Many people in Lane County are struggling with mental health concerns – especially youth.

Rates of youth and adults experiencing poor mental health are too high

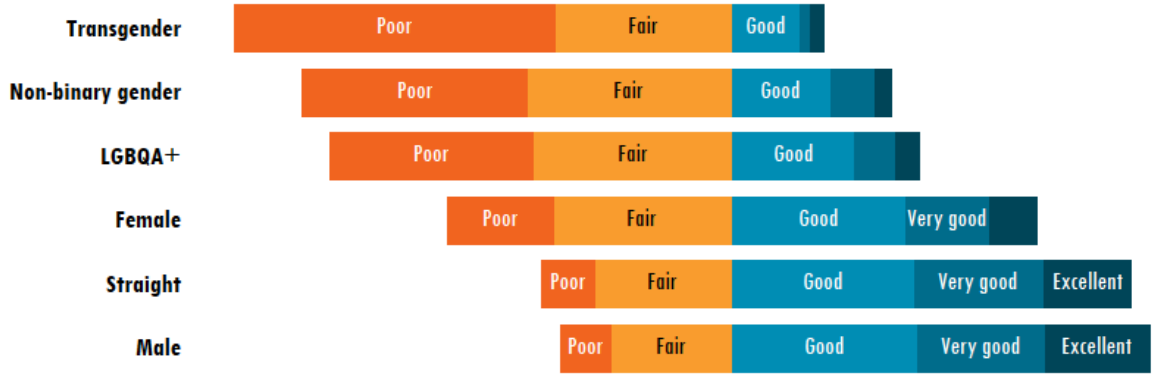
The 2018-2020 Community Health Assessment revealed a disturbing trend of declining mental health in Lane County, especially among youth. This trend appears to be continuing.

- 48% of Lane County adults reported 1 or more poor mental health days in the past 30 days and 28% reported having had a diagnosis of depression in 2021.
- 35% of Lane County 6th, 8th, and 11th graders reported fair to poor mental health in the last 30 days in 2022.
- In 2021, adults with a disability (70%) and adults living in poverty (63%) had the highest rate of at least one poor mental health day in the last 30 days.
- In 2022, youth who identify as transgender, non-binary gender, and/or LGBQA+ reported the highest rates of fair to poor mental health in the last 30 days.
- In 2022, almost a third of 6th, 8th, and 11th graders reported being so sad in the past two weeks that they stopped doing regular activities (i.e., had symptoms of depression).
- About 13% of 6th, 8th, and 11th graders reported contemplating suicide in the past 12 months in 2022; transgender and non-binary gender (30%) and LGBQA+ (28%) students reported contemplating suicide at the highest rates.
- Focus group participants articulated that the stress and isolation of the COVID-19 pandemic exacerbated mental health issues for many adults and youth.

In 2022, about **35% of Lane County students** surveyed reported fair or poor mental and emotional health. Students who identified as straight and students who identified as male reported the lowest rates of **poor** or **fair** mental and emotional health.

Would you say that, in general, your mental emotional health is **poor**, **fair**, **good**, **very good**, or **excellent**?

Source: Oregon Student Health Survey, 2022



Updated: 7.24.25

Many people in Lane County are struggling with mental health concerns – especially youth.

