

THE FIELD POLL

THE INDEPENDENT AND NON-PARTISAN SURVEY
OF PUBLIC OPINION ESTABLISHED IN 1947 AS
THE CALIFORNIA POLL BY MERVIN FIELD

Field Research Corporation

601 California Street, Suite 210
San Francisco, CA 94108-2814
(415) 392-5763 FAX: (415) 434-2541
EMAIL: fieldpoll@field.com
www.field.com/fieldpollonline

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**CALIFORNIANS BELIEVE MENTAL
HEALTH TREATMENT WORKS, BUT
MANY UNAWARE OF INSURANCE
COVERAGE FOR IT. OTHERS
RELUCTANT TO SEEK COUNSELING
OR TREATMENT EVEN IF COVERED.**

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By Mark DiCamillo and Mervin Field

While more than eight in ten Californians believe that treating people with a mental illness helps them lead healthy and productive lives, fewer than four in ten understand that most health insurance plans are legally required to provide mental health and alcohol and drug abuse treatment benefits comparable to coverage for other medical services.

In addition, three in ten insured Californians say they don't know whether their own health plan covers treatments for conditions like depression or anxiety or for alcohol or drug abuse, and one in ten believe they are not covered.

However, a lack of knowledge about insurance coverage isn't the only reason for not seeking mental health or substance abuse treatment. About one in five Californians report that they would not be likely to seek help for such problems, even if it were covered by insurance and created no financial burden for them.

These are some of the findings from a special statewide *Field Poll* conducted on behalf of the California HealthCare Foundation (CHCF) in June among a random sample of 2,013 California adults in six languages and dialects.

"These results show that many Californians are open to seeking help when challenged by mental health problems or substance abuse, and most understand that treatment works," said Sandra Hernandez, MD, president and CEO of CHCF. "In recent years state and federal laws have changed to give many more people access to mental health and substance abuse treatment. Most Californians want their primary care doctors to be in the loop on their mental health needs, and this bodes well for a future where the health care system meets the needs of the entire person."

Californians most frequently cite two sources of care as places they would turn to if they needed counseling or treatment for a mental health condition or problem with alcohol or drug abuse. These include their primary care doctor, mentioned by 84%, and a face-to-face encounter with a counselor, psychologist or drug treatment professional (83%).

In addition, greater than eight in ten Californians (87%) support having their primary care doctor ask them questions to assess whether they have a mental health condition or a substance abuse problem, and 79% say that they would want their primary care doctor to be informed if they sought treatment for such conditions.

Treating people with mental health illness seen as effective in helping people lead productive lives

More than eight in ten Californians (81%) believe that treating people with mental illness helps them lead healthy and productive lives. Very few Californians (3%) feel treatment does not help, but 16% aren't sure.

While large majorities of adults across all major racial and ethnic subgroups of the state believe treating mental illness is helpful, white non-Hispanics (87%) are somewhat more likely than Latinos (72%) to hold this view. Spanish-speaking Latinos in particular are the least convinced of the effectiveness of mental health treatment, with only 67% feeling this way. (*Graph 1*)

Most insured Californians believe their health plan covers them for mental health treatment, but many don't know

The survey asked insured Californians whether they thought their health plan covered them for treatment of mental health conditions like depression or anxiety, or treatment for alcohol or drug abuse. The results show that while most insured adults (60%) say their health plan does provide them with this coverage, 10% believe it does not and 30% don't know.

Insured Latinos and Asian Americans are less apt to think their health plan covers mental health treatment than insured white non-Hispanics and African Americans. Among insured Latinos only slightly more than half (55%) say this, and this declines to 48% among Spanish-speaking Latinos. Similarly, only 48% of the state's insured Asian Americans believe their health plan covers them for mental health treatment. By comparison, two in three of the state's insured white non-Hispanics (66%) and African Americans (66%) think they are covered for treatment of mental health conditions. (*Graph 2a*)

In addition, Californians who receive health insurance coverage through an employer or labor union are more likely than others to believe their plan covers mental health treatment. About three in four insured Californians who are covered through an employer or labor union (73%) believe their health plan provides mental health care benefits. This compares to only about half of Californians covered by an individually purchased plan (48%), Medicare (54%) or Medi-Cal (47%). (*Graph 2b*)

Relatively small proportions of Californians understand that most health insurance plans are required to provide mental health and substance abuse benefits with the same coverage rules as for other medical services

Only 38% of the California public understand that health insurance plans are generally required by law to provide mental health benefits with the same co-payments, deductibles and coverage limits that apply to other medical services. This awareness declines to 29% when people are asked about treatment for alcohol or drug abuse.

Asian Americans are slightly more likely than other racial and ethnic subgroups of the state's adults to know this, although even among this segment fewer than half understand the general comparability of the insurance coverage rules relating to mental health services and other medical services. (*Graphs 3 and 4*)

While cost is the biggest problem for those not getting needed mental health treatment, a lack of understanding about insurance coverage and not knowing where to get care are also common problems

Californians who reported that they or a family member had problems getting care for a mental health condition or for alcohol or drug abuse offer a wide range of reasons for not getting the care they needed. Most commonly cited is that they couldn't afford the cost (63%).

However, large proportions also report two other knowledge-based factors as reasons for not getting care. For example, nearly half of those with health insurance (47%) cite a lack of coverage as a reason for not getting needed mental health care. In addition, 39% cite a lack of knowledge about where to get such care as a reason for not getting mental health treatment.

Other causes cited with some frequency as reasons for not getting needed care for a mental health condition include the following: didn't think it would do any good (24%), afraid or embarrassed to seek care for a mental health condition (24%) or afraid or embarrassed to seek treatment for an alcohol or drug problem (19%). (*Graph 5*)

Most Californians say they would likely seek professional help if they had a mental health condition, but one in five would not, even if it were covered by insurance

Three in four Californians (77%) say they would likely seek professional care if they needed counseling or treatment for a mental health condition, like depression or anxiety, or for alcohol or drug abuse, of whom 55% would be very likely to do so. However, 19% report that they would not be likely to seek such help, even if it were covered by insurance and created no financial burden to them.

A somewhat smaller proportion of Asian Americans (66%) reports being likely to seek professional health for a mental health condition or for an alcohol or drug abuse problem compared to other ethnic populations, and only 41% say they'd be very likely to do so. Men are also less apt than women to seek professional help for these conditions. (*Graph 6*)

Preferred sources for receiving mental health counseling or treatment for alcohol or drug abuse

Californians were asked about their likelihood of seeking counseling from each of five sources if they had a mental health condition such as depression or anxiety, or needed treatment for alcohol or drug abuse. The most popular sources of care, cited by more than eight in ten, are primary care doctors (84%) and face-to-face interaction with a counselor, psychologist or drug treatment professional (83%). In each case a majority reports being very likely to seek help from these sources.

The next most commonly reported source of care for such problems is through a peer support program, like a 12-step alcohol or drug rehabilitation program, cited by 63%.

By comparison, only about four in ten Californians also say they'd likely seek help from a priest, clergy or other faith-based minister (42%) or through an online hotline, chat service or other online counseling program (39%).

