Political Party and Mental Health

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Abstract

As political polarization increases and mental health worsens, it is crucial to investigate the potential link between the two. This project investigated the link between political party and mental health in the United States. Data was analyzed from previous U.S. elections, Mental Health America, and the Substance Abuse and Mental Health Services Administration to investigate the relationships in four studies. The first analyzed current associations between state mental health rankings and voting margins in the 2020 presidential election. The second analyzed this same connection but over previous years. The third compared the percentage of liberal control in the government with the percentage of American adults receiving mental health care services to uncover if the party in power had an effect on overall mental health. The fourth analyzed voting margins and state mental health rankings at the end of the term to determine if mental health was associated with being governed by the party for which the state voted. Studies 1, 2, and 4 were found to have significant relationships at a 99% confidence level. These findings suggest that voting liberal is associated with better mental health rankings at the state level, both currently and throughout previous elections. In future studies, it may be beneficial to conduct individual assessments to determine if this relationship exists only at the state level.

Keywords: politics, mental health, political party

Introduction

Political polarization in the United States is steadily increasing (Pew Research Center, 2014). Concurrently, the mental health of the nation is declining (Mental Health America, 2020). As people become more divided over political policies, it is increasingly important to think about how these policies affect the mental health of the nation. Therefore, the purpose of this study is to investigate the available data regarding mental health and political affiliation to determine if there is a link between the two.

According to studies utilizing self-reports, Republicans report better overall mental wellbeing (Kirkegaard, 2020; Newport, 2019). Not only did Republicans report that they had been

diagnosed with depression, borderline personality disorder, bipolar disorder, or schizophrenia approximately 20% less than their Democrat counterparts, but they also report lower overall days of poor mental health and amount of counseling undergone for emotional or mental problems (Kirkegaard, 2020). These patterns also hold when data is blocked for factors such as age, income, education, and religiosity. A Gallup poll studied the same connection while considering these factors and compared the percentage of each party who rated their mental health as "excellent" with each factor. In each case, conservatives rated their mental health as "excellent" more than any other group (Newport, 2019). This data supports the notion that the more conservative one is, the more likely they are to self-report better mental health.

However, because this data is self-reported, it may not be entirely representative of the individuals 'true mental health. It is important to question the reliability of self-reporting, particularly in this case, due to the differing views on mental health between the parties. For example, conservatives are more likely to blame the individual for their mental illness instead of outside factors, like biology or society. Liberals are also more likely to endorse seeking help for depression (Halter, 2003). Therefore, it is possible that conservatives are engaging in self-stigmatization, in which the individual stigmatizes their own illness and harbors a negative perception of themselves. This could be more likely to occur in conservatives as a result of the self-blaming attitude prevalent in the group. This would make self-reports unreliable, as conservatives would be less likely to report having poor mental health due to their own stigmatization. Therefore, in order to investigate the link between mental health and political party, a method other than self-report must be used, which is a current gap in the field.

This study seeks to objectively analyze connections between political party and mental health by comparing state mental health rankings and voting records. This will be done by analyzing data from Mental Health America, the nation's leading community-based non-profit which organizes mental health data annually, and 270toWin, a nonpartisan site which gathers election data, including voting margins by state, for every United States election. For years in which Mental Health America does not provide state rankings, data from the Substance Abuse and Mental Health Services Administration will be utilized. Using this data, the study aims to analyze current and past connections between mental health and political party by state. It also seeks to analyze whether there is a link between the overall mental health of the nation and which party is in power, and whether state mental health is affected by being governed by the

party for which they voted. For all state-related analysis, the mental health rankings will be compared to the voting margins for that state to account for states that narrowly voted for one party over the other.

Using this information, this study strives to examine the possible connection between mental health and political party. Given the stigmatization present amongst conservatives, this study predicts that liberal states will have better mental health rankings, contrary to the self-reports. It is also likely that liberal control of the government will promote better mental health, due to the help-seeking endorsement of the group. Once the connection, if any, is understood, this information can be used for the betterment of the mental health of the nation and the reduction of self-stigmatization and stigma in general. This could help create a nation in which mental health care can be taken more seriously.

