

Considerable variation and potential disparities in psychotropic use among children and youth across Ontario

In 2018, all children and youth aged 24 and under in Ontario were eligible to receive prescription medication at no cost through a publicly-funded universal pharmacare program (OHIP+), providing a unique opportunity to study variation in prescription psychotropic drug use (e.g. stimulants, antipsychotics, benzodiazepines, antidepressants) among the entire population of approximately 4.1 million Ontario children and youth.



306,470

children and youth received a psychotropic medication

Sex



Mostly male

54%

Antipsychotics

69%

Stimulants



Mostly female

63%

Benzodiazepines

69%

Antidepressants

Neighbourhood income

Stimulants

more in **higher** vs. lower income neighbourhoods

24% vs. **19%**

Antipsychotics

more in **lower** vs. higher income neighbourhoods

17% vs. **26%**

Greater regional availability

of publicly funded **mental health facilities** associated with:



Less antipsychotic use



Higher stimulant use



Increasing access to publicly funded physician-based and non-pharmacologic services is needed to minimize wait times and help promote best practices in treating mental health conditions in children and youth.

For more information

Antoniou T, McCormack D, Kitchen S, Pajer K, Gardner W, Lunskey Y, Penner M, Tadrous M, Mamdani M, Juurlink D, and Gomes T (2022). [Geographic variation and sociodemographic correlates of prescription psychotropic drug use among children and youth in Ontario, Canada: A population-based study.](#) *BMC Public Health.*