

MENTAL HEALTH IN THE REGION – A LOOK INTO DEPRESSION ON LONG ISLAND

Fifth in a series of data reports examining trends and patterns of selected health topics
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Introduction

According to the Centers for Disease Control and Prevention (CDC), an estimated 50% of all Americans will have a mental health diagnosis at some point in their life. Mental health includes one's emotional, psychological, and social well-being. There is no good physical health without sound mental health.

At the writing of this report, the COVID-19 pandemic continues to sweep the nation. Its severity and unpredictability and the economic instability it has thrust upon individuals has caused a spike in anxiety and depression among all age groups. As a result, mental health experts say they are bracing for a mental health crisis now and well into future months.

Depression

The National Institute for Mental Health defines a Major Depressive Episode (depression) as depressed mood or a loss of interest or pleasure in daily activities accompanied by problems with sleeping, eating, energy, concentration, or self-worth lasting longer than two weeks.¹ Despite being highly treatable, depression continues to have a profound impact on health and well-being of Americans. Depression is the leading cause of disability worldwide, and the second most common cause of work disability among adults in the U.S.^{2 3} Depression costs employers in the United States about \$44 billion per year in lost productivity.^{4 5} People with Depression have a 40% higher risk of developing cardiovascular and metabolic diseases and almost 20% of adults with mental illness also have a substance abuse disorder.^{6 7}

Long Island Health Collaborative

The Long Island Health Collaborative (LIHC) is a coalition of hospitals, county health departments, dozens of community-based organizations, health plans, colleges and schools, libraries, local municipalities, businesses and others working voluntarily since 2013 to lessen the burden of chronic diseases. It also focuses on the incidence of substance use and mental health, particularly as physical and mental health are interdependent.

The LIHC is an initiative overseen by the Nassau-Suffolk Hospital Council, an association that advocates for fair and reasonable healthcare legislation and regulation on behalf of hospitals on Long Island. Funding for the Collaborative's activities comes from a Population Health Improvement Program (PHIP) grant, via the New York State Department of Health.

A major initiative of the Collaborative is to utilize various data sources and provide region-specific analytics. The LIHC analyzes national, state, and regional secondary data sets, as well as primary data it collects. This report, *Depression on Long Island*, provides a region-specific analysis of the current measures of depression in Nassau and Suffolk County compared to New York State and national averages. In 2018, the Collaborative participants identified, through a survey, mental health as a predominant concern.

Key Findings

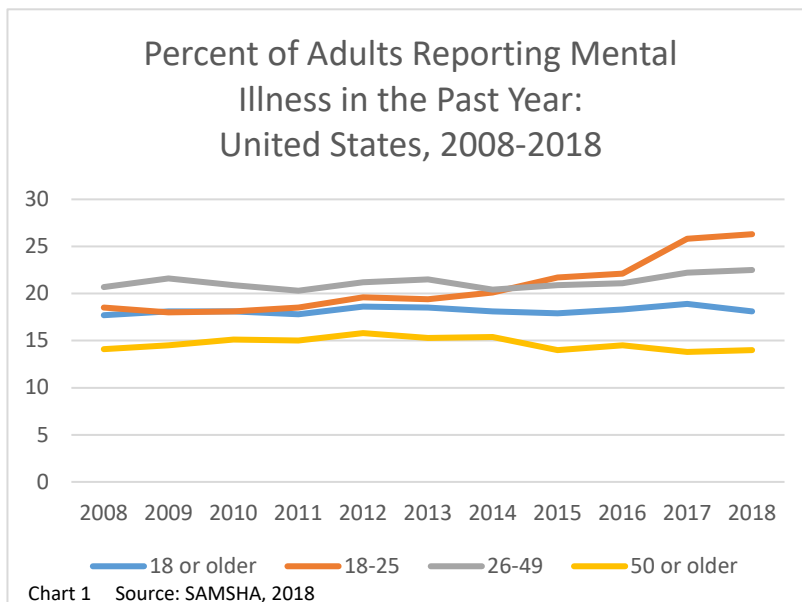
- **In 2016, the prevalence of adults reporting 14 or more days of poor mental health was 10.8 % of adults Nassau County and 8.1% Suffolk County indicating a slight**

increase in prevalence in Nassau County and a slight decrease in Suffolk County since 2014.

