

## **HEALTH POLICY FACT SHEET**

November 2011

# Adult Mental Health Needs and Treatment in California

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early two million adults in California have mental health needs, based on self-reported symptoms and impairments. Of these two million adults, approximately half reported receiving no mental health treatment in the past year, one-quarter received some treatment, and the remaining quarter received minimally adequate treatment (MAT) or better. Based on data from the 2007 and 2009 California Health Interview Survey (CHIS), this fact sheet reports levels of adult mental health need and treatment by county, geographic region, and health insurance status.

Mental Health Need is a measure indicating adults who were in need of mental health services during the past 12 months. It is based on an estimate of the number of adults with serious psychological distress (SPD) who also have at least a moderate level of impairment in one or more life domains due to emotional health. Mental health need was constructed using the Kessler 6 (K6) and the Sheehan Disability Scale. The K6 is a wellvalidated scale of serious psychological distress that provides an estimate of the proportion of adults within a population who are likely to have a serious mental illness. The Sheehan Disability Scale measures impairment with questions that assess how much a person's emotional health interfered with performance at work, ability to do household chores, social relationships with friends, and relationships with family. Adults with a mental health need are those with serious psychological distress who also reported at least a moderate level of

impairment in one or more life domains. This approach is consistent with the definition of adult serious mental illness described in the Mental Health Services Act,<sup>1</sup> the measurement of serious mental illness used by the Substance Abuse and Mental Health Service Administration (SAMHSA),<sup>2</sup> and mental health service eligibility criteria set forth by the Center for Mental Health Services (CMHS),<sup>3</sup> as well as previous research.<sup>4</sup>

Mental Health Treatment was assessed only for those adults with mental health needs. Based on self-reported information about the past 12months, adults were assigned to one of three categories: minimally adequate or better treatment, some treatment, and no treatment. "Minimally adequate or better treatment" is defined as four or more visits with a health professional in the past 12 months, as well as prescription medication for mental health. "Some treatment" refers to adults with mental health needs who received some treatment but did not meet the minimally adequate treatment threshold. "No treatment" refers to adults with mental health needs who did not receive any mental health treatment within the past 12 months. "Minimally adequate treatment" is based on evidencebased guidelines for the treatment of a serious mental illness (SMI).5 Mental health treatment estimates are conservative, since those who are receiving adequate treatment may no longer report mental health symptoms in the past year and are therefore not included.

Note: CHIS data and estimates represent Californians living in households and do not include persons living in group quarters (such as nursing homes, dormitories, or prisons).



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Exhibit 1

Number of all adults, adults less than 200% FPL, and adults with public health insurance coverage in California with mental health needs by region and county, one-year averages from CHIS 2007 and 2009

