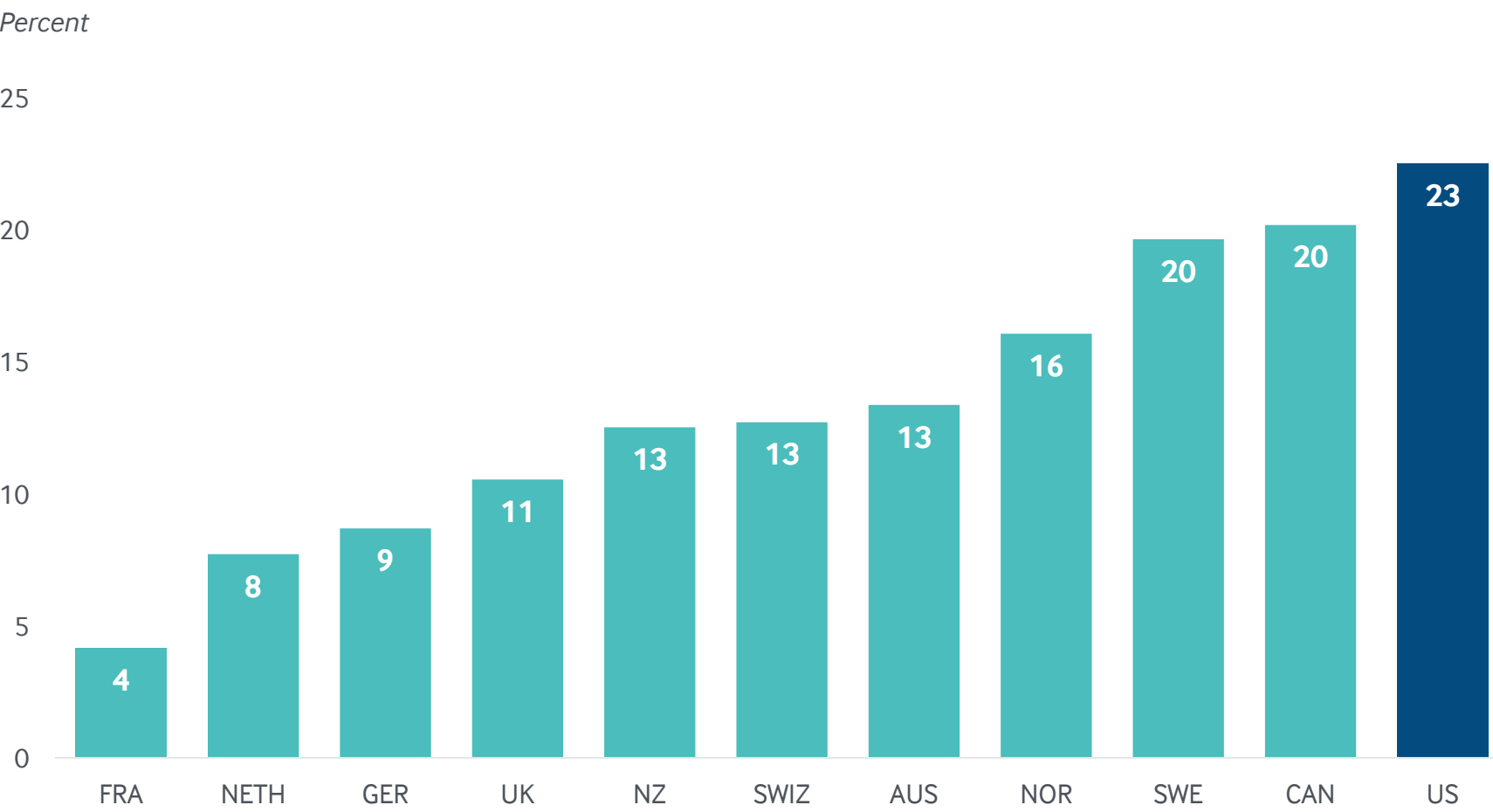


Depression, Anxiety, or Other Mental Health Diagnoses Among Adults, 2016



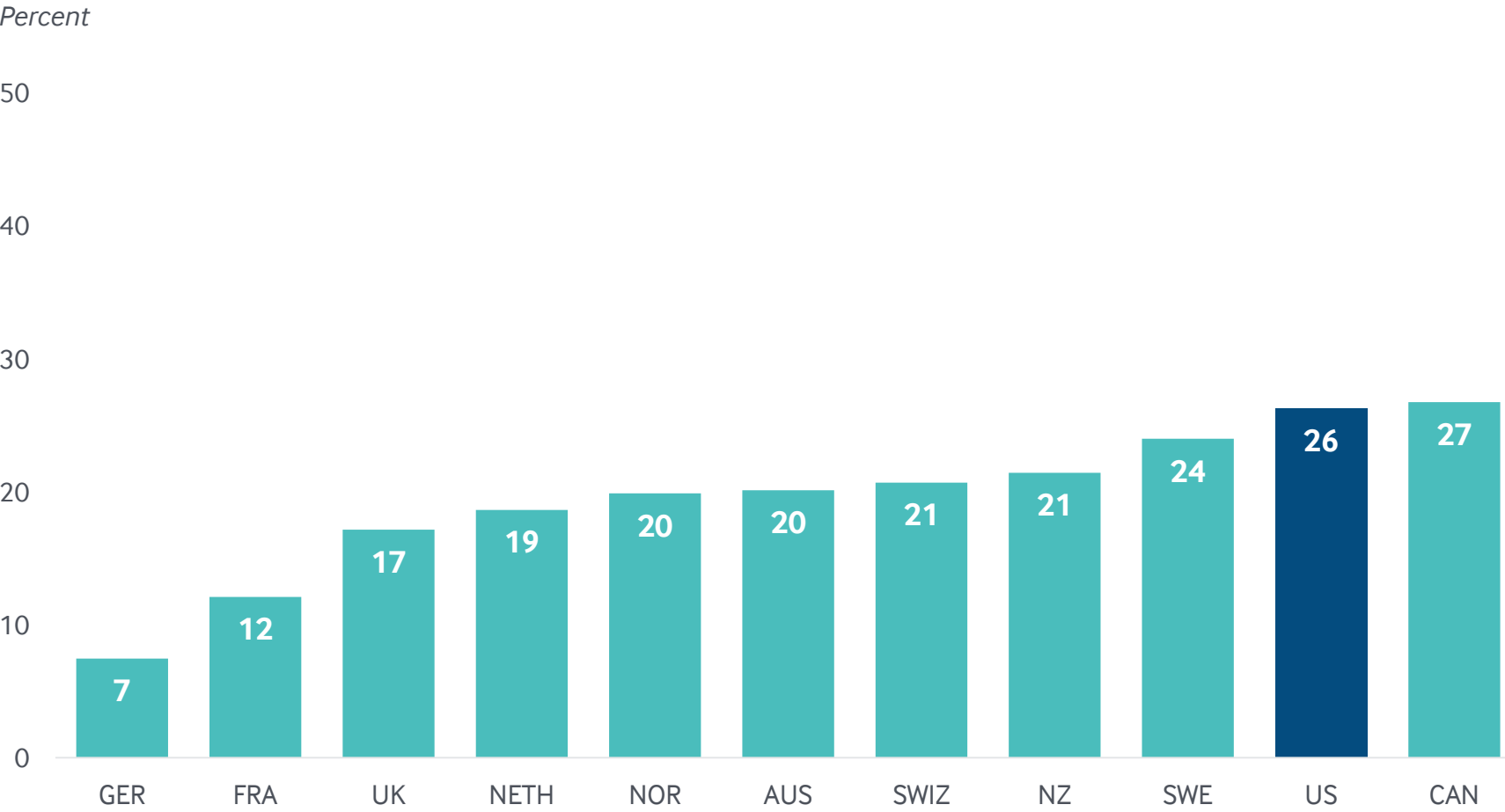
Question: Have you ever been told by a doctor that you have, or have had, depression, anxiety, or other mental health problems?

Data: 2016 Commonwealth Fund International Health Policy Survey.



Source: Roosa Tikkanen et al., *Mental Health Conditions and Substance Use: