



**Public Health
Santé publique**



Child and Youth Data in Ottawa's Mental Health, Addictions, and Substance Use Health Community Dashboard: A Navigation Tool

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Introduction

Access to reliable and applicable data is crucial for developing effective programming for children and youth. The Mental Health, Addictions and Substance Use Health Community dashboard is a dynamic and interactive data visualization tool that provides local data which presents insights into Ottawa's experiences, needs and services. Drawing from diverse sources, including collaborations with local service providers, the dashboard compiles comprehensive information on mental health, addictions, substance use health, harm reduction services and underlying causes of poor health.

This data serves as essential evidence for service providers and community groups, enabling an understanding of the issues, identification of needs, gaps and opportunities, and facilitating informed planning and implementation of targeted actions. The dashboard encompasses a spectrum of sociodemographic data, including emphasizing child and youth-related information drawn from multiple sources. Data sources include the Ontario Student Drug Use and Health Survey, the Kids Come First health team and other system navigators AccessMHA, ConnexOntario and 211, hospital records and data representing rural youth from the Rural Ottawa Youth Mental Health Collective.

The purpose of this navigation guide is to highlight where child and youth specific data can be found within the dashboard. For helpful tips on how to use the dashboard and understand the data, visit the [User Guide](#).

To fully view and interact with the data it is necessary to visit the dashboard.

Click on the link below to view the dashboard:

