# Health Concern: Mental Disorders

## EXTENT OF PROBLEM AND RISK FACTORS

Mental disorders are among the most common causes of disability in the nation. The resulting disease burden of mental illness is among the highest of all diseases.

Mental disorders contribute to a host of problems that may include disability, pain, or death. (HealthyPeople.gov)

Adults reporting 14+ days of “not good” mental health in last 30 days: 8.5% (Lewis and Clark County)

High school students attempting suicide: 12.5% (compared to 8.4% MT)

Suicide rate per 100,000 people in Lewis and Clark County: 19.3 (compared to 11.0 US)  
**Healthy People 2020 Target: 10.2**

Suicide is the 2\textsuperscript{nd} leading cause of death among 15- to 44-year-olds in MT and the 3\textsuperscript{rd} leading cause for children 5-14.

Mental health plays a major role in people’s ability to maintain good physical health. Mental illnesses, such as depression and anxiety, affect people’s ability to participate in health-promoting behaviors.

Problems with physical health, such as chronic diseases, can have a serious impact on mental health and decrease a person’s ability to participate in treatment and recovery.

The existing model for understanding mental health and mental disorders emphasizes the interaction of social, environmental, and genetic factors throughout the lifespan. (HealthyPeople)

## POTENTIAL GOAL(S)

- Improve mental health through prevention efforts.
- Improve mental health by ensuring access to appropriate, quality mental health services.

## POTENTIAL OBJECTIVE(S)

- Reduce the suicide rate among adults/adolescents.
- Improve the routine screening and diagnosis of depressive disorders.
- Increase the proportion of adults/youth with mental health problems who receive treatment.
- Increase capacity of mental health treatment system in Lewis and Clark County.
- Increase awareness of mental health issues through public education.
Improving family functioning and positive parenting can have positive outcomes on mental health and can reduce poverty-related risk.

Risk factors: Family history/genetic, drug use, chronic disease, post-traumatic stress syndrome, stress

<table>
<thead>
<tr>
<th>COMMUNITY PARTNERS &amp; RESOURCES</th>
<th>POTENTIAL INTERVENTION STRATEGIES</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Support screening of adolescents (12-18 years of age) for major depressive disorder when systems are in place to ensure accurate diagnosis, psychotherapy, and follow-up.</td>
</tr>
<tr>
<td></td>
<td>Support legislation mandating parity in health insurance benefits for mental health services and physical health services, removing a potential financial burden for people with mental health conditions and thus increasing appropriate use of mental health care.</td>
</tr>
<tr>
<td></td>
<td>Support case management programs for individuals with mental health disorders.</td>
</tr>
<tr>
<td></td>
<td>Promote implementation of the Montana Strategic Suicide Prevention Plan.</td>
</tr>
<tr>
<td></td>
<td>Pilot and evaluate methods of integrated mental and physical health in primary care.</td>
</tr>
<tr>
<td></td>
<td>Ensure that those in need, especially potentially vulnerable groups, are identified and referred to mental health care.</td>
</tr>
<tr>
<td></td>
<td>Develop a public awareness campaign to reduce stigma of mental illness.</td>
</tr>
</tbody>
</table>