

Mind Matters: A Public Health Approach to Mental Illness and Well-Being

Adreanne Waller, MPH

and Lily Guzmán, MPH, MSW

Washtenaw County Public Health

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Message from the Health Director

On behalf of the Washtenaw County Public Health Department I am pleased to release our newest report, “Mind Matters: A Public Health Approach to Mental Illness and Well-Being.” This overview of our community is important because mental health is critical to overall health and well-being and needs to be given the same priority as physical health. Mental illness can influence other illnesses and often occurs along with substance abuse, tobacco use and lack of physical activity. Most people with mental disorders do not receive treatment—even though it is available and effective—because of factors including lack of awareness, stigma and problems getting service.

As a public health agency we are focused on prevention of health problems and we conduct surveillance to improve the information we have on health problems in our community. Our aim with this report is to improve the understanding of mental health as a catalyst for action. This report can help make the case for local mental health promotion and prevention strategies and support the treatment system through increasing awareness, identifying risk factors, removing stigma associated with seeking treatment, eliminating health disparities among groups and improving access to services.

If we are to reach our public health goal of complete well-being for all, we need to bridge the gap between mental and physical health. Integrating mental health promotion and mental illness prevention into traditional public health work is one more step towards improving the mental health of Washtenaw County residents.



Ellen Clement, MSW, MPH
Health Director
Washtenaw County Public Health Department

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Executive Summary

Adults –Mental Health Indicators for Washtenaw County Residents

- 49% of Washtenaw County adults identify being ‘very satisfied’ with life. Those of ‘Other’ race have the lowest proportion ‘very satisfied.’
- 48% of Washtenaw County adults identify that they ‘always’ get the social and emotional support needed.’ Only 30% of Black persons identify ‘always’ getting the social and emotional support needed.
- 35% of Washtenaw County adults identify having ten or more days without enough sleep or rest.
- 10% of Washtenaw County adults identify having ten or more days of poor mental health in the past month (PMHDPM). Residents in the Milan, Dexter, Whitmore Lake and East Ypsilanti zip codes have the highest proportion of persons identifying ten or more days of poor mental health.
- Only 24% of persons with ten or more days of PMHDPM are currently being seen by a mental health professional; 33% of those with 14 or more days of PMHDPM; and only 24% of those who had 30 days of PMHDPM.
- National 1999 estimates suggest that 21% of adults 18-54 years have diagnosable mental illnesses. This translates to over 42,000 Washtenaw County adults of the same age.
- Recent 2005 national estimates suggest 26.2% prevalence rate of any diagnosable mental disorder for adults 18 years and older. Nearly half of these individuals have more than one diagnosis, 23%, three or more diagnoses.
- Nearly a quarter of those who identify ten or more days of poor mental health identify limitations to activities of daily living, compared to only 14% of those with fewer than ten PMHDPM.
- Washtenaw County adults with ten or more PMHDPM identify an average of 8.2 days per month that physical or mental health limited their physical activity (compared to only 2.9 days for those with fewer than ten PMHDPM).
- Washtenaw County residents with ten or more days of poor mental health in the last month have higher rates of uninsurance, diabetes, asthma, high cholesterol, intimate partner violence, being sedentary, using tobacco, binge drinking and obesity compared to those who identify fewer poor mental health days.
- The U.S. Census data suggest that 3% of Washtenaw County residents 16-64 years and 9% of person 65 years and older have a ‘mental disability.’ The Black population has the highest rate compared to Whites, Hispanics and Asian populations.
- Only 45% of Washtenaw County residents with a mental disability are employed.
- 14% of Washtenaw County adults binge drank during the past month, compared to 17% in Michigan and 14% for the U.S.
- 7% of Washtenaw County adults used illicit drugs during the past year, according to 2005 HIP survey data.
- Inpatient hospital discharges for alcohol or drug use or dependence decreased by 67% between 1985 and 2003 for Washtenaw County residents.
- Suicide rates for Washtenaw County residents have decreased since 1989. The highest rates are in elderly males. Overall, males are four times more likely than females to commit suicide.

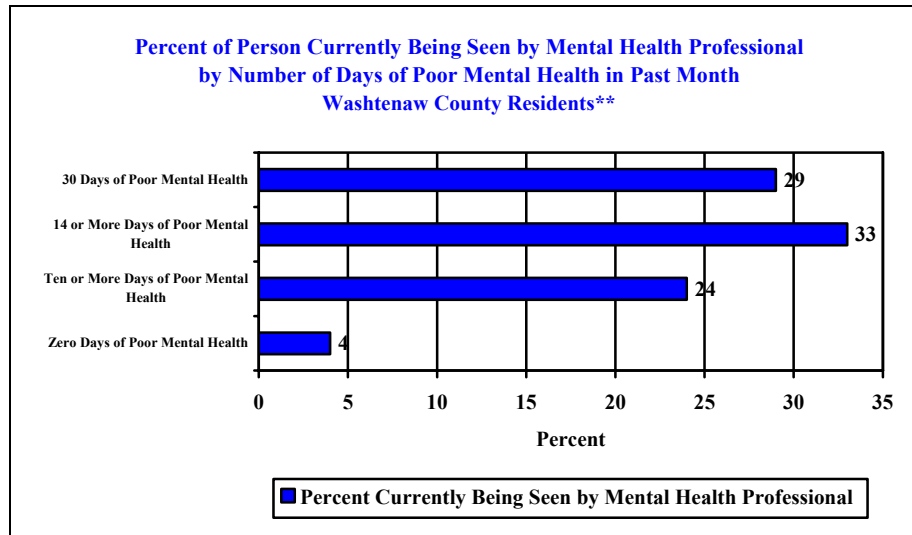
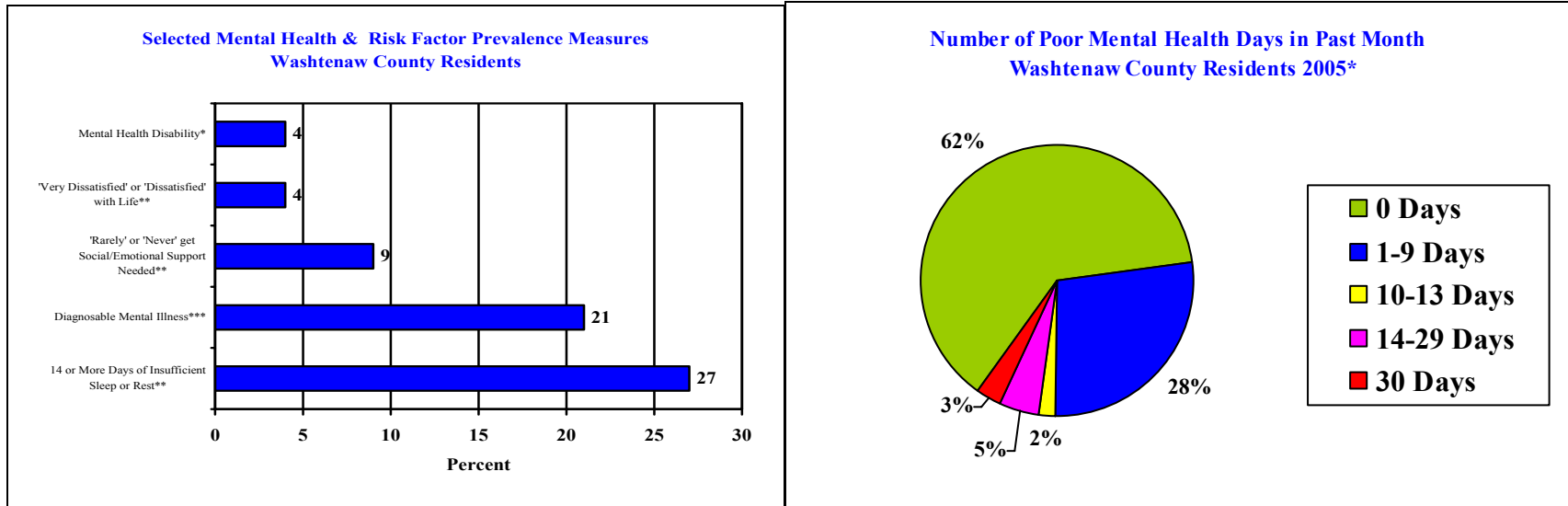
Special Populations – Mental Health Indicators

- The Washtenaw County Jail Diversion Program reports that 27% of Washtenaw County jail inmates report psychotropic medication use.
- Approximately 33-55% of the 2,700 homeless persons in Washtenaw County have mental illnesses.
- Fifteen percent of University of Michigan students report being diagnosed with depression.

Children – Mental Health Indicators

- 21% of Washtenaw County children aged 9-17 years are estimated to have mental disorders with at least mild functional impairment. This translates to 7,307 children.
- U.S. Census data suggests that 5% of Washtenaw children 5-15 years old have a mental disability.
- 15% of Washtenaw County students receive special education services. Ten percent of students receive special education services because of mental, emotional or cognitive disabilities.
- Students from three middle schools in Washtenaw County identified higher rates for lifetime use of tobacco, marijuana, cocaine, and steroids. Over half of these students identified that an adult would help them with their homework; while only a third said that they rely on a parent or guardian for moral support.

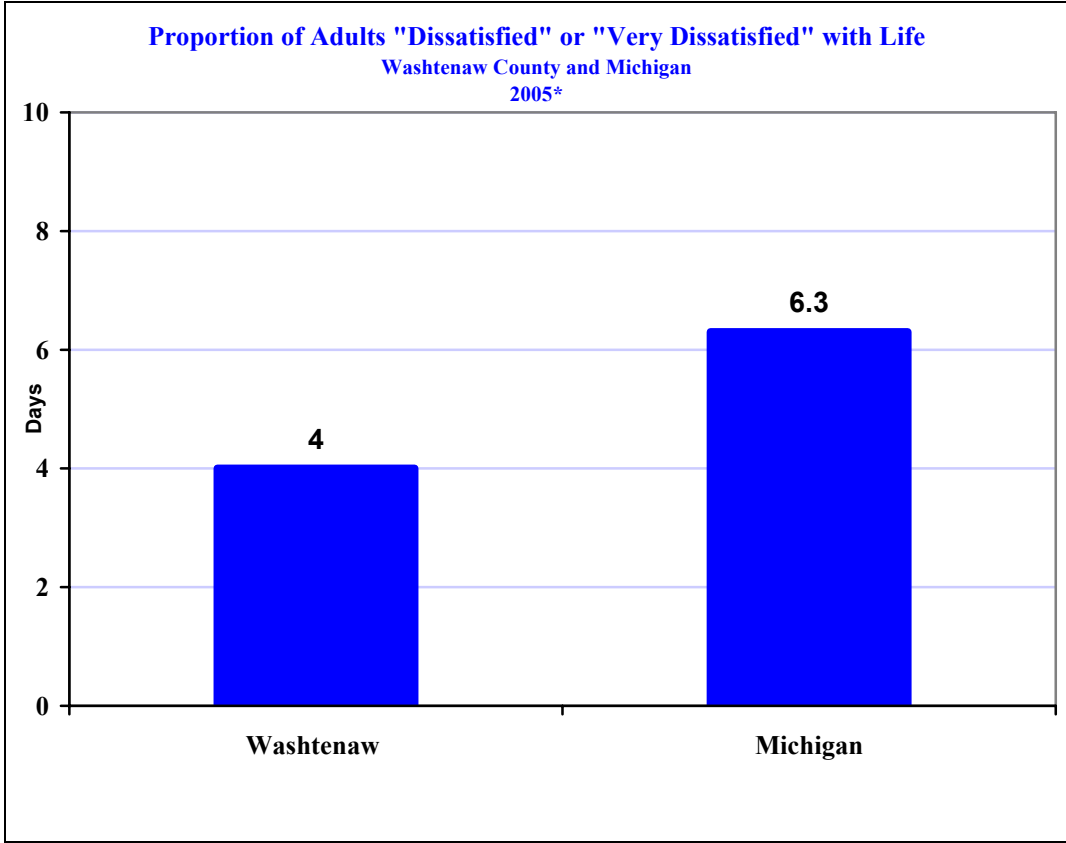
Up Front Facts on Mental Illness and Prevention Indicators in Washtenaw County...



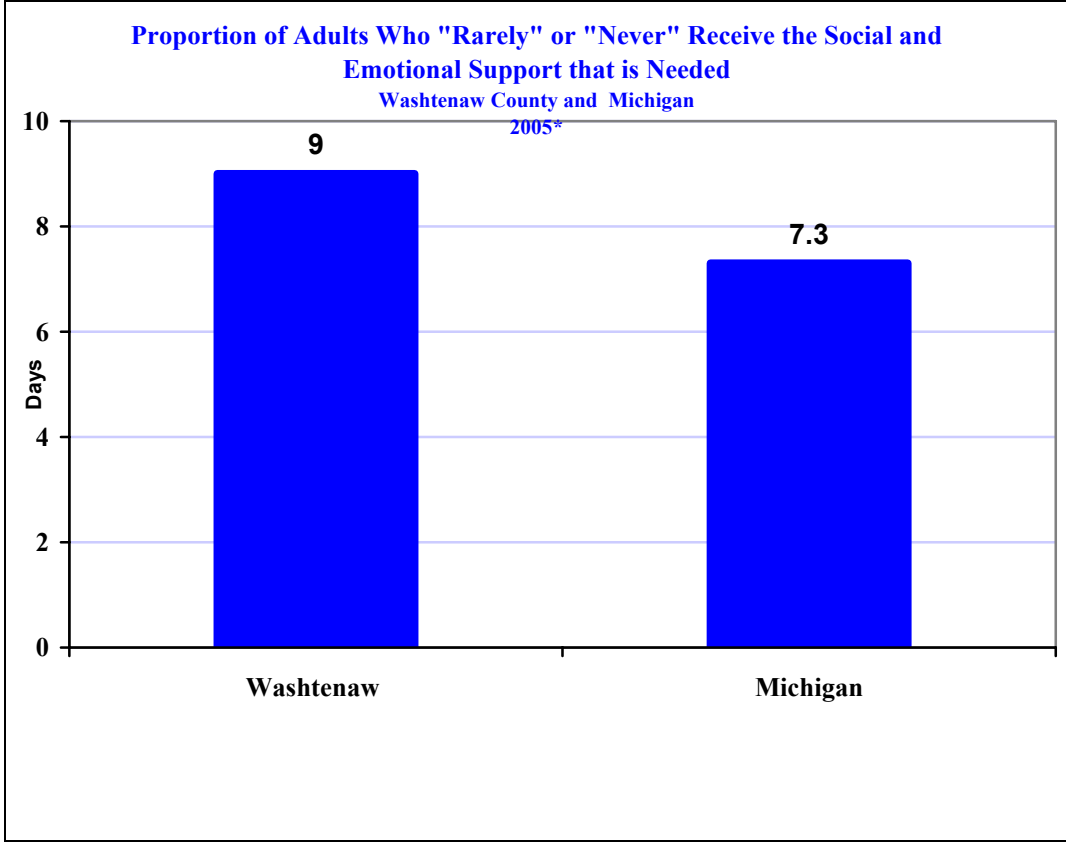
*Source: U.S. Census 2000
 **Source: Washtenaw County HIP 2005 Survey
 ***Source: Mental Health: A Report of the Surgeon General. DHHS. 1999