Comparing U.S. Needs and Treatment Capacity with Those in Other High-Income Countries* (Commonwealth Fund, May 2020).

Subjective Experience of Emotional Distress, 2016



Question: In the past two years, have you experienced emotional distress, such as anxiety or great sadness, which you found difficult to cope with by yourself?

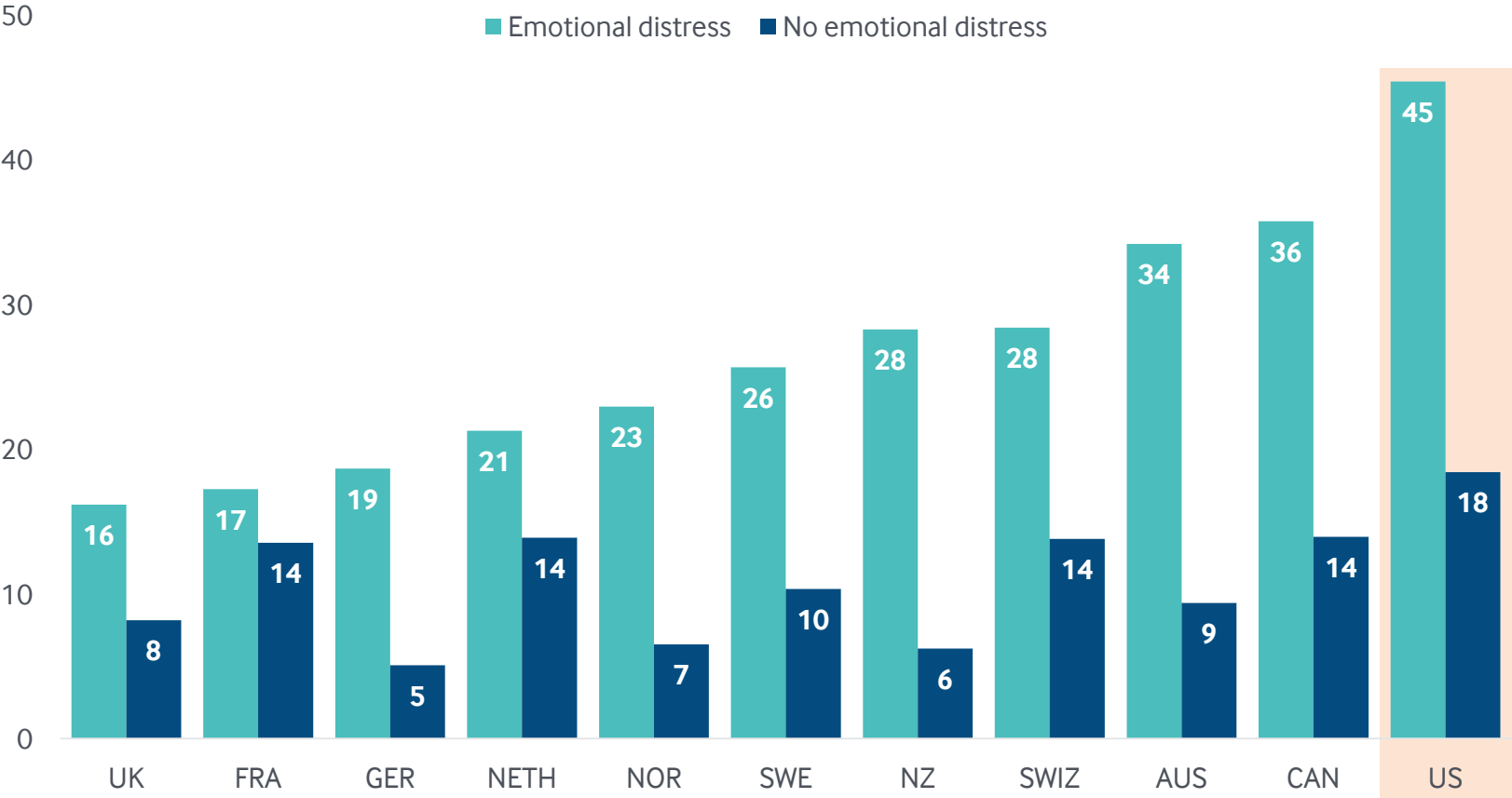
Data: 2016 Commonwealth Fund International Health Policy Survey.