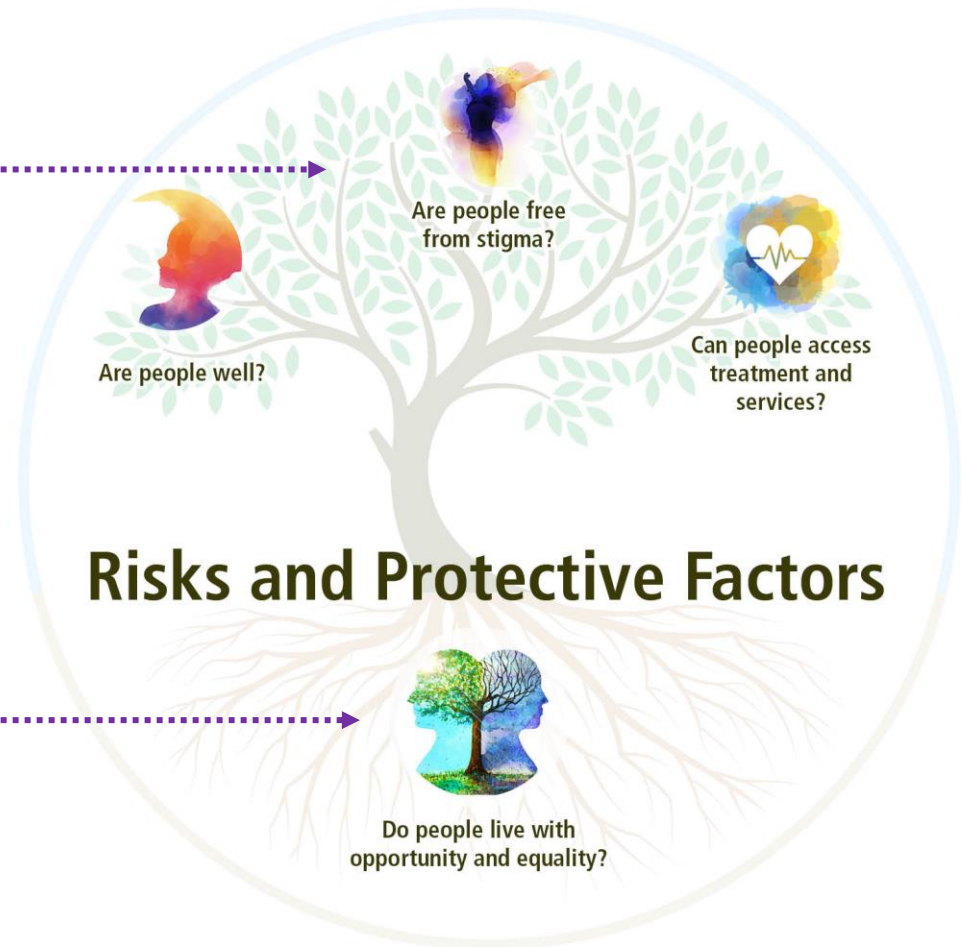
OttawaPublicHealth.ca/WellnessDashboard

Table of Contents

- **How the dashboard is framed**
- **“Are People Well?” section**
 - ❑ [Table of contents of child and youth data found in this section](#)
 - ❑ Examples of data
- **“Can People Access Treatment and Services?” section**
 - ❑ [Table of contents of child and youth data found in this section](#)
 - ❑ Examples of data
- **“Do People Have Access to Opportunity and Equality?” section**
 - ❑ [Table of contents of child and youth data found in this section](#)
 - ❑ Examples of data

How the dashboard is framed

The dashboard is framed by 4 domains. The 3 domains represented in the leaves of the tree have data directly related to mental health, addictions and substance use health. Domain 4 in the roots of the tree has data related to the root causes of poor health.



Are People Well? Section



Child and Youth Data: Are People Well?

Table of Contents

Do people feel well?

- Self-reported mental health among youth pre 2019 and post 2019
- Self-reported substance use among youth, by type of substance, and by type of substance and group
- Self-reported gambling among youth

Do people have access to preventative supports?

- Access to a regular primary healthcare provider for youth
- Youth who want mental health supports, but don't know where to turn

Are people experiencing harms from unmet needs?

- Emergency Department (ED) visits for mental health and substance use health concerns among children and youth
- Self-harm related ED visits among children and youth
- Opioid related deaths among youth
- Suicide rates among youth

Child and Youth Data Example

Are people experiencing harms from unmet needs?

Where this data can be found?

Age-specific rates (per 100,000 Ottawa residents) of ED visits for any mental health or substance use health condition



Data notes: Denominators used to calculate rates are population estimates (2011-2020) and projections (2021) from Statistics Canada.

Data source: National Ambulatory Care Reporting System (NACRS), 2022

Can People Access Treatment and Services? Section



Child and Youth Data: Can People Access Treatment and Services?

Table of Contents

Do people have access to harm reduction services?

- Number of youth accessing supervised consumption and treatment services

Are people getting brief counselling and being referred to the services they need?

- Youth who saw a doctor, nurse or counsellor about their mental health
- Youth who used a crisis helpline or website

Can people get services when and where they need them?

- Ottawa residents reaching out to system navigators for mental health (MH), substance use health (SUH) or behavioural addictions (BA), including children and youth
- Reasons for reaching out, including children and youth
- Age of clients reaching out for MH, SUH or BA
- Top presenting problems when connecting with system navigators

Are people and families supported by all the health and social services they need?

- Number of individuals reaching out for child and youth mental health (MH) and substance use health (SUH) and reason for reaching out
- Age of clients reaching out for child and youth MH and/or SUH supports by region
- Clients level of need by region
- Language of service
- Client racial and gender identity
- Barriers to accessing mental health supports for rural youth

