

A Surge in Mental Illness Across the Country

Mental Health Study and Outcomes 2023

01

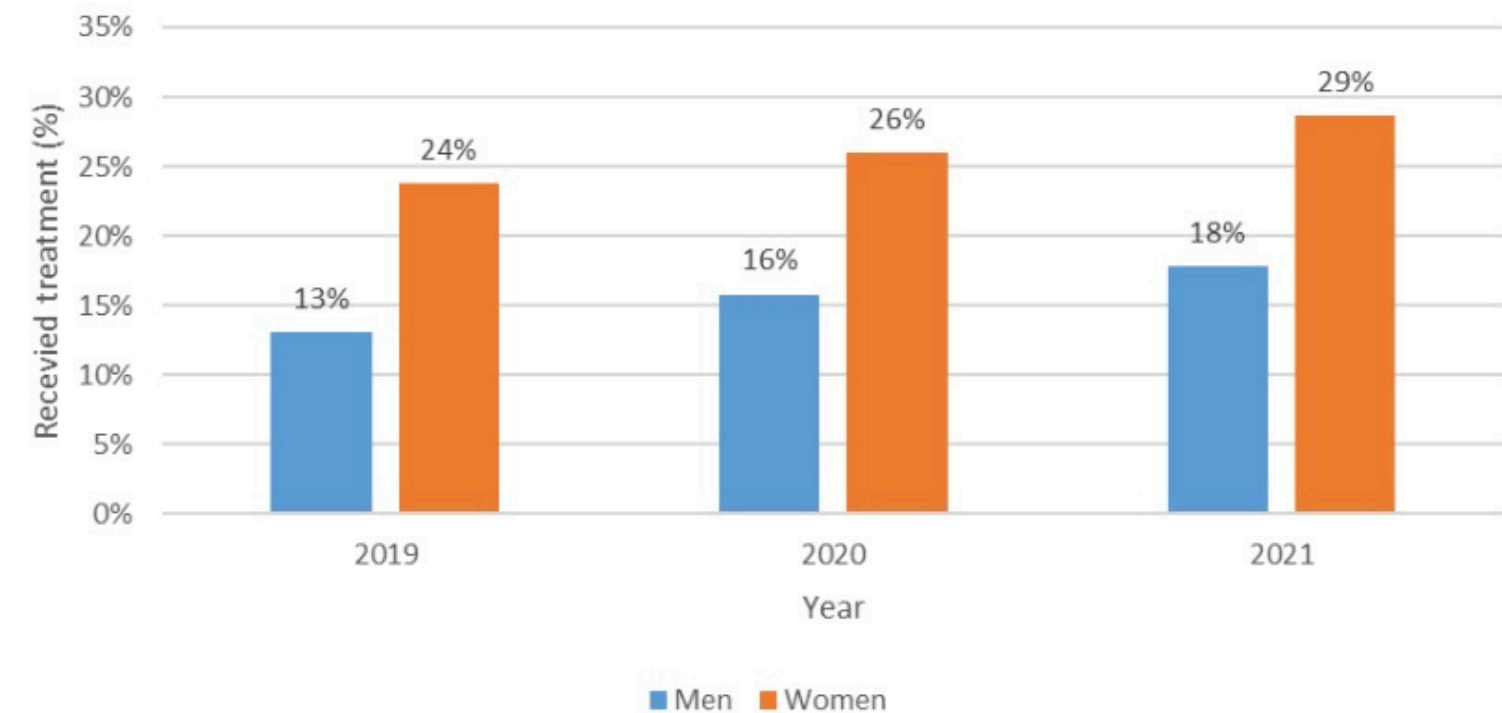
Unseen Epidemic: A Surge in Mental Illness Across the Country

October 16, 2024

By Rebecca M.S. Busch, President and CEO Medical Business Associates, Inc., Peter Elias, Senior Analyst, and Ishwarya Sreedharan, Senior Analyst

The number of Americans who reported having Any Mental Illness (AMI) has increased over the past several years, from 18.57% in 2020 to 23.08% in 2024. This can be understood as an increase in the population of adults with AMI by 13,226,000.