Source: Roosa Tikkanen et al., *Mental Health Conditions and Substance Use: Comparing U.S. Needs and Treatment Capacity with Those in Other High-Income Countries* (Commonwealth Fund, May 2020).

Socioeconomic Needs Among Adults Who Had and Had Not Experienced Emotional Distress, 2016

Percent who said "always" or "usually"*



Question: In the past 12 months, have you "always" or "usually" been worried or stressed about one or more of the following: having enough money to buy nutritious meals, crime or drugs in your neighborhood, and/or having enough money to pay your rent or mortgage?

* Other response categories: "sometimes," "rarely," "never."

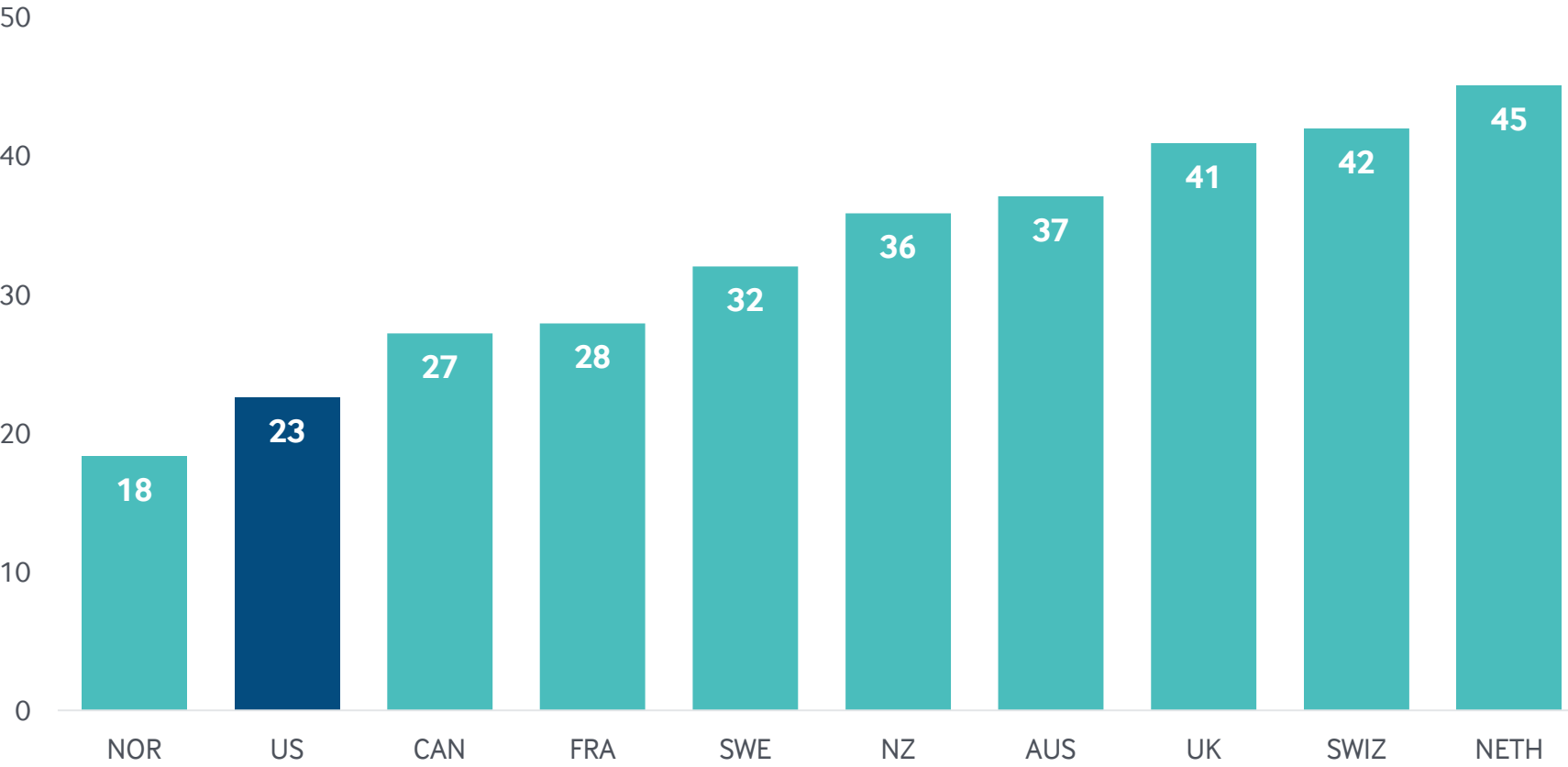
Data: 2016 Commonwealth Fund International Health Policy Survey.



