Recommendations Based on Mental Health Findings in the West Virginia Mountain State Assessment of Trends in Community Health Survey

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Background

National estimates in the United States highlight a need for mental health surveillance, particularly in rural areas where poor access to mental health care [1,2] is compounded by the substance use epidemic [3]. In response, the West Virginia Department of Health and Human Resources (DHHR) has made improving the mental health of West Virginians a key priority.

DHHR and West Virginia University Health Affairs Institute launched a new population-based public health surveillance system in 2021 called the Mountain State Assessment of Trends in Community Health (MATCH).

The MATCH is designed to address mental health and substance use data gaps by producing new state, regional, and county estimates on key indicators.

Methods

MATCH is a biennial, cross-sectional survey designed to collect state-, regional-, and county-level data on West Virginia (WV) residents (ages 18 and older) who are non-institutionalized and not living in group housing.

MATCH Domains (104 Items)

- Health status and behaviors
- Illicit drug use
- Mental health
- Social determinants of health
- Coronavirus disease 2019 (COVID-19)

2021 MATCH (Inaugural year)

- Fielded Aug. 31, 2021 to Feb. 28, 2022
- Stratified random sample (n = 88,004)
 - Address-based sampling frame (n = 70,400)
- Medicaid administrative data (n = 17,604)
- Residents were selected and sent up to four mailings.
- Data were collected via:
- 1) Web2) Paper
- 3) Telephone
- Results were weighted and are representative of adult West Virginians at the state-, regional-, and county-levels.

Main Findings

Monitoring trends in mental health and substance use outcomes and disparities every two years:

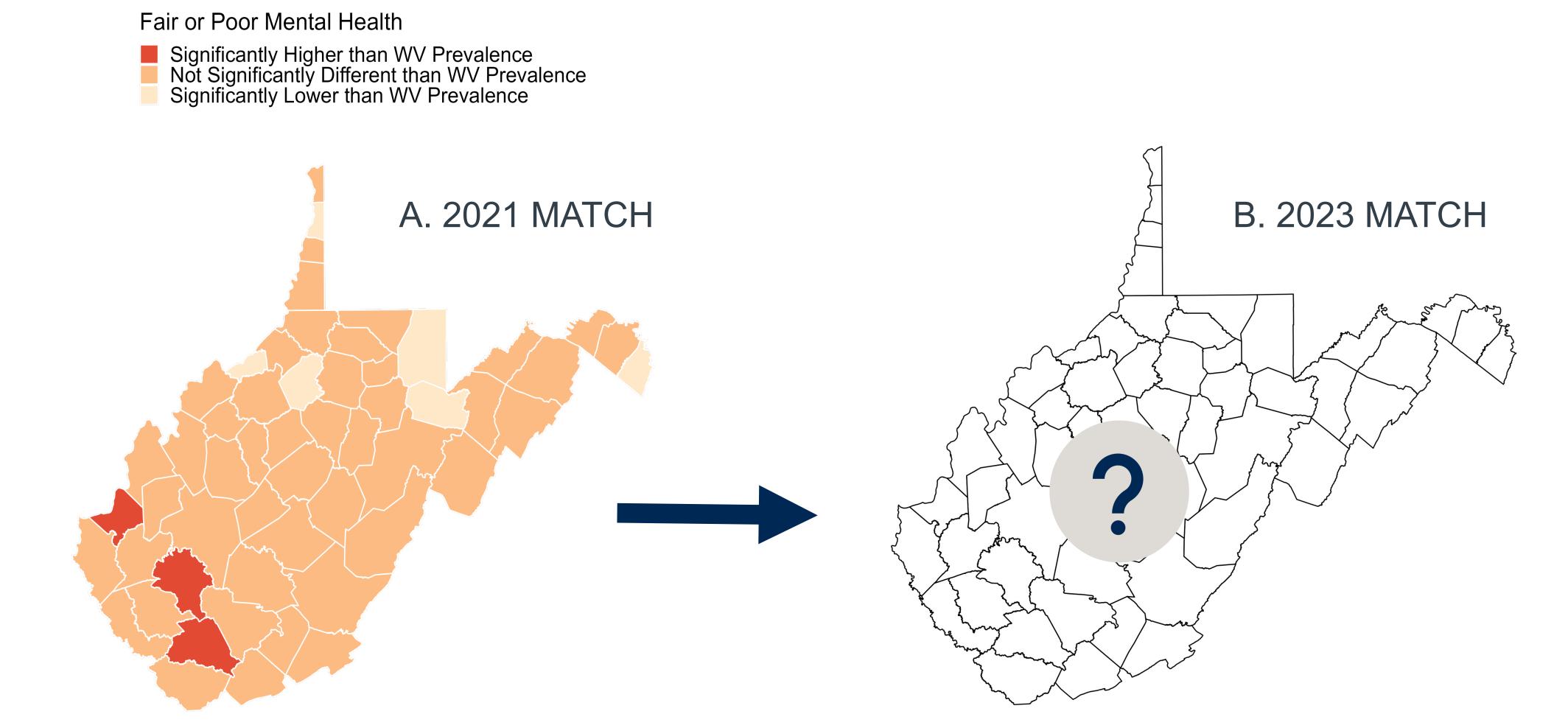


Figure 1. A) The prevalence of self-reported fair or poor mental health across 55 counties in WV from the 2021 MATCH survey. 'Significance' was determined by comparing 95% confidence intervals of county prevalence to state prevalence estimates. **B)** Map of the 55 counties in West Virginia and anticipation of the results from the 2023 MATCH survey.

