

Mental Health in Young Adulthood

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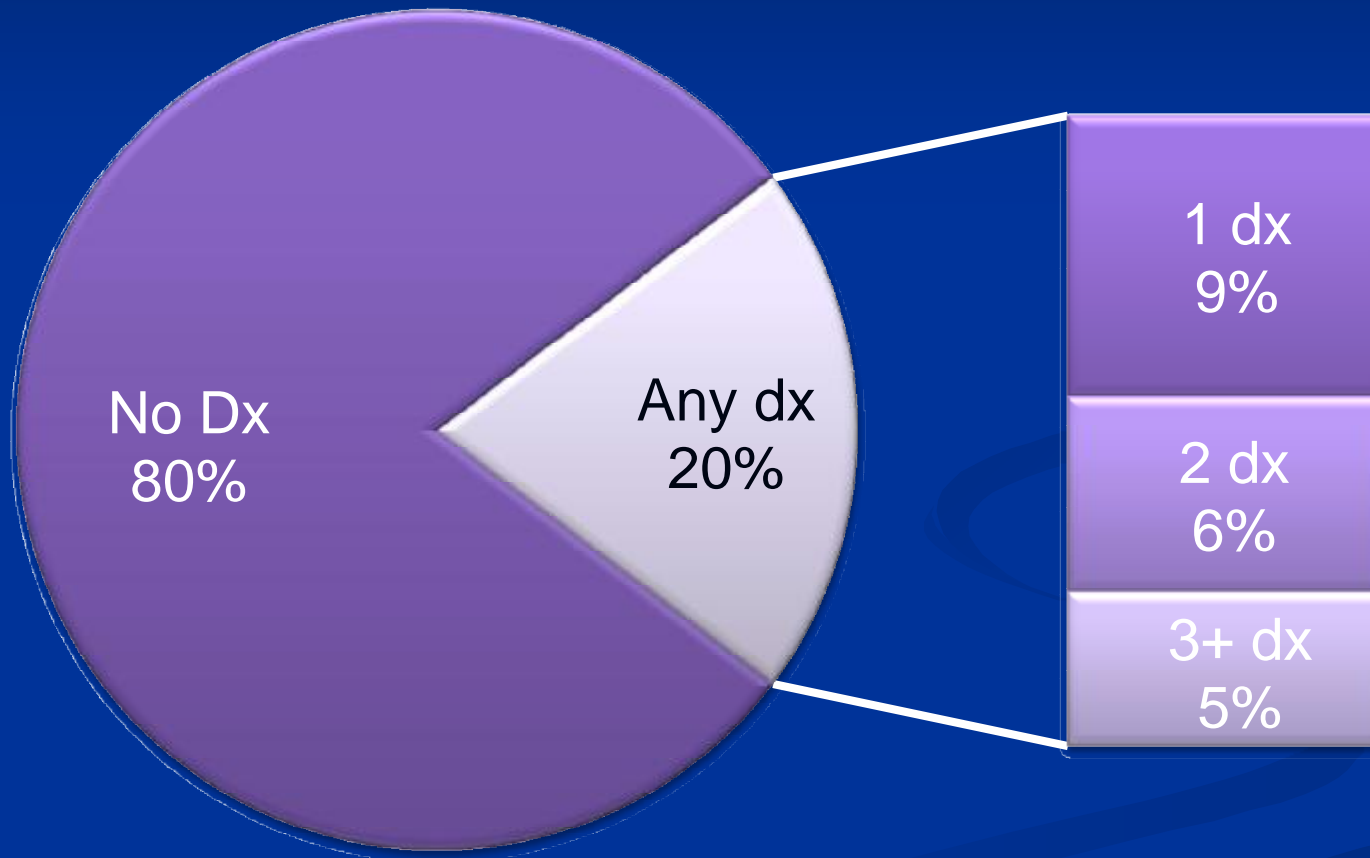
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Structure of talk

