

“**All Ontarians deserve access to basic elements of a safe and health life...employment.**”

(Open Minds, Healthy Minds)

Individuals with mental illness are much less likely to be employed. 71% of Canadians age 12 or older with common mental health conditions were employed in 2011/2012 compared to 82.5% of the general population. “Participation in the workforce is an important aspect of recovery and wellbeing among people with mental illness” (p.47, Mental Health Commission of Canada, Mental Health Indicators for Canada).

People with precarious employment, particularly those in middle and low income households, experience higher levels of income stress (Poverty and Employment Precarity in Southern Ontario, PEPSON, 2015).

Workplace Stress/Supportive Workplaces

INDICATOR/SOURCE	DATA	NOTES
<p>Per cent of people age 25 to 64 in Ontario that worked over the past year and reported that most days at work are quite a bit stressful or extremely stressful</p> <p>SOURCE: Statistics Canada CANSIM TABLE 105-1101</p>	<p>Ontario (2012)</p> <p>Both sexes: 31.2% Males: 28.7% Females: 42.9%</p>	<p>Workplace stress and mental health problems are related. Increasing numbers of people reporting work-related stress today may mean increasing levels of mental illness disability in the future. (Mental Health Commission of Canada)</p>
<p>Mental illness-related disability claims</p> <p>The percentage of Canadian Pension Plan (CPP) disability beneficiaries whose claims were related to mental disorders</p> <p>SOURCE: Mental Health Commission of Canada. (Informing the Future Technical Report and Mental Health Indicators for Canada Final Report)</p>	<p>99,203 Canadians received CPP disability benefits as a result of a mental disorder diagnosis in 2013, representing 30.4% of all claims. As a proportion, this figure has steadily increased since 2004.</p> <p>In Canada, short- and long-term disability claims related to mental illness accounted for 30% of claims and 70% of the cost.</p>	<p>Disability claims related to mental illness have been increasing since 2004. This could mean more people are unable to work due to mental illness or it could mean that more claims are accepted as a legitimate reason for disability because of decreasing stigma. (Mental Health Commission of Canada)</p>

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Additional Information

INDICATOR/SOURCE	DATA
<p>Bell Let's Talk: Workplace Health</p> <p>http://letstalk.bell.ca/en/our-initiatives/pillars/workplace-health/</p>	<p>“Mental health is the leading cause of workplace disability in Canada and represents 15% of Canada’s burden of disease. With 500,000 Canadians missing work on any given week because of a mental illness, mental health problems and illnesses cost the Canadian economy at least \$50 billion per year.”</p> <p>Bell is working with corporate Canada and the health care community to develop and adopt mental health best practices in the workplace.</p> <p>A free copy of the standards can be downloaded from the CSA Group at www.csa.ca/z1003</p>
<p>Centre for Addiction and Mental Health (CAMH)</p> <p>http://www.camh.ca/en/hospital/about_camh/newsroom/for_reporters/Pages/addictionmentalhealthstatistics.aspx</p>	<p>In 2015:</p> <p>64% of Ontario workers would be concerned about how work would be affected if a colleague had a mental illness.</p> <p>39% of Ontario workers indicate they would not tell their managers if they were experiencing a mental health problem.</p>
<p>United Way London & Middlesex</p> <p>United Way Workplace Initiative</p>	<p>2014: 12 companies representing 20,000 employees participated in Meeting the Standard, A Mental Health in the Workplace pilot project.</p> <p>“The ripple effect of this pilot program is significant. It will help reduce stigma and discrimination, and increase understanding and response to the needs of individuals dealing with mental health issues among the nearly 20,000 employees who work for the 12 participating organizations.” (United Way)</p> <p>“The group’s diversity contributed to the success of the pilot program. We all had a vested interest in the topic and wanted to make a difference in our workplaces” (Participant, United Way Workplace Initiative).</p>
<p>University of Guelph. “Farmers Need, Want Mental Health Help: Survey” (Online News Release. June 28, 2016. Accessed June 30, 2016)</p> <p>http://news.uoguelph.ca/2016/06/farmers-need-want-mental-health-help-survey/</p>	<p>Canadian farmers are more likely than other groups to experience common mental health problems and may not seek help because of concerns about stigma and lack of support from the industry.</p> <ul style="list-style-type: none"> • Stress (45%), anxiety (58%), depression (35%), emotional exhaustion and burnout are all higher among farmers than among other groups • Barriers to getting help: concern about “what people might think” (40%), stigma (31%), don’t believe there is adequate mental health support from industry (<50%) • Resulting initiative: mental health literacy training program for farmers which would train people to recognize and respond to mental distress, and reduce stigma around mental health issues in Ontario’s agricultural sector

