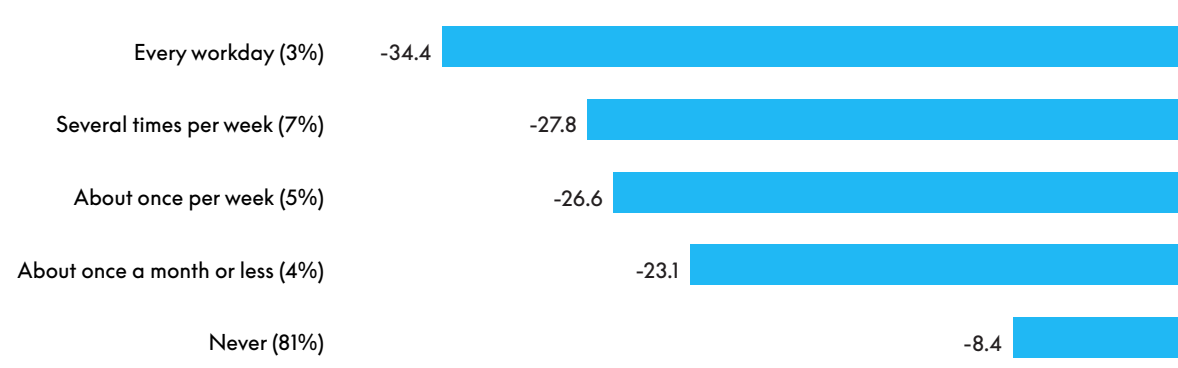
Impact of alcohol or drugs on home or family-related tasks and responsibilities

- Eighty-one per cent have never had difficulties with home or family-related tasks and responsibilities due to alcohol or drug use and this group has the most favourable mental health score (-8.4).
- Nearly one in five (19 per cent) report that alcohol or drugs have had an impact on home or family-related tasks and responsibilities.
- Three per cent of people who have difficulty with home or family-related tasks and responsibilities every day have the least favourable mental health score (-34.4).
- Individuals working fewer hours are twice as likely to report that alcohol or drug use has made it difficult to complete home or family-related tasks and responsibilities at least once per week.
- Parents using drugs or alcohol are three times as likely than non-parents to report that alcohol or drug use has made it difficult to complete home or family-related tasks and responsibilities at least once per week.
- Managers are more than three times as likely than non-managers to report that alcohol or drug use has made it difficult to complete home or family-related tasks and responsibilities at home at least once a week.

Impact of alcohol or drug use on home or family-related tasks and responsibilities



MHI score by impact of alcohol use or drug on home or family-related tasks and responsibilities



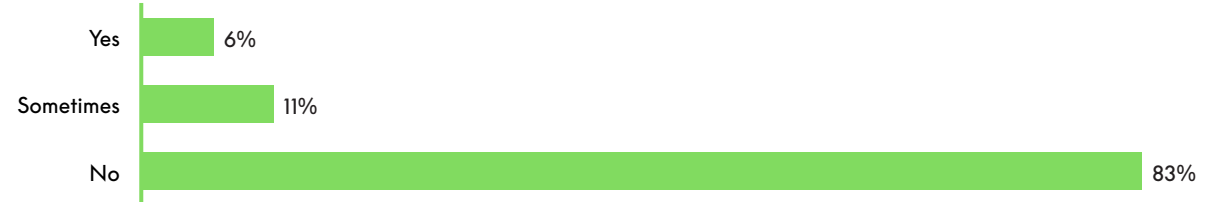
Spending on drugs or alcohol

Respondents reporting use of any type of substance were asked whether they have spent money on drugs or alcohol that was needed for something else (e.g., rent, food). This group was also asked whether they regretted the amount of money spent on alcohol or drugs.