Designed to address data gaps in service delivery that could reduce mental health and substance use disparities.

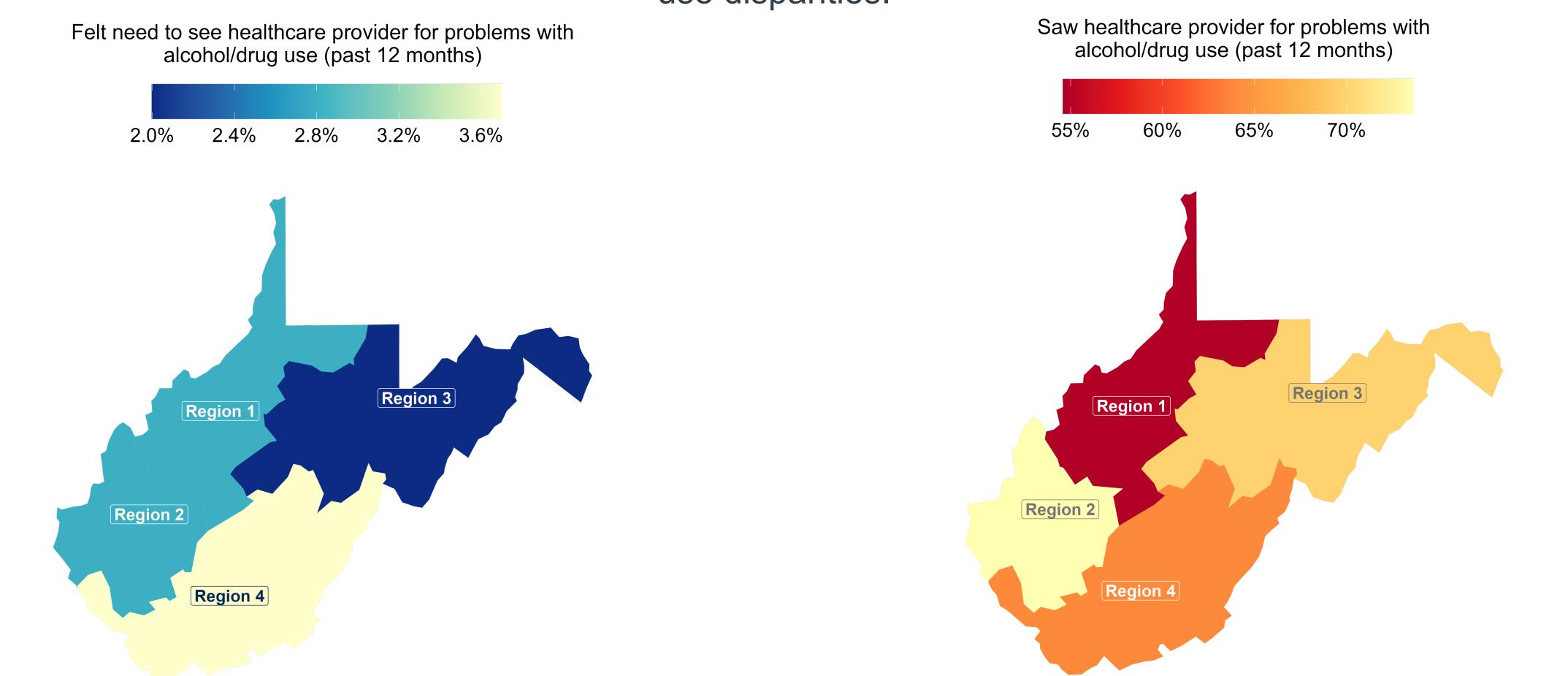


Figure 2. The prevalence of respondents that reported there was a time in the past 12 months that they felt the need to see a healthcare provider for problems with alcohol or drug use. Results are displayed by DHHR's Bureau for Medical Services regions in WV for the 2021 MATCH survey.

Figure 3. Among those who felt the need to see a healthcare provider, the prevalence of respondents who reported they had seen a healthcare provider for their problems with alcohol or drug use in the past 12 months during the 2021 MATCH survey. Results are displayed by DHHR's Bureau for Medical Services regions in WV.

Recommendations

- 1. There are county and regional disparities in indicators of mental health and healthcare access for substance use in WV.
- 2. MATCH is an important tool for **monitoring** where mental health and substance use resources are needed most in WV and how those needs change over time.
- 3. MATCH supports continuing efforts to improve mental health throughout WV.



Select Resources

- Mobile crisis response teams
- Mental health treatment and therapy
- Harm reduction/needle exchange programs
- Withdrawal management
- Support groups

Access the Data Explorer by scanning this code or at www.org/data



References

1. Larson, E.H., et al., Supply and Distribution of the Behavioral Health Workforce in Rural America, in Data Brief #160. 2016, WWAMI Rural Health Research Center, University of Washington: Seattle, WA.

2. Andrilla, C.H.A., et al., Geographic Variation in the Supply of Selected Behavioral Health Providers. Am J Prev Med, 2018. 54(6 Suppl 3): p. S199-S207.

3. Jenkins, R.A., The fourth wave of the US opioid epidemic and its implications for the rural US: A federal perspective. Prev Med, 2021. 152(Pt 2): p. 106541.

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