Chapter 11:
Mental Health

Source: City of Nashua, Division of Public Health and Community Services
Healthy People 2020 defines mental health as a “state of successful performance of mental function, resulting in productive activities, fulfilling relationships with other people, and the ability to adapt to change and to cope with challenges”. Mental disorders are health conditions characterized by alterations in thinking, mood and/or impaired function. Mental illnesses refer to all diagnosable mental disorders. In the United States, mental health disorders are the leading cause of disability accounting for 25% of all years of life lost to disability and premature mortality. According to the National Institute of Mental Health approximately 13 million adults have a serious, debilitating mental illness. The overarching Healthy People 2020 goal for mental health is to improve mental health through prevention and ensuring access to quality mental health services.

The average age of onset of a mental disorder is 14 years old. Fifty-two (52%) percent of adults aged 18-29 and 55% of adults aged 30-44 experience mental disorders. Non-Hispanic blacks are 30% less likely than non-Hispanic whites to experience a mental disorder in their lifetime. Women are no more or less likely to experience a mental disorder over their lifetime than men. However, if a woman does experience a mental disorder, she is twice as likely as a man to have a serious mental illness where serious functional impairments interfere with or limit major life activities.

In 2006, the National Alliance on Mental Illness (NAMI) graded the states on their progress in providing a “life-saving, recovery-oriented, cost-effective, evidence-based system of care”. The national average for the country was a “D”. As a state, New Hampshire also received a “D”, but according to the 2009 report card New Hampshire has improved to a “C”. Six states received a “B”, 18 received a “C”, 29 received a “D” and 6 received an “F”.

The NAMI report stated that in 2005, New Hampshire’s legislature created a commission to drive decision-making around mental health that involved legislators, providers, and consumers. The report highlights some of the urgent issues that are still present - decreasing numbers of psychiatric beds, shortages in community resources, and a shrinking mental health workforce. Since 2000, admissions for inpatient care increased 69%, even as the number of psychiatric beds decreased. NAMI suggested innovations for improving mental health services in New Hampshire that included telemedicine, a statewide planning process and developing a preventative care model.

## Adults and Mental Health

Suicide is the fourth leading cause of death in adults 18-65 years of age. In 2007, there were 28,628 suicides in the United States and the overall rate of suicide was approximately 11 per 100,000 people. The rate for males was approximately 19 per 100,000 while only 5 per 100,000 for females. In New Hampshire, the suicide rate is lower than states in the western part of the country but slightly higher than Massachusetts and New York (Figure 11.1). From
2003-2007, there were 931 emergency department (ED) discharges for suicide attempts accounting for 0.21% of ED visits for Nashua residents. In the Greater Nashua Region, excluding Nashua, there were 645 suicide attempts accounting for 0.11% of all emergency department visits. The vast majority of the suicide attempts were made by 18 to 64 year olds.8

**Figure 11.1 Suicide Rates in the United States, 2000-2006**

The Behavioral Risk Factor Surveillance System (BRFSS) asks New Hampshire adults about the number of mentally unhealthy days they had in the past 30 days, and the average was 3.6 days for Nashua residents. In comparison, NH residents outside of Nashua reported 3.2 mentally unhealthy days (Table 11.1).9,10 Moreover, 81% of Nashua residents reported receiving needed social and emotional support “always or usually”, while 19% received support “sometimes, rarely or never”.9 According to the 2009 National Health Interview Survey, 12% of adults in the United States experienced feelings of sadness all, most, or some of the time, and 7% felt hopeless.11
Anxiety is one of the most common mental disorders in the United States. Approximately 18% of adults are diagnosed with an anxiety disorder and women are more likely than men to experience anxiety during their lifetime.\textsuperscript{12} According to BRFSS, in 2006 approximately 15% (CI 9-20%) of Nashua residents had been diagnosed with an anxiety disorder at some point in their life compared to 13% (CI 12-14%) in NH (Table 11.2). For depression, 5% (CI 2-9%) of Nashua residents had a moderate to severe depression score (>10), compared to 7% (CI 6-8%) in NH. Additionally, 18% (CI 12-24%) of Nashua’s adults have been told by a healthcare provider that they have a depressive disorder (including depression, major depression, dysthymia, or chronic depression, and minor depression) at some point in their lifetime.\textsuperscript{9}