Spending on drugs or alcohol instead of essentials

- Eighty-three per cent have never spent money on alcohol or drugs that was needed for something else, and this group has the most favourable mental health score (-8.9).
- Seventeen per cent spent money on alcohol or drugs that was needed for something else.
- Parents who report using drugs or alcohol are three times more likely than non-parents to report spending money on alcohol or drugs instead of needed items.
- People without emergency savings are nearly four times more likely than those with emergency savings to report spending money on alcohol or drugs instead of needed items.
- Managers are nearly three times more likely than non-managers to report spending money on alcohol or drugs instead of needed items.

Spending money on alcohol or drugs that is needed for something else



MHI score by spending money on alcohol or drugs that is needed for something else



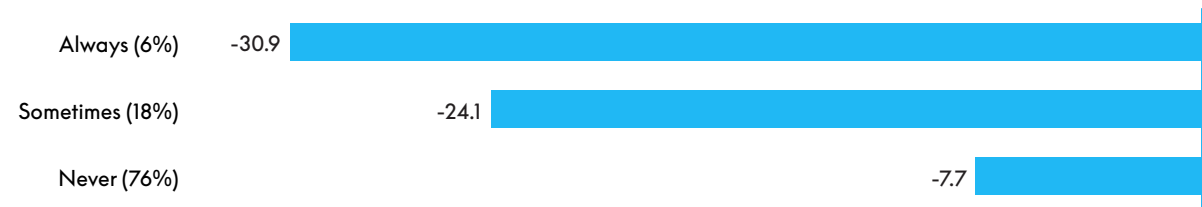
Regret over spending on drugs or alcohol

- Seventy-six per cent report that they never regret spending money on drugs or alcohol and this group has the most favourable mental health score (-7.7).
- Nearly one-quarter (24 per cent) report regret over their spending on drugs or alcohol.
- Parents are more than twice as likely as non-parents to regret spending money on drugs or alcohol.
- People without emergency savings are nearly three times as likely as those with emergency savings to regret spending money on drugs or alcohol.
- Managers are more than twice as likely as non-managers to regret spending money on drugs or alcohol.

Regret over spending on alcohol or drugs



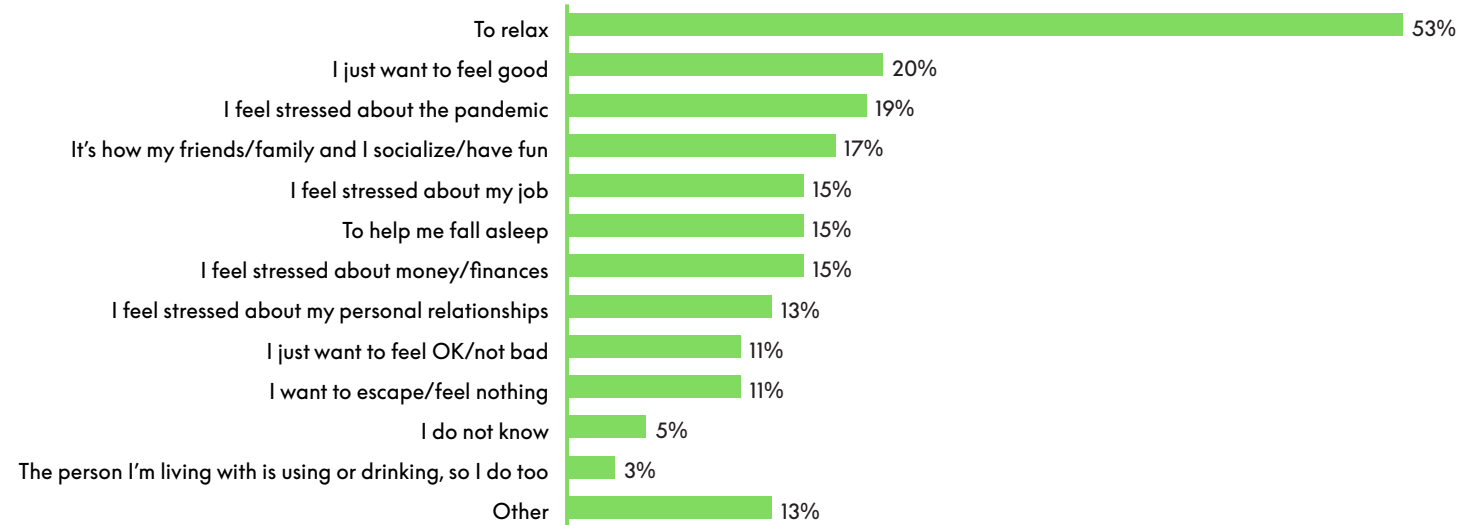
MHI score by regret over spending on alcohol or drugs



