

KEY INDICATOR

The Key Indicator for Mental Health is suicide rate

GOAL

Reduce the suicide rate from its current rate of 4.8 persons per 100,000 population



“Suicide is a lead indicator of the prevalence of mental health problems.”

— Source: <http://www.doh.state.fl.us/family/childhealth/childreport/hi/hi9/cuicide.html>

Current Status

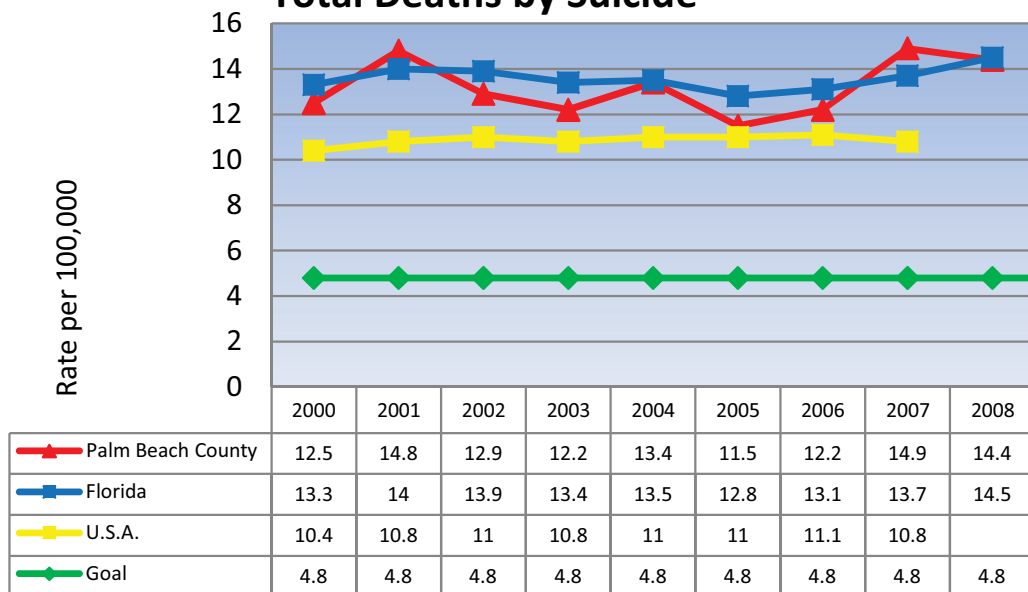
There are approximately three (3) suicidal deaths per week among residents in Palm Beach County. In 2009 there were 189 deaths, which is 15.75 deaths per 100,000 residents. The previous year there were 188. This is higher than the state average of 14.5 individuals per 100,000.

Of importance to consider when discussing mental health services is the distinction between mental illness and mental health. An individual may have mental health issues without being mentally ill. The inability to live life to the fullest because of stress resulting from illness, economic concerns, caring for ageing parents or ill children and relationship conflicts does not make a person mentally ill. Mental health and mental illness are often used interchangeably but really refer to two different states of wellness. Mental health is a state of successful performance of mental function, resulting in productive activities, fulfilling relationships with other people and the ability to adapt to change and to cope with adversity. Mental illness refers collectively to all diagnosable mental disorders. (Surgeon General)

In Palm Beach County, as is true nationally, more than one (1) in four (4) people (26%) have some form of mental illness, cutting across socio-economic boundaries. As Table #16 indicates, one (1) in four (4) adults in Palm Beach County suffers from a diagnosable mental disorder in a given year (more than 261,000 people). Nearly half of those suffer from two (2) or more disorders simultaneously.

Table #16

Total Deaths by Suicide



Current Status (Continued)

While serious mental illness strikes a smaller percent of people (6%), we still have close to 60,000 people in Palm Beach County with disorder such as schizophrenia, bipolar disorder, and major depressive disorder.

