



Mental Health: Challenges and Opportunities

May 2018

This presentation builds on the work of Many Minds Collaborative



What is The Stability Network?

We are a growing coalition of people in the workforce speaking openly about our own mental health conditions. We are stepping forward to tell our stories on behalf of millions of people like us who feel they can't.

Our aim is to redefine the narrative around mental health. We openly share our experiences and insights to:

- Change how people with mental health conditions are perceived and treated in the workplace and their communities
- Advocate for improved access and quality of care
- Help people who are dealing with mental health conditions see that it is possible to recover and thrive

A Hidden Epidemic that Affects Us All



Every year, more than **one in five adults in Washington** State experiences a mental health condition.
More than 5% live with a serious mental illness.



A Person Living with Serious Mental Illness is:

11x more likely to be the **victim of a violent crime**

58x more likely to die before the age of 50

3x more likely to be **in prison than a hospital**

10x more likely to die by **suicide**

Sources: Archives of General Psychology 2005; Disability Rights Commission 2005; Treatment Advocacy Center Survey of States 2010; Suicide in the USA report, American Association of Suicidology, 2012



Mental Illness is a Social Justice Issue

70% of youth in the social justice system have at least one mental health condition.

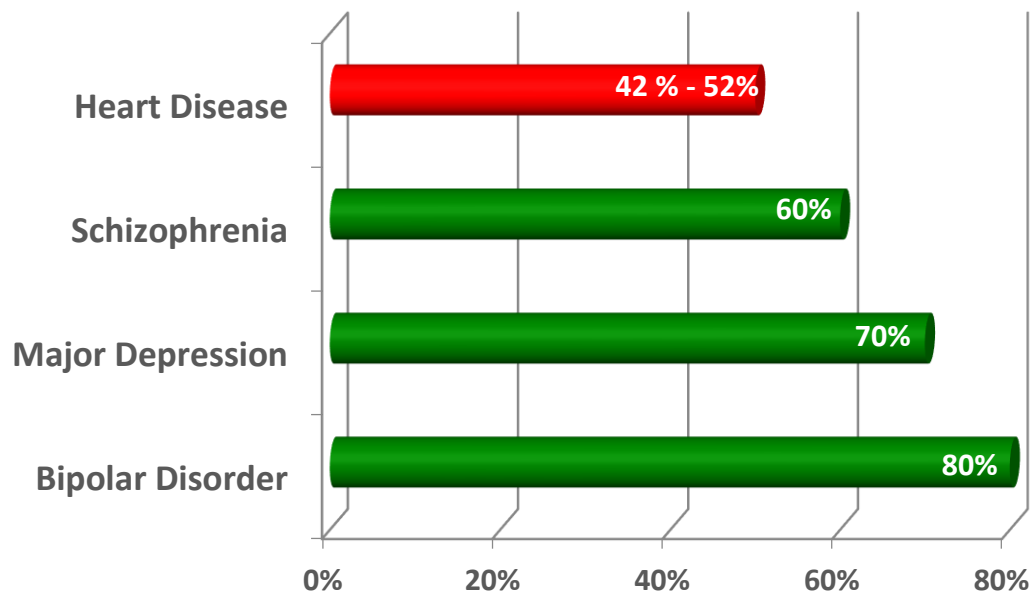
Suicide is the **2nd leading cause of death** among young people ages **16 - 24 in King County** – and **the 5th leading cause for ages 1 -14.**

You are **3X more likely to be poor** if someone in your household has a severe mental illness.

People with untreated mental illnesses comprise **1/3 of the homeless** population.