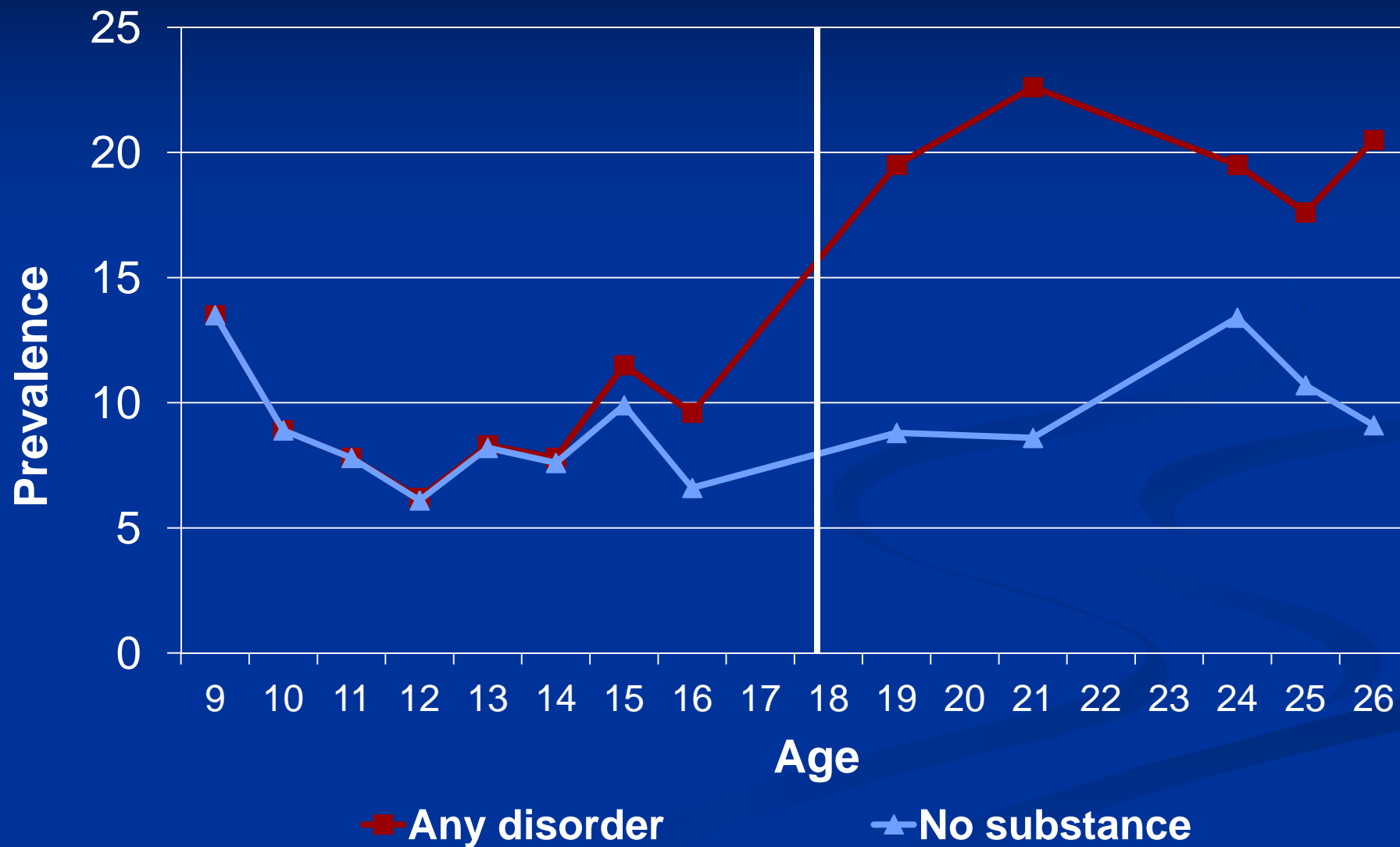
1. How common is mental illness?
 2. How does it affect functioning?
 3. How did they get there?
 4. Do they get help?
-

What common is MI?