Current public funding (state and county) supports services for youth and adults with diagnosable mental health/illness issues. Persons accessing these services usually are required to pass a means test, and services are provided on a sliding scale. When a person has a diagnosable mental illness and lacks the ability to pay services, may be provided. Public funding is also used to provide mental health services for those in the correctional system.

On the other hand, quality of life issues are either covered by private insurance or self-pay. Public dollars allocated to these services are limited and while mental health services are supposed to be provided by private insurers in an equitable reimbursement with medical services, it will not be until 2014 that insurers will be prohibited from providing such coverage for previously existing conditions.

Mental health services are geographically dispersed throughout the county (central/north, central/south and western communities). Oakwood Center of the Palm Beaches and South County Mental Health Center have been the only two public Baker Act facilities in the county; however, St. Mary's Hospital and Columbia hospital have been added to the system.

Palm Beach County has the second largest number of returning veterans in the state. Through community and agency collaboration, services are being identified to support the needs of the veterans and their families, to address post traumatic stress disorder (PTSD) and other stress issues experienced.



Given the current economic situation, all service providers are experiencing an increase in requests for services to address multiple issues. A new program has been developed for residents who are experiencing economic crisis.

As with all services, there are more demands for service than the system can provide, especially to deal with mental health issues. Community awareness and support for the prevention of mental health issues and co-occurring disorders is a continuing focus for all components of the system of care.

The statistics for suicide indicate that:

- In 2008, Palm Beach County had a suicide rate of 14.4 individuals per 100,000 population.
- In 2008, the State of Florida had a suicide rate of 14.5 individuals per 100,000 population.
- Total yearly deaths from suicide in Palm Beach County increased from 12.5 in 2000 to 14.4 in 2008 (per 100,000 population). An increase of one tenth of a percent (.1) (per 100,000 populations).
- Total yearly deaths from suicide in the State of Florida increased from 13.3 in 2000 to 14.5 in 2008 (per 100,000 population). An increase of 1.2 (per 100,000 population).
- Total yearly deaths from suicide in the nation increased from 10.4 in 2000 to 10.5 in 2007 (per 100,000 population). An increase of one tenth of a percent (.1) (per 100,000 population).
- Palm Beach County has the second largest population of returning veterans in the State of Florida, and returning veterans have a suicide rate higher than the population at large.
- Based on 2008 suicide data, Palm Beach County is below the State of Florida suicide rate by one tenth of a percent (.1) (per 100,000 population)

Current and Future Planning Efforts

The public funders are collaborating to expand the expertise of the provider agencies to address the complex issues in the service delivery system. Providers are being trained in co-occurring disorders, trauma informed care, client-directed outcome informed practice and evidence based practice. In addition, the system of care is expanding services to address the unique needs of the homeless population and the returning veterans from Iraq and Afghanistan. The service providers, education and law enforcement are collaborating to develop a matrix of services that include prevention and intervention services for youth to reduce the impact of mental health issues on the adult population.

While not included in this category the needs of the aging population and those who serve as caretakers are an increasingly growing underserved population.

- The Circuit 15 Substance Abuse and Mental Health Program (SABMH) office supports planning and funding efforts for community providers and partners to address the needs of both youth and adults.
- The Circuit 15 SAMH office collaborates with the Department of Juvenile Justice and the Palm beach Sheriff's Office to provide services to both youth and adults involved with either system.
- The Criminal Justice Commission is spearheading an interagency planning group to develop strategies to increase the outcomes for youth and adults touched by the criminal justice system.
- Community providers conduct community awareness meetings and distribute information on signs, symptoms and resources to address mental health issues.
- Palm Beach County provides support to 211 to provide information and referral for all country residents.
- Strengthen the capacity of the community to plan strategically for the current and future needs of an integrated health and behavioral health system.
- Build toward a system that provides access to needed services as close to where they are needed as possible.