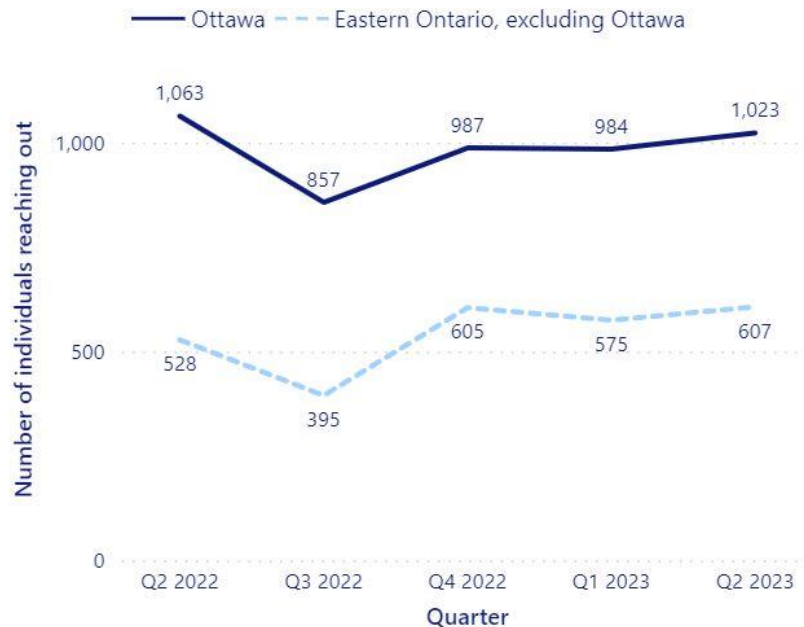
Child and Youth Data Example



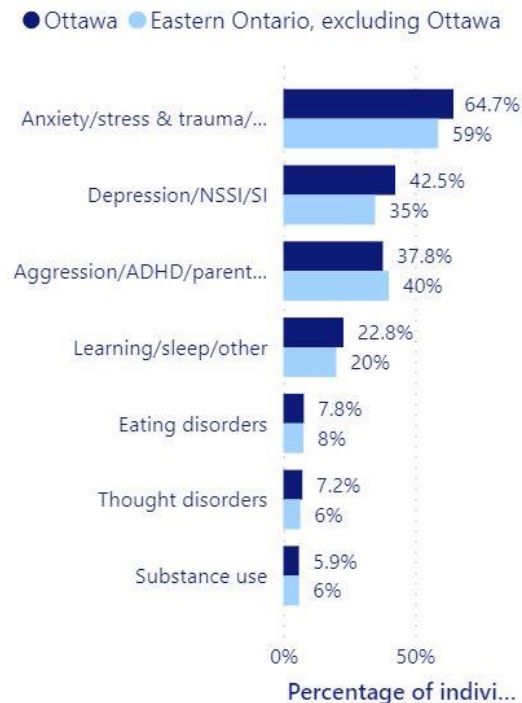
Are people and families supported by all the health and social services they need?

Where this data can be found?

Individuals reaching out for child and/or youth mental health (MH) and substance use health (SUH) supports by quarter and region



Reasons for reaching out



Data notes:

- Individuals may have multiple reasons for reaching out, thus categories are not mutually exclusive.

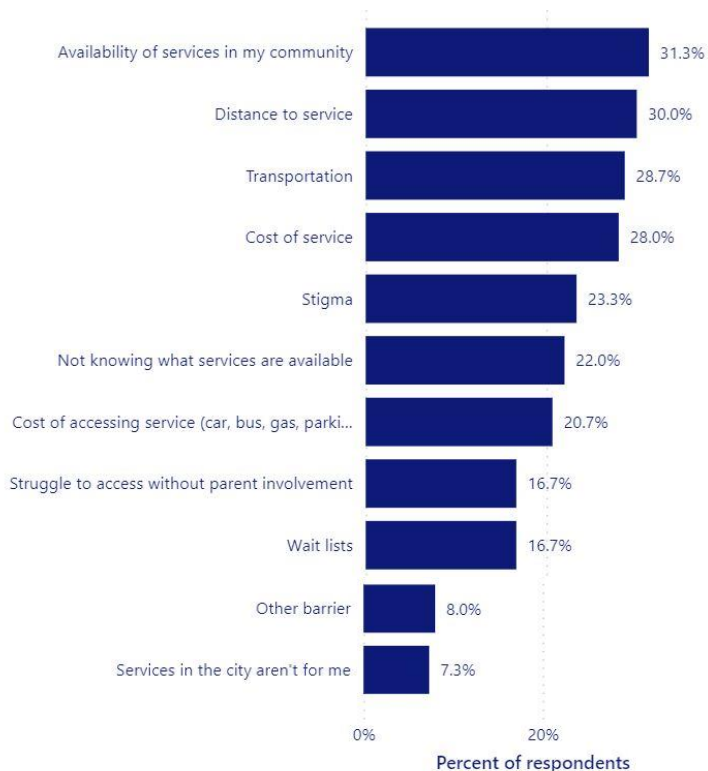
Data source: 1Call1Click.ca, April 2022 to June 2023.