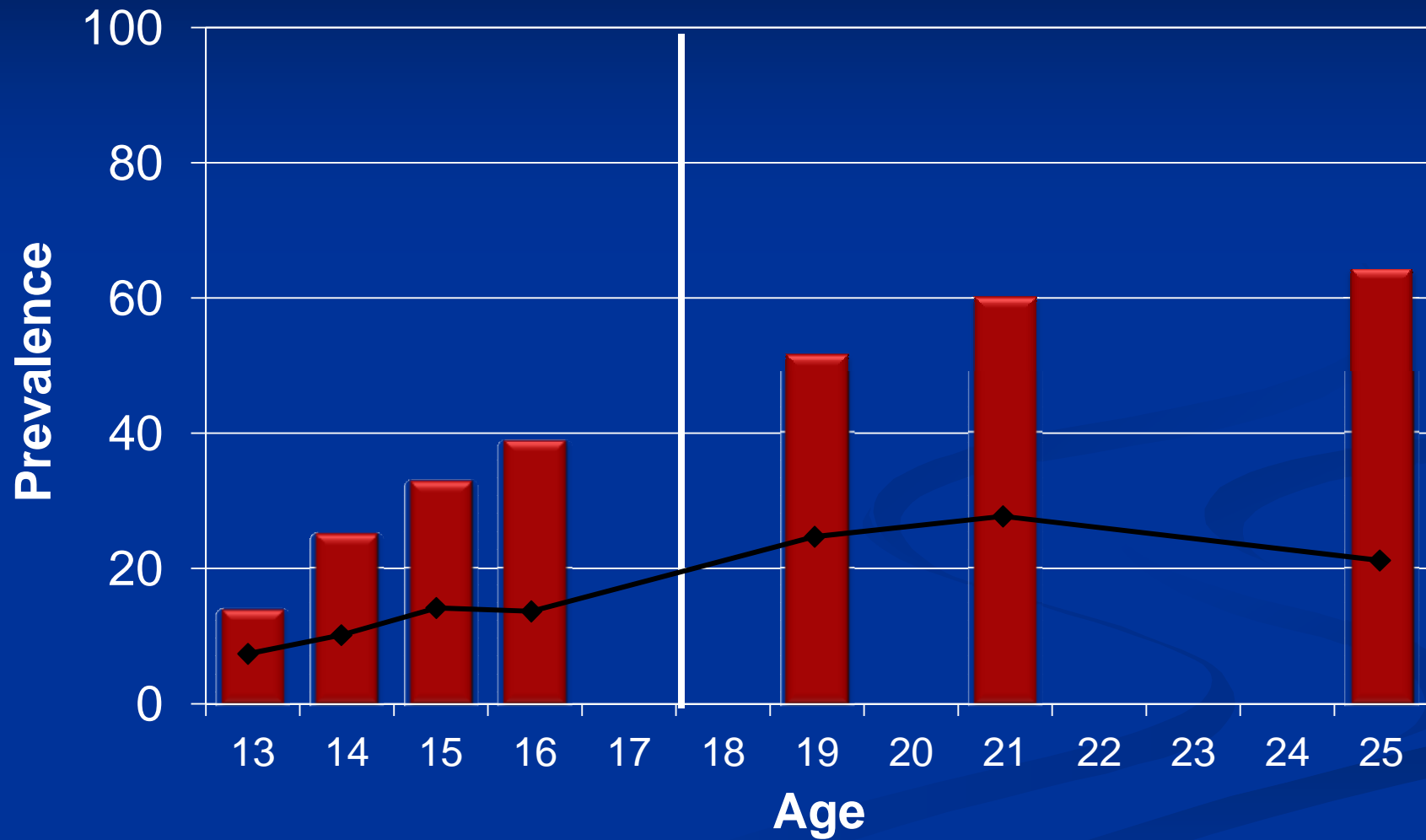
3 month Prevalence



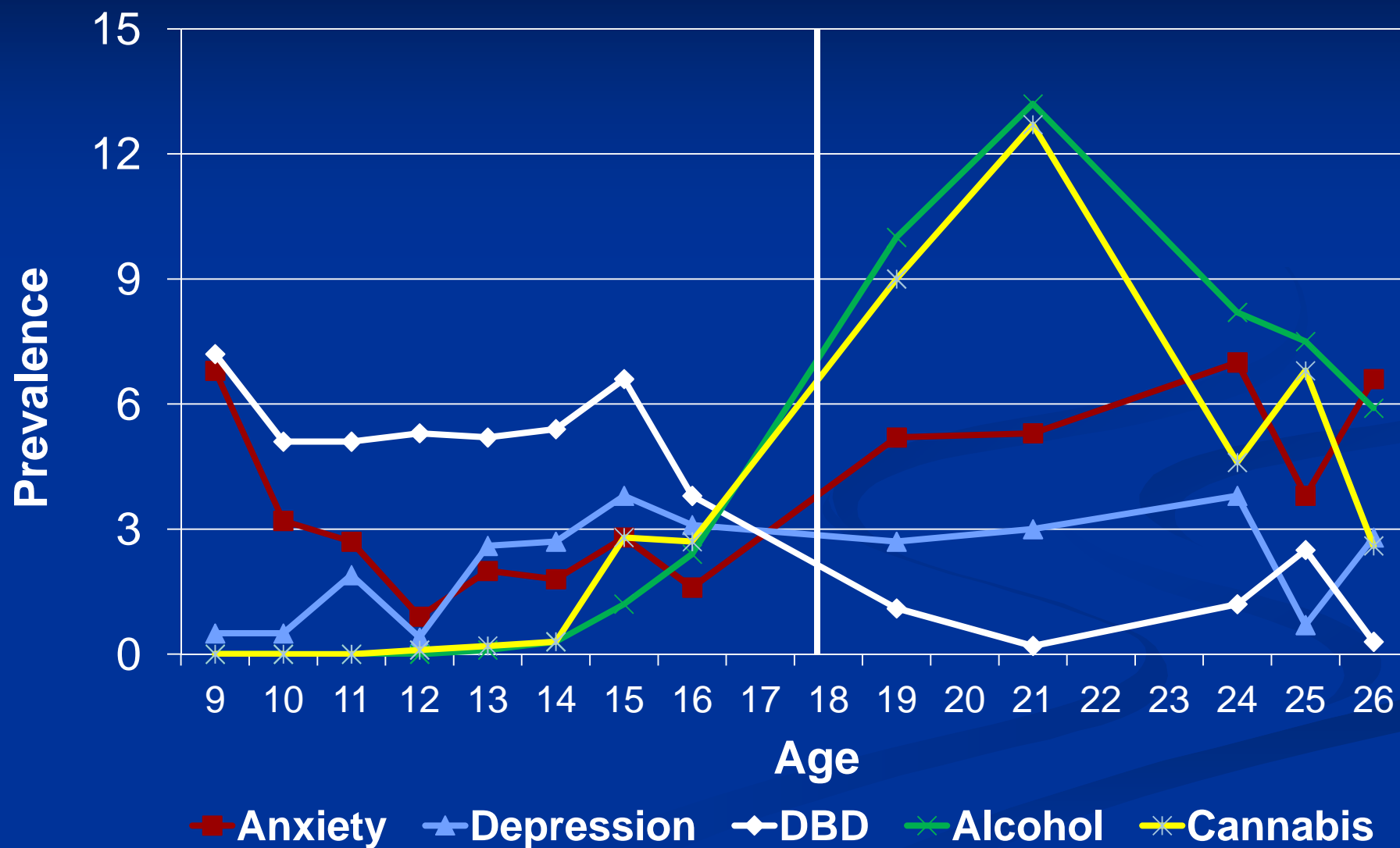
Rates by Age



Cumulative Exposure



Rates of Common Disorders

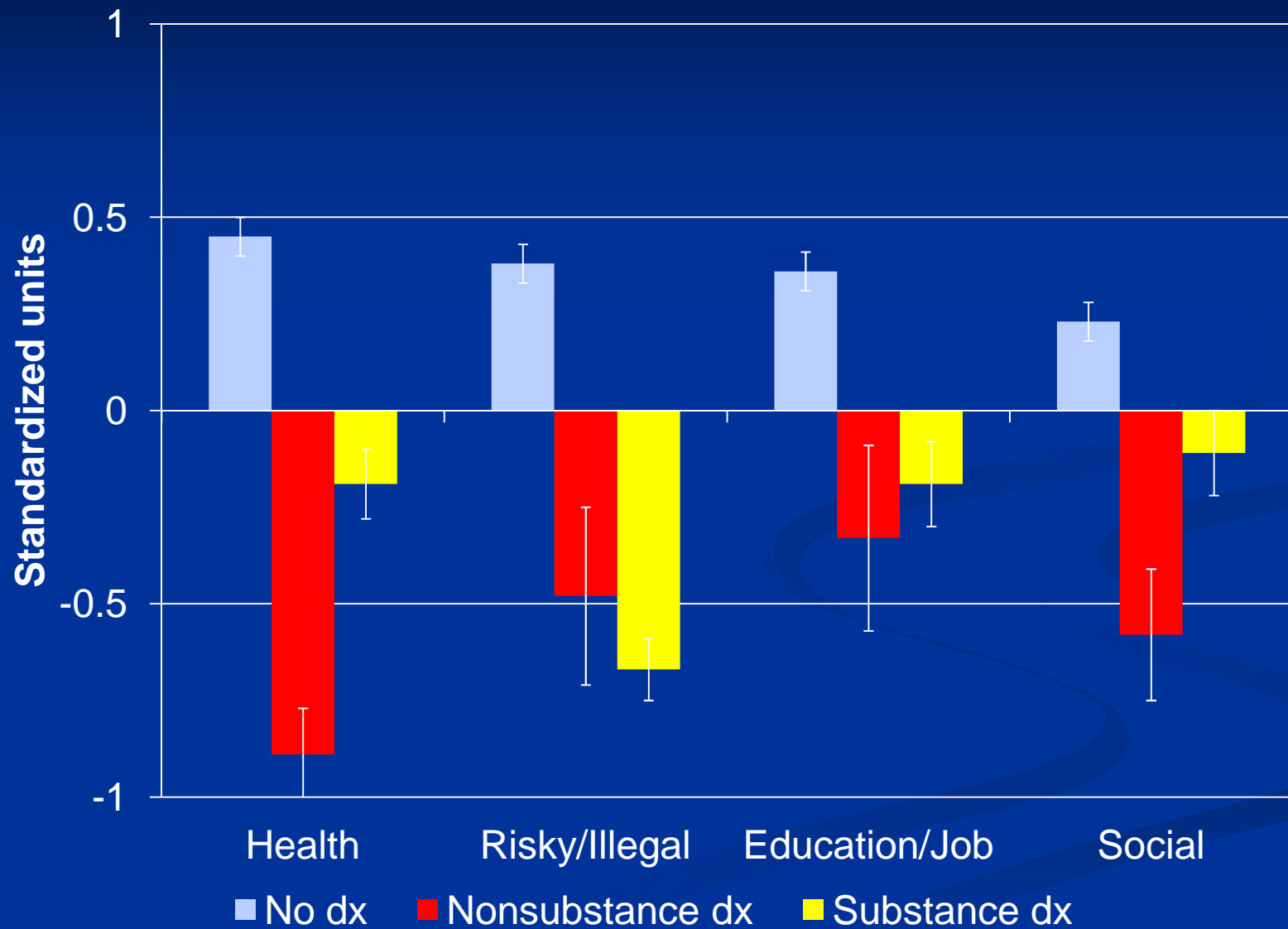


How does it affect functioning?

Functional Outcomes

Physical Health	Risky/ Criminal	Education/ Employment	Social
<ul style="list-style-type: none">• Serious Illness• STD• Obesity• Regular smoking• Perceived poor health	<ul style="list-style-type: none">• Official charge• Official arrest• Fighting• Theft• Illegal drug use	<ul style="list-style-type: none">• Low income• HS dropout• Dismissed from job• Poor financial manage.	<ul style="list-style-type: none">• No close friends• Difficulty making friends• Poor relations w/ parents

