

SURVEY RESULTS ON MENTAL HEALTH IMPACTS OF COVID-19 IN NEW BRUNSWICK



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PROJECT TITLE

Survey Results on Mental Health Impacts of COVID-19 in New Brunswick

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EXECUTIVE SUMMARY

SURVEY RESULTS ON MENTAL HEALTH IMPACTS OF COVID-19 IN NEW BRUNSWICK

When the pandemic reached New Brunswick, the number one priority was, and continues to be, limiting the spread of COVID-19 to avoid overwhelming our health care system and to keep our communities safe and healthy. However, as the virus will continue to impact us for the long term, it is becoming clear that the necessary measures taken over the last year, such as stay-at-home orders, physical distancing, reducing close contacts and work interruptions, have varying impacts on our population's mental health.

This research seeks to describe the impacts that specific physical, social, or economic factors are having on the mental health of New Brunswickers overall, as well as for specific subgroups in our communities.

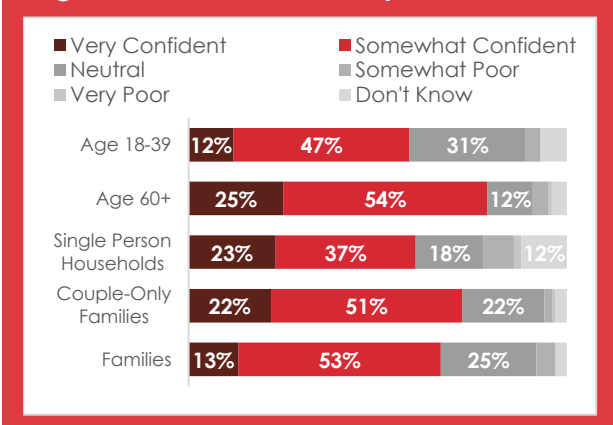
In August 2020, Pollara Strategic Insights and Mental Health Research Canada carried out an online survey asking New Brunswickers to indicate the impact a particular factor had on their mental health. Our research analyzes responses to questions regarding social and economic factors and recreational activities.

We also examine survey questions on changes in the frequency of respondents' negative behaviours, such as cannabis use, alcohol use, and household conflict, as well as on perceptions of confidence in their ability to recover from the challenges of the pandemic.

We find that the economic downturn negatively impacted the mental health of nearly half of New Brunswickers. Young adults, families with children, and those previously diagnosed with a mental health condition are among those most impacted by the possibility of being unable to pay their household bills.

We also find that New Brunswickers are more likely to report negative mental health impacts associated with the risk of a family member becoming infected with COVID-19, rather than the risk of themselves becoming infected.

Figure: Confidence in Ability to Recover*



However, despite the negative implications many of the changes to our daily lives have had on mental health of New Brunswickers, as shown in the Figure the large majority remain at least somewhat confident in their ability to recover. Seniors and couple-only families reported the most confidence whereas young adults and individuals with mental health conditions reported the least.

INTRODUCTION

To protect public health, Canadians have had to make drastic changes to their daily lives, such as minimizing their close contacts and social interactions to limit the spread of COVID-19. As these measures remain in place until the foreseeable future, health professionals fear the risk of an echo pandemic of mental health issues. [1] In a May 2020 *Statistics Canada* report, half of Canadians reported a worsening of their mental health and 10% said it worsened a lot since the onset of physical distancing. [2]

This is particularly alarming considering we are already experiencing a mental health crisis in Canada, with 1.6 million Canadians reporting unmet needs for mental health care. [3] Further deterioration of this troubling crisis is devastating, emphasizing the importance of identifying factors contributing to worse mental health. Greater understanding of the state of New Brunswickers' mental health can provide important insights into how resources can be most effectively allocated in a targeted and informed way to support our residents.

Factors contributing to negative mental health impacts of the pandemic have been identified on a national scale. These include anxiety about burdening the health care system, concern for vulnerable peoples' health and experiencing prolonged periods of social isolation. [4] However, as we have seen, each province is having a unique experience navigating the pandemic; thus, there may be different factors impacting mental health that warrant examination on a finer geographic scale. Within New Brunswick, mental health in certain population groups (such as seniors, those with diagnosed mental health conditions, or front-line workers) may be impacted differently than others by the same public health measures. The specific demographic characteristics defining population groups of interest for this report include:

Age: The broadest statements about how the pandemic has changed our daily lives include risks to health, job security, and social life, all of which tend to be vastly different across age groups and thus likely result in different experiences throughout the pandemic.

Household type: Stay-at-home orders and reduced social contacts mean for many an increased frequency of contact with household members. The composition of one's household provides a proxy for the extent of available support networks when under tight public health restrictions.

Diagnosed mental health conditions: A change in the manner and degree to which how mental health services are accessed given the restrictive public health measures means those with mental health conditions may experience difficulties accessing the resources needed, especially given the heightened uncertainty and stresses caused by the pandemic.

Front-line workers: Despite many workplaces shifting towards remote work, those occupying jobs deemed essential by the provincial government have had to continue to perform their job in person but with a plethora of added necessary protection measures and resulting stress.

The objective of this report is to describe the responses of 503 New Brunswickers to an online survey focused on mental health impacts of the pandemic, by age group, by household composition, in those with pre-existing mental health conditions and in front-line workers.

METHODS

This research is being conducted using research infrastructure at the NB Institute for Research, Data and Training (NB-IRDT). Positioned within UNB-Fredericton, NB-IRDT conducts objective, rigorous and evidence-based research, and program evaluation to support the Government of New Brunswick (GNB) in planning and policy development. NB-IRDT is also the sole provincial data custodian in New Brunswick, defined in legislation to provide access to linkable administrative datasets for research. We undertake research with the provincial government, academics, not-for-profit, and industry, including multi-year research contracts with the Departments of Health, Post-Secondary Education, Training and Labour (PETL), and Education and Early Childhood Development (EECD). The research team at NB-IRDT has expertise in health research and data analyses.

We received survey data from Pollara Strategic Insights (Pollara), a research company, that conducted a nation-wide online survey in partnership with Mental Health Research Canada (MHRC) from August 21st to 31st, 2020. The survey aimed to profile the mental health of Canadians through a series of questions about their current mental health. This was the second of 13 planned surveys conducted by Pollara and MHRC since the start of the pandemic. Funding from the New Brunswick Health Research Foundation (NBHRF) supported an oversampling of participants in New Brunswick. In total, data from 503 respondents in New Brunswick over age 18 were used in our analyses. Our analyses focused on three sets of questions relating to impacts on mental health, changes in frequency of negative behaviours and confidence in ability to recover. Each of the sets of questions are summarized for all respondents as well as for eight sub-populations defined by demographic characteristics.

Impacts on Mental Health: Respondents were asked to rate the level of impact, from very negative to very positive on a scale of 0 to 10, that various factors related to COVID-19 (e.g., risk of infection, social isolation) have had on their mental health. We classified the factors into the following three categories: social factors, economic factors, and recreational activities. For our analyses, participants responses were categorized as follows: very negative (0-1), somewhat negative (2-3), neutral (4-6), somewhat positive (7-8), and very positive (9-10).

Negative Behaviours: Respondents were also asked how the frequency of recreational substance use and household conflict has changed since the beginning of the COVID-19 pandemic, which included selecting one of six response options ranging from major or moderate decrease, remained the same, major or moderate increase and did not happen/do this before.

Confidence in Ability to Recover: Respondents provided a rating, from 0-10, on confidence in their ability to recover from the challenges and unexpected troubles from the pandemic. In our analyses, responses were categorized as follows: very poor (0-1), somewhat poor (2-3), neutral (4-6), somewhat confident (7-8) and very confident (9-10).

Population Sub-groups: The survey queried several demographic characteristics. We examined results by age group, by household composition, in those with a diagnosed mental health condition and front-line workers. Those with a diagnosed mental health condition were self-identified. Front-line workers were identified as those self-reporting occupations on the provincial government's list of essential services, which we obtained directly from the provincial government.

The sub-groups we included were selected to highlight those that are considered vulnerable based on available literature, such as seniors or those with mental health conditions. Another consideration when defining sub-groups to be included in the analysis was sample size. We decided *a priori* that sub-groups required a minimum sample size of 50 individuals to be included in our analysis, as certain groups contained too few individuals. For example, despite our interest, the inclusion of sub-groups identified as immigrants and as earning low income was not possible in our analyses due to small numbers.

We used descriptive analyses to summarize responses using percentages but did not quantitatively compare results across sub-groups. Therefore, any descriptions comparing sub-groups are strictly qualitative.

SUMMARY OF RESULTS

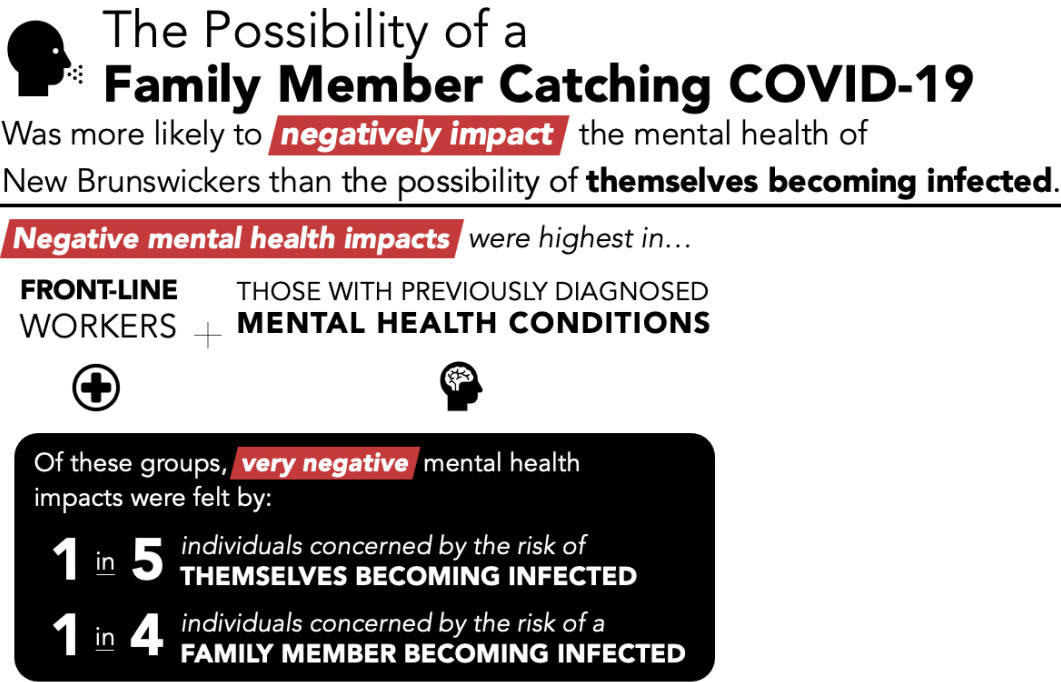
In this section we highlight some of our findings on (i) impacts of social factors, economic factors, and recreational activities on mental health, (ii) changes in frequency of negative behaviours, and (iii) perceived confidence in ability to recover. We also provide insights on how New Brunswickers' responses compare to those from respondents nationally, which were summarized by Pollara and MHRC. [5] As we generated many descriptive statistics but have not presented all our findings in this section, we detail all results of our analyses in graphs found in [Appendix Figures A1 to A24](#).

