The field of substance abuse prevention has long recognized that there is substantial overlap between substance abuse and mental health issues. Behavioral health has been defined as a state of mental or emotional being or choices and actions that affect wellness. Substance abuse and use are one set of behavioral problems, but other also includes serious psychological distress, suicide and mental illness. While long recognizing the co-occurrence of substance abuse and mental health issues, the field of prevention is also beginning to understand that the risk and protective factors that contribute to both also overlap substantially. For example, family disruption is a risk factor that has been identified as a common indicator of both depression and heavy alcohol use. Implementing prevention strategies targeted at minimizing family disruption may very well be effective at decreasing rates of both substance abuse and depression.

Information from the 2009 NSDUH can be used to illustrate this relationship. The survey found that 45.1 million adults in the US had suffered from some type of mental illness and 11 million had what is considered a serious mental illness. 37% of the adults with any mental illness used cigarettes compared to 22% of adults with no mental illness; adults with serious mental illness had even higher rates - 47%. Adults with mental illness are also more likely to binge drink (i.e., five or more drinks) or report heavy alcohol use. Almost 26% of adults with a serious mental illness also have co-occurring substance dependence and nearly 43% of adults with a substance use disorder also have a co-occurring mental illness.

Prevention professionals are beginning to incorporate substance abuse prevention with mental health promotion with a clear expectation that each influences the other. A growing body of evidence indicates that the risk and protective factors that relate to substance abuse also relate to mental health and that environmental strategies that are effective for preventing substance abuse are also effective for promoting mental health.

**Mental Health**

Mental health is assessed in Louisiana youth every other year on a statewide basis via the Youth Risk Behavior survey. Students are asked whether they have been feeling so sad for two or more weeks that they have stopped doing their usual activities. Students are also assessed regarding their feelings of depression on the CCYS in a similar fashion.

**Youth Mental Health Indicators**

Figure 1 displays the percentages of students that have reported that they were feeling so sad for two or more weeks or more that they stopped doing their usual activities. The rates in Louisiana were slightly higher than the national rates and have remained fairly stable of the last 4 years of available data. Nearly one third of high school students in the state have reported “feeling sad” for two or more weeks.
Additional data is available from the CCYS for students that answer questions that indicate they have symptoms of depression shown in Figure 2. These rates are substantially lower than the rates of students feeling sad, but the symptoms are more strongly associated with depression. While there has been some variability across reported grades and years, there does appear to be a downward trend in students displaying symptoms of depression.

![Figure 2. Percentage of youth categorized as high in depressive symptoms. (Source: CCYS)](image)

Figure 2. Percentage of youth categorized as high in depressive symptoms. (Source: CCYS)

![Figure 3. Percentage of Students in 9th-12th Grade Who Reported Making a Suicide Plan in the Past Year: 2007-2011 (Source: YRBS)](image)

Figure 3. Percentage of Students in 9th-12th Grade Who Reported Making a Suicide Plan in the Past Year: 2007-2011 (Source: YRBS)

![Figure 4. Percentage of Students in 9th-12th Grade Who Reported Attempting Suicide in the Past Year: 2007-2011 (Source: YRBS)](image)

Figure 4. Percentage of Students in 9th-12th Grade Who Reported Attempting Suicide in the Past Year: 2007-2011 (Source: YRBS)

**Suicide**

A more serious mental health issue is suicide. There are symptoms that are related to suicide attempts, but once the attempt has been made the results are frequently fatal. Even those who may survive the attempt may have serious injuries. A history of depression or other mental illnesses often precedes a suicide attempt which emphasizes the importance of tracking other indicators of mental health.

**Youth Suicide Indicators**

Approximately 12% of in Louisiana high schools report having at least made a plan to commit suicide and this rate has remained fairly constant since 2007 as shown in Figure 3. The Louisiana rate has been very nearly identical to the rate nationwide.

Figure 4 indicates that the rate of youth reporting suicide attempts has gradually risen in Louisiana and has been reported to be consistently higher than the national rate.

Scan this QR code to access the online repository of all Louisiana State Epidemiological and Outcomes Workgroup data for substance abuse prevention and mental health promotion. http://www.gov.state.la.us/lasocialindicators

This data brief is brought to you by the Office of Behavioral Health, the Governor’s Office of Safe and Drug Free Communities, and the Louisiana State Epidemiology Workgroup. To find data related to substance use and abuse and related behavioral health issues, please visit the State Epidemiology Workgroup Online Data system at http://www.gov.state.la.us/lasocialindicators.