



World Health  
Organization

## United States of America

### GENERAL INFORMATION

United States of America is a country with an approximate area of 9364 thousand square kilometers (UNO, 2008). The population is 317,641,087 and the sex ratio (men per hundred women) is 97 (UNO, 2009). The proportion of the population under the age of 18 years is 25% and the proportion above age 60 is 13% (UNO, 2009). The life expectancy at birth is 75 years for males and 81 years for females (UNO, 2005-2010). The healthy life expectancy at birth is 68 years for males and 81 years for females (UNPD, 2010). The country is in the High income group (based on 2010 World Bank criteria). The total expenditure on health as a percentage of gross domestic product is 16.21% and the per capita government expenditure on health (PPP int. \$) is \$3076.0 (WHO, 2006). The suicide rate for males is 17.7 per 100, 000 population and for females is 4.5 per 100, 000 population. In United States of America, neuropsychiatric disorders are estimated to contribute to 30.9% of the global burden of disease (WHO, 2008).

### GOVERNANCE

An officially approved mental health policy exists and was approved or most recently revised in 2010. Mental health is specifically mentioned in the general health policy.

A mental health plan exists and was approved or most recently revised in 2011. The mental health plan components include:

- Timelines for the implementation of the mental health plan.
- Shift of services and resources from mental hospitals to community mental health facilities.
- Integration of mental health services into primary care.

Dedicated mental health legislation exists and it was initiated or most recently revised in 1992. Legal provisions concerning mental health are not covered in other laws (e.g., welfare, disability, general health legislation etc.).

Note: Regulations for the Community Mental Health Services Block Grant (CMHSBG) are being developed. Each State develops an annual Mental Health Block Grant Plan.

### FINANCING

Financing for mental health treatment today comes from a complex array of private and federal, state, and local government sources. Mental health services continue to move toward largely insurance-based and -financed systems of care, with even the public sector widely adopting private-sector models of insurance-based financing. Major health care reform legislation enacted in 2010 (the Affordable Care Act) is expected to accelerate this trend, especially the provisions to substantially expand eligibility for the federal/state Medicaid insurance program in 2014. As of 2003, the United States spent in total 100 billion USD on mental health treatment--6.2 percent of all health care spending--of which 11.6 billion USD was spent on treatment in specialty mental hospitals (Source: SAMHSA Spending Estimates Project). Federal, state, and local sources accounted for 58 percent of all mental health spending in the United States in 2003, with the federal/state Medicaid insurance program the single largest source (26% of all spending). Private insurance accounted for 24 percent of all mental health spending, while patient and family out-of-pocket spending accounted for 14 percent.

## MENTAL HEALTH CARE DELIVERY

### Primary Care

Prescription regulations authorize primary health care doctors to prescribe and/or to continue prescription of psychotherapeutic medicines. In contrast, the department of health does not authorize primary health care nurses to prescribe and/or to continue prescription of psychotherapeutic medicines. Likewise, official policy does not permit primary health care nurses to independently diagnose and treat mental disorders within the primary care system.

The majority of primary health care doctors and nurses have not received official in-service training on mental health within the last five years. Officially approved manuals on the management and treatment of mental disorders are not available in the majority of primary health care clinics. Official referral procedures for referring persons from primary care to secondary/tertiary care do not exist, nor do referral procedures from tertiary/secondary care to primary care .

### Mental Health Services

Availability of mental health facilities

	Total number of facilities/beds	Rate per 100,000 population	Number of facilities/beds reserved for children and adolescents only	Rate per 100,000 population
Mental health outpatient facilities	6179 <sup>a</sup>	1.95	UN	UN
Day treatment facilities	UN	UN	UN	UN
Psychiatric beds in general hospitals	45622 <sup>b</sup>	14.36	UN	UN
Community residential facilities	2074 <sup>c</sup>	0.65	1263	0.4
Beds/places in community residential facilities	70808 <sup>d</sup>	22.29	50420	15.87
Mental hospitals	803 <sup>e</sup>	0.25	UN	UN
Beds in mental hospitals	61753	19.44	UN	UN

<sup>a</sup> The number of mental health outpatient facilities also includes facilities formerly classified as Partial Care (day/night treatment) facilities.