Social Factors

Despite cases of COVID-19 remaining relatively low in New Brunswick, the risk of infection has remained a threat for many people considering there are a variety of physiological and social factors that make the risk of contracting the virus more severe for some individuals compared to others. [5] The uncertainty surrounding how aggressively the virus may take hold on any individual, as well as the spread of rumors or misinformation can lead to feelings of being unsafe, which in turn can cause increased levels of anxiety. [6]

Social factors include risk of infection for an individual or for their family, difficulties of getting necessities, social isolation, interacting with members within their household, and interacting outside their household via e-communication. (Figures A1 to A7). Overall, catching COVID-19 (37%), a family member catching COVID-19 (41%) and social isolation (37%) were the social factors reported as having a *somewhat* or *very negative* impact on the mental health of New Brunswickers (Figure A1). National results demonstrate that a similar percentage of Canadians reported negative mental health impacts associated with themselves (40%) or their family member(s) (47%) becoming infected, or associated with social isolation (44%). [7]

Figure 1: Impacts of the Risk of COVID-19 Infection on Mental Health in New Brunswick



In Figure 1, we highlight that front-line workers and those with previously diagnosed mental health conditions were two of the sub-groups with a higher percentage of individuals reporting negative impacts (somewhat or very negative) associated with a family member being infected (49% and 48%). While it is known that the risk of negative outcomes associated with infection increases with age [8], more young adults reported negative mental health impacts associated with the risk of themselves becoming infected than seniors (41% vs 36%; [Figure A2](#)).

While public health measures promote limiting any non-essential contact with those outside your close contacts, certain services like groceries and prescription retrieval are needed regardless of the level of risk of infection in the community. Nearly two in five New Brunswickers reported negative mental health impacts associated with becoming infected themselves, but 65% said that challenges associated with getting necessities had neutral impacts on their mental health ([Figure A1](#)).

However, our results show the impact of the challenges of getting necessities was inversely related to household size, with more single person households reporting negative impacts than couples and families ([Figure A4](#)). We also found that front-line workers (30%) and those with previously diagnosed mental health conditions (32%) were two of the sub-groups who had a higher percentage of individuals reporting negative impacts (somewhat or very negative) associated with getting necessities ([Figure A4](#)).

To protect the health of our community, physical distancing measures are in place to reduce the spread of COVID-19 through close contact. Limited contact with friends and family has led to feelings of social isolation among the population, which has been shown to increase feelings of loneliness and anxiety. [9] Seniors in particular are at higher risk of serious illness from COVID-19 [8] and in many cases take additional precautions to limit their risk of infection, meaning less social contact and in turn greater risk of social isolation.

Figure 2: Impacts of Social Isolation on Mental Health in New Brunswick

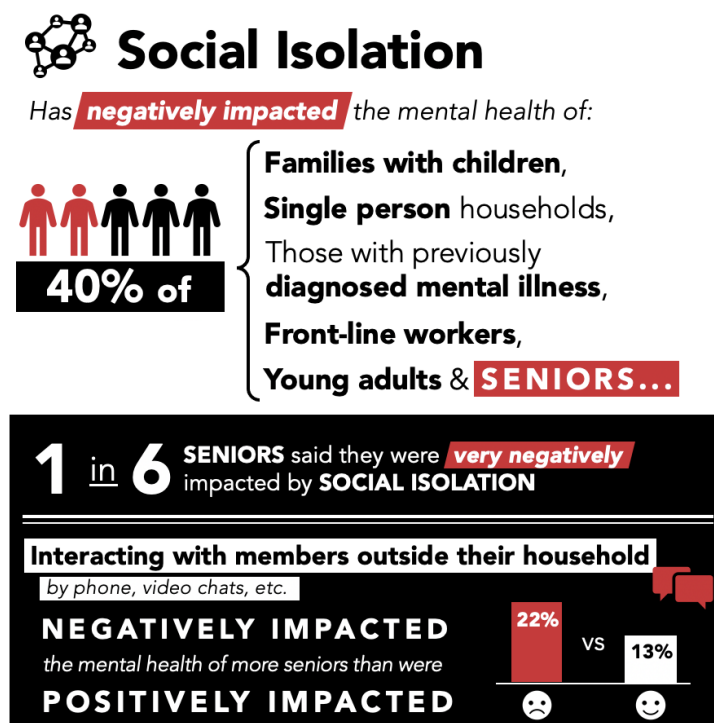


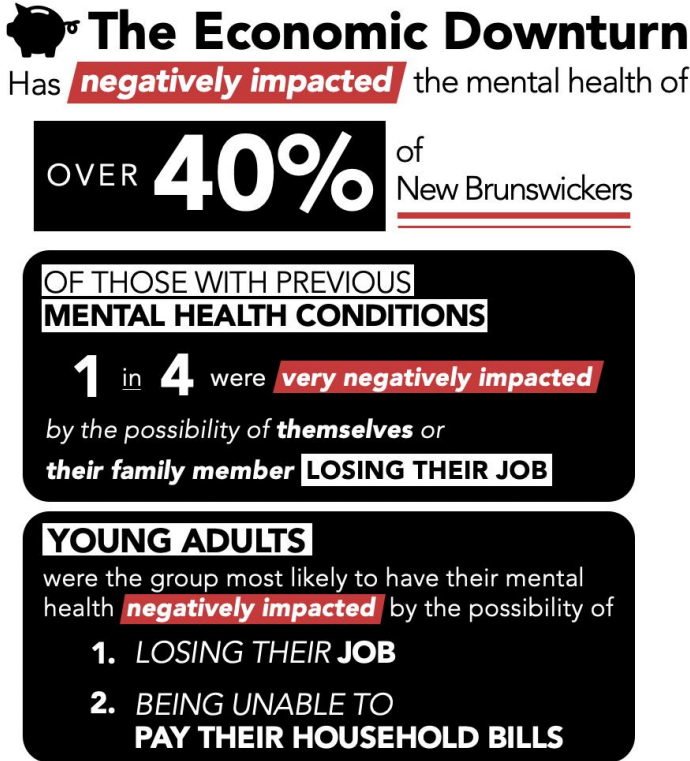
Figure 2 highlights that many of our selected sub-groups are experiencing similar levels of negative impacts associated with social isolation, representing approximately 40% of respondents. In addition to reporting among those most impacted by social isolation, seniors were also the subgroup with the most individuals who reported negative mental health impacts resulting from interacting with their household members (26%; [Figure A6](#)) and the lowest level of positive impact. This differed from young adults as one in four reported that interacting with their household members resulted in positive mental health impacts ([Figure A6](#)). For every sub-group, a higher percentage reported negative than positive impacts from interacting with people outside their household, except for young adults and single person households ([Figure A7](#)).

Economic Factors

The level of operation of many workplaces is largely dependent on the public measures in place given the current degree of risk within our communities, meaning many New Brunswickers have experienced at least some degree of work interruptions during the past year. Studies have shown unemployment and poverty are associated with increased levels of anxiety and depression. [10] The unemployment rate in New Brunswick rose from 9.1% in March to 13.3% by April according to Statistics Canada’s labour force characteristics [11], implying a larger proportion of our population was more likely to feel stressed or anxious about providing for themselves or their family.

Economic factors include the economic downturn, the possibility of oneself or a family member losing their job or pay, and the possibility of not being able to pay household bills. Overall, economic downturn (42%) had among the highest reported negative impacts of those examined, followed by the possibility of losing a job (36%; [Figure A8](#)). New Brunswickers reported a similar level of impact for economic factors as compared to the national results. [7]

Figure 3: Impacts of the Economic Downturn on Mental Health in New Brunswick



The economic downturn had the greatest impact on mental health across all factors for all subgroups ([Figure A9](#)). Figure 3 shows that those with previously diagnosed mental health conditions and young adults were the selected sub-groups who reported high numbers of impacted individuals. Families with children were another subgroup not highlighted in Figure 3 that reported particularly high impacts as a result of work interruptions. 36% of families reported negative mental health impacts concerning the possibility of being unable to pay household bills, which is slightly lower than young adults (39%, [Figure A12](#)). Single person households and seniors were the only subgroups to report more positive than negative mental health impacts resulting from working from home (16% vs 14%, [Figure A13](#)).

Recreational Activities

Recreational activities include daily news about COVID-19, social media, physical activity, non-COVID-19 related entertainment and recreational reading. It was unexpected to find that some of these factors had a more negative than positive impact. For example, physical activity had more of a negative than positive impact in both the national and New Brunswick specific results. We also found that non-COVID-19 related entertainment negatively impacted the same percentage (17%) it positively impacted in New Brunswick ([Figure A14](#)).[7]

Daily news about COVID-19 was the recreational activity that the most respondents said impacted their mental health, with greater than 1 in 3 of all selected sub-groups reporting they were negatively impacted ([Figure A15](#)). Additionally, 29% of seniors said their mental health was negatively impacted by physical activity, compared to 13% reporting it was positively impacted, possibly caused by a lack of in-person programs that were available pre-COVID-19 ([Figure A17](#)).

Non-COVID-19-related reading and entertainment most positively impacted the mental health of New Brunswickers, particularly for young adults (33%), single person households (28%) and those with previously diagnosed mental health conditions (31%, [Figure A19](#)).

Negative Behaviours

Recreational Substance Use: Changing levels of stress and anxiety resulting from factors such as those highlighted in this report can lead to seeking temporary relief through increased use of substances, such as alcohol or cannabis.[12] Increased use of these recreational substances can increase the risk of developing alcohol or cannabis use disorders, especially when they are used to deal with symptoms of anxiety or depression.[13]

When asked about their frequency of recreational substance use since the COVID-19 pandemic began, more respondents reported that these behaviours increased or remained the same, though a large proportion reported the behaviour *did not happen/do this before*. Nearly 20% of survey respondents said their alcohol consumption increased, and 10% said their cannabis use increased ([Figure A20](#)), both of which were lower than reported by all Canadians (27% and 29%, respectively).[5] Among the selected sub-groups ([Figure A21](#)), we found the youngest age group reported the higher level of increase of alcohol use (32%) – 5% higher than the national average – and front-line workers who were slightly lower (25%) than the national average.[5] Young adults were also more likely to report increased used of cannabis (19%, [Figure A22](#)), though this is still quite a bit lower than was reported nationally.[5]

Household Conflict: Physical distancing measures have forced the combination of increased contact with household members and people dealing with an increased level of stress, as demonstrated in the survey results. While for some this may be an opportunity for greater cohesion, it is highly possible to lead to greater conflict for others.

When asked how the frequency of conflict between household members has changed since the beginning of the pandemic, nearly 1 in 5 (18%) New Brunswick households reported an increase (Figure A20), which was lower than the national average (29%).^[5] Families with children (26%), young adults (25%), and those with mental health conditions (23%) had the greatest increase in household conflict (Figure A23).

Resiliency

As the survey results have demonstrated, COVID-19 has impacted the lives of New Brunswickers in challenging ways. As the factors mentioned in this report continue to impact our daily lives for an unknown duration of time, it is likely we will feel a degree of uncertainty regarding the amount of change our communities can bounce back from. In general, New Brunswickers are feeling optimistic.

