Measure Name: Poor Mental Health

Short Measure Description: Percentage of adults reporting 14 or more days of poor mental health in the past 30 days (calculated as a crude prevalence).

Data Source(s):
- <u>Name</u>: The Centers for Disease Control and Prevention (CDC) Behavioral Risk Factor Surveillance System (BRFSS), accessed via the PLACES Project Data Portal
- <u>Link to Source</u>: https://chronicdata.cdc.gov/browse?category=500+Cities+%26+Places&sortBy=newest&utf8

Year(s): 2018

Source Geographic Level: Zip Code Tabulation Area (ZCTA)

Stratification: Not available

Selection Rationale: Poor mental health captures the population prevalence of those reporting the experience of at least 14 days of poor mental health out of 30 days in a month, a direct measure of mental wellness.

Strengths and Limitations
- **Strengths**:
    - o [*Importance*] & [*Relevance & Usability*] Self-reported poor mental health days is a direct measure of mental health status that is essential to understanding community mental wellness.
    - o [*Feasibility*] The data are easily downloadable from PLACES and maintained by the CDC Division of Population Health, Epidemiology and Surveillance Branch.
    - o [*Scientific Soundness*] The methods used by the CDC to generate these small area estimates account for the associations between individual health outcomes, individual characteristics, and spatial contexts. CDC's internal and external validation studies confirm strong consistency between small area estimates and direct BRFSS survey estimates at state and county levels.[1]

- **Limitations**:
    - o [*Equity*] People must be willing and able to spend time on the phone discussing their health with a stranger in order to participate in BRFSS surveys. Stigma around mental health issues is particularly high in some Black communities, meaning they may not self-report mental distress even if they are experiencing

---

[1] Centers for Disease Control and Prevention. (2020a, December 8). *PLACES Methodology*. https://www.cdc.gov/places/methodology/

it.[2] Additionally, there are cultural differences in how mental health challenges are experienced, so this measure could miss mental distress among certain groups due to differences in how they experience and express mental distress.
  - o [*Relevance and Usability*] This measure is a model-based estimate,[3] so it may be difficult to interpret on its own.
  - o [*Scientific Soundness*] This measure is self-reported and depends on the accuracy of the person surveyed.
  - o [*Scientific Soundness*] Age-adjusted prevalence is not available at the census tract level, so these data are reported as a crude prevalence.

Calculation:

$$Poor\ mental\ health = \frac{Respondents\ aged\ \geq 18\ years\ who\ report\ 14\ or\ more\ days\ of\ poor\ mental\ health\ during\ the\ past\ 30\ days}{Respondents\ aged\ \geq 18\ years^{*}}\ x\ 100\%$$

* Denominator includes those who report or do not report the number of days during the past 30 days during which their mental health was not good, but excludes those who refused to answer, had a missing answer, or answered "don't know/not sure."[4]

Note - BRFSS estimates the crude prevalence based on self-reports using small area estimation and multilevel regression and poststratification, which links geocoded health surveys and high spatial resolution population demographic and socioeconomic data.[5]

---

[2] National Alliance on Mental Illness. (2017). *African Americans.* http://www.nami.org/Your-Journey/Identity-and-Cultural-Dimensions/Black-African-American

[3] Centers for Disease Control and Prevention. (2020a, December 8). *PLACES Methodology*. https://www.cdc.gov/places/methodology/

[4] Centers for Disease Control and Prevention. (2020b, December 8). *PLACES Measure Definitions*. https://www.cdc.gov/places/measure-definitions

[5] Centers for Disease Control and Prevention. (2020a, December 8). *PLACES Methodology*. https://www.cdc.gov/places/methodology/