California Latinos and African Americans are more likely than white non-Hispanics or Asian Americans to say they'd be likely to seek help through a peer support program or from a priest, clergy or minister. Spanish-speaking Latinos are also more likely than others to say they would seek help from an online crisis hotline, chat service or other online source. (*Graphs 7a and 7b*)

Most Californians support involving their primary care doctor on matters relating to their mental health

More than eight in ten Californians (87%) support having their primary care doctor ask them questions to assess whether they have a mental health condition or a problem with alcohol or drug abuse, and 61% are very supportive. In addition, 79% of the statewide public maintain that if they sought counseling for a mental health condition or treatment for alcohol or drug abuse that they would want their primary care doctor kept informed of this.

While these sentiments are shared by large majorities of adults across all major racial and ethnic subgroups, Spanish-speaking Latinos and African Americans are more likely to say they would want their doctor kept informed if they sought such counseling or treatment. African Americans are also somewhat more likely than others to say they would be very supportive of having their doctor ask them questions to assess whether or not they have a mental health condition or an alcohol or drug abuse problem. (*Graphs 8 and 9*)

Information About The Survey

Methodological Details

The findings in this report are based on a special *Field Poll* completed June 5-22, 2014 on behalf of the California HealthCare Foundation. The survey was conducted among a random sample of 2,013 California adults. To capture the diversity of the California adult population, the survey was administered in six languages and dialects – English, Spanish, Cantonese, Mandarin, Vietnamese and Korean, depending on the preference of the respondent.

Random samples of California adults were developed using dual frame random digit dial sampling methodology. For this survey, a total of 1,402 interviews were conducted with adults on their cell phone and 611 were conducted on a landline or other type of phone. After the completion of interviewing, the sample was weighted to match demographic, geographic and voter registration estimates of the adult population in California. The weighting process also takes into account the higher probability of reaching respondents who receive calls on both a landline and cell phone.

Sampling error estimates applicable to the results of any probability-based survey depend on sample size and the percentage distributions being examined. The maximum sampling error for results from the overall adult sample is +/- 2.2 percentage points at the 95% confidence level.

The maximum sampling error estimates are based on survey findings in the middle of the sampling distribution (i.e., results at or near 50%). Percentages at either tail of the distributions (i.e., results closer to 10% or 90%) have somewhat smaller margins of error. There are other sources of error in surveys of public opinion besides sampling error. However, the overall design and execution of this survey sought to minimize these other possible errors.

The Field Poll was established in 1947 as *The California Poll* by Mervin Field, who is still an active advisor. The Poll has operated continuously since then as an independent, non-partisan survey of California public opinion. The Poll receives funding from media subscribers, from California foundations and independent not-for-profit organizations, and from the University of California and California State University systems, who receive the data files from each *Field Poll* survey shortly after its completion for teaching and secondary research purposes.

About the California HealthCare Foundation

The California HealthCare Foundation works as a catalyst to fulfill the promise of better health care for all Californians. CHCF supports ideas and innovations that improve quality, increase efficiency and lower the costs of care. For more information visit www.chcf.org or contact Avram Goldstein at (510) 587-3154 or agoldstein@chcf.org.

A Survey of California Adults About Behavioral Health Issues

- conducted by -
The Field Poll

- for -
The California HealthCare Foundation

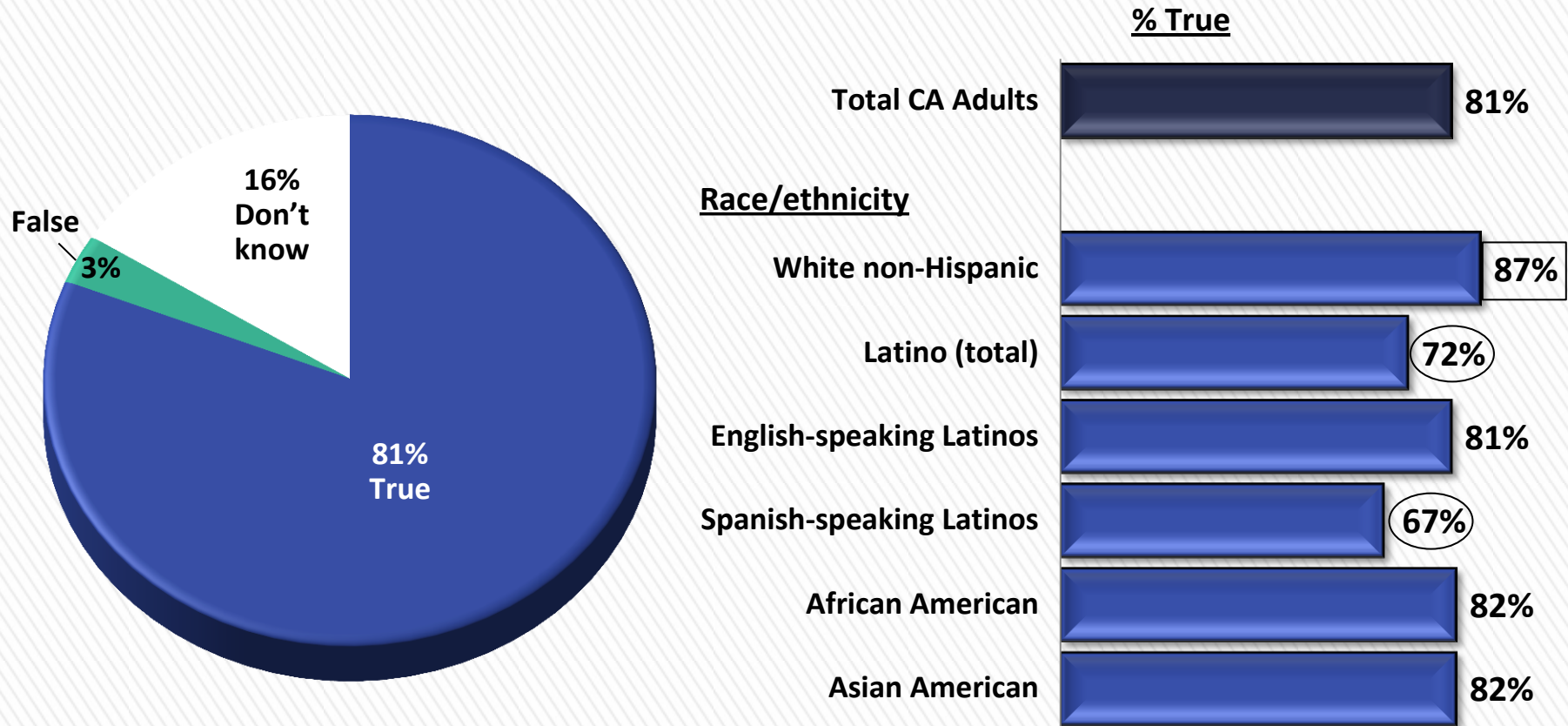
June 2014

About the Survey

Population surveyed:	California adults age 18 or older
Method of data collection:	Interviews conducted by means of computer-assisted telephone interviewing by live interviewers
Sampling method:	Random sample of adults developed from random digit dial landline and cell phone listings
Sample size:	2,013
Languages of administration:	English, Spanish, Cantonese, Mandarin, Korean and Vietnamese
Interviewing period:	June 5-22, 2014

Graph 1

Eight in ten Californians believe treatment can help people with mental illness to lead healthy and productive lives



