Insights on mental health from a 2019 McKinsey Consumer survey

McKinsey conducted a national survey to understand the impact of unmet social needs on consumer health outcomes, utilization, and preferences. Given the link between unmet social needs and lower socioeconomic status, respondents for this survey included adult Medicare and Medicaid beneficiaries as well as low-income adults who were uninsured or who had purchased insurance through the individual market.

This analysis focuses on respondents who self-reported having poor mental health. See methodology for additional details.

Poor mental health is more common than you might think

1 in 5 respondents self-reported having poor mental health

21%
Poor mental health

79%
Good mental health

Individuals reporting poor mental health are more likely to use more healthcare services…

Healthcare services utilization, past 12 months

Compared to individuals reporting good mental health, those reporting poor mental health indicated:

2.0x as many emergency room visits

1.6x as many inpatient stays

1.2x as many primary care visits

…which may be linked with physical health conditions

Individuals reporting poor mental health are

3x

as likely to also report having poor physical health

Medicaid beneficiaries with mental health conditions are more likely to be diagnosed with chronic physical health conditions than the general Medicaid population[1]

↑ **5.6x** increased likelihood of arthritis

↑ **3.8x** increased likelihood of hypertension

↑ **3.4x** increased likelihood of diabetes

1. Based on claims analytics (independent from 2019 McKinsey Consumer Social Determinants of Health survey). General Medicaid population includes individuals with and without mental health conditions.

Individuals reporting poor mental health are nearly twice as likely to report unmet healthcare needs

Compared to those reporting good mental health, those reporting poor mental health are…

1.9x as likely to report not receiving the healthcare they need

2.5x as likely to report not seeing a doctor when sick

3.1x as likely to report not receiving needed prescription medications for physical or behavioral health conditions

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Insights on mental health from a 2019 McKinsey Consumer survey

Individuals reporting poor mental health are

40%

less likely to be satisfied with their overall healthcare experience when they do receive care…

…and they are more likely to have a negative view of providers and insurance access

Percent of individuals who agree with the statements below

" There are many good primary care physicians that I would be satisfied seeing "

44% of individuals reporting good mental health agree

30% of individuals reporting poor mental health agree

" There are many good health plans that can provide coverage for my family and me "

39% of individuals reporting good mental health agree

24% of individuals reporting poor mental health agree

Individuals reporting poor mental health want support from a variety of sources

Preferred sources of support for improving mental health[2]
% of individuals reporting poor mental health

36% would like help from primary care providers

35% would like help from psychiatrists

30% would like help from therapists

30% would like help from family or friends

27% would like to make changes on their own

2. Top 5 results shown; other options included health insurance companies, pharmacists, patient support groups, social workers, and community health workers. Results do not sum to 100%; respondents could select multiple sources of support that they would like help from in improving their mental health.

Mental health and social needs are interlinked

Individuals reporting poor mental health are

2.5x

as likely to report having multiple unmet social needs

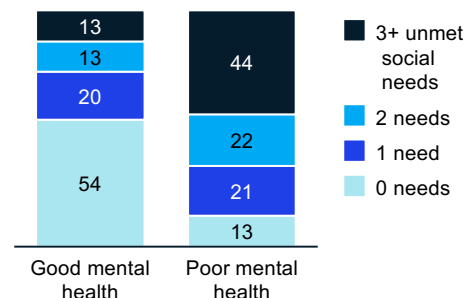### Examples of social needs

- Food environment
- Community safety
- Housing
- Social support
- Transportation
- Personal safety

Number of unmet social needs
% of individuals

	Good mental health	Poor mental health
3+ unmet social needs	13	44
2 needs	13	22
1 need	20	21
0 needs	54	13

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Methodology

Overview: McKinsey conducted a national survey to understand consumer health outcomes, utilization, and preferences as well as the impact of unmet social needs. This analysis focuses on the population who self-reported having poor mental health.