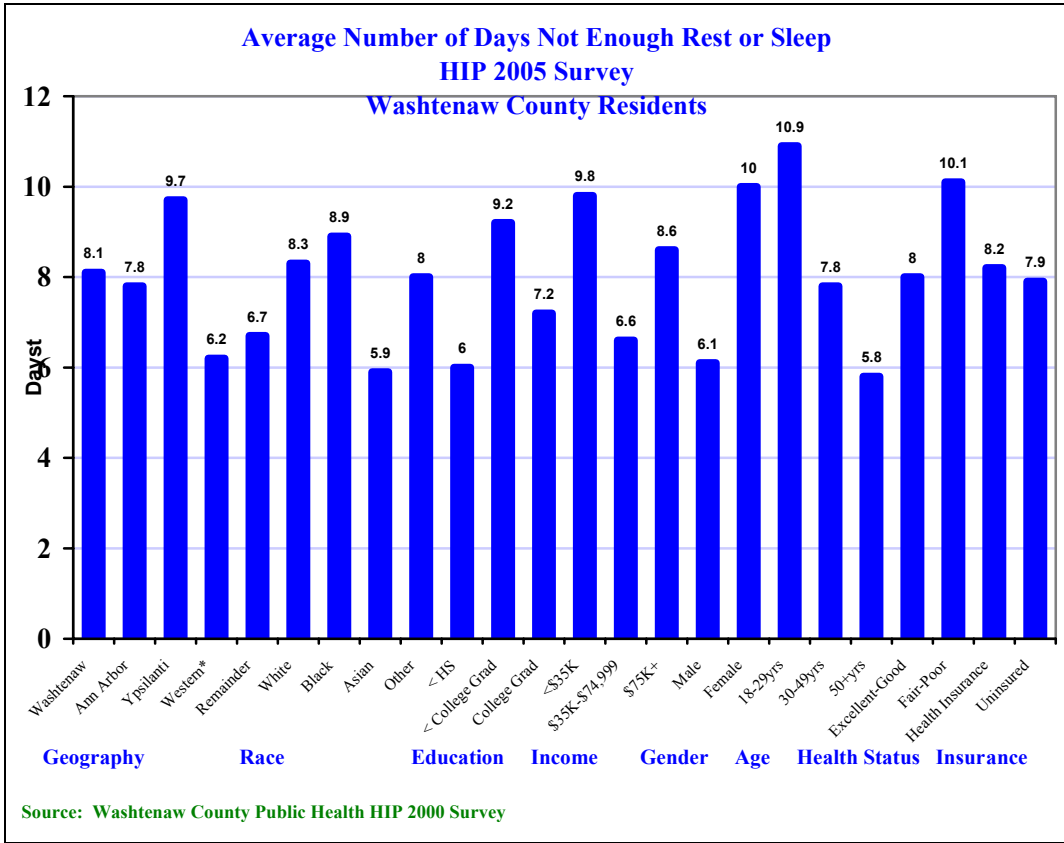
Washtenaw County Adults - Mental Health Indicators

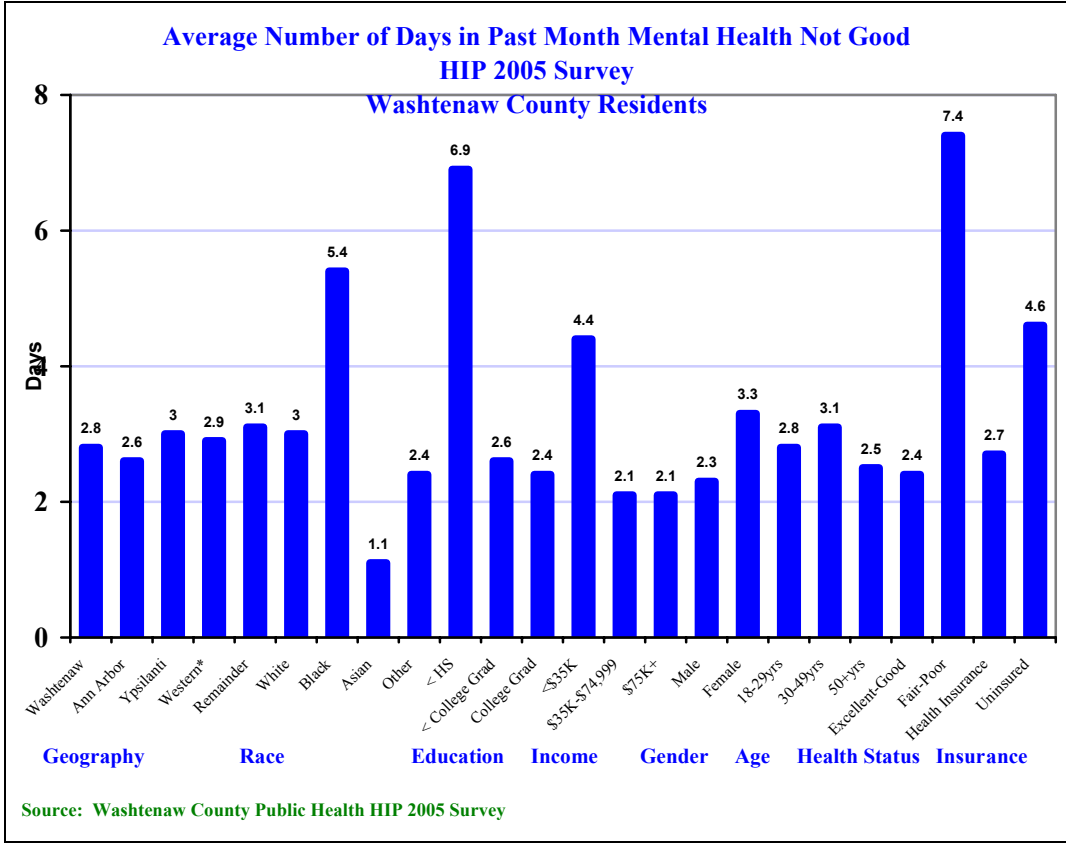
Indicator	Numbers	Data Highlights	Data Limitations & Source	Potential Implications																																																
<p>Life Satisfaction</p>	<p>4% of adult 2005 HIP Survey respondents identified 'dissatisfied' or 'very dissatisfied' with their life.</p>	<p style="text-align: center;">Satisfaction with Life - 'Very Satisfied' HIP 2005 Survey Washtenaw County Residents</p> <table border="1"> <thead> <tr> <th>Category</th> <th>Percent 'Very Satisfied'</th> </tr> </thead> <tbody> <tr><td>Washtenaw</td><td>49</td></tr> <tr><td>Ann Arbor</td><td>50</td></tr> <tr><td>Ypsilanti</td><td>45</td></tr> <tr><td>Western*</td><td>63</td></tr> <tr><td>Remainder</td><td>43</td></tr> <tr><td>White</td><td>51</td></tr> <tr><td>Black</td><td>32</td></tr> <tr><td>Asian</td><td>58</td></tr> <tr><td>Other</td><td>28</td></tr> <tr><td><HS</td><td>34</td></tr> <tr><td>College Grad</td><td>41</td></tr> <tr><td><\$5K</td><td>59</td></tr> <tr><td>\$5K-\$14,999</td><td>53</td></tr> <tr><td>\$15K+</td><td>34</td></tr> <tr><td>Male</td><td>59</td></tr> <tr><td>Female</td><td>42</td></tr> <tr><td>18-29yrs</td><td>55</td></tr> <tr><td>30-49yrs</td><td>61</td></tr> <tr><td>50+yrs</td><td>41</td></tr> <tr><td>Excellent-Good</td><td>43</td></tr> <tr><td>Fair-Poor</td><td>22</td></tr> <tr><td>Health Insurance</td><td>51</td></tr> <tr><td>Uninsured</td><td>49</td></tr> </tbody> </table> <p>Source: Washtenaw County Public Health HIP 2005 Survey</p>	Category	Percent 'Very Satisfied'	Washtenaw	49	Ann Arbor	50	Ypsilanti	45	Western*	63	Remainder	43	White	51	Black	32	Asian	58	Other	28	<HS	34	College Grad	41	<\$5K	59	\$5K-\$14,999	53	\$15K+	34	Male	59	Female	42	18-29yrs	55	30-49yrs	61	50+yrs	41	Excellent-Good	43	Fair-Poor	22	Health Insurance	51	Uninsured	49	<p>*Washtenaw County Public Health HIP 2005 Survey</p>	<p>*Life dissatisfaction has a long term effect on the risk of suicide. Life satisfaction is also considered an excellent composite health indicator, even after adjusting for age, sex, baseline health status, alcohol consumption, smoking status, and physical activity.¹</p>
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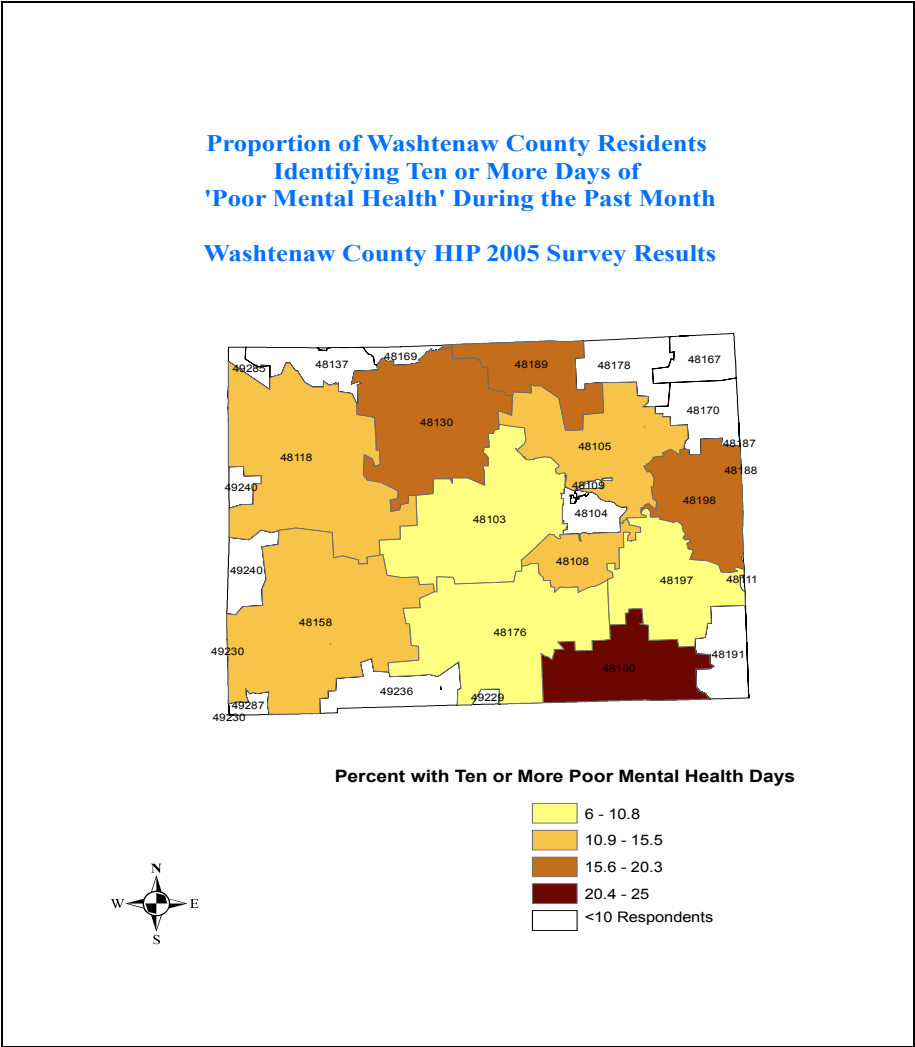
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<p>Life Satisfaction</p>	<p>*Given the 2005 Census estimate of 267,885 Washtenaw County adults, approximately 12,054 adult residents identify being 'dissatisfied' or 'very dissatisfied' with life.</p>	<p style="text-align: center;">Proportion of Adults "Dissatisfied" or "Very Dissatisfied" with Life Washtenaw County and Michigan 2005*</p>  <table border="1" data-bbox="520 358 1579 1195"> <caption>Data from Bar Chart</caption> <thead> <tr> <th>Location</th> <th>Days</th> </tr> </thead> <tbody> <tr> <td>Washtenaw</td> <td>4</td> </tr> <tr> <td>Michigan</td> <td>6.3</td> </tr> </tbody> </table>	Location	Days	Washtenaw	4	Michigan	6.3	<p>*Source: Michigan Department of Community Health BRFSS 2005 Survey http://www.michigan.gov/documents/2005_MI_BRFSS_Reg_LHD_prelim1_160836_7.pdf</p>	<p>*Washtenaw County has a smaller proportion of its population who are dissatisfied or very dissatisfied with life compared to Michigan residents.</p>
Location	Days									
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Michigan	6.3									