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Labour Market Engagement

INDICATOR/SOURCE	DATA
<p>Access to Employment, individuals age 25 to 64, London Census Metropolitan Area (CMA)</p> <p>London Experiences a Lost Decade of Meaningful Employment. Dr. Don Kerr, Department of Sociology, King's University College at Western University. Report downloaded from London's Poverty Research Centre</p> <p>http://povertyresearch.ca/wp-content/uploads/2016/02/Statistics-Data-Londons-lost-decade.pdf</p>	<p>25 to 64 year olds, 2015:</p> <p>75.3% employed compared to 78.7% in 2005 64.6% are employed full time 10.7% are employed part time</p> <p>"In 2015, only about 2/3 of Londoners age 25 to 64 have a full-time job."</p> <p>Comparing 2005 to 2015:</p> <p>Relatively fewer 25 to 44 year olds are working and relatively more people age 55+ are working.</p> <p>25 to 44, 2005: 83.5% 25 to 44, 2015: 79.8% 55 to 64, 2005: 51.7% 55 to 64, 2015: 63.2% 65+, 2005: 4.4% 65+, 2015: 13%</p> <p>13,000 more people age 18 to 44 are not working and 5,100 more people age 45 to 64 are not working.</p> <p>Lost 5,400 full time jobs</p>
<p>Employment rate, individuals age 15 and over Middlesex County</p> <p>Provided through the Community Data Program by Emilian Simans</p> <p>Workforce Planning Development Board</p>	<p>Labour Force Survey 2 Year Estimates</p> <p>2010/11: 59.3 2011/12: 58.9 2012/13: 58.7 2013/14: 57.8 2014/15: 58.9</p>

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Quality of Work: Precarious Employment and Working Poor

SOURCE	NOTES
<p>The Precarity Penalty. The Impact of Employment Precarity on Individuals, Households and Communities, and What to do About It. (PEPSO, 2015)</p>	<p>Being precariously employed increases the chances of having feelings of depression, anxiety and stress. It can interfere in family life. While these effects are most pronounced in low-income households, middle-income households are hurt too.</p> <p>“Workers in precarious employment [in Southern Ontario] are almost twice as likely to report poorer mental health than those in secure employment” (p. 9).</p> <p>Nearly 44% of Greater Toronto and Hamilton Area (GTHA) workers age 25 to 65 are working in jobs with some degree of precarity.</p> <p>36.7% of people with precarious employment said their mental health was less than very good compared to 19.9% of people with secure employment.</p>
<p>Maps You’ll Never Find at the Gas Station. Ontario’s Working Poor in OnPolicy. (Canadian Centre for Policy Alternatives, CCPA. Summer 2016.)</p> <p>https://www.policyalternatives.ca/publications/reports/onpolicy-ontarios-working-poor</p>	<p>6.3% of workers in London between ages 18 and 64 are “working poor.”</p> <p>“Among Ontario cities, London stands in second place [behind Toronto], with a working poverty rate of 6.3%.”</p> <p>Some solutions to the problems of working poverty:</p> <ul style="list-style-type: none">• Improve food security• Provide dental benefits for the working poor• Raise the minimum wage to \$15 an hour• Tackle precarity in the workplace• Improve working conditions for low-wage work. <p>Working poor is defined as: individuals between 18 and 64, non-students and living on their own. Working status refers to persons having earnings of \$3,000 or more. Poor status refers to individuals with census family income below the Low Income Measure (LIM). Data source is annual taxfiler data.</p>
<p>Joyce, K., Pabayo, R., Critchley, J.A., & Bamba, C. (2010). Flexible working conditions and their effects on employee health and wellbeing. <i>Cochrane Database of Systematic Reviews</i>, 2010(2), Art. No.: CD008009.</p>	<p>Flexible working conditions are increasingly popular, but the effects on employee health and wellbeing are largely unknown. Early studies suggest that flexible working interventions that increase worker control and choice (such as self-scheduling or gradual/partial retirement) are likely to have a positive effect on health outcomes. However, contract and involuntary part-time employment may have uncertain or negative health effects.</p>