Systematic Analysis of Factors Contributing to the Prevalence of Depression Among Women in Utah, Compared to the National Average

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Background

This data snapshot presents a comparative analysis of the mental health of women in Utah relative to the national average for women across the United States. It explores the factors that contribute to the notably higher rates of depression among women in Utah compared to the national average. The study explores key questions, including why Utah ranks higher than the national average in depression rates among women and adults, which mental health disorders are more prevalent among women in Utah than among women nationwide, and what unique factors contribute to mental health challenges faced by women in Utah.

This topic intersects with the emotional health domain of the Utah Women's Health Review. This data snapshot decisively focuses on three significant mental health disorders: anxiety disorders, mood disorders, and depression among women in Utah. The rationale for selecting these specific mental health conditions lies in their shared underlying causes and the common environmental factors that contribute to their development. Understanding these connections is essential for addressing and mitigating the impact of these mental health challenges.¹

The World Health Organization (WHO) states that "mental health is essential to overall health". It defines health not merely as the absence of disease, but as a state of complete physical, social, and mental well-being.²

Depression, also known as depressive disorder, is a prevalent mental disorder.³ According to a systematic review, roughly 280 million people in the world (1 in 40) are experiencing depression, and depression is 50%

more prevalent in women than men. Globally, women experience depression during pregnancy and after childbirth at a rate 10% higher than women who are peripartum or postpartum.⁴

The mental health of Utah women is an important issue to consider. The state of Utah consistently ranks above the national average for depression among women. It is known that chronic diseases like high blood pressure and diabetes often coexist with mental health problems and hence lead to worsening the overall health condition.⁵

Utah Women Stat, a research snapshot, stated that increasing access to effective treatments and a better understanding of the elements surrounding mental disorders and support will enhance the good mental health of Utah women ^{6,7}

Data

Prevalence of Mental Illness in Adults: Comparison in Utah vs. Other States (2023-2024)

According to Mental Health America, Utah ranked 46th in mental health in 2023 and maintained the same ranking in 2024, indicating consistent mental health challenges over the two years (Figures 1,2). Notably, the state has consistently reported the highest rates of adults experiencing any mental illness and serious suicidal thoughts for both years. Contributing factors to these poor rankings include a lack of insurance, unmet medical needs, and the high cost of care. States ranked 22nd to 26th in 2023 and 2024 for reduced access to care, indicating a higher prevalence of mental illness.^{8,9}

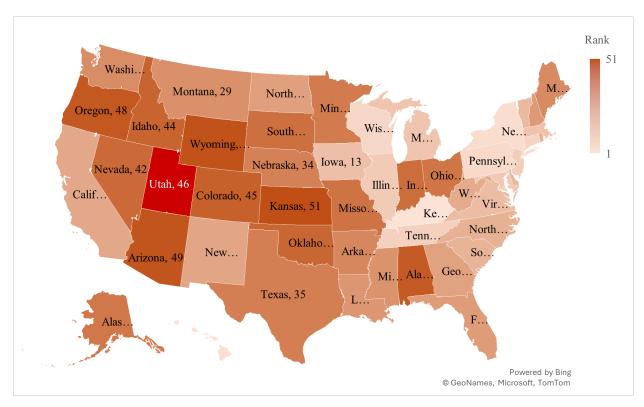


Figure 1. Prevalence of mental illness in adults by State in 2023 Source: Adapted from (Mental Health America 2023)⁷

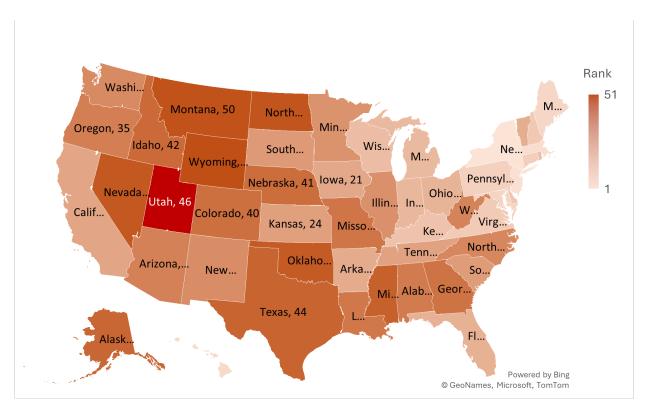


Figure 2. Prevalence of mental illness in adults by State in 2024, Source: Adapted from (Mental Health America 2024⁸

Note: 1. Any Mental Illness (AMI) refers to individuals who have experienced any mental, behavioral, or emotional disorders, not including developmental and substance use disorders, within the past year that aligned with DSM-IV criteria.

Source: Substance Abuse and Mental Health Services Administration 2013¹⁰

Social determinants of health, such as education, income, housing, and access to healthcare facilities, account for nearly half of an individual's health status. Women in Utah, compared to other women in the nation, are experiencing one of the highest gender wage gaps, with white non-Hispanic women earning 61 cents for each dollar earned by white men. Women in Utah who earn less than \$25000 yearly, belong to a minority, or have a high school education or less are more likely to have poor health outcomes.

