



Mental Health In Island County

Why this report matters to all of us

Island County Community Health Advisory Board
Coupeville, WA 98239

The health of Island County is of concern to us all, and the Island County Community Health Advisory Board (CHAB) has just completed a lengthy two year process of examining and prioritizing health issues for our community. This special report is one result of that process, which included both science and a wide range of inputs from our partners in the community, including a comprehensive telephone survey of residents in all regions of Whidbey and Camano Island.

CHAB spent the first year studying health data pertaining to Island County. Such data included a household survey many in the community participated in: the Island County Behavioral Risk Factor Surveillance Survey (BFRSS). Data was also analyzed from a number of national, state, and local sources. The members of CHAB then prioritized health issues that needed attention and community action. Issues were prioritized on the basis of their size, their seriousness, and whether there are potential community-based interventions available to lessen the problem.

The research identified 44 different health issues that were potentially significant for Island County. Through a variety of evaluation exercises CHAB then selected 15 issues that needed more exploration. Those 15 have been grouped into four different topic areas: Early Intervention/Parent Support, Health Prevention/Screening; Chronic Disease/Physical Activity; and Mental Health. This special report specifically focuses on Mental Health.

By publishing a special report on each topic we hope to raise community awareness about the health issue in Island County and encourage community partners to join together and take action to address the issue. Our community has a long history of working together to develop plans and strategies that make Whidbey and Camano Islands great places to live, and together we can have a positive impact on the health of people in Island County.

We invite you to join in building a better future for Island County. Our next task is to develop action plans to address priority issues, determine goals and evaluation plans that measure progress in addressing the issue(s), and create a healthy Island County culture.

The future is ours to create.

Sincerely,



Robin Hertlein, Chairperson
Island County Community Health Advisory Board

P.S. You can find more information about CHAB on our website at www.pioneernet.net/chab

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Mental Health Issues

When the Community Health Advisory Board (CHAB) assessed and prioritized Island County health data, a number of issues arose that pertain to the mental health of Island County residents and the mental health system serving county residents.

They included:

- **Scarce resources for child and adolescent mental health.** Island Mental Health served 490 youth in 2000. There is limited access to child/adolescent mental health professionals in Island County. Presently (2003) there are very limited Island County youth health providers specializing in the prescription and management of psychiatric medications.
- **Resource “gap” for working poor and uninsured adults.** There are few mental health professionals able to see persons on a sliding fee scale, and individuals are often unable to pay for services out-of-pocket. Many insurance programs limit their provision of mental health services.
- **Scarce resources for mental health prevention services.** Island County has very few support groups and education resources that focus on mental health issues.
- **Limited funding for direct services.** The current Washington State structure for mental health services reduces funding that is available for direct services at the local level.
- **There is an imbalance between mental health service demand and resources.** Certainly the resources (county contract with limited funding, low rates of health insurance reimbursements) required to adequately address mental health issues are not in line with the demands and needs for such services.
- **Island County adults with mental health impairments most frequently reported depression, anxiety, and emotional problems (25.8%).**



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Needs Assessment

The issues were identified and supported by examining Island County data that included self-reported health status by county residents on depression and mental well-being, suicide mortality rates, child abuse reports, drug and alcohol abuse, crime, and hospital data.

In the 2000-2001 Island County Behavioral Risk Factor Surveillance Survey (BRFSS), 31.8% of adults surveyed indicated that there was at least one day in the past month when their mental health was not good, with 8.5% of those reporting 8 days or more.

A high percentage (17.7%) of Island County adults responded that they have a health impairment and 26% of those most often listed their impairment as depression, anxiety, or an emotional problem (approximately 2,453 adults). When asked “How many days, in the past 30, was your mental health not good?” 19-20% of persons ages 18-34 had 3-7 days per month when their mental health was not good.

Persons with lower incomes were more likely to have days when their mental health was not good. Twenty-two percent of persons with incomes less than \$20,000 reported 11-29 days of poor mental health.

Positively, more than 79% of persons over age 55 reported no days of poor mental health. The BRFSS asked respondents “How many days in the past 30 days had they felt sad, blue, or depressed?” Most (91.2%) reported no days, 2.8% reported having 1-2 days, 4.6% had 3-29 days, and 1% felt that way all the time. The BRFSS also asked how often respondents felt worried, tense, or anxious in the past 30 days? The majority (88.6%) reported no days, 2.9% had 1-2 days, 6.2% had 3-29 days, and 1.7% experienced anxiety every day.

