
Kentucky Needs Assessment Project Brief Report

Depression among Kentucky Adults

IN BRIEF

- Both black and white adult Kentuckians had lower rates of depression in their lifetime than non-black minorities (13.6%, 24.0%, & 39.5%, respectively)
- Approximately 16% of adult Kentuckians without health insurance experienced depression in the previous 30 days
- Adult Kentuckians who used marijuana and other illicit drugs were more likely to report depression in their lifetime and the past 30 days than Kentuckians who do not use drugs

An estimated 22.2% of Kentucky adults have experienced serious depression at some point in their lifetime, and an estimated 7.6% of Kentucky adults have experienced depression in the past 30 days. The Kentucky Needs Assessment Project (KNAP) 2004 Adult Household Survey asked adults aged 18 and older about their depression, alcohol use, and illicit drug use over their lifetime, past 12 months, and past 30 days, as well as other information about substance abuse and dependence. Depression is defined as a self-reported serious depression lasting a minimum of two consecutive weeks. Respondents are asked to exclude depression caused by illicit drug or alcohol use. Illicit drug is defined as marijuana, cocaine, other stimulants, oxycodone/Oxycontin, other opiates, sedatives, hallucinogens, club drugs, inhalants, or any other substance used to achieve intoxication excluding alcohol and tobacco. Substance abuse and dependence is defined using Diagnostic and Statistical Manual of Mental Disorders Fourth Edition, Text Revised (DSM-IV-TR) criteria. Abuse and dependence should not be interpreted as a clinical diagnosis. This report focuses on depression as self-reported by Kentucky adults aged 18 and over.

STUDY OVERVIEW

The Kentucky Needs Assessment Project (KNAP) is a series of studies designed to estimate substance use levels and substance abuse treatment need of Kentuckians. Data for this report was taken from the 2004 Adult Household Survey, a telephone survey of 4,210 Kentucky households using random digit dialing. Only respondents in residential households were sampled and included. The findings from this study can only be generalized to adults residing in Kentucky households, and not to those in institutional, dormitory or group home settings. Another potential source of bias is the understatement or overstatement of actual behaviors. The validity of self-report data depends on the

honesty, memory, and understanding of the respondents. The detailed methodology of this study is described in the full report which can be viewed/downloaded at <http://cdar.uky.edu>.

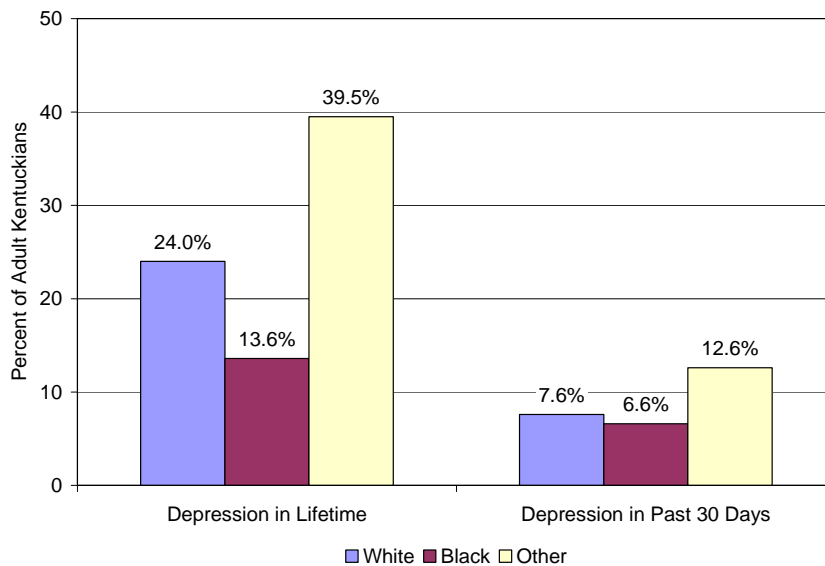
DEMOGRAPHIC CHARACTERISTICS AND DEPRESSION

The percent of Kentucky adults 18 years of age and older who reported depression in their lifetime is an estimated 22.2%. An estimated 7.6% adult Kentuckians reported being depressed in the past 30 days.

