

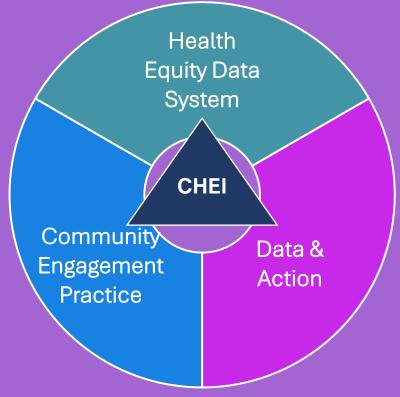
## MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH

# Community Health Equity Initiative (CHEI)

Community Health Equity Survey 2023 Mental Health Spotlight

Part 4: Drivers of Mental Health Inequities

Health Care Access and Mental Health



#### 2023 CHES MENTAL HEALTH SPOTLIGHT



#### Part 4: Drivers of Mental Health Inequities

Part 4 of the 2023 CHES Mental Health Spotlight showcases findings from the 2023 CHES that connect data on mental health and various drivers of health inequities.

This slide deck is meant to be viewed after you have read through Parts 1 through 3 of the Mental Health Spotlight. To access the entire spotlight and the full mental health report, please visit the 2023 CHES Mental Health Spotlight page on <a href="https://www.mass.gov/CHEI">www.mass.gov/CHEI</a>.

Part 1: Community Health Equity Initiative Overview and Racial Justice Framing

Part 2: Mental Health in Massachusetts: Equity Framing and Data Overview

Part 3: Inequities in Mental Health

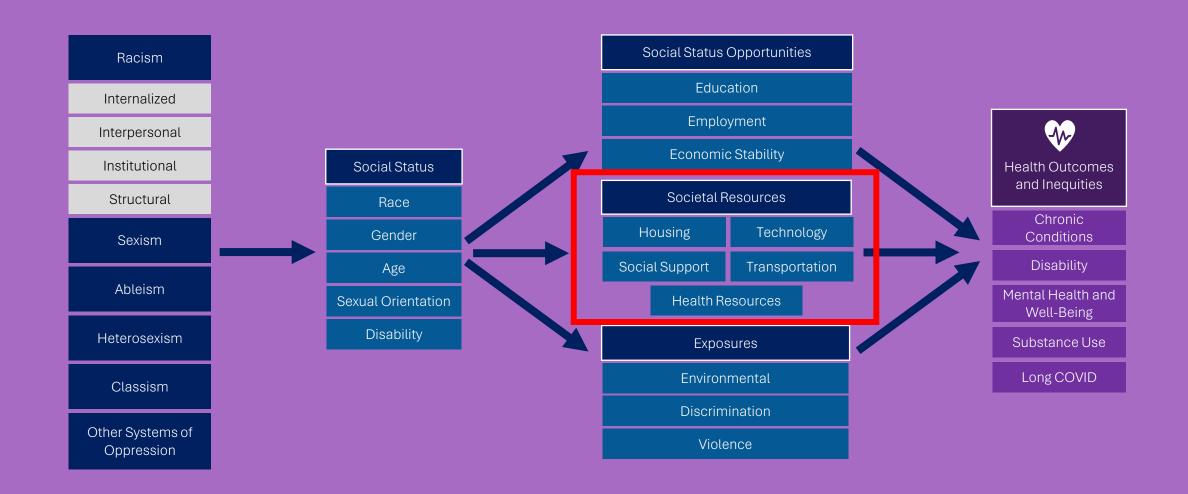
Part 4: Drivers of Mental Health Inequities

Part 5: Promoting Mental Health: Potential Areas of Action to Address Root Causes of Inequities





#### Societal Resources





#### Societal Resources: Access to Quality Health Care



Having access to affordable, quality health care is important for overall health, including mental health.

Significant barriers to health care access exist within many communities that contribute to inequities in health.

**Economic Barriers and Affordability** 

**Provider Shortages** 

Inadequate Health Insurance Coverage

Transportation Barriers

Language Access

Insufficient Paid Sick Leave Policies

Racial Bias and Discrimination



### Societal Resources: Access to Quality Health Care

#### Health Care Expenses

Adults who reported having trouble paying for health care expenses were significantly more likely to report having an unmet health care need in the past year compared to those who did not have trouble (40.5% vs. 12.8%). They were also 2.2x as likely to have high or very high psychological distress, 2.6x as likely to report suicidal ideation, and 2.7x as likely to report social isolation.

#### Discrimination in Health Care

Adults who reported experiencing discrimination while getting health care were over twice as likely to report not receiving the health care that they needed in the past year compared to those who did not report experiencing discrimination while getting health care (50.5% vs 24.4%). They also reported significantly higher rates of psychological distress, suicidal ideation, and social isolation compared to those who did not experience discrimination while getting health care.

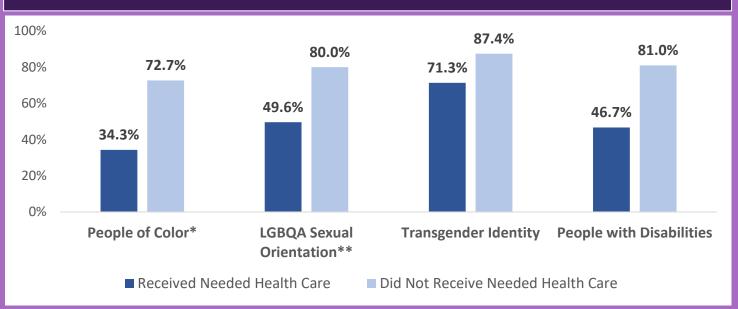
#### Health Insurance Coverage

Adults who reported not having health insurance coverage were nearly twice as likely to have high or very high psychological distress, 2.1x as likely to have suicidal ideation, and 2.5x as likely to report social isolation.



#### Societal Resources: Access to Quality Health Care

## Psychological Distress by Unmet Health Care Needs Among Communities of Focus



Rates of psychological distress within People of Color, those identifying as LGBTQA, and People with Disabilities were significantly lower among those that received the health care that they needed compared to those that did not.

Within people of color, the rate of psychological distress was 53% lower for those that received the health care they needed compared to those that did not.

<sup>\*</sup>People of color include respondents that reported one of the following race/ethnicities: American Indian / Alaska Native, Asian, Native Hawaiian, Pacific Islander, Black, Hispanic/Latine/a/o, Middle Eastern/North African, or Multiracial.

<sup>\*\*</sup>LGBQA includes respondents that reported their sexual orientation as being lesbian, gay, bisexual, queer, asexual, or other.