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Race, Gender and Mental Health Outcomes in Tennessee

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Race, gender, and mental health outcomes in Tennessee

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Abstract

Tennessee has been disproportionately burdened with high levels of mental health disorders. Over the last decade, Tennessee has consistently ranked in the bottom ten (10) U.S. states in the prevalence of mental health disorders. While it is known that Tennessee ranks lower in mental health status, less is known of how these differences vary across race and gender. The current study explores the association between mental health and gender across the various racial groups in Tennessee.

Background

Mental health, is defined by the World Health Organization as ‘a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and can contribute to her or his community’.¹

It involves emotional, cognitive and behavioral well-being. It impacts health and wellness and affects our daily living, human relationships and physical health.²

Mental health varies across gender, and women have been associated with negative mental health, compared to males of the same age category.³

Previous studies have shown significant mental health associations across various races, with blacks more negatively impacted.⁴

According to America’s Health Ranking’s (AHR) annual report, Tennessee ranks in the top 5(five) states with the worst mental health outcomes.⁵

However, there is limited data on the association of mental health with gender and race in Tennessee.

Methods

- Cross-sectional data from the 2019 Behavioral Risk Factor Surveillance System, a nationally representative U.S. telephone-based survey of adults aged 18 years or older for the State of Tennessee (n=6,242).
- Chi-square tests were conducted to assess differences across races.
- Logistic regression analyses were conducted to test the association between gender and the past month’s mentally unhealthy days, stratified by race.
- We coded mentally unhealthy days binary, at 15 or more mentally unhealthy days in the past month, and less than 15 days.
- Income, educational attainment, health insurance, and age were controlled for.

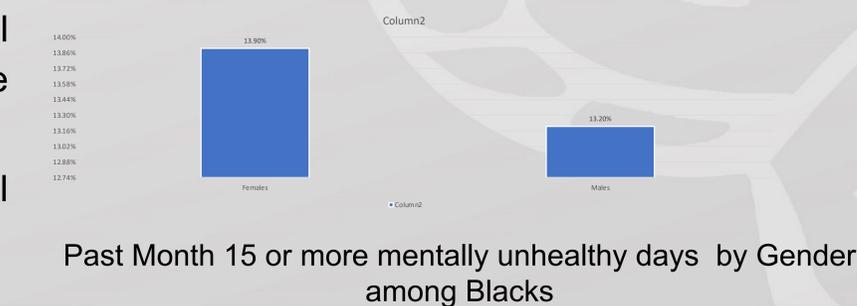
Results



Past 15 or more unhealthy days by Race/Ethnicity



Past Month 15 or more mentally unhealthy days by Gender among Whites



Past Month 15 or more mentally unhealthy days by Gender among Blacks

Table 1. Logistic regression analysis with past month 15 or more mentally unhealthy days as outcome among Whites (n=5,100)

Variable	OR, 95% CI
Gender (Female)	1.37 (1.17-1.60)*
Low income ^a	1.22 (1.09-1.47)*
< High school education	1.28 (1.13-1.52)*
Does not have health insurance	1.08 (0.97-1.19)
Age	0.88 (0.85-0.92)*

^a=Low income was coded binary, with annual household income <\$35,000
* = P < .05

Table 2. Logistic regression analysis with past month 15 or more mentally unhealthy days as outcome among Blacks (n=727)

Variable	OR, 95% CI
Gender (Female)	1.18 (0.74-1.89)
Low income ^a	1.63 (1.37-1.96)*
< High school education	1.58 (1.23-1.82)*
Does not have health insurance	1.22 (1.03-1.41)*
Age	0.89 (0.86-0.93)*

^a=Low income was coded binary, with annual household income <\$35,000
* = P < .05

Conclusion

- Findings reveal that among Whites and American Indian/Alaska Natives, females reported a significantly higher rate of past month mentally unhealthy days.
- Among Blacks and Hispanics in Tennessee, there were no significant gender differences in mental health outcomes.
- The current study reports that the gap among males and females in report of poorer mental health has narrowed, particularly among Blacks and Hispanics in Tennessee.
- Further efforts towards providing equitable access to mental health services across race and gender in Tennessee, is essential.

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