

Behavioral Health Summary – Nye Communities Coalition

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Demographic Snapshot

Table 1. Selected demographics for Esmeralda, Lincoln, Nye County, and Nevada.

	Esmeralda	Lincoln	Nye	Nevada
Population, 2015 estimate*	963	4,963	45,277	2,874,075
Population, 2010 estimate*	810	5,364	43,963	2,705,845
Population, percent change*	18.9%	-7.5%	3.0%	6.2%
Male persons, estimated percent 2015*	53.6%	52.4%	50.0%	50.3%
Female persons, estimated percent 2015*	46.4%	47.6%	50.0%	49.7%
Land area (square miles), 2010**	3,582	10,633	18,182	109,781
Median household income**	\$31,528	\$40,550	\$41,757	\$52,800
Persons below poverty level, percent**	14.0%	15.1%	16.8%	15.0%

*Source: Nevada State Demographer's Office

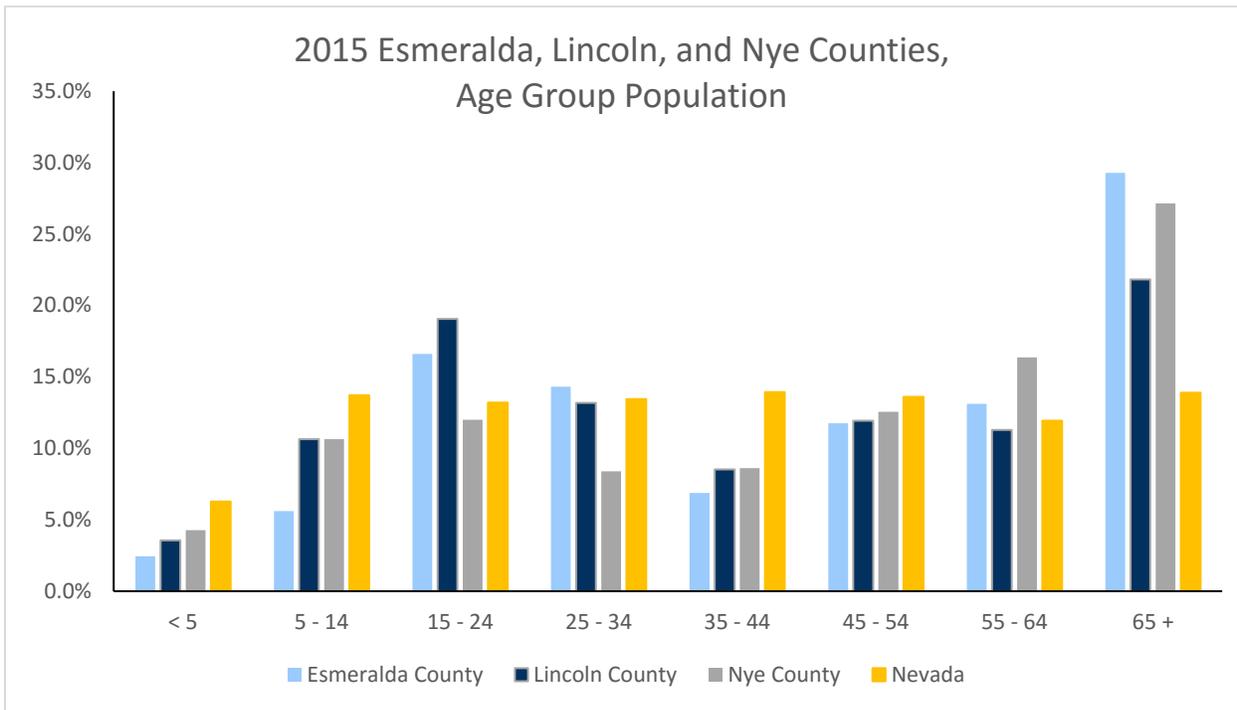
**Source: US Census Bureau

In 2015, the estimated population for Esmeralda County, Nevada was 963, a 19% increase from the 2010 estimated population. The population is made up of approximately 54% males and 46% females. The median household income is \$31,528, well below Nevada's median household income of \$52,800. Approximately 14% of the population in Esmeralda County live below the poverty level, compared to 15% of the population in Nevada. Esmeralda County land area is approximately 3,582 square miles and represents 3.3% of Nevada's total land area.

The estimated population for Lincoln County, Nevada in 2015 was 4,963, a 7.5% decrease from the 2010 estimated population. The population is made up of approximately 52% males and 48% females. The median household income in Lincoln County is \$40,550 with nearly 15% of the population living below the poverty level. Lincoln County land area is approximately 10,633 square miles and represents 9.7% of Nevada's total land area.

The estimated population for Nye County, Nevada was 45,277, a 3.0% increase from the 2010 estimated population. The population is made up of approximately 50% males and 50% females. The median household income is \$41,757 with nearly 17% of the population in Nye County live below the poverty level. Nye County land area is approximately 18,182 square miles and represents 16.6% of Nevada's total land area.

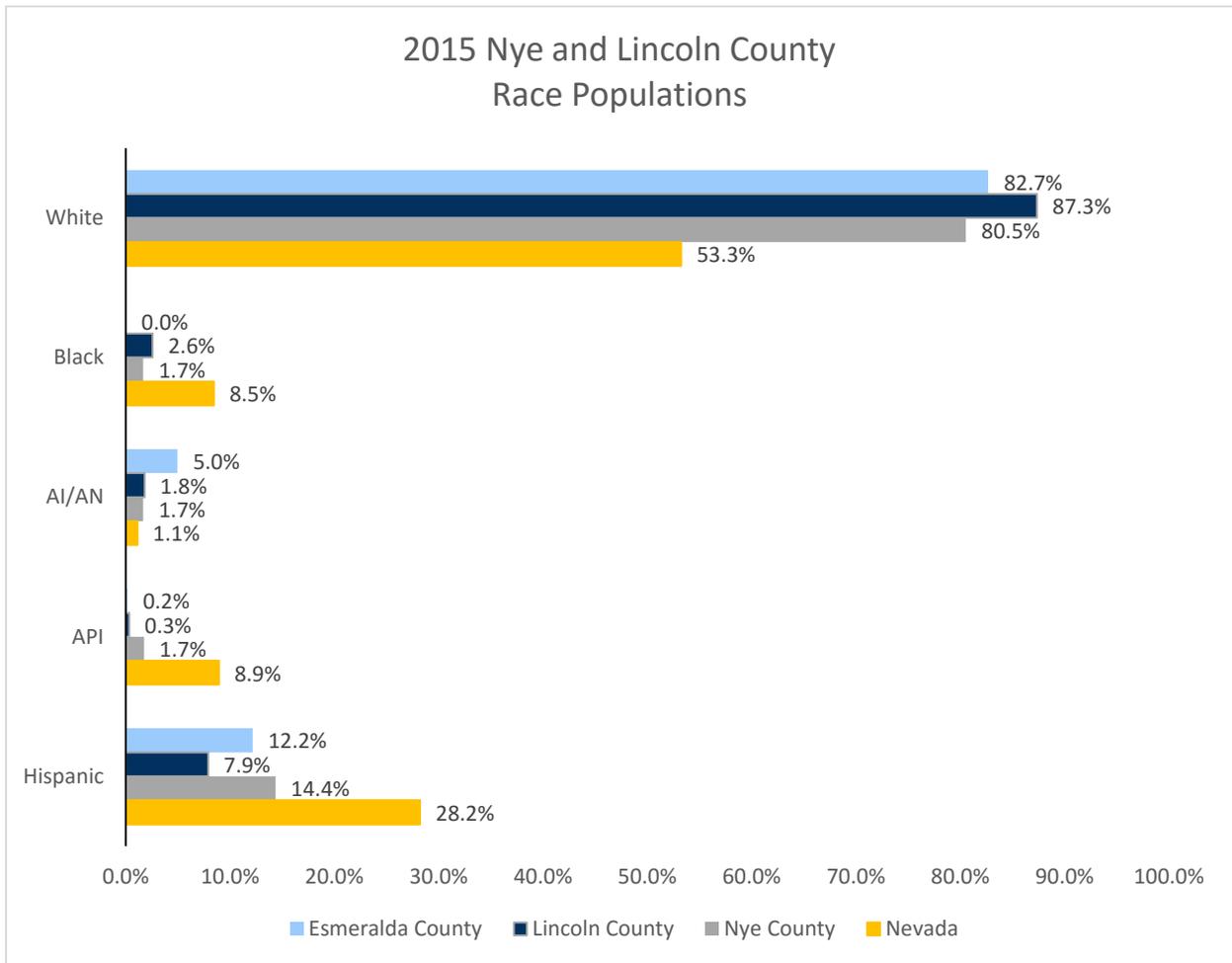
Figure 1. Esmeralda, Lincoln, and Nye County, and Nevada populations by age group.



Source: Nevada State Demographer

Age population breakdowns for Esmeralda, Lincoln, and Nye County vary from each other and from Nevada’s age population breakdown in a majority of the age groups. The largest difference was in the 65 and older age group. This age group accounted for 30% of the population of Esmeralda County, 22% of Nye County, and 27% of Lincoln County, while the same age group accounted for just 14% in Nevada. The other notable difference was among the 15-24 age group, which consisted of 17% of Esmeralda County’s and 19% of Lincoln County’s population, compared to 13% of Nevada’s.

Figure 2. Esmeralda, Lincoln, and Nye County, and Nevada racial/ethnic breakdowns for 2015.



Source: Nevada State Demographer

Esmeralda, Lincoln, and Nye County race/ethnicity breakdown compared to Nevada’s shows that these counties have a greater proportion of White while Nevada’s population as a whole has a greater proportion of Hispanic, Asian, and Black.

Mental Health Clinics

The data in this section comes from Avatar, an electronic mental health medical record system used by the Division of Public and Behavioral Health (DPBH). DPBH is the largest provider of mental health services in Nevada.

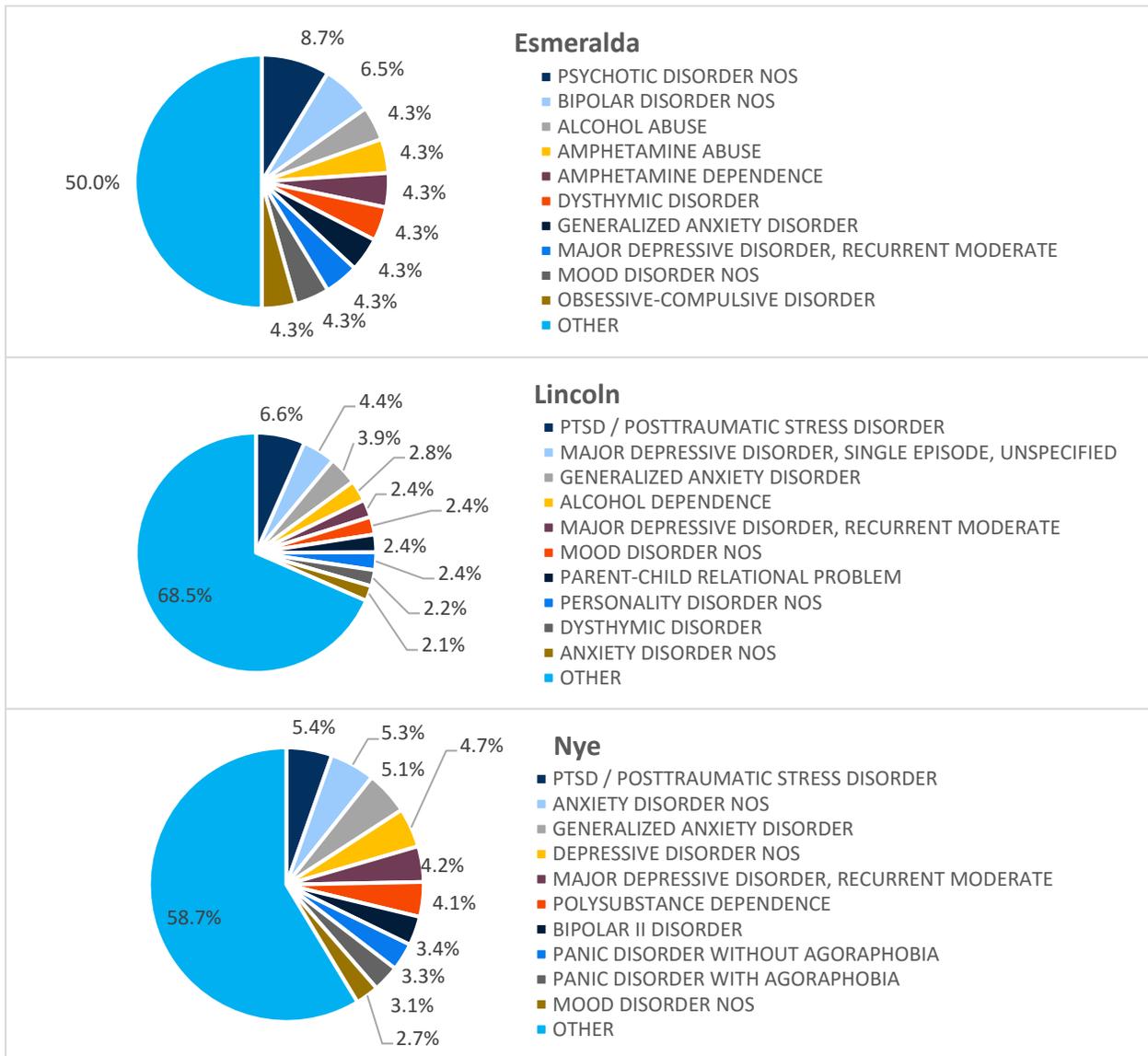
Figure 3. Top 5 mental health clinic services for Esmeralda, Lincoln, and Nye County residents with number of patients served, 2010-2014.



*Source: Nevada Avatar. De-duplicated patients. However, a patient can use more than one service during one admission period; while the services are de-duplicated, a patient can occur in more than one service.