The Good News: Treatment Can Improve Lives

Treatment Success Rates by Condition

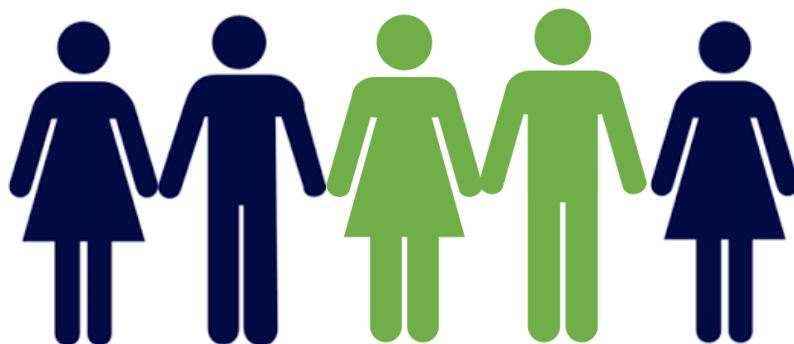


*More than 170
clinically proven drugs
in use today*

*Documented results
from cognitive therapy*

Sources: US Dept of Health and Human Services, 2000; Mental Health: The Business Case 2005, Ohio Department of Mental Health; SCOPE, Mental Health Study Group Report 2003; Stanford University School of Medicine; The Efficacy of Cognitive Behavioral Therapy: A Review of Meta-analyses, Journal of Cognitive Therapy and Research, October 2012

Too Few People Receive Care



In Washington State, **only 44% of adults** with mental illness who needed care receive treatment.

56% – nearly 3 in 5 – were untreated.

1980's – Today

Declining Investment > Re-Institutionalization



Community based care was never fully funded. *Over time, funding continued to be cut for both inpatient and outpatient care, leaving many homeless or forced into the justice system. Without treatment and support, incarceration is a revolving door. Today, more mentally ill persons are in jails and prisons than in hospitals.*

Mental Health is a Tipping Point



Treatment and Support
Are Leverage

Key Priorities



**Reduce Prejudice and
Increase Acceptance**



**Expand Prevention
and Early
Intervention**



**Increase Capacity
and Quality of Care**



**Develop and
Fund Services to
Support Recovery**

Recommendation: Work in conjunction with the many excellent existing efforts being undertaken by the community, including care providers, non-profit community groups, King County government, Chad's Legacy Project, and the University of Washington



The Challenge

Prejudice and stigma are widespread:

- 68% of Americans do not want someone with a mental health condition marrying into their family¹
- 58% do not want people with a mental health condition in their workplaces¹
- Over one-third (35%) of middle school children believe seeing a counselor makes people think you are weird or different²

As a result, youth and adults, don't always seek help...

...And when they do they often don't know where to turn

Its Impact: *Prejudice prevents people from getting the care and impedes the care they get*

Potential Investments

Focus on “contact” strategy providing real life examples of living successfully with mental illness through The Stability Network

Focus on youth and “help seeking”

- Mental health conditions usually present before the age of 24
- Youth may be more open to changing attitudes

Create awareness of existing resources and how to access and pay for them



The Challenge

Mental illness often goes undiagnosed and untreated until it becomes severe:

- Investing early in prevention and early intervention can vastly reduce the long-term impact of mental illness
- Funding is limited for prevention and early intervention

Its Impact: Many people suffer unnecessarily from mental illness that could be mitigated

Potential Investments

- Support **Best Starts for Kids'** priorities enabling them to further scale key programs
- Identify **additional priorities and need for private funding to augment** (*e.g., additional evaluation, etc.*)
- **Support efforts of Chad's Legacy Project**, such as first episode psychosis and education curriculum



The Challenges

Capacity: There are **not enough clinicians** to meet the need leading to waiting lists, high caseloads, and shortages of the most effective services

Quality: Care isn't always of the quality that ensures recovery

- Care provided does not always reflect optimally **effective practices** tailored to population needs
- Care is not always available **where** people need it
 - *Primary care not always accessible and integrated*
 - *Less outreach on the streets than needed*
- Care is not always available **when** people need it
- **Crisis services** are not always adequate

Its Impact: *People don't recover as quickly or as fully as they could*

Potential Investments

More capacity

- Train professionals to work across settings (improve quantity of clinicians, reduce case loads)
- Promote retention (e.g., reimbursement rates and tuition reimbursement)

Improve quality

- Ensure innovation and evidence-based practices in place to ensure quality care
- Support integration of physical and behavioral health care
- Make care available where and when people need it (e.g., after hours, the street)
- Improve crisis services
- Provide transition support (e.g., Peer Bridger)

Develop and Fund Services to Support Recovery



The Challenge

To recover, people need more than traditional clinical treatment services. People trying to recover lack...