The results of the 2010 Nashua Community Health Survey were similar to the BRFSS data, showing that 15% of Nashua’s adults have been told by a doctor, nurse or healthcare provider that they have anxiety and 20% have been told that they have depression.\textsuperscript{13}

### Table 11.1 Mentally Unhealthy Days, 2005 – 2007

<table>
<thead>
<tr>
<th>Mentally Unhealthy Days Past 30 Days, 2005-2007</th>
<th>Average Days</th>
<th>95% Confidence Intervals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nashua</td>
<td>3.6</td>
<td>2.9</td>
</tr>
<tr>
<td>NH minus Nashua</td>
<td>3.2</td>
<td>3.0</td>
</tr>
<tr>
<td>US (2009)*</td>
<td>3.5</td>
<td>3.4</td>
</tr>
</tbody>
</table>

Source: NH DHHS; *CDC

### Table 11.2 Mental Health Disorders, 2006

<table>
<thead>
<tr>
<th>Prevalence of Mental Health Disorders, BRFSS, 2006</th>
<th>Anxiety</th>
<th>95% Confidence Intervals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nashua</td>
<td>15%</td>
<td>9-20%</td>
</tr>
<tr>
<td>NH</td>
<td>13%</td>
<td>12-14%</td>
</tr>
<tr>
<td>Depression</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nashua</td>
<td>5%</td>
<td>2-9%</td>
</tr>
<tr>
<td>NH</td>
<td>7%</td>
<td>6-8%</td>
</tr>
<tr>
<td>Depressive Disorder</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nashua</td>
<td>18%</td>
<td>12-24%</td>
</tr>
<tr>
<td>NH</td>
<td>17%</td>
<td>16-18%</td>
</tr>
</tbody>
</table>

Source: NH DHHS

For more information on mental illness, visit the National Alliance on Mental Illness (NAMI) at www.nami.org.
Emergency Department and Inpatient Discharges for Psychiatric Conditions

From 2003-2007, there were 4,781 inpatient hospitalizations for psychiatric conditions for Nashua residents, mostly for episodic mood disorders. Approximately 0.52% (CI 0.50-0.54%, n=2,308) of Nashua adults have been hospitalized for episodic mood disorders and 0.42% (CI 0.40-0.44%, n=1,841) of Nashua adults have gone to the emergency department for anxiety, dissociative disorders (disorders that cause a person to disconnect from their personal identity\(^20\)) and somatoform disorders (psychiatric disorders that cause unexplained physical symptoms\(^21\)) (Figure 11.2 and 11.3). There were an additional 2,523 inpatient hospitalizations during this time period in the remaining 12 towns in the Greater Nashua Region. The majority of people with psychiatric hospitalizations for Nashua, the region and the state were of adults aged 18-64 years. For residents of Nashua and the Greater Nashua Region, there is little variation in psychiatric hospitalization rates by gender (Figure 11.4).\(^8\)

**Figure 11.2 Top Three Psychiatric Conditions for Hospitalization, 2003-2007**

- **Episodic mood disorders**
- **Schizophrenic disorders**
- **Alcohol dependence syndrome**

*Source: NH DHHS*

15% of Nashua’s adults have been told by a doctor, nurse or healthcare provider that they have anxiety and 20% have been told that they have depression.