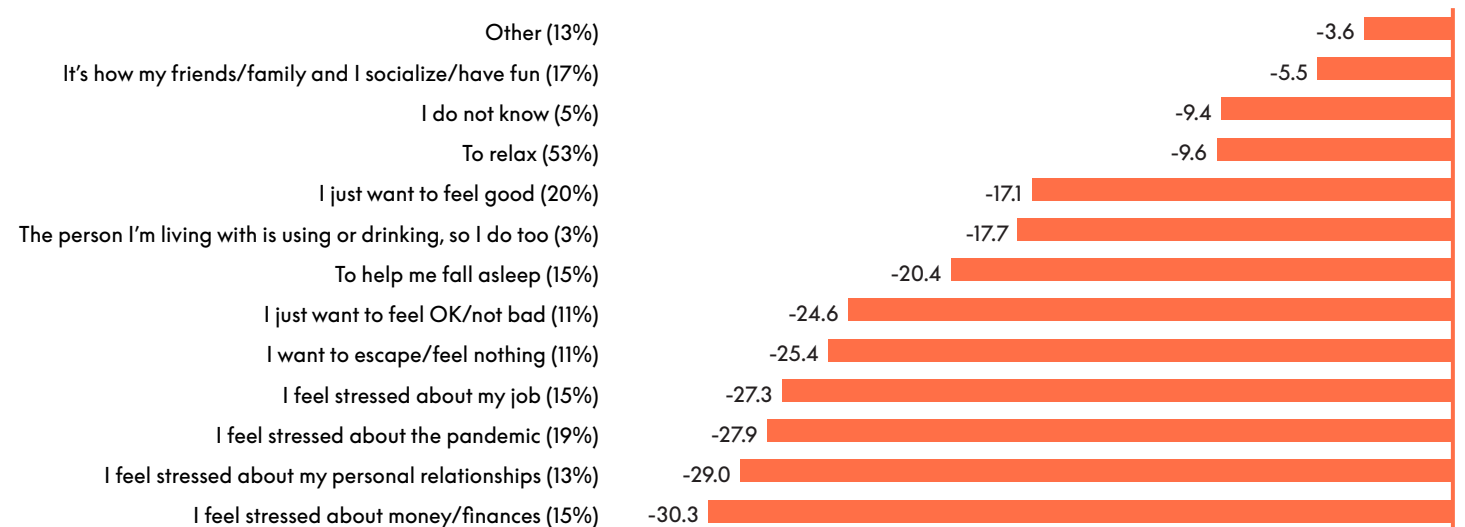
Reasons for alcohol or drug use

- Among those who consume alcohol or drugs, more than half (53 per cent) use alcohol or drugs to relax, twenty per cent to feel good, and nineteen per cent because of stress due to the pandemic.
- Fifteen per cent report that stress about money/finances is the reason they use alcohol or drugs, and this group has the least favourable mental health score (-30.3).

