

**Mental Health Briefing Document**  
**Presented to the Governor's Interagency Council on Health Disparities**  
**September 20, 2007**

**Mental health** means healthy mental function, which is characterized by the ability to perform productive activities, to have fulfilling relationships with other people, to adapt to change, and to cope with adversity. **Mental illness** refers to conditions generally characterized by alterations in thinking, mood, or behavior that are associated with distress or impaired function.

**CRITERION #1: PREVALENCE / INCIDENCE**

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- From 2001-2005 combined, 69,264 Washington adults (9.6%) reported having 14 or more mentally unhealthy days (frequent mental distress).
- The Healthy Youth Survey 2004 shows that 29% of eighth graders, 32% of tenth graders, and 32% of twelfth graders reported having experienced symptoms of depression.

**CRITERION #2: SEVERITY**

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- In 2005, 814 Washington residents committed suicide for an age-adjusted rate of 13 per 100,000. Suicide is the eighth leading cause of death for all residents and the second leading cause of death among youth 15-24 years old in Washington.
- From 1998-2000, mental illness was the leading cause of hospitalization among school-aged children and adolescents in Washington.
- In established market economies such as the U.S., mental illness is the second leading cause of disability and premature mortality.

**CRITERION #3: DISPARITY**

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- From 2001-2005 combined, the prevalence of frequent mental distress was significantly lower among Asians/Pacific Islanders (6.7%) and significantly higher among Native Americans/Alaska Natives (14.5%) and those in the "other non-Hispanic" group (16.8%) than among whites (9.4%). The prevalence among blacks was 8.5% and among Hispanics was 9.2%. The Index of Disparity for frequent mental distress was 74.3%.
- In the years 2003-2005 combined, age-adjusted suicide rates (per 100,000) were highest for American Indian/Alaska Natives (14) and whites (14) followed by Asians and Pacific Islanders (8), blacks (8) and Hispanics (6), for an Index of Disparity of 83%.
- A report of the U.S. Surgeon General found that African Americans and Asians have about the same prevalence of mental health problems as whites, with variations in rates among subpopulations of these two groups. However, these two groups utilize mental health services at lower rates than whites. American Indians and Alaska Natives are likely to have a disproportionately high burden of mental health problems. The report found that different groups of Latinos have very different rates of mental health problems.
- Minority populations have a disproportionately high burden of unmet need for mental health services, partially due to a severe shortage of culturally appropriate mental health services.
- From 2001-2005 combined, Washington women reported having frequent mental distress at a significantly higher rate than Washington men, 11.7% relative to 7.6%, respectively.
- From 2003-2005, Washington males committed suicide at significantly higher rates than women at all ages; 79% of all completed suicides were committed by men. The highest rate of suicide occurred among men 75 years old and older.

**The Index of Disparity** is the average of the difference in rates between the racial/ethnic group with the "best" rate and all other racial/ethnic groups.

*Keppel KG et al., Measuring progress in healthy people 2010. Statistical Notes, no 25. NCHS, 2004*