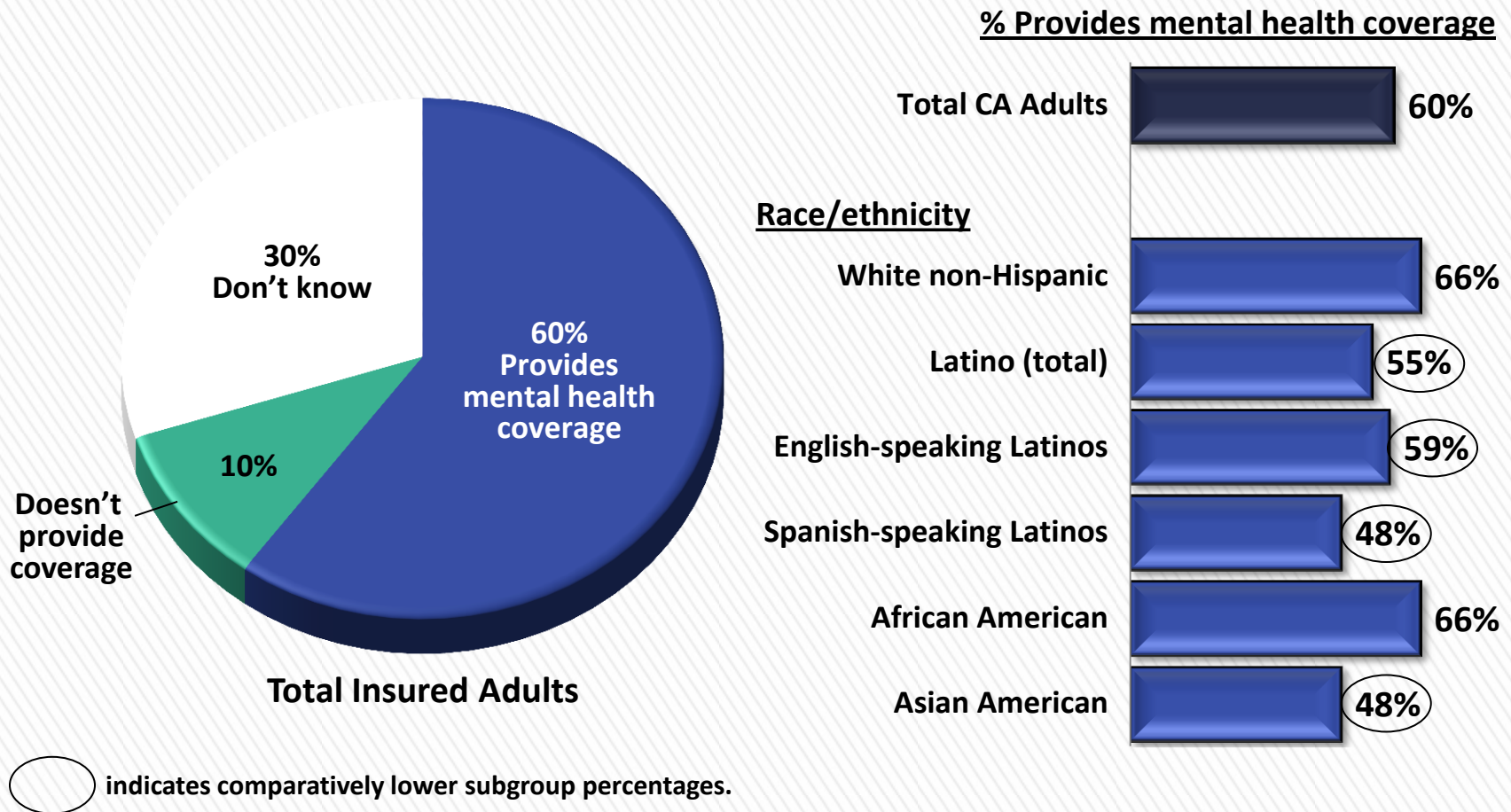
○ indicates comparatively lower subgroup percentages.

□ indicates comparatively higher subgroup percentages.

Question asked: Please tell me if you think each statement is true, false or if you don't know. "Treatment can help people with mental illness lead healthy and productive lives."

Table 2a

While most insured Californians believe their plan provides them with coverage for treatment of mental health conditions or for alcohol or drug abuse, 10% think it doesn't and 30% don't know (among Californians covered by a health insurance plan)

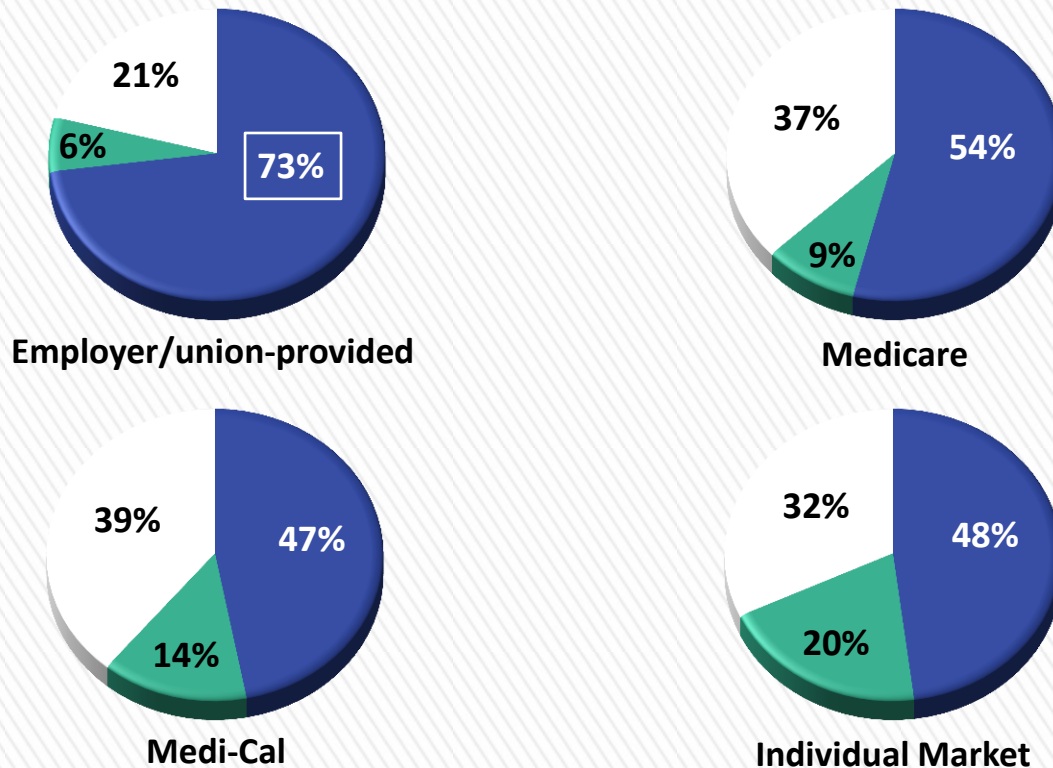


Question asked: "Does your current health insurance plan provide you with coverage for counseling or treatment for a mental health condition, like depression or anxiety, or for alcohol or drug abuse."