Source: Roosa Tikkanen et al., *Mental Health Conditions and Substance Use: Comparing U.S. Needs and Treatment Capacity with Those in Other High-Income Countries* (Commonwealth Fund, May 2020).

Did Not Want to See a Professional for Emotional Distress, 2016

Percent who had experienced emotional distress



Question: When you felt this way, were you able to get help from a professional when you needed it? Response: No, did not want to see a professional.

Notes: "Emotional distress" refers to adults who report they have experienced anxiety or great sadness which they found difficult to cope with by themselves in the past two years. No data shown for GER because of small sample size (n<100).

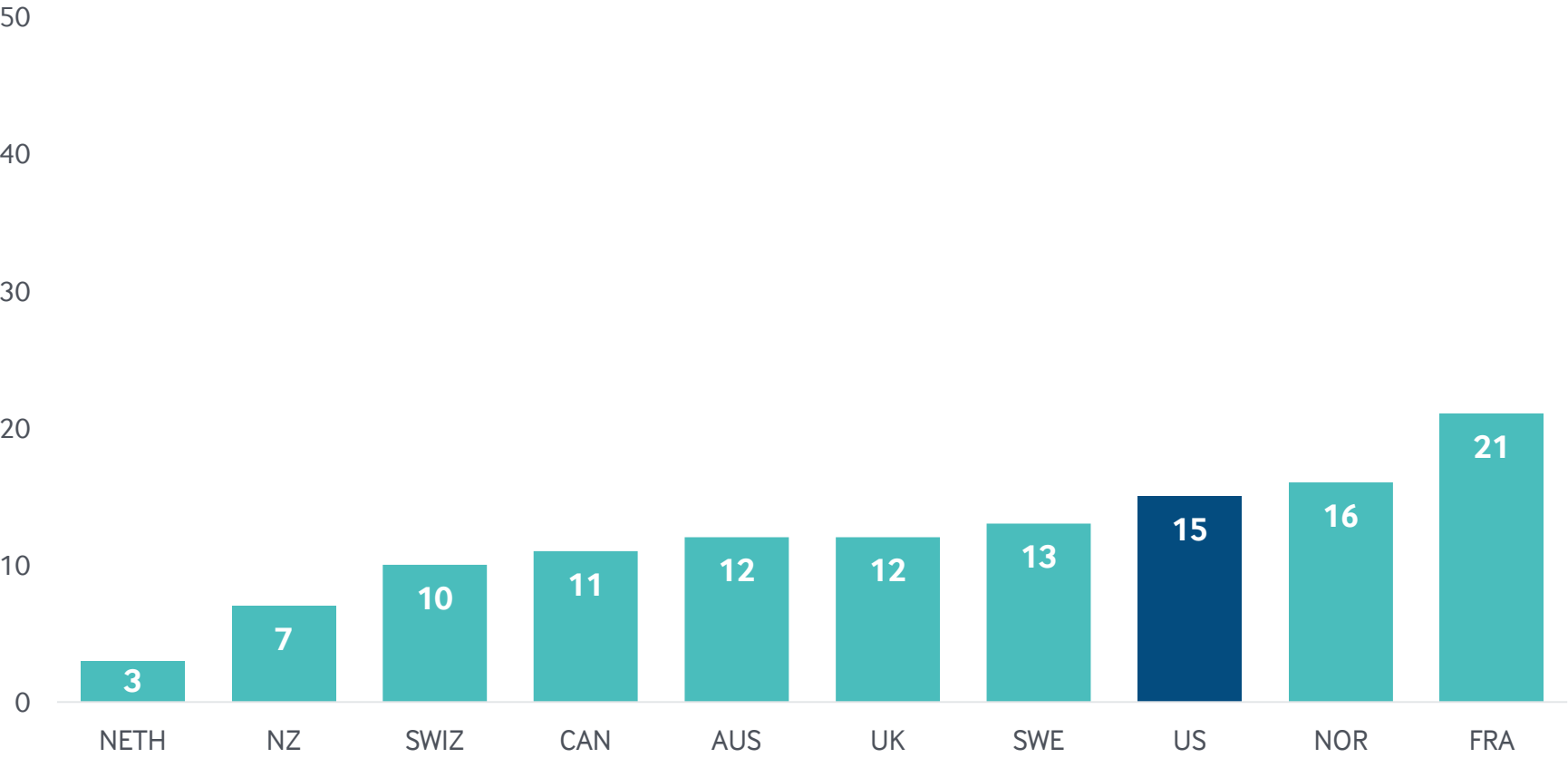
Data: 2016 Commonwealth Fund International Health Policy Survey.



Source: Roosa Tikkanen et al., *Mental Health Conditions and Substance Use: Comparing U.S. Needs and Treatment Capacity with Those in Other High-Income Countries* (Commonwealth Fund, May 2020).

Unable to Get or Afford Needed Mental Health Care, 2016

Percent who had experienced emotional distress



Question: When you felt this way, were you able to get help from a professional when you needed it? Response: No, could not get help or could not afford to see a professional.

Notes: "Emotional distress" refers to adults who report they have experienced anxiety or great sadness which they found difficult to cope with by themselves in the past two years. No data shown for GER because of small sample size (n<100).