Resiliency factors included the survey respondent's self-perceived ability to recover from challenges associated with COVID-19. All selected sub-groups in New Brunswick were similar to the national results of 60% confidence in their ability to recover.^[7] Those in the oldest age group (over 60 years of age) had the highest confidence in the ability to recover (79%), whereas confidence was lowest for those in the youngest age group (18-39 years 59%) and for those with previous mental health conditions (59%, Figure A24). When considering percentages of very or somewhat poor confidence, no more than 10% of New Brunswickers from any of the sub-groups had poor confidence in our ability to recover (Figure A24).

Conclusions

New Brunswick may have experienced less of a COVID-19 case burden than many other Canadian provinces. Nevertheless, when it comes to the impact of various social, economic, and recreational factors on mental health and increased frequency of substance use and household conflict, we find that New Brunswickers report negative levels similar to the rest of the Canadian population. The possibility of oneself or a family member catching COVID-19, social isolation, and the economic downturn were among the factors reported to have the greatest negative impact on New Brunswickers' mental health. When comparing survey responses for selected population sub-groups (e.g., by age, by household composition, in those pre-existing mental health conditions, and in front-line workers) we find similar levels of impacts on mental health for the various factors examined. Though, young adults, individuals with existing mental health conditions, front-line workers, and families (with children) reported a higher level of negative impacts on mental health for some factors, as well as greater increases in negative behaviours and less confidence in ability to recover. Provisions of support to manage the different impacts on mental health due to the drastic changes we continue to make to our daily lives will be critical to mitigate detrimental long-term impacts on population health and to enhance resiliency in our ability to recover from the challenges COVID-19 continues to pose.

APPENDIX

The graphs in the appendix detail all results obtained in our analyses of the survey results. Percentages are reported in the graphs but only those above 5% are labelled. Results are presented for all 503 respondents, as well as for the selected sub-groups, categorized by:

Sub-Group	Number of Respondents
Age 18-39 years	133
Age 40-59 years	212
Age 60+ years	158
Single Person Household	95
Couple-Only Household	202
Families	147
Previous Mental Health Conditions	259
Front-Line Workers	171

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Social Factors Figures

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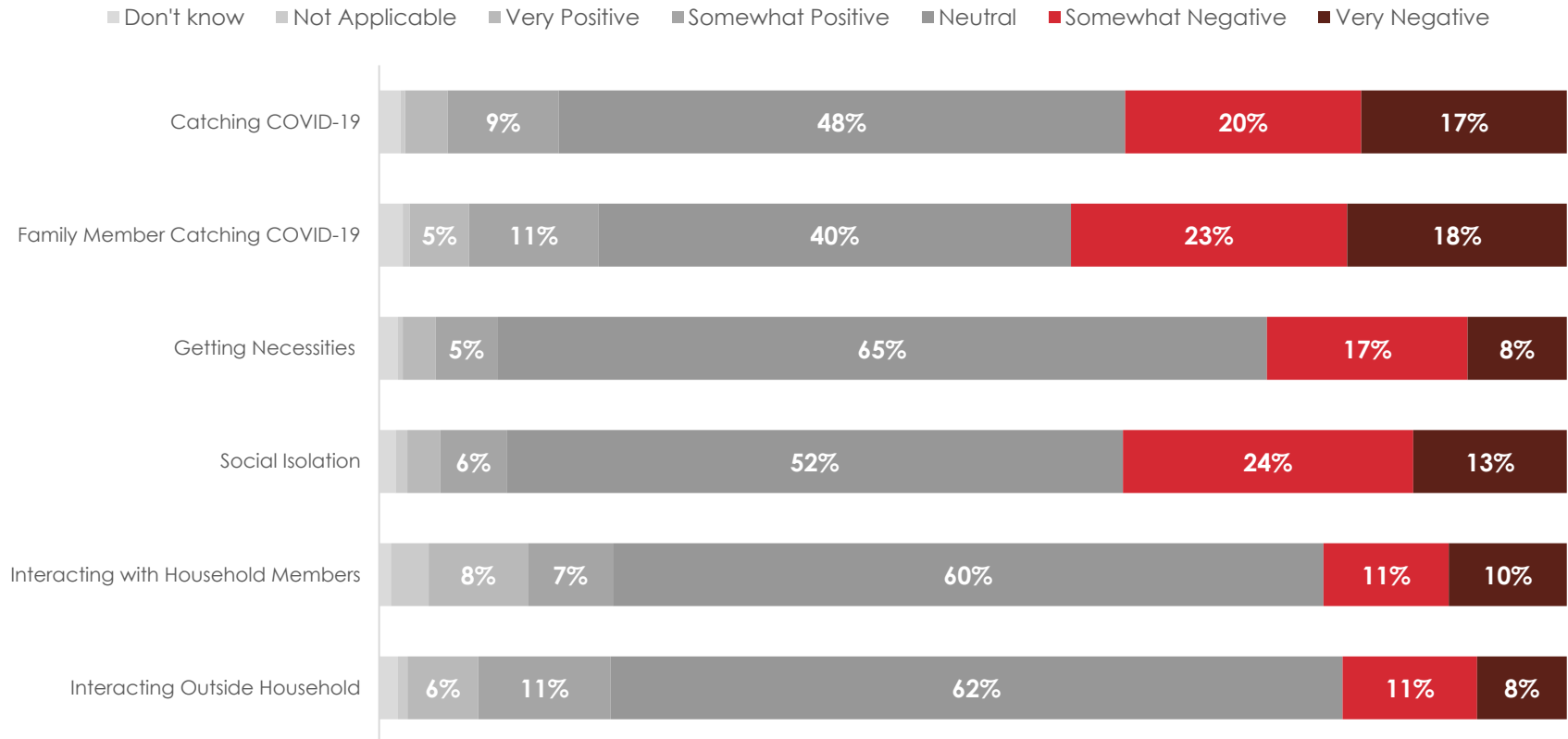


Figure A2: Impacts of the Possibility of Catching COVID-19 on Mental Health Among Selected Sub-Groups in New Brunswick

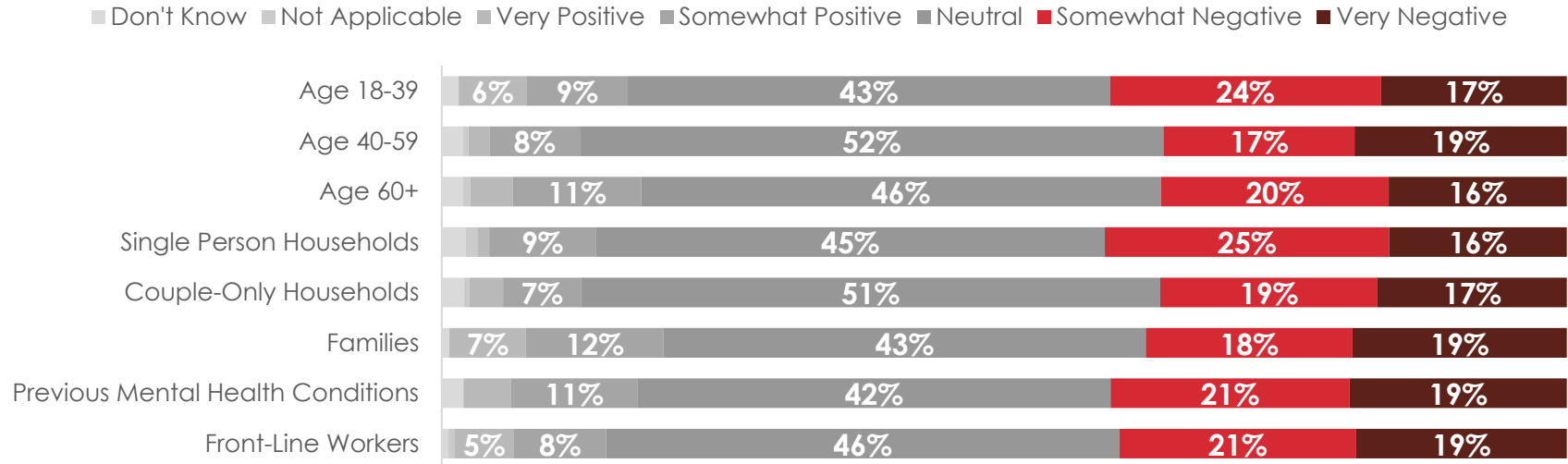


Figure A3: Impacts of the Possibility of a Family Member Catching COVID-19 on Mental Health Among Selected Sub-Groups in New Brunswick

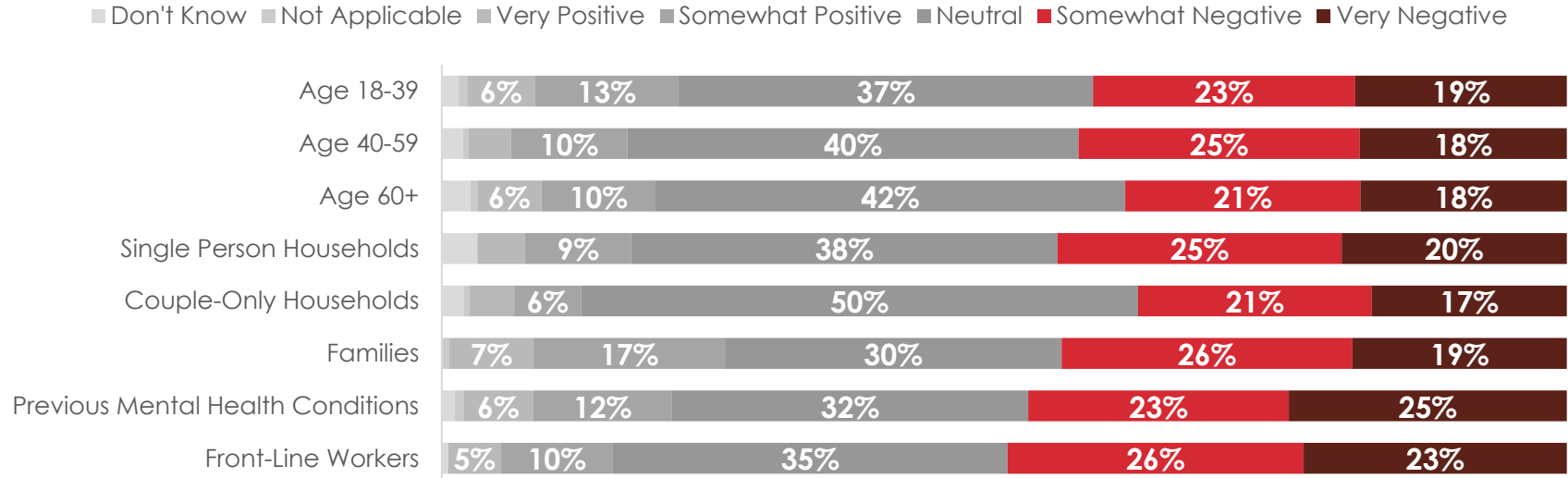


Figure A4: Impacts of the Difficulty of Getting Necessities on Mental Health Among Selected Sub-Groups in New Brunswick