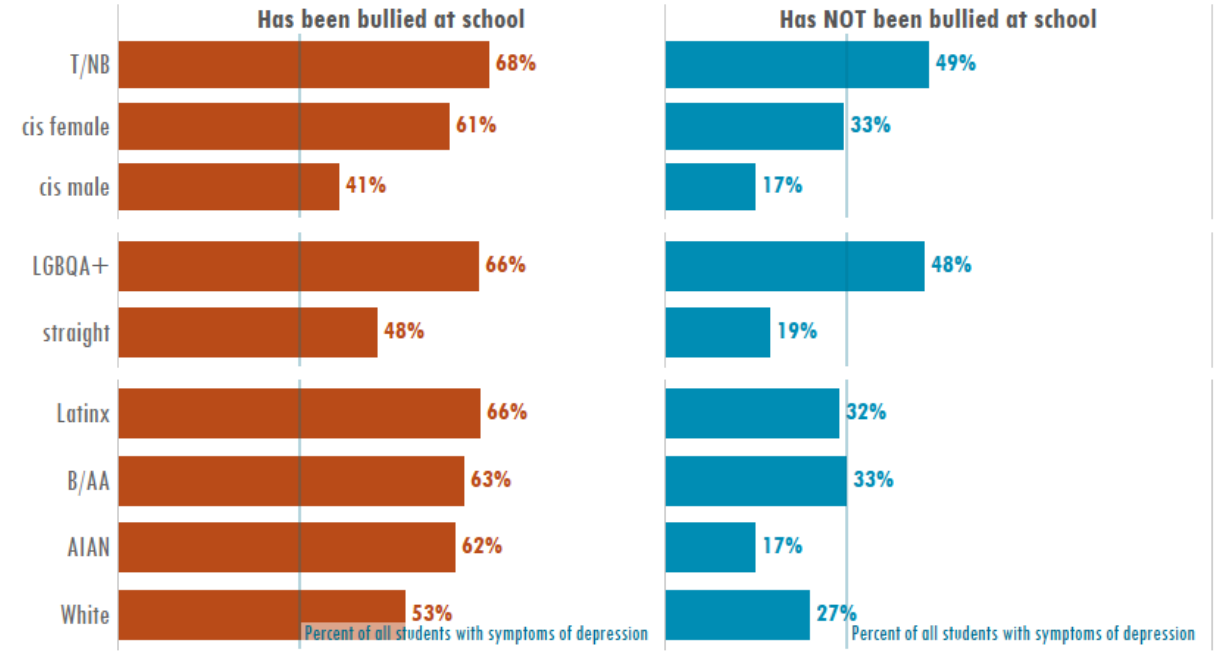
Bullying and discrimination contribute to poor mental health.

People with systemically marginalized identities are more likely to be bullied, feel discriminated against, or feel unwelcome and unsafe. This can lead to social isolation, feelings of hopelessness, and suicidal ideation.

- In 2022, 26% of 6th, 8th, and 11th graders reported being bullied at school in the past 30 days, the percent of students reporting being bullied was highest for those who identified as transgender or non-binary gender (48%), LGBQA+ (44%), Black (39%), and/or American Indian/Alaska Native (35%).
    - In 2022, 6th, 8th, and 11th graders who reported being bullied at school in the past 30 days were twice as likely to also report experiencing symptoms of depression (55% compared to 26%, respectively).
    - Students who identified as transgender or non-binary gender and/or LGBQA+ reported the highest rates of depression regardless of whether they had been bullied in the last 30 days.
- In 2022, 8th and 11th graders were asked about the types and frequency of every-day discrimination they experienced. Students who identified as Black, transgender or non-binary gender, and/or LGBQA+ consistently reported experiencing discrimination at least once a week or more compared to other students.
- Respondents to the 2024 Community Health Survey with systemically marginalized identities reported more frequent and more overall experiences of everyday vigilance – a state of anxiety or stress – due to discrimination.

Students who **reported having been bullied** in the past 30 days reported symptoms of depression at higher rates than those who **reported they had not been bullied** at school. Students with systemically marginalized identities reported higher rates of depression regardless of whether or not they had been bullied.

Percent of students who reported being so sad for two weeks in the past year that they stopped doing regular activities.
OR Student Health Survey, 2022