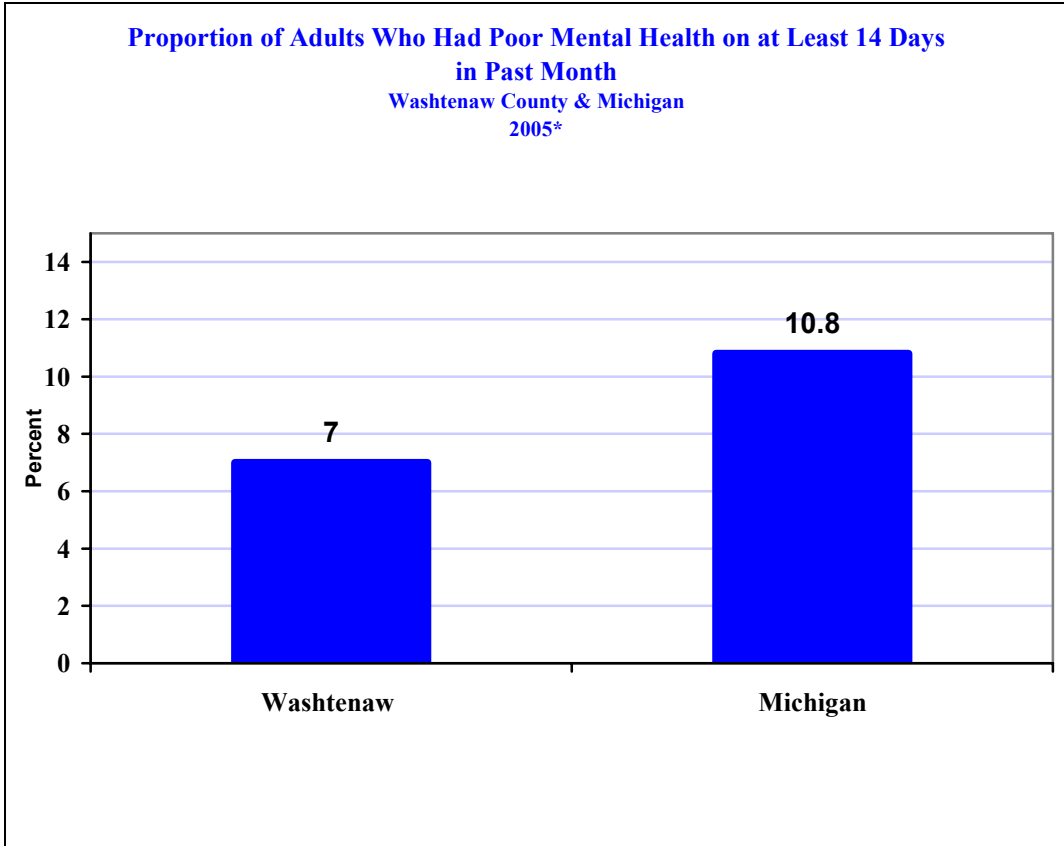
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<p>Social and Emotional Support</p>	<p>9% of adult 2005 HIP Survey respondents identified that they 'rarely' or 'never' get the social and emotional support that they need.</p>	<p style="text-align: center;">'Always' Get Social and Emotional Support Needed HIP 2005 Survey Washtenaw County Residents</p> <table border="1"> <caption>Percent Responding 'Always' by Demographic</caption> <thead> <tr> <th>Demographic</th> <th>Percent Responding 'Always'</th> </tr> </thead> <tbody> <tr><td>Washtenaw</td><td>48</td></tr> <tr><td>Ann Arbor</td><td>43</td></tr> <tr><td>Ypsilanti</td><td>48</td></tr> <tr><td>Western*</td><td>47</td></tr> <tr><td>Remainder</td><td>59</td></tr> <tr><td>White</td><td>49</td></tr> <tr><td>Black</td><td>35</td></tr> <tr><td>Asian</td><td>53</td></tr> <tr><td>Other</td><td>37</td></tr> <tr><td><HS</td><td>50</td></tr> <tr><td>College Grad</td><td>50</td></tr> <tr><td><\$5K</td><td>44</td></tr> <tr><td>\$5K-\$14,999</td><td>45</td></tr> <tr><td>\$15K+</td><td>54</td></tr> <tr><td>Male</td><td>43</td></tr> <tr><td>Female</td><td>44</td></tr> <tr><td>18-29yrs</td><td>51</td></tr> <tr><td>30-49yrs</td><td>50</td></tr> <tr><td>50+yrs</td><td>52</td></tr> <tr><td>Excellent-Good</td><td>39</td></tr> <tr><td>Fair-Poor</td><td>48</td></tr> <tr><td>Health Insurance</td><td>42</td></tr> <tr><td>Uninsured</td><td>49</td></tr> <tr><td>Uninsured</td><td>34</td></tr> </tbody> </table> <p>Source: Washtenaw County Public Health HIP 2005 Survey</p>	Demographic	Percent Responding 'Always'	Washtenaw	48	Ann Arbor	43	Ypsilanti	48	Western*	47	Remainder	59	White	49	Black	35	Asian	53	Other	37	<HS	50	College Grad	50	<\$5K	44	\$5K-\$14,999	45	\$15K+	54	Male	43	Female	44	18-29yrs	51	30-49yrs	50	50+yrs	52	Excellent-Good	39	Fair-Poor	48	Health Insurance	42	Uninsured	49	Uninsured	34	<p>*Washtenaw County Public Health HIP 2005 Survey</p>	<p>According to the U.S. Centers for Disease Control and Prevention, older adults who almost never visited with friends or relatives in the past month, or who had no close friends for emotional support reported significantly worse health-related quality of life, specifically more mentally unhealthy days, days with depressive symptoms, and days with symptoms of anxiety, and significantly fewer days of vitality.²</p>
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<p>Sufficient Rest or Sleep</p>	<p>35% of adult 2005 HIP Survey respondents identified having ten or more days with 'not enough sleep or rest.'</p>	<p style="text-align: center;">Average Number of Days Not Enough Rest or Sleep HIP 2005 Survey Washtenaw County Residents</p>  <table border="1" data-bbox="520 358 1577 1195"> <thead> <tr> <th>Category</th> <th>Average Number of Days</th> </tr> </thead> <tbody> <tr><td>Washtenaw</td><td>8.1</td></tr> <tr><td>Ann Arbor</td><td>7.8</td></tr> <tr><td>Ypsilanti</td><td>9.7</td></tr> <tr><td>Western*</td><td>6.2</td></tr> <tr><td>Remainder</td><td>6.7</td></tr> <tr><td>White</td><td>8.3</td></tr> <tr><td>Black</td><td>8.9</td></tr> <tr><td>Asian</td><td>5.9</td></tr> <tr><td>Other</td><td>8</td></tr> <tr><td><HS</td><td>6</td></tr> <tr><td><College Grad</td><td>9.2</td></tr> <tr><td>College Grad</td><td>7.2</td></tr> <tr><td><\$35K</td><td>9.8</td></tr> <tr><td>\$35K-\$74,999</td><td>6.6</td></tr> <tr><td>\$75K+</td><td>8.6</td></tr> <tr><td>Male</td><td>6.1</td></tr> <tr><td>Female</td><td>10</td></tr> <tr><td>18-29yrs</td><td>10.9</td></tr> <tr><td>30-49yrs</td><td>7.8</td></tr> <tr><td>50+yrs</td><td>5.8</td></tr> <tr><td>Excellent-Good</td><td>8</td></tr> <tr><td>Fair-Poor</td><td>10.1</td></tr> <tr><td>Health Insurance</td><td>8.2</td></tr> <tr><td>Uninsured</td><td>7.9</td></tr> </tbody> </table> <p>Source: Washtenaw County Public Health HIP 2005 Survey</p>	Category	Average Number of Days	Washtenaw	8.1	Ann Arbor	7.8	Ypsilanti	9.7	Western*	6.2	Remainder	6.7	White	8.3	Black	8.9	Asian	5.9	Other	8	<HS	6	<College Grad	9.2	College Grad	7.2	<\$35K	9.8	\$35K-\$74,999	6.6	\$75K+	8.6	Male	6.1	Female	10	18-29yrs	10.9	30-49yrs	7.8	50+yrs	5.8	Excellent-Good	8	Fair-Poor	10.1	Health Insurance	8.2	Uninsured	7.9	<p>Washtenaw County Public Health HIP 2005 Survey</p>	<p>According to the U.S. Institute of Medicine, 50 to 70 million Americans chronically suffer from sleep disorders and wakefulness, hindering daily functioning and increasing the risk of hypertension, diabetes, obesity, depression, heart attack and stroke⁴.</p>
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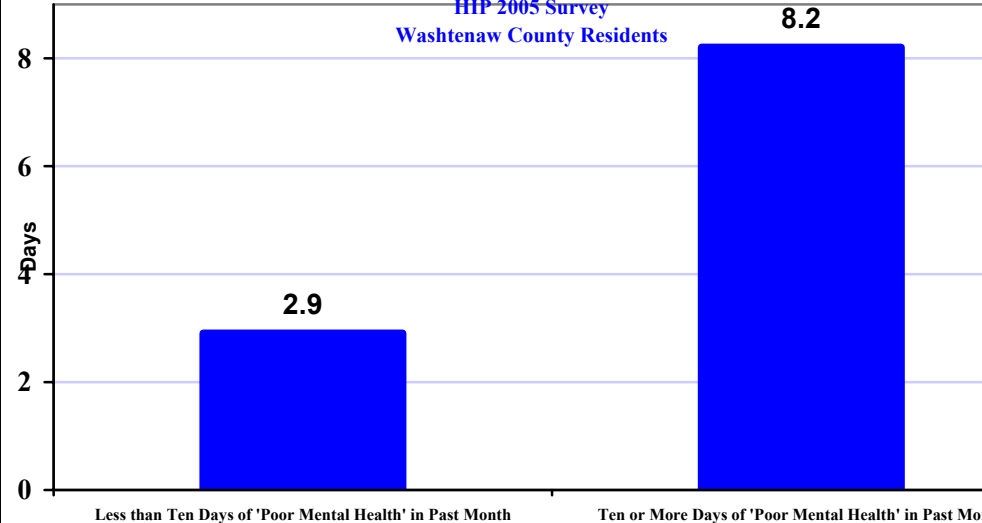
Indicator	Numbers	Data Highlights	Data Limitations & Source	Potential Implications
<p>Days of Poor Mental Health</p> <p><i>HIP Goal IX, Objective A</i></p>	<p>10% of adult 2005 HIP Survey respondents identified ten or more days in the past month that “mental health was not good.” This translates into 26,788 adults in Washtenaw County.</p>	<p style="text-align: center;">Average Number of Days in Past Month Mental Health Not Good HIP 2005 Survey Washtenaw County Residents</p>  <p style="text-align: center;">Source: Washtenaw County Public Health HIP 2005 Survey</p>	<p>Washtenaw County Public Health HIP 2005 Survey</p>	<p>*Persons with less than a high school education, as well as Black populations and those in fair/poor health have a greater proportion of their days as emotionally and mentally challenging than their Washtenaw counterparts.</p>

Indicator	Numbers	Data Highlights	Data Limitations & Source	Potential Implications
<p>Days of Poor Mental Health</p> <p><i>HIP Goal IX, Objective A</i></p>	<p>10% of adult 2005 HIP Survey respondents identified ten or more poor mental health days in the past month (PMHDPM).</p>	<p style="text-align: center;">Proportion of Washtenaw County Residents Identifying Ten or More Days of 'Poor Mental Health' During the Past Month</p> <p style="text-align: center;">Washtenaw County HIP 2005 Survey Results</p>  <p style="text-align: center;">Percent with Ten or More Poor Mental Health Days</p> <ul style="list-style-type: none"> 6 - 10.8 10.9 - 15.5 15.6 - 20.3 20.4 - 25 <10 Respondents 	<p>Washtenaw County Public Health HIP 2005 Survey</p>	<p>*While this question is not necessarily diagnostic for mental illness, the distribution of poor mental health days suggests clear differences in risk across populations.</p>

Indicator	Numbers	Data Highlights	Data Limitations & Source	Potential Implications						
<p>Days of Poor Mental Health</p> <p><i>HIP Goal IX, Objective A</i></p>	<p>*Given the 2005 Census estimate of 267,885 Washtenaw County adults, approximately 18,751 adult residents experience poor mental health during at least half of the past month..</p>	<p style="text-align: center;">Proportion of Adults Who Had Poor Mental Health on at Least 14 Days in Past Month Washtenaw County & Michigan 2005*</p>  <table border="1" data-bbox="520 394 1577 1235"> <caption>Proportion of Adults Who Had Poor Mental Health on at Least 14 Days in Past Month</caption> <thead> <tr> <th>Location</th> <th>Percent</th> </tr> </thead> <tbody> <tr> <td>Washtenaw</td> <td>7</td> </tr> <tr> <td>Michigan</td> <td>10.8</td> </tr> </tbody> </table>	Location	Percent	Washtenaw	7	Michigan	10.8	<p>*Source: Michigan Department of Community Health BRFSS 2005 Survey http://www.michigan.gov/documents/2005_MI_BRFSS_Reg_L_HD_prelim1_160836_7.pdf</p>	<p>*The proportion of Washtenaw County adults who have poor mental health 14 or more days during the past month is significantly lower than that for Michigan.</p> <p>*Nationally, “lost productivity and disability insurance payments due to illness or premature death accounts for \$74.9 billion per year.”⁵³</p>
Location	Percent									
Washtenaw	7									
Michigan	10.8									