Adults Aged 18-44 Who Received Any Mental health Treatment



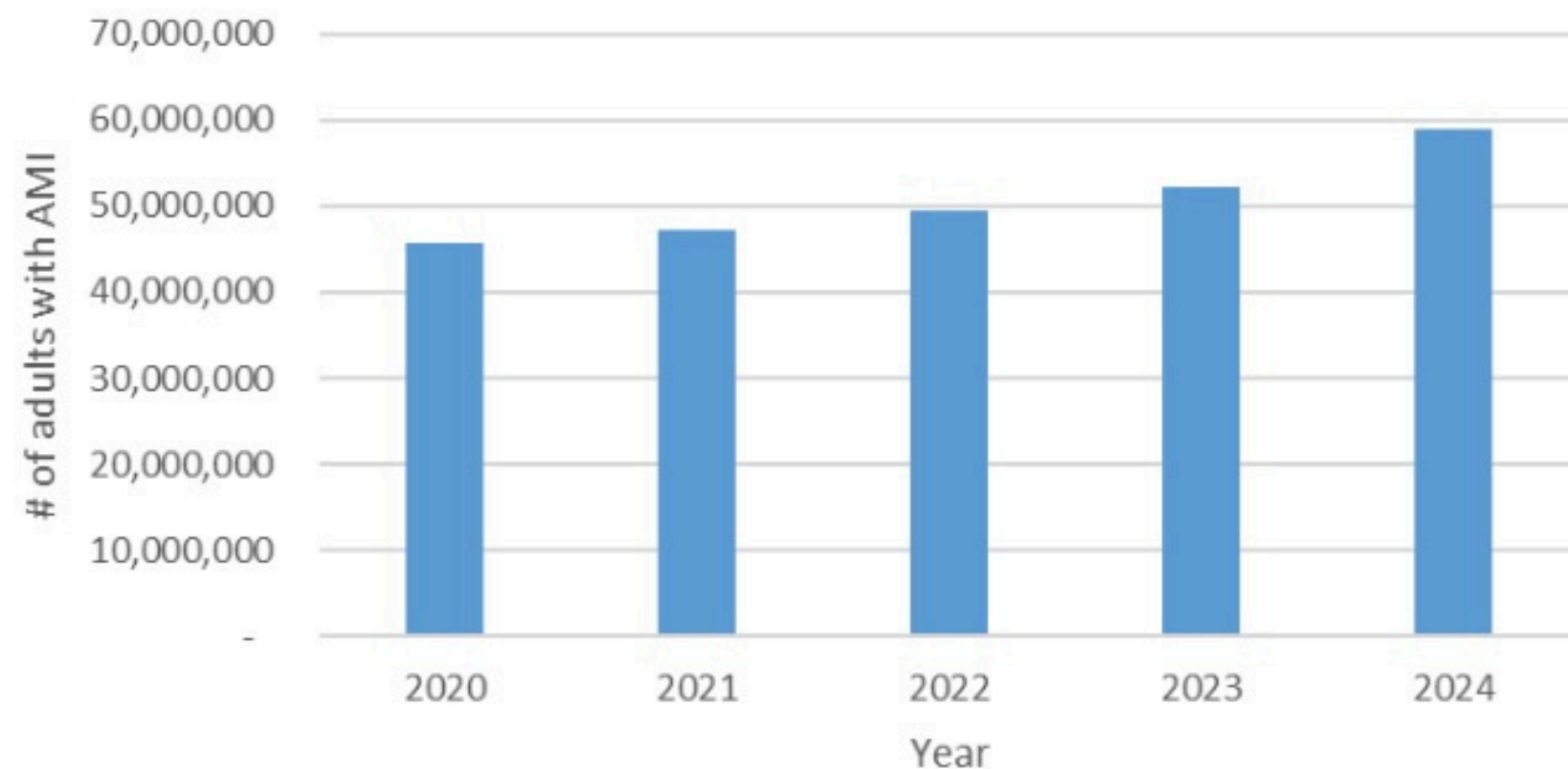
Data per CDC's Mental Health Treatment Among Adults Aged 18-44: United States, 2019-2021 (2022)

https://www.cdc.gov/nchs/products/databriefs/db444.htm#section_2

<https://www.mhanational.org/issues/2024/mental-health-america-prevalence-data> - data included is also from prior years, published by the same organization (Mental Health America)

Contributing to these trends are the effects of the Covid-19 pandemic. This has been thoroughly reported on and researched, and for good reason; the crisis resulted in considerable economic and pedagogical uncertainty, isolation, and a massive number of deaths amongst families and friends. However, these trends in mental health were still present even before the Covid-19 pandemic arrived at the U.S. From 1999-2016, the suicide rate increased significantly across most states, including over 30% increases in 25 states. Over the same time period, there was increasing utilization of mental healthcare treatment, with a very big jump in 2017-2018.