		0 116						116		
	Adults in California			Adults in California			Adults in California			
	with Mental Health Needs			with Mental Health Needs and ≤ 200% FPL				with Mental Health Needs and Medi-Cal		
	Ns	466	C.I.	Ns Ns	<u> </u>	C.I.	Needs a Ns	iu i	C.I.	
Total California	1,979,000	_		851,800	_		413,600	_	(56,000)	
Northern and Sierra Counties	98,600		(143,200)			(13,000)	35,100	±		
Butte	18,000	±	(7,900)		±	(6,700)	5,000	± ±	(3,000)	
Tuolumne, Inyo, Calaveras, Amador,			(7,700)	-	_	(0,700)	3,000		(3,000)	
Mariposa, Mono, Alpine	10,400	±	(5,300)		±		2,300	±	(1,900)	
Shasta	14,800	±	(6,500)		±	(5,600)	5,300	±	(3,400)	
Sutter	6,500	±	(3,400)	3,800	±	(2,600)	2,400	±	(1,700)	
Del Norte, Siskiyou, Lassen, Trinity, Modoc, Plumas, Sierra	10,500	±	(4,000)	5,800	±	(3,000)	4,800	±	(2,000)	
Humboldt	7,200	±	(4,500)	4,800	±	(4,500)	3,100	±	(2,000)	
Tehama, Glenn, Colusa	9,300	±	(4,000)	5,800	±	(3,100)	3,900	±	(2,100)	
Nevada	4,200	±	(1,900)	1,800	±	(1,300)	1,100	±	(1,000)	
Mendocino	7,400	±	(5,400)		±	(4,100)	2,600	±	(2,300)	
Yuba	5,800	±	(2,500)	•	±	(1,400)	2,300	±	(1,400)	
Lake	4,500	±	(1,500)	· · · · · · · · · · · · · · · · · · ·	±	(1,300)	2,400	±	(800)	
Greater Bay Area	341,700	±	(63,800)		±	(34,600)	71,000	±	(32,400)	
Santa Clara	76,900	±	(33,700)	•	±		20,100	±	(19,200)	
Alameda	80,200	±	(33,200)	<u>.</u>		(16,000)	15,100	±	(12,200)	
Contra Costa	44,200	±	(24,300)			(10,300)	13,100	±	(11,300)	
San Francisco	40,000	±	(18,100)			(12,600)	11,200	±	(8,900)	
San Mateo	31,500	±	(21,500)		±	(3,300)	600	±	(600)	
Sonoma	24,000	±	(14,500)		±		2,200	±	(2,200)	
Solano	25,700	±	(14,200)	•	±	(6,700)	6,300	±	(5,600)	
Marin	13,500	±	(7,900)	· · · · · · · · · · · · · · · · · · ·	±	(2,500)	1,200	±	(1,200)	
Napa	5,700	±	(3,700)	,	±	(1,700)	1,400	±	(1,400)	
Sacramento Area	121,900	±		•		(21,000)	24,700	±	(13,700)	
Sacramento	88,000	±	(26,000)	·	±		21,400	±	(13,000)	
Placer	15,600	±	(7,700)		±	(2,500)	900	±	(900)	
Yolo	10,800	±	(5,900)	•	±	(2,200)	1,600	±	(1,500)	
El Dorado	7,400	±	(3,300)	· · · · · · · · · · · · · · · · · · ·	±	(2,000)	900	±	(800)	
San Joaquin Valley	211,600	±	(43,800)			(21,700)	59,400	±	(17,800)	
Fresno	44,200	±	(17,800)			(11,700)	11,900	±	(7,700)	
Kern	47,600	±	(27,500)	<u>.</u>		(11,800)	14,400	±	(10,600)	
San Joaquin Stanislaus	41,600	±	(20,000)		±		11,100	±	(8,300)	
	25,200	±	(14,400)	,	±	(4,600)	5,000	±	(3,700)	
Tulare	25,300	±	(10,300)	•		(7,100)	9,000	±	(4,900)	
Merced	11,600	±				(3,300)	3,300	±	(2,000)	
Kings Madera	8,700 7,400	±	(4,200)		± -	(3,300)	3,500	±	(1,600)	
Central Coast	119,900	±	(2,800) ( <b>27,200</b> )	<u> </u>	±	(1,800) (17,800)	1,100 <b>21,600</b>	±	(800) <b>(8,400)</b>	
Ventura Ventura	49,900	±	(20,500)		±		6,300	±	(6,300)	
Monterey	15,600	±	(6,800)		±	(4,500)	4,600	±	(3,000)	
Santa Barbara	23,900	±	(12,400)		±	(8,200)	6,000	±	(3,800)	
Santa Cruz	11,800	±	(5,300)		±	(3,400)	1,700	±	(1,400)	
San Luis Obispo	15,300	±	(8,200)		±	(6,500)	2,100	±	(2,000)	
San Benito	3,400	±	(2,100)		±	(1,500)	800	±	(700)	
Los Angeles	556,900	±				(63,100)	115,300		(27,200)	
Other Southern California Counties	528,400		(75,700)	210,300			86,500	±	(23,100)	
Orange	147,000	±	(43,000)			(22,000)	16,800	±	(10,000)	
San Diego	143,300	±	(29,000)			(18,200)	24,300	±	(11,400)	
San Bernardino	118,700	±	(43,000)			(17,000)	20,000	±	(9,900)	
Riverside	110,000	±	(35,900)		±		20,800	±	(12,000)	
Imperial	9,400	±	(4,500)		±	(3,700)	4,700	±	(2,100)	
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CHIS california health interview survey

