

### *Poor Mental Health*

Mental health is defined as a person’s emotional, psychological, and social well-being. A person’s state of mental health affects how they think, feel, act, and respond to stress (Center for Disease Control and Prevention, 2021). Mental health is essential for overall health. Poor mental health can impact people’s ability to care for themselves, make decisions, build relationships, learn well, work well, and contribute to their community. Exposure to adverse social, economic, and environmental circumstances – including poverty, violence, inequality, and environmental deprivation – increases people’s risk of experiencing mental health conditions (World Health Organization (WHO), 2022). Although the terms are often used interchangeably, poor mental health and mental illness are not the same. A person can experience poor mental health and not be diagnosed with a mental illness. Likewise, a person diagnosed with a mental illness can experience periods of physical, mental, and social well-being (Centers for Disease Control and Prevention (CDC), 2021). Using time-series data on individuals’ exposure to air pollution lowers hedonic happiness and raises the prevalence of depressive symptoms (Zhang et al., 2017). Communities also often confront systemic socio-economic challenges, including inadequate access to healthcare, unemployment, and housing instability, which further strain mental well-being (Downey and Van Willigen, 2005).

This indicator maps the geographic distribution of adults aged 18 and older who self-reported 14 or more days during the past 30 days during which their mental health was not good. This data is from a survey conducted by the Behavioral Risk Factor Surveillance System (BRFSS) (Center for Disease Control and Prevention, 2023). 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 poor mental health over 14 days or more days during the past 30 days during which their mental health was not good.

**Data Source** 2020 [PLACES – Center for Disease Control and Prevention](#), 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 represents the age adjusted rate.

Min Value	Max Value	Min Percentile	Max Percentile	Min Rank	Max Rank
0	11	0	9.05	0	1
11.1	12	9.65	18.58	1	2
12.1	12.7	19.66	28.11	2	3
12.8	13.4	29.67	37.88	3	4
13.5	14.1	39.81	49.34	4	5
14.2	14.7	51.51	58.38	5	6
14.8	15.7	59.95	69.24	6	7
15.8	17	70.81	79.01	7	8
17.1	19.4	79.73	89.38	8	9
19.5	39.5	89.75	99.88	9	10

## Works Cited

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