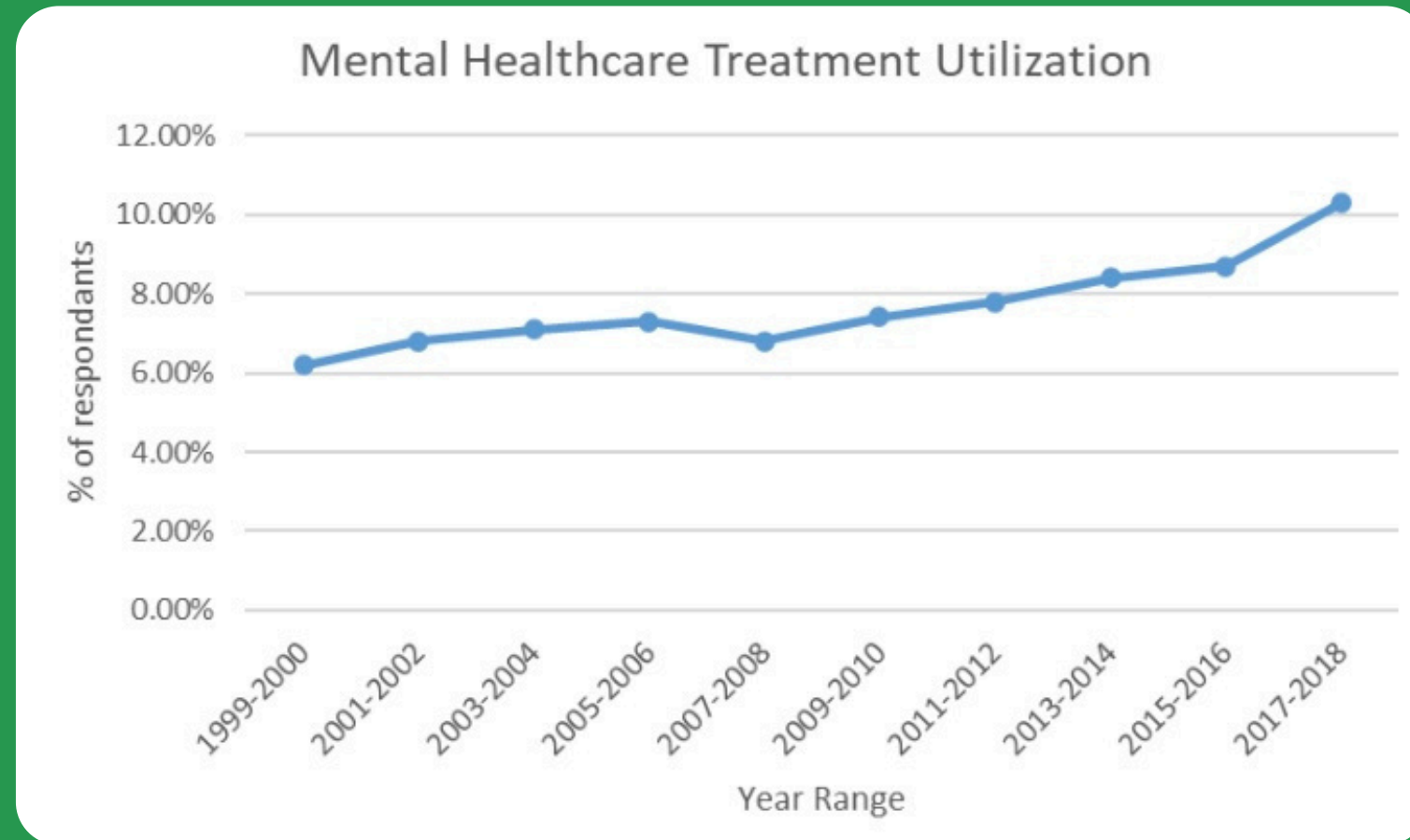
Incidence of Adults with Any Mental Illness (AMI)