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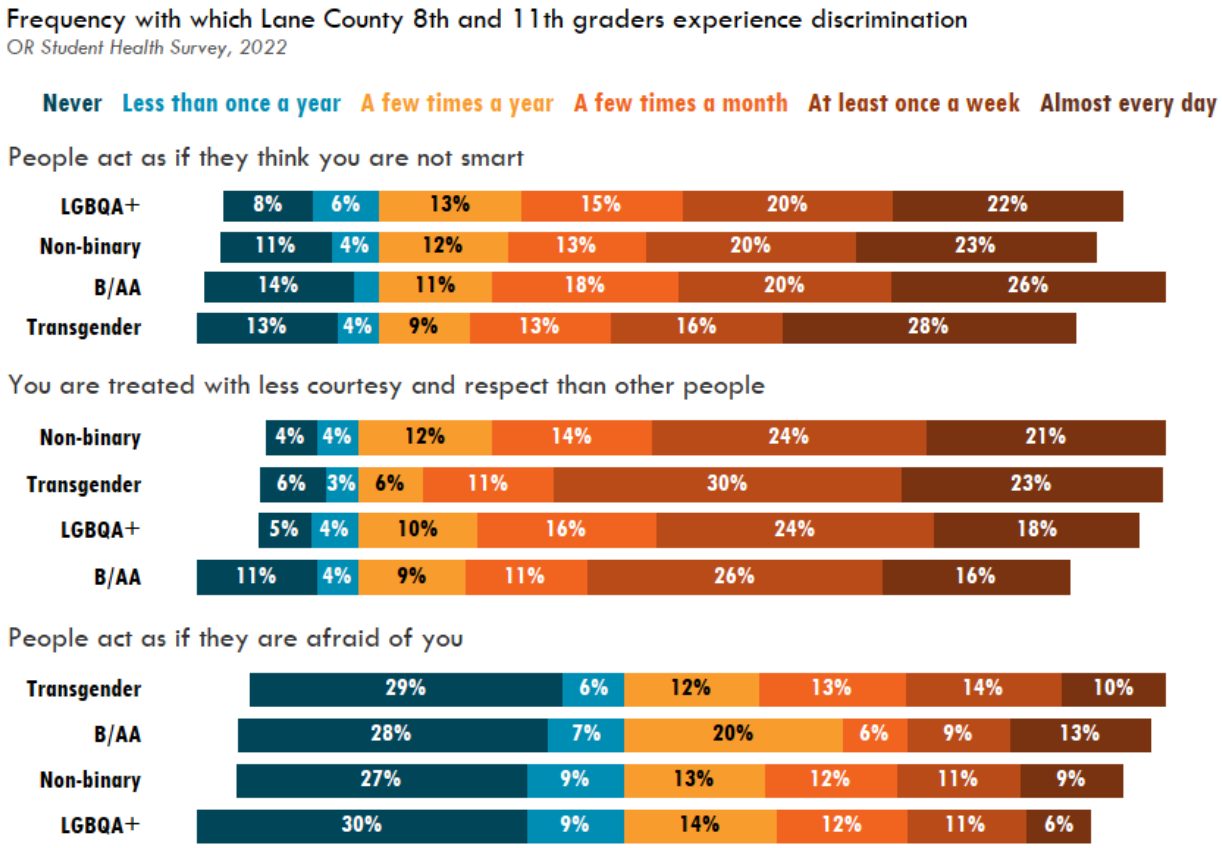

- People with 2 or more systemically marginalized identities[1] are twice as likely to report their social and emotional needs are met "never" or "sometimes" compared to people with no systemically marginalized identities.
- Overall, about 1/3 of survey respondents disagreed or strongly disagreed with the statement "Lane County is a safe place to live".

> *"People don't feel safe in different parts of the county – some places people feel they can be their authentic self, but other places people feel the need to be more careful."*
>
> *-Community Context Assessment, focus group participant*

[1] People with marginalized identities are those who face additional barriers to accessing resources due to one or more parts of their identity. People who identify as Black, Indigenous, Asian, Latine/a/o/x, Native Hawaiian/Pacific Islander, people who identify as LGBTQA+, and people living with a disability were all identified in this assessment as experiencing discrimination and/or disparities.

