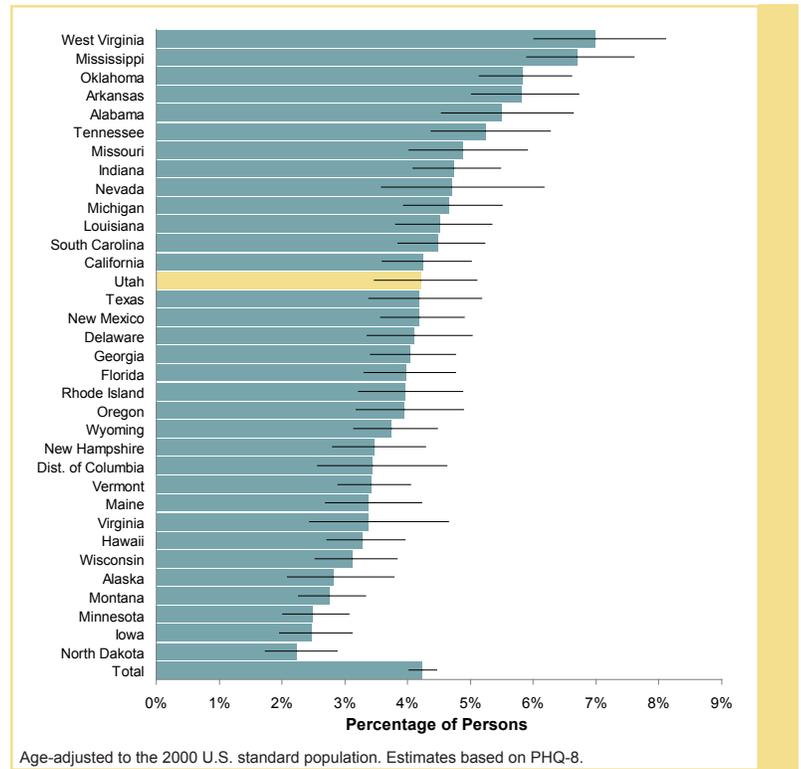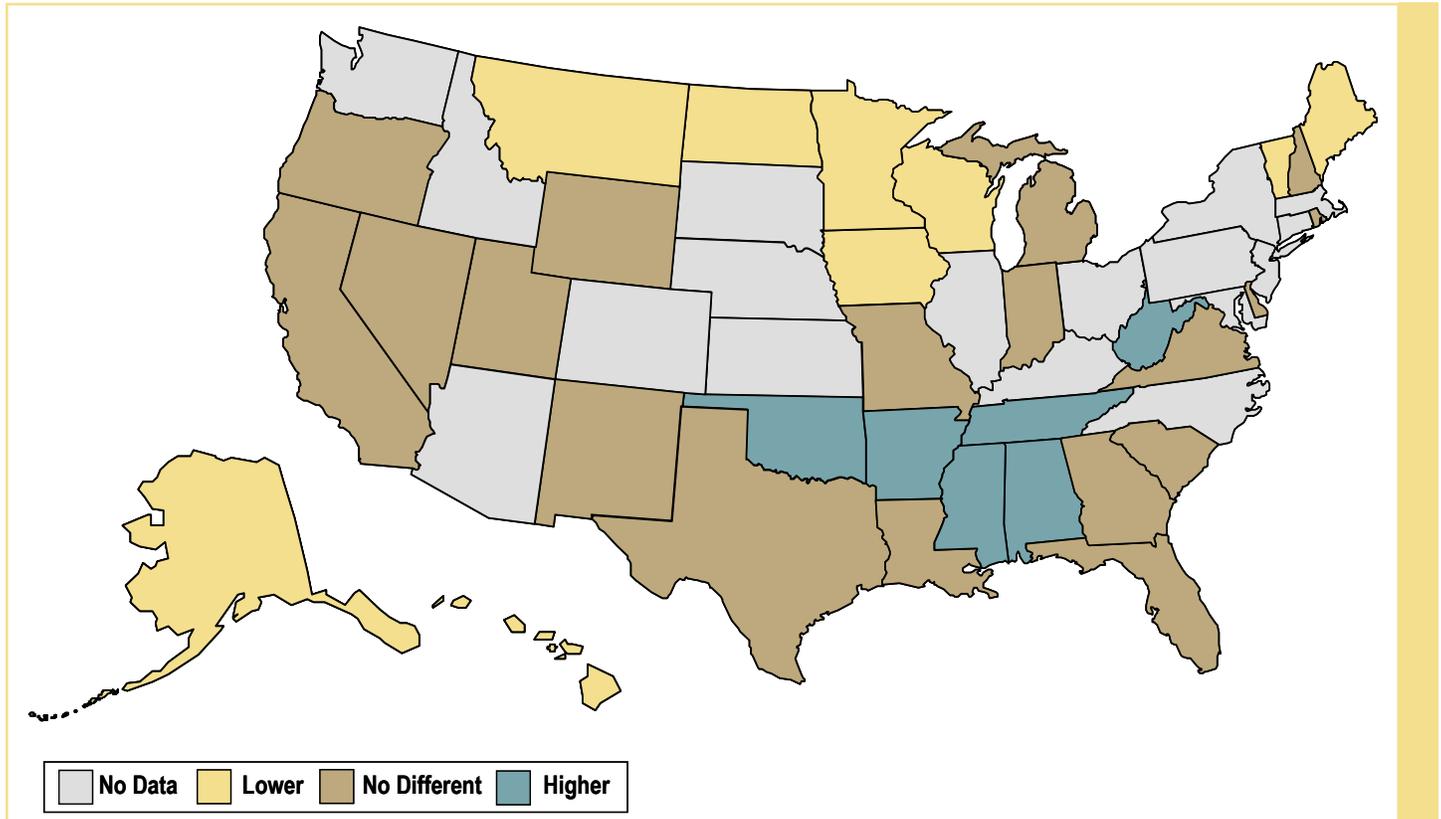# Utah vs. U.S.