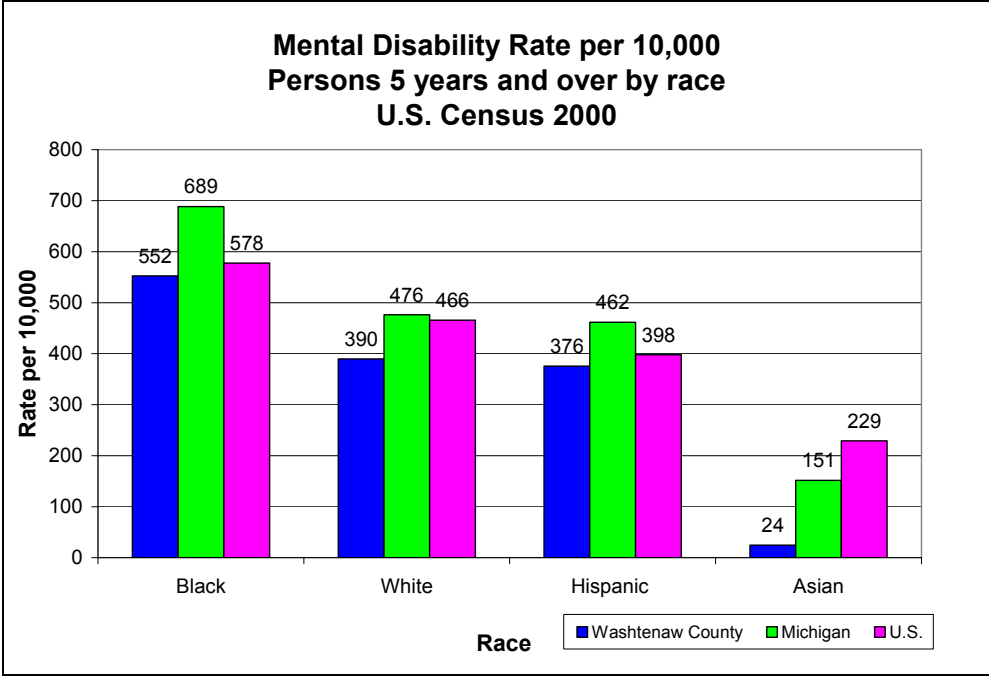
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<p>Adults aged 18-54 years with Serious Mental Illness</p> <p><i>Healthy People 2010 Indicator 18.9</i></p>	<p>*National estimates that “during a one year period, 22 to 23% of the U.S. adult population ...have diagnosable mental disorders...19% have mental disorder alone; 3 percent have both mental and addictive disorders; and 6% have addictive disorders alone.”</p> <p>*Given the above estimates, and 2004 census estimate of 202,299 Washtenaw County adult residents 18-54 years, as many as 46,528 residents have mental disorders during a one year period. http://www.surgeongeneral.gov/library/mentalhealth/home.html</p>	<p style="text-align: center;">One Year Prevalence Rates of Mental Disorders – Adults Aged 18-54 Best Estimates United States – 1980-1990</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">Percent of Population</th> <th style="text-align: center;">Estimated Washtenaw County Residents with Mental Disorder (based on 2005 U.S. Census estimate of 202,299 adults 18-54 residents)</th> </tr> </thead> <tbody> <tr> <td>Any Anxiety Disorder</td> <td style="text-align: center;">16.4</td> <td style="text-align: center;">33,177</td> </tr> <tr> <td>Simple phobia</td> <td style="text-align: center;">8.3</td> <td style="text-align: center;">16,791</td> </tr> <tr> <td>Social phobia</td> <td style="text-align: center;">2.0</td> <td style="text-align: center;">4,046</td> </tr> <tr> <td>Agoraphobia</td> <td style="text-align: center;">4.9</td> <td style="text-align: center;">9,913</td> </tr> <tr> <td>Generalized anxiety disorder</td> <td style="text-align: center;">3.4</td> <td style="text-align: center;">6,878</td> </tr> <tr> <td>Panic Disorder</td> <td style="text-align: center;">1.6</td> <td style="text-align: center;">3,237</td> </tr> <tr> <td>Obsessive compulsive disorder</td> <td style="text-align: center;">2.4</td> <td style="text-align: center;">4,855</td> </tr> <tr> <td>Post traumatic stress disorder</td> <td style="text-align: center;">3.6</td> <td style="text-align: center;">7,283</td> </tr> <tr> <td>Any Mood Disorder</td> <td style="text-align: center;">7.1</td> <td style="text-align: center;">14,363</td> </tr> <tr> <td>MD Episode</td> <td style="text-align: center;">6.5</td> <td style="text-align: center;">13,149</td> </tr> <tr> <td>Unipolar MD</td> <td style="text-align: center;">5.3</td> <td style="text-align: center;">10,722</td> </tr> <tr> <td>Dysthymia</td> <td style="text-align: center;">1.6</td> <td style="text-align: center;">3,237</td> </tr> <tr> <td>Bipolar I</td> <td style="text-align: center;">1.1</td> <td style="text-align: center;">2,225</td> </tr> <tr> <td>Bipolar II</td> <td style="text-align: center;">0.6</td> <td style="text-align: center;">1,214</td> </tr> <tr> <td>Schizophrenia</td> <td style="text-align: center;">1.3</td> <td style="text-align: center;">2,630</td> </tr> <tr> <td>Nonaffective psychosis</td> <td style="text-align: center;">0.2</td> <td style="text-align: center;">405</td> </tr> <tr> <td>Somatization</td> <td style="text-align: center;">0.2</td> <td style="text-align: center;">405</td> </tr> <tr> <td>Anti social personality</td> <td style="text-align: center;">2.1</td> <td style="text-align: center;">4,248</td> </tr> <tr> <td>Anorexia Nervosa</td> <td style="text-align: center;">0.1</td> <td style="text-align: center;">202</td> </tr> <tr> <td>Severe Cognitive Impairment</td> <td style="text-align: center;">1.2</td> <td style="text-align: center;">2,428</td> </tr> <tr> <td>Any Mental Disorder</td> <td style="text-align: center;">21.0</td> <td style="text-align: center;">42,483</td> </tr> </tbody> </table>		Percent of Population	Estimated Washtenaw County Residents with Mental Disorder (based on 2005 U.S. Census estimate of 202,299 adults 18-54 residents)	Any Anxiety Disorder	16.4	33,177	Simple phobia	8.3	16,791	Social phobia	2.0	4,046	Agoraphobia	4.9	9,913	Generalized anxiety disorder	3.4	6,878	Panic Disorder	1.6	3,237	Obsessive compulsive disorder	2.4	4,855	Post traumatic stress disorder	3.6	7,283	Any Mood Disorder	7.1	14,363	MD Episode	6.5	13,149	Unipolar MD	5.3	10,722	Dysthymia	1.6	3,237	Bipolar I	1.1	2,225	Bipolar II	0.6	1,214	Schizophrenia	1.3	2,630	Nonaffective psychosis	0.2	405	Somatization	0.2	405	Anti social personality	2.1	4,248	Anorexia Nervosa	0.1	202	Severe Cognitive Impairment	1.2	2,428	Any Mental Disorder	21.0	42,483	<p><u>Mental Health: A Report of the Surgeon General.</u> Department of Health and Human Services under the direction of the Substance Abuse and Mental Health Services Administration, Center for Mental Health Services, in partnership with the National Institute of Mental Health, National Institutes of Health; http://www.surgeongeneral.gov/library/mentalhealth/home.html The 1999 estimates shown at the left are not unduplicated counts. Individuals may have more than one disorder⁶.</p>	<p>*Nearly a quarter of our population will have mental disorders during a single year period. Seventy percent of these are anxiety disorders.</p> <p>*All estimates listed are based on national estimates. Currently, no surveillance system, similar to infectious diseases, exists for any mental disorders.</p> <p>*Recent 2005 national data suggest 26% twelve-month adult (18years or older) prevalence rate for any mental disorder⁷.</p>
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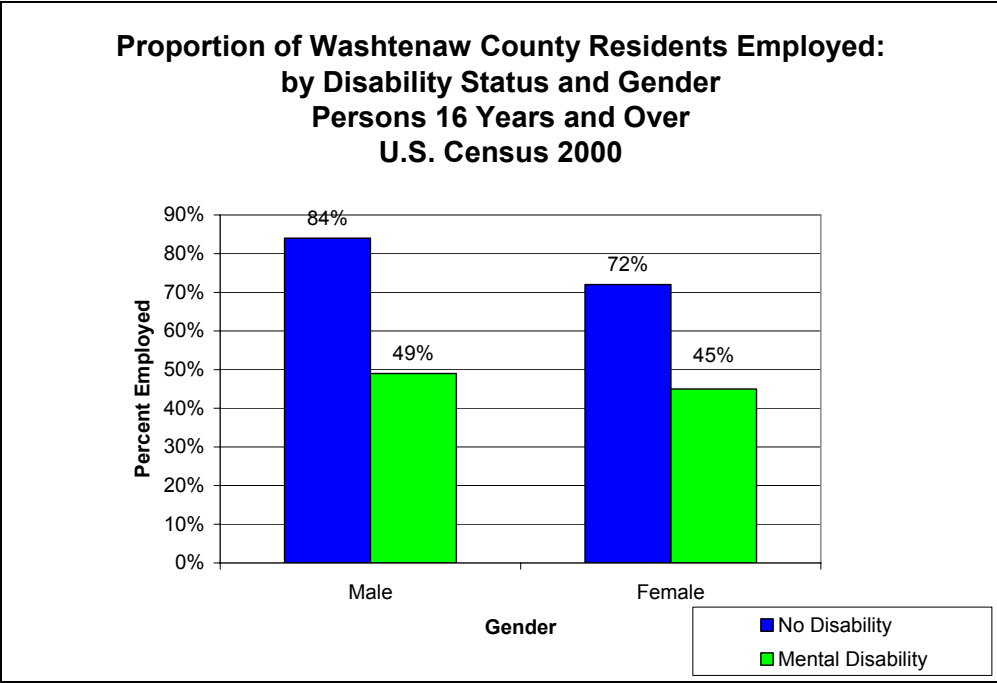
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<p>Proportion with Activity Limitations</p>	<p>14 % of adult 2005 HIP survey respondents identified that they are limited by physical, mental, or emotional problems. This translates into 37,504 Washtenaw County adults.</p>	<p style="text-align: center;">Proportion of Population that Identifies that They are Limited by Physical/Mental/Emotional Problems by Level of Poor Mental Health Days</p> <p style="text-align: center;">HIP 2005 Survey Washtenaw County Residents</p> <table border="1" style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th>Level of Poor Mental Health Days</th> <th>Percent Limited</th> </tr> </thead> <tbody> <tr> <td>Total Population</td> <td>14.3</td> </tr> <tr> <td>Less than Ten Days of 'Poor Mental Health' in Past Month</td> <td>13.1</td> </tr> <tr> <td>Ten or More Days of 'Poor Mental Health' in Past Month</td> <td>24.2</td> </tr> </tbody> </table> <p>Source: Washtenaw County Public Health HIP 2005 Survey</p>	Level of Poor Mental Health Days	Percent Limited	Total Population	14.3	Less than Ten Days of 'Poor Mental Health' in Past Month	13.1	Ten or More Days of 'Poor Mental Health' in Past Month	24.2	<p>Washtenaw County Public Health HIP 2005 Survey</p>	<p>* Fourteen percent of Washtenaw County residents identify that they have daily activity limitations due to Physical, mental or emotional problems.</p> <p>*While this HIP Survey question regarding activity limitation does not specify physical or mental health, clearly, those who identify ten or more days in the past month of poor mental health are nearly twice as likely to identify having daily activity limitations. These limitations have enormous potential effects on productivity and public economies.</p>
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<p>Average Number of Days of Activity Limitation</p>	<p>*Given that 10% (or 26,788) Washtenaw County adults experience ten or more days of PMHDPM; and these persons experience an average of 8.2 days of limited activities per month, this translates into nearly 601 person years of limited activities.</p>	<p style="text-align: center;">Average Number of Days in Past Month that Poor Physical/Mental Health Limited Usual Activities by Level of Poor Mental Health Days</p> <p style="text-align: center;">HIP 2005 Survey Washtenaw County Residents</p>  <table border="1" data-bbox="588 519 1564 1039"> <thead> <tr> <th>Level of Poor Mental Health Days</th> <th>Average Number of Days of Activity Limitation</th> </tr> </thead> <tbody> <tr> <td>Less than Ten Days of 'Poor Mental Health' in Past Month</td> <td>2.9</td> </tr> <tr> <td>Ten or More Days of 'Poor Mental Health' in Past Month</td> <td>8.2</td> </tr> </tbody> </table> <p>Source: Washtenaw County Public Health HIP 2005 Survey</p>	Level of Poor Mental Health Days	Average Number of Days of Activity Limitation	Less than Ten Days of 'Poor Mental Health' in Past Month	2.9	Ten or More Days of 'Poor Mental Health' in Past Month	8.2	<p>*Washtenaw County Public Health HIP 2005 Survey</p>	<p>*While this HIP Survey question regarding activity limitation does not specify physical or mental health, clearly, those who identify ten or more days in the past month of poor mental health have over twice the number of days of activity limitation.</p> <p>*These limitations are likely to include school and work absences, inhibited ability to care for others, access medical care, and complete daily chores,</p>
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<p>Access, Health Behaviors and Health Status</p>	<p>*Of persons with ten or more days of PMHDPM, 51% had been told they had diabetes, high cholesterol and high blood pressure, compared to 26% of those with nine or fewer PMHDPM.</p>	<p style="text-align: center;">Selected Access, Health Behaviors and Health Status Indicators by Number of Poor Mental Health Days in Past Month HIP 2005 Survey Washtenaw County Residents</p> <table border="1" style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th>Indicator</th> <th>Nine or Fewer Days (%)</th> <th>Ten or More Days (%)</th> </tr> </thead> <tbody> <tr> <td>No Health Insurance</td> <td>6</td> <td>14</td> </tr> <tr> <td>Ever Told Had Diabetes</td> <td>7</td> <td>20</td> </tr> <tr> <td>Ever Told Had Asthma</td> <td>16</td> <td>21</td> </tr> <tr> <td>Ever Told Had High Cholesterol</td> <td>31</td> <td>44</td> </tr> <tr> <td>Intimate Partner Threatened Violence</td> <td>8</td> <td>12</td> </tr> <tr> <td>No Moderate Exercise</td> <td>14</td> <td>27</td> </tr> <tr> <td>Ever Smoked</td> <td>37</td> <td>55</td> </tr> <tr> <td>Binge Drank in Past Month</td> <td>23</td> <td>29</td> </tr> <tr> <td>Obese</td> <td>17</td> <td>25</td> </tr> </tbody> </table> <p>Source: Washtenaw County Public Health HIP 2000 Survey</p>	Indicator	Nine or Fewer Days (%)	Ten or More Days (%)	No Health Insurance	6	14	Ever Told Had Diabetes	7	20	Ever Told Had Asthma	16	21	Ever Told Had High Cholesterol	31	44	Intimate Partner Threatened Violence	8	12	No Moderate Exercise	14	27	Ever Smoked	37	55	Binge Drank in Past Month	23	29	Obese	17	25	<p>*Washtenaw County Public Health HIP 2005 Survey</p>	<p>*Washtenaw County residents identifying ten or more days of poor mental health indicate higher rates of not having health insurance, having diabetes, asthma, high cholesterol, experiencing intimate partner violence, being sedentary, using tobacco, binge drinking and obesity, compared to those with fewer than ten days of poor mental health per month.</p> <p>*Over half of Washtenaw County residents with ten or more PMHDPM have been diagnosed with diabetes, high blood pressure and high cholesterol.</p> <p>*Persons with mental illnesses have higher mortality rates, shorter life expectancies, poorer health behaviors and higher rates of undiagnosed physical illnesses^{8,9}.</p>
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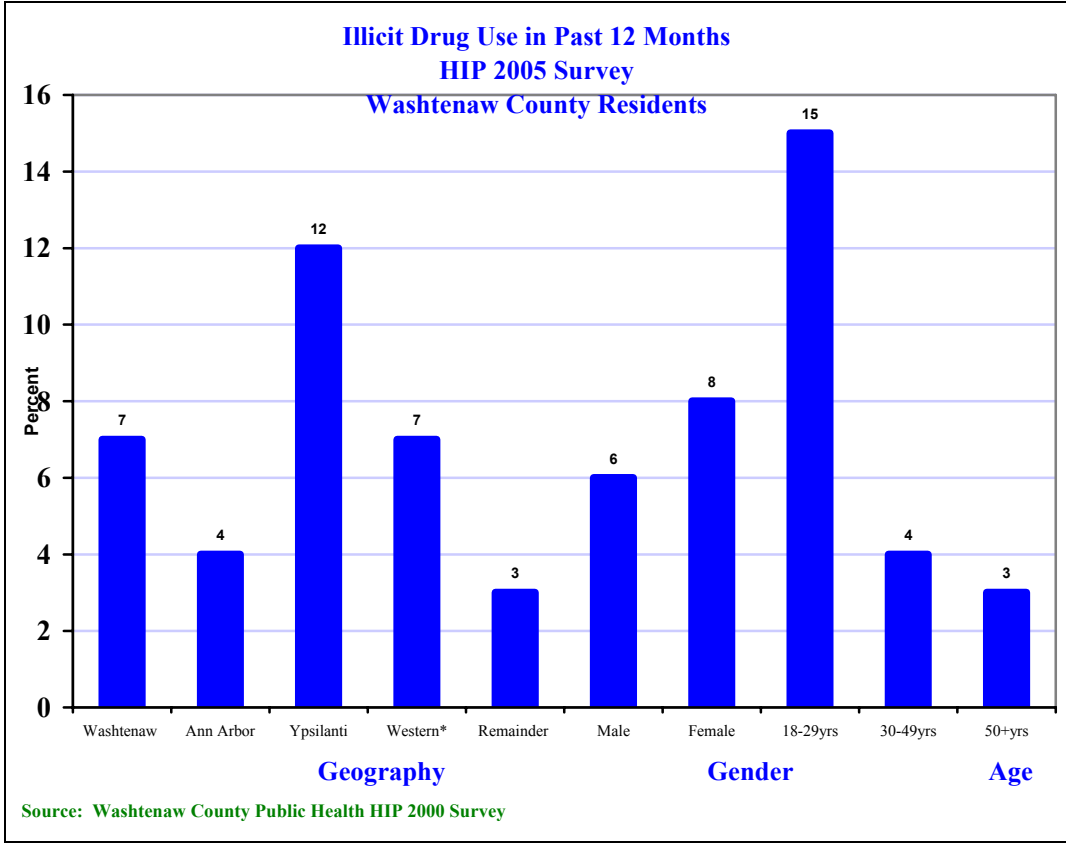
Indicator	Numbers	Data Highlights	Data Limitations & Source	Potential Implications																
<p>Proportion of Washtenaw County residents with a mental “disability”</p>	<p>* Census 2000 counted 11,981 people with a “mental disability.” This represents 17% of all disabilities and 4% of the total county population 5 years and over.</p> <p>* Of the 11,981 people with a “mental disability,” there were approximately equal numbers of men and women (49% (5,874) were female and 51% (6,107) were male).</p> <p>* Nationally, 70.9% of those with a mental disability have two or more disabilities.</p> <p>* Mental disability prevalence increases with age.</p>	<p>The following mental disability data are drawn from the U.S. Census 2000 questionnaire item below:</p> <div data-bbox="722 451 1457 699" style="border: 1px solid black; padding: 5px; margin: 10px 0;"> <p>17 Because of a physical, mental, or emotional condition lasting 6 months or more, does this person have any difficulty in doing any of the following activities:</p> <p style="text-align: right;">Yes No</p> <p>a. Learning, remembering, or concentrating? <input type="checkbox"/> <input type="checkbox"/></p> </div> <p>Data Charts:</p> <div data-bbox="705 833 1465 1352" style="border: 1px solid black; padding: 5px; margin: 10px 0;"> <p style="text-align: center;">Proportion of Washtenaw County Residents with Mental Disability by Age Persons 5-15, 16-64, and 65 and more years U.S. Census 2000</p> <table border="1" style="width: 100%; text-align: center;"> <thead> <tr> <th>Age</th> <th>Washtenaw County</th> <th>Michigan</th> <th>U.S.</th> </tr> </thead> <tbody> <tr> <td>5 to 15</td> <td>5%</td> <td>6%</td> <td>5%</td> </tr> <tr> <td>16 to 64</td> <td>3%</td> <td>4%</td> <td>4%</td> </tr> <tr> <td>65 and over</td> <td>9%</td> <td>10%</td> <td>10%</td> </tr> </tbody> </table> </div>	Age	Washtenaw County	Michigan	U.S.	5 to 15	5%	6%	5%	16 to 64	3%	4%	4%	65 and over	9%	10%	10%	<p>* Source: U.S. Census Bureau, Census 2000 Summary File 3</p> <p>* Census data excludes people in the military and people who are in institutions.</p> <p>* The definition of Mental “disability” is not equivalent to mental illness but is likely to include those with mental illness who experience limitations in daily activities because of their mental condition.</p>	<p>* Many physical, mental, or emotional conditions can cause a person to have difficulties with cognitive tasks such as learning, remembering, or concentrating (“mental disability”). For example: physical conditions such as</p> <p>* Mental disability rises with age. About 5% of youth 5 to 15 years report difficulties learning, remembering, or concentrating (mental disability) compared with 9% of older adults aged 65 and over.</p>
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<p>Proportion of Washtenaw County residents with mental disability by race</p> <p><i>Adapted from Healthy People 2010 objectives 18.9a and 18.4</i></p>	<p>* In Washtenaw County, the mental disability rate per 10,000 is highest for blacks (552 per 10,000) and lowest for Asians (96 per 10,000).</p>	<p style="text-align: center;">Mental Disability Rate per 10,000 Persons 5 years and over by race U.S. Census 2000</p>  <table border="1" data-bbox="604 358 1587 1029"> <thead> <tr> <th>Race</th> <th>Washtenaw County</th> <th>Michigan</th> <th>U.S.</th> </tr> </thead> <tbody> <tr> <td>Black</td> <td>552</td> <td>689</td> <td>578</td> </tr> <tr> <td>White</td> <td>390</td> <td>476</td> <td>466</td> </tr> <tr> <td>Hispanic</td> <td>376</td> <td>462</td> <td>398</td> </tr> <tr> <td>Asian</td> <td>24</td> <td>151</td> <td>229</td> </tr> </tbody> </table>	Race	Washtenaw County	Michigan	U.S.	Black	552	689	578	White	390	476	466	Hispanic	376	462	398	Asian	24	151	229	<p>* Source: U.S. Census Bureau, Census 2000 Summary File 3</p> <p>* Census data excludes people in the military and people who are in institutions.</p> <p>* Mental “disability” is not equivalent to mental illness but can include those with mental illness but is likely to include those with mental illness who experience limitations in daily activities because of their mental illness condition.</p>	<p>* Mental disability is disproportionately distributed by race. Highest rates are found with Blacks and lowest rates with Asians. These trends are found in this county, the state, and the nation.</p>
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<p>Proportion of Washtenaw County residents with mental disability by employment status</p> <p><i>Adapted from Healthy People 2010 objectives 18.9a and 18.4</i></p>	<p>* Of men aged 21 to 64 years, 49% of those with a mental disability were employed versus 84% of those without a mental disability.</p> <p>* Of women aged 21 to 64 years, 45% of those with a mental disability were employed versus 72% of those without a mental disability.</p>	<p style="text-align: center;">Proportion of Washtenaw County Residents Employed: by Disability Status and Gender Persons 16 Years and Over U.S. Census 2000</p>  <table border="1" data-bbox="600 358 1591 1036"> <thead> <tr> <th>Gender</th> <th>No Disability</th> <th>Mental Disability</th> </tr> </thead> <tbody> <tr> <td>Male</td> <td>84%</td> <td>49%</td> </tr> <tr> <td>Female</td> <td>72%</td> <td>45%</td> </tr> </tbody> </table>	Gender	No Disability	Mental Disability	Male	84%	49%	Female	72%	45%	<p>* Source: U.S. Census Bureau, Census 2000 Summary File 3</p> <p>* Census data excludes people in the military and people who are in institutions.</p> <p>*The definition of Mental “disability” is not equivalent to mental illness but is likely to include those with mental illness who experience limitations in daily activities because of their mental illness condition.</p>	<p>* Persons with disabilities are less likely to be employed and more likely to live in poverty. The highest poverty rates are found among children with disabilities age 5 to 15.</p>
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<p>Number of persons seen in primary health care who receive mental health screening and assessment</p> <p><i>Adapted from Healthy People 2010 indicator 18.6</i></p>	<p>Approximately five to nine percent of adult primary care patients are clinically depressed.</p>	<p>Few nationally recognized and applied health care standards exist regarding primary care screening criteria or tools for diagnosing all mental illnesses. Most mental illness diagnoses are the result of long term therapy and assessment and cannot be determined in a single primary care office visit. Currently, there are no national studies or surveillance systems documenting level of primary care screening of mental health. Locally, Care Choices and M-Care Insurers recommends primary care physicians screen for depression in their patient populations. <i>(Mike Klinkman, MS, MD. Associate Professor, Department of Family Medicine, Department of Psychiatry – Personal Communication, March 2006).</i></p> <p>The Michigan Quality Improvement Consortium has developed guidelines for clinicians that provide screening, diagnostic, management and service coordination recommendations for patients with major depression¹⁰. These recommendations include identifying high risk (for depression or suicide) individuals, those who have already been diagnosed with depression or been prescribed antidepressants.</p> <p>The U.S. Preventative Services Task Force (USPSTF) has developed clinical guidelines for depression screening. “The USPSTF found good evidence that screening improves the accurate identification of depressed patients in primary care settings and that treatment of depressed adults identified in primary care settings decreases clinical morbidity. Trials that have directly evaluated the effect of screening on clinical outcomes have shown mixed results. Small benefits have been observed in studies that simply feed back screening results to clinicians. Larger benefits have been observed in studies in which the communication of screening results is coordinated with effective followup and treatment. The USPSTF concluded the benefits of screening are likely to outweigh any potential harm.¹¹”</p>	<p><i>Not applicable</i></p>	<p>*Local health care providers may consider implementing routine screening in adult primary care populations. This may be particularly effective in primary care settings utilized by higher risk populations.</p> <p>*Depression has been shown to increase health care utilization and lost productivity costs of \$17 billion per year.¹² The USPTF recommends that screening benefits are particularly high in medical settings that provide referral and access to behavioral health services.</p>