Graph 2b

Californians with employer- or union-provided health insurance are more likely than others to believe their plan covers them for mental health counseling or treatment

Provides mental health coverage Doesn't provide Don't know

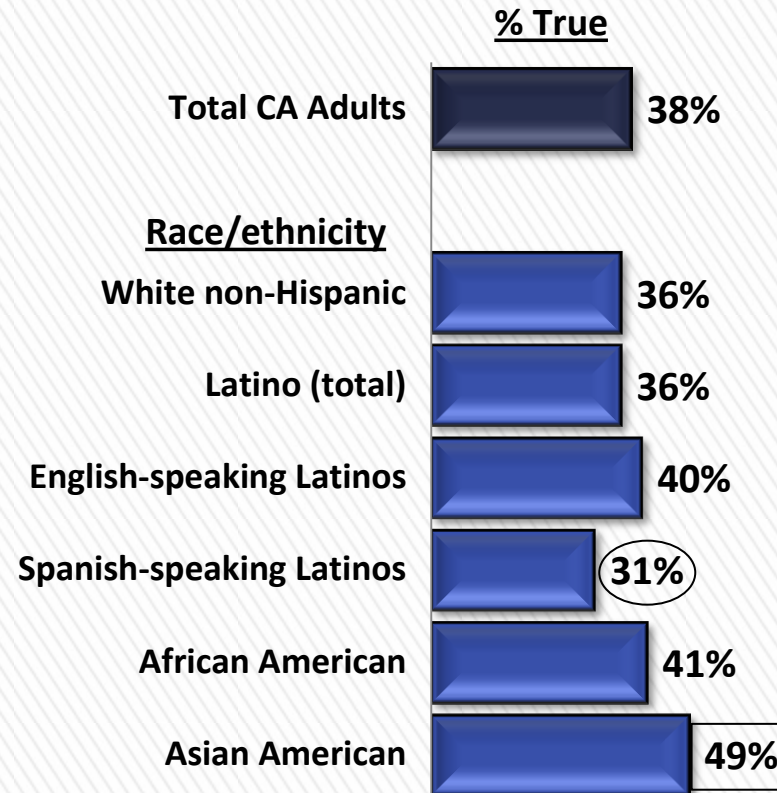
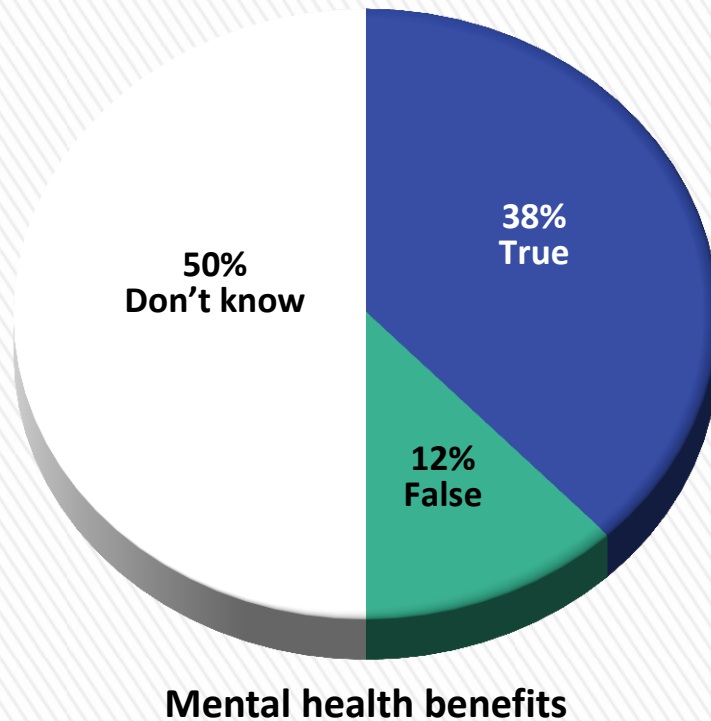


 indicates comparatively higher subgroup percentages.

Question asked: "Does your current health insurance plan provide you with coverage for counseling or treatment for a mental health condition, like depression or anxiety, or for alcohol or drug abuse."

Graph 3

Most Californians don't know that health insurance plans are generally required to provide benefits for mental health with the same coverage rules as other medical services



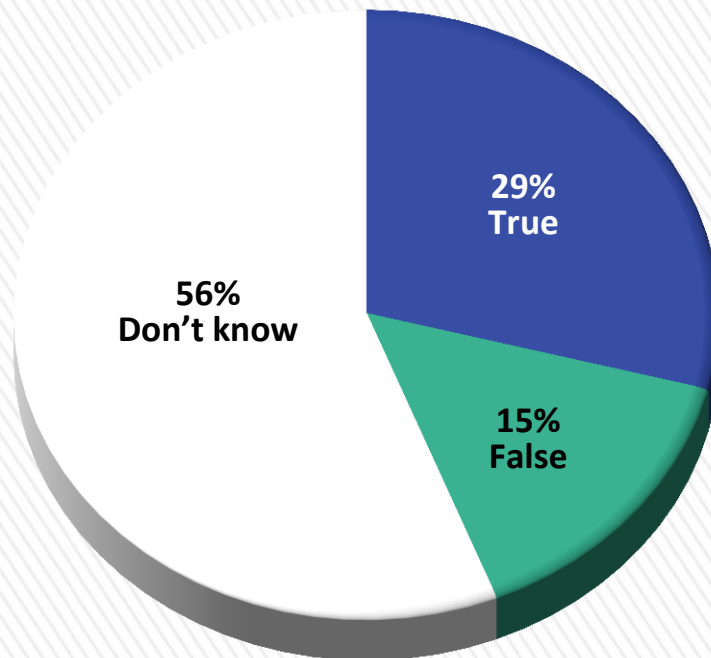
○ indicates comparatively lower subgroup percentages.

□ indicates comparatively higher subgroup percentages.

Question asked: Please tell me if you think each statement is true, false or if you don't know. "Health insurance plans are generally required to provide mental health benefits with the same rules about copays, deductibles, and coverage limits as other medical services."

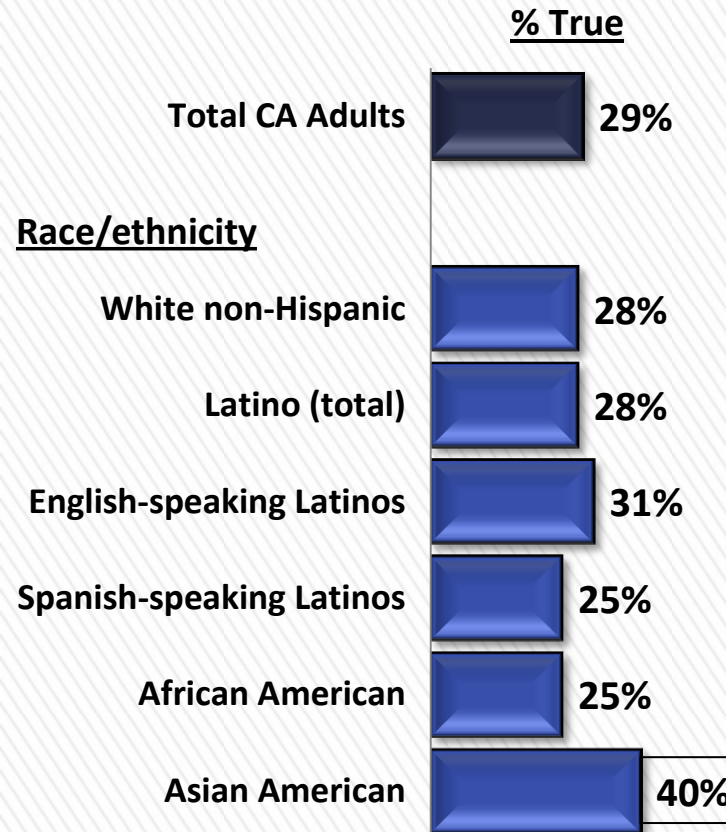
Graph 4

Most Californians don't know that health insurance plans are generally required to provide benefits for alcohol or drug abuse with the same coverage rules as other medical services