- De-stigmatize services for mental and behavioral health by integrating them into normalized settings such as primary care healthcare settings.
- Take advantage of increasingly evidence-based interventions such as peer mentoring and other supports that increase resilience and adherence to treatment interventions.
- Increase the number of people who are diverted from the criminal justice system into appropriate mental health treatment and support systems.



Current and Future Planning Efforts (continued)

Mental health is an integral part of the total health and well-being of Palm Beach County residents. The suicide rate is not an indicator of the effectiveness of mental health treatment, because thankfully, suicide occurs too infrequently in the population to be a meaningful measure of system success. All providers already have a goal of zero suicides in the populations they treat. Most people with mental illness are not suicidal.

Other more meaningful indicators of the effectiveness of mental health would include improved health and well-being as reported by people in treatment, reduced use of hospitals by people in treatment, and improved overall health status of people in the community. Our community should begin to collect data to measure these and other indicators of well-being.

The suicide rate is highlighted here because it can be tracked over time and can demonstrate whether people are receiving the kinds of care that will prevent the worst mental health crisis: an untimely death. Suicide can be averted with the right kinds of mental health services and care.

Suicide is most frequently a direct result of major depression, which is a treatable disease of the brain. Depression is just one of the many serious mental health disorders caused by organic brain diseases including schizophrenia, bipolar disorder, anxiety and many more. These diseases are sometimes genetic and sometimes situational. Some are chronic and need treatment and medication while other mental health disorders are situational and are related to something that has occurred in the environment. Some examples of situational mental health disorders are depression or anxiety related to the grief of losing a loved one, a divorce, a job or other catastrophic occurrence. Situational mental health problems can be very serious but with the proper care, they can be controlled.

Without the proper care, many with mental health disorders can end up in the hospital, in jail or worse. In order to avoid the high cost to our community for these institutions, our public funding goes to treatment and preventative services. With the appropriate supports in place, people with mental illness can lead productive and rewarding lives.



Table #17

	Percent	Number of people 18 and older
Mental Disorder	26.20%	261,000
2 or more disorders	45% of above	117,454
Serious Mental Illness	6%	59,773
Mood Disorder	9.50%	94,640
Bipolar	2.60%	25,902
Schizophrenia	1.10%	10,958

Source: NIMH and U.S. Census

Funding of Mental Health Services

The charts below indicate the level of funding by Palm Beach County and the District IX Substance Abuse and Mental Health Office of the State of Florida. Included in the category “Treatment” are services including: inpatient treatment, outpatient treatment, psychiatric and medical services and individual and group counseling for children, adolescents and adults.

The category “Baker Act/Crisis Stabilization” includes services for those in crisis (danger to self and others) and the immediate services required to address the crisis. The mobile crisis team staff sees a crisis individual in the home, school or community.

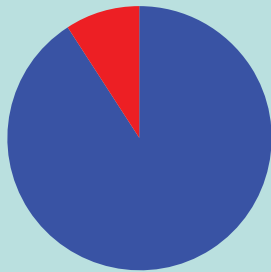
Major Disparities

- A review of the data reveals that Palm Beach County’s suicide rate is above the state and national average.
- More resources are committed to treatment of mental health and mental illness than to prevention for youth and adults.
- The issues of returning veterans need special levels of funding for both the them and their families, including children.
- Holistic planning and program implementation needs to be expanded to include all components of the system of care.



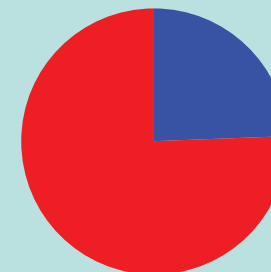
Chart IX

Treatment (Inpatient and Outpatient)



■ State
■ County

Baker Act/Crisis Stabilization



■ State
■ County

	State	County	Total
Treatment (Inpatient and Outpatient)	\$14,378,546	\$1,452,553	\$15,831,099
Baker Act/Crisis/Emergency Stabilization	\$4,379,670	\$1,770,036	\$6,149,707