<sup>b</sup> Includes only the inpatient psychiatric beds in Non-Federal General Hospitals with separate inpatient psychiatric units.

<sup>c</sup> Includes only Residential Treatment Centers for Adults and Residential Treatment Centers for Children with Serious Emotional Disturbance

<sup>d</sup> Number is based on active clients on a single date in the year; a one-day census count.

<sup>e</sup> Mental hospitals included State Psychiatric Hospitals and Private Psychiatric Hospitals.

Data collected in 2011

UN = information unavailable, NA = item not applicable

## Access to care

	<b>Rates per 100,000 population)</b>	<b>Females (%)</b>	<b>Under age 18 (%)</b>
Persons treated in mental health outpatient facilities	931.86	51%	29%
Persons treated in mental health day treatment facilities	UN	UN	UN
Admissions to psychiatric beds in general hospitals	479.78	UN	UN
Persons staying in community residential facilities at the end of the year	UN	UN	UN
Admissions to mental hospitals	256.89	UN	UN

Long term care in mental hospitals (% of persons staying):

Less than 1 year	UN
More than 1 and less than 5 years	UN
More than 5 years	UN

## HUMAN RESOURCES

### Workforce and training

	<b>Health professionals working in the mental health sector Rate per 100,000</b>	<b>Training of health professions in educational institutions Rate per 100,000</b>
Psychiatrists	7.79	UN
Medical doctors, not specialized in psychiatry	UN	5.30
Nurses	3.07 <sup>f</sup>	UN
Psychologists	29.03	3.78
Social workers	17.93	UN
Occupational therapists	UN	UN
Other health workers	UN	NA

### Informal human resources (Family and User Associations)

	<b>User</b>	<b>Family</b>
Present in the country?	Yes	Yes
Number of members	15000	25000
Participation in the formulation/implementation of policy/plan/legislation?	Frequently	Frequently

<sup>f</sup> Advanced practice psychiatric nurses only)

## MEDICINES

Expenditures for medicines for mental and behavioral disorders at country level

Type of Medicines	Expenditures at country level per year and per 100,000 population (in USD)
All the psychotherapeutic medicines <sup>g</sup>	UN
Medicines used for bipolar disorders <sup>h</sup>	UN
Medicines for psychotic disorders <sup>i</sup>	UN
Medicines used for general anxiety <sup>j</sup>	UN
Medicines used for mood disorders <sup>k</sup>	UN

## INFORMATION SYSTEMS

	Data on number of people/ activities are collected and reported	Data on age and gender are collected and reported	Data on patient's diagnosis are collected and reported
Persons with mental disorders treated in primary health care	Yes	No	Yes
Interventions (psychopharmacological and psychosocial) delivered in primary health care for people with mental disorders	No	No	No
Persons treated in mental health outpatient facilities	Yes	No	No
Contacts in mental health outpatient facilities	No	No	No
Persons treated in mental health day treatment facilities	No	No	No
Admissions in general hospitals with psychiatric beds	No	No	No
Admissions in mental hospitals	Yes	No	No
Days spent in mental hospitals	Yes	No	No
Admissions in community residential facilities	No	No	No

Note: a specific report focusing mental health activities in the public sector has been published by the Health Department or any other responsible government unit in the last three years.

<sup>g</sup> N03AG01, N05A, N05B, N05C, N06A

<sup>h</sup> N03AG01, N05A, N05B, N05C, N06A

<sup>i</sup> N05A (excluding N05AN)

<sup>j</sup> N05B & N05C

<sup>k</sup> N06A

UN = information unavailable, NA = item not applicable