**Benefits for
alcohol or drug abuse**

Race/ethnicity

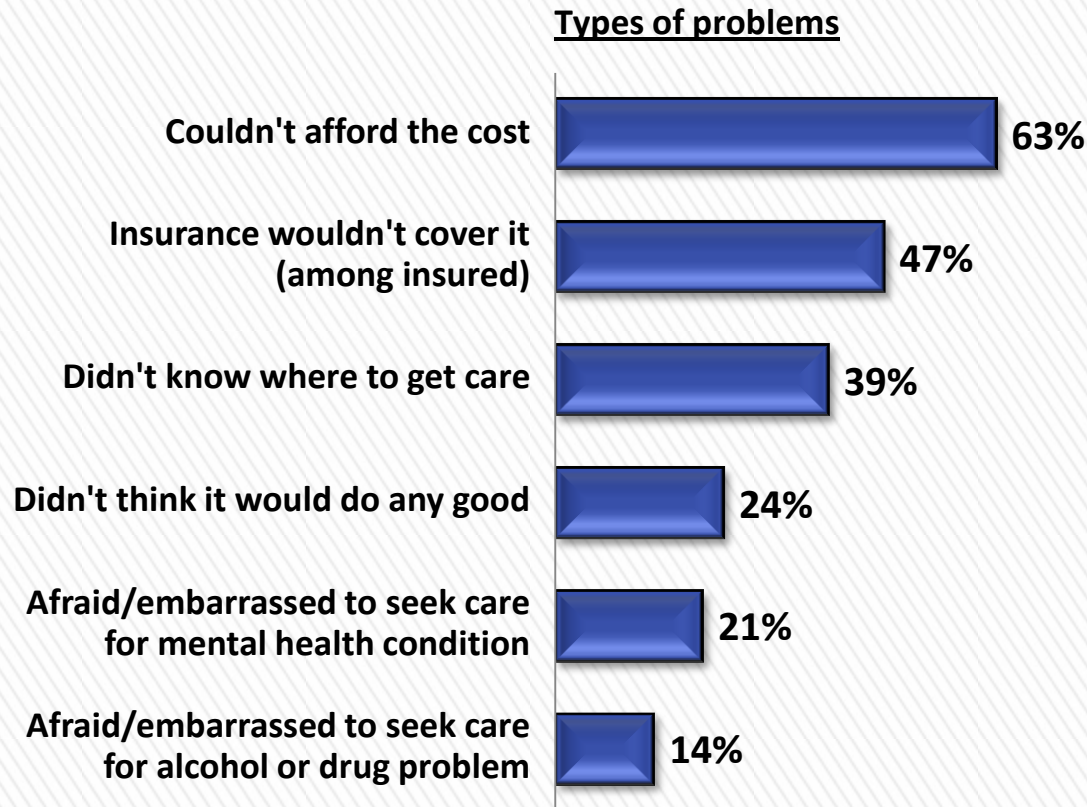


 indicates comparatively higher subgroup percentages.

Question asked: Please tell me if you think each statement is true, false or if you don't know. "Health insurance plans are generally required to provide benefits for treating alcohol or drug abuse with the same rules about copays, deductibles, and coverage limits as other medical services."

Graph 5

Cost and lack of insurance coverage are the most common problems cited by those who report having problems getting care for a mental health condition or for alcohol or drug abuse in the past year

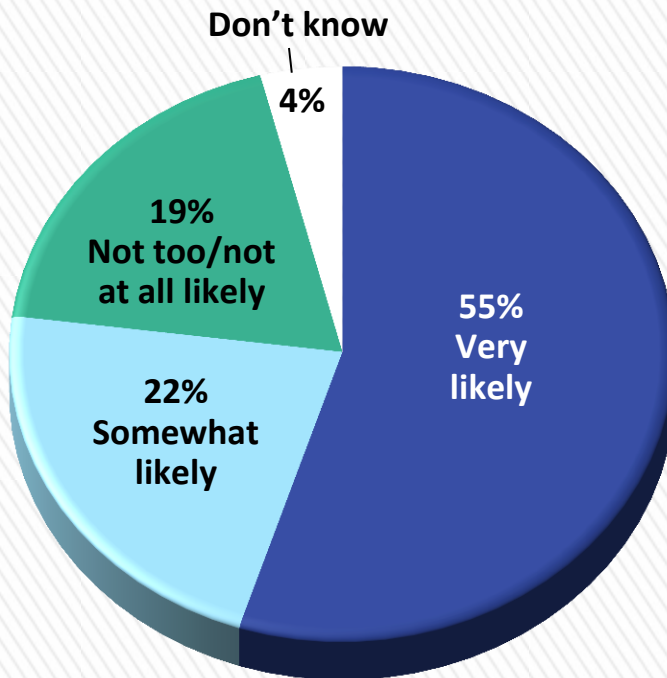


Note: Findings based on a relatively small sample.