Data per MHA's Prevalence of Mental Illness reports from 2020-2024



Case Study Harmony Hills



<https://www.nimh.nih.gov/health/statistics/mental-illness>

https://www.jointcommission.org/what-we-offer/accreditation/health-care-settings/behavioral-health-care/prepare/snapshot-of-survey-day/#dfa4fa89527145a988ff5cfabagaf206_6e04fbb10aaf4d138193fcc0577c7b12

Indeed, mental illness has become alarmingly common in the United States: “It is estimated that more than one in five U.S. adults live with a mental illness (57.8 million in 2021).” This necessitates an increase in both the quantity and quality of related care. By using an example of a mental health facility, we can understand how behavioral health should be approached in an institutional context, which can provide lessons for both new and old facilities.

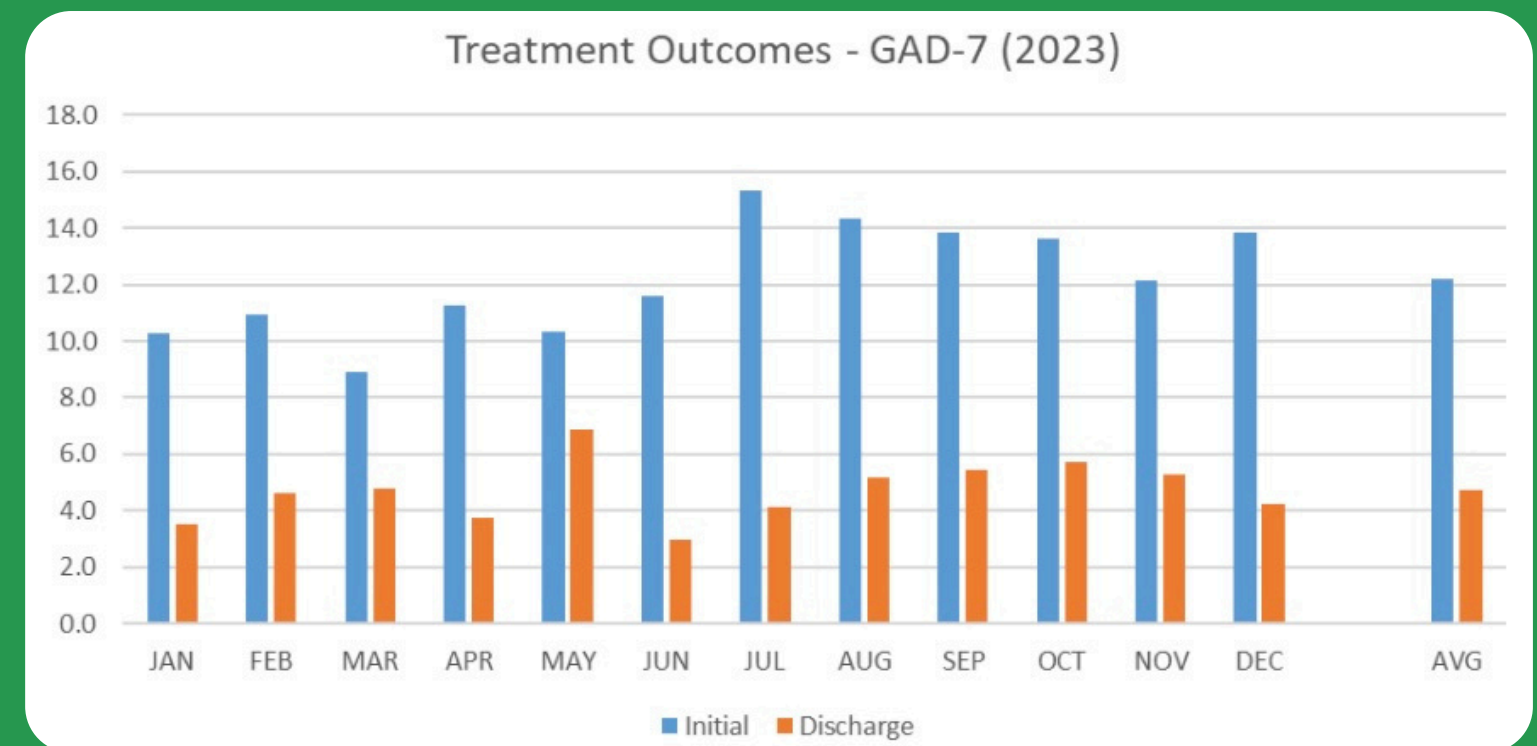
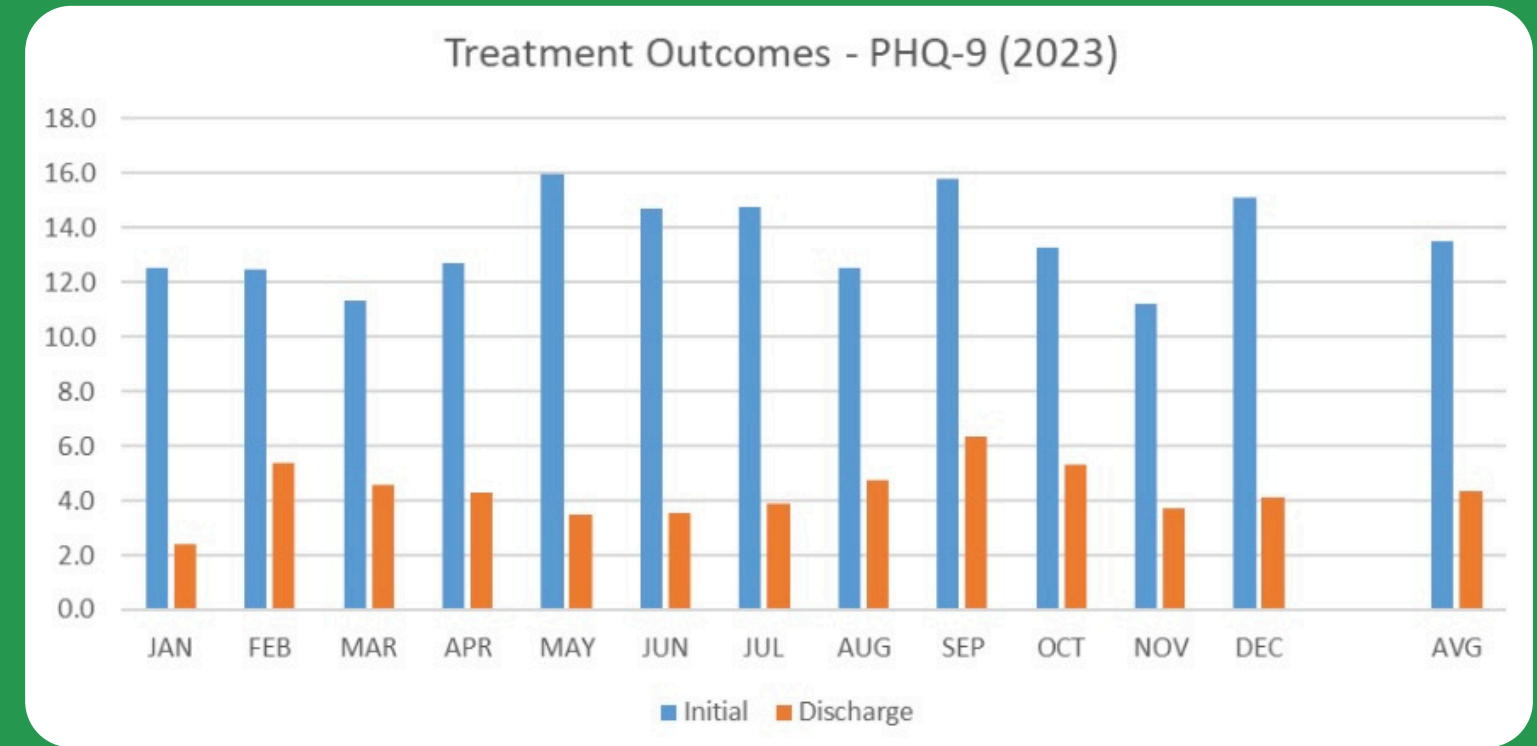
Harmony Hills, a behavioral health facility located in Altoona, Florida, provides a great case study. It also serves well in demonstrating some of the hallmarks of a quality provider in this line of care.