- In 2016, 7.5% of adults in Nassau County and 10.2% of adults in Suffolk County reported having a depressive disorder indicating a lower prevalence of depressive disorders on Long Island compared to the state (11.8%).
- Roughly 6% of adults on Long Island reported having a major depressive episode in the last year compared to 6.5% in New York State and 7% in the U.S. The prevalence of major depressive episodes remained largely unchanged between 2012-2014 and 2014-2016 data collection periods.
- In the past eight years, the number of hospital inpatient discharges related to depression or major depressive disorders has decreased overall, but has increased in children and teens

Mental Health

In 2018, an estimated 47.6 million adults in the **United States (20%)** reported having a mental, behavioral or emotional disorder in the past year.⁷ In **New York State, 17.6 percent** of adults 18 or older reported any mental illness in 2017.⁸



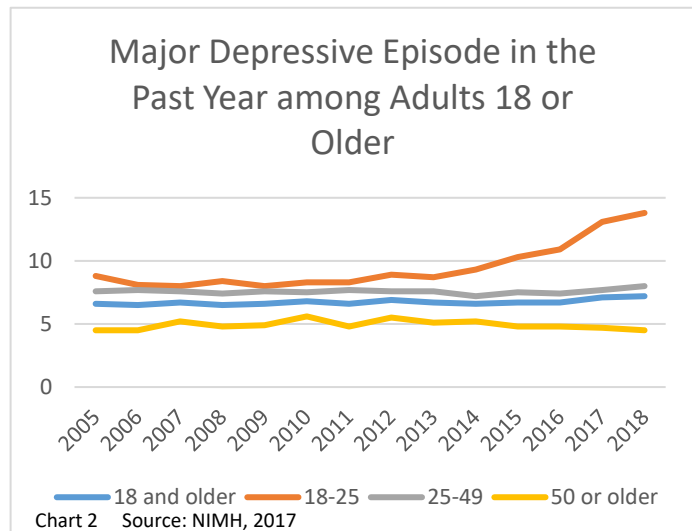
Mental illnesses are more prevalent among women (22%) than men (15%) and most common in young adults aged 18-25 (26%)⁹. The prevalence of mental illness has remained steady for most age groups over the last 10 years, however, the percent of young adults (18-25 years) reporting any mental illness is rising. This is depicted in Chart 1. The National Comorbidity Survey Adolescent Supplement estimates that **49.5% of teens aged 13-18**

had a mental health disorder at some point in their lifetime¹⁰.

Depression

The National Institute on Mental Health estimates that **7% of all U.S. adults** had at least one major depressive episode in 2017 and that the prevalence of depressive episodes was higher among females than males and highest among individuals aged 18-25.¹¹ The prevalence of major depressive episodes in the 18-25 age group has increased over the last 15 years, as depicted in Chart 2.

The CDC reports that the prevalence of depression decreases as family income levels increase and that 16% of adults living below the federal poverty level had depression compared 3.5% of adults living above the FPL.¹²



Teens and Depression

Also in 2017, the NIH found that **13% of adolescents aged 12 to 17** had at least one major depressive episode. Depressive episodes were three times more prevalent among adolescent females aged 12 to 17 than males. The percentage of teens experiencing major depressive episodes appears to be rising. In 2006, 8% of teens reported a major depressive episode in the previous year and in 2018, 14% reported an MDE.⁷

In New York State, the prevalence of major depressive episodes and symptoms of depression in teens are also rising. In 2011, 7.2% of adolescents reported a major depressive disorder compared to 10.5% in 2014.¹³

Depression on Long Island

Mental health was identified by members of the Long Island Health Collaborative and the community as a priority issue. Regional data from the Behavioral Risk Factor Surveillance System (BRFSS), the National Survey on Drug Use and Health, Statewide Planning and Research Cooperative System (SPARCS), and the Long Island Health Collaborative Community Health Assessment Survey was analyzed to identify regional trends in the prevalence of depression.

About the LIHC Community Health Assessment Survey

The Long Island Health Collaborative created the Community Health Assessment Survey in 2013 as a way to identify the health-related needs of Long Island communities as their members perceive them. The survey includes questions about access to care and perceived barriers, major health concerns of the individual and for themselves and for their community, access to education and screenings, and gaps in services. More than 17,000 surveys have been collected to date.

