

Use of Mental Health Care Among Youths in 1997 and 2002

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Many youths have mental health problems that interfere with normal development and functioning, although it is widely believed that only a minority of vulnerable youths receive mental health services. Five years ago, the Surgeon General warned that the nation is facing a crisis in mental health care for youths (1). Has access to mental health care deteriorated? Or has increasing awareness of mental health issues, mental health parity legislation, and expanded health insurance programs for youths raised youths' use of mental health care?

This column examines mental health service use among youths in 1997 and 2002 for 13 U.S. states and for the nation. The data came from the National Survey of America's Families, a nationally representative survey of youths, adults younger than 65 years, and their families that focused on 13 states, with smaller samples for the other states. We previously reported results for 1997 (N=21,824) and 1999 (N=23,423) (2). As in previous years, the 2002 survey asked the caregivers of youths aged six through 17 years (N=22,064) the number of times that the youth received mental health services (treatment for substance abuse or smoking cessation were excluded) from a doctor, mental health counselor, or therapist during the year before the interview. All analyses corrected for the complex survey design of

the data, and the presented data are weighted estimates.

Figure 1 shows that the percentage of youths who received any mental health care nationwide has increased substantially, from 7.1 percent in 1997 to 8.9 percent in 2002, or by 25 percent ($p < .01$). This change occurred even though the average need for mental health services was 7.7 percent in both 1997 and 2002. Service use rose in all of the 13 states surveyed, although some changes were small and changes in eight of the states were not statistically significant.

Despite the overall increase in service use, large geographic variation continues to exist. Aside from New Jersey, the states with the smallest increase in service use were those with levels of service use well below the national average in 1997,

such as Mississippi and Alabama. In contrast, Massachusetts, the state with the highest level of service use in 1997, had one of the largest increases in 2002.

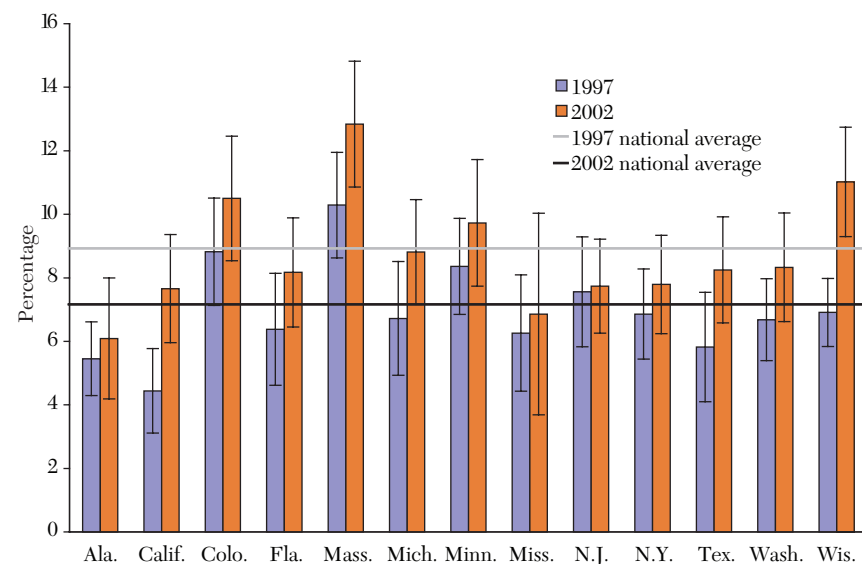
Increased use of mental health services among youths may be a promising trend, but it does not guarantee that the increase actually benefited the youths who were most in need. Future research should seek to identify whether these services are reaching those youths. ♦

References

1. Report of the Surgeon General's Conference on Children's Mental Health: A National Action Agenda. Washington, DC, Department of Health and Human Services, 2000.
2. Sturm R, Ringel JS, Andreyeva T: Geographic disparities in children's mental health care. *Pediatrics* 112:e308–e315, 2003

Figure 1

Percentage of youths aged six through 17 years who received any mental health services in 1997 and 2002, in 13 states and nationally^a



^a Error bars indicate 95 percent confidence intervals.

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