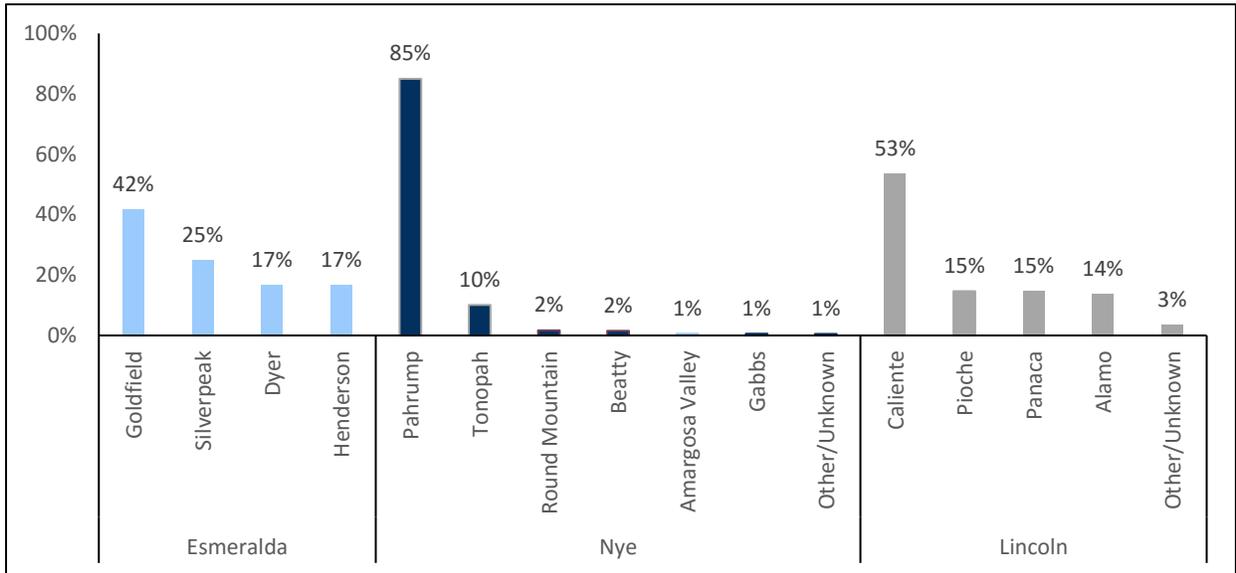
During the time from 2010 to 2014, 1,493 Esmeralda, Lincoln, and Nye County residents received mental health services from DPBH. Overall services totaled 5911, as many patients used multiple services. The most common location of services occurred in an out-patient counseling setting, followed by medication clinic.

Figure 4. Most Common Diagnosis among Esmeralda, Lincoln, and Nye County residents, 2010-2014



During the period of 2010 to 2014, the most common primary mental health diagnosis for a Nye and Lincoln County residents was Post Traumatic Stress Disorder (PTSD) (5% and 7% respectively). In Esmeralda County on the other hand, Psychotic Disorder NOS was the most common (9%), followed by Bipolar Disorder NOS (7%), Alcohol Abuse (4%), Amphetamine Abuse (4%) and Dependence (4%). In Nye County, this is followed by Anxiety Disorder NOS (5%), Generalized Anxiety Disorder (5%), Depressive Disorder NOS (5%), and Major Depressive Disorder, Recurrent Moderate (4%). In Lincoln County, this is followed by Major Depressive Disorder, Single Episode, Unspecified (4%), Generalized Anxiety Disorder (4%), Alcohol Dependence (3%) and Major Depressive Disorder, Recurrent Moderate (2%). Patients may have multiple diagnoses noted during the course of their treatment, but the primary diagnosis noted is the most dominant.

Figure 5. Esmeralda, Lincoln, and Nye County residents who access mental health clinics city of residence, 2010-2014.



Of the Esmeralda County residents accessing DPBH mental health services between 2010 and 2014, slightly less than half (42%) lived in Goldfield. The remaining residents lived in Silverpeak (25%), Dyer (17%) and Henderson (17%).

Of the Lincoln County residents accessing DPBH mental health services between 2010 and 2014, approximately half (53%) lived in Caliente. The remaining residents lived in Pioche (15%), Panaca (15%) and Alamo (14%). Three percent of residents accessing mental and behavioral clinics had residences that are unknown, invalid, or listed as other.

Of the Nye County residents accessing DPBH mental health services between 2010 and 2014, the majority (85%) lived in the city of Pahrump. The remaining residents lived in Tonopah (10%), Round Mountain (2%), Beatty (2%), Amargosa Valley (1%), or Gabbs (1%). One percent of residents accessing mental and behavioral clinics had residences that are unknown, invalid, or listed as other.

Table 2. Demographics of Esmeralda, Lincoln, and Nye County residents who accessed state funded adult mental health clinics, 2010-2014.

	2010	2011	2012	2013	2014
Sex					
Female	342	347	358	301	358
Male	200	192	191	173	181
Unknown	4	1	0	1	2
Total	546	540	549	475	541
Age					
0-17	45	30	49	46	49
18-30	139	112	102	97	101
31-50	228	245	235	199	202
51-65	125	140	155	121	160
66-100	9	12	8	8	29
Unknown	0	1	0	4	0
Total	546	535	549	473	541
Race					
White	465	453	444	354	360
Black	12	17	15	13	16
Asian	3	2	3	4	4
Alaskan Native/American Indian	13	11	5	5	6
Native Hawaiian/Pacific Islander	6	5	6	3	4
Two or more races	21	14	21	20	22
Other	13	11	21	17	15
Unknown	13	27	34	59	114
No Entry	0	0	0	0	0
Total	546	540	549	475	541
Ethnicity					
Hispanic or Latino	32	29	42	36	37
Not Hispanic or Latino	461	460	451	363	347
Unknown/No Entry	53	51	56	76	157
Total	546	540	549	475	541
Education					
=< 12th Grade - No Diploma	149	137	133	111	100
High School Graduate	148	136	127	110	110
GED	48	56	53	43	37
Some College	100	107	106	78	82
Undergraduate Degree	24	26	26	19	24
Graduate Degree	8	10	13	6	8
No Formal Education	5	2	4	6	2
Other	64	66	87	102	178
Total	546	540	549	475	541

During the 5-year period of 2010 to 2014, there were 1,493 Esmeralda, Lincoln, and Nye County adult residents that accessed mental and/or behavioral health services from DPBH state funded facilities. The totals in Table 2 above equal 2,652, reflecting that the some individuals used DPBH services during more than one year. Females comprised 64% of the patient population and males comprised 35%. White made up 78% of the population. The most populous age group was the 31-50 year olds, accounting for 42% of the patients. Patients with less than 12th grade education or no diploma accounted for 24% of the patients, followed by “high school graduate” (24%) and “other” (19%).

Hospital Emergency Room Data

The data provided in this section are from the hospital emergency room (ER) billing data compiled by the University of Nevada, Las Vegas, Center for Health Information Analysis (CHIA). The data are based on visits, not patients, therefore a single person may represent multiple visits. The ER data are broken into three parts: mental conditions (anxiety, PTSD, suicidal ideations, etc.), suicide attempts by method (hanging, jumping, firearms, etc.) and alcohol- and drug-related visits.

The following ICD-9 codes were used for analysis of mental disorders: anxiety 300.00-300.09; depression 296.20-296.36, and 311.00; bipolar disorder 296.40-296.89; PTSD 309.81; schizophrenia 295.00-295.90 and V11.0; suicidal tendencies 300.90; suicidal ideation V62.84.

The following ICD-9 codes were used for analysis of suicide attempts by method: suicide by solid or liquid E950-E950.9; suicide by gases in domestic use E951-E951.8; suicide by other gases and vapors E952-E952.9; suicide by hanging, strangulation and suffocation E953-E953.9; suicide by drowning E954; suicide by firearms, air guns and explosives E955-E955.9; suicide by cutting and piercing instrument E956; suicide by jumping from high place E957-E957.9; suicide by other unspecified means E958-E958.9.

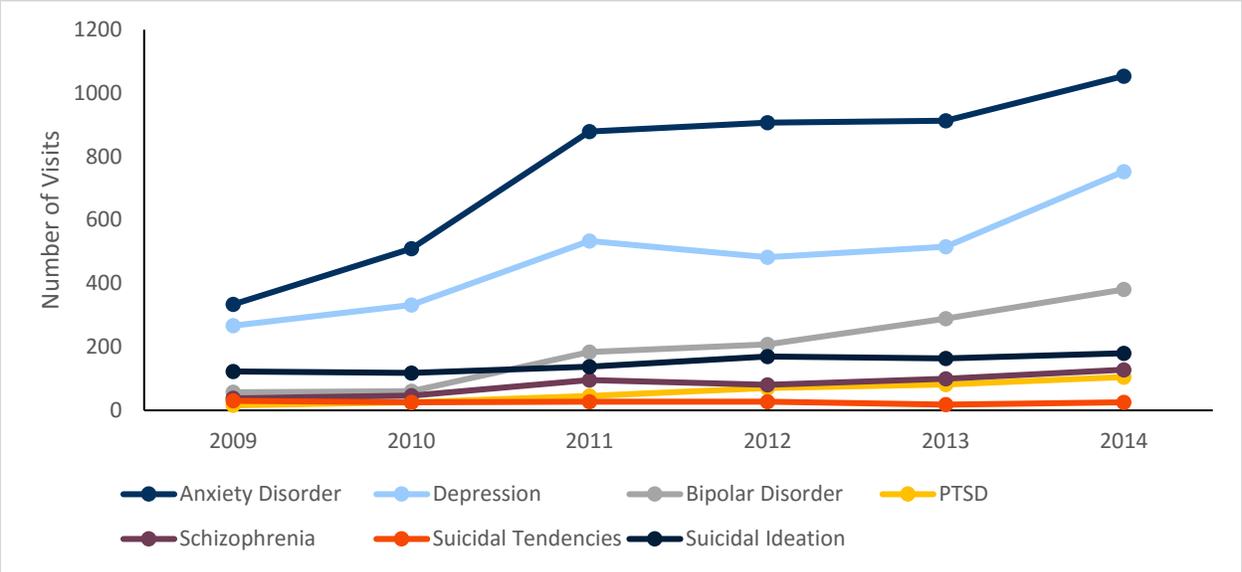
The following ICD-9 codes were used for analysis of alcohol-related admissions: 291-291.9, 303-303.93, 305.0-305.03, 535.3-535.31, 571-571.3, 980-980.9, 357.5, 425.5, 790.3, and E860-E860.9.

The following ICD-9 codes were used for analysis of substance-related admissions: 292-292.9, 304-304.93, 305.2-305.93, 965-965.99, and 967-970.99

There were a total of 12,155 visits related to mental health and substance use disorders among Esmeralda, Nye, and Lincoln County residents between 2009 and 2014 for the reasons listed above. Since an individual can have more than one diagnosis during a single ER visit, the following numbers reflect the number of times a diagnosis in each of these categories was given, and therefore the following numbers are not mutually exclusive. Diagnoses related to mental disorders occurred in

8,574 ER visits, there were 2,641 ER visits related to alcohol-related issues, 2,581 ER visits with diagnoses for drug-related issues, and 576 ER visit with diagnoses codes related to suicide attempts.

Figure 6. Number of Visits per Year for Select Mental Disorders, Esmeralda, Nye, and Lincoln County, 2009-2014.



Anxiety is the most common mental disorder seen in the emergency rooms (ER) among Esmeralda, Nye, and Lincoln County residents, related to for 53.6% of the 8,574 visits in the categories listed in Figure 6. The number of anxiety-related ER visits increased 216% from 2009 to 2014. The largest percent increase was among patient visits for issues related to bipolar which increased 568% with 57 visits in 2009 to 381 in 2014. All visits for the selected mental disorders increased over the six year period with the exception of suicidal tendencies which decreased from 30 in 2009 to 25 in 2014.

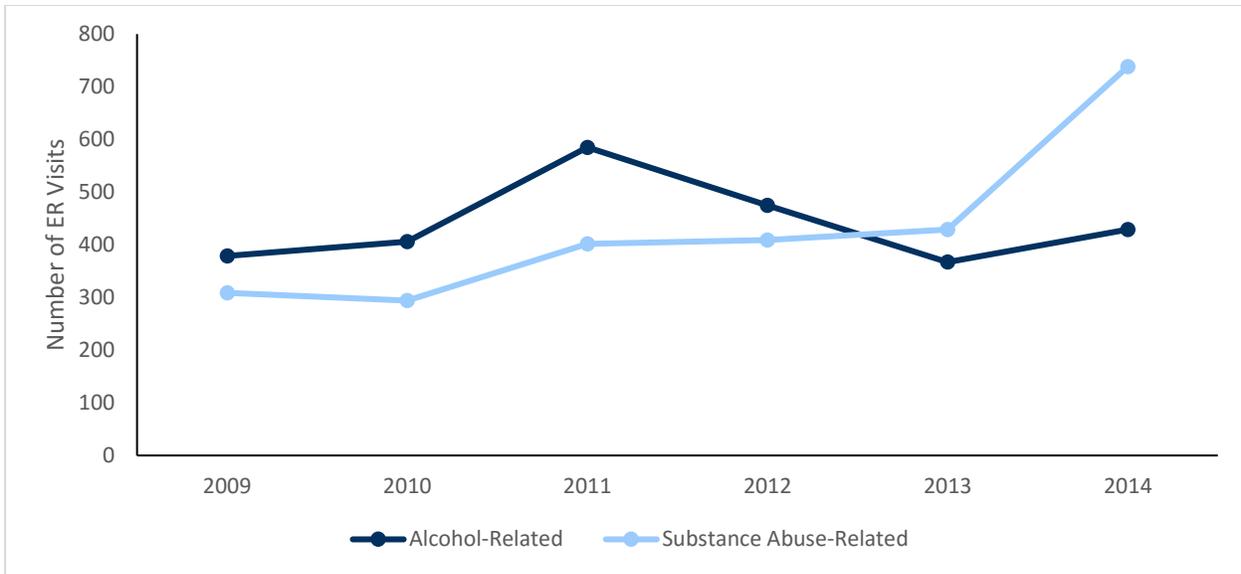
Table 3. Demographics of Esmeralda, Lincoln, and Nye County resident visits to the ER for select behavioral disorders 2009-2014.

Condition*	Female		Male		Unknown		Total
	N	Row %	N	Row %	N	Row %	
Anxiety	3,080	67.0%	1,515	33.0%	2	0.0%	4,597
Depression	1,843	63.9%	1,040	36.0%	2	0.1%	2,885
Bipolar	786	66.7%	393	33.3%	0	0.0%	1,179
PTSD	160	46.8%	182	53.2%	0	0.0%	342
Schizophrenia	223	45.7%	265	54.3%	0	0.0%	488
Suicidal Tendencies	79	52.0%	73	48.0%	0	0.0%	152
Suicidal Ideation	454	50.8%	439	49.2%	0	0.0%	893
Alcohol Related	896	33.9%	1,744	66.0%	1	0.0%	2,641
Substance Abuse Related	1,330	51.5%	1,250	48.4%	1	0.0%	2,581
Suicide - Solid or Liquid	247	63.7%	141	36.3%	0	0.0%	388
Suicide - Gases in Domestic Use	0	0.0%	1	100.0%	0	0.0%	1
Suicide - Other Gases and Vapors	1	20.0%	4	80.0%	0	0.0%	5
Suicide - Hanging, Strangulation, & Suffocation	3	30.0%	7	70.0%	0	0.0%	10
Suicide - Cutting & Piercing Instrument	91	66.9%	44	32.4%	1	0.7%	136
Suicide - Firearms, Air Guns, & Explosives	2	22.2%	7	77.8%	0	0.0%	9
Suicide - Jumping from High Place	1	100.0%	0	0.0%	0	0.0%	1
Suicide - Other Unspecified Means	19	50.0%	19	50.0%	0	0.0%	38

*Categories are not mutually exclusive

Females made up the majority of Esmeralda, Lincoln, and Nye County residents who visited the ER for anxiety (67%), bipolar (67%), and depression (64%), while the majority who visited for schizophrenia and PTSD were males (54% and 53%, respectively).