The results of the [2019 Community Health Assessment Survey](#) indicate that mental health and depression as well as access to related services are a priority for members of many Long Island Communities and Suffolk County respondents in particular. The data was collected between January – December 2019.

When asked what was most needed to improve the health of the community: 14% of Suffolk County respondents and 10% of Nassau County respondents said mental health services.

When asked to identify their biggest ongoing health concerns for their community: 13% of Suffolk County respondents said mental health/depression/suicide.

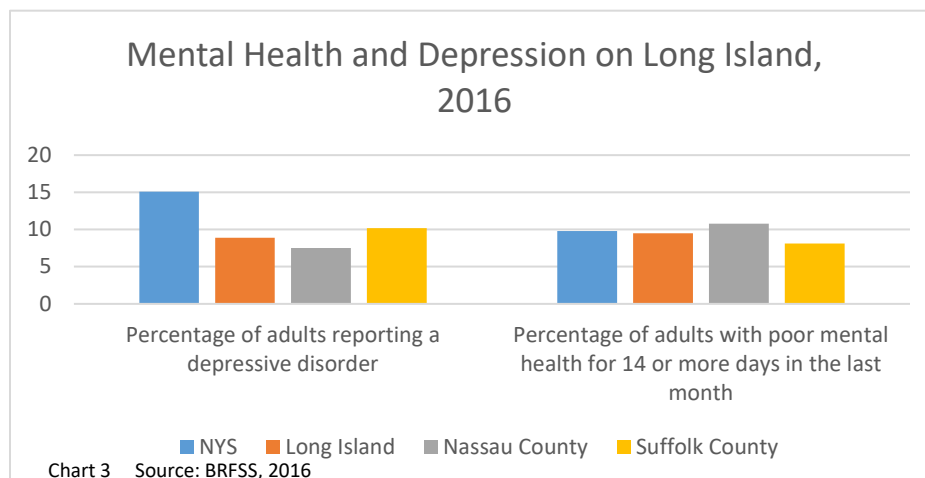
When asked to identify their biggest ongoing health concern for themselves: 10% of Suffolk County respondents said mental health depression/suicide.

About the BRFSS Data Set

Operated by the CDC, the [Behavioral Risk Factor Surveillance System](#) is the nation's largest continually conducted survey system. It focuses on collecting behavioral health risk data via telephone surveys for all 50 states in the United States, including the District of Columbia and three U.S. territories. This annual survey provides for comparison of county-, state- and national-level data, allowing for the tracking of progress and trends.

Two BRFSS survey questions are used to assess mental health. Responses are used to calculate the percent of adults reporting 14 or more days with poor mental health in the last month and the percent of adults reporting a depressive disorder (a new survey question with data collection beginning in 2016).

In 2016, 10.7% of adults in New York, 10.8 % of adults in Nassau County and 8.1% of adults in Suffolk County reported 14 or more days of poor mental health. The same year, 11.8% of adults in New York reported having a depressive disorder while 7.5% of adults in Nassau County and 10.2% of adults in Suffolk County reported having a depressive disorder. Chart 3 depicts these results.



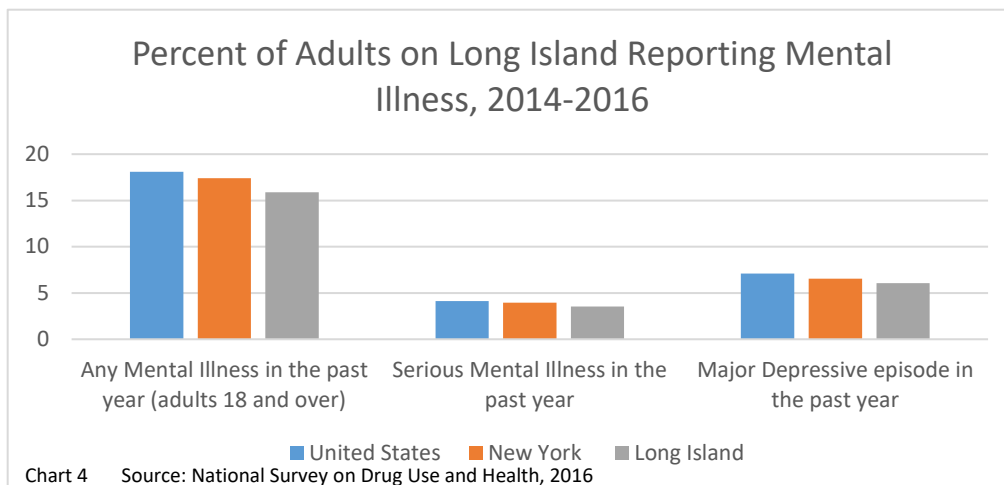
There was an increase in the prevalence of adults in Nassau County reporting poor mental health for 14 or more days in the last month (10.8% in 2016 versus 7.7% in 2014). There was a decrease in the prevalence of adults in Suffolk County reporting poor mental health for 14 days or more in the last month (8.1% in 2016 versus 13.5% in 2014).