Gender – More than one-quarter of adult Kentuckian females (28.4%) reported being depressed in their lifetime, compared to 19.3% of males. An estimated 8.9% of adult Kentuckian females reported being depressed in the past 30 days, compared to 6.4% of males.

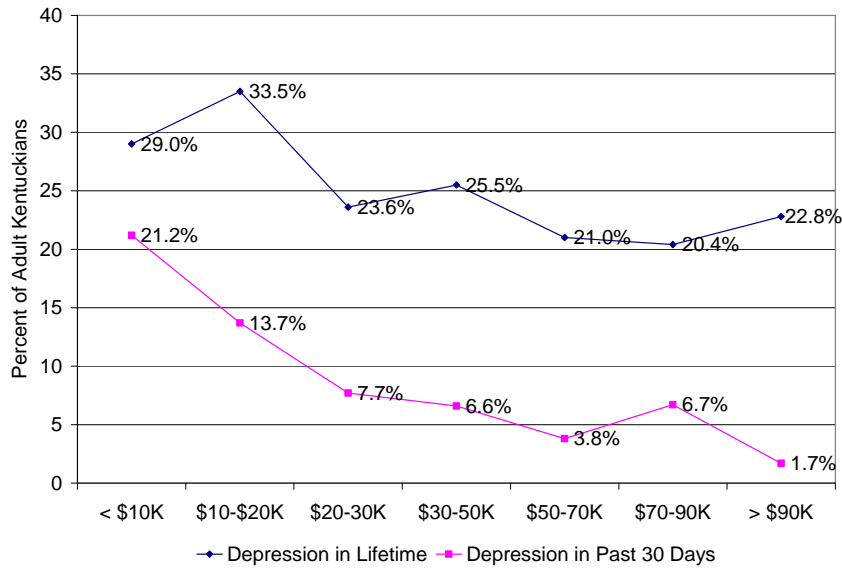
Race – An estimated 39.5% of non-black minority adult Kentuckians reported being depressed in their lifetime, and an estimated 12.6% of non-black minority adult Kentuckians reported being depressed in the past 30 days (Figure 1).

Figure 1: Percent of Adult Kentuckians Reporting Depression by Race



Income – Adult Kentuckians with a household income of \$20,000 or less were 3.5 times more likely to report depression in the past 30 days, compared adult Kentuckians with a household income of \$40,000 or more, 16.8% vs. 4.7% respectively (Figure 2).

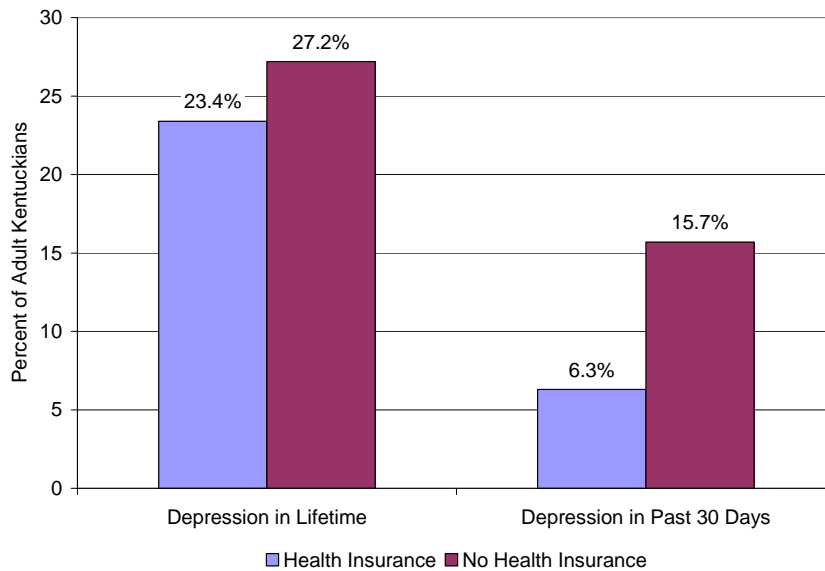
Figure 2: Percent of Adult Kentuckians Reporting Depression by Income



HEALTH AND DEPRESSION

Health Insurance Coverage – Adult Kentuckians without health insurance coverage were more likely to report being depressed in their lifetime compared to adult Kentuckians with health insurance coverage, 27.2% vs. 23.4% respectively (Figure 3). Similarly, an estimated 15.7% of adult Kentuckians without health insurance coverage reported being depressed in the past 30 days, compared to an estimated 6.3% of adult Kentuckians with health insurance coverage.

