Assessing mental health and psychological well-being within a community for policy and social service planning

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November 7, 2007



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Healthy Community Council HCC Mission

- Community-based organization composed of representatives from nearly 70 entities
- Enhancing the quality of life for the community through collaborative efforts of individuals, agencies, and institutions.



HCC Vision

- Assess community needs
- Identify areas of priority
- Help plan and coordinate initiatives
- Evaluate



Overview

• Formed HCC Assessment committee

- Established goals and objectives
- Gathered and reviewed community assessments
- Reviewed HCC 2001 Assessment
 - Integrated process (adults and seniors)



Getting Started...

- Developed assessment categories and indicators
- Obtained feedback on indicators at a HCC quarterly meeting
- Identify indicators as survey items or existing data items
- Generated assessment survey items
- Pilot tested assessment instrument

Assessment Categories

- Economic Vitality
- Community Infrastructure
- Environmental Quality
- Health and Wellness
- Social Welfare
- Education
- Youth



Methodology

- Obtained Institutional Review Board approval
- JMU Health Science students call potential participants
- Two methods
 - English-speaking population
 - Latino population



Sampling

- Purchased random sample from Survey Sampling International, Inc. (SSI)
- Used stratified random sampling techniques based on zip code
 - 1,645 packets mailed
 - 684 returned
 - Sampling error = 3.8% (Dillman)
 - Response rate = 42%



Data Analysis

Scanned surveys into SPSS 13.0
Conducted descriptive analysis

Frequencies and cross tabulations

Disseminated data to action team members to review and interpret
Hired technical writer to finalize report



Latino Assessment

- Purchased 1,000 names
- Conducted assessment via telephone
- Utilized Spanish-speaking callers (script)
- Used modified version of English-speaking assessment
- Entered and analyzed data in SPSS 14.0
- N=266 completed surveys



Demographics Adult (64 and younger) English

• Age

- < 24 years = 1%</p>
- 25-44 = 23%
- 45-64 = 46%
- 46% are male
- 78% are married
- 11% incomes below \$25,000
- 17% incomes between \$35,000-50,000



Demographics Senior (65+) English

- Age 65+ = 29% of all survey participants
- 41% are male
- 59% are married
- 36% live alone
- 16% incomes below \$15,000
- 17% incomes between \$15,000-25,000



Demographics Latino Population



- <<u>24</u> years = 15%
- 25-44 years = 68%
- 45-64 = 15%
- 65+ = 2%
- 38% are male
- 59% are married
- 34% had incomes below \$15,000
- 36% had incomes between \$15,000 and \$25,000

Serious Psychological Distress

• Depression:

- Adults = 11.3% compared to 6.6% in 2001; significantly higher that 2006 NHIS (2.9%)
- Seniors = 3% compared to 4.4% in 2001; slightly higher than 2006 NIHS (2.3%)
- Latinos = 24.7% compared to 17 in 2001



Treatment for Psychological Distress

- Medication
 - Adults = 15%
 - Seniors = 14%
- Counseling
 - Adults = 12%
 - Seniors = 5%



Substance Abuse

- Did not assess drug usage
- Acute drinking
 - Adults = 19%
 - Seniors = 5%
 - Four or more for females or five or more males
- Alcohol consumption
 - Adults = 57%
 - Seniors = 32% compared to 11% in 2001
 - ***Wording of question was misleading



Assistance with Substance Abuse

Assistance with alcohol abuse

- Adults = 2%
- Seniors = 1%

Assistance with drug abuse

- Adults = 2%
- Seniors = 0%



Effect on self and/or family

Alcohol

- Adults = 8%
- Seniors = 5%

Drug

- Adults = 6%
- Seniors = 6%



Support Systems

 Adults • Family = 71% • Friends = 53%• Church = 38% Seniors • Family = 69%• Church = 37%• Doctor = 31%



Care Giving

- 22% of all respondents are caregivers
- Highest among individuals 45-54 years
- 31% of 65-84 years old
- 92% receive no assistance
- 35% disruption in employment activities
- 62% had to make an adjustment to work life
- 16% missed 5-10 hours/week of work

Conclusions

More emphasis on...

- Mental health care within the community especially for the Latino population
- Substance abuse
- Support for caregivers



Outcomes

- Grant dollars brought into the community: \$8,754,660
- Grant dollars from local sources: \$2,631,177
- Total of combined dollars:
 - \$11,385,837
- Community Resource Center
- Generations Crossing



Limitations

- Use of landlines (cellular telephones)
- Access to those with low literacy levels, mobility issues, and vision problems
- Longitudinal limitations
 - Changed wording of certain survey assessment questions



HCC Assessment Subcommittee

- Andree Gitchell
- Betsy Hay
- Todd Hedinger
- Jane Hubbell
- Nancy Lantz
- Susannah Lepley
- Kristi Lewis
- Stacey Morris

- Ann Myers
- Elizabeth Phelps
- David Sallee
- John Taylor
- Judith Trumbo
- Marilyn Turner
- John Whitfield



Questions?

Please visit our web site at www.healthycommunitycouncil.org

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