A total of 34 states included the PHQ-8 in their 2006 state BRFSS questionnaire (see *Appendix B: Methods and Procedures*). The age-adjusted prevalence of major depression among adults varied from a high of 7.0% in West Virgina to a low of 2.2% in North Dakota. The prevalence of major depression in Utah was 4.2% (95% CI: 3.5%–5.1%). This prevalence rate was no different from the U.S. rate of 4.2%, calculated using data from all 34 states.

The states with prevalence rates lower than the U.S. rate tended to be in the Midwest or the West, and states with prevalence rates higher than the U.S. rate tended to be in the South.

Major Depression by State, U.S., 2006

Age-adjusted to the 2000 U.S. standard population. Estimates based on PHQ-8.

Major Depression by State, U.S., 2006

No Data Lower No Different Higher

From 2005–2007, Utah added the PHQ-9 to the BRFSS. The following analyses for Utah adults are based on the PHQ-9 for those years. See *Appendix B: Methods and Procedures*, *Appendix C: Depression Modules*, and *Appendix D: PHQ-9 Instrument*.

Local Health Districts and Small Areas

The age-adjusted rate of major depression among adults in Utah from 2005–2007 was estimated at 4.1%. The percentage of adults with major depression varied by local health district (LHD). Central Utah LHD had the highest rate of major depression (5.6%) while Summit County LHD had the lowest rate (2.2%). However, neither of these rates were statistically different from the overall state rate of major depression. Looking at small areas within LHDs, data from 2005–2007 show that adults in South Salt Lake had the highest rate of major depression (10.4%) followed by West Orem (8.8%) and West Valley East (8.2%). The lowest rates of major depression were found in the combined West Jordan/Copperton and South Jordan small areas (1.2%), Grand/San Juan Counties (1.5%) and Sandy Center (1.9%). The West Orem and Sandy Center rates were not statistically different from the state rate. (For more information about small area analysis, please see *Appendix B: Methods and Procedures*.)