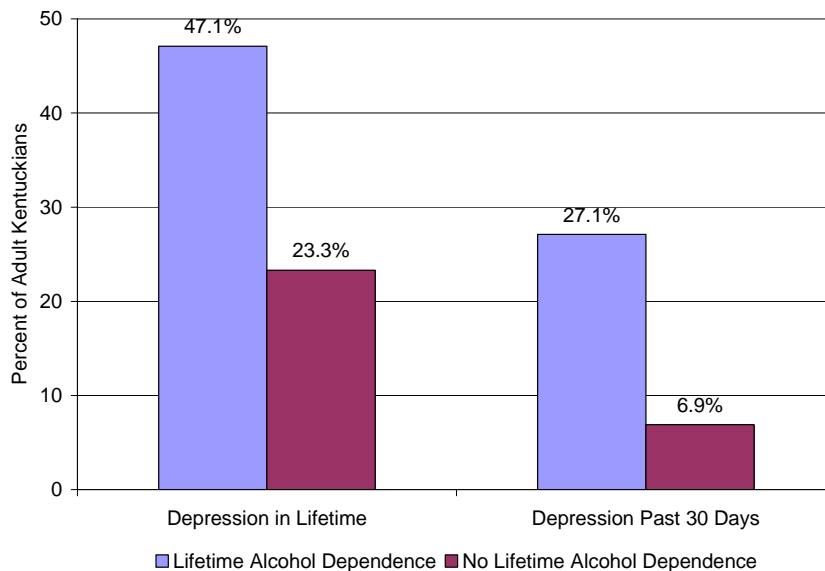
Figure 3: Percent of Adult Kentuckians Reporting Depression by Health Insurance Coverage



ALCOHOL AND ILLICIT DRUG USE

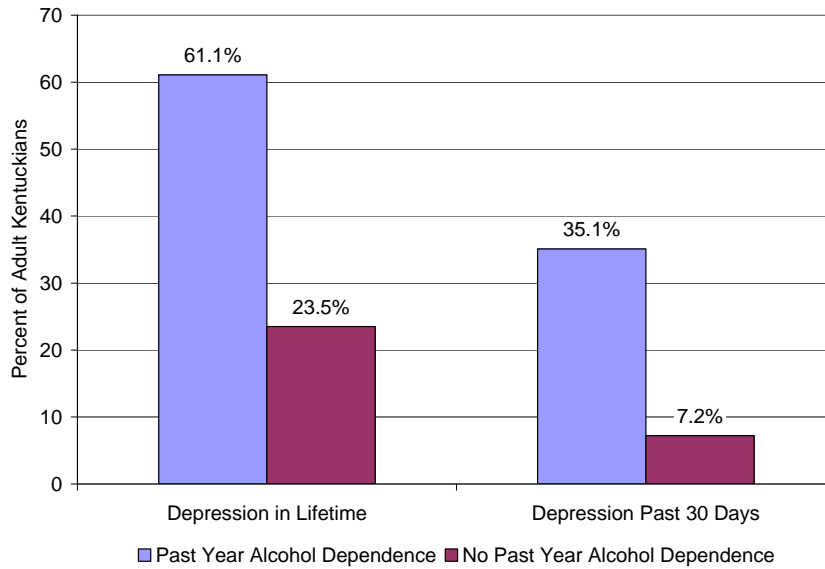
Lifetime Alcohol Dependence and Depression – Approximately 47.1% of adult Kentuckians who met criteria for alcohol dependence reported being depressed in their lifetime compared to 23.3% who did not meet dependence criteria (Figure 4). An estimated 27.1% of adult Kentuckians who met criteria for alcohol dependence in their lifetime reported being depressed in the past 30 days compared to 6.9% who did not meet dependence criteria.