About the National Survey on Drug Use and Health

Operated by the Substance Abuse Mental Health Services Agency (SAMSHA), [The National Survey on Drug Use and Health](#) (NSDUH) provides information on tobacco, alcohol, and drug use, mental health and other health-related issues in the United States. It is conducted every year in all 50 states and the District of Columbia. This report provides national, state, and sub-state data.

Based on 2014, 2015, and 2016 combined NSDUH [data](#), the prevalence of mental illness and more specifically depression on Long Island is slightly lower than the national and state averages. As depicted in Chart 4, **roughly 15.9% of adults on Long Island report having a mental illness in the past year and 3.5% report having a serious mental illness in the past year. More than 6% of adults on Long Island reported having a major depressive episode in the last year.** These percentages were largely unchanged from the 2012-2014 survey results indicating 18.5% of adults with any mental illness, 4% of adults with severe mental illness, and 6% of adults with a major depressive episode in the last year,

Results also indicate lower percentages of adults with any mental illness, serious mental illness, and those experiencing major depressive episodes on Long Island compared to New York State and the nation.

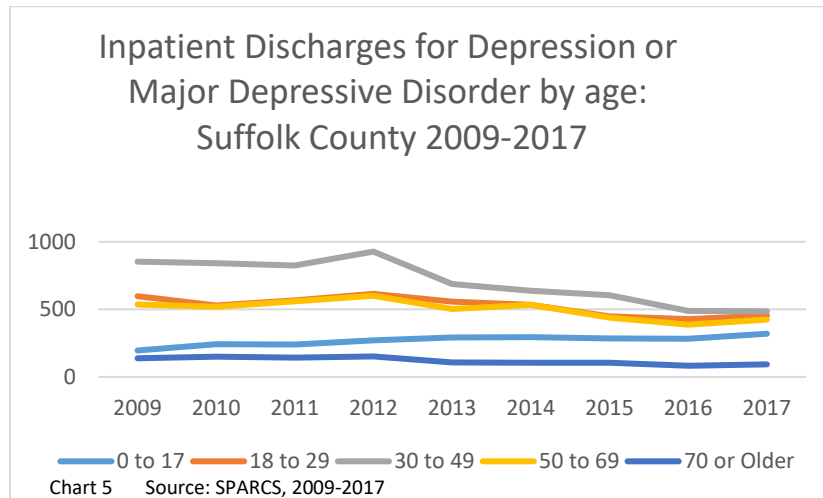


About SPARCS

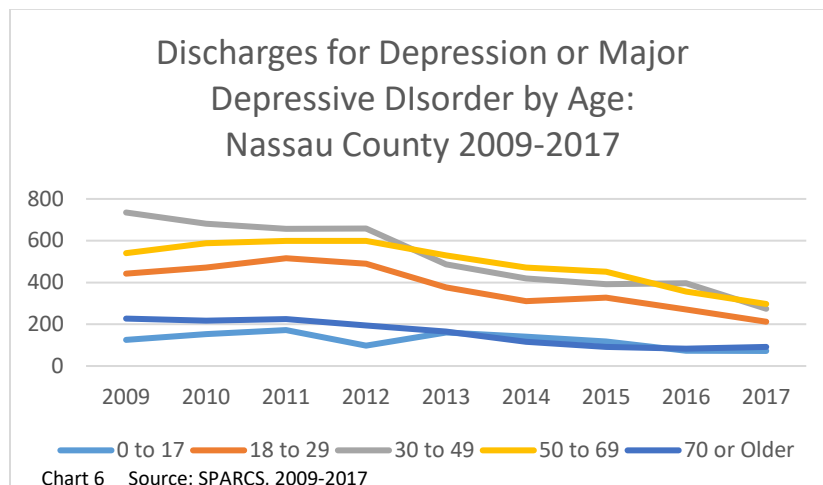
The [Statewide Planning and Research Cooperative System](#) (SPARCS) is a comprehensive all-payer patient-level database reporting on all inpatient and outpatient hospital discharges.