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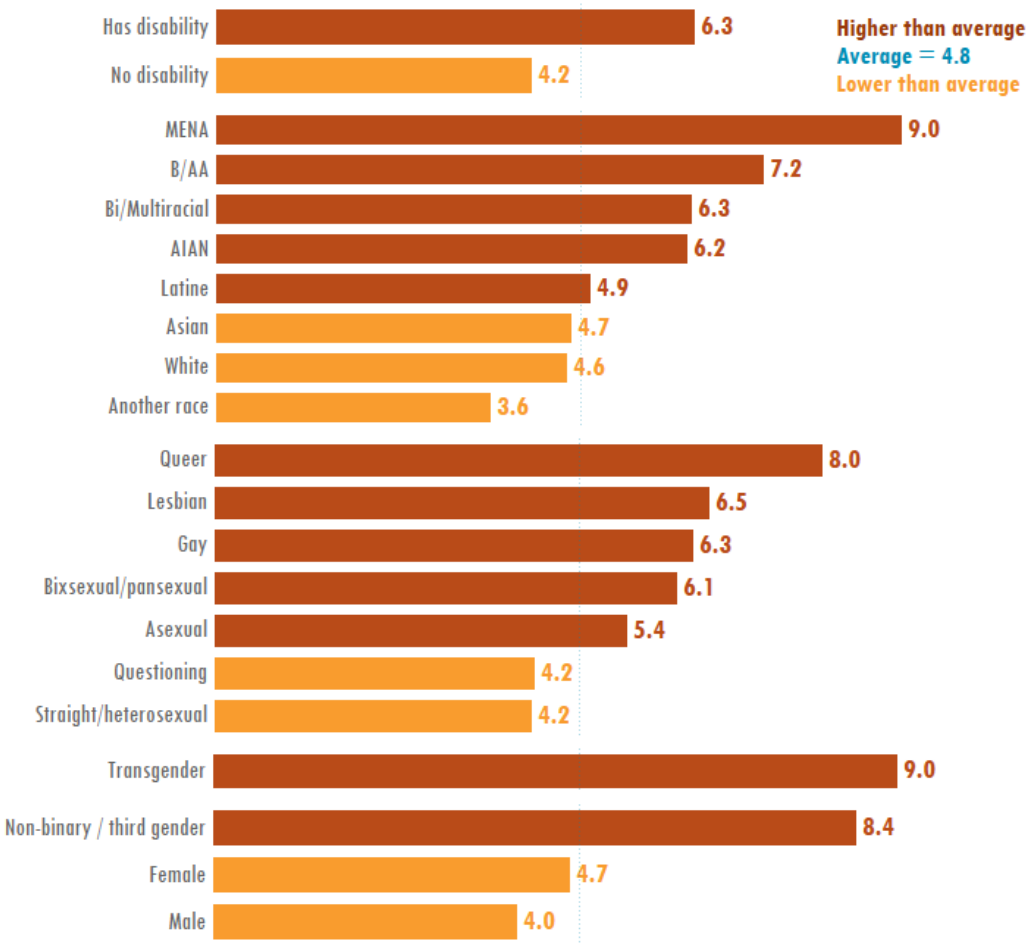
Respondents were asked a series of questions about every-day vigilance that they may have experienced in their day-to-day life due to discrimination. Responses were scored on a scale of 1-12, with higher scores indicating a greater number of and/or more frequent experiences of vigilance.



Substance use rates for youth and adults suggest many people have unhealed trauma

Substance use and addiction are often the result of coping with past or present trauma. Research demonstrates that people who experience toxic levels of stress, including stress associated with discrimination or poverty, are more likely to use substances, including tobacco, as a coping mechanism.

- While use of combustible cigarettes has declined among adults, use of any tobacco product has remained the same or increased:
    - 26% of adults reported any tobacco use in 2021, adults living in poverty (39%) and adults with a disability (38%) had the highest rates of any tobacco use.
- In 2022, 16% of 11th graders reported using any tobacco products in the past 30 days, 18% reported drinking alcohol in the past 30 days, and 16% reported using cannabis in the past 30 days.
- Students with marginalized identities tend to have the highest rates of substance use.

Many people in Lane County are struggling with mental health concerns – especially youth.

- Students who identify as American Indian/Alaska Native, Black, Latine/a/o/x, non-binary gender, female, and/or LGBQA+ have the higher rates of having consumed alcohol in the past 30 days compared to students overall.
- Students who identify as Black, American Indian/Alaska Native, non-binary gender, and/or LGBQA+ have higher rates of having used tobacco products in the past 30 days compared to students overall.

Many people in Lane County lack of access to mental health services

- In 2022, 26% of 8th and 11th graders reported they had mental and emotional health care needs that were unmet; students who identify as Black (32%), transgender or non-binary gender (44%), and/or LGBQA+ (42%) had the highest rates of reporting unmet needs.

> *"Everything is so expensive, and it really impacts my mental health"*
> *-Community Context Assessment, survey respondent*

- Mental health care access varies depending on an individual's insurance type and where they live.
- There is limited access to providers who share the cultural background and understanding to match the needs of diverse communities.
- There is a lack of culturally responsive care.
- There is a general lack of access to gender-affirming care.