Methods

Study 1

In order to provide insight into the current relation between mental health and political party, state mental health rankings from Mental Health America for 2021 will be compared with the voting margins per state in the 2020 presidential election from 270toWin. These years were selected because they are the most recent information available from their respective sources. Adult rankings will be used for the state mental health rankings because youth are not eligible to vote so there is no way to compare their political affiliations in this study. The mental health rankings will be compared with the voting margins per state, with negative percentages meaning more liberal and positive percentages meaning more conservative to account for party.

Study 2

Analysis will be conducted as in Study 1 over previous years for as long as there is data for state mental health rankings (2008-2020) to determine if the current relationship between mental health and political party is consistent with historical trends. Mental health rankings will be used from the Substance Abuse and Mental Health Services Administration for years that Mental Health America does not have data. All presidential election voting margins will be collected from 270toWin. Adult rankings will once again be used to account for the fact that youth cannot vote.

Study 3

To compare the overall mental health of the nation with party in power, the percentage of adults receiving mental health care services will be compared with the percentage of the elected government that is liberal. This percentage being calculated as one third the party of the president and vice president, another third being the proportion of senators that are liberal, and the final third being the proportion of the House of Representatives that is liberal. The percentage of adults receiving mental health care will be provided by the Substance Abuse and Mental Health Services Administration, a branch of the U.S. Department of Health and Human Services. Although the percentage receiving mental health care may not fully represent all individuals struggling with their mental health and may fluctuate due to differing accessibility, it is still very reflective of the mental health of the nation and is the best data that is readily available for use in the study. The percentage of liberal control in the government will be calculated using the results of presidential, senate, and house elections from 270toWin and the House of Representatives website.

Study 4

Finally, whether a state has been governed by the party for which they voted will be compared to state mental health rankings from Mental Health America to determine if there is a correlation. Voting margins of states will be used, with negative percentages meaning they did not vote for the winning party and positive percentages meaning they did vote for the winning party. State voting records will be collected from 270toWin.

Additional Methods

For the first two studies, which focus on individuals 'parties, mental health rankings from the year after the election will be utilized. These have been chosen because they are the mental health rankings that were made closest to when individuals voted in the election, which gives the best estimate for their mental health at the time of voting, when party affiliation is measured. For these two studies and the fourth study, only the results from presidential elections will be used. This is because there is a significant drop off in turnout for midterm elections. This could be because more polarized voters still vote, while independent-leaning voters stay home because there is not much emphasis on the election to get them interested, or because only those that oppose the current president's party feel the need to vote to express their dissatisfaction (DeSilver, 2014). In either explanation, there is a less-representative sampling of voters.

Therefore, presidential elections will be utilized when dealing with studies regarding individual states, as that is more representative of the true voter pool whose mental health is being measured.

For the third and fourth studies, data will be collected from the beginning of the final year of the term for mental health statistics. This allows time to ensure that the difference in mental health is caused by the party currently in power. For the third study, election results from both presidential and midterm elections will be utilized. This is because this study is concerned with the party in power, not individual party affiliation. Therefore, what matters is who is in power, not how they were voted to that position, so the difference in turnout present in midterm elections has no effect.

The correlation coefficient will be found for each study and compared to the critical value at the .01 significance level to determine if there is a link, although causation cannot be determined in any case, as only correlation is being measured. The rankings will then be sorted by liberal and conservative states for studies 1 and 2, liberal and conservative majority for study 3, and states voting for the winning party and states voting for the losing party in study 4, and a t-test will be run to determine if the mean mental health ranking for one group is statistically different from that of the other at a 99% confidence level

