

Caring for Youth Behavioral Health

Preserving Connecticut's Crisis System

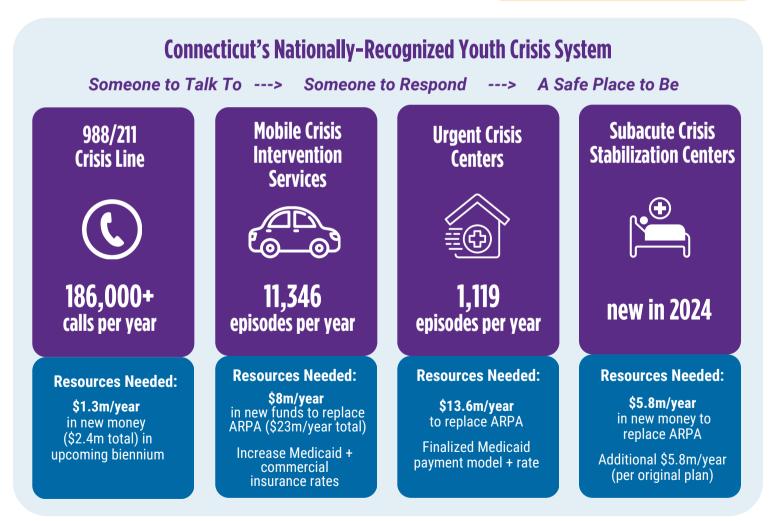
As rates of youth suicide and mental health needs rise in Connecticut, community-based youth crisis services **provide lifesaving support** and are **essential for a well-functioning behavioral health system**. Connecticut has four best-in-class crisis services for youth that operate as a comprehensive system to improve behavioral health.

Investing in crisis services saves \$\$ and improves care:

- prevents escalation of mental health and substance use concerns
 helps youth avoid more costly and unnecessary care
 - Inks families to services and supports statewide
 - improves long-term outcomes

CT MOBILE CRISIS USERS are up to 25% LESS LIKELY to use EMERGENCY DEPARTMENTS

A school-based program using CT MOBILE CRISIS demonstrates a 25% REDUCTION IN COURT REFERRALS



Part or all of these services are currently supported with American Rescue Plan Act (ARPA) funds that are set to expire before the next state biennium.

View data and recommendations for action in the full Policy Brief at www.chdi.org



Without sustained state support, Connecticut's youth crisis services will be significantly compromised or could close altogether, reversing years of progress. Consequences of inaction could include:



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- Access to youth behavioral health services will be greatly reduced, despite high need
- Mobile Crisis services may be unable to maintain 24/7/365 capacity
- Youth with behavioral health needs and at risk of suicide will be at higher clinical risk
- More youth will present to hospital emergency departments, leading to overcrowding, negative care experiences, and poor outcomes
- Connecticut will be **out of compliance** with federal guidance and national best practices

Recommendations

Identify sustainable funding that supports best practice implementation of 988, Mobile Crisis, Urgent Crisis Centers, and Sub-Acute Crisis Stabilization Centers

Invest annually in marketing and advertising with an equity lens and focus on promoting 988/211 as a central access point to reduce confusion (\$300k/year)

Invest in training, data collection, reporting, and quality improvement activities to ensure crisis services are working as intended to improve outcomes. *(\$1 million in each year of the upcoming biennium)*

View our full Policy Brief for more data, funding details, and recommendations for action:



www.chdi.org/CTcrisis

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