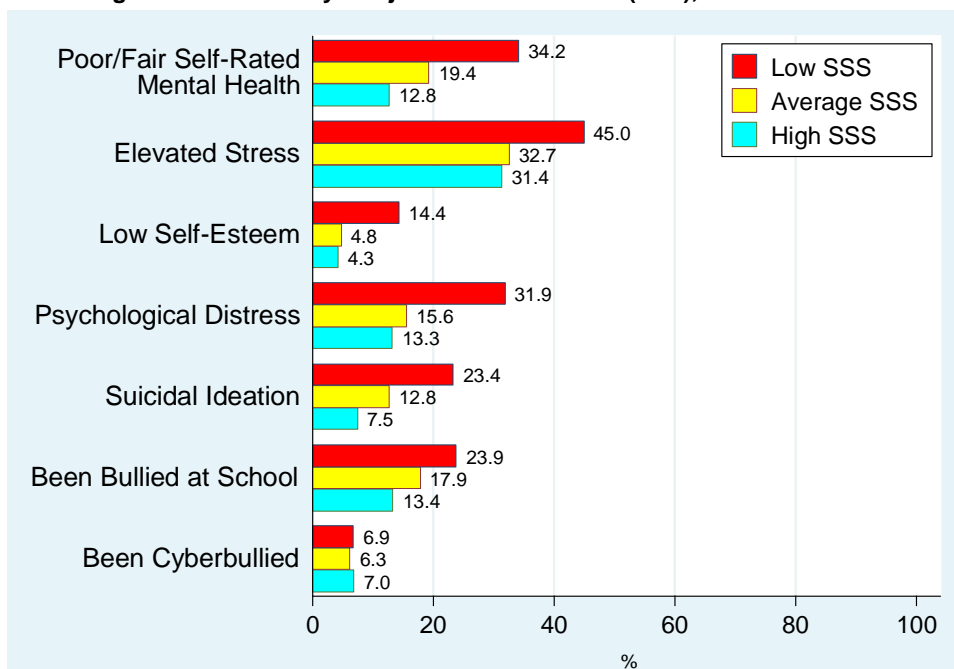# Association Between Family Subjective Social Status and Mental Health Among High School Students in Ontario

This *eBulletin* examines the association between family subjective social status (SSS) and mental health among high school students in Ontario. Family SSS, which was measured with the MacArthur Scale of Subjective Social Status, can be used as a proxy measure for perceived socioeconomic status. Data used here are from the 2017 cycle of the *Ontario Student Drug Use and Health Survey* (OSDUHS). The OSDUHS is a cross-sectional, anonymous survey of students in grades 7–12 in Ontario's publicly funded schools, with the purpose of monitoring drug use, mental health, physical health, gambling, and other risk behaviours. Conducted every two years since 1977, the OSDUHS is the longest ongoing school survey in Canada and one of the longest running in the world.

Based on responses to the MacArthur Scale of Subjective Social Status, about one-in-five (22%) high school students were categorized as "low" family SSS , the majority (63%) were categorized as "average," and 15% were categorized as "high" family SSS. As presented in Figure 1, those students who were in the low family SSS category were significantly more likely to report mental health problems. Specifically, compared with those who were in the average or high family SSS categories, those students in the low SSS category were most likely to rate their mental health as poor or fair, to report an elevated stress level, low self-esteem, psychological distress, suicidal ideation, and being bullied at school. However, there was no significant association between family SSS and being cyberbullied. Further, there were no significant associations between family SSS and drinking, smoking, or cannabis use (data not presented).

Figure 1
Percentage of Ontario Students in Grades 9–12 Reporting Mental Health Indicators According to Level of Family Subjective Social Status (SSS), 2017 OSDUHS

Note: significant differences (p<.05) among the three groups for all measures except for 'Been Cyberbullied'

Methods

The Centre for Addiction and Mental Health's Ontario Student Drug Use and Health Survey (OSDUHS) is an Ontario-wide survey of elementary/middle school students in grades 7 and 8 and secondary school students in grades 9 through 12. This repeated cross-sectional survey has been conducted every two years since 1977. The 2017 survey, which used a stratified (region by school level) two-stage (school, class) cluster design, was based on 11,435 students in grades 7 through 12 in 764 classes, in 214 schools, from 52 public and Catholic school boards. Self-completed questionnaires, which promote anonymity, were group administered by staff from the Institute for Social Research, York University in classrooms between November 2016 and June 2017. French questionnaires were used in French-language schools. Sixty-one percent (61%) of selected schools, 94% of selected classes, and 61% of eligible students in participating classes completed the survey.

Because the mental health measures were asked of a random half sample of students and our focus here is on secondary school students, the analyses presented were based on 4,298 students in grades 9-12. All estimates were weighted, and variance and statistical tests accommodated the complex survey design. The significant associations found between family SSS and mental health indicators held even after adjusting for sex and grade.

Measures & Terminology

- **Family subjective social status (SSS)** was measured with the *MacArthur Scale of Subjective Social Status*. The questionnaire showed a 10-rung ladder to represent the social hierarchy of Canadian society. Students were asked to choose the rung that best represents their family's place in Canadian society with respect to money, education, and occupation. The higher the rung on the ladder, the higher the perceived family SSS – more money, higher education, and highly respected occupations. Three categories were constructed to represent low family SSS (rungs 1–5 on the ladder), average SSS (rungs 6–8), and high SSS (rungs 9–10).
- **Poor or fair self-rated mental health** was measured with the question "How would you rate your mental or emotional health?" Response options were "Excellent," "Very good," "Good," "Fair," or "Poor."
- **Elevated stress** was measured with the question "In the last 4 weeks, did you feel that you were under any stress, strain, or pressure?" and defined as responding "Yes, almost more than I could take" or "Yes, a lot."
- **Low self-esteem** is defined as responding "Strongly Disagree" to the statement "On the whole, I am satisfied with myself."
- **Psychological distress** (symptoms of depression and anxiety during the past four weeks) was measured with the *Kessler 6-Item Psychological Distress Scale* (K6). A moderate-to-serious level of distress was defined as a score of eight or higher of a maximum 24.
- **Suicidal ideation** was measured with the question "In the last 12 months, did you ever seriously consider attempting suicide?" Response options were "Yes" or "No."
- **Been bullied** (at school) is defined as "...when one or more people tease, hurt or upset a weaker person on purpose, again and again. It is also bullying when someone is left out of things on purpose." Students were asked about the main way they were bullied at school since September. The response options were: (1) was not bullied at school; (2) physical attacks (e.g., beat up, pushed or kicked); (3) verbal attacks (e.g., teased, threatened, spread rumours), and (4) stole or damaged possessions. Bullying victimization is defined as an affirmative response to any of the three modes.

- **Been cyberbullied** is defined as reporting being bullied over the Internet (electronically) at least once during the 12 months before the survey.
- **Statistically significant difference** refers to a difference between (or among) estimates that is statistically different at the p<.05 level, or lower, after adjusting for the sampling design. A finding of statistical significance implies that any differences are not likely due to chance alone; it is not necessarily a finding of public health importance.

Source

Boak, A., Hamilton, H. A., Adlaf, E. M., Henderson, J. L., & Mann, R. E. (2018). *The mental health and well-being of Ontario students, 1991–2017: Detailed findings from the Ontario Student Drug Use and Health Survey* (OSDUHS) (CAMH Research Document Series No. 47). Toronto, ON: Centre for Addiction and Mental Health. [Available online at www.camh.ca/osduhs]