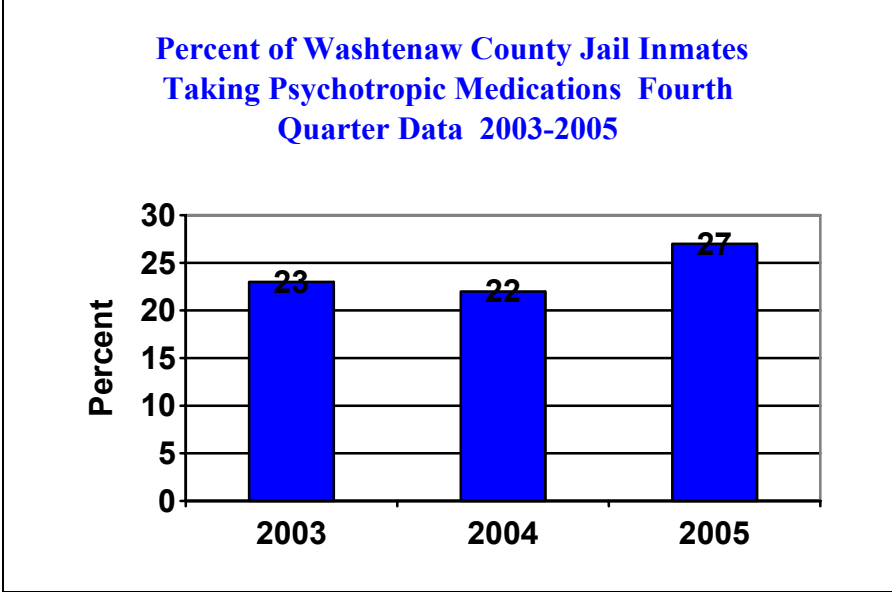
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<p>Binge Drinking</p>	<p>*Binge drinking prevalence in 2005 for Washtenaw County is 14%, 16.6% for Michigan; and 14.4%¹³ for the United States.</p>	<p style="text-align: center;">Binge Drinking in Past Month for Adults Who Drink HIP 2005 Survey Washtenaw County Residents</p> <table border="1"> <caption>Binge Drinking Prevalence by Demographic Group</caption> <thead> <tr> <th>Demographic Group</th> <th>Percent</th> </tr> </thead> <tbody> <tr><td>Washtenaw</td><td>14</td></tr> <tr><td>Ann Arbor</td><td>21</td></tr> <tr><td>Ypsilanti</td><td>25</td></tr> <tr><td>Western*</td><td>43</td></tr> <tr><td>Remainder</td><td>18</td></tr> <tr><td>White</td><td>28</td></tr> <tr><td>Black</td><td>11</td></tr> <tr><td>Asian</td><td>18</td></tr> <tr><td>Other</td><td>31</td></tr> <tr><td>< HS</td><td>21</td></tr> <tr><td>College Grad</td><td>23</td></tr> <tr><td>College Grad</td><td>26</td></tr> <tr><td><\$35k</td><td>28</td></tr> <tr><td>\$35K-\$74,999</td><td>27</td></tr> <tr><td>\$75K+</td><td>26</td></tr> <tr><td>Male</td><td>30</td></tr> <tr><td>Female</td><td>18</td></tr> <tr><td>18-29yrs</td><td>33</td></tr> <tr><td>30-49yrs</td><td>30</td></tr> <tr><td>50+yrs</td><td>8</td></tr> <tr><td>Excellent/Good</td><td>26</td></tr> <tr><td>Fair-Poor</td><td>9</td></tr> <tr><td>Health Insurance</td><td>26</td></tr> <tr><td>Uninsured</td><td>7</td></tr> </tbody> </table> <p style="text-align: center;"> Geography Race Education Income Gender Age Health Status Insurance </p> <p>Source: Washtenaw County Public Health HIP 2000 Survey</p>	Demographic Group	Percent	Washtenaw	14	Ann Arbor	21	Ypsilanti	25	Western*	43	Remainder	18	White	28	Black	11	Asian	18	Other	31	< HS	21	College Grad	23	College Grad	26	<\$35k	28	\$35K-\$74,999	27	\$75K+	26	Male	30	Female	18	18-29yrs	33	30-49yrs	30	50+yrs	8	Excellent/Good	26	Fair-Poor	9	Health Insurance	26	Uninsured	7	<p>*Washtenaw County Public Health HIP 2005 Survey</p> <p>**"Binge drinking" is defined as having five or more drinks on one occasion.</p>	<p>*Washtenaw County overall rate of 14% binge drinking during the past month is similar to that for Michigan or the United States.</p> <p>*Nearly half of residents (who drink alcohol) of Western Washtenaw binge drank in the past month.</p> <p>*Research on effective interventions for college aged binge drinking suggest that Behavioral interventions have been more successful than education. The Alcohol Skills Training Program and single individual motivational session providing feedback on drinking practices for heavy-drinking freshmen has proven effective in reducing alcohol-related problems over the first 2 years of college^{14, 15}.</p>
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<p>Illicit Drug Use</p>	<p>*HIP 1995 and 2000 survey data indicate that 7.1% and 5.8%, respectively, of the County population used illicit drugs during the past 12 months.</p>	<p style="text-align: center;">Illicit Drug Use in Past 12 Months HIP 2005 Survey Washtenaw County Residents</p>  <table border="1" data-bbox="520 358 1579 1195"> <thead> <tr> <th>Category</th> <th>Percent</th> </tr> </thead> <tbody> <tr><td>Washtenaw</td><td>7</td></tr> <tr><td>Ann Arbor</td><td>4</td></tr> <tr><td>Ypsilanti</td><td>12</td></tr> <tr><td>Western*</td><td>7</td></tr> <tr><td>Remainder</td><td>3</td></tr> <tr><td>Male</td><td>6</td></tr> <tr><td>Female</td><td>8</td></tr> <tr><td>18-29yrs</td><td>15</td></tr> <tr><td>30-49yrs</td><td>4</td></tr> <tr><td>50+yrs</td><td>3</td></tr> </tbody> </table> <p>Source: Washtenaw County Public Health HIP 2000 Survey</p>	Category	Percent	Washtenaw	7	Ann Arbor	4	Ypsilanti	12	Western*	7	Remainder	3	Male	6	Female	8	18-29yrs	15	30-49yrs	4	50+yrs	3	<p>*Washtenaw County Public Health HIP 2005 Survey</p> <p>The survey question for the HIP 2005 illicit drug use prevalence includes: “In the past 12 months, have you used any medicines, drugs or substances to get high or make you feel good, without a prescription or with greater frequency or quantity than prescribed?”</p>	<p>*Illicit drug use rates for Washtenaw County residents have increased during 1995 to 2005. Populations at higher risk of illicit drug use include residents of Ypsilanti, females and persons 18-29 years old.</p> <p>**A three-year study on women and young girls (ages 8–22) from the National Center on Addiction and Substance Abuse (CASA) at Columbia University revealed that girls and young women use substances for reasons different than boys and young men. The study also found that the signals and situations of higher risk are different and that girls and young women are more vulnerable to abuse and addiction: they get hooked faster and suffer the consequences sooner than boys and young men¹⁶.”</p>
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<p>Inpatient Hospital Discharges for Mental Disorders and Substance Abuse</p>	<p>*In 2003, there were 1,587 discharges related to mental disorders; and 275 discharges related to alcohol/drug abuse and dependence for Washtenaw County residents</p>	<div data-bbox="506 394 1593 971" data-label="Figure"> <p style="text-align: center;">Inpatient Hospital Discharges for Mental Disorders and Alcohol/Drug Abuse/Dependence Washtenaw County Residents 1985-2003</p> <table border="1"> <caption>Inpatient Hospital Discharges per 100,000 Residents</caption> <thead> <tr> <th>Year</th> <th>Mental Disorders*</th> <th>Alcohol/Drug Abuse/Dependence**</th> </tr> </thead> <tbody> <tr> <td>1985</td> <td>231</td> <td>250</td> </tr> <tr> <td>1990</td> <td>444</td> <td>278</td> </tr> <tr> <td>1995</td> <td>495</td> <td>176</td> </tr> <tr> <td>2000</td> <td>488</td> <td>111</td> </tr> <tr> <td>2003</td> <td>473</td> <td>82</td> </tr> </tbody> </table> </div> <p>424 OR procedure 2/ mental illness 425 acute adjustment reaction & psychosocial dysfunction 426 depressive neuroses 427 neuroses except depressive 428 disorders of personality & impulse control 429 organic disturbances 430 psychoses 431 childhood mental disorders 432 other mental disorders</p> <p>**433 alcohol/drug abuse or dependence, left AMA 434 alcohol/drug abuse or dependence, detox or other sympt treatment w/CC 435 alcohol/drug abuse or dependence, detox or other sympt treatment w/o/CC 436 alcohol/drug dependence w/rehabilitation therapy 437 alcohol/drug dependence combined rehabilitation and detox therapy 521 alcohol/drug abuse or dependence w/CC 522 alcohol/drug abuse or dependence w/rehabilitation therapy w/o CC 523 alcohol/drug abuse or dependence w/o rehabilitation therapy w/o CC</p>	Year	Mental Disorders*	Alcohol/Drug Abuse/Dependence**	1985	231	250	1990	444	278	1995	495	176	2000	488	111	2003	473	82	<p>*Data reflect Diagnostic Related Groups (DRG's), that reflect primary diagnosis and resources necessary to treat similarly diagnosed patients.</p> <p>*Source: Michigan Inpatient Data Base; SEMHA Center for Population Health, ; Washtenaw County Public Health</p>	<p>***...A shift toward managed care has been associated with a drastic reduction in frequency and duration of inpatient hospitalization (for addictions), even for many patients who require such hospitalization. It is not clear that that decrease has been offset by an increase in outpatient treatment.¹⁷</p> <p>*A major specialty inpatient hospital in Washtenaw County closed during 1985-2003 that treated substance abuse. This may partially explain the decrease in discharges d/t alcohol and drug abuse.</p>
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<p>Suicide Rate by Age and Gender</p>	<p>(National Statistics)</p> <p>Highest Risk Youth - Males * Suicide is the 3rd leading cause of death among young people ages 15 to 24 (86% male, 14% female) * In 2001, firearms were used in 54% of youth suicides</p> <p>Elderly - Males * Suicide rates increase with age and are highest among those 65 years and older (85% male, 15% female) * In 2001, firearms were used in 73% of suicides committed by those 65 and older</p>	<p style="text-align: center;">Suicide Death Rates Washtenaw County Residents, 1989-2004 Five-Year Moving Averages per 100,000</p> <table border="1"> <caption>Estimated Data from Suicide Death Rates Graph</caption> <thead> <tr> <th>Year</th> <th>Under 25</th> <th>25-74</th> <th>75 and older</th> </tr> </thead> <tbody> <tr><td>1989-1993</td><td>3</td><td>12</td><td>26</td></tr> <tr><td>1990-1994</td><td>2.5</td><td>11.5</td><td>30</td></tr> <tr><td>1991-1995</td><td>3</td><td>11</td><td>25</td></tr> <tr><td>1992-1996</td><td>3.5</td><td>10.5</td><td>18</td></tr> <tr><td>1993-1997</td><td>4</td><td>10.5</td><td>17.5</td></tr> <tr><td>1994-1998</td><td>4</td><td>11.5</td><td>19</td></tr> <tr><td>1995-1999</td><td>3.5</td><td>12</td><td>16.5</td></tr> <tr><td>1996-2000</td><td>3.5</td><td>12</td><td>17.5</td></tr> <tr><td>1997-2001</td><td>2.5</td><td>11.5</td><td>13.5</td></tr> <tr><td>1998-2002</td><td>2.5</td><td>11.5</td><td>16.5</td></tr> <tr><td>1999-2003</td><td>2</td><td>11</td><td>12.5</td></tr> <tr><td>2000-2004</td><td>1.5</td><td>10.5</td><td>12</td></tr> </tbody> </table>	Year	Under 25	25-74	75 and older	1989-1993	3	12	26	1990-1994	2.5	11.5	30	1991-1995	3	11	25	1992-1996	3.5	10.5	18	1993-1997	4	10.5	17.5	1994-1998	4	11.5	19	1995-1999	3.5	12	16.5	1996-2000	3.5	12	17.5	1997-2001	2.5	11.5	13.5	1998-2002	2.5	11.5	16.5	1999-2003	2	11	12.5	2000-2004	1.5	10.5	12	<p>Source: 1989 - 2004 Michigan Resident Death Files, Vital Records & Health Data Development Section, Michigan Department of Community Health, Population Estimate (latest update 9/2005), National Center for Health Statistics, U.S. Census Populations With Bridged Race Categories</p> <p>The confidence intervals for the Age 75 and older data are broad. We can be less confident that these rates are accurate likely due to the small number of events (suicides) per year (1 to 6 per year).</p>	<p>The suicide death rate in Washtenaw County has been decreasing since 1989.</p> <p>Males aged 15 to 24 and over 65 years are at highest at risk for suicide.</p> <p>With a rapidly aging population, suicide prevention efforts should target our elderly male population.</p>
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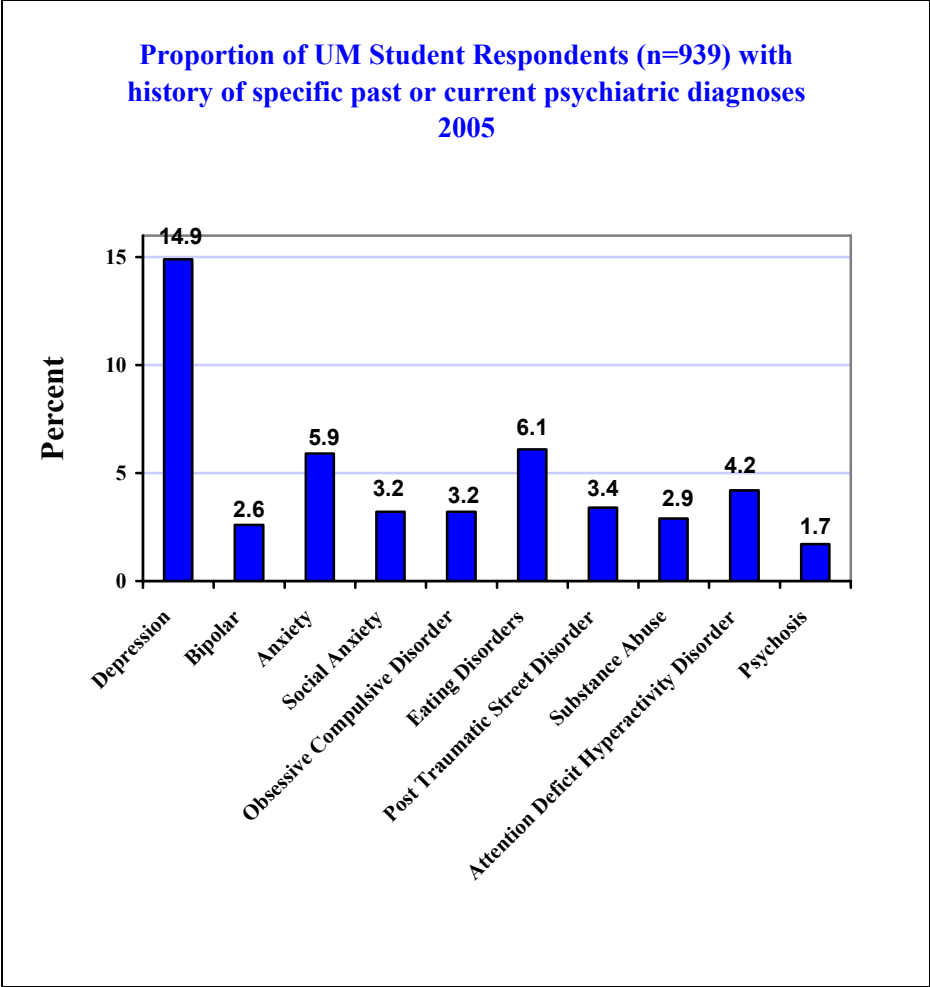
Special Populations – Mental Health Indicators