Results

Study 1

The first study yielded a correlation coefficient of approximately .459, which is depicted in Figure 1 and indicates a moderate strength in the association between the voting margins of a state in the 2020 presidential election and their mental health ranking (Table 1A). Comparing this to the critical value for $\alpha = .01$ and 49 degrees of freedom, which would be .325, the r value is greater than the critical value, indicating that there is a significant association between voting margins and mental health ranking at a 99% confidence level. The fact that the coefficient is positive also indicates that more conservative leanings are associated with poorer mental health rankings. The t-test also yielded a value of .003, indicating that there is a significant difference in the mean mental health rankings for Republican and Democrat states (which were 32.16 and 20.08, respectively) (Table 1B).
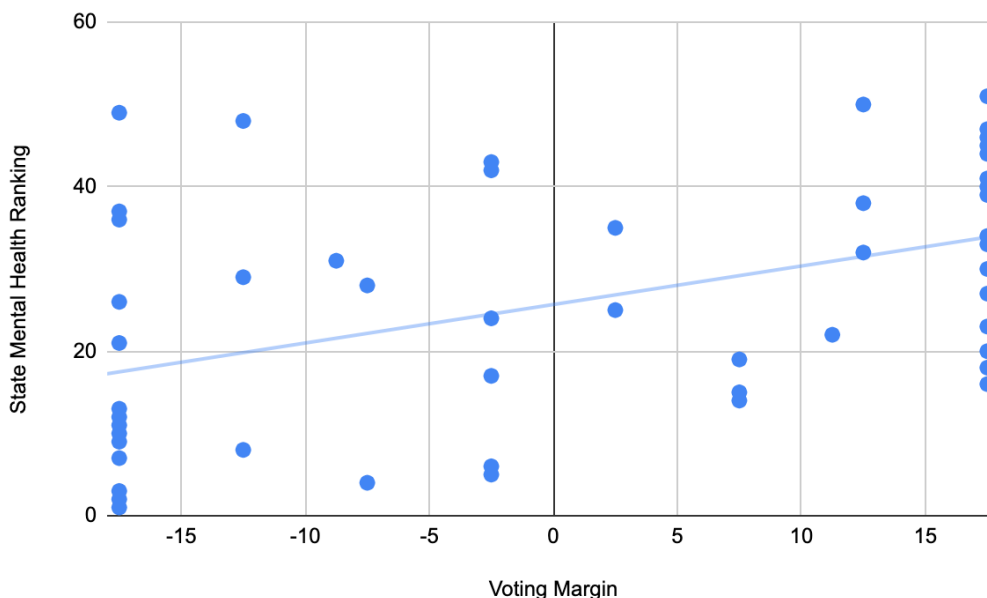
Figure 1: Distribution of Voting Margins and State Mental Health Rankings, 2020

Table 1A: Correlational Statistics for Study 1

r value		0.4592648174
critical value		0.325

Table 1B: T Test and Means (Red States, then Blue States) for Study 1

t-test		0.0027180951
means	32.16	20.07692308

Study 2

The second study yielded a correlation coefficient of $r = .397$, which is depicted in Figure 2 and indicates a weak to moderate strength association between voting margins and state mental health rankings for the years 2008 to 2020 (Table 2A). When compared to the critical value for $\alpha = .01$ and 202 degrees of freedom, which would be .164, the r value is greater, indicating a significant association. The positive correlation value indicates that more conservative voting is