The safety and security of women are also contributing factors to depression in women in Utah. For example, the experiences of Indigenous women and girls in Utah highlight a significant need for increased safety and support. A recent report by the Urban Indian Health Institute, titled "Missing and Murdered Indigenous Women & Girls," reveals that Salt Lake City ranks among the top ten U.S. cities with cases involving missing and murdered Indigenous women and girls.¹¹

This alarming statistic underscores the ongoing challenges that many Indigenous women face in Utah, including feelings of insecurity and threats to safety in their everyday lives. Such concerns can contribute to mental health issues, including depression and anxiety, particularly related to fear of violence and vulnerability when out alone at night. Highlighting these issues is crucial for fostering a safer and more supportive environment for Indigenous women and girls in Salt Lake City. By addressing the root causes of these fears and working towards a more inclusive and equitable community, we can help improve mental health outcomes and overall well-being for women in Utah. Together, we can advocate for policy changes and community

support that enhance mental health services, promote safer living conditions, and provide greater support for women affected by depression in Utah.

Data from the Utah Department of Health show that women are more likely to experience poor mental health at every age compared to men (Table 1).

Utah women report an average of 4.2 days of poor mental health each month, compared to a monthly average of 2.7 days reported by Utah men. ¹⁵ This trend indicates a significant disparity in mental health experiences between genders. One-fourth of Utah women ages 18-34 years report poor mental health for more than seven days within the last month at higher rates than men, with approximately one-fourth of women aged 18 to 34 falling into this category. ¹⁶

One possible explanation for this difference between genders is the mental health conditions that are more common among women during their reproductive years.⁶ Utah maintains the highest birth rate in the U.S. (13.9 live births per 1,000 women in Utah vs. 11.0 live births per 1,000 women in the U.S.). In 2021, Utah ranked fifth in the nation for the general fertility rate. In addition, Utah's average family size is larger than the national average (3.51 vs 3.15).¹⁷

A higher number of pregnant women and mothers may contribute to comparatively higher rates of post-partum depression in Utah women than the national average. Given the birthrate and household size ranking for Utah among the nation, it is important to prioritize education for new mothers to understand

Table 1. Trends in Poor Mental Health (7 or More Days) in Adults in Utah by Sex and Age Group for the years 2015 and 2023.

Year	2015		2023	
Age Group	Women (%)	Men (%)	Women (%)	Men (%)
18–34	24.1	16.4	44.6	30.2
35–49	18.2	12.1	26.9	18.2
50–64	18.8	9.4	18.7	12.3
65+	12.8	6.9	14	8.9

Source: Adapted from Utah Department of Health 2017¹⁶ & Utah Department of Health 2023¹⁴

peripartum and postpartum depression, symptoms, and management resources.

These statistics highlight some unique challenges that Utah women may face regarding mental health, potentially linked to a social trend in higher birth rates and family size. Recognizing these patterns can help inform better mental health support and resources tailored specifically for women in Utah.

Postpartum Depression: A Prevalent Mental Health Disorder Among Utah Women

Mental health conditions, such as postpartum mood disorders during and after pregnancy, can affect individuals after childbirth.6 It is reported that a condition called postpartum major depression is the "most prevalent complication of childbirth and also the most prevalent perinatal mental health disorder.²⁰ Fifteen percent of mothers experience postpartum depression, a severe condition that is different from "baby blues," which refers to temporary emotional distress and a period of mood swings that mostly resolve within in few days or weeks of childbirth.²¹

The data on postpartum depression rates in Utah has been cited in a more recent report that Utah was ranked second highest of 26 reporting sites, with 15.3% of women who report recurring symptoms of postpartum depression.^{22,6} The Pregnancy Risk Assessment Monitoring System reports that postpartum depression affects 1 in 8 women in Utah. Furthermore, one in three women in Utah will suffer from postpartum depression, anxiety during pregnancy, or depression during pregnancy.²³ The Public Health Indicator-Based Information System (IBIS) documented that in 2022, 15.0% of Utah women reported symptoms of postpartum depression. The most recent comparative data for postpartum depression symptoms among women in Utah is from 2020. The rate of postpartum depression among Utah women was 14.9%, compared to 12.9% in 46 states.7

Research indicates that women in Utah are experiencing higher rates of mental health issues compared with men in the state and compared with women across the nation. These challenges are reflective of ongoing gender disparities that women face throughout various stages of their lives in Utah. According to WalletHub's report titled "Best & Worst States for Women's Equal-

ity," Utah has been ranked as the worst state for women's equality in the United States for nine consecutive years. Utah has opportunities for improvement in several key areas, including workplace environment, education & health, and income gap.²⁴ Utah state also ranks low nationally for political empowerment of women and gaps in executive positions for women. These findings highlight the potential for growth and positive change in several different aspects of society.²⁴

Good mental health is a cornerstone of overall well-being, significantly impacting an individual's ability to function effectively. In Utah, women are particularly vulnerable, experiencing a notably higher prevalence of mental health disorders, such as postpartum depression, anxiety, and depression. This increased vulnerability is further compounded by socioeconomic factors, including wage disparities with their male counterparts and persistent gender inequalities in various sectors.

The Behavioral Risk Factor Surveillance System reported that Utah adult women are more likely to experience clinically diagnosed depression in their lifetime (32.1%) than adult Utah men in the state (16.3%).⁶ Factors contributing to these mental health challenges in women may include societal pressures, lack of access to mental health resources, and the roles women often play within family dynamics. The mental health struggles of one family member can negatively affect the well-being of the entire household.

Given the complexities of mental health challenges in Utah, it is vital to address them proactively. A complete community-wide response is required, which includes expanding access to mental health services, implementing targeted programs for women, and launching initiatives that promote gender equity. By prioritizing mental health support, we can create a healthier environment for individuals and families, ultimately enhancing the overall quality of life in Utah.

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