The Office of the Surgeon General recently estimated that one in five Americans experience a diagnosable mental health condition each year, but that as few as one third received proper mental health treatment. Application of federal estimates to Island County would estimate the prevalence of mental illness in a one-year period as follows. Adults with any diagnosable mental disorder (24%) would equal 12,795 Island County residents. Adults with a severe mental illness (6%) equals 3,199 Island County citizens and, finally, 1,599 adults (3%) have severe and persistent mental illnesses. Ten percent of children and adolescents suffer from mental illnesses, equaling 1,825 Island County youth.



A high percentage (17.7%) of Island County adults responded that they have a health impairment and 26% of those most often listed their impairment as depression, anxiety, or an emotional problem (approximately 2,453 adults).

Additionally, it is estimated that between 12% and 22% of America's youth under age 18 (approximately 1,682–3,083 Island County youth) are in need of mental health services (National Advisory Mental Health Council, 1990).

Since alerted to the issue of children's mental health services, Whidbey General Hospital (WGH) has been tracking youth emergency room admissions. In 2000, WGH admitted 34 pediatric (children under age 18) patients with principal diagnosis codes of 290-319 (Mental Disorder including dementia, drug and alcohol abuse, psychoses, schizophrenia, sleep and eating disorders, stress reactions, and developmental and emotional disorders). In 2001, 44 pediatric patients were admitted under these codes, with 26 admitted through August 2002. Additionally, 52 youth were admitted with the same codes as a secondary diagnosis in 2002 and 45 in 2001.

In Island County, we lost 43 people to suicide in the years 1996-2001. The majority (51%) of suicide victims were between the ages 35-54. These numbers do not take into account persons who might of have attempted suicide in the same years who are also in need of mental health services.



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Effective Interventions

(What Can We Learn From Other Places)

- Promote early identification and treatment of mental illness in children and youth. Access to primary mental health services should be available through the school system and other social service agencies. Federal reports (U.S. Substance Abuse and Mental Health Services Administration) show clear evidence that preventive interventions with school age children can reduce psychological symptoms or related behaviors.
- Conduct problems in children can be an early sign of mental disorders and interventions that target multiple environments (child, school, family, neighborhoods) and socialization agents (parents, teachers, peers) over extended developmental periods in children's lives are necessary to show positive impact over time.

Community Resources

- The primary agency that supports and treats individuals with mental health disorders (and are eligible for Medicaid) is Compass Health: Whidbey and Camano offices. The local chapter of Washington Alliance for the Mentally Ill (WAMI) also provides a local resource and educates family members dealing with mental disorders of family members. A number of local resources, the Recovery Center, Alcoholics Anonymous, and Island Country Health Department, support and treat people with alcohol and drug dependence. Counseling and support are also available through many health plans, with a referral from a physician, or for low-income persons through Whidbey Island Community Clinics (Oak Harbor and Clinton locations), which offers short term social work assistance.
- A number of community organizations help children, youth, and families in dealing with life circumstances; these include Big Brother/Big Sister, South Whidbey and Central Whidbey Youth Coalitions, Seeds of Change, Readiness To Learn and programs in the school districts.
- Island County Mental Health Advisory Board meets regularly to address Island County mental health issues.



Recommended:

Increase the availability of mental health counseling services to youth, young adults, seniors, and all persons from low-income backgrounds.

How Our Community Can Respond

(Policy and Program Recommendations)

- Increase the availability of mental health counseling services to youth, young adults, seniors, and all persons from low-income backgrounds.
- Promote early identification and treatment of substance abuse and develop a program that supports individuals with co-occurring mental health and substance abuse problems.
- Target interventions to specific population groups such as seniors and new mothers.
- Increase availability of support groups for persons with mental illnesses and their families.