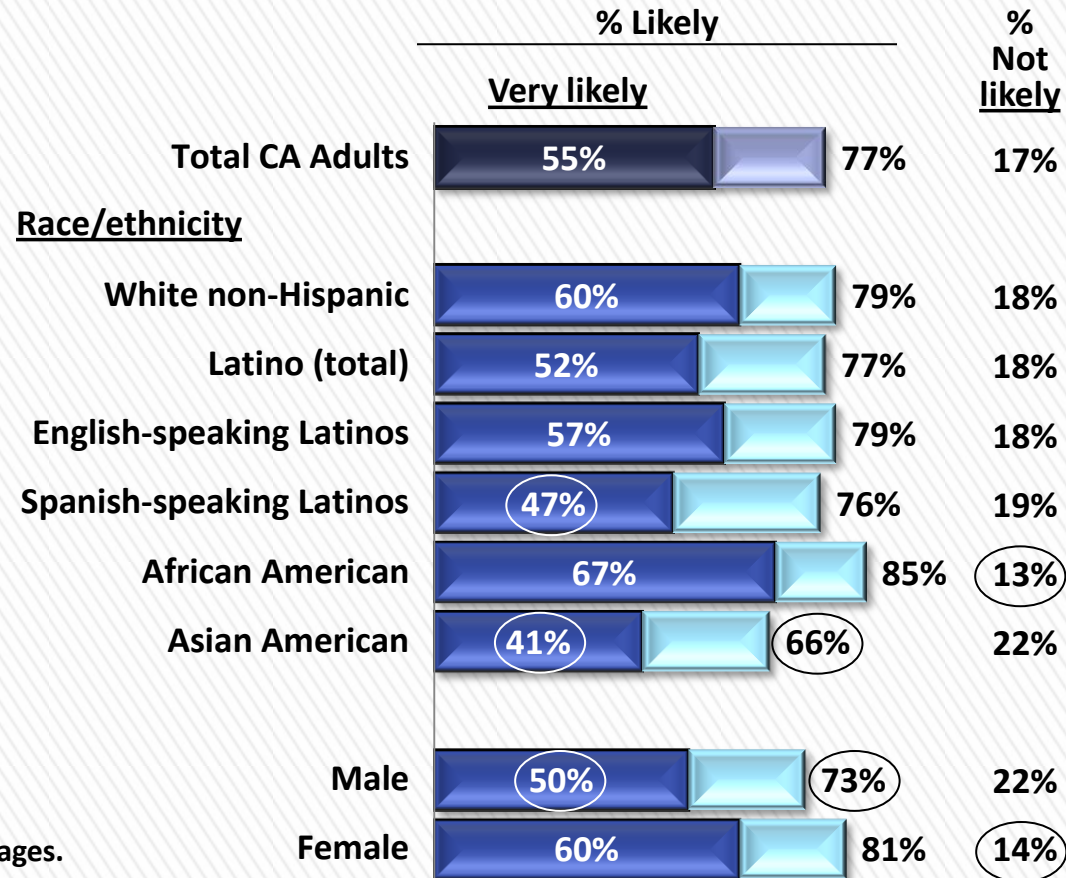
Question asked: "In the past 12 months, have you or another family member living in your household had problems getting care for a mental health condition, such as counseling or treatment for depression or anxiety, or for alcohol or drug abuse? (IF YES:) I am going to read a list of reasons, and for each, I'd like you to tell me if it was a reason you or someone in your household had problems getting care for a mental health condition or for alcohol or drug abuse. (ITEMS READ IN RANDOM ORDER.)"

Graph 6

While 77% say they'd likely seek professional help for a mental health condition or alcohol or drug problem, 19% wouldn't – even if covered by insurance and it created no financial burden



○ indicates comparatively lower subgroup percentages.

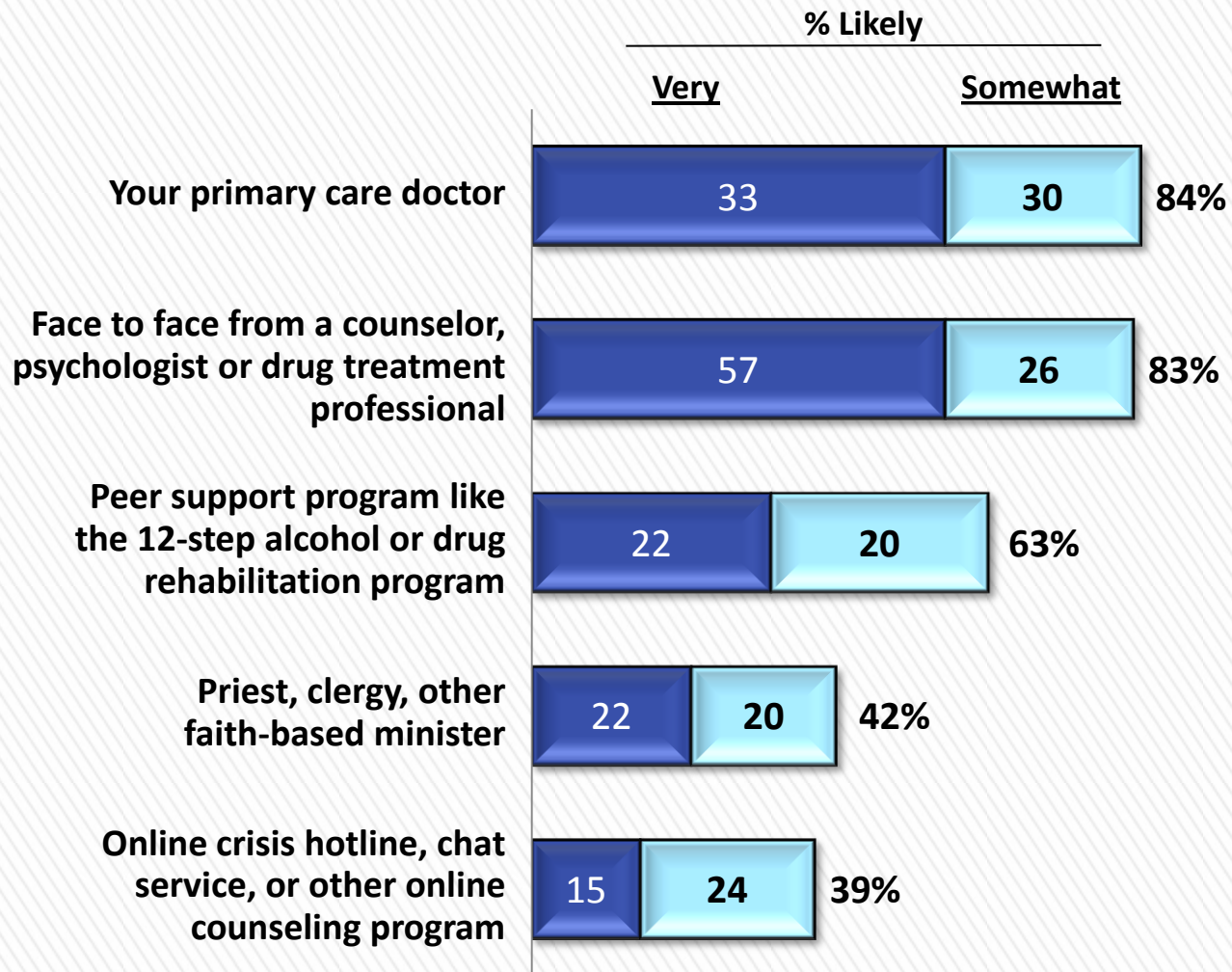


Note: Differences between 100% and the sum of each subgroup's percentages saying they are likely or not likely to seek professional help equal proportion answering don't know or who refused to answer.

Question asked: "If you needed counseling or treatment for a mental health condition, like depression or anxiety, or for alcohol or drug abuse, and these services were covered by insurance and created no financial burden for you, how likely would you be to seek professional help or treatment for this – very likely, somewhat likely, not too likely or not at all likely."

Graph 7a

Californians are more likely to prefer receiving mental health treatment from their primary care doctor or face to face from a mental health professional



Question asked: "If you were seeking counseling or treatment for a mental health condition, like depression or anxiety, or for alcohol or drug abuse and you knew where to find resources to help, how likely would you be to seek help from each of the following."