Survey details and population: Survey findings in this document are based on responses to the 2019 McKinsey Consumer Social Determinants of Health Survey. The survey was fielded in December 2018. Respondents included U.S. residents between the ages of 18-84 and were uninsured or had health insurance coverage through Medicare, Medicaid, or an individual market plan. Respondents who had individual market plans or were uninsured were limited to those with household incomes at or below 250 percent of the federal poverty level. Individuals with employer-sponsored health insurance were excluded. Results are shown for a nationally representative weighted subset of 2,010 respondents.

Mental health: For this infographic, we grouped individuals by self-reported mental health status, rather than by whether the respondents reported receiving treatment for at least one mental health condition, in order to represent the consumers' perspective of their own mental health. This approach also helps to mitigate the fact that some individuals with poor mental health may not receive treatment due to stigma or access challenges.

Survey participants were asked to rate their own mental health on a 5 point scale. Respondents reporting good mental health were defined as those who selected one of the top three options. Respondents reporting poor mental health were defined as those who selected one of the bottom two options. 21% of respondents were defined as reporting poor mental health, which is in line with the 28% of respondents who reported receiving treatment for at least one mental health condition. 69% of individuals reporting poor mental health reported receiving treatment for at least one mental health condition, as did 17% of individuals reporting good mental health.

This approach is limited in that many individuals with mental illness may not recognize that they have a mental illness, and that some individuals may choose not to self-report or may overestimate their own mental health due to the stigma of having poor mental health. However, this survey's finding that 21% of respondents self-reported poor mental health is in range of other publicly reported incidence rates of mental health conditions.[1] Additionally, the survey's guaranteed anonymity may have helped to mitigate stigma concerns.

Physical health: Survey participants were asked to rate their own physical health. Respondents with good physical health were defined as those who those who selected one of the top three options. Respondents reporting poor physical health were defined as those who those who selected one of the bottom two options.

Social needs: Impact of food security, community safety, personal safety, housing security, social support, and transportation access were defined per the methodology below. Respondents reporting an unmet social need were defined as those who were considered to be adversely impacted by the social factor.

- **Food environment:** Considered to be adversely impacted by food security if they have "very low food security" or "low food security," using questions and methodology from the USDA's screening tool to assess household food security. Methodology uses U.S. Household Food Security Survey Questions, USDA.

- **Community safety:** Considered to be adversely impacted by community safety if they reported low-scoring responses to questions about general feelings about their community (e.g., whether people in the community take care of each other), concerns about community crime (e.g., worries about theft or assaults), and perceptions of community problems (e.g., presence of litter, abandoned buildings, noise violations)and crime indicators .

- **Personal safety:** Considered to be adversely impacted by personal safety if they reported needing medical care due to physical violence or indicated being afraid of a partner or co-resident.

- **Housing:** Considered to be adversely impacted by housing if they indicated that they do not have housing or have housing but are worried about losing it.

- **Social support:** Considered to be adversely impacted by social support if they reported low-scoring responses to questions about emotional and social loneliness, and about availability of emotional and physical social support (e.g., sources of emotional strength and help with practical activities).

- **Transportation:** Considered to be adversely impacted by transportation if they indicated that transportation has kept them from work, meetings, or getting things needed for daily living, or that it takes 60 minutes or longer to get to a doctor's appointment.

Claims analyses: For analyses conducted using claims data, mental health conditions were defined using a proprietary code list that includes mental illnesses (including mild conditions such as anxiety or depression as well as more severe conditions such as schizophrenia) and substance use disorders (such as opioid use disorder, alcohol use disorder, etc.). These analyses did not include data from the 2019 McKinsey Consumer Social Determinants of Health Survey.

1. The 2018 National Survey on Drug Use and Health found that 19% of adults in experienced a mental illness.

Source: Substance Abuse and Mental Health Services Administration. (2019). Key substance use and mental health indicators in the United States: Results from the 2018 National Survey on Drug Use and Health (HHS Publication No. PEP19-5068, NSDUH Series H-54). Rockville, MD: Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration. Retrieved from https://www.samhsa.gov/data/

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