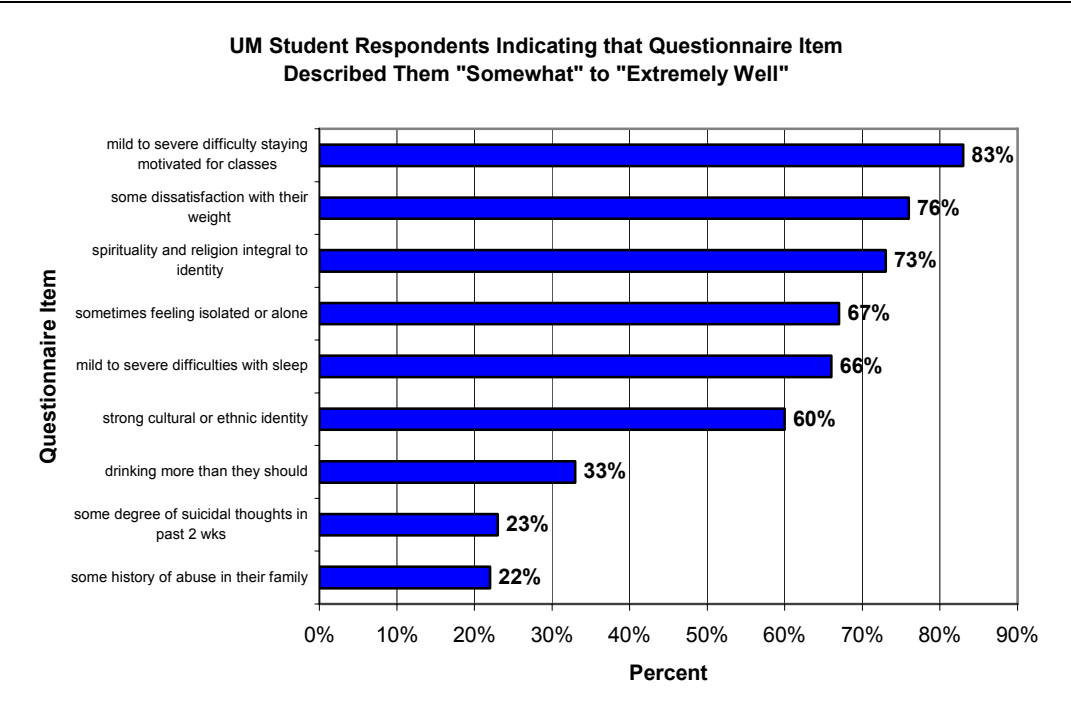
Indicator	Numbers	Data Highlights	Data Limitations & Source	Potential Implications								
<p>Jail Population and Psychotropic Medications</p>	<p>*During the fourth quarter of 2005, 94 of the 353 County jail inmates reported taking psychotropic medications.</p>	<p style="text-align: center;">Percent of Washtenaw County Jail Inmates Taking Psychotropic Medications Fourth Quarter Data 2003-2005</p>  <table border="1" data-bbox="653 391 1539 979"> <caption>Percent of Washtenaw County Jail Inmates Taking Psychotropic Medications Fourth Quarter Data 2003-2005</caption> <thead> <tr> <th>Year</th> <th>Percent</th> </tr> </thead> <tbody> <tr> <td>2003</td> <td>23</td> </tr> <tr> <td>2004</td> <td>22</td> </tr> <tr> <td>2005</td> <td>27</td> </tr> </tbody> </table>	Year	Percent	2003	23	2004	22	2005	27	<p>*Deb Pippens, Program Supervisor, CSTS-Project Outreach, Washtenaw County Jail Diversion and Jail Services</p>	<p>*Given that antidepressants alone account for over 25% of drug mentions for national ambulatory care¹⁸ visits in the U.S., the 27% of Washtenaw County jail inmates reporting ANY psychotropic medication use is likely an underestimate of need or even possibly use.</p> <p>*Various institutional disincentives may exist for inmates to identify need for or use of psychotropic medications.</p>
Year	Percent											
2003	23											
2004	22											
2005	27											

Indicator	Numbers	Data Highlights	Data Limitations & Source	Potential Implications
<p>Proportion of local governments with jail diversion programs for adults with serious mental illness.</p> <p><i>Healthy People 2010 Indicator 18.11</i></p>	<p><i>Not applicable</i></p>	<p>Washtenaw County jail operations include both a pre-diversion program for adults with serious mental illness. The pre-booking jail diversion program seeks to prevent incarceration for individuals with a mental illness. Intervention takes place prior to being arrested or jailed. Requests for Diversion can come from the courts, probation, police, mental health professionals, service providers, substance abuse treatment providers, family members, NAMI and consumers of mental health services¹⁹.</p>	<p>Deb Pippens, Program Supervisor, CSTS-Project Outreach, Jail Diversion and Jail Services</p>	<p>*A large proportion (possibly as much as 50%) of the mentally ill diversion program clients may have substance abuse disorders.</p>