Figure 7. Trend of Esmeralda, Lincoln, and Nye County visits to ER for alcohol- and drug-related issues, 2009-2014.



Esmeralda, Lincoln, and Nye County ER visits increased for both alcohol-related and substance abuse-related issues from 2009 to 2014. Alcohol-related visits jumped from 379 visits in 2009 to 429 visits in 2014, a 13% increase. Drug-related increased from 309 visits in 2009 to a high of 738 visits in 2014, a 139% increase.

Table 4. Demographics of Esmeralda, Lincoln, and Nye County resident visits to the ER for alcohol and drug-related disorders, 2009-2014.

	Alcohol-Related	Drug- Related
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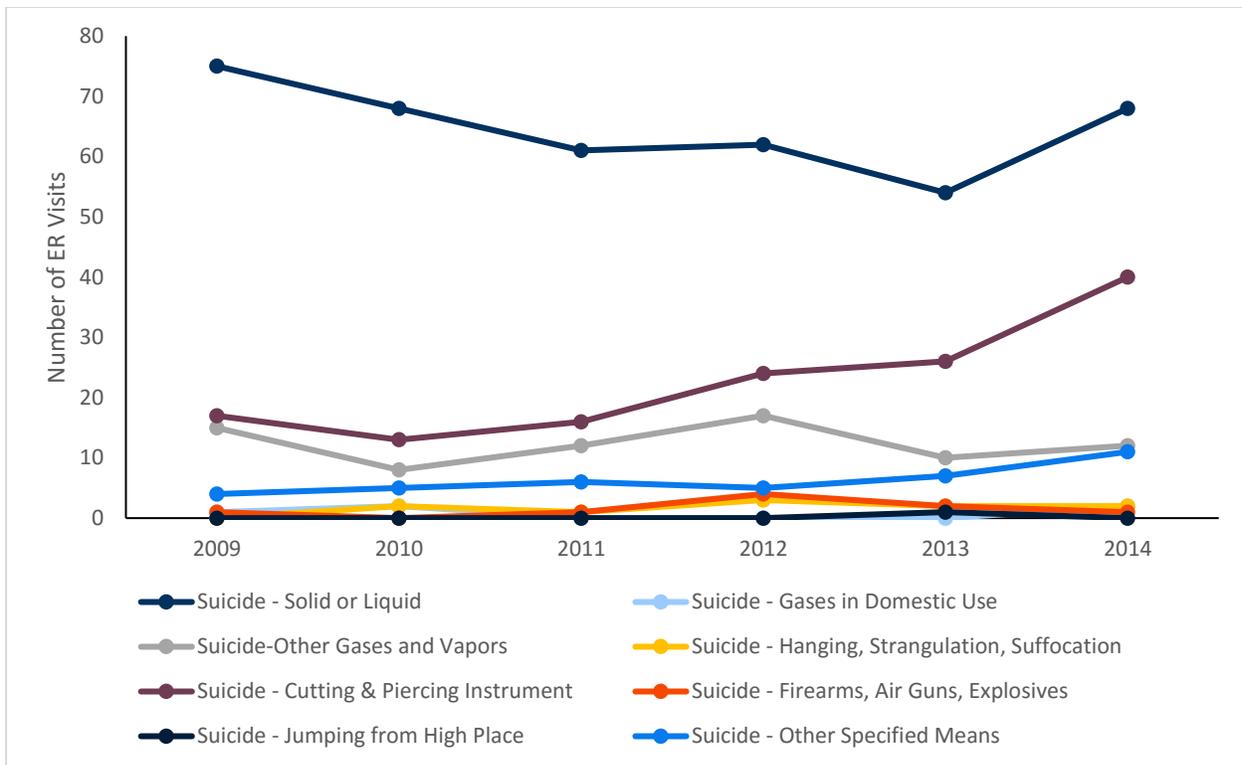
	N	Column %	N	Column %
Sex				
Female	896	33.9%	1,330	51.6%
Male	1,744	66.1%	1250	48.4%
Race				
White	2,313	87.6%	2,259	87.5%
Native American	27	1.0%	9	0.3%
Hispanic	174	6.6%	154	6.0%
Asian/Pacific	7	0.3%	12	0.5%
Black	71	2.7%	99	3.8%
Other	25	0.9%	30	1.2%
Unknown	24	0.9%	18	0.7%
Age				
0-14	4	0.2%	49	1.9%
15-24	188	7.1%	451	17.5%
25-34	318	12.0%	484	18.8%
35-44	455	17.2%	478	18.5%
45-54	812	30.7%	560	21.7%
55-64	508	19.2%	355	13.8%
65-74	238	9.0%	164	6.4%
75-84	98	3.7%	36	1.4%
85+	20	0.8%	4	0.2%

Males accounted for a greater percentage over females for alcohol-related ER visits (66%) and females accounted for a greater percentage of drug-related visits (52%) among Esmeralda, Lincoln, and Nye County residents between 2009 and 2014.

Whites made up the majority of alcohol and substance abuse-related ER visits, 88% of visits.

Alcohol-related ER visits was highest among the 45-54 (31%) year age groups. In general, ER visits declined progressively as ages increased. Approximately 22% of drug-related visits were among the age group 45-54 years.

Figure 8. Trend of Esmeralda, Lincoln, and Nye County visits to the ER for suicides, 2009-2014.

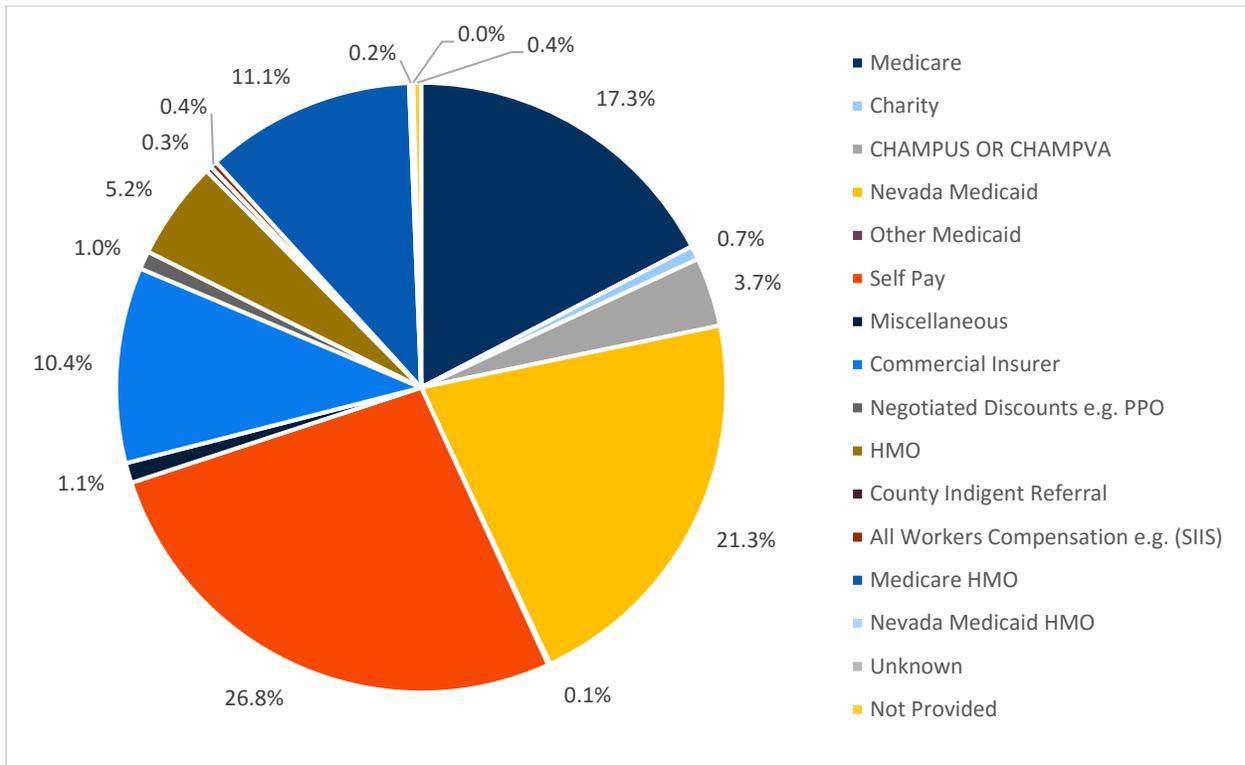


Overall number of visits to the ER for suicide among Esmeralda, Lincoln, and Nye County residents has increased by 25% from 2009-2014, from 97 visits in 2009 to 121 in 2014. The lowest number was in 2011 with 83 visits.

Suicide by solid or liquid was the top method of suicide and suicide attempts resulting in an ER visit in Esmeralda, Lincoln, and Nye County, accounting for 67% of all suicide-related ER visits from 2009-2014. In 2009, there were 75 ER visits resulting from suicide by solid or liquid and 68 visits in 2014, a decrease of 9%. The high was in 2009 with 75 visits. Suicide by solid or liquid includes all suicides where an individual entered liquid into his or her body, such as alcohols (ethanol, butanol, propanol, and methanol), fuel oil, petroleum, pesticides, herbicides, paints, dyes, and glues; or solids such as prescription pills and illegal drugs.

The second most common suicide ER visit was for those involving cutting and piercing instruments, accounting for 24% of all suicide-related visits from 2009-2014. The high 40 visits in 2014 and the low was 13 visits in 2010, a difference of 208%.

Figure 9. Percentages of Esmeralda, Lincoln, and Nye County resident visits to the ER for mental health and substance-related disorders by payment source, 2009-2014



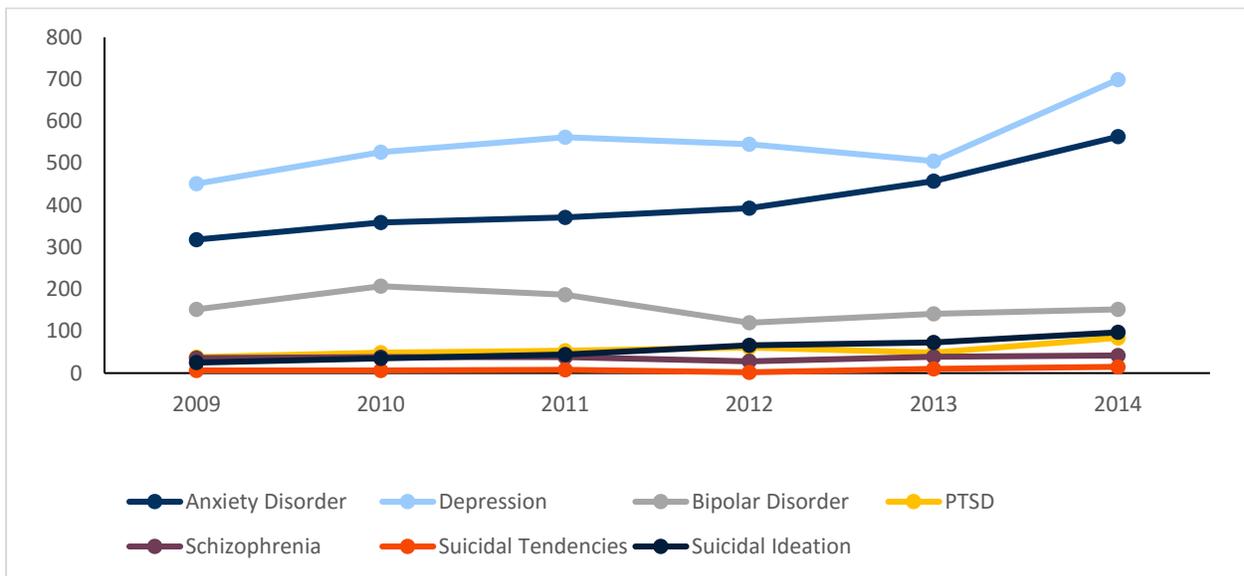
Medicare accounted for 28% of sources of payment for ER visits among Esmeralda, Lincoln, and Nye County residents with mental health and substance-related disorders. Self Pay accounted for 27% of payment types.

Hospital Inpatient Admissions

The data provided in this section are from the hospital inpatient billing data, collected by the University of Nevada, Las Vegas, Center for Health Information Analysis (CHIA). The data are based on admissions, not patients, therefore a single person may represent multiple admissions. The inpatient data are broken into three parts: mental conditions (anxiety, PTSD, suicidal ideations, etc.), suicide attempts by method (hanging, jumping, firearms, etc.) and alcohol- and drug-related admissions. The same ICD-9 codes were used for analysis as were used in hospital ER visit analysis.

There were a total of 8,556 inpatient admissions related to mental health and substance use disorders among Esmeralda, Lincoln, and Nye County residents between 2009 and 2014 for the reasons listed above. Since an individual can have more than one diagnosis during a single inpatient admission, the following numbers reflect the number of times a diagnosis was given and therefore the following numbers are not mutually exclusive. Diagnoses related to mental disorders occurred in 6,302 inpatient admissions, there were 1,982 inpatient admissions related to alcohol-related issues, 1,603 inpatient admissions for drug-related issues, and 131 inpatient admissions with diagnoses codes related to suicide attempts.

Figure 10. Trend of Esmeralda, Lincoln, and Nye County inpatient admissions for select mental health disorders, 2009-2014.



Depression was the most common mental health disorder for inpatient admissions for Esmeralda, Lincoln, and Nye County residents between 2009 and 2014, related to 52% of the admissions from the disorders listed above in Figure 10. Depression inpatient admissions has increased consistently over the six year period, from 451 admissions in 2009 to 699 in 2014, a 55% increase.

Anxiety was the second most common mental health disorder seen in inpatient admissions. Inpatient admissions has increased steadily over the six year period, from 318 admissions in 2009 to 563 in 2014, a 77% increase.

Bipolar disorder is the third most common mental health disorder seen in inpatient admissions among Esmeralda, Lincoln, and Nye County residents, related to 15% of admissions for the mental health conditions listed in Figure 10. There was no change from 2009 to 2014.

Inpatient admissions for suicidal ideation experienced the greatest percent change from 2009 to 2014 with a 288% increase. The inpatient admission counts increased from 25 in 2009 to 97 in 2014.