Graph 7b

Californians are more likely to prefer receiving mental health treatment from their primary care doctor or face to face from a mental health professional – by race and ethnicity

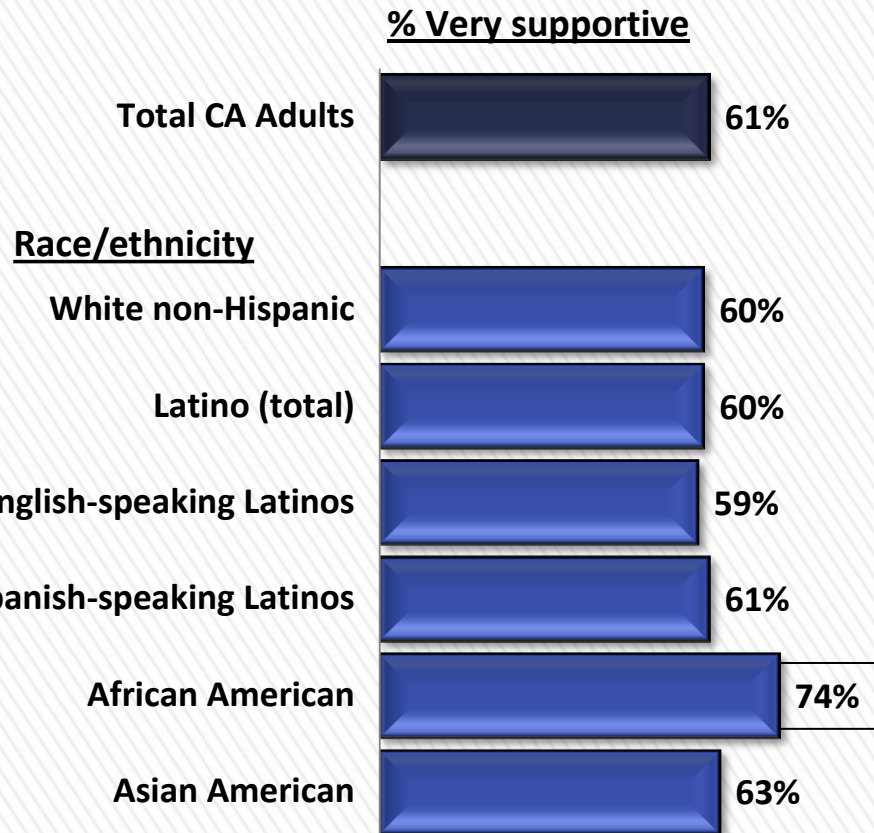
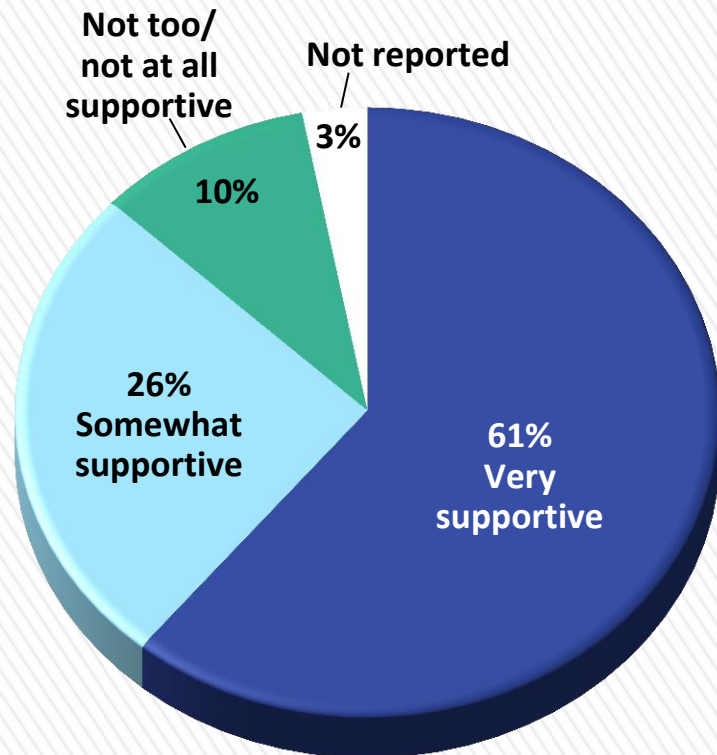
	<u>Total</u>	<u>% Likely</u>					
		<u>White non-Hispanic</u>	<u>Latino (total)</u>	<u>English-speaking Latinos</u>	<u>Spanish-speaking Latinos</u>	<u>African American</u>	<u>Asian American</u>
Your primary care doctor	84%	83%	87%	90%	85%	83%	81%
Face to face from a counselor, psychologist or drug treatment professional	83	86	80	83	77	91	77
Peer support program, like the 12-step alcohol or drug rehabilitation program	63	60	72	72	71	68	56
Priest, clergy, other faith-based minister	42	36	48	46	51	62	33
Online crisis hotline, chat service, or other online counseling program	39	31	52	40	64	30	39

indicates comparatively higher subgroup percentages.

Question asked: “If you were seeking counseling or treatment for a mental health condition, like depression or anxiety, or for alcohol or drug abuse and you knew where to find resources to help, how likely would you be to seek help from each of the following.”

Graph 8

Greater than eight in ten support having their primary care doctor ask them questions to assess whether they had a mental health condition or an alcohol or drug related problem