Reason for use of alcohol or drugs



MHI score by reasons for use of alcohol or drugs



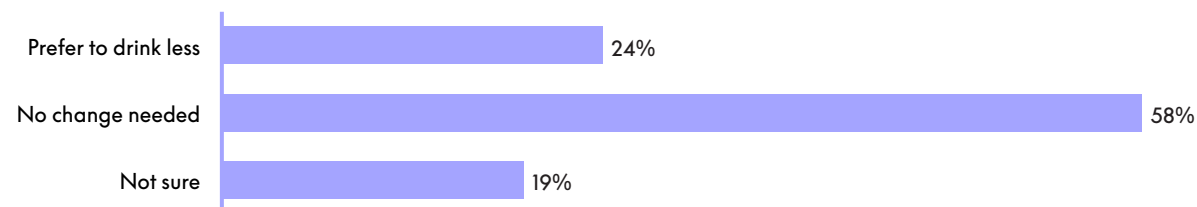
Reducing substance use

Reducing alcohol use

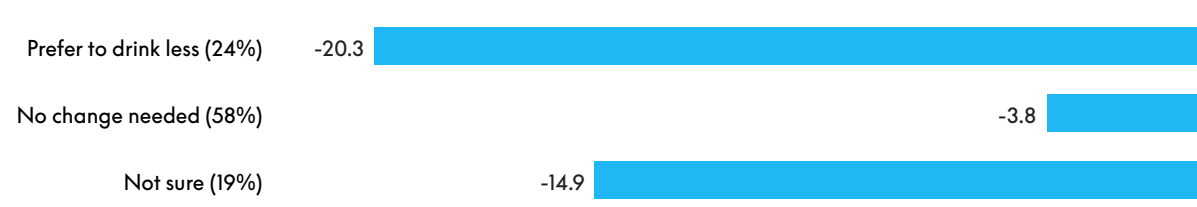
Respondents who use alcohol were asked whether they would prefer to drink less than they currently do.

- Nearly one-quarter (24 per cent) would prefer to drink less than they currently do, and this group has the least favourable mental health score (-20.3).
- Fifty-eight per cent report that they do not need to change their alcohol use and this group has the most favourable mental health score (-3.8).
- As the number of drinks per week increases, so does the percentage of people reporting that they want to drink less. Sixty-two per cent of people that consume 15 or more drinks per week would prefer to drink less compared to twelve per cent that consume 1-3 drinks per week.

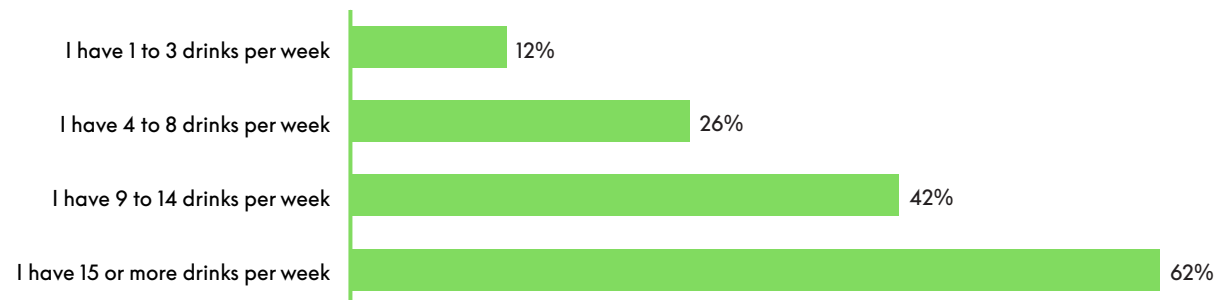
I would prefer to drink less than I currently do