Table 5. Demographics of Esmeralda, Lincoln, and Nye County resident inpatient admissions for top four mental health disorders, 2009-2014.

Inpatient	Depression		Anxiety		Bipolar		Suicidal Ideation	
	N	Column %	N	Column %	N	Column %	N	Column %
Sex								
Female	2,117	64.4%	1,644	66.8%	646	67.4%	203	59.7%
Male	1,170	35.6%	816	33.2%	313	32.6%	137	40.3%
Race								
White	2,892	88.0%	2,212	89.9%	795	82.9%	255	75.0%
Black	89	2.7%	46	1.9%	42	4.4%	10	2.9%
Native American	20	0.6%	11	0.4%	14	1.5%	5	1.5%
Asian/Pacific	14	0.4%	13	0.5%	4	0.4%	2	0.6%
Hispanic	89	2.7%	59	2.4%	27	2.8%	11	3.2%
Other	84	2.6%	61	2.5%	23	2.4%	18	5.3%
Unknown	100	3.0%	59	2.4%	54	5.6%	39	11.5%
Age								
0-14	63	1.9%	13	0.5%	26	2.7%	47	13.8%
15-24	151	4.6%	53	2.2%	92	9.6%	78	22.9%
25-34	130	4.0%	124	5.0%	94	9.8%	25	7.4%
35-44	227	6.9%	193	7.8%	201	21.0%	28	8.2%
45-54	496	15.1%	403	16.4%	206	21.5%	49	14.4%
55-64	755	23.0%	511	20.8%	181	18.9%	48	14.1%
65-74	900	27.4%	703	28.6%	119	12.4%	45	13.2%
75-84	451	13.7%	362	14.7%	38	4.0%	16	4.7%
85+	115	3.5%	99	4.0%	2	0.2%	4	1.2%

Females accounted for a greater percent of inpatient admissions over males for the top mental health disorders in Esmeralda, Lincoln, and Nye County, ranging from 60% of admissions for suicidal ideations to 67% of bipolar.

A majority of inpatient admissions are white, such as with depression admissions (88%) and anxiety admissions (90%). There is a relatively large portion of “unknown” races for all selected mental health disorders, especially for admissions for suicidal ideation where unknown accounts for 12% of all admissions.

The two largest age groups for anxiety and depression inpatient admissions are those aged 55-74 years. The dominant age groups for bipolar inpatient admissions are those aged 35 to 64 years. The largest age group for suicidal ideation are those aged 15-24 years.

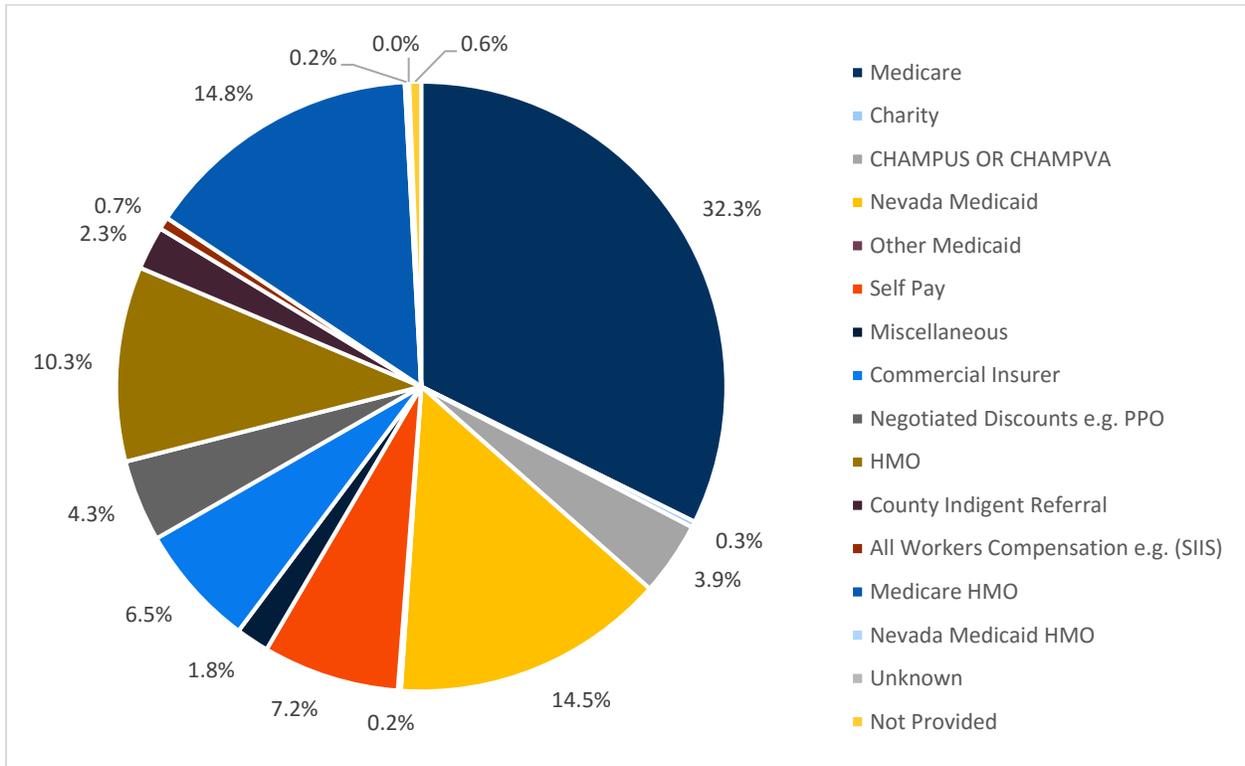
Table 6. Demographics of Esmeralda, Lincoln, and Nye County resident inpatient admissions by suicide attempts, 2009-2014.

Inpatient	Solid or Liquid		Cutting and Piercing Instrument		Firearms, Air Guns and Explosives	
	N	Column %	N	Column %	N	Column %
Sex						
Female	58	64.4%	7	58.3%	2	28.6%
Male	32	35.6%	5	41.7%	5	71.4%
Race						
White	84	93.3%	11	91.7%	6	85.7%
Black	0	0.0%	0	0.0%	0	0.0%
Native American	0	0.0%	0	0.0%	0	0.0%
Asian/Pacific	0	0.0%	0	0.0%	0	0.0%
Hispanic	1	1.1%	0	0.0%	1	14.3%
Other	3	3.3%	0	0.0%	0	0.0%
Unknown	2	2.2%	1	8.3%	0	0.0%
Age						
0-14	1	1.1%	0	0.0%	0	0.0%
15-24	13	14.4%	2	16.7%	0	0.0%
25-34	12	13.3%	4	33.3%	1	14.3%
35-44	23	25.6%	2	16.7%	3	42.9%
45-54	20	22.2%	1	8.3%	1	14.3%
55-64	16	17.8%	2	16.7%	1	14.3%
65-74	4	4.4%	1	8.3%	1	14.3%
75-84	1	1.1%	0	0.0%	0	0.0%
85+	0	0.0%	0	0.0%	0	0.0%

Females led in suicide attempts by solid or liquid (64%) and cutting and piercing instrument (58%), while males made up 71% of admission for suicide attempts by firearms, air guns and explosives. Whites represent 93% of suicide inpatient admissions by solid or liquid, about 92% of suicide by cutting and piercing instrument and 86% of suicide by firearms, air guns and explosives.

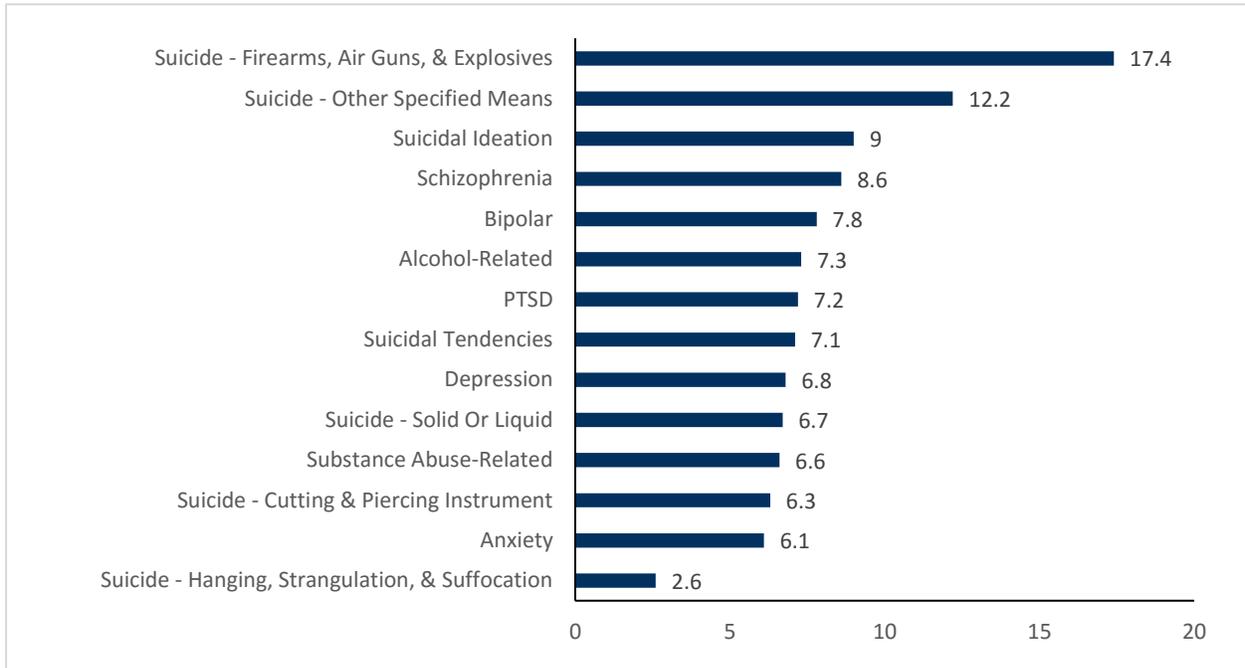
The largest age group representing suicide-related inpatient admissions by solid or liquid is 35 to 44 (26%). The age group representing the most admissions due to suicide attempts by cutting and piercing instrument was also the 25-34 age group (33%).

Figure 11. Percentages of Esmeralda, Lincoln, and Nye County resident inpatient admissions for mental health and substance-related disorders by payment type, 2010-2014



The most common payment source of mental health and substance-related inpatient admissions for Esmeralda, Lincoln, and Nye County residents was Medicare (47%). Medicaid accounted for 15% and HMO accounted for 10%.

Figure 12. Average length of stay for Esmeralda, Lincoln, and Nye County resident inpatient admissions for mental health and substance-related disorders, 2009-2014.



Note: Since an individual can have more than one of the above diagnoses during an inpatient admission, a single hospitalization may be included in multiple categories, and would contribute to the average length of stay in each of these categories.

From 2009 to 2014, inpatient admissions for suicide attempts by firearms, air guns, and explosives had the longest average length of stay at 17 days. Suicide by other specified means had an average length of stay of just under 12 days. Inpatient admissions for suicide ideation and schizophrenia had an average stay of about 9 days, bipolar (8 days), and alcohol-related, PTSD, suicide tendencies, depression, suicide by solid or liquid, and substance abuse-related (7 days).

Substance Abuse Treatment Facilities

The data in this section is reflective of services received by Esmeralda, Lincoln, and Nye County residents at treatment facilities funded by the DPBH's Substance Abuse Treatment and Prevention Agency (SAPTA). This is not a comprehensive accounting of all Esmeralda, Lincoln, and Nye County residents who receive substance use treatment. The data are based on admissions, not patients, therefore a single person may represent multiple admissions.

Table 7. Top 5 substances by admissions to Nevada substance abuse treatment facilities, Esmeralda, Lincoln, and Nye County residents, 2010-2014.

Esmeralda (2014 Only)		
Rank	Substance	Percent
1	Amphetamines/Methamphetamines	50.0%
2	Alcohol	50.0%

Lincoln (2010-2014 Aggregate)		
Rank	Substance	Percent
1	Alcohol	48.2%
2	Amphetamines/Methamphetamines	24.0%
3	Marijuana/Hashish	11.3%
4	Other Opiates/Synthetic Opiates	10.7%
5	Heroin	2.1%

Nye (2010-2014 Aggregated)		
Rank	Substance	Percent
1	Amphetamines/Methamphetamines	27.1%
2	Alcohol	25.3%
3	Marijuana/Hashish	24.4%
4	Other Opiates/Synthetic Opiates	9.8%
5	Heroin	9.3%

Of the Esmeralda County residents who received substance abuse treatment services from a SAPTA provider in 2015, amphetamines/methamphetamines and alcohol were the only substances abused (50% each).

Of the Lincoln County residents who received substance abuse treatment services from a SAPTA provider from 2010-2014, alcohol was the most common substance abused (48%), followed by amphetamines/methamphetamines (24%), marijuana/hashish (11%), and other opiates and heroin (11% and 2% respectively). It is highly important to ensure that appropriate

detoxification services are provided to persons who are under the influence of a substance. Many of the substances will cause withdrawal that can range from anxiety, hallucinations, seizures or even death.

For Nye County residents from 2010 to 2014, amphetamines/methamphetamines was the most common substance abused (27%), followed closely by alcohol and Marijuana/Hashish (25% and 24%, respectively). Other opiates/synthetic opiates were abused by 10% of those treated and heroin at 9%.

Figure 13. Trends of Esmeralda, Lincoln, and Nye County residents in Nevada state funded substance abuse treatment facilities by select substances, 2010-2014.

