

Behavioral Disorders: The New Public Health Crisis

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Abstract

Behavioral health has become a public health crisis. No other public health crises are as widespread or contribute as much to the burden of illness in the U.S. as do behavioral health disorders. By 2020, mental and substance use disorders will surpass all physical diseases worldwide as major causes of disability. Yet state and federal governments continue to make steep cuts to funding for public behavioral health services. We cannot afford to wait for the next national tragedy to recognize that behavioral health disorders are a public health crisis deserving of our nation's attention and support.

Several articles in this issue of the *Journal of Behavioral Health Services and Research* discuss tools and practices for screening, early identification, and effective treatment of mental illness and substance use. Other articles discuss the importance of integrating primary and behavioral health care and the need for quality improvement in behavioral health. Focus on early identification, health integration, and effective treatment is more important than ever before, in the light of the fact that behavioral health problems have become a public health crisis.

Infectious diseases, heart disease, childhood obesity, and even tainted food and drugs are some of the typical issues that come to mind when we think of public health crises. While all of these issues may indeed be legitimate crises, none are as widespread or contribute as much to the burden of illness in the USA as do alcohol, drug abuse, and mental disorders (collectively referred to as behavioral disorders).

The Centers for Disease Control and Prevention (CDC) reports about half of US adults will develop a mental illness during their lifetime.¹ One in four adults experiences a mental disorder in any given year, and one in 17 people will experience a serious mental illness, including schizophrenia, major depression, or bipolar disorder.² By 2020, mental and substance use disorders will surpass all physical diseases worldwide as major causes of disability.³

Perhaps it is more common that most people associate public health crises with physical illnesses. However, a 2011 CDC report found that cardiovascular disease, diabetes, obesity, and

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other chronic diseases are associated with mental illness.² The report also found that treatment of mental illness also can reduce the effect of chronic diseases.²

Sadly, almost 40% of people with mental and substance use disorders never get treated.⁴ Those who seek treatment typically do so after a decade or more of delays, during which they are likely to develop additional problems. A survey by the Substance Abuse and Mental Health Services Administration found that of the 2.5 million adults with mental and substance use disorders, only slightly more than 11% received treatment for both disorders.⁴

The good news is treatment works. For example, according to the National Advisory Mental Health Council, the treatment success rate for individuals with a bipolar disorder is 80%.⁵ Addictions treatment has been shown to reduce drug use by half, reduce crime by 80%, and reduce arrests up to 64%.⁶

Effective mental health and addiction treatments also reduce costs. A Surgeon General's report finds that \$1.00 invested in substance use treatment has a return of \$7.00 in cost savings on crime and in criminal justice costs.⁷ After all, people in recovery work, pay taxes, buy homes, and contribute positively to society. Without adequate treatment, people with mental illness often end up in emergency rooms, homeless, or in jail, all of which end up costing taxpayers more money in the long run.

Yet, even in a year starting with the tragedy in Tucson and followed 6 months later by a shooting rampage in Grand Rapids, MI, states continue to make severe budget cuts that threaten behavioral health services nationwide. Current US Congress budget proposals would result in a total of \$750 billion in cuts to federal Medicaid spending over the next 10 years.⁸ Medicaid is the most important source of funding for public behavioral health services. The cuts are proposed despite estimates for a steep increase in people seeking behavioral health services.

We must stop the thoughtless and irresponsible cuts to behavioral health services. We must speak up about mental illness and substance use disorders to our friends, co-workers, and legislators. We cannot afford to wait for the next national tragedy to recognize that behavioral disorders are a public health crisis deserving of our nation's attention and support.

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