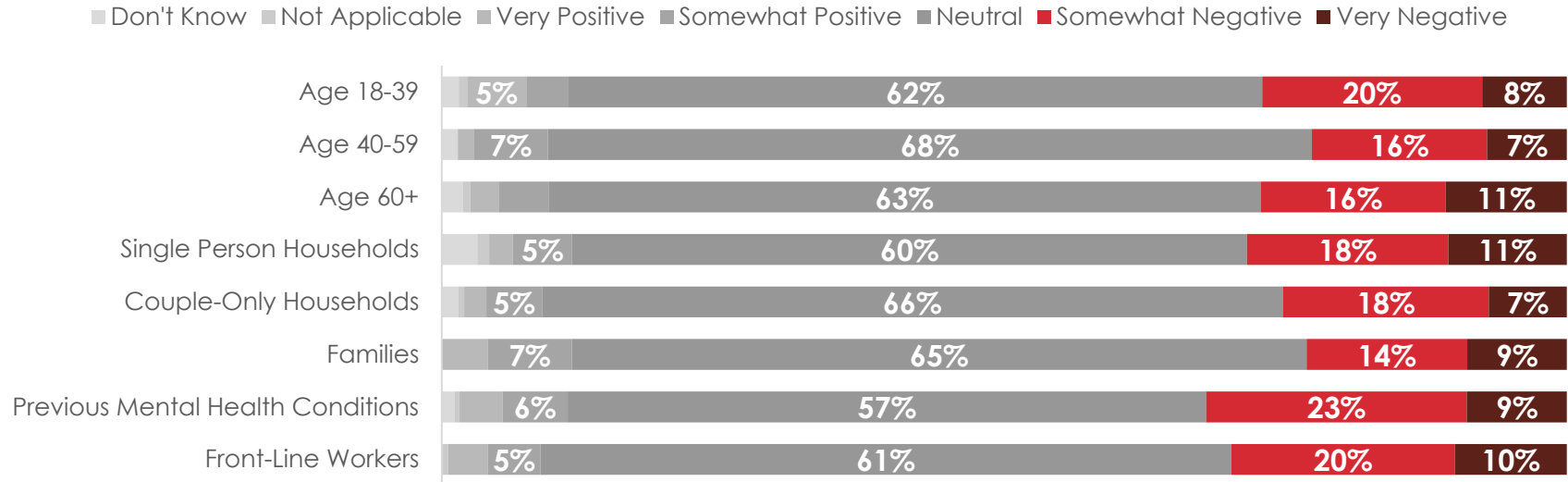


Figure A5: Impacts of Social Isolation on Mental Health Among Selected Sub-Groups in New Brunswick

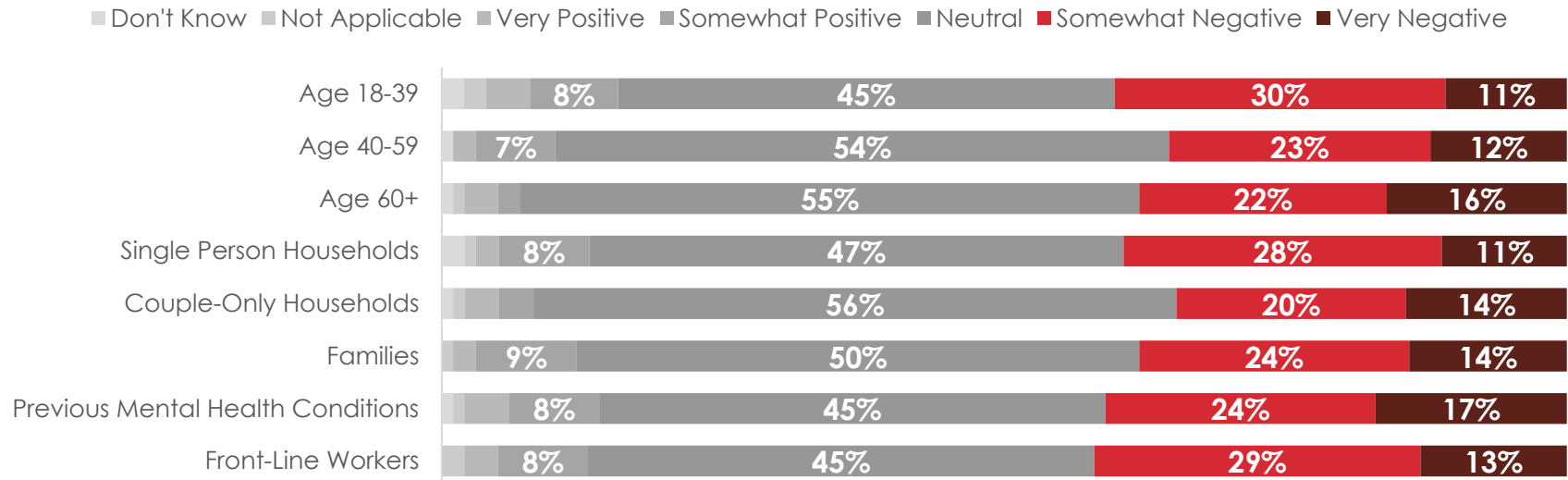


Figure A6: Impacts of Interacting with Household Members on Mental Health Among Selected Sub-Groups in New Brunswick

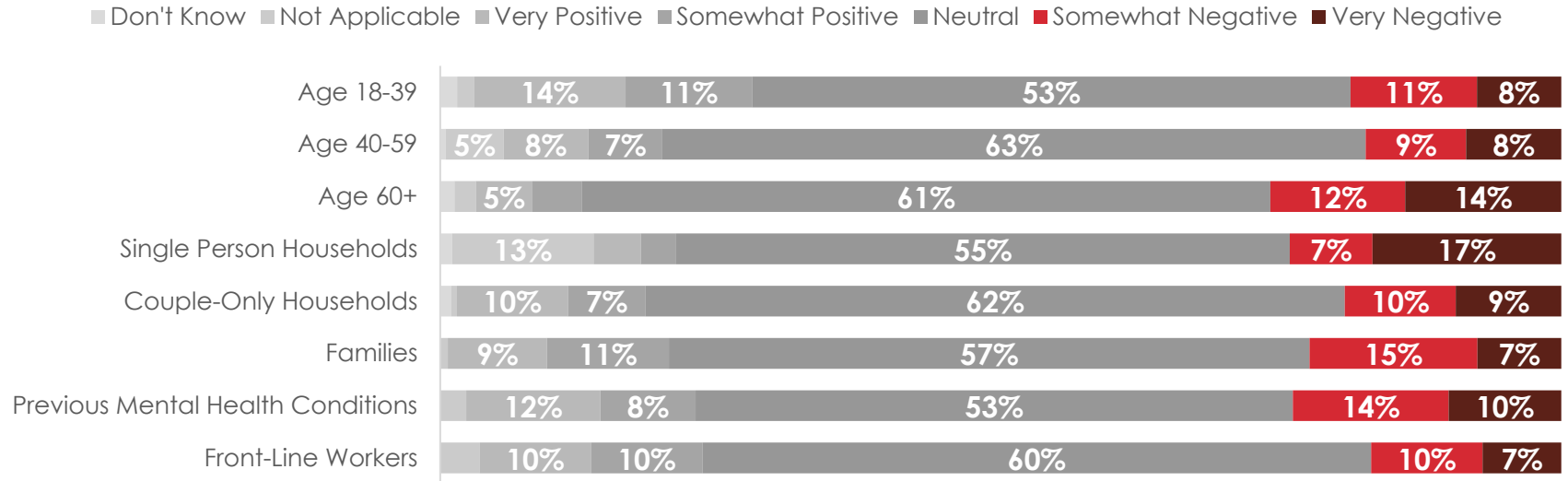
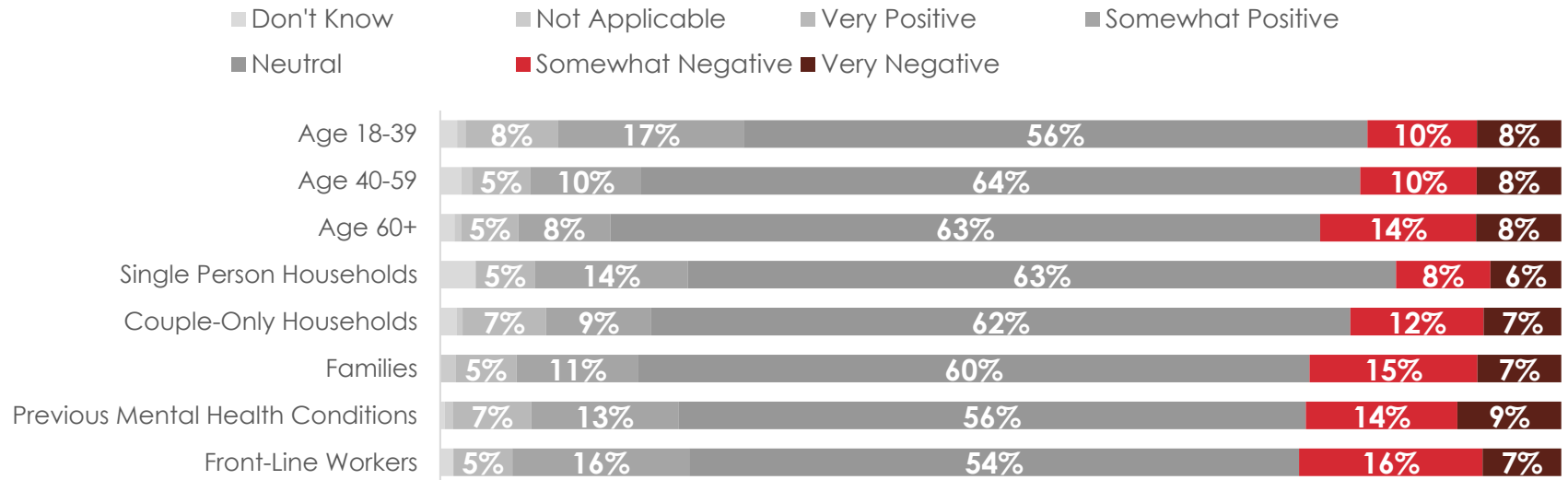