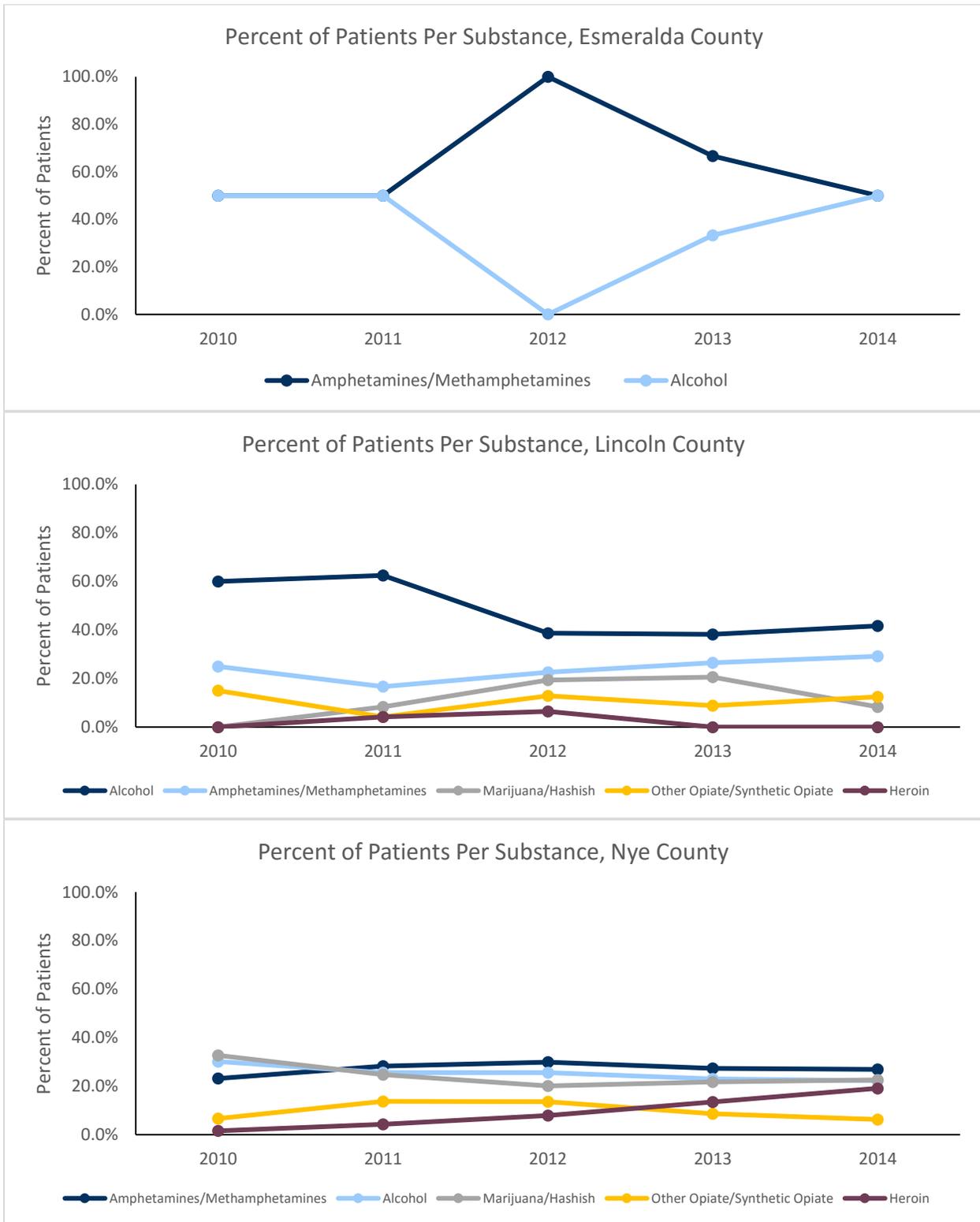


Figure 13 shows trend lines for the top five most common substances, and the percentages of Esmeralda, Lincoln, and Nye patients admitted into a treatment facility for that substance. Alcohol is one of the dominant substance seen in treatment facilities in Esmeralda County with a low of 0% of patients seeking treatment at a SAPTA-funded treatment facility in 2012 (only one patient was seen) and highs of 50% of patients in 2010, 2011, and 2014. For Lincoln County, treatment for the dependence of alcohol was highest in 2011 with 63%, and lowest in 2013 with 38%. A high of 30% in 2010 and a low of 22% in 2014 of patients seeking treatment in Nye County between 2010 and 2014, sought treatment for alcohol dependence.

The percentage of patients seeking treatment for Meth-/Amphetamines abuse in Esmeralda County peaked in 2012 (100%, only one patient sought treatment), in 2013 for Lincoln County (27%) and in 2012 for Nye County (12%).

Table 8. Demographics of Esmeralda, Lincoln, and Nye County residents in Nevada substance abuse treatment facilities, 2010-2014.

	N	Column %
Sex		
Female	760	40.9%
Male	1,100	59.1%
Age		
0-14	40	2.2%
15-24	741	39.8%
25-34	429	23.1%
35-44	304	16.3%
45-54	245	13.2%
55-64	88	4.7%
65+	13	0.7%
Unknown	0	0.0%
Race/Ethnicity		
White non-Hispanic	1,162	62.5%
Black non-Hispanic	36	1.9%
Hispanic	218	11.7%
American Indian/Native Am/Alaska Native non-Hispanic	51	2.7%
Asian, Hawaiian, PI non-Hispanic	7	0.4%
Other/Unknown	386	20.8%
Tobacco Use		
Yes	1,286	69.1%
No	395	21.2%
Unknown	179	9.6%

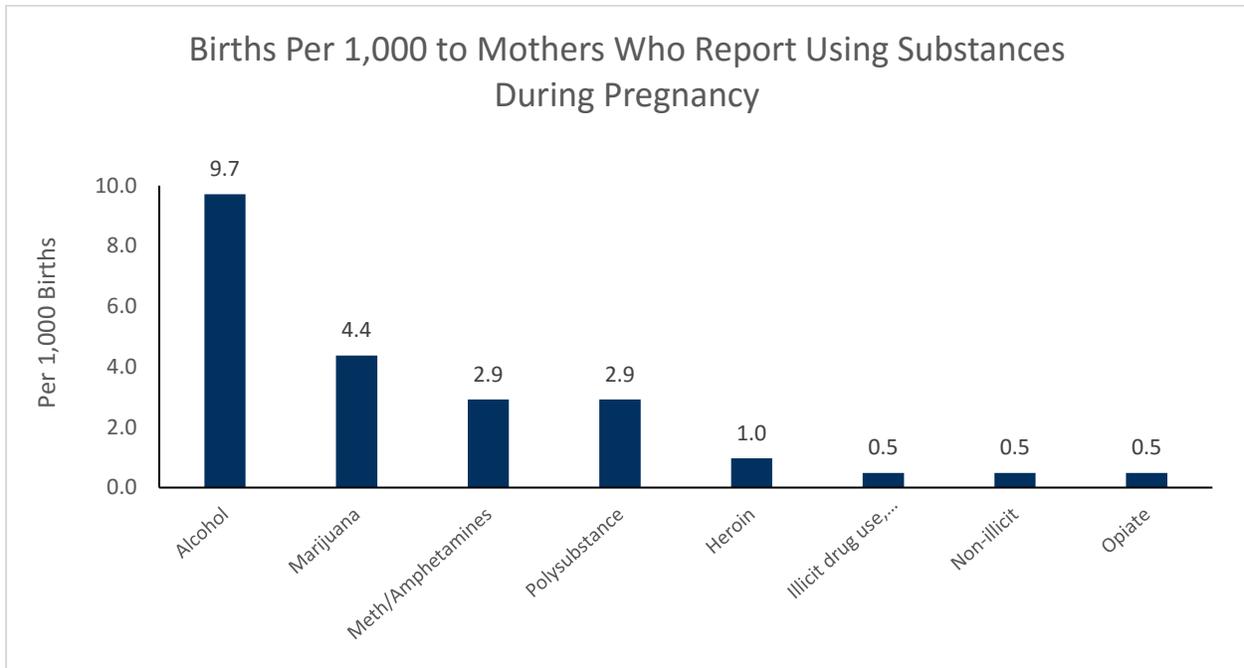
There were a total of 1,860 admissions for Esmeralda, Lincoln, and Nye County residents to Nevada state funded substance abuse treatment facilities from 2010-2014. This number is exclusive to SAPTA- funded facilities and does not include privately funded facilities. By age group, the most common groups that received treatment were between 15 to 34 years (63%). More than half were male patients (59%). For race/ethnicity, white non-Hispanics made up the largest proportion of admissions, with 63%. Tobacco use was indicated on 69% of admissions.

Since this data is exclusive to only SAPTA- funded providers, the data may not reflect statewide trends.

Prenatal Substance Use

The data in this section is reflective of self-reported information provided by the mother on the birth record.

Figure 14. Prenatal substance abuse birth rate (self-reported), Esmeralda, Lincoln, and Nye County, 2010-2014.

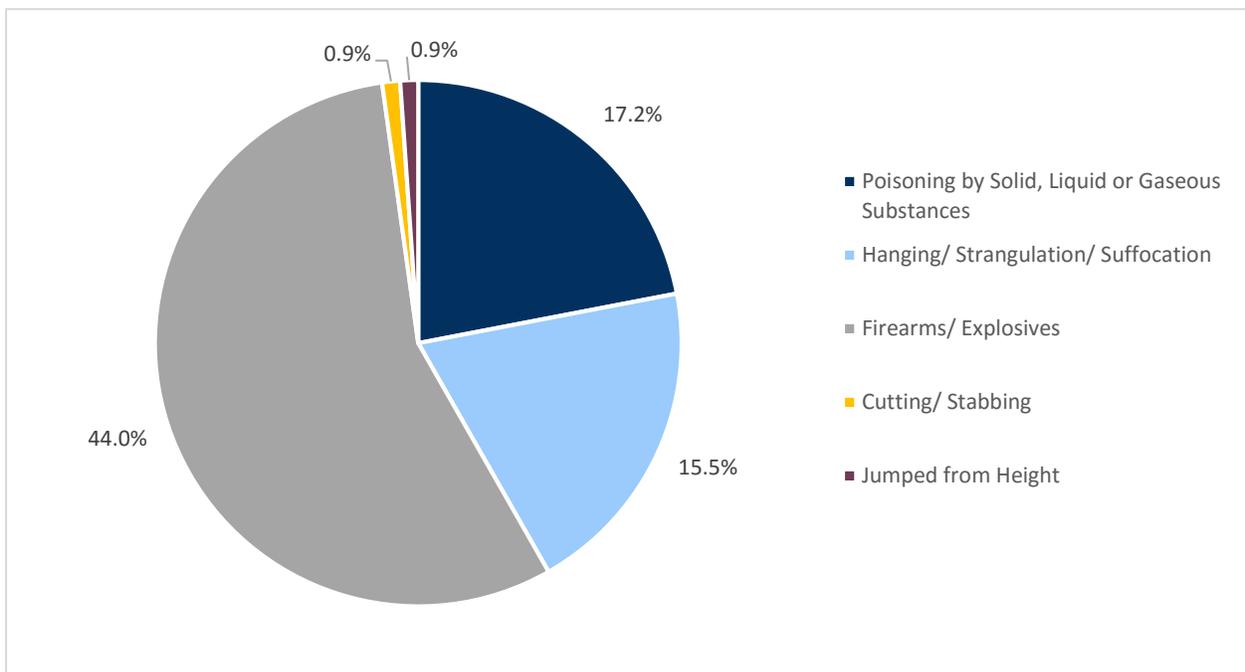


Of the Esmeralda, Lincoln, and Nye County mothers who gave birth between 2010 and 2014 that self-reported using a substance while pregnant, alcohol has the highest prenatal substance abuse birth rate at 9.7 per 1,000 births. A rate of 4.4 per 1,000 self-reported using marijuana, 2.6 per 1,000 reported using meth/amphetamines and polysubstance, and 1.0 per 1,000 births reported heroin. These numbers are grossly underestimated because data is self-reported by the mothers, and they may be reluctant to be forthcoming on the birth record for many reasons.

Mental and Substance Abuse Deaths

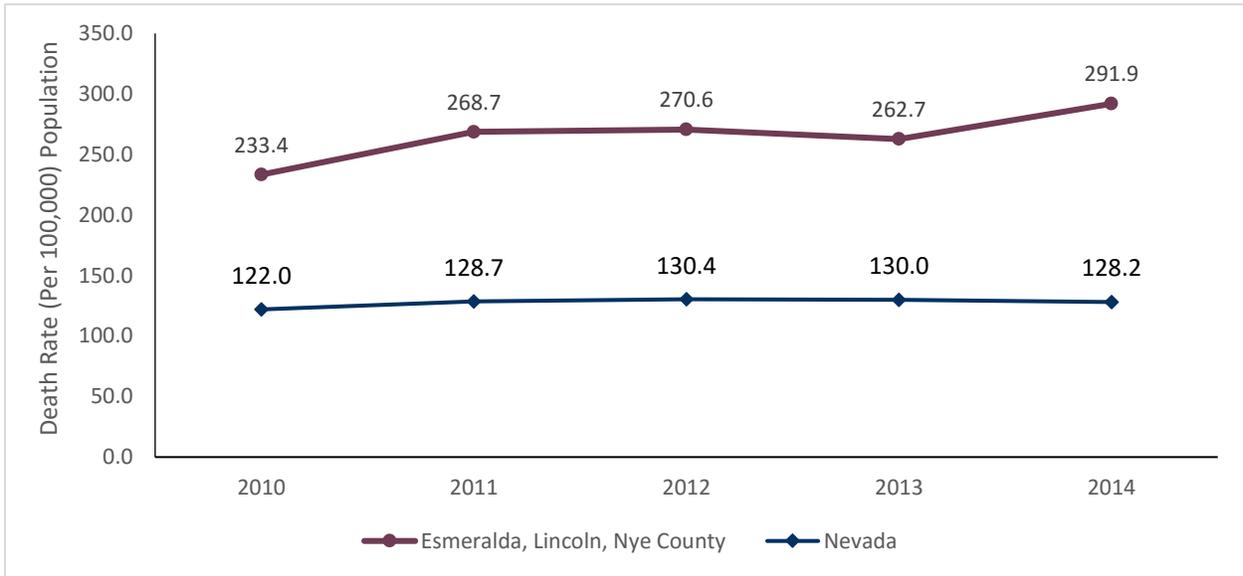
The data in this section are from the electronic death registry at DPBH. The Substance Abuse and Mental Health Service Administration (SAMHSA) reports suicide and mental illness are highly correlated with as many as 90% of those persons who die of suicide completion having a diagnosable mental illness.

Figure 15. Immediate cause of death by suicide, Esmeralda, Lincoln, and Nye County, 2010-2014.



