For those with mental health problems, stigma is a known barrier to accessing mental health care they need and deserve. **One in five youth live with a mental health condition, but only 10 percent of U.S. children ages 3 to 17-years-old receive any treatment or counseling from a mental health professional.** It is critical that no one, particularly underserved patients and their family members, face stigma or discrimination based on a mental illness. Stigma brings shame and stress, especially in certain cultures, reduces the likelihood that a patient will access needed health care, while increasing the likelihood that they will delay or refuse help, or drop out of treatment altogether.

- **Prevalence of mental illness:** Half of individuals living with mental illness experience onset by the age of 14, and 75 percent by the age of 24. The human brain develops through age 25, and therefore, early identification and treatment is critical.

- **Stigma creates barriers to accessing mental health care:** Too often young people do not receive the evidence-based treatment they need. Children receiving any mental health treatment ranges from 6.2 percent in Hawaii to 15.7 percent in Maine.

- **Consequences of untreated mental illness:** Untreated mental health disorders lead to higher rates of juvenile delinquency, poor educational outcomes, family trauma, substance use, and job insecurity. Additionally, those with untreated mental illness are far more likely to experience poverty, social isolation, and poorer health outcomes.

- **Mental illness and violence:** Mentally ill individuals, especially those with serious mental illness or serious emotional disturbance, are more likely to be victims of violence than perpetrators. Stories linking perpetrators of violence with mental illness falsely reinforce the stigma associated with mental illness absent a balanced presentation of crime statistics.

- **Suicide rates are increasing.** Suicide attempts and completions, have increased among young adults in recent years, but access to mental health care has not. Further, while depression is the leading condition most associated with suicide, suicide ideation among young adults without diagnosed depression is rising. Accessing mental health care for anyone experiencing suicidality is a matter of life or death.

- **Recovery is possible:** For children and adolescents with a mental health disorder, success later in life is closely tied to the timely treatment adherence and management of the disorder.

- **Stigma impacts the mental health workforce:** Every state in the U.S. has a shortage of child and adolescent psychiatrists. Stigma complicates effect to recruit new mental health professionals, including child and adolescent psychiatrists.
• **Schools have a role to reduce stigma:** Schools play an important role in reducing the stigma and discrimination associated with mental illness. School-based mental health curriculums have been proven effective in reducing stigma. Teachers and school support staff must have the knowhow to promote mentally healthy learning, understand social-emotional development, and identify students with mental health risk factors and be able to connect them with needed mental health resources.

• **Mental health parity must be enforced:** Historical differences between physical health and mental health services only further stigmatize mental health care. Despite a federal mental health parity law, health insurance may limit mental health care, as compared to physical care. Equity between mental health services and physical and surgical health services must be reached to reduce mental health stigma.

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ii The Henry J. Kaiser Family Foundation. *Percent of Children (ages 3-17) Who Received Any Treatment or Counseling from a Mental Health Professional*. March 2, 2018, [https://www.kff.org/other/state-indicator/child-access-to-mental-health-care/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D](https://www.kff.org/other/state-indicator/child-access-to-mental-health-care/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D). Accessed on March 13, 2018.
iv The Henry J. Kaiser Family Foundation. *Percent of Children (ages 3-17) Who Received Any Treatment or Counseling from a Mental Health Professional*. March 2, 2018, [https://www.kff.org/other/state-indicator/child-access-to-mental-health-care/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D](https://www.kff.org/other/state-indicator/child-access-to-mental-health-care/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D). Accessed on March 13, 2018.
vii Ibid.
ix Ibid.