Indicator	Numbers	Data Highlights	Data Limitations & Source	Potential Implications
<p>Proportion of homeless adults who have serious mental illness.</p> <p><i>Adapted from Healthy People 2010 Indicator 18.3</i></p>	<p>A March 18, 2004 Local 'Point in Time Count' suggests 664 homeless persons during that single night; and 2700 homeless individuals in Washtenaw County per year.</p>	<p>While local data sources do not exist for the portion of homeless persons have serious mental illness, local estimates do exist for the portion of persons with serious mental illness who are homeless. According to the Washtenaw County Project Outreach Team (PORT), approximately 33-55% of the 2700 homeless Washtenaw County residents are mentally ill.</p>	<p>Deb Pippens, Program Supervisor, CSTS-Project Outreach, Jail Diversion and Jail Services</p>	<p>*Local estimates suggest that 891 to 1,485 homeless persons are mentally ill per year in Washtenaw County.</p>

Indicator	Numbers	Data Highlights	Data Limitations & Source	Potential Implications
<p>Operational mental health plan that addresses mental health crisis interventions, ongoing screening, and treatment services for elderly persons</p> <p><i>Adapted from Healthy People 2010 indicator 18.14</i></p>	<p><i>Not applicable</i></p>	<p><u>General Senior Population:</u> CSTS provides screening, assessment and treatment to seniors who have a qualifying diagnosis for community mental health services under the mental health code. This includes serious and persistent mental illness (such as major depression, schizophrenia or bi-polar disorder) or a developmental disability. Typically these disorders are diagnosed earlier in life; therefore seniors served by the community mental health system have usually been served throughout their adulthood.</p> <p>In addition, CSTS has recently implemented partnerships with primary care clinics serving low income individuals. In these select sites, CSTS provides on-site brief psychiatric and mental health services. It is hoped that seniors with late onset mental illness, who might be reluctant to seek mental health services may be identified and treated within the primary system.</p> <p><u>Nursing Home Population:</u> WCHO/CSTS provides OBRA Preadmission Screening and Annual Resident Reviews (PASARR) in Washtenaw County hospitals, nursing homes and other living arrangements for individuals seeking nursing home placement. OBRA Services may also include treatment services for consumers who have mental illness or development disability diagnosis, and who reside in Washtenaw county nursing homes.</p>	<p>Source: Hannele Waissi, OBRA Services/Older Adults, Community Support and Treatment Services and Donna Sabourin, Director, Community Support and Treatment Services</p>	<p>The CDC reports that “most elderly victims [of suicide] are seen by their primary care provider a few weeks prior to their suicide attempt and diagnosed with their first episode of mild to moderate depression (DHHS 1999).”</p> <p>These primary care visits are an opportunity for putting together a plan to prevent suicide attempts through proper treatment, support, and follow up.</p> <p>With elderly males being in the highest risk category for suicide, it is important to have a system of mental health screening in place.</p>

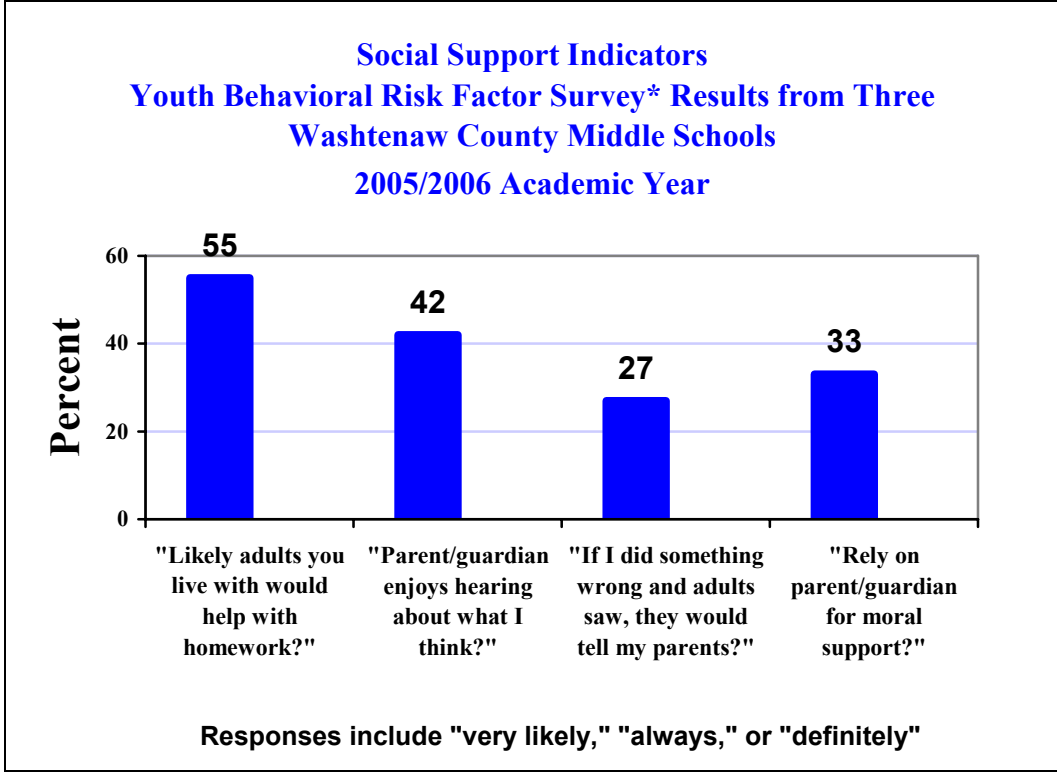
Indicator	Numbers	Data Highlights	Data Limitations & Source	Potential Implications																						
<p>Proportion of student population at University of Michigan with history of specific mental health diagnoses</p>	<p>* UM students most commonly self-reported a history of current or past diagnosis of depression, eating disorders, anxiety and attention deficit hyperactivity disorder (ADHD). * There were significant differences found by sex for depression and eating disorders, with females being more likely to report both types of diagnoses. * Overall, 30% of respondents report ever having been in counseling. * Females (35.3%) were more likely than males (20.3%) to report seeking mental health services.</p>	<p style="text-align: center;">Proportion of UM Student Respondents (n=939) with history of specific past or current psychiatric diagnoses 2005</p>  <table border="1" data-bbox="575 396 1499 1377"> <thead> <tr> <th>Diagnosis</th> <th>Percent</th> </tr> </thead> <tbody> <tr> <td>Depression</td> <td>14.9</td> </tr> <tr> <td>Bipolar</td> <td>2.6</td> </tr> <tr> <td>Anxiety</td> <td>5.9</td> </tr> <tr> <td>Social Anxiety</td> <td>3.2</td> </tr> <tr> <td>Obsessive Compulsive Disorder</td> <td>3.2</td> </tr> <tr> <td>Eating Disorders</td> <td>6.1</td> </tr> <tr> <td>Post Traumatic Street Disorder</td> <td>3.4</td> </tr> <tr> <td>Substance Abuse</td> <td>2.9</td> </tr> <tr> <td>Attention Deficit Hyperactivity Disorder</td> <td>4.2</td> </tr> <tr> <td>Psychosis</td> <td>1.7</td> </tr> </tbody> </table>	Diagnosis	Percent	Depression	14.9	Bipolar	2.6	Anxiety	5.9	Social Anxiety	3.2	Obsessive Compulsive Disorder	3.2	Eating Disorders	6.1	Post Traumatic Street Disorder	3.4	Substance Abuse	2.9	Attention Deficit Hyperactivity Disorder	4.2	Psychosis	1.7	<p>* “College Student Mental Health Survey” by Johanna Soet and Todd Sevig. Published in <i>UM Counseling and Psychological Services Newsletter</i> in September 2005.</p> <p>*This survey included a random sample of UM students including undergraduate, professional, graduate, and international students.</p>	<p>*These findings indicate that UM students’ mental illness reporting rates are very similar to the national reporting for adult depression, anxiety, eating disorders and substance abuse.</p>
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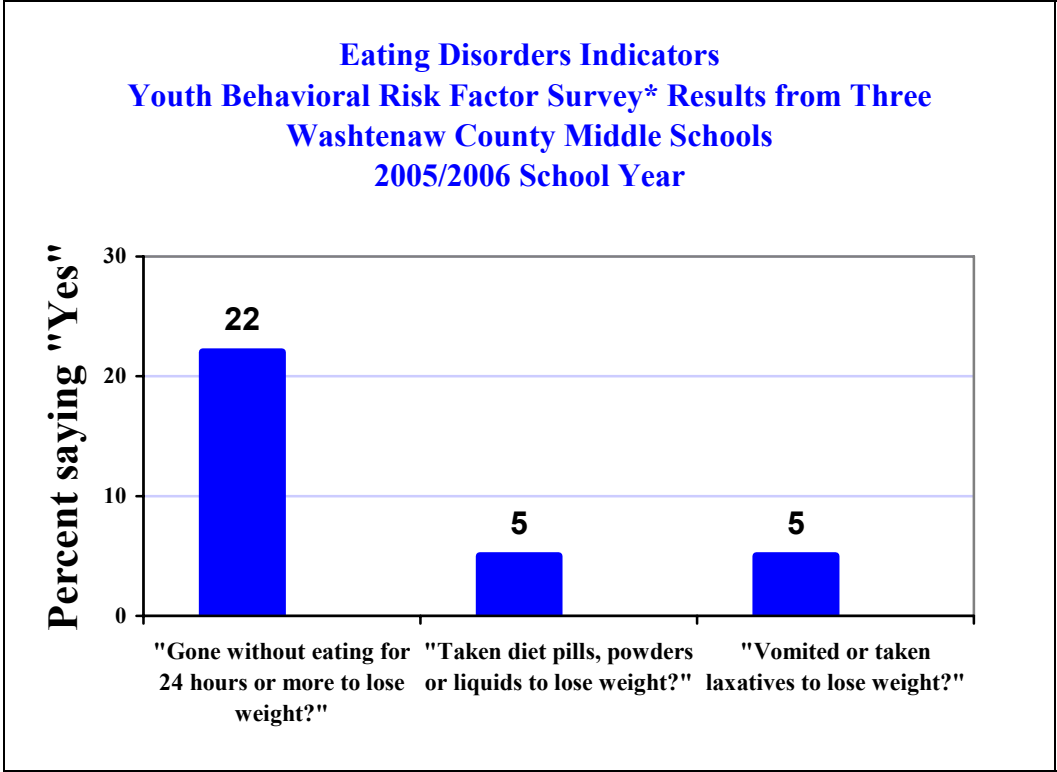
Indicator	Numbers	Data Highlights	Data Limitations & Source	Potential Implications																				
<p>Risk and protective factors for mental health among UM students</p>	<p>* Almost 75% of students surveyed reported that spirituality and religion are central to their identity; and 60% reported a strong cultural identity. Both are protective factors for mental health.</p> <p>* 76% of students reported some dissatisfaction with their weight.</p> <p>* Almost one in four respondents reported suicidal thoughts in the past 2 weeks.</p>	<p style="text-align: center;">UM Student Respondents Indicating that Questionnaire Item Described Them "Somewhat" to "Extremely Well"</p>  <table border="1" data-bbox="506 431 1570 1149"> <thead> <tr> <th>Questionnaire Item</th> <th>Percent</th> </tr> </thead> <tbody> <tr> <td>mild to severe difficulty staying motivated for classes</td> <td>83%</td> </tr> <tr> <td>some dissatisfaction with their weight</td> <td>76%</td> </tr> <tr> <td>spirituality and religion integral to identity</td> <td>73%</td> </tr> <tr> <td>sometimes feeling isolated or alone</td> <td>67%</td> </tr> <tr> <td>mild to severe difficulties with sleep</td> <td>66%</td> </tr> <tr> <td>strong cultural or ethnic identity</td> <td>60%</td> </tr> <tr> <td>drinking more than they should</td> <td>33%</td> </tr> <tr> <td>some degree of suicidal thoughts in past 2 wks</td> <td>23%</td> </tr> <tr> <td>some history of abuse in their family</td> <td>22%</td> </tr> </tbody> </table>	Questionnaire Item	Percent	mild to severe difficulty staying motivated for classes	83%	some dissatisfaction with their weight	76%	spirituality and religion integral to identity	73%	sometimes feeling isolated or alone	67%	mild to severe difficulties with sleep	66%	strong cultural or ethnic identity	60%	drinking more than they should	33%	some degree of suicidal thoughts in past 2 wks	23%	some history of abuse in their family	22%	<p>* "College Student Mental Health Survey" by Johanna Soet and Todd Sevig. Published in <i>UM Counseling and Psychological Services Newsletter</i> in September 2005.</p> <p>* Surveyed a random sample of UM students including undergraduate, professional, graduate, and international students. Authors report sample was "diverse" and "representative of the UM student population for Fall 2004 in many respects (level in school, national origin, some racial/ethnic categories)".</p>	<p>* These findings indicate that UM students are very similar to the national sample reporting diagnoses of depression, anxiety, eating disorders and substance abuse.</p>
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Children – Mental Health Indicators