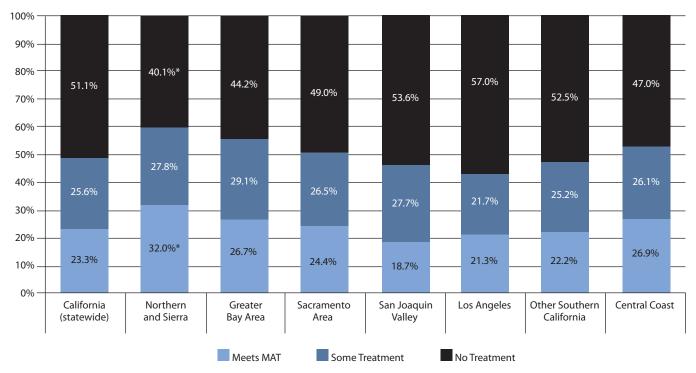
This publication contains data from the California Health Interview Survey (CHIS), the nation's largest state health survey.
Conducted by the UCLA Center for Health Policy Research, CHIS data give a detailed picture of the health and health care needs of California's large and diverse population. Learn more at:

www.chis.ucla.edu

Note: This exhibit reports estimates of the number of adults with mental health needs by county, with a margin of error (+/-) based on the 95% confidence interval (CI). Counties may not sum to regional totals due to rounding.

### Mental Health Treatment among Adults with Mental Health Need in California by Region

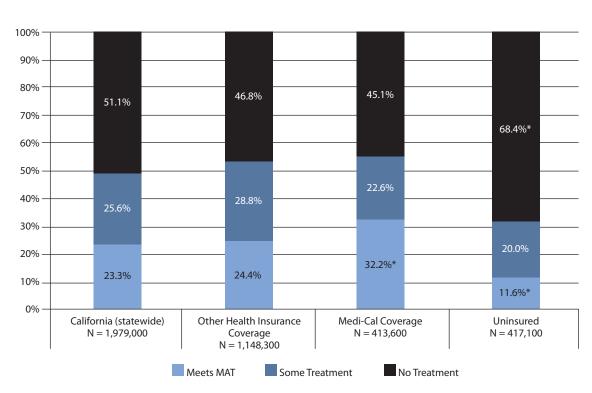
Exhibit 2



 $Note: \quad *Difference from \ unadjusted \ California \ (statewide) \ average \ is \ statistically \ significant \ at \ p < 0.05.$ 

## Mental Health Treatment by Insurance Type among Adults in California

Exhibit 3



Note: \*Difference from unadjusted California (statewide) average is statistically significant at p < 0.05.

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#### **Endnotes**

- Department of Mental Health (DMH) Mental Health Services Act. Accessed June 29, 2011. http://www.dmb.ca.gov/prop\_63/mbsa/docs/Mental\_Health\_ Services\_Act\_Full\_Text.pdf
- 2 Substance Abuse and Mental Health Services Administration – SAMHSA 2.3.1. Definition and Measurement of Serious Mental Illness. Accessed June 29, 2011. http://www.oas.sambsa.gov/COD/ CoD.htm#2.3.1
- Department of Mental Health (DMH), Center for Mental Health Services (CMHS) Definition of Adults with Serious Mental Illness. Accessed June 29, 2011. http://www.dmb.ca.gov/services\_and\_programs/adults/docs/ /SAMHSA/Attachment5Definitions.pdf
- Kessler RC, Barker PR, et al. Screening for Serious Mental Illness in the General Population. Arch Gen Psychiatry 60(2): 184-189 (2003).
- Wang PS, Lane M, Olfson M, Pincus HA, Wells KB, and Kessler RC. Twelve-Month Use of Mental Health Services in the United States: Results from the National Comorbidity Survey Replication. *Arch Gen Psychiatry* 62 (6): 629-640 (2005).