

The statistics reveal a concerning reality: mental health challenges among youth are pervasive and often unaddressed. Here are the key figures:

1 in every 6 youth (ages 6-17) have a treatable mental health disorder (e.g., depression, anxiety, ADHD).<sup>1</sup>

50% of these children do not receive counseling or treatment from a mental health professional (e.g., clinical social worker, psychiatrist).<sup>1</sup>

75% of lifetime mental illness start in adolescence.<sup>1</sup>

40% of parents are extremely worried about their children struggling with anxiety or depression. Parents now worry more about their children’s mental health than any other parental concern including bullying (35%), or even drugs or alcohol (23%).<sup>2</sup>

Suicide is the 2nd leading cause of death for youth, ages 10-14.<sup>1</sup>

1: NAMI Mental Health Stats

2: Pew Research Study 2023

These statistics demonstrate the urgent need to address mental health issues among our youth to ensure their well-being and future success.

Agency	Total Served	Ages	Gender	Race / Ethnicity	Insurance	Primary Diagnosis	Services	Needs Identified
<b>LifeBridge</b>	1,545	6-11 (3%) 12-14 (5%) 15-18 (8%) 19+ (84%) *FY24-FY28 expecting 134% increase in youth served	Female (64%) Male (36%)	Hispanic/Latino (35%) White (32%) Black (28%)	Medicaid (84%) Commercial (10%) Scholarships (4%) Self-Pay (2%)	Ages 6-18 diagnosis: Adjustment Disorder (42%) Depression (19%) Anxiety (14%) Attention Deficit (8%) PTSD (5%) Oppositional Defiant (4%)	In process of becoming Certified Trauma- Informed Organization.  Provide treatment for urban and racial trauma (Kniffley Racial Trauma Model).  All clinicians in process of receiving training in TF- CBT; Attachment, Regulation, and Competency (ARC) Framework	Ages 6-18 receiving telehealth services (42%)  Ages 6-18 using medication management services (17%)
<b>Mid Fairfield Outpatient Children's C linic</b>	694	4-8 (15%) 9-16 (68%) 17+ (5%)	Male (50 %) Female (50 %)	Hispanic (41%), White alone, non-Hispanic (28%), Black or African American alone, non-Hispanic (13%), Asian alone, non-Hispanic (1%), Some other race alone, non-Hispanic (16%)	Medicaid (69%); Commercial (26%); None (5%)	Depression Anxiety PTSD ADHD OCD	EBPs: TFCBT, MATCH, DBT, EMDR, CBITS, BOUNCE BACK LINC (clinical and care coordination to new arrivals in Norwalk)	Receiving bicultural services (e.g., Spanish, Haitian Creole) (40%)  Receiving psychiatry services (evaluation, medication management (31%)
<b>Community Health Resources</b>	4,084	0-5 (2%) 6-10 (21%) 11-15 (40%) 16+ (37%)	Female (51%) Male (46 %) Unspecified (3%)	Race White (42%), Black or African American (13%), Asian (1%), Other or Unknown (44%) Ethnicity: Non- Hispanic (60%), Puerto Rican (16%), Other Hispanic/Latino (15%), Unknown (9%)	Medicaid (58%) Commercial (41%) Self-Pay (<1%)	Anxiety (28%) ADHD (28%) Depression (20%) Behavior/Conduct (12%) Trauma (9%)	A trauma screen is completed as part of our assessment process for all youth. We offer TF-CBT and MATCH for children who are assessed to need trauma focused interventions.	Receiving medication management (20%)  Using telehealth services (36%)