Root causes and opportunities

- Continuing discrimination rooted in Lane County's history of exclusion contributes to disproportionate impacts on people with systemically marginalized identities.
- COVID-19 compounded mental health issues people were already facing.
- Many community members articulated that our changing climate is creating anxiety and more than half of survey respondents reported that extreme weather events in the past two years impacted their mental health.
- Schools need anti-bullying curricula; instruction on current and historical forms of discrimination need to be integrated into curricula, not treated as a separate body of knowledge.
- Economic uncertainty contributes to stress and anxiety and reduces resilience.
- There are not enough mental health care providers – particularly for youth.
  - Due to provider shortages, lack of affordable transportation, and lack of providers accepting insurance.
- When services are available, families can face challenges with lack of insurance coverage for care needed.
- Stigma surrounding poverty, homelessness, addiction, and mental health creates barriers to seeking help.

> *"The stigma still runs super deep for those with substance use disorder."*
> *-Community Context Assessment, focus group participant*

4. Many people in Lane County are struggling with mental health concerns – especially youth.

This index references the data used to identify the key issues in the Issue Profile. These are the links to the referenced reports:

- **CSA**: Community Status Assessment
- **CPA**: Community Partner Assessment
- **CCA-assets**: Community Context Assessment: Assets and Barriers
- **CCA-built**: Community Context Assessment: Built Environment
- **CCA-forces**: Community Context Assessment: Forces of change

Rates of youth and adults experiencing poor mental health are too high

- Adults (CSA, p. 2 & 37-38), (CCA-assets, p. 3)
- Youth (CSA, p. 2 & 40)
- Rates of suicidal ideation among youth (CSA, p. 3 & 54)

Substance use rates for youth and adults suggest many people have unhealed trauma

- Adult substance use
    - Heavy drinking (CSA, p. 49)
    - Tobacco (CSA, p. 45-46)
    - Cannabis (CSA, p. 51)
- Youth substance use
    - Alcohol (CSA, p. 50)
    - Tobacco (CSA, p. 47-48)
    - Cannabis (CSA, p. 52)

Bullying and discrimination contribute to poor mental health.

- Feeling welcome (CCA-assets, p. 13-14, CCA-forces, p. 13-14)
- Isolation and social emotional support (CCA-assets, p. 4-5)
- Experiences of discrimination & stigma (CCA-assets, p. 18-19 & CSA, p. 15 & 53-54, CCA-forces, p13-14)
- Feelings of safety and welcome (CCA-assets, p. 15-17), (CCA-assets, p. 13-14, CCA-forces, p. 13-15)
- Rates of bullying (CSA, p. 6, 53-55)

Many people in Lane County lack of access to mental health services

- Youth unmet mental health care needs (CSA, p. 8 & 78)
- Health system assessment (CCA-forces, p. 9-10)

Health indicators

- Life expectancy is declining (CSA, p. 2 & 20).
- Premature death (CSA, p. 2 & 22-23)

- Preterm birth rates increasing (CSA, p. 2 & 25).
- Rates of chronic disease remain stable, except asthma, which is increasing (CSA, p. 2 & 26-28).
- Self-reported rates of overall health and mental health
    - Adult physical health rates stable (CSA, p. 2 & 36), almost 2/3 of survey respondents reported physical health as good to excellent (CCA-assets, p. 3)
    - Most youth report good to excellent physical health, (CSA, p. 2 & 39)
    - Rates of poor mental health continue to increase for youth and adults
        - Adults (CSA, p. 2 & 37-38), (CCA-assets, p. 3)
        - Youth (CSA, p. 2 & 40)
        - Rates of suicidal ideation among youth (CSA, p. 3 & 53-54)
- Rates of substance use (CSA, p. 3 & 45-52)
- Rates of syphilis and congenital syphilis increasing (CSA, p. 2 & 29-32)
- COVID-19 (CCA-assets, p. 10-11, CCA-forces, p. 5-6)
- Anxiety about climate change (CCA-forces, p. 7-8)

Community context

- Capacity of the public health system
    - Address social determinants of health (CPA, p. 12)
    - Assessment and evaluation (CPA, p. 8)
    - Community engagement (CPA, p. 5)
- Commitment to equity (CPA, p. 14-15, CCA-forces, p. 15-16)
- Natural environment (CCA-assets, p. 20, CCA-forces, p. 15-16)
- People in Lane County want to work together to solve problems (CCA-assets, p. 20, CCA-forces, p. 15-16)
- Lane County's history of exclusion and oppression (CCA-forces p. 2-4)