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## REFORM THE AMERICAN MENTAL HEALTH SYSTEM

By

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The American mental health system needs vast reform, not because of [mass murders](#), which attract most of the attention but have much less to do with mental illness than commonly believed. The mental health system needs improvement because:

- 60% of people with diagnosable mental disorders [do not get treatment](#).
- In most parts of the U.S., the [capacity to treat people with mental illness is simply inadequate](#).
- [Access to available care is often limited](#) by cost, distance, office hours, stigma, etc.
- Of those who get treatment, at most [1/3 get even minimally adequate treatment](#).
- The mental health service system is [fragmented](#), with inadequate coordination among mental health providers, between mental health and substance abuse providers, between behavioral and physical health providers, and with other human service providers.
- [People with serious mental illness die 10-25 years younger](#) than the general population.
- Too many people with serious, long-term mental disorders are still [homeless](#).
- Too many [people with serious mental illness are in jails or prisons](#).
- [Suicide is on the rise](#)—up 20% since the turn of the century while [homicide has declined](#) by more than 10%.
- The service delivery system is often unresponsive to [people in crisis](#).
- [Funding for mental health services is not adequate](#) to meet the need, and [financing mechanisms](#) are often inconsistent with service needs.
- There are vast [workforce shortages](#).
- And more

In addition, the mental health system is not prepared for the [elder boom](#), which began in 2011 and is gaining steam. Over the next few decades the population of people 65 or older will more than double. More striking, it will become a larger portion of the population than children under the age of 18. What a remarkable shift!

For older people (of which I am one) the challenge is two-fold— (1) to provide adequate treatment for the roughly [20% who have diagnosable mental disorders](#) and (2) to promote psychological well-being in old age.

Well-being in old age? Many people think that is an [oxymoron](#). They are wrong. Contrary to common belief, [depression is not normal in old age](#); 90% or more of older adults do not have a diagnosable depressive disorder. And contrary to common belief [most older adults have lives that they find satisfying and meaningful](#) although it is often emotionally difficult to deal with the developmental challenges of old age. The mental health system could play an important role in making old age a fulfilling time of life—even for people with mental disorders, even for people with dementia.

Key to living well with or without mental disorders, young or old, is having a place to live that feels like home. There may be a few people who want to live in institutions like psychiatric hospitals and nursing homes. But very few. Most people want to live in the community, which can be particularly difficult for people with serious mental disorders. We need a mental health system that helps people to live where they want, not in institutions—let alone in jails and prisons—which have a daily population of about 700,000 people with serious mental illness.

That is the fundamental challenge—to create a mental health system that helps people to lead satisfying lives in the community. That has been the clear goal of American mental health policy for more than 50 years. But we still have a very long way to go.

In subsequent blog entries, I will address the need develop a community mental health system that works for the people who are sometimes literally left out in the cold, with particular attention to the needs of older adults.

I hope, of course, that you will find my critiques and proposals compelling, but I've been around long enough to know that there's likely to be lots of disagreement. I hope you will comment and that we can generate a conversation about how to effectively meet the challenges of mental health.