MHI score by I would prefer to drink less than I currently do



I would prefer to drink less

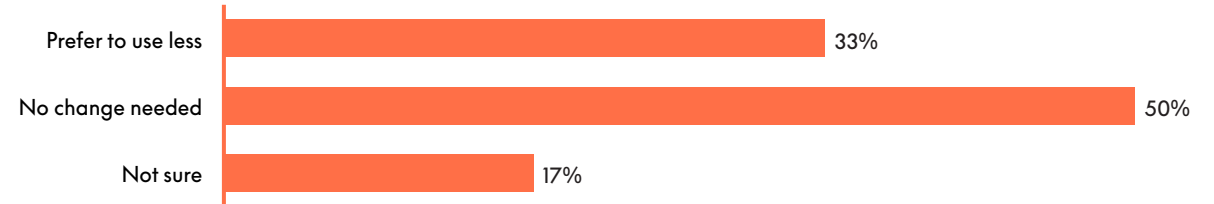


Reducing drug use

Respondents who use recreational cannabis at least once per week or who use illicit drugs alcohol were asked whether they would prefer to use less than they currently do.

- One-third (33 per cent) would prefer to use drugs less than they currently do and this group has the least favourable mental health score (-24.7).
- Half indicate that they do not need to change their drug use and this group has the most favourable mental health score (-12.4), although it remains below the overall mental health score (-11.2).
- Those who use recreational cannabis 4-6 times per week are most likely to want to use less than they do compared to other users.

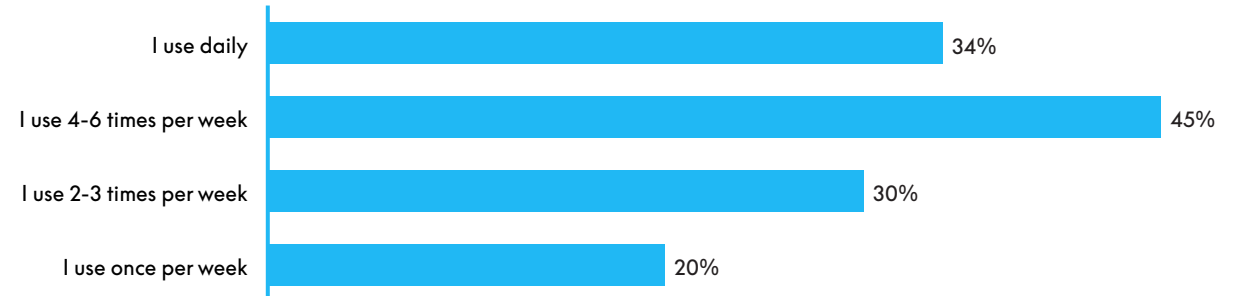
I would prefer to use drugs less than I currently do