associated with poorer mental health rankings, which aligns with the findings in Study 1. The t-test also supported this correlation, producing a value of 1.43x10^-3, indicating that there is a significant difference in the mean mental health ranking for conservative and liberal states between 2008 and 2020 (which were 30.84 and 21.07, respectively) (Table 2B).
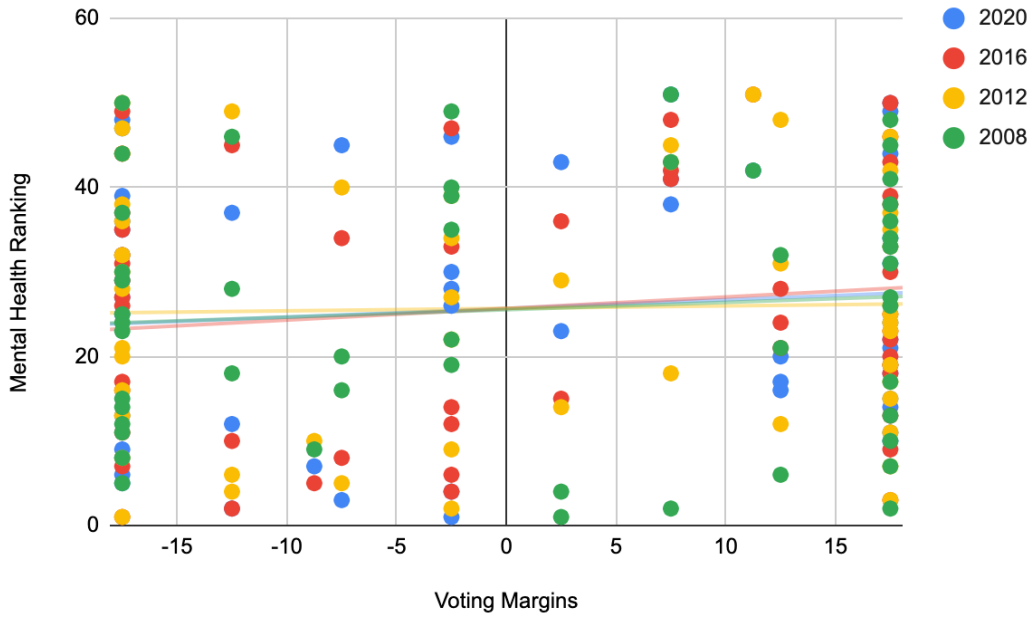

Figure 2: Distributions of Voting Margins and Mental Health Rankings, 2008-2020

Table 2A: Correlational Statistics for Study 2

r value	0.397110779 4
critical value	1.64E-01

Table 2B: T Test and Means (Republican States, then Democrat States) for Study 2

t test	1.43E-06	
means	30.84313725	21.06930693

Study 3

Study 3 produced a correlation coefficient of .0481, which is depicted in Figure 3 and represents little to no association between the percent of the U.S. population receiving mental health care services and the percent of the U.S. government under liberal control between 2000 and 2018 (Table 3A). Compared to the critical value for $\alpha = .01$ and 8 degrees of freedom, .715, the r value is much smaller than the critical value, indicating that there is not sufficient evidence to conclude that there is a significant relationship. The t-test yielded a p-value of .737, which indicates that there is not sufficient evidence to conclude that there is a significant difference in the mean percentage of the U.S. population receiving mental health services when there is a liberal majority in the government or a conservative majority (which were 34% and 33.55%, respectively) (Table 3B).
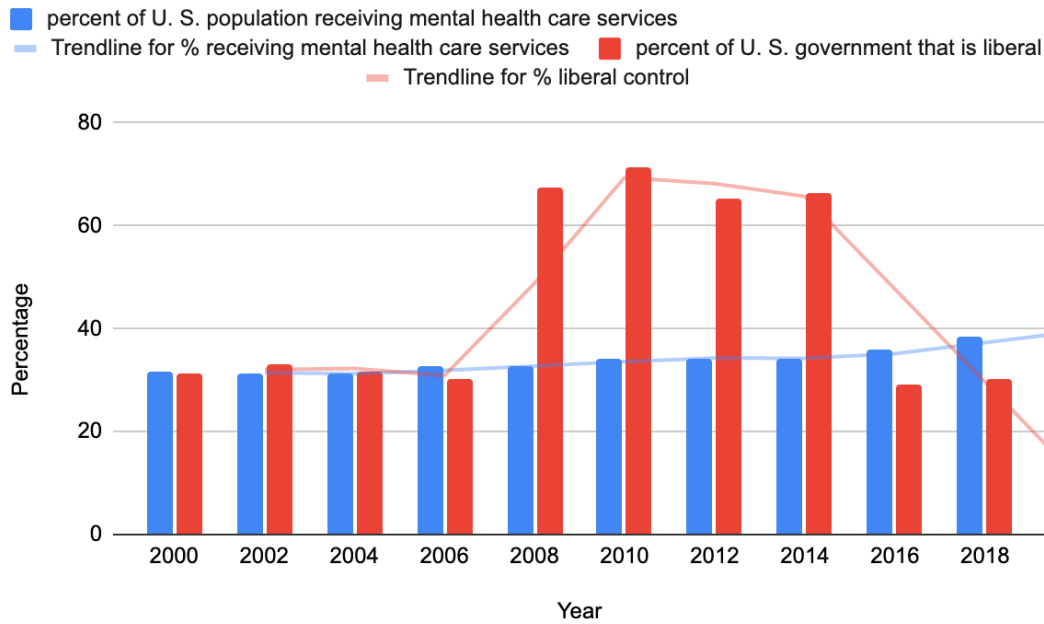

