

FAMILY ACCESS TO MENTAL HEALTH

Improving equity of access and quality is key

The COVID-19 pandemic increased the number of families experiencing economic hardships, food insecurity, and isolation. Arguably, these circumstances have impacted the mental health needs of children and families. In this brief, we examine the needs and preconceptions of mental health service adequacy among Iowa families using data from the 2022 ECI Statewide Family Survey collected in 2022. The survey collected information from 2,185 families across 93 out of Iowa's 99 counties.

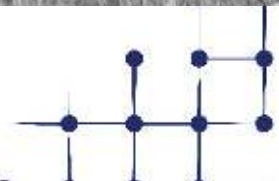
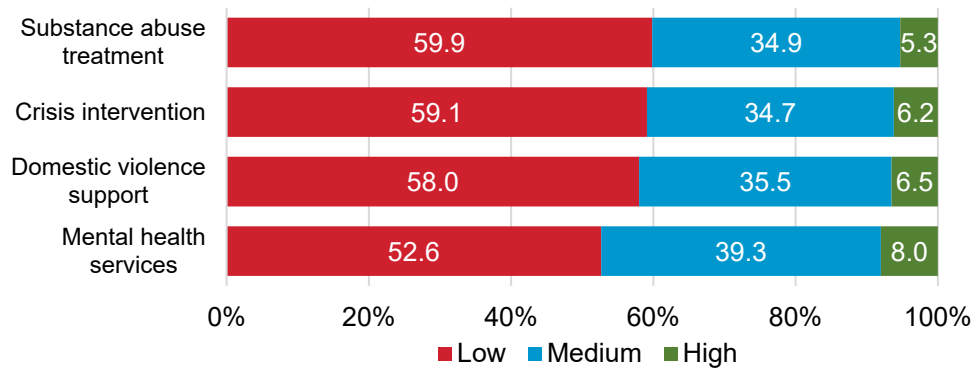
FAMILIES' NEEDS CONTRAST WITH SERVICE ADEQUACY

Mental Health was listed as the third most important area of support needed by 41% of families, behind only “jobs that cover my expenses” and “awareness of available services”.

However, **Mental health and related services** were consistently reported with the lowest adequacy ratings, indicating families' lack of satisfaction with substance abuse treatment, crisis intervention domestic violence support, and mental health services.

“While things have improved since my family moved to Iowa in 2014, there is still a terrible lack of mental health resources available for children and adults, especially in rural locations.”

FAMILIES' RATING OF ADEQUACY FOR MENTAL-HEALTH RELATED SERVICES



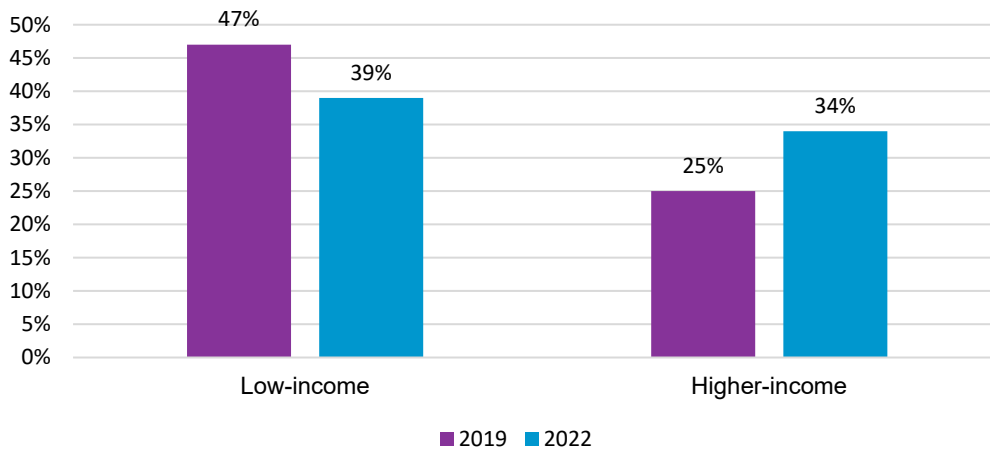
SOME FAMILIES NEED MORE MENTAL HEALTH SUPPORT

Some subgroups of families may need continued attention to better understand their needs:

- While currently families are more aware of support for children with special needs than in 2019 (26% vs. 20%), **low-income families are less aware of those services than higher income families** (22% vs. 29%).
- **Rural families may be in higher need of mental health supports:** While urban families still use more mental health services than rural families, rural families are using more services now than in 2019.
- **Mental health services are not reaching Hispanic families:** Hispanic families reported using mental health services less often than non-Hispanic families (20% vs. 32%).

One Spanish-speaking parent noted, *“In this county we need mental health and addiction rehabilitation services with therapists or providers who speak our language. It would also be beneficial to have more access to providers who speak Spanish in other places or agency departments”* [translated from Spanish]

FAMILIES’ USE OF MENTAL-HEALTH SERVICES BY INCOME OVER TIME



Note: all categories are statistically significant between low- and higher-income families.

LOW-INCOME FAMILIES MAY BE AT HIGHER NEED OF MENTAL HEALTH SERVICES:

- Low-income families decreased their use of mental health services since 2019, while higher-income families increased their use.
- Low-income families use more mental health services (39% vs. 34%), domestic violence support (12% vs. 1%), and substance abuse treatment (6% vs. 3%) than higher-income families.

Main Takeaways

- Mental health resources are fundamental to the success of families, especially since the start of the COVID-19 pandemic.
- Families report significant problems with access and adequacy of mental health services, particularly for low-income families.
- Improving access and quality of services among the most at-risk families is central to mitigating the effects of the pandemic on mental health.

This brief is provided by I2D2, a program of Iowa State University and Early Childhood Iowa committed to putting the state’s most informed, passionate, and data-driven resources to work ensuring all Iowa children are successful from birth.

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For a more in-depth look at family mental health access scan the QR code or visit i2d2.iastate.edu