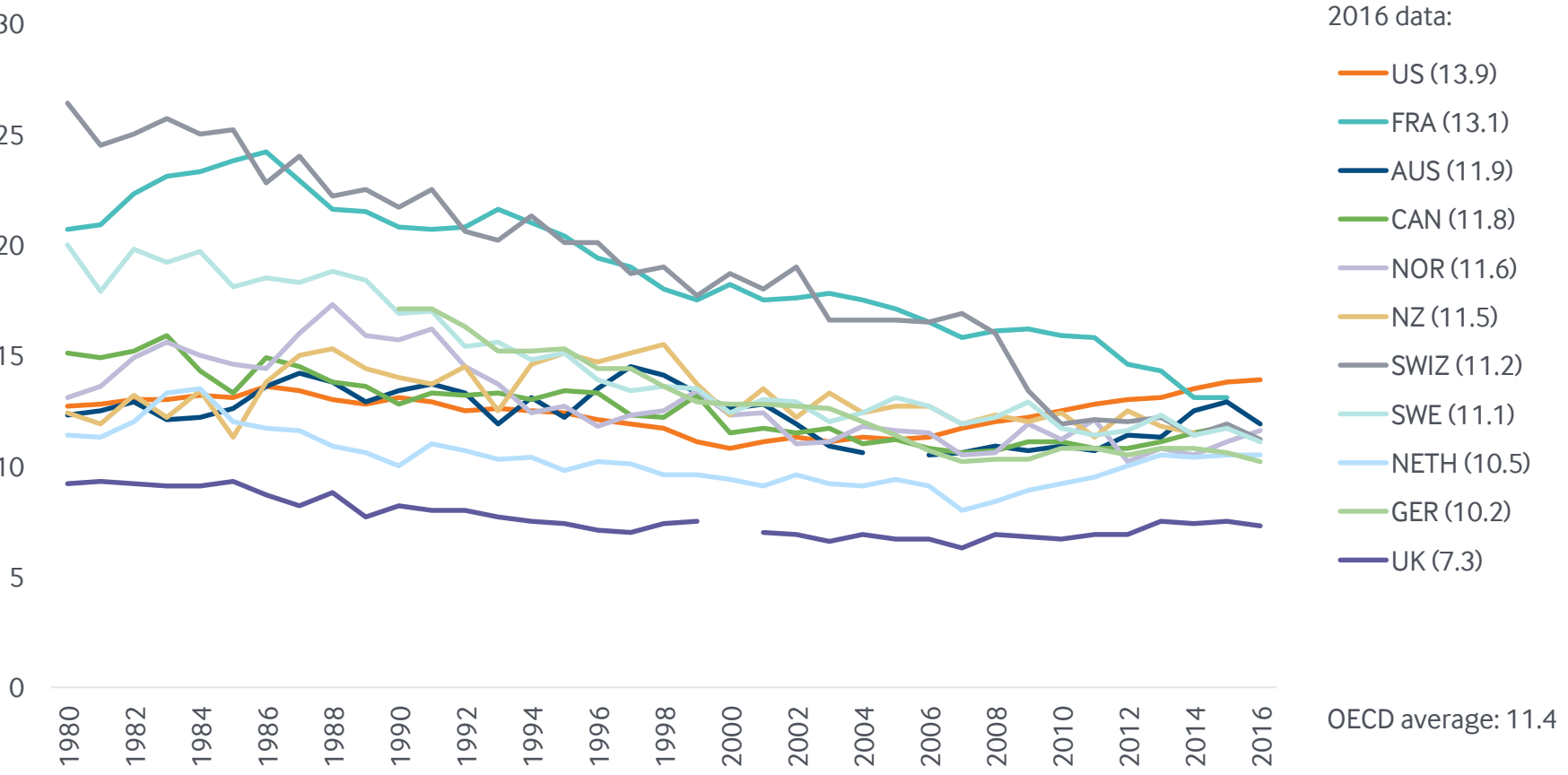
Data: 2016 Commonwealth Fund International Health Policy Survey.



Source: Roosa Tikkanen et al., *Mental Health Conditions and Substance Use: Comparing U.S. Needs and Treatment Capacity with Those in Other High-Income Countries* (Commonwealth Fund, May 2020).

Trends in Suicides, 1980–2016

Deaths per 100,000 (standardized rates)