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Economic Factors Figures

Figure A8: Impacts of **Economic Factors** on Mental Health in New Brunswick

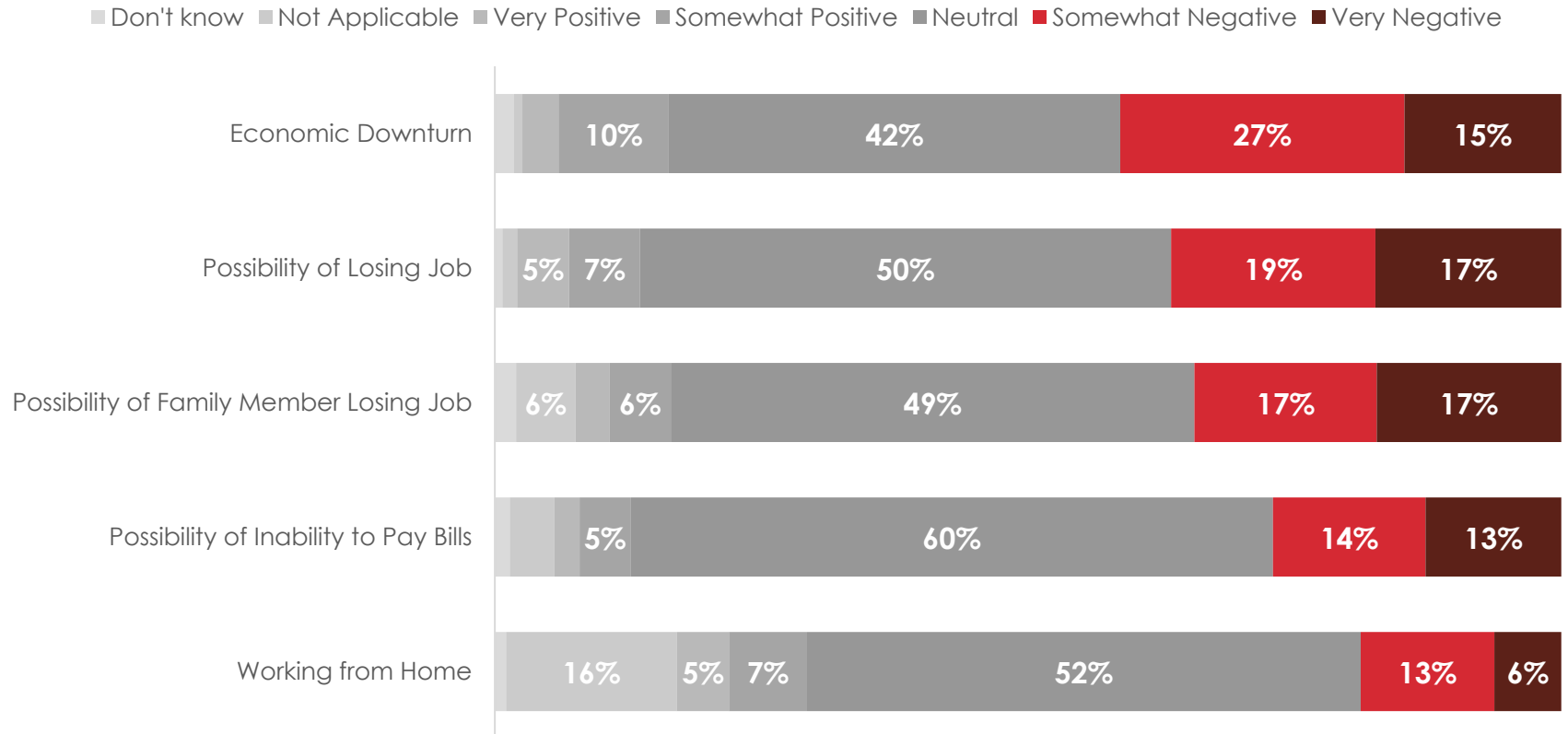


Figure A9: Impacts of the Economic Downturn on Mental Health Among Selected Sub-Groups in New Brunswick

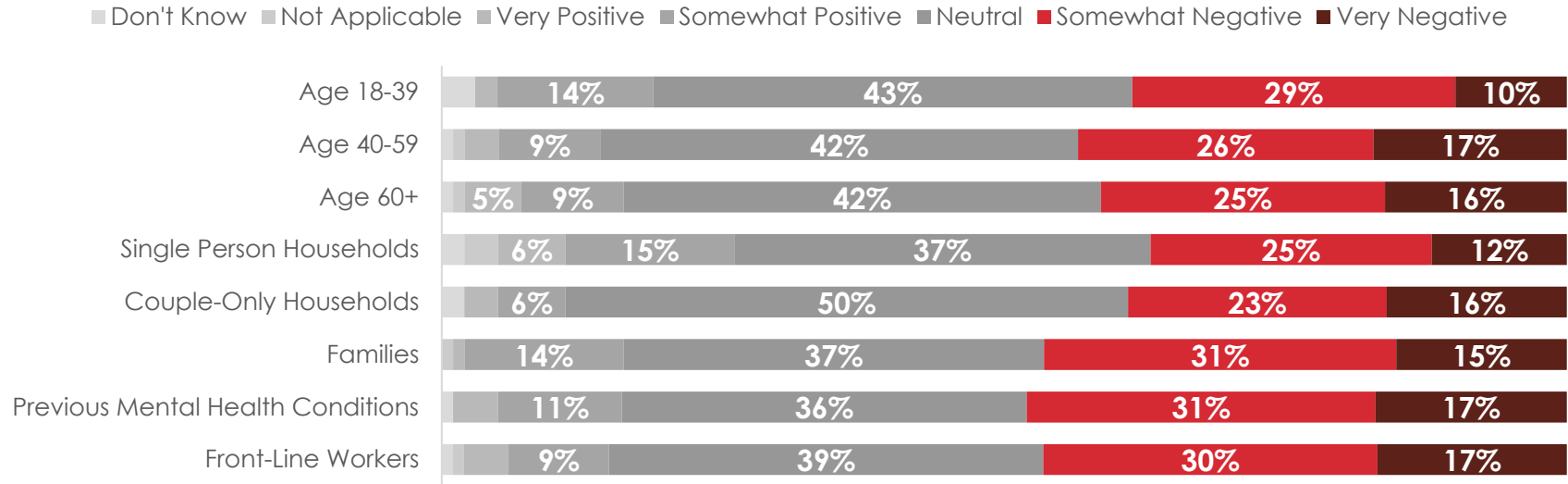


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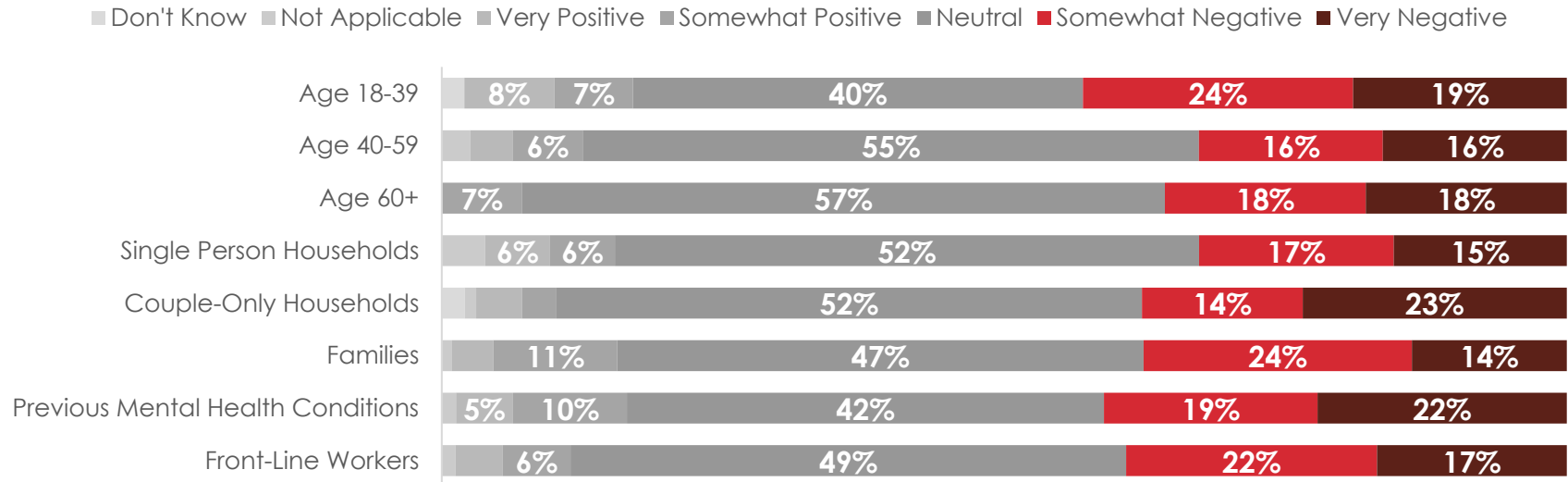


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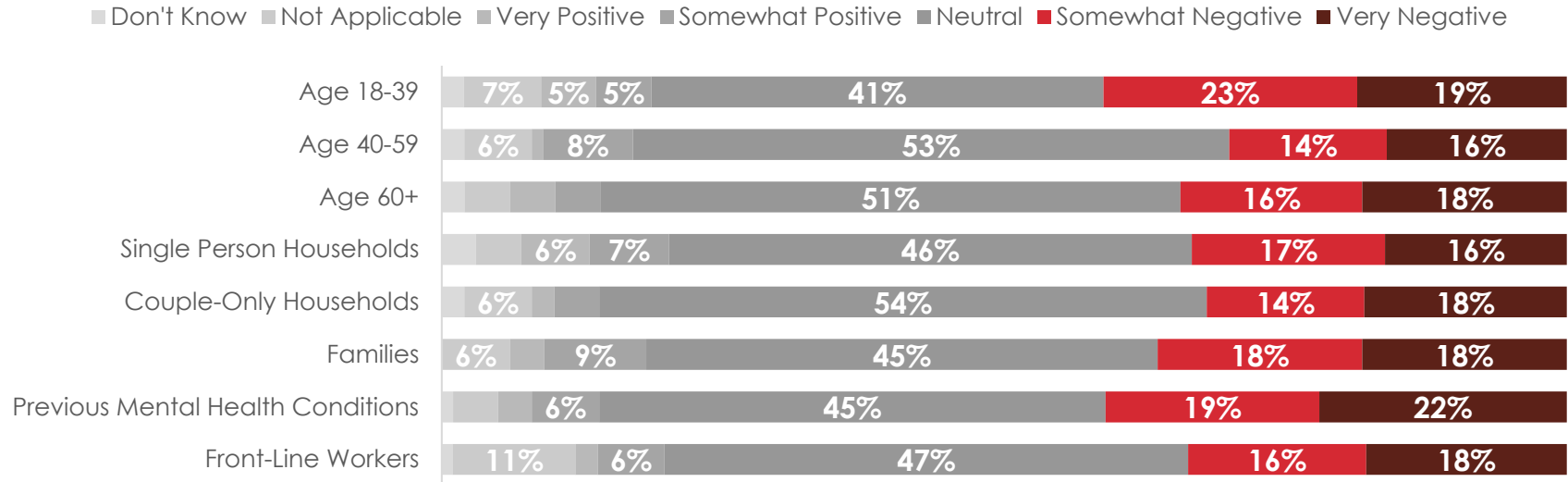