Figure 3: Mental Health Care Services Compared with Liberal Control

Table 3A: Correlational Statistics for Study 3

r value	0.0480701129
critical value	0.715

Table 3B: T Test and Means (Liberal Majority, then Conservative Majority) for Study 3

t test	0.7367903504	
means	34	33.55

Study 4

The fourth study produced a correlation coefficient of -.213, which is depicted in Figure 4 and indicates a weak association between the voting margins for the winning party of a presidential election by state and the mental health rankings at the end of the term (Table 4A). When compared to the critical value for $\alpha = .01$ and 151 degrees of freedom, which would be .188, the absolute value of the coefficient is greater than the critical value, meaning that the association between whether a state was governed by the party for which they voted and their mental health ranking is statistically significant. The negative value for the coefficient indicates that being governed by the party for which the state voted is associated with better mental health rankings. The t-test produced a p-value of .004, indicating a significant difference in the mean mental health ranking for states that were governed by the party for which they voted and states that did not in the presidential election between 2008 and 2016 (which were 23.09 and 29.92, respectively) (Table 4B).
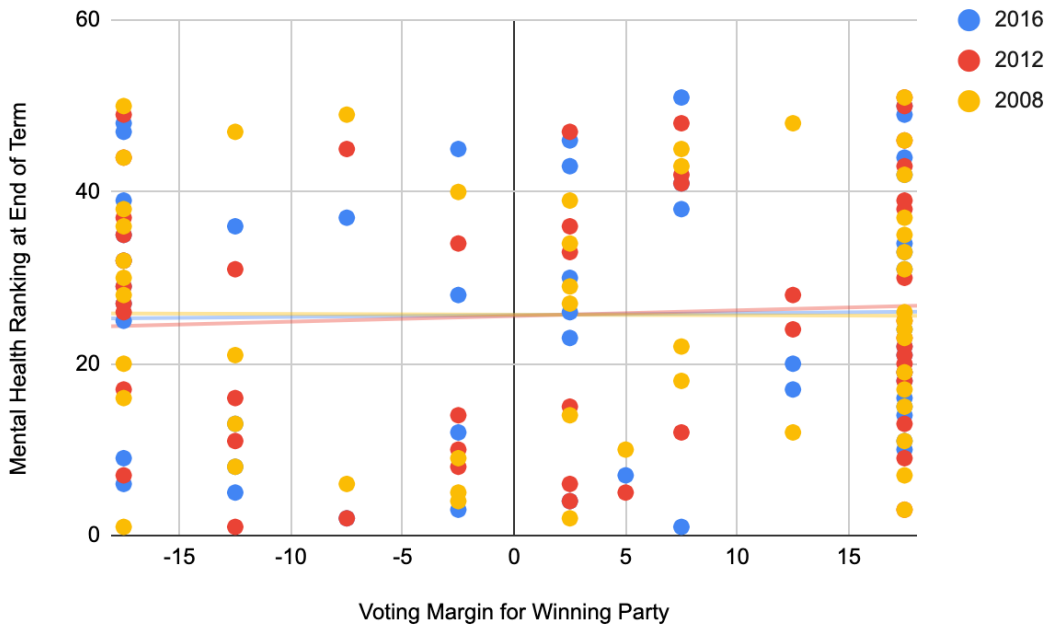
Figure 4: Distribution of Voting Margins and Mental Health Rankings