MHI score by I would prefer to use drugs less than I currently do



I would prefer to use drugs less than I currently do

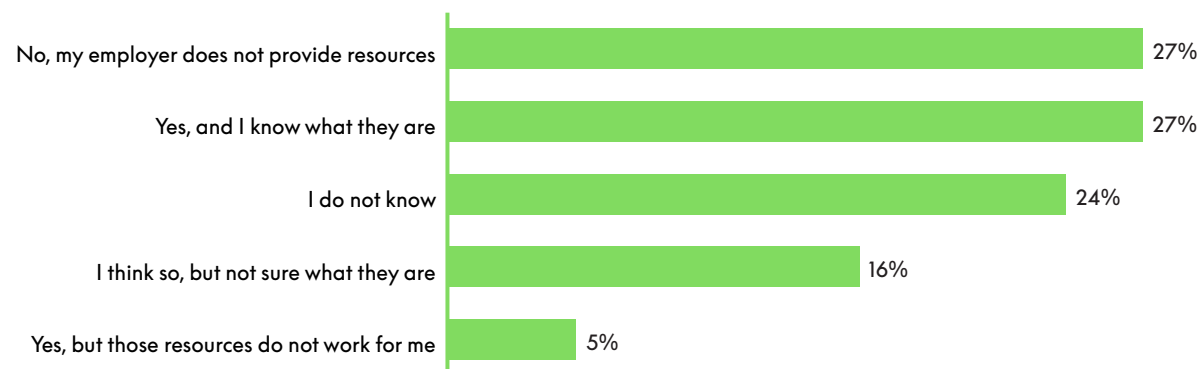


Employer resources for substance abuse

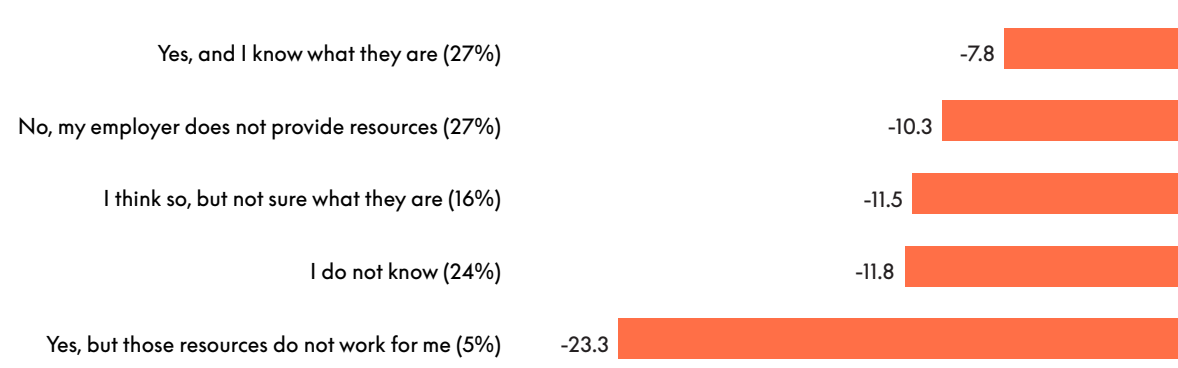
Respondents were asked whether their employer has resources to help with problem drinking or drug use.

- An equal number of people report that their employer does (27 per cent) or does not (27 per cent) provide resources to help with problem drinking or drug use.
- Forty per cent either do not know whether their employer offers any resources or are not sure what is offered.
- The least favourable mental health score is among five per cent who report that their employer does provide resources, but they do not work for them (-23.3).
- Parents are three times more likely to report that employer-provided resources do not work for them than non-parents.
- Managers are three times more likely to report that employer-provided resources do not work for them than non-managers.

Employer resources to help with problem drinking or drug use



MHI score by employer resources to help with problem drinking or drug use



Concern about drinking or drug use of someone in the household

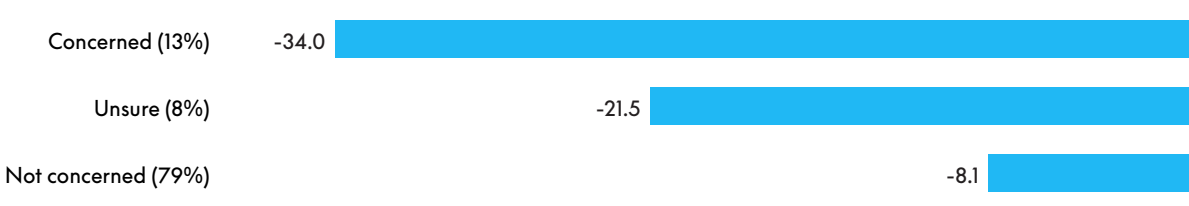
Respondents were asked if they were concerned about the drinking or drug use of someone in their household.

- Nearly eighty per cent (79 per cent) have no concerns and this group has the highest mental health score (-8.1)
- Thirteen per cent of people are concerned about the drinking or drug use of someone in their household and this group has the least favourable mental health score (-34.0), a figure more than 20-points below the overall average (-11.2).
- Parents are twice as likely to report concern about the drinking or drug use of someone else in their household than non-parents.

Concern about drinking or drug use of someone in the household



MHI score by concern about drinking or drug use of someone in the household



Overview of the Mental Health Index by LifeWorks™

The mental health and wellbeing of a population is essential to overall health and work productivity. The Mental Health Index™ provides a measure of the current mental health status of employed adults in each geography compared to benchmarks collected in 2017, 2018 and 2019. The increases and decreases in the MHI are intended to predict cost and productivity risks and inform the need for investment in mental health support by business and government.