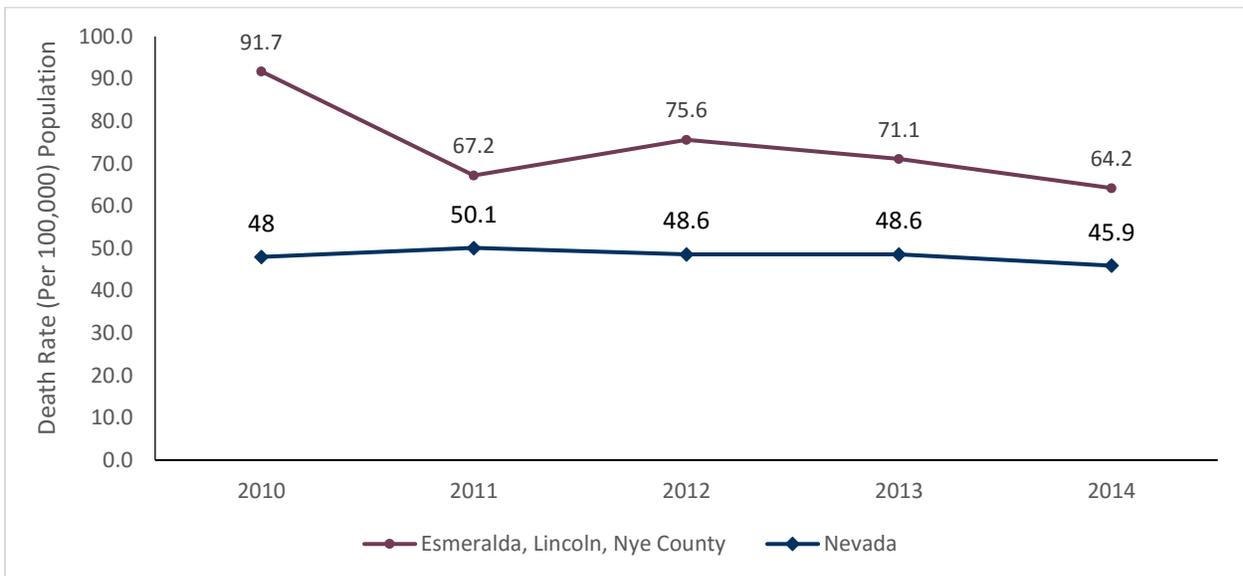
Among Esmeralda, Lincoln, and Nye County residents who died of a suicide between 2010 and 2014, the most common method of suicide was Firearms/explosives (44%), poisoning solid, liquid or gaseous substance (17%), followed by hanging/strangulation/suffocation (16%), and cutting/stabbing and other forms of suicide (1% each).

Figure 16. Trend of Mental and Behavioral Disorders Deaths, Esmeralda, Lincoln, and Nye County, 2010-2014.



Esmeralda, Lincoln, and Nye County’s death rate for mental and behavioral related deaths in 2010 was 233.4 per 100,000. This means that for every 100,000 deaths, around 233 deaths are primarily related to mental and behavioral health disorders. There was an overall percent increase of 25% between 2010 and 2014 when the rate increased to 291.9 Overall, Esmeralda, Lincoln, and Nye County mental and behavioral related death rates are lower than the Nevada rate.

Figure 17. Trend of substance-related deaths, Esmeralda, Lincoln, and Nye County, 2010-2014.



There were 187 substance-related deaths in Esmeralda, Lincoln, and Nye County between 2010 and 2014. Between 2010 and 2014 the rate decreased from 91.7 deaths per 100,000 to 64.2 deaths per 100,000. Esmeralda, Lincoln, and Nye County’s combined substance-related death rates are higher than Nevada’s rate every year between 2010 and 2014.

Table 9. Demographics of Substance Related Deaths, Esmeralda, Lincoln, and Nye County, 2010-2014.

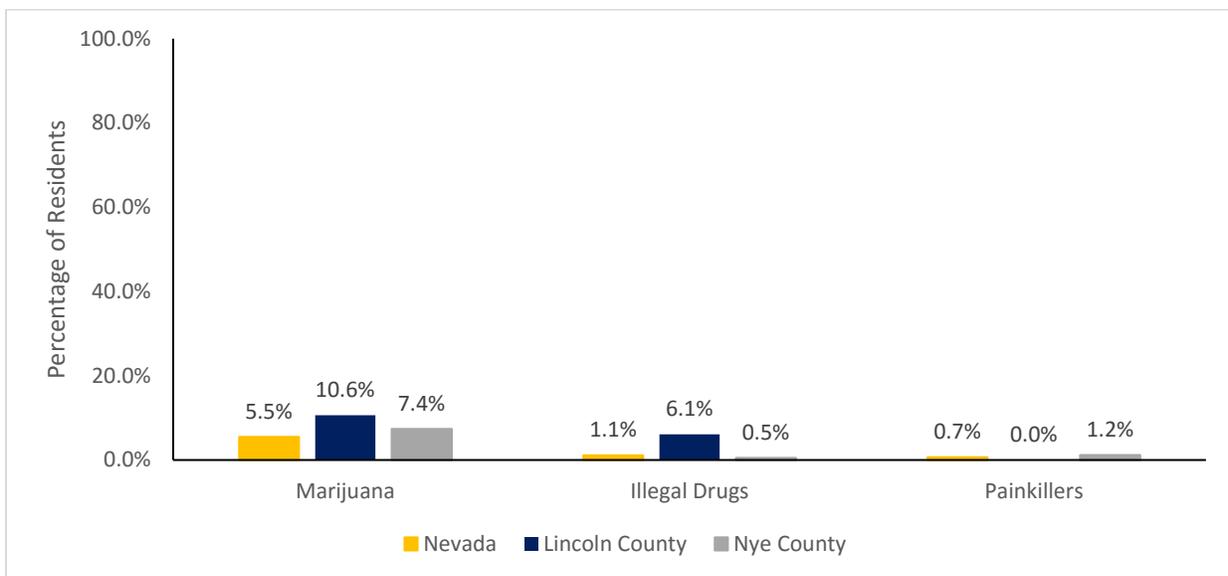
	N	Column %
Sex		
Female	84	44.9%
Male	103	55.1%
Race		
White	177	94.7%
Black	3	1.6%
Native American	2	1.1%
Hispanic	2	1.1%
Asian/Pacific	1	0.5%
Other		0.0%
Unknown	2	1.1%
Age		
<1	0	0.0%
1-4	2	1.1%
5-14	1	0.5%
15-24	9	4.8%
25-34	16	8.6%
35-44	23	12.3%
45-54	52	27.8%
55-64	39	20.9%
65-74	29	15.5%
75-84	12	6.4%
85+	4	2.1%

In Esmeralda, Lincoln, and Nye County, the most common demographic groups to die of a substance-related death included: males (55%), Whites (95%), and those aged 45 to 54 years of age (28%).

Behavioral Risk Factor Surveillance System

Data in this section are from Behavioral Risk Factor Surveillance System (BRFSS). The BRFSS is the nation's premier 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. BRFSS collects data for adults aged 18 years and older. It allows for representative data to be analyzed at the county-level for many indicators.

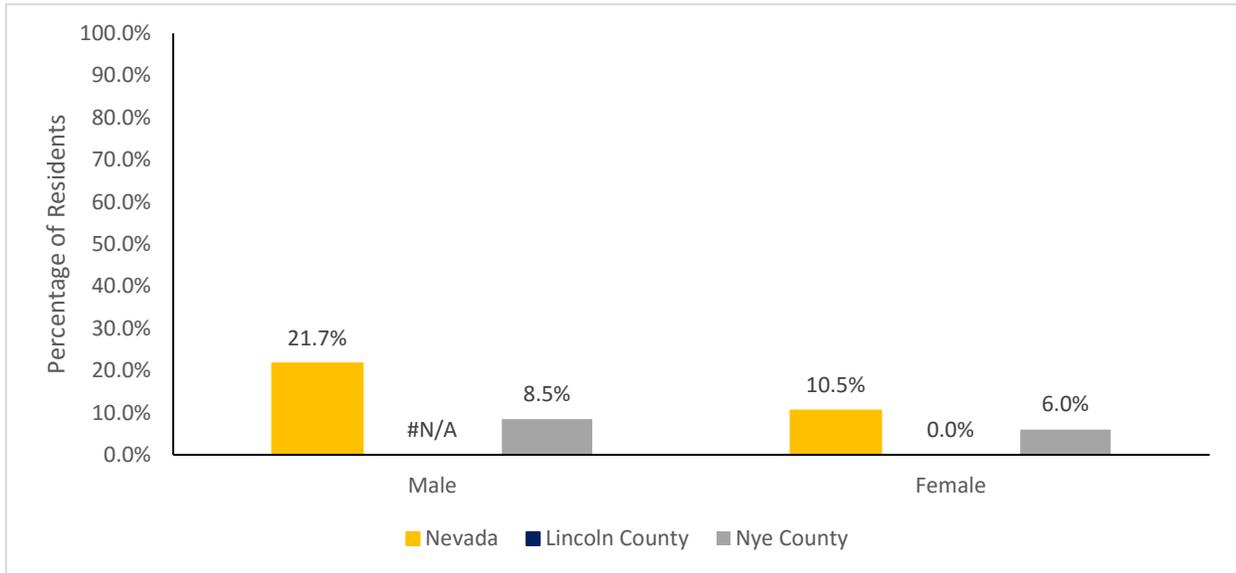
Figure 18. 2011-2014 BRFSS: Percentage of adult Lincoln and Nye County residents who used illegal substances, or painkillers 'to get high,' in the last 30 days (aggregate 2011-2014 data).



*Data from Esmeralda is unavailable

Although 5.5% of adults in Nevada reported using marijuana illegally in the last 30 days, 10.6% of adults in Lincoln County and 7.4% of adults in Nye County reported doing the same.

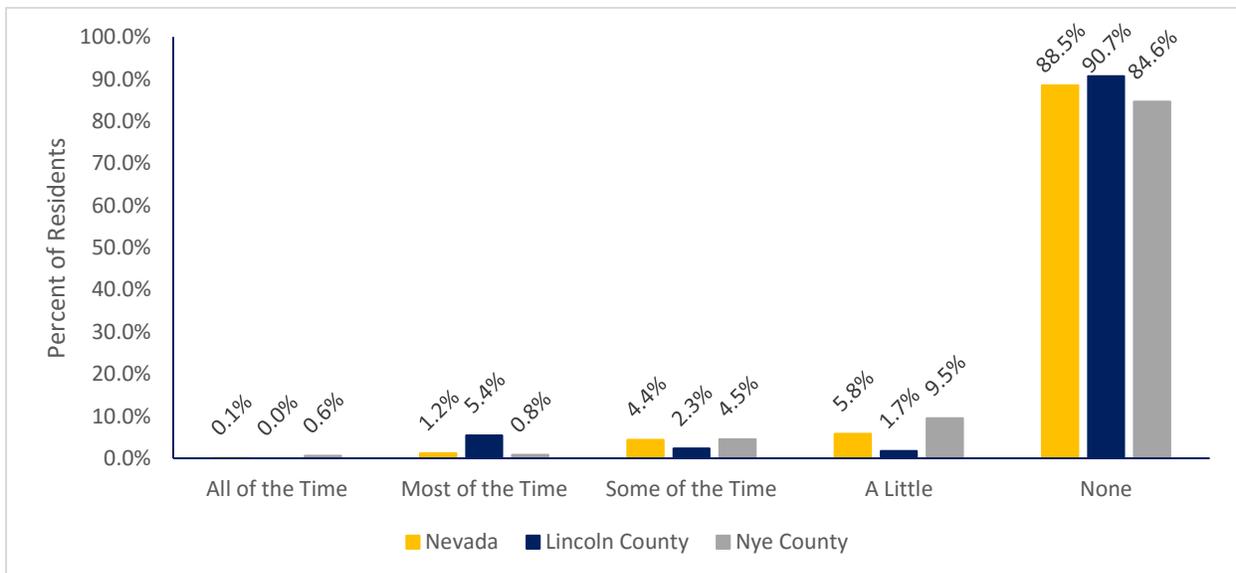
Figure 19. 2011-2014 BRFSS: Percentages of adult Lincoln and Nye County residents who are considered “heavy drinkers” - more than one drink (females) or two drinks (males) per day.



*Data from Esmeralda is unavailable

Nevada adult males and females more often reported being heavy drinkers compared to males and females in both Lincoln and Nye County (male heavy drinkers for Lincoln County were suppressed due to too few response). Heavy drinking consists of males consuming more than two alcoholic beverages a day and females consuming more than one alcoholic beverage a day.

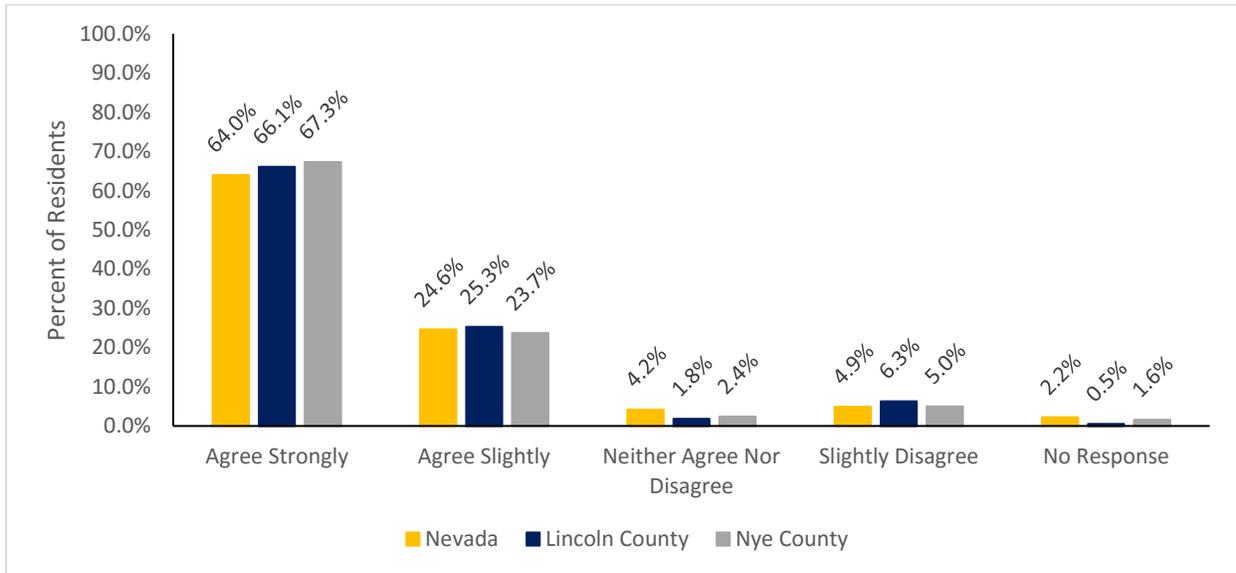
Figure 20. Percentages of how often adult Lincoln and Nye County residents have felt depressed at least one day in the past 30 days, 2012-2014.



*Data from Esmeralda is unavailable

From 2012 to 2014, adult residents in Lincoln, Nye, and Nevada almost equally reported not experiencing depression at least one day in the last 30 days (85%-91%). The rest of the residents reported experiencing a little depression (2%-10%), experiencing depression some of the time (2%-5%), most of the time (1%-5%), and all of the time (<1%).