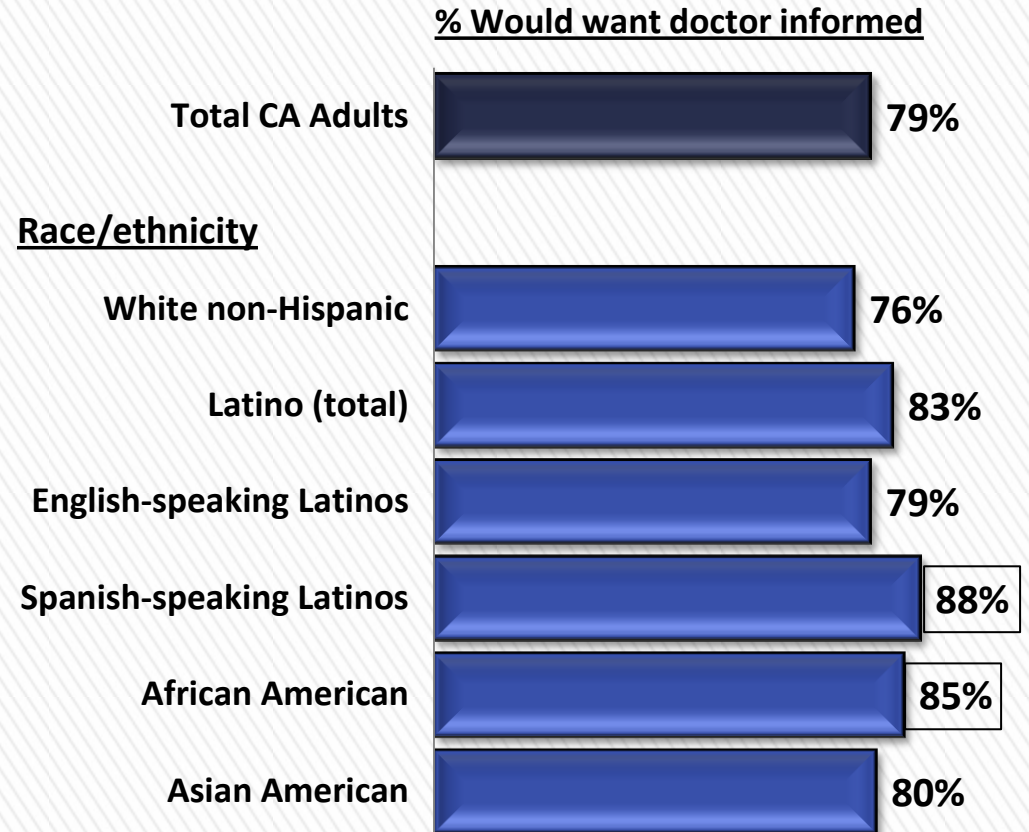
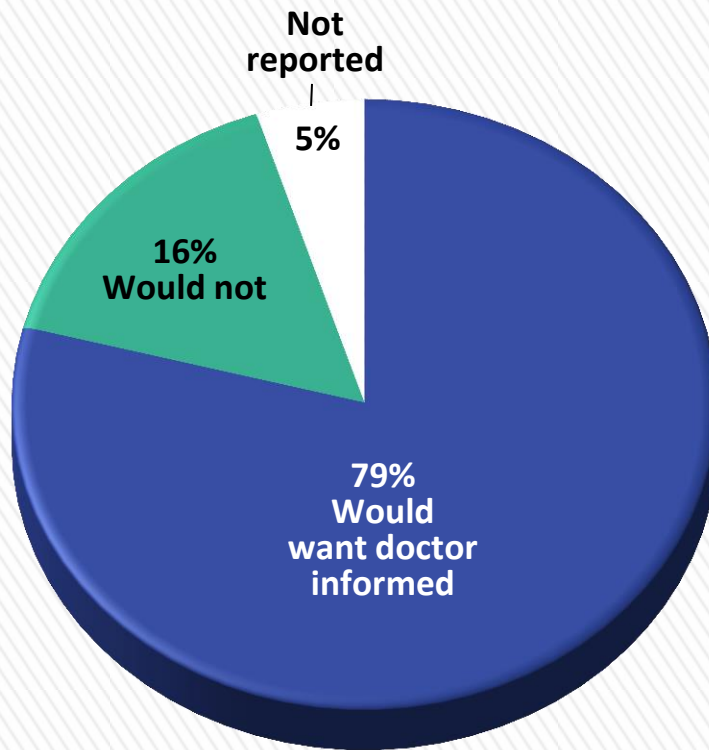


 indicates comparatively higher subgroup percentages.

Question asked: "How would you feel about your doctor or primary care provider asking you questions to assess whether you had a mental health condition or a problem with alcohol or drug abuse? Would you be very supportive of this, somewhat supportive, not too supportive, or not at all supportive of this?"

Graph 9

Most Californians would want their primary care doctor kept informed if they sought treatment for a mental health condition or for alcohol or drug abuse



 indicates comparatively higher subgroup percentages.

Question asked: "If you sought counseling or treatment for a mental health condition, like depression or anxiety, or for alcohol or drug abuse, would you want your regular doctor or primary care provider to be kept informed of this or not?"

Topline Findings
– CHCF Behavioral Health Questions–

IF HAS HEALTH INSURANCE:

1.	Does your current health insurance plan provide you with coverage for counseling or treatment for a mental health condition, like depression or anxiety, or for alcohol or drug abuse?	YES.....	60%
		NO	10
		DON'T KNOW	30
		REFUSED	*
2.	If you needed counseling or treatment for a mental health condition, like depression or anxiety, or for alcohol or drug abuse, and these services were covered by insurance and created no financial burden for you, how likely would you be to seek professional help or treatment for this – very likely, somewhat likely, not too likely or not at all likely?	VERY LIKELY	55%
		SOMEWHAT LIKELY	22
		NOT TOO LIKELY.....	7
		NOT AT ALL LIKELY	12
		NO OPINION	4
		REFUSED.....	*
3.	If you sought counseling or treatment for a mental health condition, like depression or anxiety, or for alcohol or drug abuse, would you want your regular doctor or primary care provider to be kept informed of this or not?	YES, KEPT INFORMED.....	79%
		NO, NOT KEPT INFORMED	16
		NO OPINION	5
		REFUSED.....	*
4.	How would you feel about your doctor or primary care provider asking you questions to assess whether you had a mental health condition or a problem with alcohol or drug abuse? Would you be very supportive of this, somewhat supportive, not too supportive, or not at all supportive of this?	VERY SUPPORTIVE.....	61%
		SOMEWHAT SUPPORTIVE	26
		NOT TOO SUPPORTIVE	4
		NOT AT ALL SUPPORTIVE	5
		NO OPINION	3
		REFUSED.....	*

IF YOU OR A FAMILY MEMBER HAD PROBLEMS GETTING CARE FOR A MENTAL HEALTH CONDITION IN PAST YEAR:

5.	I am going to read a list of reasons, and for each, I'd like you to tell me if it was a reason you or someone in your household had problems getting care for a mental health condition or for alcohol or drug abuse. (READ ITEMS IN RANDOM ORDER, ASKING:) Was this a reason or not?				
		YES	NO	DON'T KNOW	REF
() a.	You couldn't afford the cost.....	63%	32	5	*
() b.	(IF INSURED:) Your insurance wouldn't cover it	47%	40	12	1
() c.	You or your family member didn't know where to go to get care	39%	60	1	*
() d.	You or a family member were afraid or embarrassed to seek care for a mental health problem.....	21%	78	1	–
() e.	You or a family member didn't think it would do any good.....	24%	72	4	–
() f.	You or a family member were afraid or embarrassed to seek care for an alcohol or drug abuse problem.....	14%	84	2	–

* Less than 1%

6. I am going to read some statements to you. For each please tell me if you think each statement is true, false or if you don't know? (READ STATEMENTS IN RANDOM ORDER, ASKING:) Would you say this statement is true or false or don't you know?

	TRUE	FALSE	DON'T KNOW	REF
() a. "Health insurance plans are generally required to provide <u>mental health benefits</u> with the same rules about copays, deductibles, and coverage limits as other medical services" (.....	38%	12	50 *
() b. "Health insurance plans are generally required to provide benefits for treating alcohol or drug abuse with the same rules about copays, deductibles, and coverage limits as other medical services".....	29%	15	56 *
() c. "Treatment can help people with mental illness lead healthy and productive lives".....	81%	3	16 *

7. If you were seeking counseling or treatment for a mental health condition like depression or anxiety, or for alcohol or drug abuse, and you knew where to find resources to help, how likely would you be to seek help from each of the following. (READ ITEMS IN RANDOM ORDER, ASKING:) How likely would you be to seek help (ITEM) – very likely, somewhat likely, not too likely or not at all likely?

	VERY LIKELY	SOME- WHAT LIKELY	NOT TOO LIKELY	NOT AT ALL LIKELY	DON'T KNOW	REF
() a. from an online crisis or hotline or chat service, or through an online counseling program	15%	24	21	35	5 *
() b. from a priest, clergy or other faith-based minister	22%	20	17	37	4 *
() c. face-to-face from a counselor, psychologist, drug treatment or other mental health professional.....	57%	26	5	8	4 *
() d. through a peer support program, such as the 12-step rehabilitation program for alcohol or drug abuse.....	33%	30	11	19	7 *
() e. from your doctor or primary care provider.....	57%	27	6	7	3 *