

INFORM. INSPIRE. DEVELOP CIVIC LEADERS.

THE POLICY CIRCLE

MENTAL HEALTH



➤ WHAT IS MENTAL HEALTH? ◀

MENTAL HEALTH INCLUDES EMOTIONAL, PSYCHOLOGICAL, AND SOCIAL WELL-BEING. IT AFFECTS HOW WE THINK, FEEL, ACT, RELATE TO OTHERS, MAKE DECISIONS, HANDLE STRESS, AND COPE WITH CHANGE AND CHALLENGES. MANY PEOPLE HAVE OCCASIONAL MENTAL HEALTH CONCERNS, BUT WHEN SYMPTOMS AFFECT THE ABILITY TO FUNCTION, IT BECOMES A MENTAL ILLNESS.

MENTAL ILLNESS REFERS TO MENTAL, BEHAVIORAL, AND EMOTIONAL DISORDERS THAT AFFECT A PERSON'S "THINKING, MOOD, OR BEHAVIOR" SUCH AS, DEPRESSION, ANXIETY, BIPOLAR DISORDER, SCHIZOPHRENIA, AND POST-TRAUMATIC STRESS DISORDER (PTSD).

➤ FACTS TO KNOW ◀

51.5 MILLION U.S. ADULTS (20%) EXPERIENCE MENTAL ILLNESS EACH YEAR, BUT FEWER THAN HALF RECEIVE TREATMENT.

IN A STUDY OF 21 MILLION PEOPLE, 57% OF THE MOST EXPENSIVE PATIENTS HAD BEHAVIORAL HEALTH DIAGNOSES. THIS SUBGROUP (6%) CONTRIBUTED 44% OF ALL HEALTHCARE SPENDING FOR THE 21 MILLION PATIENTS.

IN 2019, RATES OF MENTAL ILLNESS WERE HIGHEST AMONG YOUNG ADULTS AGES 18-25, AND ALMOST HALF OF ADOLESCENTS AGES 13-18 HAD A MENTAL HEALTH DISORDER.

LOST PRODUCTIVITY DUE TO DEPRESSION AND ANXIETY COSTS THE GLOBAL ECONOMY AN ESTIMATED \$1 TRILLION ANNUALLY.

➤ GOVERNMENT SPENDING ◀

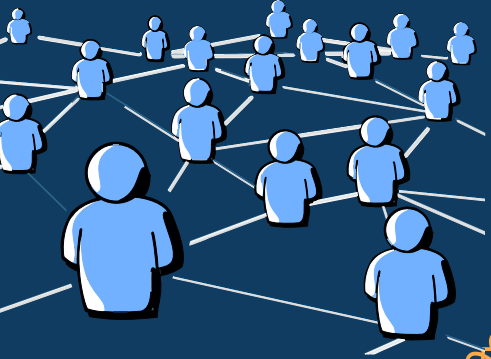


IN THE U.S., ANNUAL MENTAL HEALTH CARE COSTS AMOUNT TO MORE THAN \$200 BILLION.

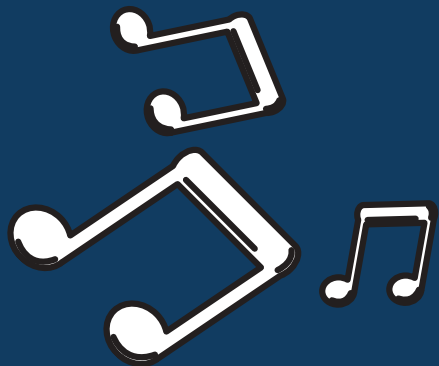
THE 2021 DEPARTMENT OF HEALTH AND HUMAN SERVICES BUDGET ALLOCATES OVER \$2.5 BILLION IN BLOCK GRANTS TO STATES.