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- Increase services to youth in families with substance abuse and mental health issues (i.e. Alateen).
 - Encourage citizens to become actively involved in asking for state and national support (legislation and funding) for programs that help persons with mental health conditions. Educate the public about the need for mental health services as well as educate elected officials so they can plan effective state and federal policies and budgets. State that such policies and budgetary decisions should be reflected as local, state and national priorities—both for the well-being of individuals, as well as community safety and well-being.
 - Explore a group medication management program, where a physician meets with a group of persons on psychiatric medications and provides medication management. Case management services and support services to the physician would be provided by the offering agency. Utilize retired mental health professionals as volunteers to lead support groups, advise and consult. Approach our local branch of the Red Cross about their ability to carry liability umbrella insurance for professional volunteers.
 - Implement a social marketing plan targeting alternative school students, senior centers, and other population groups.
 - Support current efforts within the justice system of innovative sentencing and drug courts.
 - Encourage Whidbey General Hospital to continue staffing a medical social worker at their community clinics. This person has been very effective in helping low income, working poor, and uninsured adults access health insurance and community resources. Examine how the community can assist WGH hospital and emergency room staff help patients with mental health conditions access appropriate resources. Explore the possibility of having a detoxification facility at WGH. Ask WGH to provide community outreach to increase the public’s knowledge and awareness of common mental health disorders (bipolar disorder, depression).
 - Increase lay person mentoring programs and support groups (Alanon, Alateen, Narcotics Anonymous, Bipolar condition, depression support groups) as well as extend community educational offerings.

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- Include clergy in the process of improving community mental health services such as serving on the Community Team.
 - Explore services and supports offered in other regional counties and assess the possibility of expanding to Island County service providers. In the Island County Mental Health contract, ask the contracted agency to act as the local clearinghouse and coordinator of mental health services. Have them work with the Mental Health Advisory Board and CHAB to increase outreach and awareness of mental health conditions and community resources.
 - Develop a volunteer-staffed information and referral hot line. Approach local services clubs to fund a local agency to organize and coordinate. Possible lead agencies include Citizens Against Domestic Abuse (CADA), Opportunity Council, or Island Mental Health.
 - Explore program options that offer youth a support system when they are in crisis or need respite.
 - Utilize and train health providers at the teen clinic to deal with adolescent mental health conditions.
 - Support and enhance agencies already providing mental health services (CADA, senior centers, Island Mental Health).
 - Seek the expertise of someone knowledgeable in geriatric psychiatry to come to Island County for consulting, case management, and education.
 - Seek North Sound Behavioral Health to come to Island County one day a month and provide medical evaluation services. Have them sponsored by pharmacies, and have local pharmacists available for consultation.
 - Work with local law enforcement, firefighters, and jail staff to provide training on mental health conditions and referral sources. Approach the regional support network to provide training and materials.



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Explore program options that offer youth a support system when they are in crisis or need respite.

What CHAB Can Do

- Develop an issue paper and newspaper article, and utilize the county fair and health events to raise community awareness of mental health issues, warning signs, and community resources.

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- Challenge local services organizations (Navy Women’s group, Retired Officers Club, VFW, American Legions, Lions, Rotary, and Soroptomists) to increase funding for community-based solutions addressing mental health issues.
 - Seek funding from service organizations, Whidbey Island Hospital Foundation and others to develop printed resources on mental health conditions and resources. Focus newspaper articles on various issues in mental health (what to look for in children and youth, medication management). Provide links and information on the hospital and health department web pages.
 - Develop a resource guide to mental health services that includes both local resources and population-specific resources (i.e. women, veterans, youth).
 - Publish (local newspaper, *Pulse*) the Island County referral list/resource guide to mental health services and resources. Work with Child Abuse Prevention Foundation to develop the resource list. Develop a “prescription pad” for Island County Mental Health Resources that can be distributed to local physician offices and other service providers. Write an article for the *Pulse* focused on self-assessment and resources for persons with bipolar disorder. Approach the telephone directories into including resource guides in the phone books. Explore other ways to “get the word out” to residents who need simple ways to access resources, some creative thoughts include placemats for senior food service customers, youth-specific outreach materials and a flyer on Island Transit.
 - Hold community grand rounds to involve more providers and various service providers in planning for better mental health services and resources. Participating members would include such groups as physicians and their staff, local clergy, and regional members of the National Alliance for the Mentally Ill, and National Depressive and Manic-Depressive Association.
 - Continue to seek outside funding sources to increase youth and family mental health programs based on model approaches. Support a continuum of programs that will help parents identify mental health and substance abuse issues and link to community resources. Examples of such programs are the Healthy Baby! Program, school health programs, and the model approach “Strengthening Families” program.



Recommended:

Develop a resource guide to mental health services that includes both local resources and population-specific resources (ie. women, veterans, youth).

Acknowledgments

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