

Mental Health

Overview

There are high public and social costs associated with mental illness and poor mental health. People with poor mental health and/or serious mental illness may find it challenging to navigate social and economic systems and follow daily routines. For example, only one in five adults served by Delaware's public mental health system in 2014 was employed (SAMHSA, n.d.). Untreated mental illness can have fatal results. From 2013-2014, 4% of all adults in Delaware seriously contemplated suicide. In 2014, the suicide rate in Delaware was 13.5 deaths per 100,000 in the population, which is comparable to the national suicide rate of 13.4, during the same time period (CDC, n.d.). As of the 2010 Census, Kent County had the highest rate of suicide in the state (PolicyMap [CDC data], n.d.).

According to the Behavioral Risk Factor Surveillance System, in 2016, Delawareans surveyed reported that on average they did not have good mental health on 3.6 days out of the last 30 days. Disparities in reporting of the number of poor mental health days varied by location, income level, high school attainment, race, and gender. The largest disparities are related to income, educational attainment, and age. Those who reported making \$25,000 dollars or less had more than twice the number of days in a month where their mental health was not good than those who made \$75,000 or more. Similarly, people who had less than a high school diploma had 75% more poor mental health days as college graduates. Statewide, suburban residents reported a slightly greater number of poor mental health days than other residents. Adults over the age of 65 reported fewer days when their mental health was not good as compared to other age groups (Delaware Health Tracker, n.d.). City-level data from the CDC shows that in 2014, 14.5% of Wilmington residents reported that their mental health was not good for 14 or more days in the past month (CDC, n.d.).

From 2013-2014, nearly 4% of adults in Delaware suffered from a serious mental illness. Almost half of the people surveyed who reported having any mental illness received treatment or counseling within the past year (SAMHSA, n.d.).

In 2015, Delaware had 228 mental health providers per 100,000 people. According to the Health Resources and Services Administration (HRSA), Sussex County has a shortage of mental health facilities, and received a Health Professional Shortage Area score of 18 or above, which qualifies as a high priority area by HRSA (HRSA, 2017).

Data from the 2015 High School Delaware Youth Risk Behavior Survey indicate that about one in four youth report they had felt sad or hopeless for two weeks or more in the past year. Thirteen percent reported that they had purposely hurt or cut themselves during the past year. An even greater percent of students (15%) reported they had considered suicide during the past year while 11% of students had a plan for suicide, and 7% reported that they had attempted suicide. Almost half of the respondents reported that they think the main reason that teenagers commit suicide is due to bullying. According to the *2015 Behavioral Health Barometer: Delaware* (SAMHSA), 11 % of youth, age 12-17, reported having a major depressive episode during the past year. Over half of these youth reported that they did not receive treatment for depression.