The Mental Health Index™ report has three parts:

1. The overall Mental Health Index™ (MHI), which is a measure of change compared to the benchmark of mental health and risk.
2. A Mental Stress Change (MStressChg) score, which measures the level of reported mental stress compared to the prior month.
3. A spotlight section that reflects the specific impact of current issues in the community.

Methodology

Data for this report is collected through an online survey of 3,000 Canadians who are living in Canada and are currently employed or who were employed within the prior six months. Participants are selected to be representative of the age, gender, industry, and geographic distribution in Canada. The same respondents take part each month to remove a sampling bias. Respondents are asked to consider the prior two weeks when

answering each question. The Mental Health Index™ is published monthly starting in April 2020. Benchmark data was collected in 2017, 2018 and 2019. Data for the current report was collected between April 24 to May 6, 2021.

Calculations

To create the Mental Health Index™, the first step leverages a response scoring system turning individual responses to each question into a point value. Higher point values are associated with better mental health and less mental health risk. Everyone's scores are added and then divided by a total number of possible points to get a score out of 100. The raw score is the mathematical mean of the individual scores.

To demonstrate change, the current month's scores are then compared to the benchmark and the prior month. The benchmark comprises data from 2017, 2018 and 2019. This was a period of relative social stability and steady economic growth. **The change compared to the benchmark is the Mental Health Index™. A score of zero in the Mental Health Index™ reflects no change, positive scores reflect improvement, and negative scores reflect decline.**

A Mental Stress Change score is also reported given that increasing and prolonged mental stress is a potential contributor to changes in mental health. It is reported separately and is not part of the

calculation of the Mental Health Index™. The Mental Stress Change score is (percentage reporting less mental stress + percentage reporting the same level of mental stress * 0.5) * -1 + 100. The score reflects a comparison of the current to the prior month. **A Mental Stress Change score of 50 reflects no change in mental stress from the prior month. Scores above 50 reflect an increase in mental stress and scores below 50 reflect a decrease in mental stress.** The range is from zero to 100. A succession of scores over 50, month over month, reflects high risk.

Additional data and analyses

Demographic breakdown of sub-scores, and specific cross-correlational and custom analyses, are available upon request. Benchmarking against the national results or any sub-group is available upon request. Contact MHI@lifeworks.com



About LifeWorks

LifeWorks is a global leader in delivering technology-enabled solutions that help clients support the total wellbeing of their people and build organizational resiliency. By improving lives, we improve business. Our solutions span employee and family assistance, health and wellness, recognition, pension and benefits administration, retirement and financial consulting, actuarial and investment services. LifeWorks employs approximately 7,000 employees who work with some 24,000 client organizations that use our services in more than 160 countries. LifeWorks is a publicly traded company on the Toronto Stock Exchange (TSX: LWRK).

For more information, visit:

 [LifeWorks.com](https://www.lifeworks.com)

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About the Hazelden Betty Ford Foundation

The Hazelden Betty Ford Foundation is a force of healing and hope for individuals, families and communities affected by addiction to alcohol and other drugs. As the nation's leading nonprofit provider of comprehensive inpatient and outpatient addiction and mental health care for adults and youth, the Foundation has treatment centers and telehealth services nationwide as well as a network of collaborators throughout health care. With a legacy that began in 1949 and includes the 1982 founding of the Betty Ford Center, the Foundation today also encompasses a graduate school of addiction studies, a publishing division, an addiction research center, recovery advocacy and thought leadership, professional and medical education programs, school-based prevention resources and a specialized program for children who grow up in families with addiction.

For more information, visit:

 www.HazeldenBettyFord.org

 twitter.com/hazldnbettyfords