

Metis Health Knowledge Authority in Manitoba

Depression, Anxiety Disorders, and Related Health Care Utilization in the Manitoba Metis Population Summary Report - 2013

Sanguins, J., Bartlett, J.G., Carter, S., Hoeppner, N., Mehta, P. & Bassily, M.

What are depression and/or anxiety disorders?

Depression and/or anxiety disorders are chronic diseases of increasing prevalence in Canada and worldwide. Broadly, depression involves a persistent status of sad mood that limits the functional ability of the individual. Anxiety disorders include having self-controlled feelings of fear, discomfort and dread. There are many variations of both diseases.

Why do this study?

This report arose from concerns voiced by Metis for more details on depression and/or anxiety disorders than are available in the first Metis population health report in Canada, the 'Profile of Metis Health Status and Healthcare Utilization in Manitoba'. That study showed that the rates of depression were similar in Metis and All Other Manitobans at the provincial level (22.0% vs. 20.4%). However, rates of depression in Metis were higher compared to All Other Manitobans in 7 out of the 11 Regional Health Authorities (RHAs) and in 10 out of the 12 Winnipeg Community Areas (CAs). In addition, the provincial prevalence of anxiety disorders was higher in Metis compared to All Other Manitobans (9.4% vs. 8.0%) and in 8 out of the 11 RHAs and in 6 out of 12 Winnipeg CAs.

In the new five-section report, Depression, Anxiety Disorders and Related Health Care Utilization in the Manitoba Metis Population', an in-depth examination of depression and/or anxiety disorders is provided. We present information on illness, health services use, and use of prescription drugs for Metis in Manitoba with depression and/or anxiety disorders.

What did we ask?

In this report we addressed the following questions: Are there differences between Metis and All Other Manitobans with depression and/or anxiety disorders based on where they live, their age, their sex and/or their income? Are some Metis better off or worse off than other Metis with different age, sex, household income, and geographical areas?

Provincially, more Metis have depression and/or anxiety disorders compared to All Other Manitobans (24.4% vs. 22.6%)

Who was studied?

This population-based study includes every person living in Manitoba who had a provincial health card during the years of the study. The Metis Population Database contains data about 73,000 Metis individuals. For privacy issues, all identifiers to these individuals are removed from the database. Included in the study were only those who were 10 years of age and older for a total of 14,447 Metis. Selected Health Indicators for Metis and All Other Manitobans with depression and/or anxiety disorders

Health indicator (age- and sex- adjusted)	Provincial Metis rate	Provincial All Other Manitobans rate	% difference of Metis compared to All Other Manitobans (+ higher / - lower)
Depression and/or Anxiety Disorders	24.4%	22.6%	+8.0%
Anxiety Disorders	9.3%	8.0%	+16.3%
Substance Abuse	13.8%	10.5%	+31.4%
Hospital Separation due to depression and/or anxiety disorders	56.8 per 1,000 residents	42.9 per 1,000 residents	+32.4%

What did we find?

We found that there are some important differences. The table above displays some of these differences. Metis are more likely to develop depression and/or anxiety disorders compared to All Other Manitobans in Manitoba (24.4% vs. 22.6%). Metis are 1.2 times more likely to have anxiety disorders, and 1.3 times more likely to be diagnosed with substance abuse compared to All Other Manitobans in Manitoba. Even after adjusting for factors such as age, income, and geography, Metis are at a greater risk for developing depression and/or anxiety disorders, and substance abuse, compared to All Other Manitobans in Manitoba.

Because of the observed higher prevalence of depression and/or anxiety disorders in Metis, we believed that utilization of mental health services would be higher among Metis. What we found is that, except for the hospital separation rate due to depression and/or anxiety disorders, there were no differences in health services use between Metis and All Other Manitobans at the provincial level. The lack of differences in health services use suggests that Metis may not be receiving adequate treatment for depression and/or anxiety disorders at the primary care level. This finding may suggest that Metis are diagnosed later and because of that require hospitalization.

Differences exist based on income. Generally, urban and rural Metis have a higher prevalence of depression and/or anxiety disorders compared to All Other Manitobans at all incomes. Metis have a higher hospital separation rate for depression and/or anxiety disorders in the lowest urban income quintile.

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Where do we go from here?

This study is expected to assist in improvement of the health and well-being of Metis in Manitoba. Our Regional Knowledge Networks are currently working together to adapt Manitoba Health programs to better meet Metis needs. These Knowledge Networks will use the results of this study in determining priority areas to further develop health policy, programs, and services for Metis in Manitoba

Want the complete report? You can download the full report from our website: http://health.mmf.mb.ca or contact the Health & Wellness Department:

Email: hwdinfo@mmf.mb.ca Phone: (204) 586-8474 x 378 Fax: (204) 927-8341 Mail: 201-150 Henry Ave, Winnipeg, Manitoba R3B 0J7