Child and Youth Data Example

Select subgroup:

- Black
- Francophone
- Identity as LGBTQ2S+**
- New immigrant
- Person living in low income
- Person of Colour
- Person with a learning disability
- Person with a physical disability

Self-reported or perceived barriers to accessing mental health supports by subgroup



Are people and families supported by all the health and social services they need?

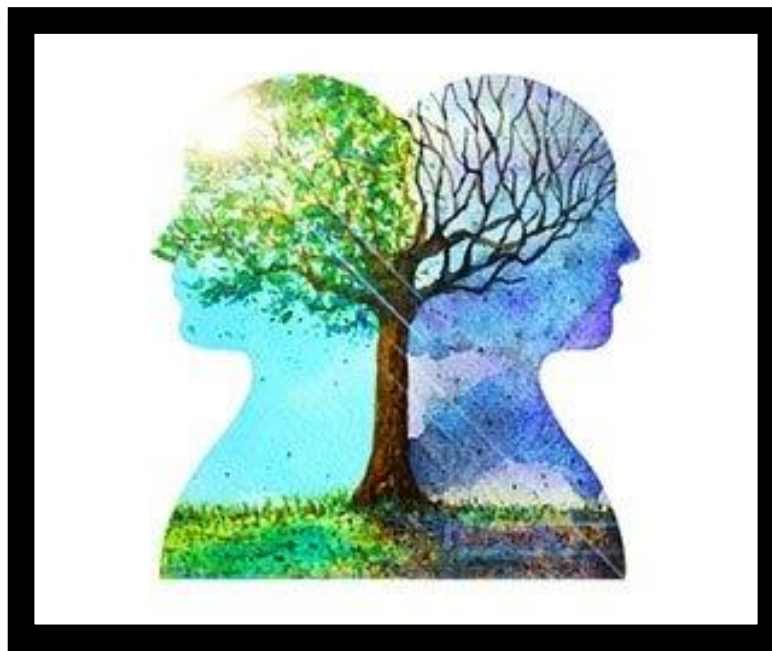
Where this data can be found?

Data notes:

- Data have been combined from surveys administered in 2021 and 2023.
- The denominators used for percent of respondents is the total number of respondents for each community group in the 2021 and 2023 survey.
- Data have been suppressed if the number of respondents was less than 10.
- The question was framed differently in 2021 compared to 2023. In 2021, youth were asked "What do you think is the biggest barrier to rural youth getting the mental health supports they need?". This was an open text field which was categorized during analysis of the data. In 2023, the question was framed as "What do you think are the barriers to rural youth getting the mental health support they need?". Youth were able to multi-select from a list of 11 barriers, including an other option where they could specify a barrier not listed.

Data source: Rural Ottawa Youth Mental Health Collective Surveys, 2021, 2023. To learn more visit ruralottawayouth.ca

Do People Live With Opportunity and Equality? Section



Child and Youth Data: Do People Live With Opportunity and Equality?

Section

Table of Contents

Are children and their families safe and well?

- [Developmental health at school entry](#)
- [Food insecurity for families and youth in Ottawa](#)
- [Youth who reported going to school or bed hungry](#)
- [Youth who reported feeling safe at school](#)
- [Youth who reported being bullied](#)

Do people have what they need?

- [Self-reported life satisfaction among youth](#)
- [Experiences of homelessness among youth](#)

Do people feel connected to each other?

- [Self-reported sense of community belonging among youth](#)
- [School connectedness among youth](#)
- [Social media and screen use among youth](#)

Do people live in safety and equity?