In Suffolk County, 1,780 hospital inpatients were discharged with diagnoses related to or including depression accounting for 10.8% of all discharges in 2017. In the past eight years, the number of patient discharges related to depression or major depressive disorders has decreased overall, but has increased in children and teens. These trends are noted in Chart 5.

Nationally, CDC reports that in 2016, 10% of emergency department visits in the United States had depression indicated on the medical record.¹⁴



In Nassau County, 947 hospital inpatients were discharged with diagnoses related to or including depression accounting for 5.1% of all discharges in 2017. In the past eight years, the number of patient discharges related to depression or major depressive disorders has decreased for all age groups. These trends are shown in Chart 6.



Conclusions:

The data analyzed for this report suggests that the prevalence of any mental illness and depression on Long Island is slightly lower than national and state averages. Despite a slight increase in the percent of adults in Nassau County reporting poor mental health for 14 days or more and a slight decrease in the percent of adults reporting poor mental health for 14 days or more in Suffolk County the prevalence of mental illness and depression on Long Island seem to have remained steady over the last eight years. Similarly, the number of hospital inpatient stays on Long Island with a discharge diagnosis related to depression has remained steady or decreased overall with a slight increase in children 0-17 years.

There are a number of limitations that impact the accuracy of data analyzed. Two of the data sets analyzed rely on respondents self-reporting details about their health and mental health truthfully and accurately and as such are subject to reporting bias. Stigma surrounding mental health could make respondents feel more reluctant to disclose information related to their mental illness. Research suggests that roughly 50% of individuals with a mental illness get treated.¹ Respondents could also be experiencing symptoms of mental illness that have gone undiagnosed and may not associate what they are feeling with the questions they are being asked.

Resources:

Individuals and organizations looking for services on Long Island can refer to:

The Association for Mental Health and Wellness [Directory of Mental Health Services for Suffolk County](#).

The Nassau County Department of Human Services, Office of Mental Health, Chemical Dependency and Developmental Disability [Directory of Behavioral Health and Developmental Disability Services](#)

Also, check directly with your local hospital and community-based organizations for services and programs

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⁷ SAMSHA. Key Substance Use and Mental Health Indicators in the United States: Results from the 2018 National Survey on Drug Use and Health: <https://www.samhsa.gov/data/sites/default/files/cbhsq-reports/NSDUHNationalFindingsReport2018/NSDUHNationalFindingsReport2018.pdf>

⁸ Substance Abuse and Mental Health Services Administration. (2019). 2016-2017 National Survey on Drug Use and Health State Prevalence Estimates: <https://www.samhsa.gov/data/report/2016-2017-nsduh-state-specific-tables>

⁹ National Institute of Mental Health. Mental Illness: <https://www.nimh.nih.gov/health/statistics/mental-illness.shtml>

¹⁰ Merikangas KR, He JP, Burstein M, Swanson SA, Avenevoli S, Cui L, Benjet C, Georgiades K, Swendsen J. Lifetime prevalence of mental disorders in U.S. adolescents: results from the National Comorbidity Survey Replication--Adolescent Supplement (NCS-A). *J Am Acad Child Adolesc Psychiatry*. 2010 Oct;49(10):980-9.

¹¹ National Institute of Mental Health. Depression Statistics <https://www.nimh.nih.gov/health/statistics/major-depression.shtml>

¹² Centers for Disease Control and Prevention. Prevalence of Depression Among Adults Aged 20 and Over: United States, 2013-2016. NCHS Data Brief No. 303, February 2018. <https://www.cdc.gov/nchs/products/databriefs/db303.htm>

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¹⁴ Centers for Disease Control National Center for Health Statistics. FastStats, Depression. <https://www.cdc.gov/nchs/fastats/depression.htm>

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