

## **Connecticut Environmental Justice Screening Tool**

## Depression Rates

Depression, also known as depressive disorder, is a common mental disorder that involves a depressed mood (feeling sad, irritable, empty) or a loss of interest in activities for long periods of time. Depression is characterized by a depressive episode where these feelings last every day for at least two weeks. According to the CDC, depression is a major cause of disability. People who have lived through abuse, chronic disease, major medical conditions, severe losses, or other stressful events are more likely to develop depression (Centers for Disease Control and Prevention (CDC)., 2021; World Health Organization (WHO), 2023). Depression can lead to problems with self-care, relationships, school, and work, as well as more stress and dysfunction, which can worsen depression itself (World Health Organization (WHO), 2023). Depression is also linked to unconventional and mass oil and gas production, which creates a neighborhood scale stressor and contribute to environmental injustice (Malin, 2020). Harmful environmental exposures such as pollutants, inadequate housing, and limited access to green spaces have been associated with increased rates of depressive symptoms (Triguero-Mas et al., 2015). Marginalized communities often face systemic disparities in access to mental health care, exacerbating the severity and duration of depressive episodes (Chow et al., 2003).

This indicator maps the geographic distribution of adults aged 18 and older who reported having been told by a doctor, nurse, or other health professional that they had depressive disorder (including depression, major depression, dysthymia, or minor depression). This data is from a survey conducted by the Behavioral Risk Factor Surveillance System (BRFSS) (Centers for Disease Control and Prevention (CDC)., 2021). The BRFSS is the United States' system of health-related telephone surveys that collect state data about U.S. residents regarding their health-related risk behaviors, chronic health conditions, and use of preventive services (Center for Disease Control and Prevention, 2023).

**Indicator** 

This indicator represents the tracts ranked by their percentile level of annual prevalence (percentage) age-adjusted rate of adults aged 18 and older who report having been told by a doctor, nurse, or other health professional that they had depressive disorder.

Data Source

2020 <u>PLACES – Center for Disease Control and Prevention</u>, Behavioral Risk Factor Surveillance System (BRFSS).

Method

The information is obtained through PLACES 2020 database. The data is a shape file based on 2010 census tracts. The shape file is spatial joined with 2020 census tracts, assigning the same value for the new 2020 tracts that share the same geographical areas. The census tract-based percent estimates are used to calculate the percentiles. The percentiles are normalized into impact rank scores between 0 (least impacted) to 10 (most impacted). The map was segmented into ten equally-sized sections between the 0 and 10. In addition, an 11th category was established for instances where data not available or unreliable. The value in the table below



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represents the age adjusted rate.

Min Value	Max Value	Min Percentile	Max Percentile	Min Rank	Max Rank
0	17.2	0	8.93	0	1
17.3	18.1	9.77	17.97	1	2
18.2	19.3	19.78	28.95	2	3
19.4	20.3	30.52	39.45	3	4
20.4	21	40.53	49.1	4	5
21.1	21.7	50.78	58.99	5	6
21.8	22.3	60.68	67.91	6	7
22.4	23	69.84	78.17	7	8
23.1	24.2	79.73	89.02	8	9
24.3	39.5	89.51	99.88	9	10

## Works Cited

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