Accreditation from The Joint Commission (TJC), while not mandatory, provides a comprehensive set of guidelines that every facility, behavioral health-oriented or otherwise, should follow. These standards cover every aspect of a facility, such as safety protocols, organizational and operational structure, information management (such as patient outcomes, medical records, etc.), treatment modalities, and even data collection/management practices among many other aspects. Medical Business Associates was witness to the high degree of information management at Harmony Hills when they transmitted very well organized data for the purpose of this white paper. Effective data management is a pillar of the JCAHO evaluation.



05

The data that Medical Business Associates received included PHQ-9 and GAD-7 results. The PHQ-9, or Patient Health Questionnaire (containing nine items), helps diagnose and assess the severity of depression and is based on DSM-IV depression criteria. The GAD-7, or Generalized Anxiety Disorder Questionnaire (containing seven items), investigates how often the patient has been bothered by seven different symptoms of anxiety during the last two weeks. These tools are among those recommended by the JCAHO for patient outcomes management, which is one of the requirements set forth by their standards. Using tools like the PHQ-9 and the GAD-7 allows a facility to measure the quality of their mental health treatments in a systematic, quantitative, and reliable fashion. Below are examples of the kinds of analysis this data permits:





**HARMONY
HILLS**

08

<i>GAD-7 (2023)</i>	<i>% Decrease in Score (from Admit to Discharge)</i>
JAN	66%
FEB	58%
MAR	46%
APR	67%
MAY	33%
JUN	74%
JUL	73%
AUG	64%
SEP	61%
OCT	58%
NOV	57%
DEC	70%
AVG	61%

<i>PHQ9 (2023)</i>	<i>% Decrease in Score (from Admit to Discharge)</i>
JAN	81%
FEB	57%
MAR	59%
APR	66%
MAY	78%
JUN	76%
JUL	73%
AUG	62%
SEP	60%
OCT	60%
NOV	67%
DEC	73%
AVG	68%

Based on these measurements, the success of Harmony Hills is easily visualized, revealing a remarkable improvement in patient outcomes as a direct result of their treatments. Over the course of 2023, Harmony Hills experienced an average decrease in PHQ-9 scores, from admit to discharge, of 61%, and an average decrease in GAD-7 scores of 68% for the whole year. In January of 2023, the average drop in PHQ-9 scores between admit and discharge was 81%; and in July, the average drop in GAD-7 scores was 74%.

Increasingly granular analyses can be conducted using different tools to hone in on where any problem areas may be. Again, the JCAHO provides a list of tools that can be used to further assess a facility. Aside from being a requirement for JCAHO certification, data collection and analysis is invaluable for both maintaining and increasing success; indeed, more often than not, the right information leads to the right outcome.

The inclusion of family during treatment is another important, yet perhaps underappreciated, aspect of a successful behavioral health facility. Research shows that family engagement can lead to better patient outcomes, including “fewer relapses, longer duration between relapses, reduced hospital admissions, shorter inpatient stays, and improved compliance to medication and treatment plans.” Unfortunately, engaging families in mental health treatments is not straightforward, and often difficult to implement. Patients may have different reasons for keeping their family out of their treatment, such as intolerance (real or perceived) from the family, issues of confidentiality, and the desire to not burden others with their condition. Similarly, the families of patients may decline to be involved because of the perceived burden of acting as a caregiver, avoiding blame for the patient’s problems, or simply not understanding the nature of mental illnesses.

Harmony Hills is keenly aware of these concerns, and takes steps to mitigate them and foster a culture of family involvement. This includes the implementation of family therapy as a treatment modality, providing psychoeducational opportunities, and even reaching out remotely using virtual family therapy sessions. While involving families in a patient’s treatment is an ongoing process, Harmony Hills demonstrates the value of putting in the work to foster an environment where family is an important and crucial part of the healing process.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8801858/>



Closing Remarks

Recent trends in mental illness warrants an increase in the quantity and quality of mental healthcare institutions. Data-driven decision-making is an important aspect of improving patient outcomes, as well as following high quality standards and guidelines that define the space. Harmony Hills provides a great example of what mental health facilities can and should strive for, demonstrating important practices that are backed up by scientific literature and professional recommendation.

Harmony Hills is located at 18121 Boys Ranch Road, Altoona, Florida, and can be reached at (855) 494-0357. If you or anyone you know is having thoughts and/or feelings of suicide, please call the Suicide & Crisis Lifeline by dialing 988.