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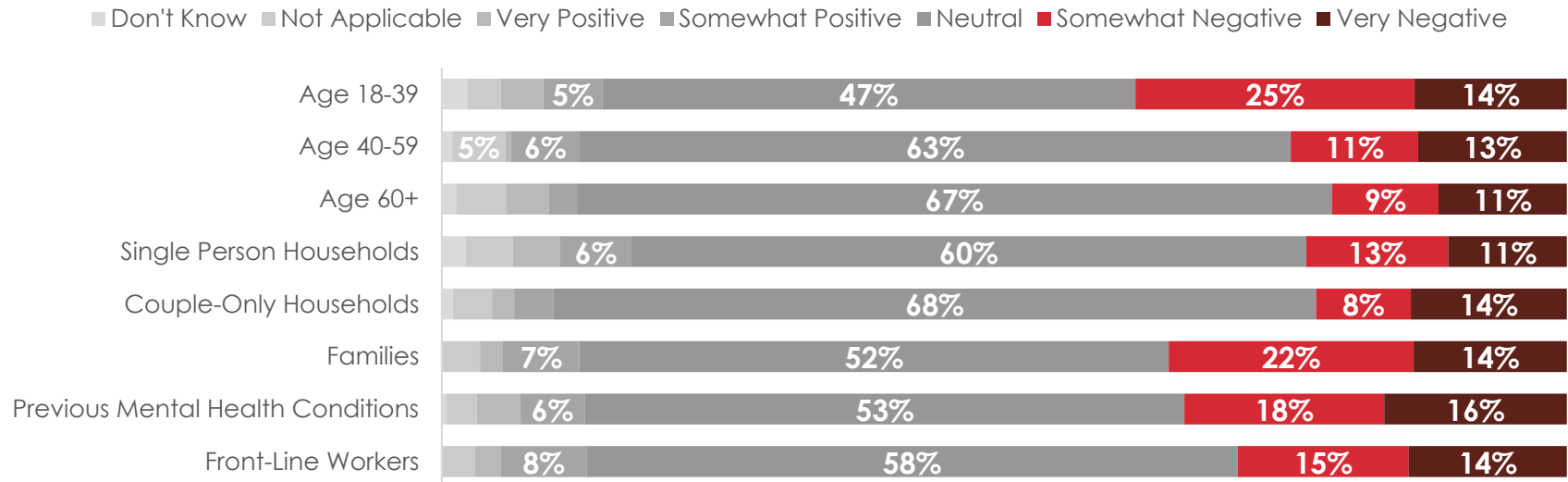
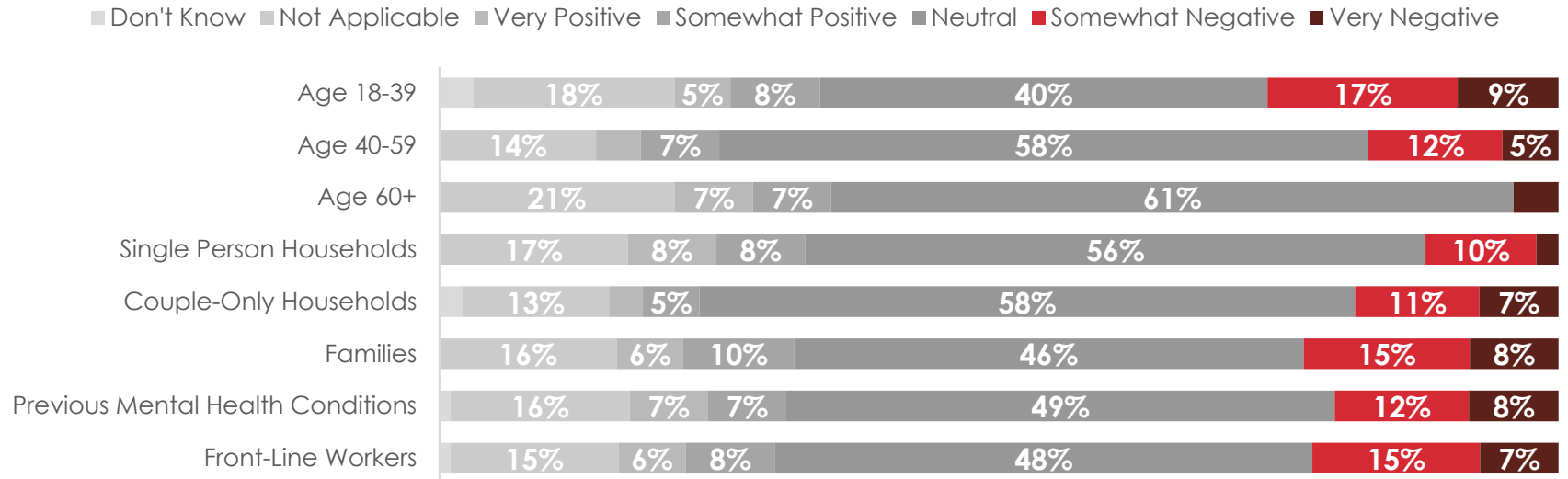


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Figure A14: Impacts of **Recreational Activities** on Mental Health in New Brunswick

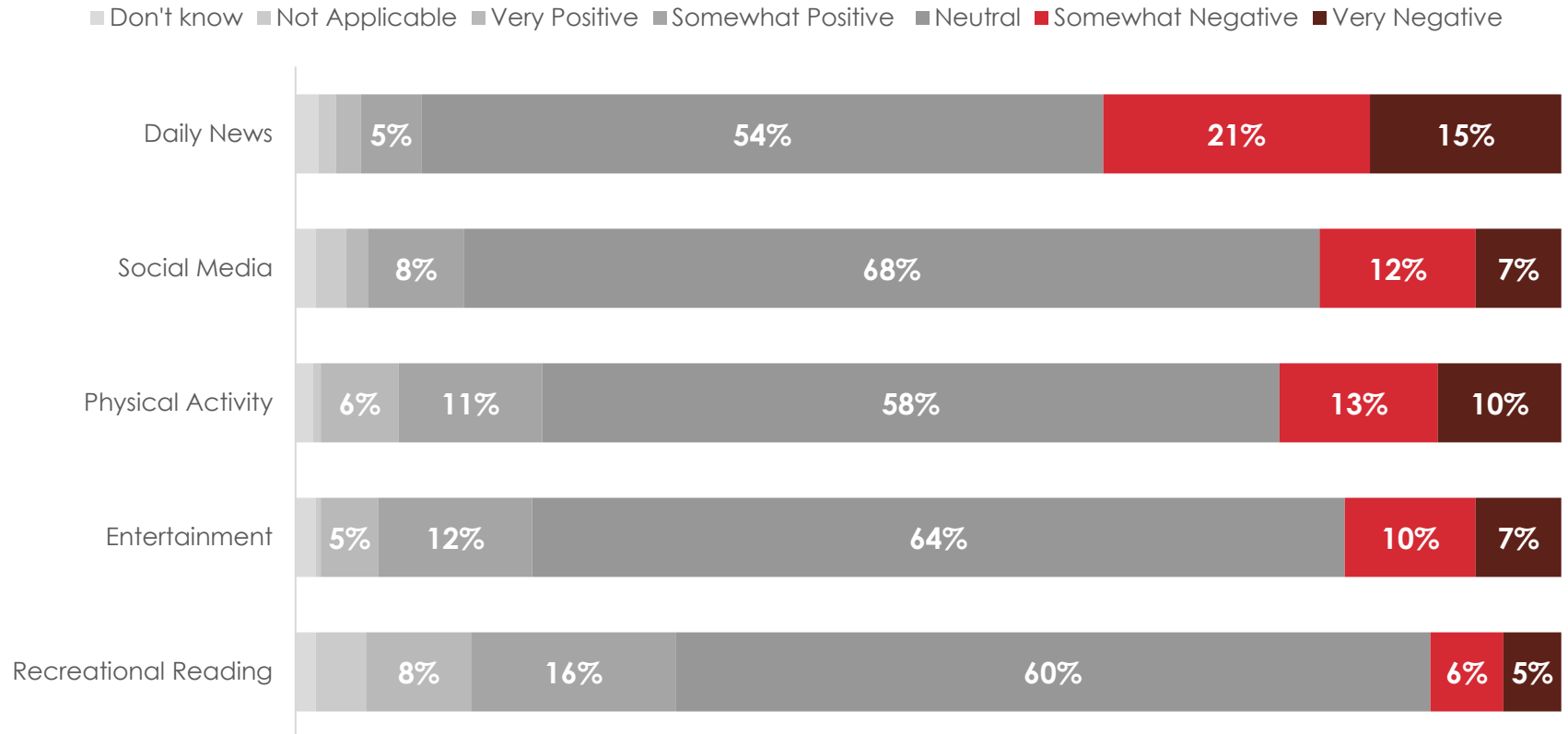


Figure A15: Impacts of the **Daily News about COVID-19** on Mental Health Among Selected Sub-Groups in New Brunswick

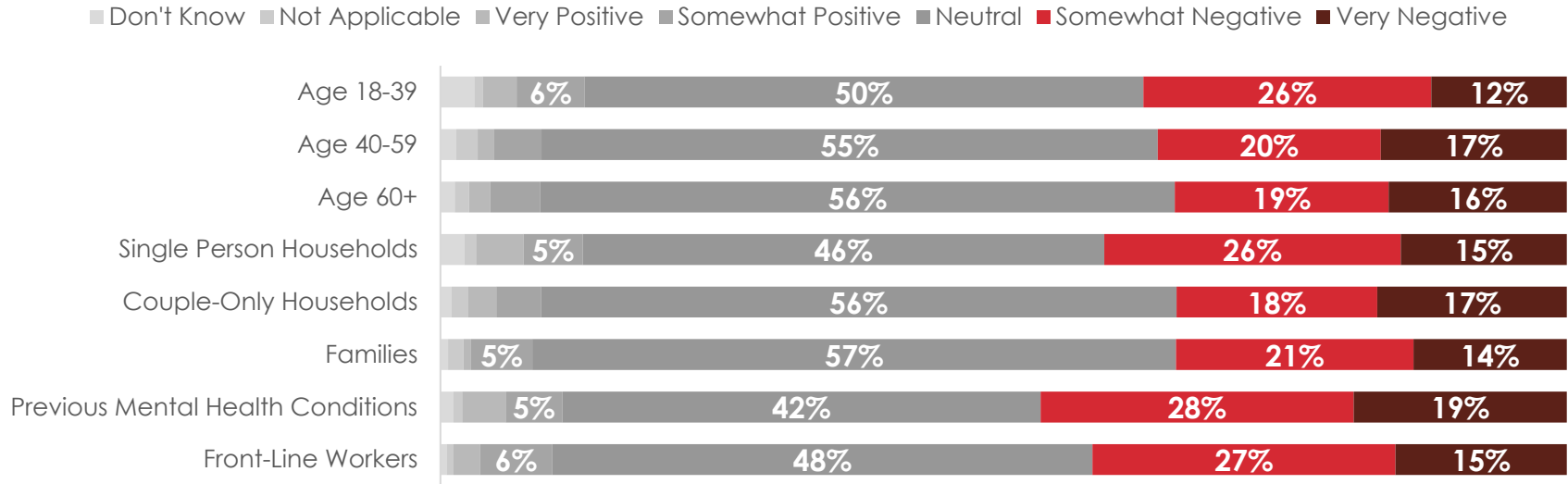


Figure A16: Impacts of **Social Media** on Mental Health Among Selected Sub-Groups in New Brunswick