Figure 4: Percent of Adult Kentuckians Reporting Depression by Lifetime Alcohol Dependence



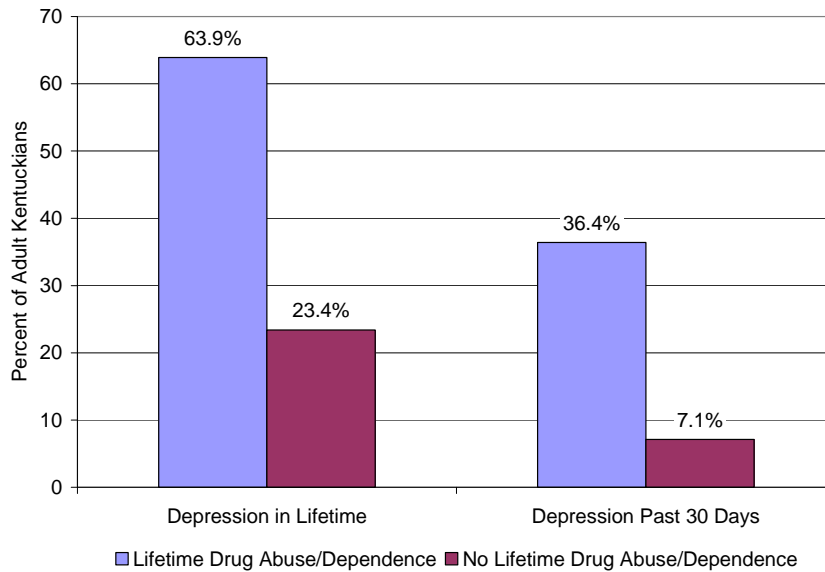
Past Year Alcohol Dependence and Depression – Adult Kentuckians who met criteria for alcohol dependence in the past year were 2.6 times more likely to report being depressed in their lifetime (61.1%) compared to 23.5% who did not meet dependence criteria in the past year (Figure 5). Adult Kentuckians who met criteria for alcohol dependence in the past year were almost five times more likely to reported being depression in the past 30 days compared to those who did not meet dependence criteria in the past year (35.1% and 7.2% respectively).

Figure 5: Percent of Adult Kentuckians Reporting Depression by Past Year Alcohol Dependence



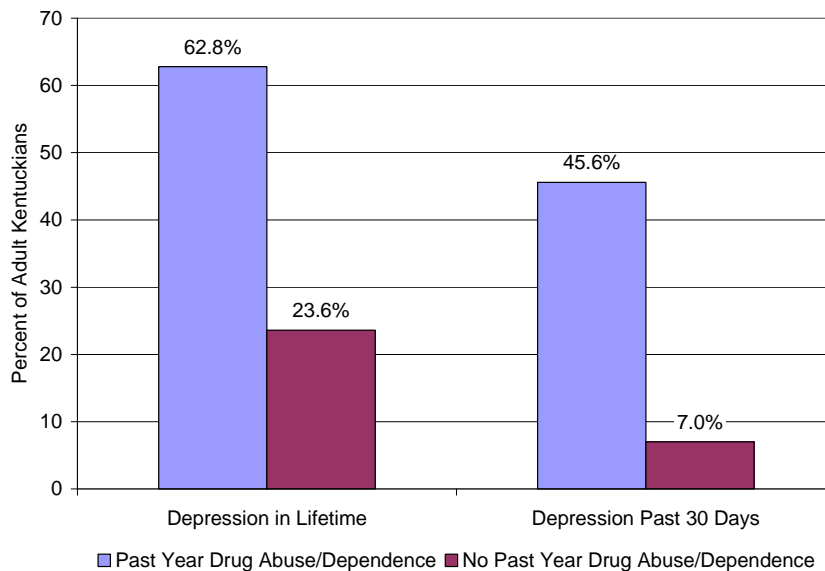
Lifetime Illicit Drug Abuse or Dependence and Depression – An estimated 63.9% of adult Kentuckians who met lifetime criteria for drug abuse or dependence reported being depressed in their lifetime compared to 23.4% who did not meet lifetime drug abuse or dependence criteria (Figure 6). An estimated 36.4% of adult Kentuckians who reported lifetime drug abuse or dependence reported experiencing depression in the past 30 days compared to 7.1% who did not meet three or more abuse or dependence criteria.