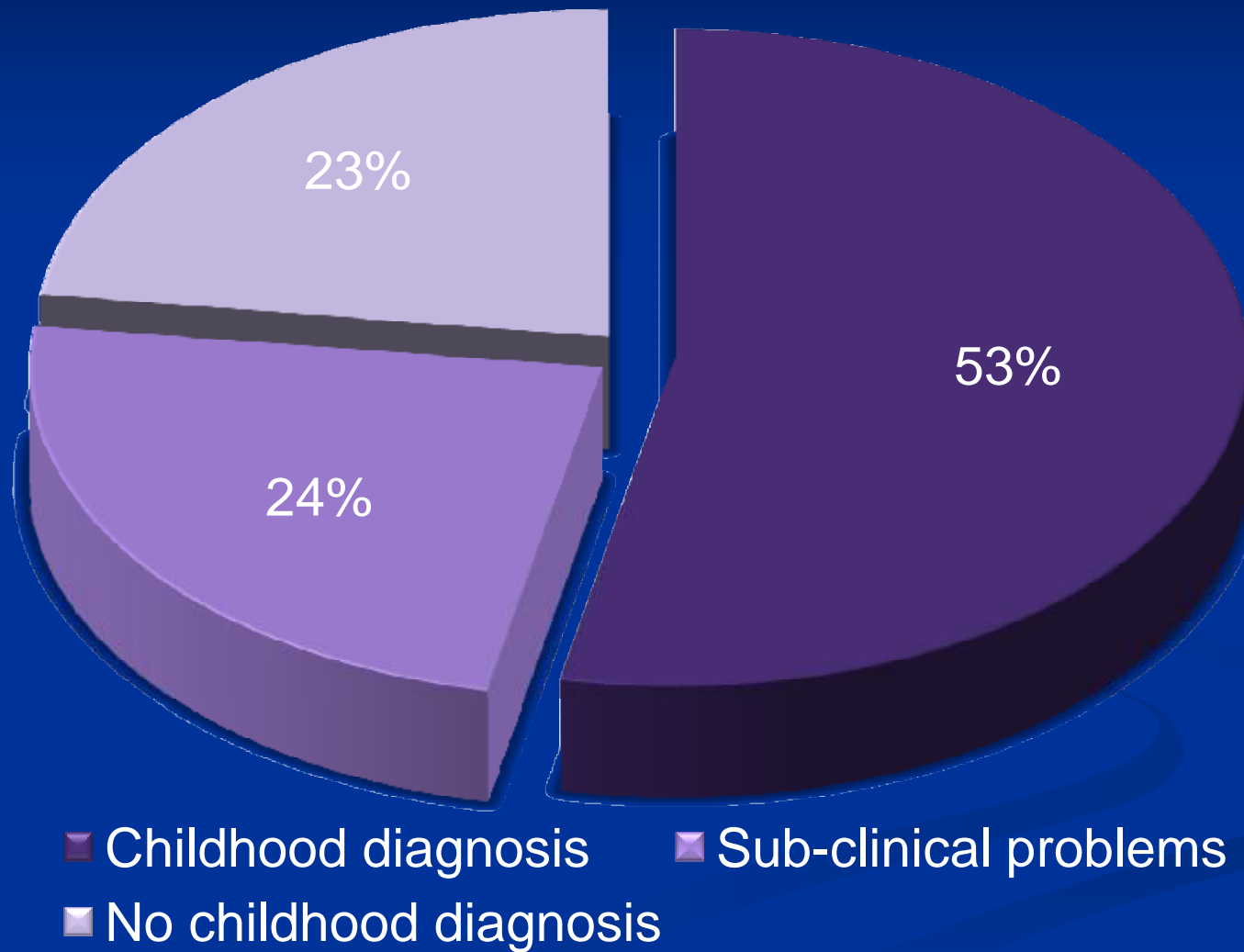
Comparison by diagnostic status



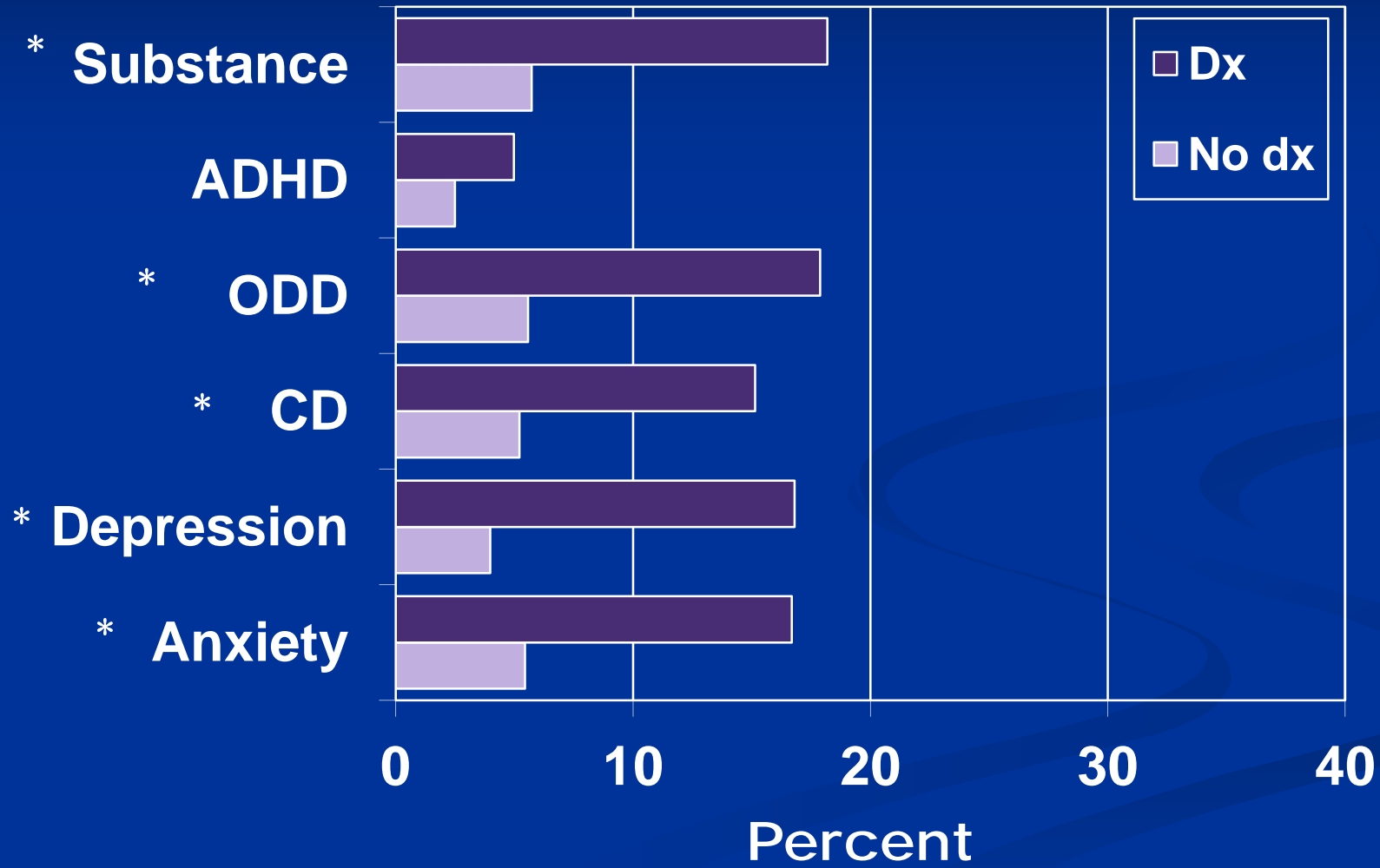
Young adults with a disorder were:

- n Twice as likely to report regular smoking
- n Four times as likely to report police contact
- n Twice as likely to have been fired
- n Three times as likely to default on financial obligation
- n Four times as likely to be in a violent relationship

How did they get here?



