

# The Community Fund of Darien Mental Health Needs Assessment

## Priorities:

1. Community-based outpatient treatment
2. Workforce resources
3. Inpatient services

## Mental Health

- Mental health is a state of general well-being
- 17% of US adults are in a state of optimal mental health

## Mental Illness

- Diagnosable mental disorder characterized by altered thinking/mood behavior associated with distress or impaired functioning
- By 2020, depression will be 2<sup>nd</sup> leading cause of disability in the world, with 1<sup>st</sup> being heart disease

# Scope of the Problem

## Local

- 1 in 5 adults & children experience mental illness in a given year
- Mental health/substance abuse is top priority in 2016 Stamford Hospital Community Needs Assmt.
- In Stamford Hospital's online survey, 81.2% of Darien and Stamford residents *sometimes* or *rarely* had access to behavioral health services

## National

- 1/3 of adults needing treatment get it
- Only 20% of kids needing treatment get it. Of treatment, less than 1/3 meets minimum standards
- 50% of students drop out of school
- 60-80% are unemployed



The  
Community Fund  
of Darien

# Evidence-Based Treatment

Hundreds of evidence-based mental health treatments exist, but the current challenge is getting treatment to those who need it.

Accessibility is based on 3 factors:

Physical

Financial

Cultural Acceptability

With treatment, 70-90% of those with mental illness have improved quality of life and more than 2/3 live in the community and lead productive lives.

# Financial Accessibility

- Reimbursement rates insufficient
- Private care is unaffordable for most, in excess of \$5,000 per year
- Competition for licensed clinicians

# Cultural Acceptability

- 90% of clinicians in US are non-Hispanic whites
- 30% of people in the US belong to an ethnic minority group
- 4-6 month waiting list for bilingual clinicians

# Treatment Priorities:

Outpatient Care,  
Workforce Resources,  
Inpatient Services

- **Community-based outpatient mental health services**  
Funding cuts  
Crisis-oriented budgeting  
Shortage of clinical staff
- **Crisis Care and Inpatient Treatment**  
Children of immigrants: Story of Nury Chavarria  
Waitlists for acute care/hospitalization
  - Summer 2016 – behavioral health hospital had waitlist of 100
  - Summer 2017 – waitlist jumped to 150

**CHALLENGE:** Money is being devoted to essential crisis/inpatient services at the cost of prevention and community based services

# Other Issues

- Focus on opioid crisis may leave other prevention efforts at risk
- Link mental health and substance abuse funding
- Future models for success
  1. Community-based case management
  2. Use of lay counselors
  3. Engage technology – internet, apps, smart phones, etc. for more accessible therapy