Healthy People 2020 Summary of Objectives

Mental Health and Mental Disorders

Number Objective Short Title

Mental Health Status Improvement

- MHMD-1 Suicide
- MHMD–2 Adolescent suicide attempts
- MNMD–3 Eating disorders
- MHMD–4 Major depressive episodes

Treatment Expansion

- MHMD–5 Mental health treatment provided in primary care facilities
- MHMD–6 Treatment for children with mental health problems
- MHMD–7 Juvenile justice facility screening
- MHMD–8 Employment of persons with serious mental illness
- MHMD–9 Treatment of adults with mental health disorders
- MHMD–10 Treatment for co-occurring substance abuse and mental disorders
- MHMD–11 Depression screening by primary care providers
- MHMD–12 Receipt of mental health services among homeless adults

Topic Area: Mental Health and Mental Disorders

Mental Health Status Improvement

MHMD-1: Reduce the suicide rate.

Target: 10.2 suicides per 100,000 population.

Baseline: 11.3 suicides per 100,000 population occurred in 2007.

Target setting method: 10 percent improvement.

Data source: National Vital Statistics System–Mortality (NVSS–M), CDC, NCHS.

MHMD-2: Reduce suicide attempts by adolescents.

Target: 1.7 suicide attempts per 100 population.

Baseline: 1.9 suicide attempts per 100 population occurred in 2009.

Target setting method: 10 percent improvement.

Data source: Youth Risk Behavior Surveillance System (YRBSS), CDC, NCCHPHP.

MHMD–3: Reduce the proportion of adolescents who engage in disordered eating behaviors in an attempt to control their weight.

Target: 12.9 percent.

Baseline: 14.3 percent of adolescents engaged in disordered eating behaviors in an attempt to control their weight in 2009.

Target setting method: 10 percent improvement.

Data source: Youth Risk Behavior Surveillance System (YRBSS), CDC, NCCDPHP.

MHMD–4: Reduce the proportion of persons who experience major depressive episodes (MDEs).

MHMD–4.1 Reduce the proportion of adolescents aged 12 to 17 years who experience major depressive episodes (MDEs).

Target: 7.4 percent.

Baseline: 8.3 percent of adolescents aged 12 to 17 years experienced a major depressive episode in 2008.

Target setting method: 10 percent improvement.

Data source: National Survey on Drug Use and Health (NSDUH), SAMHSA.

MHMD–4.2 Reduce the proportion of adults aged 18 years and older who experience major depressive episodes (MDEs).

Target: 6.1 percent.

Baseline: 6.8 percent of adults aged 18 years and older experienced a major depressive episode in 2008.

Target setting method: 10 percent improvement.

Data source: National Survey on Drug Use and Health (NSDUH), SAMHSA.

Treatment Expansion

MHMD–5: Increase the proportion of primary care facilities that provide mental health treatment onsite or by paid referral.

Target: 87 percent.

Baseline: 79 percent of primary care facilities provided mental health treatment onsite or by paid referral in 2006.

Target setting method: 10 percent improvement.

Data source: Uniform Data System (UDS), HRSA.

MHMD–6: Increase the proportion of children with mental health problems who receive treatment.

Target: 75.8 percent.

Baseline: 68.9 percent of children with mental health problems received treatment in 2008.

Target setting method: 10 percent improvement.

Data source: National Health Interview Survey (NHIS), CDC, NCHS.

MHMD–7: Increase the proportion of juvenile residential facilities that screen admissions for mental health problems.

Target: 64 percent.

Baseline: 58 percent of juvenile residential facilities screened admissions for mental health problems in 2006.

Target setting method: 10 percent improvement.

Data source: Juvenile Residential Facilities Census (JFRC), DOJ, OJJDP.

MHMD–8: Increase the proportion of persons with serious mental illness (SMI) who are employed.

Target: 64.4 percent.

Baseline: 58.5 percent of persons with serious mental illness (SMI) were employed in 2008.

Target setting method: 10 percent improvement.

Data source: National Survey on Drug Use and Health (NSDUH), SAMHSA.

MHMD-9: Increase the proportion of adults with mental disorders who receive treatment.

MHMD–9.1 Increase the proportion of adults aged 18 years and older with serious mental illness (SMI) who receive treatment.

Target: 64.6 percent.

Baseline: 58.7 percent of adults aged 18 years and older with serious mental illness (SMI) received treatment in 2008.

Target setting method: 10 percent Improvement.

Data source: National Survey on Drug Use and Health (NSDUH), SAMHSA.

MHMD–9.2 Increase the proportion of adults aged 18 years and older with major depressive episodes (MDEs) who receive treatment.

Target: 75.1 percent.

Baseline: 68.3 percent of adults aged 18 years and older with major depressive episodes received treatment in 2008.

Target setting method: 10 percent improvement.

Data source: National Survey on Drug Use and Health (NSDUH), SAMHSA.

MHMD–10: Increase the proportion of persons with co-occurring substance abuse and mental disorders who receive treatment for both disorders.

Target: 3.3 percent.

Baseline: 3.0 percent of persons with co-occurring substance abuse and mental disorders received treatment for both disorders in 2008.

Target setting method: 10 percent Improvement.

Data source: National Survey on Drug Use and Health (NSDUH), SAMHSA.

MHMD–11: Increase depression screening by primary care providers.

MHMD–11.1 Increase the proportion of primary care physicians who screen adults aged 19 years and older for depression during office visits.

Target: 2.4 percent.

Baseline: 2.2 percent of primary care physicians screened adults aged 19 years and older for depression during office visits in 2007.

Target setting method: 10 percent improvement.

Data source: National Ambulatory Medical Care Survey (NAMCS), CDC, NCHS.

MHMD–11.2 Increase the proportion of primary care physicians who screen youth aged 12 to 18 years for depression during office visits.

Target: 2.3 percent.

Baseline: 2.1 percent of primary care physicians screened ^ [* @ & ^å/FGAo FÌ Á ^ & A[/ Å epression during office visits in 2005–07.

Target setting method: 10 percent improvement.

Data source: National Ambulatory Medical Care Survey (NAMCS), CDC, NCHS.

MHMD–12: Increase the proportion of homeless adults with mental health problems who receive mental health services.

Target: 41 percent.

Baseline: 37 percent of homeless adults with mental health problems received mental health services in 2006.

Target setting method: 10 percent improvement.

Data source: Projects for Assistance in Transition from Homelessness (PATH), SAMHSA, CMHS.