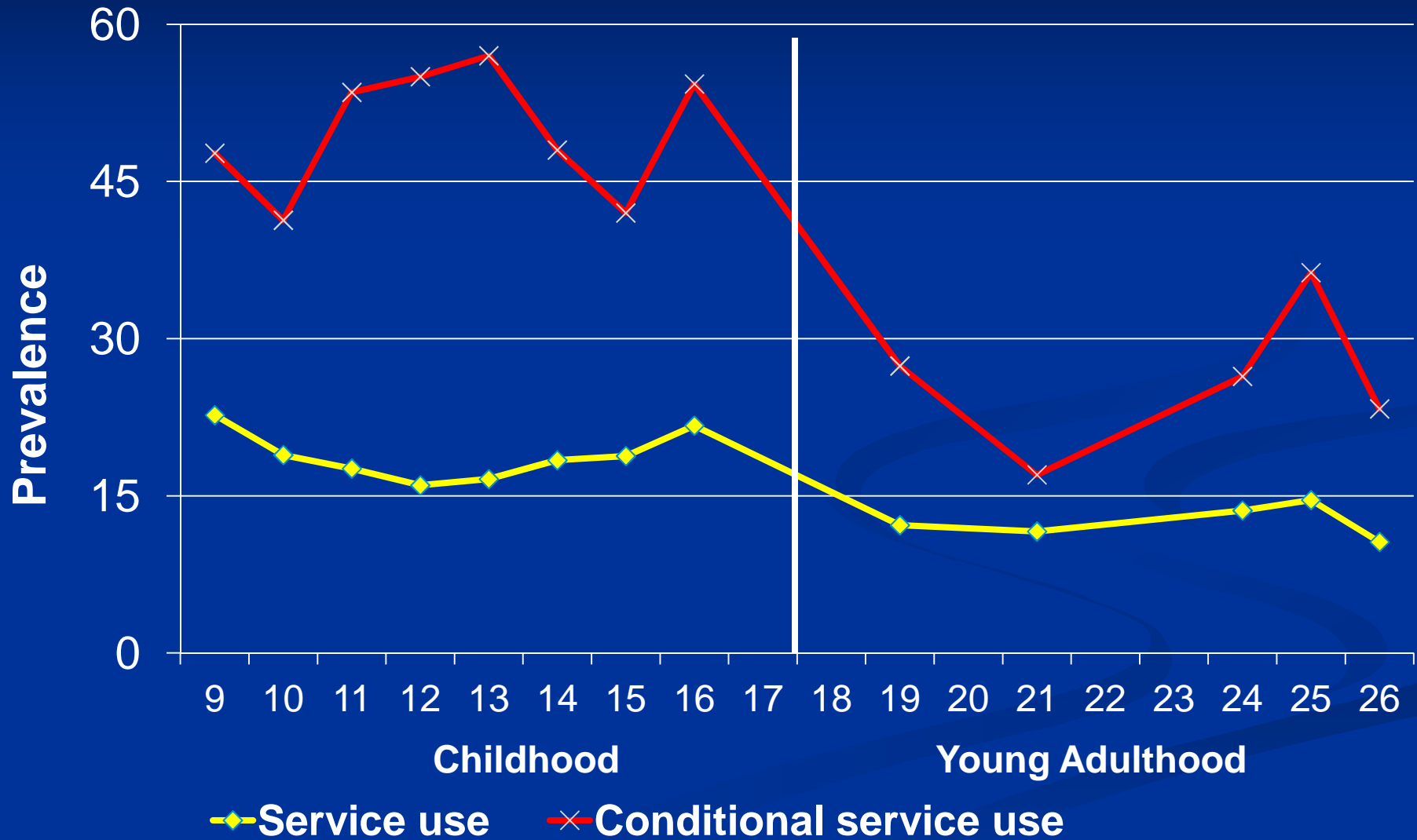
Any Adult Disorder



Diagnostic Transitions

- n No simple pattern
- n Early substance problems predict later substance problems
- n Both anxiety and depression predicted by range of childhood disorders

Do they get help? Service Utilization Rates



Conditional Service Utilization Rates

	Childhood %	Young Adulthood %
Any*	50.7	24.2
Specialty Psych*	19.0	10.0
Gen. Med.	10.4	7.2
Education/Job*	23.7	0.3
Crim. Justice	5.4	5.4
Informal*	16.8	7.6

Young adulthood present a distinct challenge for mental health public policy:

Rates of mental illness overall increase,
rates of many individual disorders increase,
these disorders affect all areas of functioning,
and yet, only 1 in 4 receive any services at all