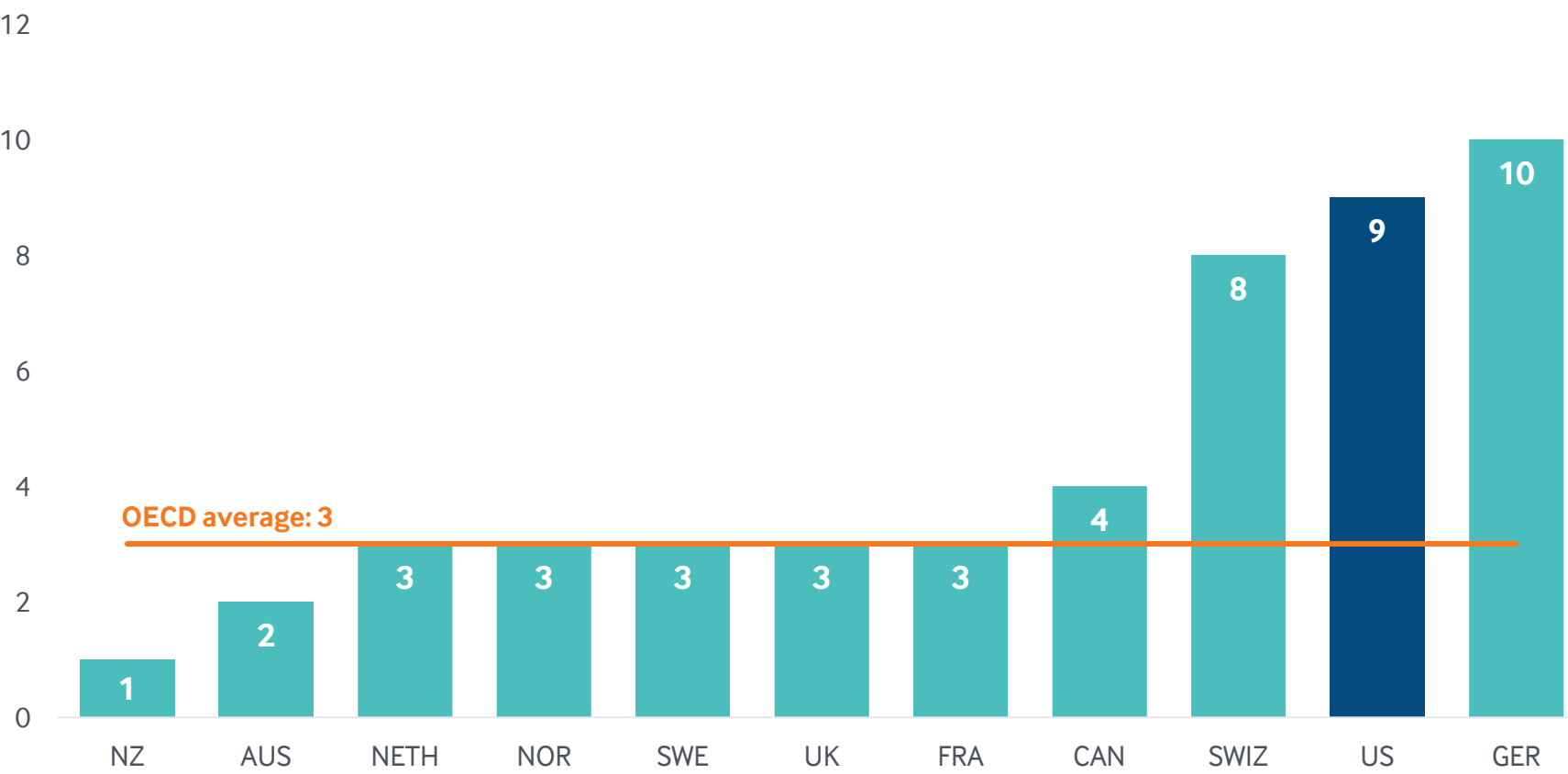
Note: Rates reflect age- and sex-standardized rates for 2016 or latest available year (2015 for CAN, FRA; 2014 for NZ).
 Data: OECD Health Data 2019.



Source: Roosa Tikkanen et al., *Mental Health Conditions and Substance Use: Comparing U.S. Needs and Treatment Capacity with Those in Other High-Income Countries* (Commonwealth Fund, May 2020).

Deaths Related to Drug Use, 2016

Deaths per 1,000,000 (standardized rates)



Notes: Reflects deaths from psychoactive substance use, including from opioids, cannabis, sedatives, hypnotics, anxiolytics, cocaine, other stimulants, hallucinogens, nicotine, inhalants, and other psychoactive substances, but excluding alcohol. Rates reflect age- and sex-standardized rates for 2016 or latest available year (2015 for CAN, FRA; 2014 for NZ).

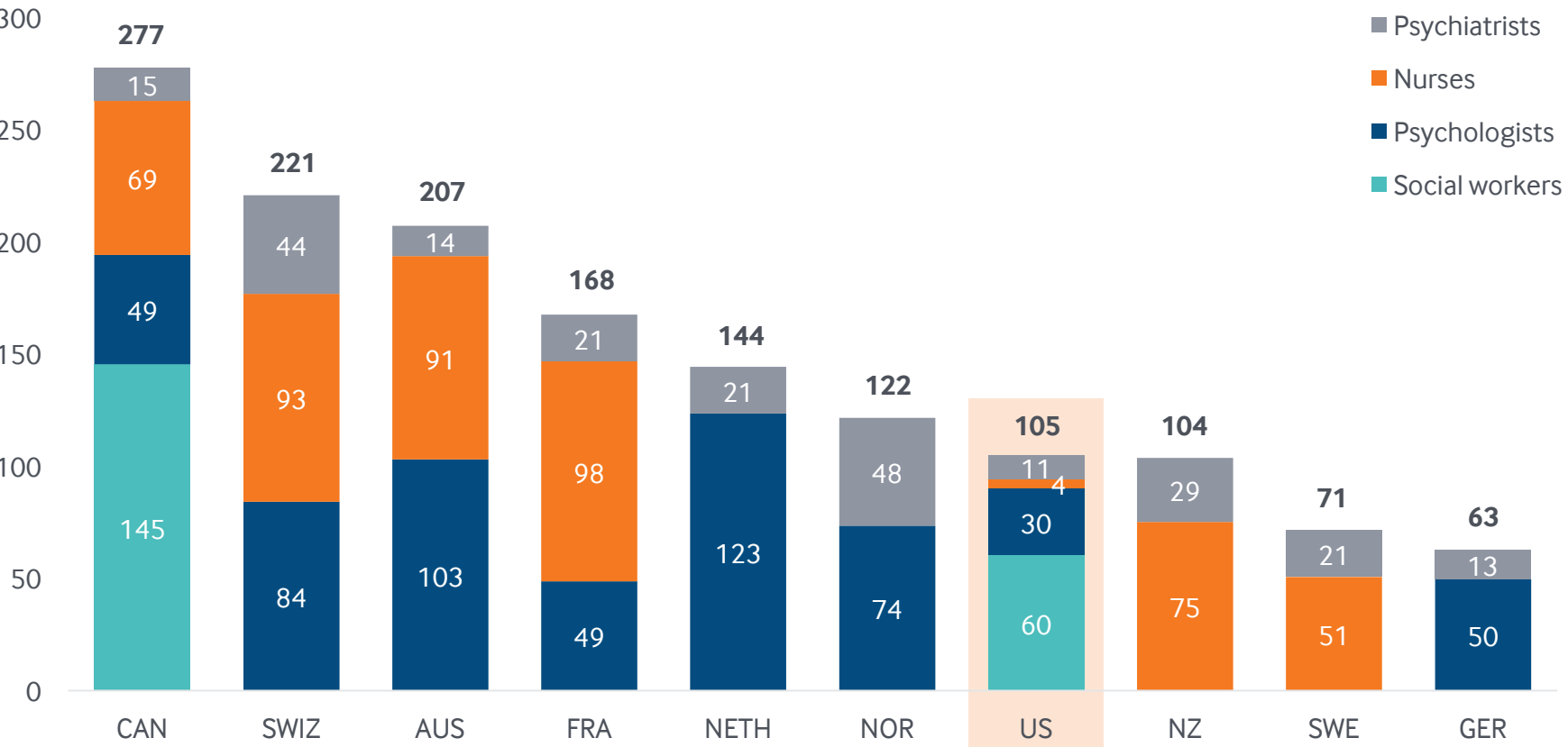
Data: OECD Health Data 2019.



