

Nearly 1 in 5 Californians report need for mental health services, study finds

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In a comprehensive new study of mental health status and the use of mental health services by Californians, the UCLA Center for Health Policy Research found that nearly one in five adults in the state — about 4.9 million people — said they needed help for a mental or emotional health problem.

In addition, approximately one in 25, or more than 1 million, reported symptoms associated with serious [psychological distress](#) (SPD), which includes the most serious kinds of diagnosable mental health disorders.

Of those adults with either "perceived need" or SPD, only one in three reported visiting a mental health professional for treatment, a factor potentially attributable to fear of stigmatization, as well as lack of insurance coverage, the researchers said.

The study draws on data from the 2005 California Health Interview Survey (CHIS), which is administered by the UCLA Center for Health Policy Research.

"There's a lot of need, but also a lot of obstacles connecting those in need to the services that can help them," said David Grant, the study's lead author and director of the CHIS. "Part of the problem may be stigma. It's hard for many [Californians](#) to acknowledge they need help — to their family, friends or their doctor. The challenge for policymakers and providers is to both target appropriate services to those with needs and to reduce fear."

Grant noted that since the data was collected, the state has suffered an [economic downturn](#), resulting high unemployment.

"The recession has created even more stress for people," he said. As a result, the study "is probably an underestimate of the true level of mental health need in California right now."

Among the findings:

Women at risk

Women were nearly twice as likely as men (22.7 percent vs. 14.3 percent) to say they needed help for a mental or [emotional health](#) problem ("perceived need"), such as feeling sad, anxious or nervous.

Working-age adults at risk

The prevalence of perceived need was twice as high for adults under 65 as for those 65 and older (20.2 percent vs. 9.2 percent).

Income a significant factor

The poorest adults — those living below 100 percent of the federal poverty level — were much more likely to report symptoms associated with SPD than those with incomes that were even just slightly higher. The poorest were more than five times as likely to report SPD as those living at or above 300 percent of the federal poverty level.

Distress pervasive regardless of race or ethnicity

Although racial and ethnic disparities in mental health were found in the study, those differences diminished when adjusted for income. These findings suggest that mental health status is more closely related to

socioeconomic status than ethnicity or place of birth.

Insurance coverage improves access to services

Adults with health insurance coverage were almost twice as likely to have received mental health services during the previous 12 months as adults without health insurance.

Stigma, cultural factors may impede access to services

Men, adults aged 65 or older, and Latino and Asian immigrant groups were far less likely to seek help with a mental health professional than other groups. The authors note that these findings suggest that stigma and cultural factors may pose a significant barrier to care.

Provided by University of California - Los Angeles

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