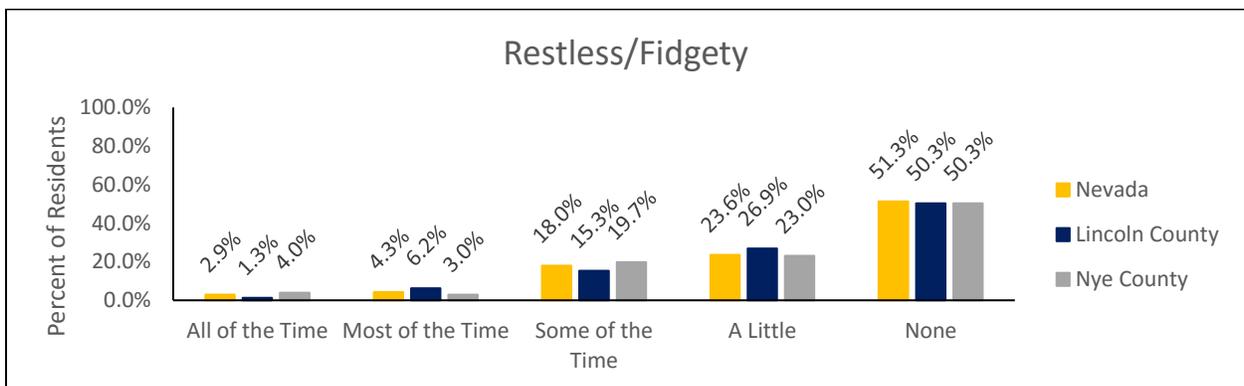
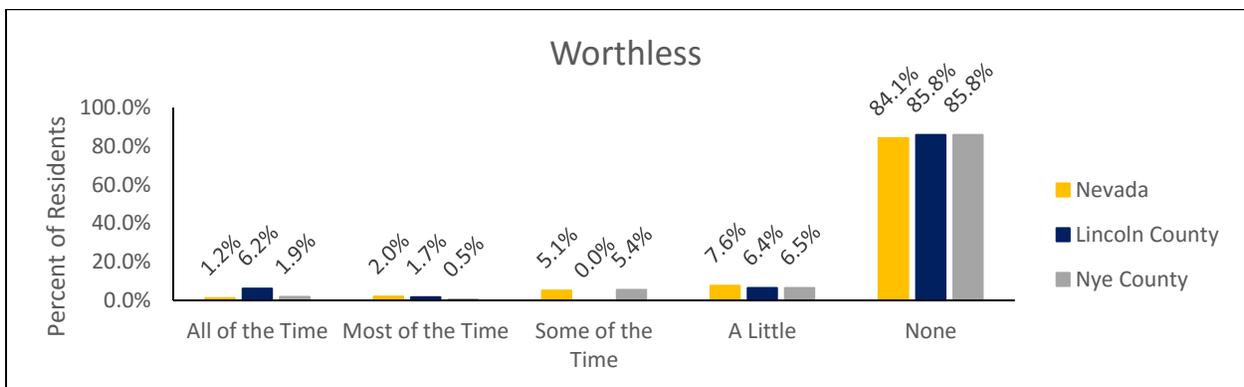
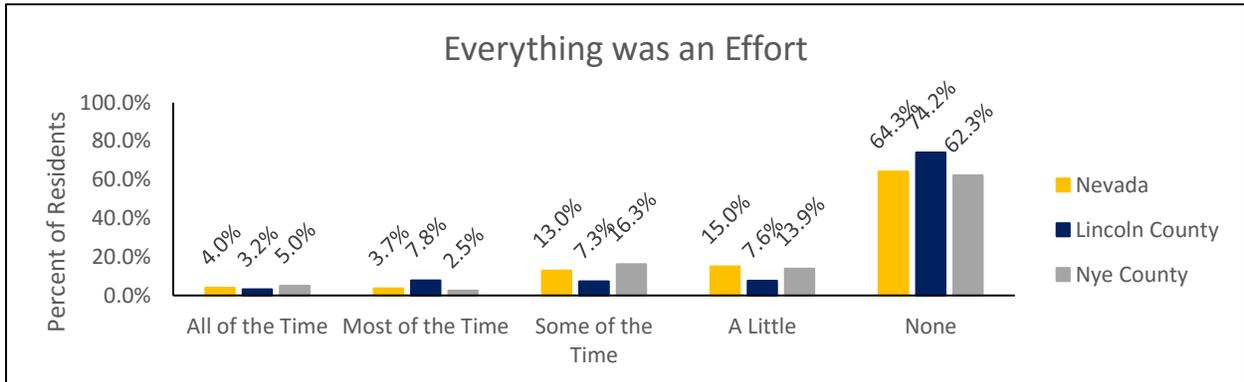
Figure 21. 2012-2014 BRFSS: Percentages of adult Lincoln and Nye County residents who agree that with treatment, people with a mental illness can live normal lives.



*Data from Esmeralda is unavailable

From 2012 to 2014, BRFSS data was collected on perception related to the efficacy of mental health treatment. In Lincoln and Nye County, approximately 91% of adults agreed in some capacity that those with mental disorders can live a normal life with treatment. Approximately 7% of adults disagree that those with mental disorders could live a normal life.

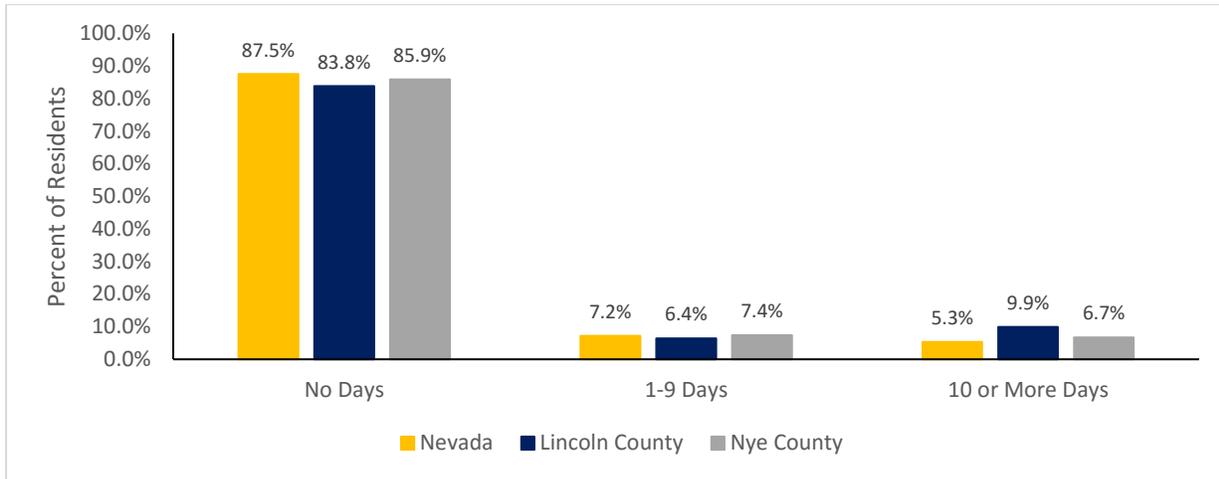
Figure 22. 2012-2014 BRFSS: Percentages of adult Lincoln and Nye County residents who have experienced the following mental health concerns in the past 30 days.



*Data from Esmeralda is unavailable

There are a number of BRFSS questions that collect data on feelings/emotions. From 2012 to 2014, 26%-38% of adults in Lincoln and Nye County residents reported feeling everything they did took effort, 14% felt worthless, and 50% felt restless and or fidgety.

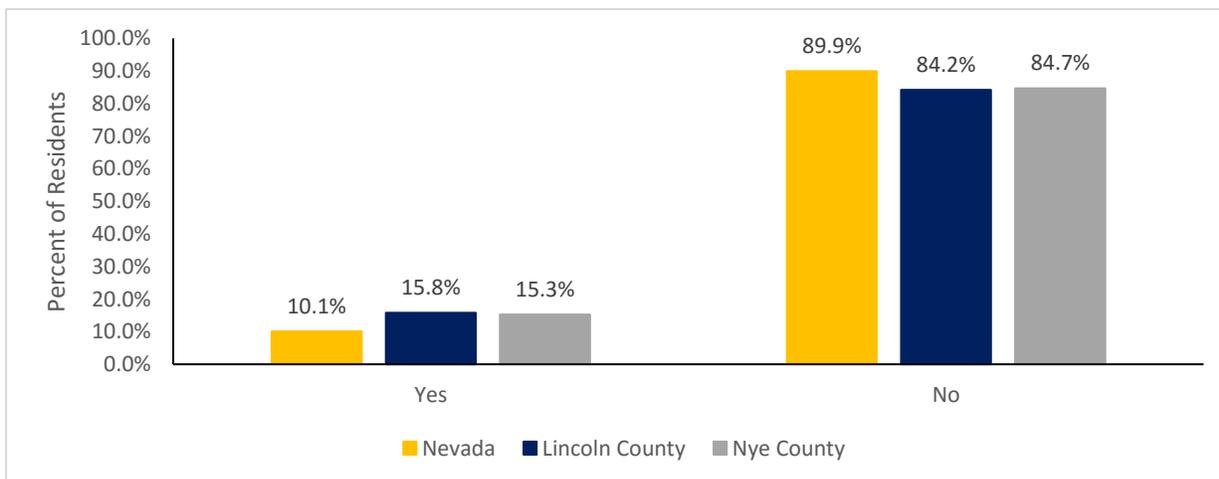
Figure 23. 2012-2014 BRFSS: Percentages of adult Lincoln and Nye County residents who experienced that a mental health condition or emotional problem kept them from doing their work or other usual activities, by number of days.



*Data from Esmeralda is unavailable

Lincoln and Nye County residents were asked how many days, if any, did a mental health condition or emotional problem keep them from doing their work duties or other usual activities. Approximately 84%-86% reported missing no days of work or activities, 6%-7% experiencing missing one to nine days, and 7%-10% missed 10 or more days.

Figure 24. 2012-2014 BRFSS: Percentages of adult Lincoln and Nye County residents who are taking medication or receiving treatment for any type of mental health condition or emotional problem.



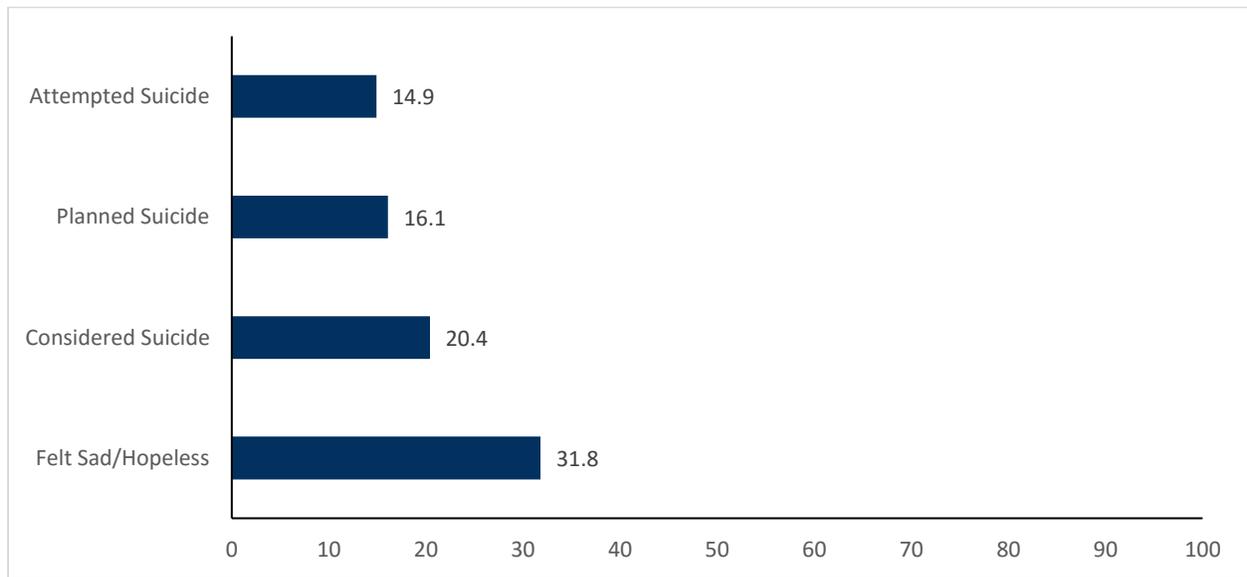
*Data from Esmeralda is unavailable

Lincoln and Nye County residents were asked if they were taking medication or receiving treatment from a doctor or other health professional for any type of mental health condition or emotional problem. Approximately 84%-85% reported that they were not.

Youth Risk Behavior Surveillance System

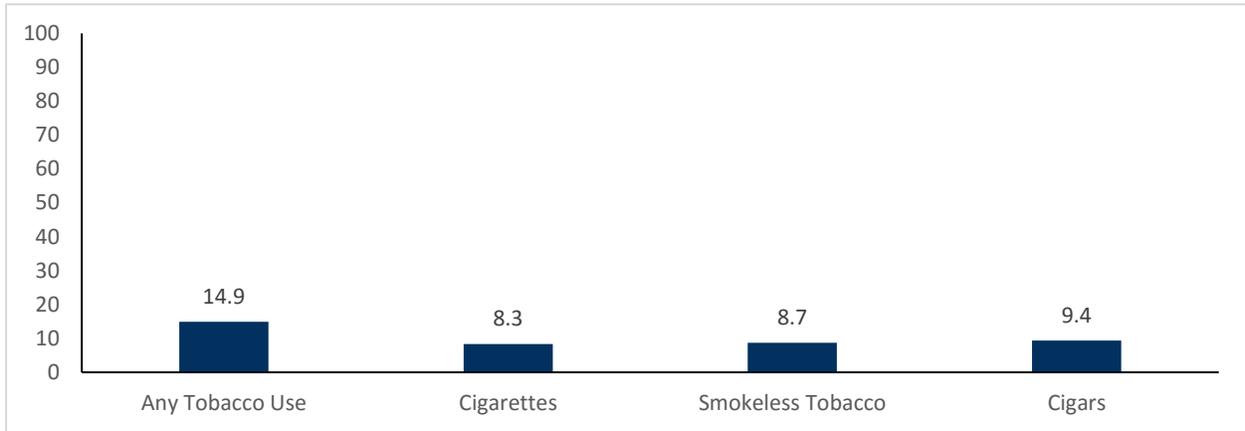
The data in this section is provided through a survey from the Youth Risk Behavioral Surveillance System (YRBSS) at a regional level for Esmeralda, Lincoln, and Nye County high school students. YRBSS is a national surveillance system that was established in 1991 by the Centers for Disease Control (CDC) and Prevention to monitor the prevalence of health risk behaviors among youth. It is an anonymous and voluntary survey of students in grades 9 through 12.

Figure 25. Percentages of high school students' mental health status (last 12 months), Esmeralda, Lincoln, and Nye County, 2015.