- 2010 Nashua Community Health Survey
Figure 11.3 Top Three Psychiatric Conditions on ED Discharge, 2003-2007

Source: NH DHHS

Figure 11.4 Psychiatric Hospitalizations by Gender, 2007

Source: NH DHHS
Treatment and Costs

According to the federal Substance Abuse and Mental Health Services Administration (SAMHSA), 13.4% of adults in the US received treatment for a mental health problem in 2008. This includes those who received care in both inpatient and outpatient settings, as well as those who used prescription medication to manage their mental or emotional issues.\textsuperscript{14} According to the National Health and Nutrition Examination Survey, approximately 50% of children with mental disorders received treatment.\textsuperscript{15}

In the United States, mental health disorders rank third as the most costly medical condition after heart conditions and trauma.\textsuperscript{16} An estimated $300 billion is spent on direct and indirect costs of serious mental illness in the United States. Indirect costs include expenditures for disability support and lost earnings.\textsuperscript{17} In 2006, 36.2 million people paid for mental health services that totaled over $57 billion, averaging $1,591 per person. Within this population, 4.6 million children received mental health services that totaled over $8.9 billion, averaging $1,931 per child.\textsuperscript{18} For Nashua residents, the average cost per discharge for inpatient hospitalizations for psychiatric conditions was approximately $10,532 and $1,278 for emergency department visits in 2007.\textsuperscript{8}

The Greater Nashua Mental Health Center at Community Council (GNMHC) works with the community to meet the mental health needs of its residents by providing evaluation, treatment, resource development, education, and research. The top ICD-9 Codes for 2010 for their adult Nashua clients were:

- Moderate Bipolar Disorder,
- Severe, recurrent, major depressive disorder with psychotic features,
- Moderate, recurrent, major depressive disorder.

For children, they were:

- Anxiety Disorder,
- Mood Disorder, and
- Attention Deficit Hyperactivity Disorder (ADHD)

Between 2005 and 2010, the number of clients seen at the GNMHC increased by 48% and the number of service units increased by 15%. Of these clients, those with no insurance dramatically increased by 175% between 2005 and 2010.\textsuperscript{19}

There are ten Community Mental Health Centers in New Hampshire that contract with NH DHHS to provide publicly funded mental health services to individuals and families who meet certain criteria for services. For more information, visit http://www.dhhs.nh.gov/dcbcs/bbh/centers.htm or call 603-271-5000.
Table 11.3 Greater Nashua Mental Health Center Clients by Payor

<table>
<thead>
<tr>
<th>Payor</th>
<th>2005</th>
<th>2010</th>
<th>% Change from 2005-2010</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>All Clients</td>
<td>Percent</td>
<td>All Clients</td>
</tr>
<tr>
<td>Unique Clients</td>
<td>2,345 *</td>
<td></td>
<td>3,468</td>
</tr>
<tr>
<td>Total Visits</td>
<td>391,645 *</td>
<td></td>
<td>102,307</td>
</tr>
<tr>
<td>Service Units</td>
<td>232,700 *</td>
<td></td>
<td>266,479</td>
</tr>
<tr>
<td>Payor</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Private Insurance</td>
<td>268</td>
<td>11%</td>
<td>355</td>
</tr>
<tr>
<td>Private Insurance/Medicaid</td>
<td>93</td>
<td>4%</td>
<td>55</td>
</tr>
<tr>
<td>Private Insurance/Medicare</td>
<td>N/A</td>
<td>*</td>
<td>79</td>
</tr>
<tr>
<td>Medicaid</td>
<td>973</td>
<td>42%</td>
<td>975</td>
</tr>
<tr>
<td>Medicare</td>
<td>89</td>
<td>4%</td>
<td>192</td>
</tr>
<tr>
<td>Other</td>
<td>478</td>
<td>20%</td>
<td>590</td>
</tr>
<tr>
<td>No Insurance</td>
<td>444</td>
<td>19%</td>
<td>1,222</td>
</tr>
<tr>
<td>Total</td>
<td>2,345</td>
<td>100%</td>
<td>3,468</td>
</tr>
</tbody>
</table>

* Not Applicable

Source: Greater Nashua Mental Health Center at Community Council

Between 2005 and 2010, the number of clients seen at the GNMHC increased by 48% and the number of service units increased by 15%.

Of these clients, those with no insurance dramatically increased by 175% between 2005 and 2010.

- Greater Nashua Mental Health Center at Community Council


19 Carol Farmer, Greater Nashua Mental Health Center at Community Council, personal communications, February 25, 2011.


Source: City of Nashua, Division of Public Health and Community Services