Table 4A: Correlational Statistics for Study 4

r value	-0.213173391
critical value	1.88E-01

Table 4B: T Test and Means (Winning States, then Losing States) for Study 4

t test	0.0040722472	
means	22.82959173	29.92424242

Discussion

The data from this analysis illustrates a significant relationship in studies 1, 2, and 4 at the 99% confidence level. Although there was not sufficient evidence to conclude that there was a significant association between the percent of the U.S. population receiving mental health services and the percentage of liberal control in the government in Study 3, that may be because the Great Recession occurred during the presidency of the only Democrat in office in any of the

years with available mental health data. Therefore, it could have been possible that a higher percentage of liberal control is associated with better mental health, but this benefit was greatly reduced due to the negative mental health effects caused by the Great Recession of 2008-2010, as poor economic conditions have been associated with poor mental health (American Psychological Association, 2017). However, in order to determine if this was the case, more data from previous years would be needed to provide sufficient evidence.

The results from the first and second studies suggest that there is likely an association between voting liberal and better mental health, because of the positive correlations found between voting margins and mental health rankings and the significant difference in mean mental health rankings found in conservative and liberal states. This association could be explained by the fact that liberals tend to have more help-seeking attitudes as stated earlier in the paper, while conservatives have more stigmatizing views (Halter, 2003). Therefore, liberals are more likely to receive mental health services when needed, while conservatives would be more likely to self-stigmatize and avoid treatment, worsening their mental health. However, this association could also be explained by an extraneous variable. For example, it is likely that liberal states would elect liberal leaders at the state-level, who more typically support increased mental health care coverage (Munsch, Barnes, & Kline, 2020). Therefore, because this study conducted tests at the state level, it could be possible that mental health is better in liberal states because of better health care coverage in said states over time, instead of their political leanings. Another possible explanation would be differing socioeconomic status. Lower socioeconomic status is linked with poor mental health, and there are differences between the socioeconomics of different states, so this could be an explaining factor for differences in mental health instead of political party (American Psychological Association, 2020; United States Census Bureau, 2021).

The results from the fourth study suggest a significant association between whether a state voted for the eventual winning party and their mental health as a result of being governed by that party. The analysis found that typically mental health in a state was better if the party for which they voted won the presidential election. However, this result may only be prevalent because the winning party was Democrat in two thirds of the data available, so perhaps this association is only prevalent because voting liberal is associated with better mental health, regardless of the winning party. Focusing on the 2016 election, which is the only election in Study 4 for which mental health data is available where the winner of the presidential election was a Republican,

this trend is reversed, with an average mental health ranking of 30.23 for the winning party (Republican) and 19.75 for the losing party (Democrat). Therefore, the significance of this result is likely due to the association between liberal voting and better mental health, as opposed to an actual association between whether a state was governed by the party for which they voted.

Conclusion

The results from this study illustrated a significant correlation between voting liberal and better mental health, supporting the paper's primary hypothesis. However, there was not a significant relationship found between party in power and the mental health of the nation, contrary to the hypothesis. Although, this could be due to the impact of the Great Recession on mental health, as explained in the Discussion.

Future studies should investigate the cause of this link by examining individuals instead of states. This could help determine if the association between political affiliation and mental health is due to state-level legislation or individual differences. However, future studies would need to avoid using the self-report method of previous research, as this can be unreliable, which is why it was avoided in this research. Therefore, one possible method would be to issue emotional Stroop tests, which can be used to help assess pathology in patients (Ben-Haim, Williams, Howard, Mama, Eidels, & Algom, 2016). The test involves participants identifying the color of a word on a screen; however, the words that take longer to process can reveal important insights into emotional and mental wellbeing. This can provide an honest measure of mental health, as it is measured indirectly, so internalized stigma does not affect the results as prominently.

Once results are found from future studies, the public can understand how their politics affect their mental health, and appropriate action can be made to reduce stigma and help the mental health of the nation. Understanding any and all aspects that affect mental health is crucial in the battle against mental illness and the journey to recovery. Information uncovered in this study and any future studies can help the government and the public make more informed decisions concerning mental health, leading to a better future for the nation.

Acknowledgements

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