- [Health challenges and safety concerns within the youth homeless population](#)

Child and Youth Data Example

Select question:

Daily hours of recreational time spent using screens

Daily hours of social media use

Select response:

2 hours or less

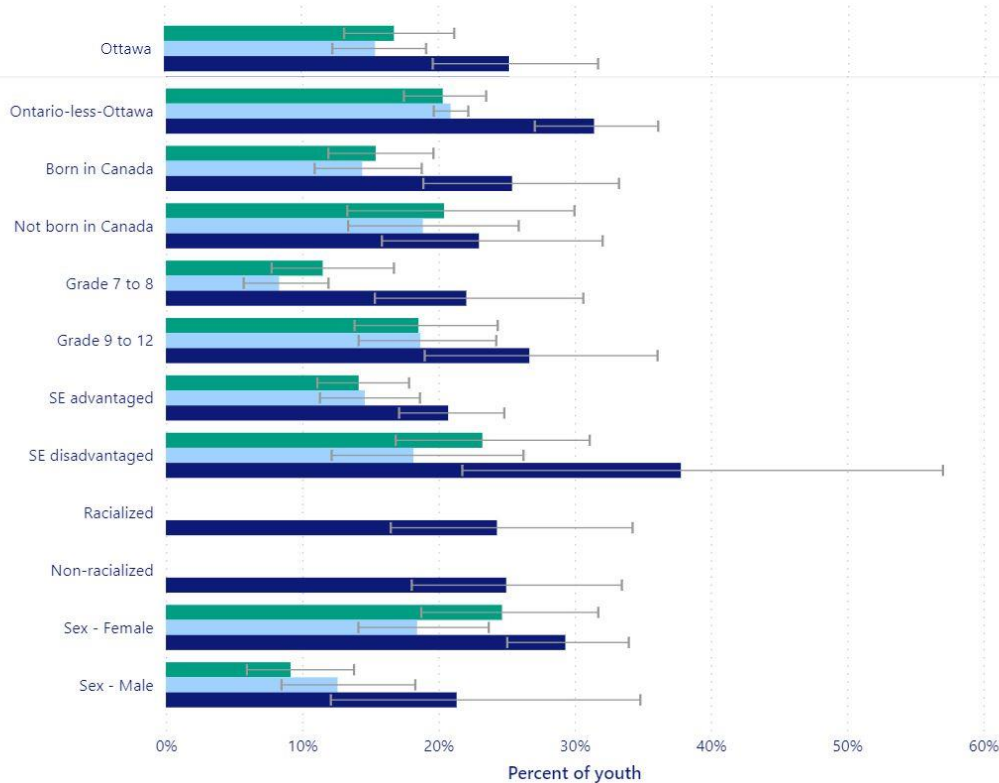
3-4 hours

5 or more hours



Youth self-reported daily hours (5 or more hours) of social media use by subgroup

Year ● 2017 ● 2019 ● 2021



Do people feel connected to each other?

Where this data can be found?

Data notes:

- Recreational screen time is defined as use of free time of any device such as TV, computer, tablet, phone, wearable technology, etc., while doing activities such as texting, gaming, watching tv/movies/videos, posting, scrolling/surfing.
- Youth were asked to rate on a scale of 1 to 10 whether they perceived themselves to be worst off (of socioeconomic (SE) disadvantage; rated as 1 to 6) or best off (of SE advantage; rated as 7 to 10).
- Data which should be interpreted with caution due to moderate sampling variability (coefficient of variation (CV) between 16.5 and 33.3) are indicated as such when the cursor is placed over a bar in the graph. If sampling variability is high (CV over 33.3%), data have been suppressed.
- Comparisons between 2021 and other years of OSDUHS data should be interpreted with caution because of differences in how the survey was administered (online in 2021 vs. on paper at school in other years) and the lower response rate in 2021.

Data source: Ontario Student Drug Use and Health Survey (OSDUHS), 2017, 2019, 2021