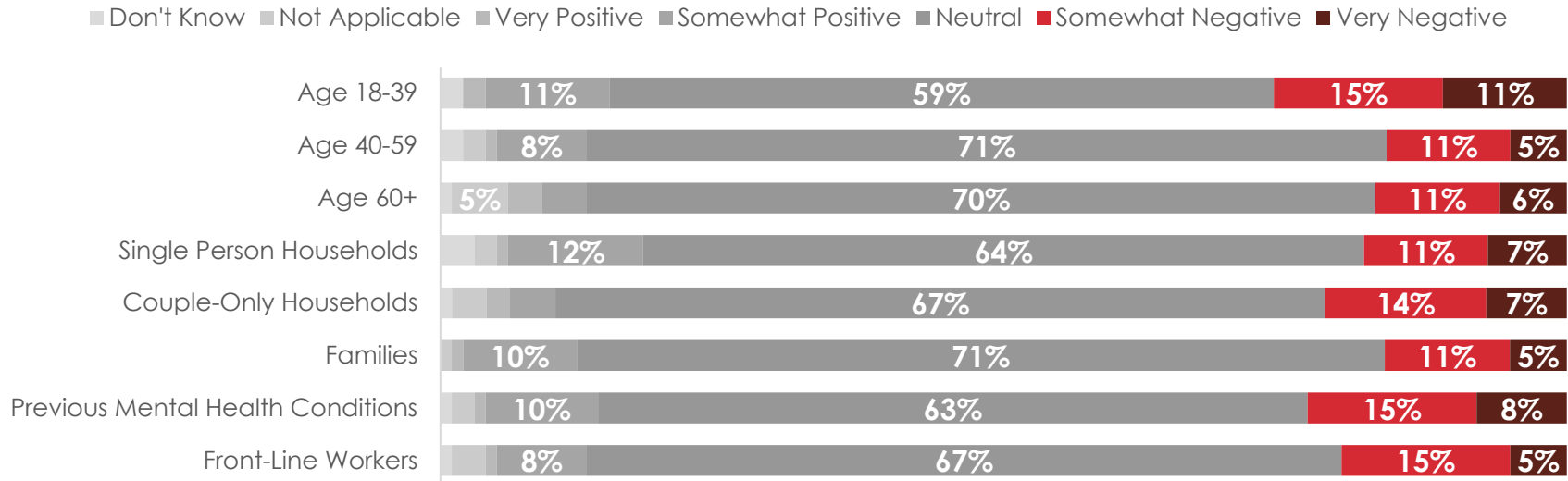


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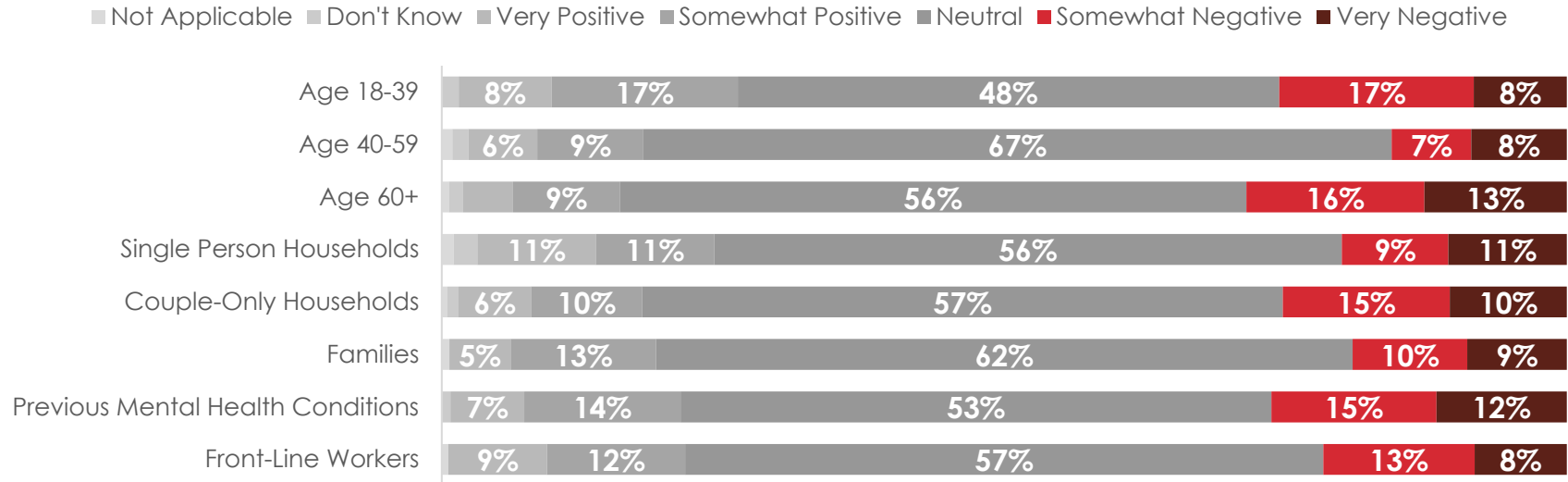


Figure A18: Impacts of Entertainment (Non-COVID-19 Related) on Mental Health Among Selected Sub-Groups in New Brunswick

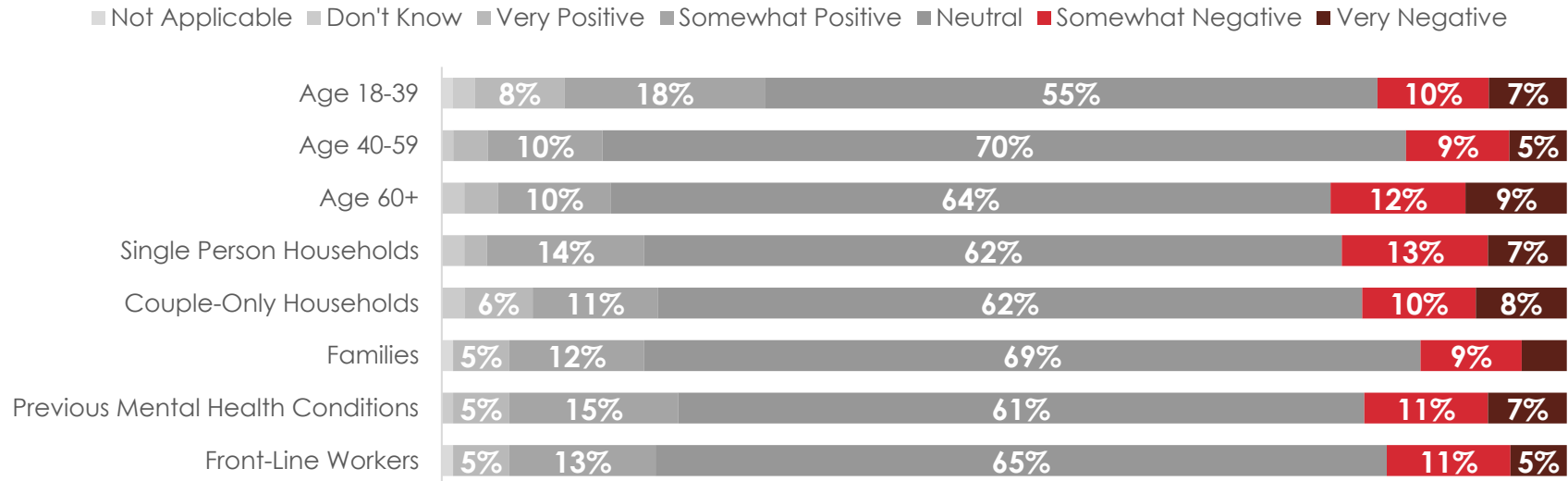
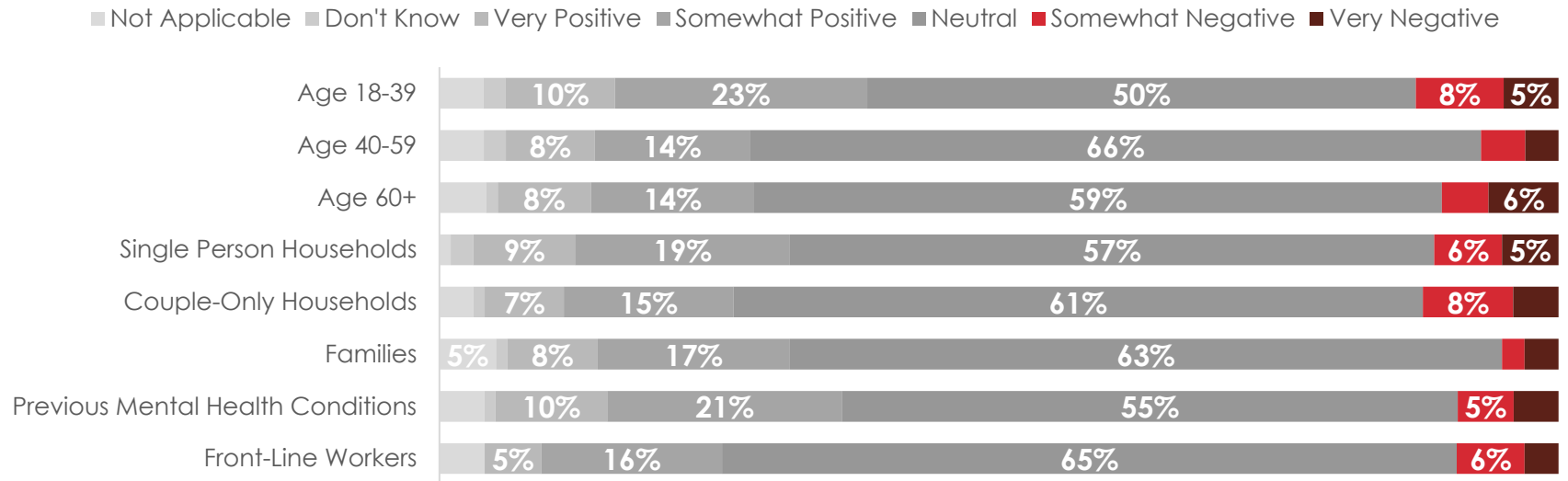


Figure A19: Impacts of Reading (Non-COVID-19 Related) on Mental Health Among Selected Sub-Groups in New Brunswick



Negative Behaviours Figures

Figure A20: Changes in Frequency of **Negative Behaviours** Since the COVID-19 Outbreak Began

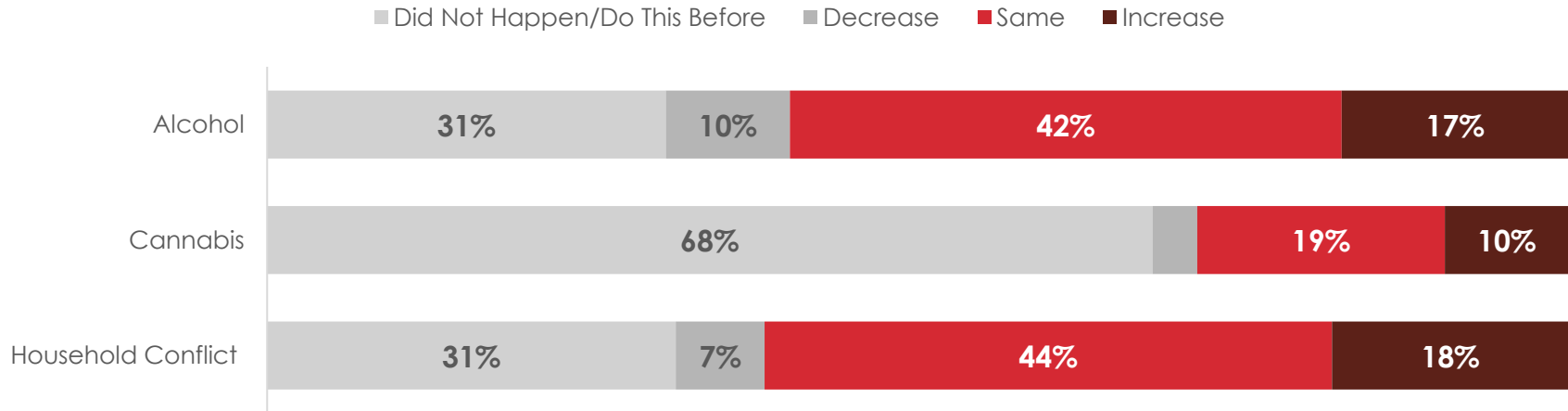


Figure A21: Changes in Frequency of **Alcohol Use** Since the COVID-19 Pandemic Began Among Selected Sub-Groups in New Brunswick

