

## Suicide and Access to Mental Health Services in Kentucky Policy Brief

Suicide is one of the leading causes of death in the United States, with rates steadily rising among all age groups and ethnicities (Curtin et al., 2023). From the years 2000 to 2021, suicide rates increased among Americans by 36% (Centers for Disease Control and Prevention [CDC], 2023). Suicide deaths are increasing most rapidly among youth, people of color, and rural populations (Kaiser Family Foundation [KFF], 2024). To highlight the seriousness of this crisis, there is 1 death by suicide every 11 minutes in the United States (CDC, 2023).

In Kentucky, suicide rates were above the national average in 2021, with death by firearm being the most likely method chosen (KFF, 2024). Kentuckians are reporting higher rates of depression and anxiety than national averages (37.4% vs. 32.3%) (KFF, 2024). Substance abuse rates are also increasing across Kentucky. From 2011 to 2021, drug overdose deaths in Kentucky averaged 55.6 per 100,000 deaths when compared to the national rate of 32.4 (KFF, 2024). These increases in mental illness and substance abuse can place individuals at a higher risk for suicide.

Suicide occurs when an individual intentionally injures themselves with the desire to end their life. Individuals may also make suicide attempts, but not end up dying, which results in increased emergency department visits and hospitalizations and increased medical and societal costs (CDC, 2023). Factors that increase the risk for suicide include mental illness, a previous suicide attempt, chronic physical illness/pain, legal issues, financial issues, substance use, adverse childhood experiences (e.g., childhood abuse), and relationship stressors (CDC, 2022). There are also factors that protect against suicide, including healthy relationships and support systems, personal reasons for living (e.g., family, friends, religious beliefs), access to adequate mental health care, the use of effective coping techniques and problem-solving skills, and a sense of community and cultural connectedness (CDC, 2022).

When an individual or a loved one may be at risk for suicide, there are warning signs that indicate the need to get immediate help:

- Stating that they are a burden to others
- Isolating themselves
- Showing signs of increased anxiety, anger, mood swings, sleep disturbances, and complaints of feeling hopeless
- Engaging in increased substance use
- Stating a plan to harm themselves and seeking out means to harm themselves (CDC, 2022).

One important resource for suicide prevention is the 988 Suicide and Crisis Lifeline, which is available 7 days a week and 24 hours a day. Those experiencing a mental health or suicide crisis can call 988 to be connected to a trained individual to provide guidance through the crisis event. Another option is to call 911 or go to the nearest emergency department for immediate assistance.

Ideally, a person at risk for suicide should be connected to adequate mental health treatment resources; however, access to mental health care can be a barrier, especially in rural areas across Kentucky. In Kentucky, mental health healthcare professional shortages are significant: only 24.2% of mental health care needs are being met (KFF, 2024). The use of telemedicine is one way to address barriers to care. This method of healthcare service delivery has grown since the COVID-19 pandemic, although adequate insurance coverage and reliable internet access are needed to support this service. Rural individuals are more likely to use telemedicine services for mental healthcare due to their limited access to a provider (Lo et al., 2022); however, payers such as Medicaid may limit reimbursement for these services, which can add a barrier to care. Kentucky has created the Digital Equity Plan with the goal of ensuring equitable internet access for all Kentuckians, and the Federal Communications Commission's Affordable Connectivity Program (ACP) has also been created to assist low-income households with obtaining free or reduced cost devices to support internet access. These types of programs will be vital to ensure that telemedicine services for mental health can be provided in rural areas across Kentucky to reduce suicide rates.

Other barriers to accessing mental health treatment for Kentuckians include being uninsured or underinsured. Those who are uninsured often cannot afford the cost to pay out-of-pocket for services. The expansion of Medicaid services in states across the United States, including Kentucky, has reduced the number of uninsured. Medicaid expansion is associated with lower suicide rates in nonelderly adults (Patel et al., 2022), highlighting the importance of keeping expanded Medicaid services in Kentucky. Privately insured Kentuckians with mental illness have higher than average out-of-pocket spending costs than those who do not have a mental illness (KFF, 2024). Even with private insurance coverage, the individual may face out-of-network costs due to inadequate availability of mental healthcare providers in their area (KFF, 2024). This issue, in combination with the growing proportion of providers who require out-of-pocket payment, contributes to the reluctance of those with mental health concerns to seek mental health care and their higher risk of suicide.

Minority populations face higher rates of barriers to mental healthcare in Kentucky (KFF, 2024) and national statistics indicate that minority individuals are less likely to seek mental healthcare when compared to white Americans (Choi et al., 2019). In 2020, rates of completed suicides among Black Kentuckians increased significantly (Kentucky Cabinet for Health and Family Services, 2021), indicating a need for targeted mental health intervention for these individuals.

To reduce the suicide rate in Kentucky, it is vital that we advocate for adequate mental health care resources and equitable care for all individuals across the state. This includes recruiting more mental healthcare providers to rural areas, using telemedicine as an option to address provider shortages, and providing all Kentuckians with equitable health care coverage for mental health services.

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