Source: Roosa Tikkanen et al., *Mental Health Conditions and Substance Use: Comparing U.S. Needs and Treatment Capacity with Those in Other High-Income Countries* (Commonwealth Fund, May 2020).

Mental Health Workforce Supply, 2017

Number of professionals working in the mental health sector, per 100,000 population



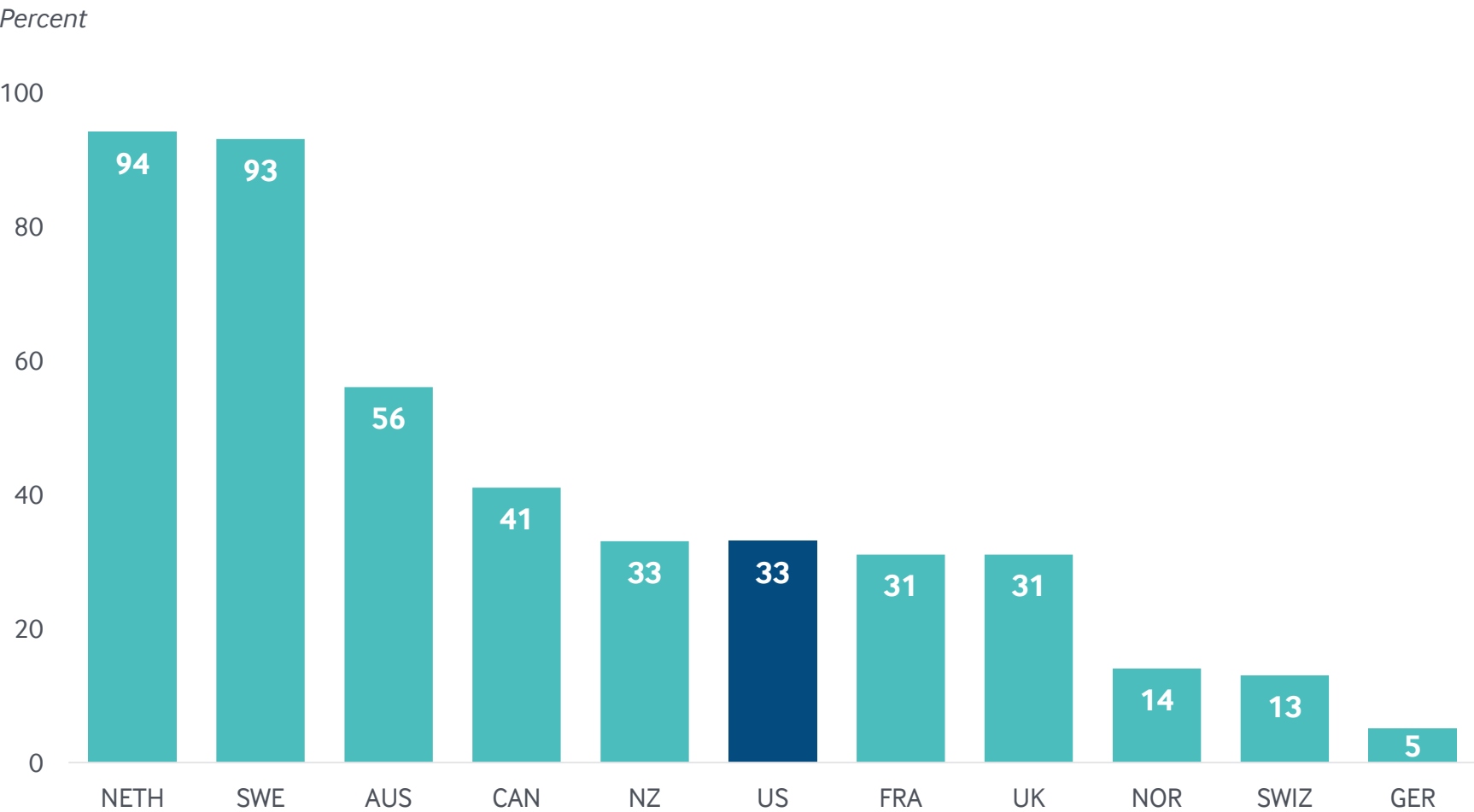
Notes: Data for 2017 or latest available year (2016 for NZ, NOR, SWE, US; 2015 for AUS, GER, NETH, SWIZ). No data available for UK. Because of rounding, the total number of professionals may not equal the sum of the four subcategories of workers.

