

Data in the 244-page *National Healthcare Disparities Report 2007* indicate that there has been little progress in reducing disparities overall since the first report in the series five years ago. For black, Hispanic American, American Indian and Alaska Native, Asian, and poor populations, the number of measures for which disparities are significantly worse or remain unchanged is higher than the number for which disparities are significantly better. The report cites lack of insurance as a major barrier to reducing disparities.

On measures of treatment of illicit drug use, the proportion of persons age 12 and older who needed such treatment and received it at a specialty facility in the past year was significantly higher for black than for white Americans (24.7% compared with 15.6%) and for persons with less than a high school education than for persons with any college education (22.2% compared with 14.1%). The Healthy People 2010 target is for 24% of persons age 12 and older who need such treatment to receive it. In 2005, as in 2004, this goal was met only for black Americans.

The proportion of adults with a major depressive episode who received depression treatment in the past year was significantly lower for black than for white Americans (56.4% compared with 67.2%) and lower for Hispanic Americans than for non-Hispanic whites (50.2% compared with 69.8%). The proportion receiving treatment was also significantly lower for people with less than a high school education than for people with some college education (59.5% compared with 68.0%).

Both reports are available on the AHRQ Web site at www.ahrq.gov/qual/qdr07.htm.

NEWS BRIEFS

Mental health first-aid training for laypersons: The nation's first program to train the public about how to help someone experiencing a mental health crisis is being brought

to the United States from Australia by the National Council for Community Behavioral Healthcare. The 12-hour certification course is designed to give laypersons the tools to respond to psychiatric emergencies until professional help arrives and to improve people's mental health literacy. The first training was held in February in Palm Springs, California. It certified mental health professionals and administrators from six states to become first-aid trainers. These trainers will then conduct mental health first-aid certification courses in May in their respective states. The states include Illinois, Iowa, Colorado, Rhode Island, Kansas, and Florida. "This program has the potential to become as common as CPR in the near future and will help people better understand mental illness," said Linda Rosenberg, president and chief executive officer of the National Council. More information is available on the organization's Web site at www.thenationalcouncil.org.

Give an Hour program seeks volunteers: Give an Hour is a nonprofit organization whose mission is to develop a national network of volunteers capable of responding to both acute and chronic conditions that may arise in the United States. The organization's first goal is to create a network of mental health professionals to give an hour of their time each week to provide free services to U.S. military personnel and families affected by the current conflicts in Afghanistan and Iraq. The program was created to fill gaps in mental health care provided by the armed services and to be an additional resource for returning troops, some of whom may prefer to obtain professional help outside the military. More than 1,000 volunteers have signed up, including psychologists, social workers, psychiatrists, marital therapists, and pastoral counselors. The American Psychiatric Association is supporting the Give an Hour program by asking its members to volunteer and by helping it raise funds to produce public service announcements. The program's administrators hope that the number will

eventually reach 40,000, or about 10% of all U.S. mental health providers. More information is available at www.giveanhour.org.

New Kaiser Web feature illuminates policy issues: A newly introduced section of the Kaiser Foundation Web site—Pulling It Together—collects information, data analyses, and ideas from a wide range of areas covered in the foundation's work to help clarify the larger picture and illuminate critical health policy issues. The first installment in the series, by Drew Altman, Ph.D., Kaiser president and chief executive officer, is "Separating the Forest from the Trees in the Health Reform Debate," which teases out the fundamental differences between Democrats and Republicans and liberals and conservatives on health care reform. Upcoming installments will address the critical path to health reform, the states and health care reform, and the underlying differences between Democratic, Republican, and Independent voters on health care. The Kaiser site also features the latest results from an ongoing, pre-election poll of representative American voters about their health care concerns. These resources are available at www.kff.org.

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