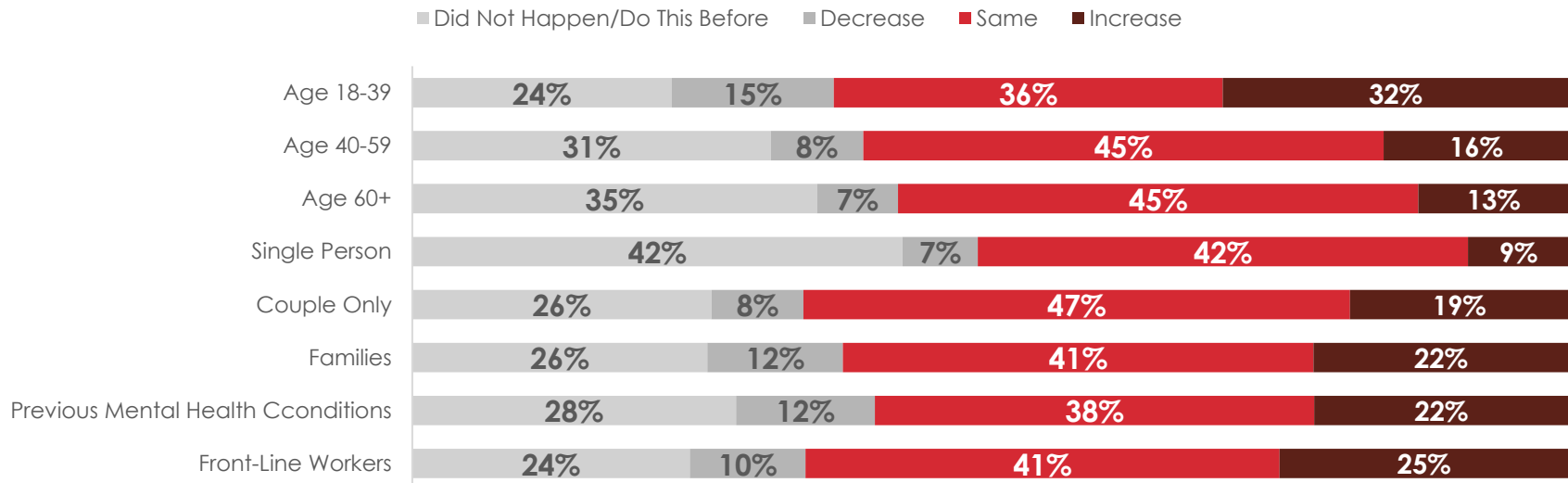


Figure A22: Changes in Frequency of **Cannabis Use** Since the COVID-19 Pandemic Began Among Selected Sub-Groups in New Brunswick

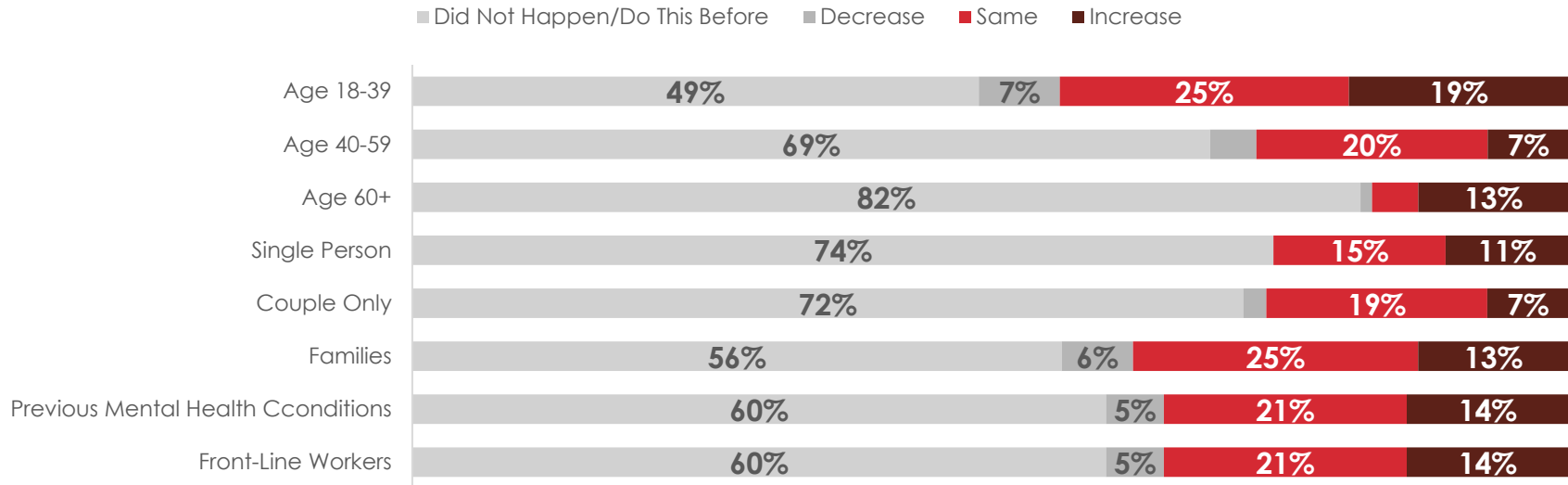
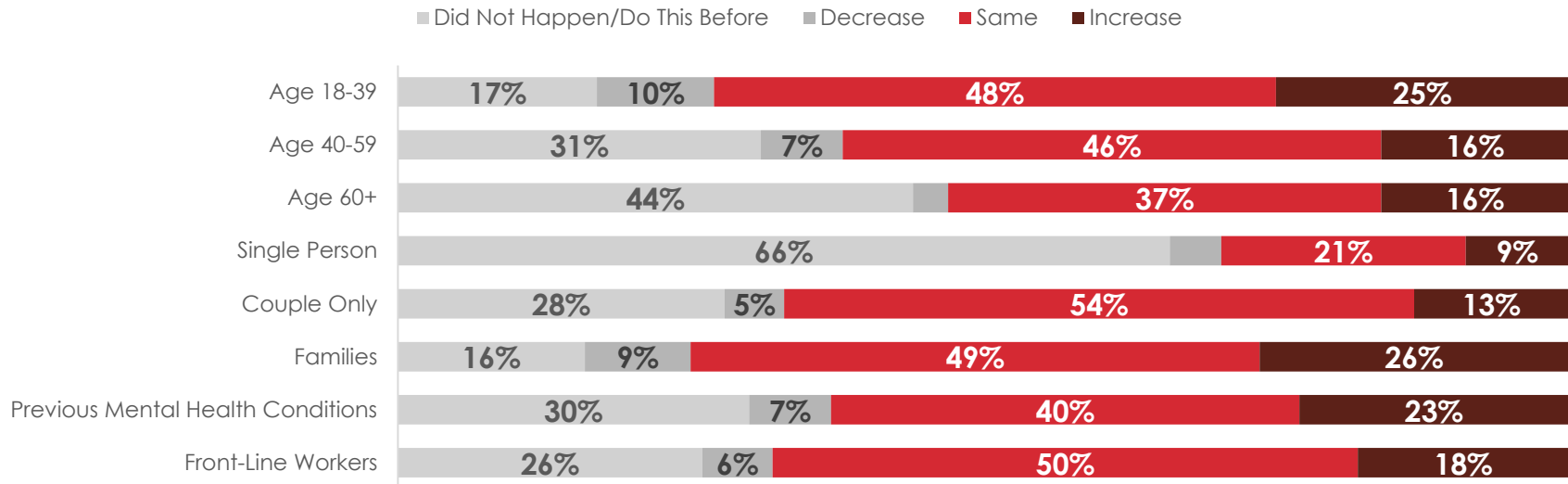
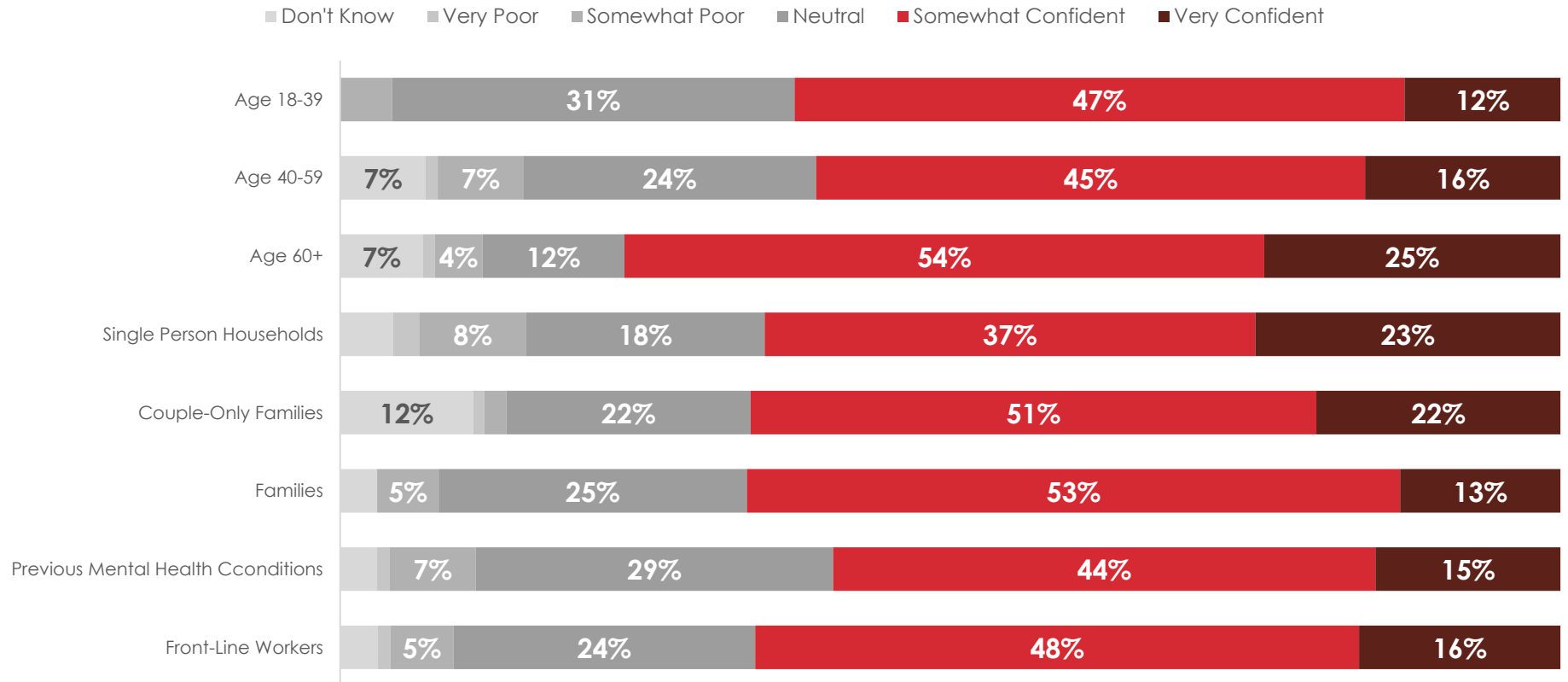


Figure A23: Changes in Frequency of **Household Conflict** Since the COVID-19 Pandemic Began Among Selected Sub-Groups in New Brunswick



Resiliency Figure

Figure A24: Perceptions of **Confidence in Ability to Recover** Among Selected Sub-Groups in New Brunswick



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