THE FEDERAL GOVERNMENT HAS OVER 40 PROGRAMS THAT PROVIDE SERVICES FOR PEOPLE WITH MENTAL ILLNESS. MEDICAID IS "THE SINGLE LARGEST FUNDER OF MENTAL HEALTH SERVICES IN THE COUNTRY."

THE NATIONAL INSTITUTE OF MENTAL HEALTH SPENT OVER \$3 BILLION ON MENTAL HEALTH AND AN ADDITIONAL \$1 BILLION ON MENTAL ILLNESS IN 2019.



➤ FRAMING THE ISSUE ◀



CONTRIBUTING FACTORS: SOCIAL MEDIA, BULLYING, ECONOMIC STRESS, BURNOUT

TREATMENT: ANTIDEPRESSANT DRUGS, TECHNOLOGICAL INNOVATIONS SUCH AS AI CHATBOTS AND APPS, EXERCISE, MEDITATION, SOCIAL SUPPORTS, CREATIVE OUTLETS SUCH AS MUSIC AND ART.



CO-OCCURRING FACTORS: CRIME, INCARCERATION, HOMELESSNESS, SUBSTANCE USE

BARRIERS TO TREATMENT: STIGMA, SHORTAGES OF PROFESSIONALS, HIGH COSTS, LACK OF INSURANCE COVERAGE, OVERBURDENED 911 EMERGENCY SYSTEMS, OVER-RELIANCE ON POLICE AND EMERGENCY DEPARTMENTS



➤ LOCAL SOLUTIONS ◀

COVERAGE:

COLLABORATIVE CARE MODELS BRING TOGETHER PRIMARY CARE PROVIDERS, CARE MANAGERS, AND PSYCHIATRIC CONSULTANTS. ONE STUDY FOUND INTEGRATING SERVICES RESULTS IN \$6.50 IN SAVINGS FOR EVERY \$1 IN SPENDING.

TREATMENT:

IN CALIFORNIA, THE ALAMEDA MODEL ESTABLISHED A DEDICATED PSYCHIATRIC HOSPITAL WITH A CRISIS STABILIZATION UNIT, EXPEDITING TRANSFERS FROM LOCAL EMERGENCY DEPARTMENTS AND REDUCING PATIENT WAIT TIMES BY OVER 80%.

FIRST RESPONSE:

DENVER'S MOBILE CRISIS STAR PROGRAM INCLUDES A MENTAL HEALTH CLINICIAN AND A PARAMEDIC TO ADDRESS LOW LEVEL MENTAL HEALTH EPISODES, CONNECT INDIVIDUALS TO RESOURCES, AND RELIEVE POLICE OFFICERS AND EMERGENCY ROOMS.

➤ WHAT YOU CAN DO ◀

MEASURE -

WHAT ARE YOUR STATE'S LAWS? WHAT STATE OR LOCAL ASSOCIATIONS AND ORGANIZATIONS ARE THERE? HOW MUCH DOES YOUR STATE RECEIVE IN BLOCK GRANTS FROM SAMHSA?



IDENTIFY -

WHO IS YOUR STATE MENTAL HEALTH COMMISSIONER? WHO IS CALLED WHEN THERE IS A MENTAL HEALTH CRISIS IN YOUR COMMUNITY?



PLAN -

SET MILESTONES BASED ON YOUR STATE'S LEGISLATIVE CALENDAR OR LOCAL COMMUNITY CALENDAR.

REACH OUT -

FOSTER COLLABORATIVE RELATIONSHIPS WITH LAW ENFORCEMENT, FIRST RESPONDERS, AND LOCAL ORGANIZATIONS.



EXECUTE -

TALK TO FIRST RESPONDERS TO UNDERSTAND CHALLENGES THEY FACE. SHARE RELEVANT RESOURCES WITH LOCAL ELECTED OFFICIALS. COMMUNICATE WITH LOCAL ORGANIZATIONS. INVESTIGATE THE RATIO OF MENTAL HEALTH PROFESSIONALS IN YOUR AREA.

