

# EASTERN BAND OF CHEROKEE PUBLIC HEALTH AND HUMAN SERVICES DIVISION HEALTH PRIORITY ISSUES: FACTS AND RESOURCES JUNE 1, 2019

## **EBCI HEALTH PRIORITY – DEPRESSION**



Depression is a common but serious mood disorder. Depression is more than feeling down or having a bad day. When a sad mood lasts for at least two weeks and interferes with normal, everyday functions, this may be depression. Major depressive episodes are defined as depression lasting for a period of two weeks or longer with at least four other symptoms that reflect a change in functioning such as problems sleeping, eating, energy, concentration, self-image, or recurrent thoughts of death or suicide.

Depression was one of EBCl's Tribal Health Improvement Plan (THIP) focuses from 2015-2017. The THIP had three depression objectives: increase awareness of depression among the EBCl community, increase the number of visits to behavioral health providers in all EBCl programs and agencies, and increase participation of tribal members in sharing traditional Cherokee beliefs and values.

# **Data Highlights**

#### **Health Indicators**

Depression by the numbers

#### National

- 7.6% of persons aged 12 and over experience depression in any 2-week period (2009-2012).<sup>1</sup>
- 10.4% of physician office visit patients have depression on their medical record.<sup>1</sup>
- o There were 44,193 suicide deaths in 2015 at a rate of 13.7 per 100,000 population.<sup>1</sup>
- 6.7% of US population has had a major depressive episode<sup>2</sup>
  - Ages 18-25 has the highest rate of major depressive episodes with 10.5%<sup>2</sup>
- 8.7% of AI/AN have had a major depressive episode in 2016, compared to 7.4% of the white population.<sup>2</sup>
- 11% of adolescents aged 12-17 experienced a major depressive episode between 2013-2014.<sup>3</sup>
- 3.9% of adults 18 or older have had thoughts of suicide.<sup>3</sup>
- o In 2014, 21% of AI/AN ages 18 and up reported that they had a mental illness in the past-year, compared to 17.9% of the general population.<sup>4</sup>

#### • North Carolina

 11.4% of adolescents aged 12-17 experienced a major depressive episode between 2013-2014.<sup>3</sup>

- 40.7% of those with major depressive episodes received treatment for depression.<sup>3</sup>
- 4.5% of adults aged 18 or older have had thought of suicide.<sup>3</sup>

#### • EBCI

- Suicide was number 7 on the top 10 leading causes of death in EBCI from 2010-2014.
  - Suicide accounted for 2.5% of all deaths in EBCI compared to 1.8% in USET Nashville area.
  - 3.3% of all deaths were male suicides whereas 1.6% of all death were female suicides.
  - 13.6% of the EBCI population were diagnosed with depression and received services in 2016.

CIHA DEPRESSION Dx AND Received Services	2014	2015	2016
Patients with Depression Dx AND Received Services	1,369	1,665	1,503
Percent of EBCI Population with Depression Dx AND Received Services Per Year <sup>1</sup>	12.4%	15.1%	13.6%
Behavioral Health Visits for Patients with Depression Dx	4,619	7,592	5,746

Source cited in 2018: personal communication from Cherokee Hospital to PHHS, June 14, 2018 <sup>1</sup>CIHA user population 2012- 11,016.

# **Understanding the Issue**

- 2017 Tribal Health Survey
  - 19.11% of respondents reported that anxiety, depression, and/or mental and behavioral health issues were leading health concerns.
  - 19.2% of respondents reported that they were concerned that anxiety, depression, and/or mental and behavioral health issues would affect them in the next five to ten years.
  - 19.96% of respondents reported that they were concerned their family's health is affected by anxiety, depression, and/or mental and behavioral health issues.
- 2016 Tribal Elder Survey
  - o 12.3% of EBCI elders reported having ever been diagnosed with depression.
  - o 52% reported that they have felt downhearted or blue at least a little of the time in the past month compared to 34.2% nationally.
  - 32.6% reported that they have felt nothing would cheer them up at least a little of the time in the past month.

## **Specific Populations At Risk**

Depression can affect everyone, but the following factors put people at more risk for developing depression:

- Gender- depression is twice as common in women than in men.<sup>4</sup>
- Age- major depression is most likely to affect those very young and very old.<sup>4</sup>
- Ethnicity- AI/AN are more likely to be diagnosed with depression than white population.<sup>4</sup>
- Family history and upbringing- more likely to have depression if a parent or a foster parent suffers from depression.<sup>4</sup>
- Marital status- those that have been previously married are at higher risk.<sup>4</sup>
- Socioeconomic status- the less educated and those with lower income are more likely to experience depression.<sup>4</sup>

### **Health Resources available/needed**

- Cherokee Indian Hospital Authority's Analenisgi Behavioral Health provides a variety of
  evidence-based outpatient therapy including therapies that focus on anxiety and depression, a
  recovery center, psychiatric evaluation, medication management, and intensive outpatient
  substance abuse treatment. Analenisgi is open Monday-Friday 7:45am-4:30pm. Walk-ins are
  welcome Monday-Friday 1pm-3pm. For more information call 828-497-9163 Ext. 7550 or visit
  their website at <a href="http://cherokeehospital.org/page?title=Analenisgi">http://cherokeehospital.org/page?title=Analenisgi</a>.
- American Academy of Child and Adolescent Psychiatry's online depression resource center
  offers resources for children and adolescents. For more information, visit
   www.aacap.org/aacap/Families and Youth/Resource Centers/Depression Resource Center/H
  ome.aspx.
- Anxiety and Depression Association of America (ADAA) offers resources and many helpful articles. For more information, visit www.adaa.org.
- Substance Abuse and Mental Health Services Administration (SAMHSA) <u>www.samhsa.gov</u>.

o National Suicide Hotline: 1-800-273-8255

National Helpline: 1-800-662-4357

#### References:

- 1. <a href="https://www.cdc.gov/nchs/fastats/depression.htm">https://www.cdc.gov/nchs/fastats/depression.htm</a>
- 2. <a href="https://www.nimh.nih.gov/health/statistics/major-depression.shtml">https://www.nimh.nih.gov/health/statistics/major-depression.shtml</a>
- 3. <a href="https://www.samhsa.gov/data/sites/default/files/2015">https://www.samhsa.gov/data/sites/default/files/2015</a> North-Carolina BHBarometer.pdf
- 4. https://www.everydayhealth.com/depression/facts-about-depression-whos-at-risk.aspx