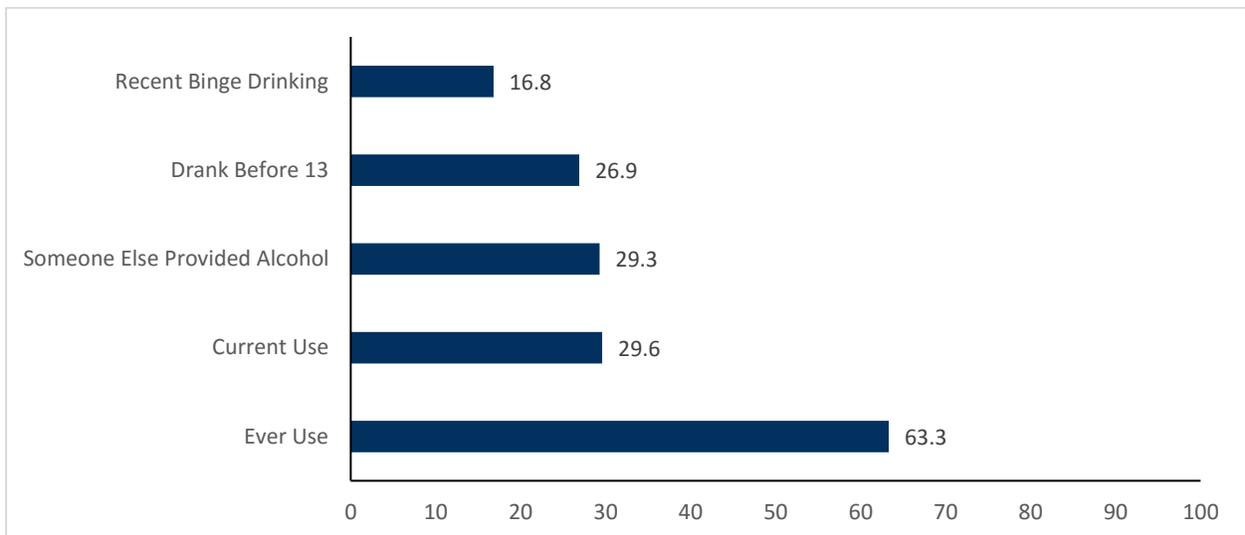
Approximately 32% of Esmeralda, Lincoln, and Nye County high school students have felt sad or hopeless in the last 12 months. About 20% of students have considered suicide, while 16% have actually planned their suicide. Over 15% of high school students have actually attempted suicide.

Figure 26. Percentages of High School Students Current Tobacco Use, Esmeralda, Lincoln, and Nye County, 2015.



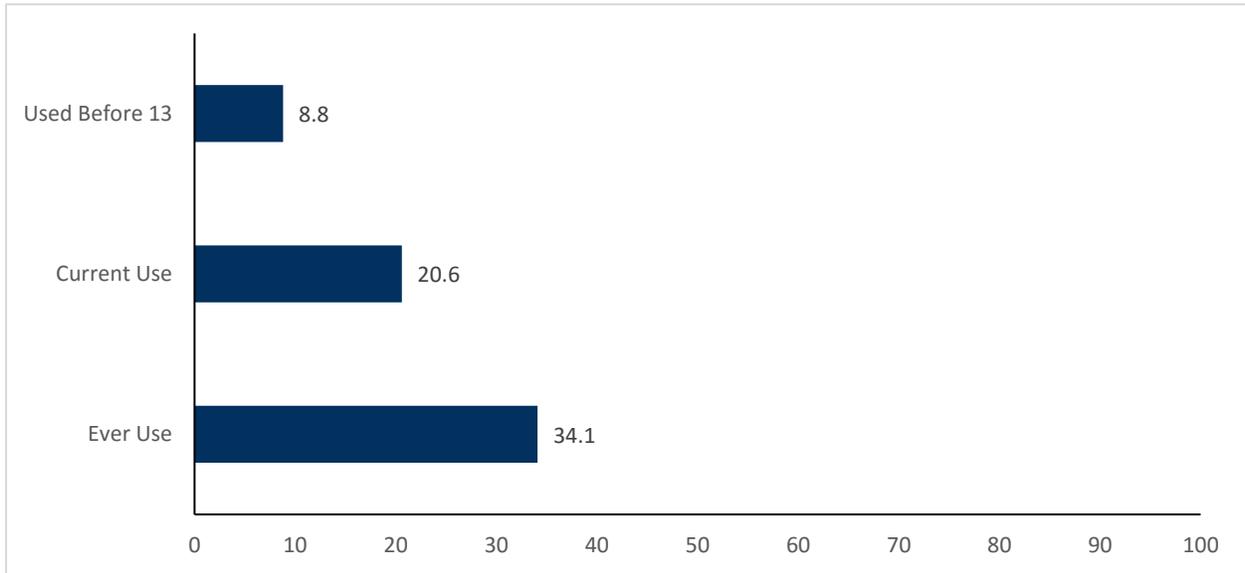
Around 15% of high school students in Esmeralda, Lincoln, and Nye County are currently using tobacco. About 8% of high school students smoke cigarettes, while 10% are currently smoking cigars. About 9% are using smokeless tobacco products.

Figure 27. Percentages of High School Students - Alcohol Behavior Summary, Esmeralda, Lincoln, and Nye County, 2015.



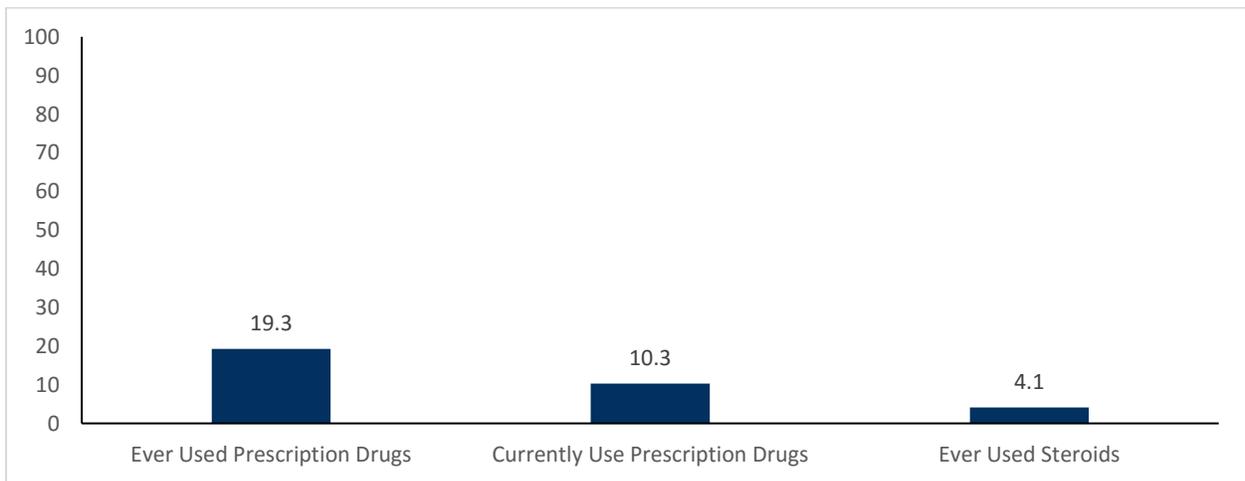
Approximately 63% of high school students in Esmeralda, Lincoln, and Nye County have had at least one drink of alcohol (more than a few sips). About 30% of high school students currently drink. Nearly 29% of high schools students had alcohol provided to them by someone else. About 27% of high school students had alcohol before the age of 13 years, and approximately 17% of students had a recent binge drinking experience (had at least 5 drinks in a couple of hours in the past 30 days).

Figure 28. Percentages of High School Students - Marijuana Behavior Summary, Esmeralda, Lincoln, and Nye County, 2015.



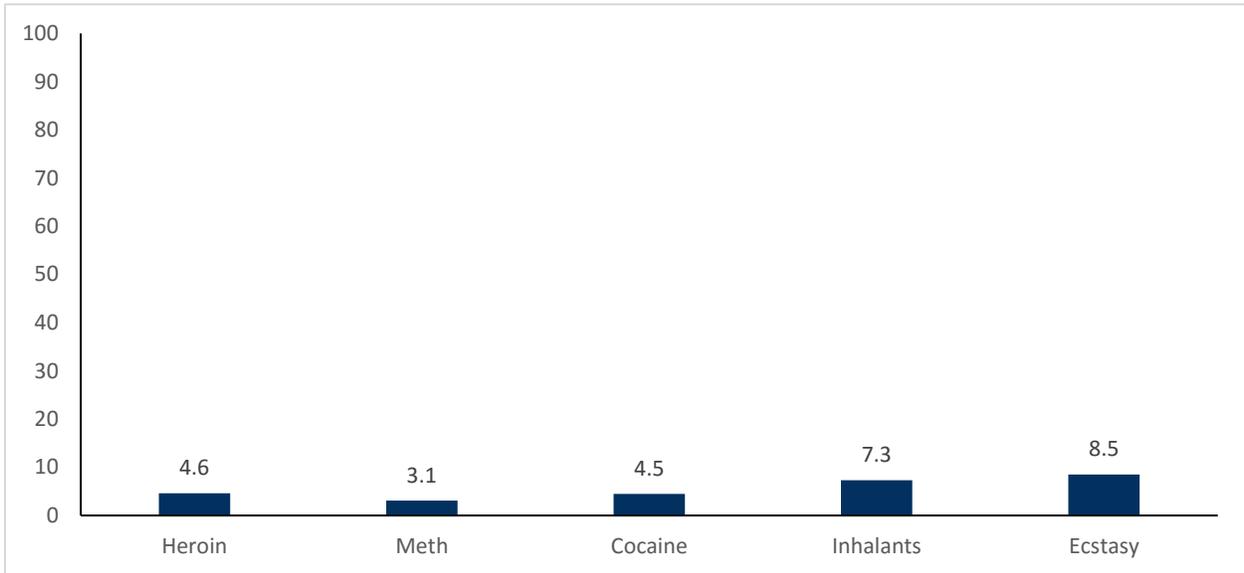
Approximately 34% of high school students in Esmeralda, Lincoln, and Nye County reported trying marijuana, and 21% are currently using. Approximately 9% of high school students have tried marijuana before the age of 13 years.

Figure 29. Percentages of High School Students Nonprescription Substance Use Summary, Esmeralda, Lincoln, and Nye County, 2015.



Approximately 19% of high school students have already tried prescription drugs that were not prescribed to them in their lifetime. About 4% have tried non-prescribed steroids.

Figure 30. Percentages of High School Students - Substance Abuse Summary, Esmeralda, Lincoln, and Nye County, 2015.

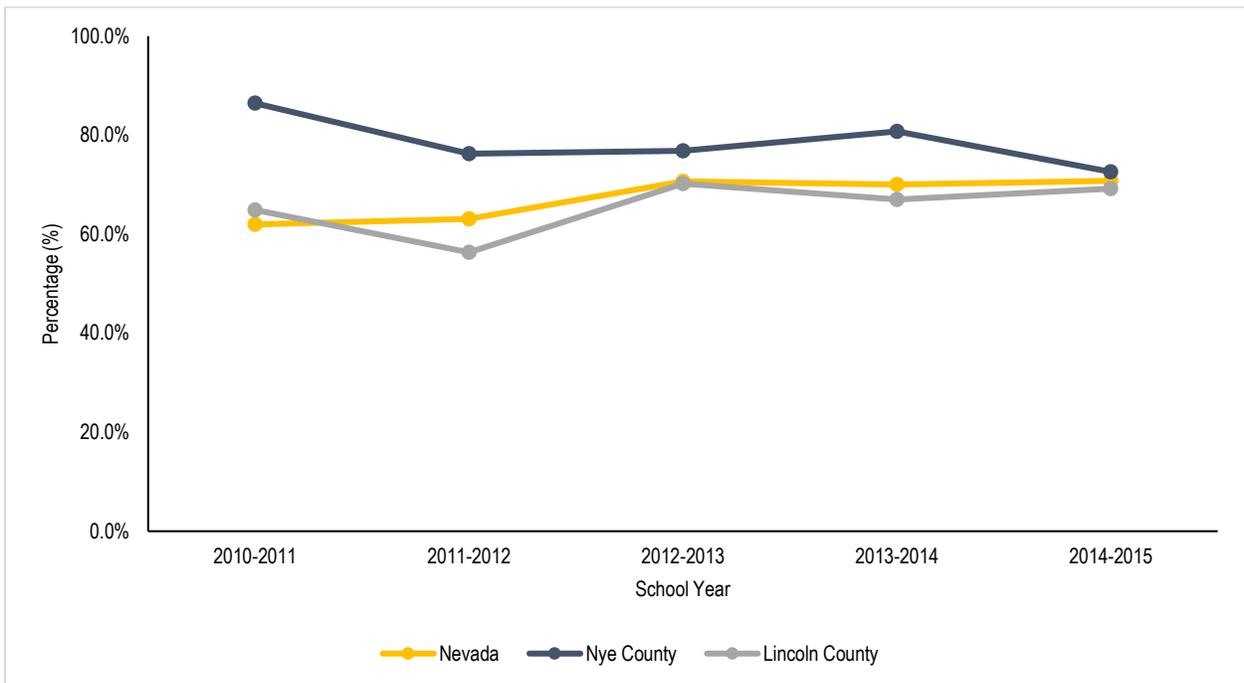


In terms of substance abuse among high school students in Esmeralda, Lincoln, and Nye County, nearly 9% have used ecstasy, the highest percentage of the select substances. About 7% have used inhalants, and 5% of students have tried cocaine.

School Success

When students' behavioral health needs are not identified, they are more likely to experience difficulties in school, including higher rates of suspensions, expulsions, dropouts, and truancy, as well as lower grades. Nationally, 50% of students age 14 and older who are living with a mental illness drop out of high school. This is the highest dropout rate of any disability group.

Figure 31. High School Graduation Rates, Lincoln and Nye County, 2011 – 2015 by Class Cohort.



Similar to Nevada, graduation rates have increased in Lincoln County from the 2010-2011 class cohort to the 2014-2015 class cohort. However, graduation rates in Nye County have declined.

Conclusion

This report is intended to provide an overview of behavioral health in Esmeralda, Lincoln, and Nye County, Nevada. The analysis could be used to identify issues of concern and areas that may need to be addressed.

One finding is the number of visits to the ER by residents of the Nye Communities Coalition for most mental disorders, and alcohol- and drug-related issues have increased during the time period from 2009 to 2014. Visits for bipolar disorder had a percent change of 568%, the largest increase among the seven disorders. The ER visits for mental health disorders and treatment in SAPTA facilities appear to be sex-specific. For example, females made up a majority of ER visits for anxiety, depression, and bipolar disorder, while males made up the majority of ER visits for PTSD and schizophrenia.

The trend for death rates in mental and behavioral health-related deaths has increased from 2009 to 2014. Similar to Nevada, mental and behavioral health-related deaths, has increased from 233.4 to 291.9 deaths per 100,000 in Esmeralda, Lincoln, and Nye County.

For more information and additional publications, please visit Nevada Division of Public and Behavioral Health at <http://dpbh.nv.gov/>.