- Supportive housing
- Links to community
- Employment training and job opportunities

...A place to go at night...and during the day

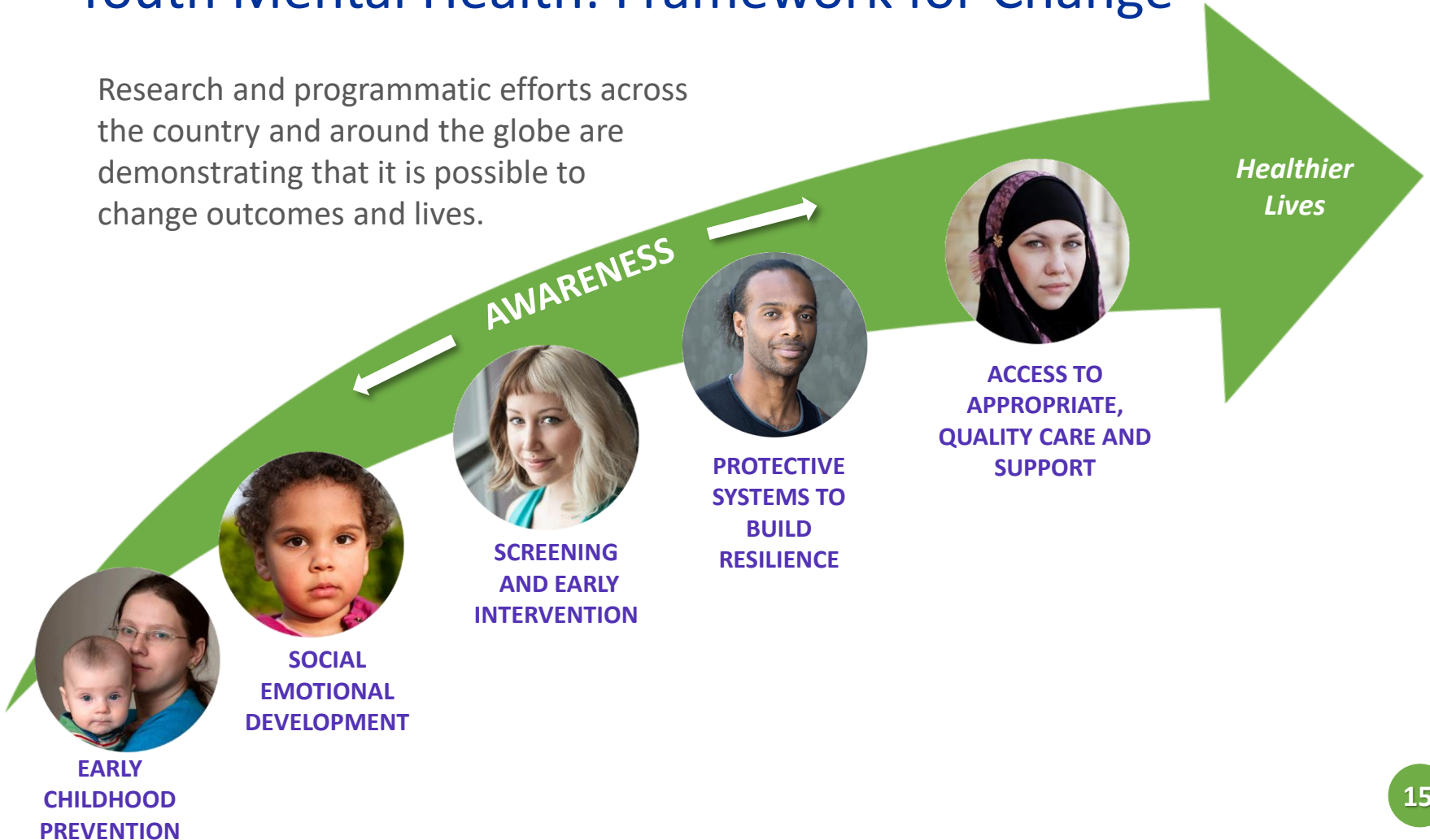
Its Impact: *Many people are not able to get back to happy, productive lives*

Potential Investments

- Advocate for existing community efforts to improve supportive housing
- Support and expand “recovery centers”
- Ensure employment support is provided
- Work with companies to expand job opportunities

Youth Mental Health: Framework for Change

Research and programmatic efforts across the country and around the globe are demonstrating that it is possible to change outcomes and lives.





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