Indicator	Numbers	Data Highlights	Data Limitations & Source	Potential Implications																		
<p>Children with Serious Mental Illness</p> <p><i>Healthy People 2010 Indicator 18.9</i></p>	<p>*The U.S. Surgeon General reports that approximately 20% of children 9-17 years have mental disorders with at least mild functional impairment.</p> <p>*Approximately five to nine percent have “serious emotional disturbance (SED)” suggesting more severe functional limitations. Assuming 34,964 Washtenaw County children who are 9-17 years, 3,147 children may have SED in Washtenaw County. Source: http://www.surgeongeneral.gov/library/mentalhealth/home.html</p>	<p style="text-align: center;">One Year Prevalence Rates of Mental Disorders – Children Aged 9-17 Best Estimates United States – 1980-1990</p> <table border="1" style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th></th> <th>Percent of Population</th> <th>Estimated Number in Washtenaw County (based on 2005 U.S. Census estimate of 34,964 children residents aged 9-17)</th> </tr> </thead> <tbody> <tr> <td>Anxiety disorders</td> <td>13.0</td> <td>4,545</td> </tr> <tr> <td>Mood disorders</td> <td>6.2</td> <td>2,168</td> </tr> <tr> <td>Disruptive disorders</td> <td>10.3</td> <td>3,601</td> </tr> <tr> <td>Substance use disorders</td> <td>2.0</td> <td>699</td> </tr> <tr> <td>Any disorder</td> <td>20.9</td> <td>7,307</td> </tr> </tbody> </table>		Percent of Population	Estimated Number in Washtenaw County (based on 2005 U.S. Census estimate of 34,964 children residents aged 9-17)	Anxiety disorders	13.0	4,545	Mood disorders	6.2	2,168	Disruptive disorders	10.3	3,601	Substance use disorders	2.0	699	Any disorder	20.9	7,307	<p>*<u>Mental Health: A Report of the Surgeon General</u>. Department of Health and Human Services under the direction of the Substance Abuse and Mental Health Services Administration, Center for Mental Health Services, in partnership with the National Institute of Mental Health, National Institutes of Health; http://www.surgeongeneral.gov/library/mentalhealth/home.html</p> <p>*The estimates shown at the left are not unduplicated counts. Individuals may have more than one disorder.</p>	<p>* Interventions that include home based interventions during pregnancy and infancy, efforts to reduce smoking during pregnancy, parent management training and preschool programmes have been shown to reduce stressors and enhance resilience in children. Source: <u>Prevention of Mental Disorders: Effective Interventions and Policy Options. Summary Report</u>. World Health Organization, Department of Mental Health and Substance Abuse. 2004.</p>
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<p>Special Education Services to Washtenaw County Students with Mental, emotional or cognitive disabilities</p>	<p>*7,235 students (15%) received special education services in Washtenaw County in 2005</p> <p>*The largest category (representing 39%) is ‘learning disability.’</p> <p>*The smallest proportion of students receiving special education services for mental, emotional or cognitive disabilities was 8.5% in 1999, the largest was 10.9% in 2004</p>	<div data-bbox="552 396 1549 971" data-label="Figure"> <p style="text-align: center;">Proportion of Washtenaw County Students Receiving Special Education Services by Disability Type 1998-2005</p> <table border="1"> <caption>Data for Proportion of Washtenaw County Students Receiving Special Education Services by Disability Type 1998-2005</caption> <thead> <tr> <th>Year</th> <th>Mental, emotional or cognitive*</th> <th>Physical**</th> </tr> </thead> <tbody> <tr> <td>1998</td> <td>9</td> <td>5</td> </tr> <tr> <td>1999</td> <td>8</td> <td>4</td> </tr> <tr> <td>2000</td> <td>9</td> <td>5</td> </tr> <tr> <td>2001</td> <td>9</td> <td>5</td> </tr> <tr> <td>2002</td> <td>9</td> <td>5</td> </tr> <tr> <td>2003</td> <td>9</td> <td>5</td> </tr> <tr> <td>2004</td> <td>11</td> <td>4</td> </tr> <tr> <td>2005</td> <td>10</td> <td>5</td> </tr> </tbody> </table> </div> <div data-bbox="552 1008 1549 1170" data-label="Text"> <p>*Categories include: autism, cognitive impairment, early childhood DD, emotional impairment, severe multiple impairment, learning disability, traumatic brain injury</p> <p>**Categories include: physical impairment, speech or language impairment, visual impairment, other health impairment</p> </div>	Year	Mental, emotional or cognitive*	Physical**	1998	9	5	1999	8	4	2000	9	5	2001	9	5	2002	9	5	2003	9	5	2004	11	4	2005	10	5	<p>*Disability categories may overlap.</p> <p>*All eligible students may not access or receive services</p> <p>*Data source is Washtenaw Intermediate School District and Washtenaw County Public Health²⁰</p>	<p>*Approximately 10% of Washtenaw County students receive special education services associated with mental, emotional or cognitive disabilities.</p> <p>*Low birth weight is significant risk factor for “cognitive and behavioral deficits, failure to thrive, cognitive problems later in life, academic impairment and school problems and increases the risk of behavioral and psychiatric disorders²¹.”</p> <p>* According to the National Education Association, average per student cost is \$7,552 per year and the average cost per special education student is an additional \$9,369 per student, or \$16,921. Yet, in 2004, the federal government is providing local school districts with just under 20 percent of its commitment rather than the 40 percent specified by law, creating a \$10.6 billion shortfall for states and local school districts²².</p> <p>*Pregnant women who take 400 micrograms of folic acid daily before and during pregnancy reduce the likelihood of neural tube defects by 70%.²³</p>
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<p>Protective Factors for Adolescents</p>	<p>*432 Students completed this Youth Behavioral Risk Factor Survey in 2005/2006 Academic Year.</p>	<div style="text-align: center;"> <p>Social Support Indicators</p> <p>Youth Behavioral Risk Factor Survey* Results from Three Washtenaw County Middle Schools</p> <p>2005/2006 Academic Year</p>  <table border="1" style="margin: 10px auto;"> <thead> <tr> <th>Indicator</th> <th>Percent</th> </tr> </thead> <tbody> <tr> <td>"Likely adults you live with would help with homework?"</td> <td>55</td> </tr> <tr> <td>"Parent/guardian enjoys hearing about what I think?"</td> <td>42</td> </tr> <tr> <td>"If I did something wrong and adults saw, they would tell my parents?"</td> <td>27</td> </tr> <tr> <td>"Rely on parent/guardian for moral support?"</td> <td>33</td> </tr> </tbody> </table> <p>Responses include "very likely," "always," or "definitely"</p> <p>*Washtenaw County Youth Health Improvement Plan (YHIP) Behavioral Risk Factor Survey</p> </div>	Indicator	Percent	"Likely adults you live with would help with homework?"	55	"Parent/guardian enjoys hearing about what I think?"	42	"If I did something wrong and adults saw, they would tell my parents?"	27	"Rely on parent/guardian for moral support?"	33	<p>*These data do not represent all Washtenaw County middle school students</p> <p>*Source: Washtenaw County Youth Health Improvement Plan (YHIP) Behavioral Risk Factor Survey</p>	<p>*Protective factors including 'perception of social support from adults and peers,' good relationships with parents,' and 'high community expectations' are preventive in delinquency and substance abuse. These act by buffering risk factors, interrupt risk behaviors and preventing initial occurrence of risk factors. See: http://www.helpinamericasyouth.gov/background-factors.cfm</p>
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<p>Eating Disorder Indicators in Adolescents</p> <p><i>Adapted from Healthy People 2010 Indicator 18.5</i></p>	<p>*432 Middle School Students completed this Youth Behavioral Risk Factor Survey in 2005/2006 School Year</p>	<div style="text-align: center;"> <p>Eating Disorders Indicators</p> <p>Youth Behavioral Risk Factor Survey* Results from Three Washtenaw County Middle Schools</p> <p>2005/2006 School Year</p>  <table border="1" style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th>Indicator</th> <th>Percent saying "Yes"</th> </tr> </thead> <tbody> <tr> <td>"Gone without eating for 24 hours or more to lose weight?"</td> <td>22</td> </tr> <tr> <td>"Taken diet pills, powders or liquids to lose weight?"</td> <td>5</td> </tr> <tr> <td>"Vomited or taken laxatives to lose weight?"</td> <td>5</td> </tr> </tbody> </table> </div> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>*Washtenaw County Youth Health Improvement Plan (YHIP) Behavioral Risk Factor Survey</p> </div>	Indicator	Percent saying "Yes"	"Gone without eating for 24 hours or more to lose weight?"	22	"Taken diet pills, powders or liquids to lose weight?"	5	"Vomited or taken laxatives to lose weight?"	5	<p>*These data do not represent all Washtenaw County middle school students</p> <p>*Source: Washtenaw County Youth Health Improvement Plan (YHIP) Behavioral Risk Factor Survey</p> <p>*The U.S. Centers for Disease Control and Prevention and the Michigan Department of Education and Community Health administer this same survey to high school students. A local YHIP (Youth-Health Improvement Plan) supports administering this modified YRBS at the middle school level to enhance the likelihood of prevention interventions</p>	<p>*Nearly a quarter of these middle school students have gone without eating for 24 hours or more to lose weight.</p> <p>*According to 2005 HIP Survey data, 33% of Washtenaw County children two years and older are overweight.</p>
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<p>Tobacco, Alcohol and Other Drug use in Adolescents</p> <p><i>HIP 2005–Goal V. Objectives A-D</i></p>	<p>*432 Students completed this Youth Behavioral Risk Factor Survey in 2005/2006 academic year</p>	<div style="text-align: center;"> <p>Substance Abuse</p> <p>Youth Behavioral Risk Factor Survey*</p> <p>Results from 6th-8th Graders at Two Washtenaw County Middle Schools Compared to U.S. 8th Graders</p> <p>2005</p> <table border="1"> <caption>Substance Abuse Data</caption> <thead> <tr> <th>Substance</th> <th>Washtenaw 6th-8th Graders (%)</th> <th>U.S. 8th Graders (%)</th> </tr> </thead> <tbody> <tr> <td>"Ever tried cigarette smoking?"</td> <td>35</td> <td>26</td> </tr> <tr> <td>"Ever had alcohol drink, other than few sips?"</td> <td>43</td> <td>41</td> </tr> <tr> <td>"Ever used marijuana?"</td> <td>23</td> <td>16</td> </tr> <tr> <td>"Ever used cocaine?"</td> <td>4</td> <td>4</td> </tr> <tr> <td>"Ever used inhalants?"</td> <td>14</td> <td>17</td> </tr> <tr> <td>"Ever used non-prescribed steroids?"</td> <td>2</td> <td>2</td> </tr> </tbody> </table> </div>	Substance	Washtenaw 6th-8th Graders (%)	U.S. 8th Graders (%)	"Ever tried cigarette smoking?"	35	26	"Ever had alcohol drink, other than few sips?"	43	41	"Ever used marijuana?"	23	16	"Ever used cocaine?"	4	4	"Ever used inhalants?"	14	17	"Ever used non-prescribed steroids?"	2	2	<p>*These data do not represent all Washtenaw County middle school students</p> <p>*The rates for these local middle schoolers 6th-8th grade; while national data represent only 8th graders.</p> <p>*Source: Washtenaw County Youth Health Improvement Plan (YHIP) Behavioral Risk Factor Survey</p> <p>*National data from 'Monitoring the Future - 2005' data at http://www.monitoringthefuture.org/data/05data/pr05t1.pdf</p>	<p>*Rates for these younger local students indicate higher lifetime use of tobacco, marijuana, cocaine and steroids, even compared to national 8th grade averages.</p> <p>*Earlier alcohol, tobacco or other drug use in adolescents increases and accelerates the likelihood of later use and addiction²⁴.</p>
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Endnotes:

¹ Koivumaa-Honkanen, H., et al. "Life Satisfaction and Suicide: A 20-Year Follow-Up Study." *American Journal of Psychiatry* 158:433-439, March 2001 http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=11229985&dopt=Abstract

² Social Support and Health-Related Quality of Life Among Older Adults — Missouri, 2000 <http://www.cdc.gov/od/oc/media/mmwrnews/n050506.htm#mmwr3>

ⁱⁱⁱ 'BHARATHI RADHAKRISHNAN 'Americans Have Fewer Friends, Researchers Say.' ABC News. June 23, 2006. <http://www.abcnews.go.com/Health/Depression/story?id=2107907&page=1>

⁴ Colten, HR., Altevogt, BM. *Sleep Disorders and Sleep Deprivation: An Unmet Public Health Problem*. Institute of Medicine. National Academy of Sciences. 2006. <http://www.iom.edu/CMS/3740/23160/33668.aspx>

⁵ 'Mental Health and Mental Disorders.' *Healthy People 2010*. U.S. Surgeon General's Office. January 2000. www.healthypeople.gov

⁶ U.S. Department of Health and Human Services. *Mental Health: A Report of the Surgeon General—Executive Summary*. Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Mental Health Services, National Institutes of Health, National Institute of Mental Health, 1999.

⁷ Kessler, RC., Chiu, WT., Demler, O., Walters, EE. 'Prevalence, Severity and Comorbidity of 12-month DSM-IV Disorders in the National Comorbidity Survey Replication.' *Arch Gen Psychiatry*. 2005;62:617-627.

⁸ Physical Health of People with Severe Mental Illness. Editorial. *BMJ* 2001;322:443-444 (24 February) <http://bmj.bmjournals.com/cgi/content/full/322/7284/443>

⁹The Health Report: Physical Health of People with Mental Illness. <http://www.abc.net.au/rn/talks/8.30/helthrpt/stories/s409295.htm>

¹⁰ 'Management of Adults with Major Depression.' Michigan Quality Improvement Consortium Guideline. January 2004. http://www.mqic.org/pdf/depres_g06.pdf

¹¹ 'Screening for Depression.' U.S. Preventive Services Task Force. May 2002. <http://www.ahrq.gov/clinic/uspstf/uspstfdepr.htm>

¹² 'What's New From the USPSTF: Screening for Depression.' U.S. Preventive Services Task Force. May 2002. <http://www.ahrq.gov/>

¹³ Behavioral Risk Factor Surveillance System. U.S. Centers for Disease Control and Prevention. 2005 Data. <http://apps.nccd.cdc.gov/brfss/display.asp?yr=2005&cat=AC&qkey=7306&state=US>

¹⁴ Marlatt, G.A.; Baer, J.S.; & Larimer, M. Preventing alcohol abuse in college students: A harm-reduction approach. In: Boyd, G.M.; Howard, J.; & Zucker, R.A., eds. *Alcohol Problems Among Adolescents: Current Directions in Prevention Research*. Hillsdale, NJ: Lawrence Erlbaum Associates, 1995. pp. 147-172.

¹⁵ Kivlahan, D.R.; Marlatt, G.A.; Fromme, K.; Coppel, D.B.; & Williams, E. Secondary prevention with college drinkers: Evaluation of an Alcohol Skills Training Program. *Journal of Consulting and Clinical Psychology* 58(6):805-810, 1990

¹⁶ National Center on Addiction and Substance Abuse at Columbia University, [The Formative Years: Pathways to Substance Abuse Among Girls and Young Women Ages 8–22](#) (PDF), February 2003.

¹⁷ **Addiction Treatment Suffers Under Managed Care.** Robert Wood Johnson Foundation. April 2003.
<http://www.rwjf.org/portfolios/resources/grantsreport.jsp?filename=035394.htm&iaid=131>

¹⁸ Health, United States, 2005. US Department of Health and Human Services. CDC, NCHS. November 2005. <http://www.cdc.gov/nchs/data/hus/hus05.pdf>

¹⁹ ‘Pre-Booking Jail Diversion.’ Washtenaw County Community Support and Treatment Services. Project Outreach Team (PORT) – program brochure.

²⁰ Washtenaw County Intermediate School District Website: <http://www.wash.k12.mi.us/files/SummBook/StudentDisab05.pdf>

²¹ Prevention of Mental Disorders: Effective Interventions and Policy Options. Summary Report. World Health Organization, Department of Mental Health and Substance Abuse. 2004.

²² National Education Association website: <http://www.nea.org/specialed/index.html>

²³ March of Dimes website: http://www.marchofdimes.com/pnhec/173_769.asp

²⁴ Wilson, N., Battistich, V., Syme, L., and Boyce, W.T. Does Elementary School Alcohol, Tobacco, and Marijuana Use Increase Middle School Risk? *Journal of Adolescent Health*, 30, pp. 442-447, 2002. <http://www.nida.nih.gov/about/organization/ICAW/origins/originsfindings203.html>