Figure 6: Percent of Adult Kentuckians Reporting Depression by Lifetime Illicit Drug Abuse or Dependence



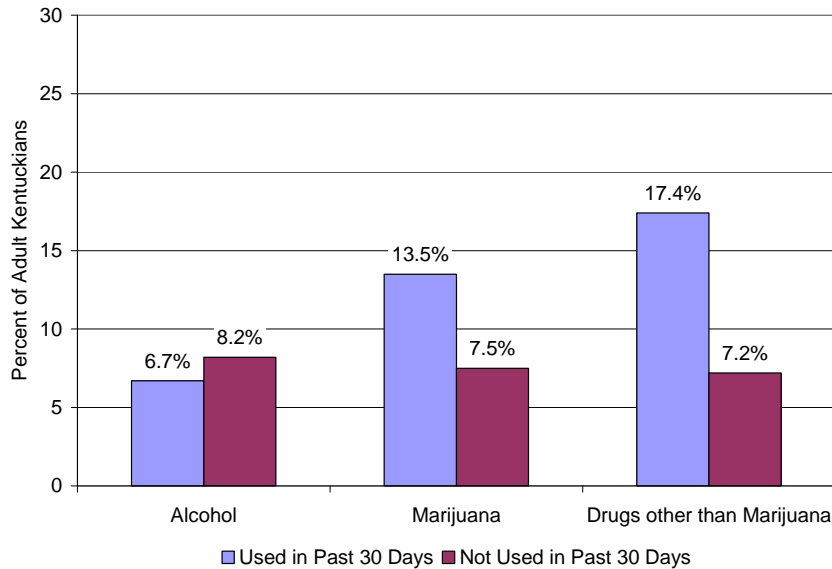
Past Year Illicit Drug Abuse or Dependence and Depression – Adult Kentuckians who met past year drug abuse or dependence criteria were 2.7 times more likely to report lifetime depression and 6.5 times more likely to report past year depression compared to those who did not meet past year drug abuse or dependence. An estimated 62.8% of adult Kentuckians who met drug abuse or dependence in the past year reported being depressed in their lifetime compared to 23.6% who did not meet lifetime drug abuse or dependence criteria (Figure 7). An estimated 45.6% of adult Kentuckians who met criteria for past year drug abuse or dependence reported being depressed in the past 30 days compared to 7.0% who did not meet past year drug abuse or dependence.

Figure 7: Percent of Adult Kentuckians Reporting Depression by Past Year Illicit Drug Abuse or Dependence



Alcohol and Illicit Drug Use and Depression in Past 30 Days – Approximately 6.7% of Adult Kentuckians who drank alcohol in the past 30 days were less likely to report being depressed in the past 30 days (6.7%) compared to those who did not drink (8.2%). Adult Kentuckians who used marijuana or other illicit drugs in the past 30 days were more likely to report being depressed in the past 30 days compared to those who did not use drugs. An estimated 13.5% of adult Kentuckians who used marijuana in the past 30 days reported experiencing depression in the past 30 days compared to 7.5% who have not used. Approximately 17.4% of Kentuckians who have used other illicit drugs in the past 30 days reported experiencing depression in the past 30 days compared to 7.2% who have not used. (Figure 8)

Figure 8: Percent of Adult Kentuckians Reporting Depression in Past 30 Days by Status of Illicit Drug Use in Past 30 Days



SUMMARY

There is a relationship between substance use disorders and depression for adult Kentuckians. Persons reporting alcohol or drug abuse and dependence are more likely to report depression than those adults who do not report substance abuse problems. Additionally, adult Kentuckians living in lower income households, females, and persons without healthcare insurance are more likely to report being depressed.

Acknowledgements

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