Data: World Health Organization Global Health Observatory data repository.



Source: Roosa Tikkanen et al., *Mental Health Conditions and Substance Use: Comparing U.S. Needs and Treatment Capacity with Those in Other High-Income Countries* (Commonwealth Fund, May 2020).

Primary Care Practices with Psychologists or Mental Health Providers on Team, 2019



Note: Data reflect the share of primary care physicians who indicated that a psychologist or mental health provider work on their team to provide patient care.

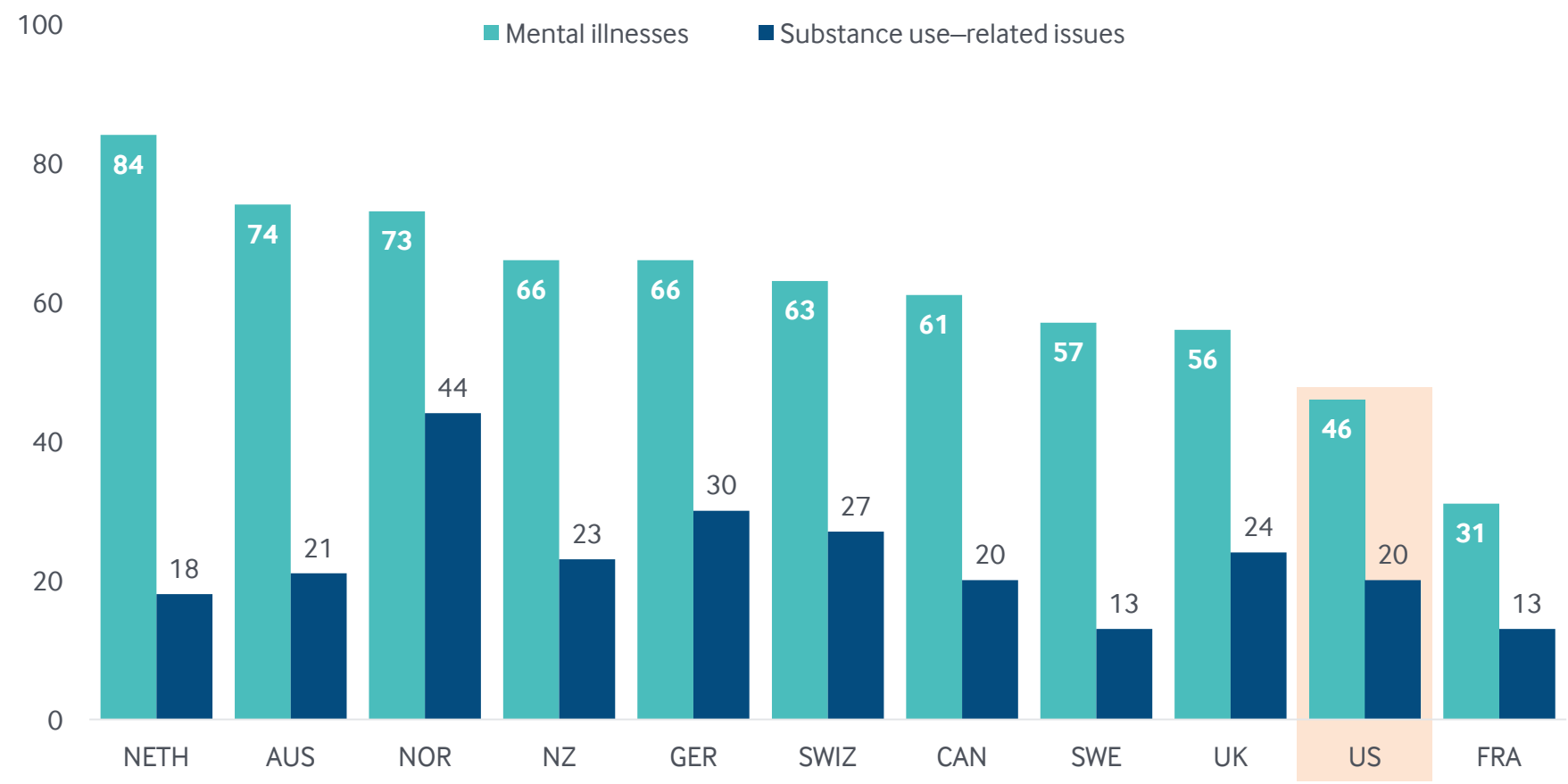
Data: 2019 Commonwealth Fund International Health Policy Survey of Primary Care Physicians.



Source: Roosa Tikkanen et al., *Mental Health Conditions and Substance Use: Comparing U.S. Needs and Treatment Capacity with Those in Other High-Income Countries* (Commonwealth Fund, May 2020).

Primary Care Practice Preparedness to Manage Patients with Mental Illnesses or Substance Use–Related Issues, 2019

Percent who said they were “well prepared”*



Note: Reflects primary care physicians who reported that their practices are “well prepared,” with respect to having sufficient skills and experience, to manage care for patients with mental illnesses (e.g., anxiety, mild or moderate depression) or substance use–related issues (e.g., drug, opioid, alcohol use).

* Other response categories: “somewhat prepared,” “not prepared.” Data exclude those who said “do not see these patients” (0–2% for mental illness; <1%–10% for substance use–related issues).

Data: 2019 Commonwealth Fund International Health Policy Survey of Primary Care Physicians.