Mental Health Month: Why Care?

Each year millions of Americans face the reality of living with a mental illness. During May, NAMI and the rest of the country are raising awareness of mental health. Each year we fight stigma, provide support, educate the public and advocate for policies that support people with mental illness and their families.

The WhyCare? Campaign is an opportunity to share the importance of mental health treatment, support and services to the millions of people, families, caregivers and loved ones affected by mental illness and a challenge to address broken systems and attitudes that present barriers to treatment and recovery.

Care has the power to make a life-changing impact on those affected by mental health conditions. Through our own words and actions, we can shift the social and systemic barriers that prevent people from building better lives.

WhyCare?
Care is a simple 4-letter word, but a powerful way to change lives for people affected by mental illness.
It’s an action. It’s a feeling. It’s a gift we give to ourselves and to each other. People feel loved when someone cares. People feel heard when someone cares. People recover when someone cares. Society changes when people care. Entire systems change when people care. For more than 40 years, NAMI has been a beacon of help and hope by providing the support, education and advocacy to ensure that all people affected by mental health conditions get the care they need and deserve. #NAMICares #WhyCare

How to Participate
There are many ways to get involved and demonstrate WhyCare? by sharing stories about why you care for others, how support or care from others has affected you, or what it means to have access to care by sharing through text, graphics, video or any other medium.

To read the full article visit: https://www.nami.org/Get-Involved/Awareness-Events/Why-Care
Millions of people in the U.S. are affected by mental illness each year. It’s important to measure how common mental illness is, so we can understand its physical, social and financial impact — and so we can show that no one is alone. These numbers are also powerful tools for raising public awareness, stigma-busting and advocating for better health care.

**You Are Not Alone**

- **19.1%** of U.S. adults experienced mental illness in 2018 (47.6 million people). This represents 1 in 5 adults.
- **4.6%** of U.S. adults experienced serious mental illness in 2018 (11.4 million people). This represents 1 in 25 adults.
- **16.5%** of U.S. youth aged 6-17 experienced a mental health disorder in 2016 (7.7 million people).
- **3.7%** of U.S. adults experienced a co-occurring substance use disorder and mental illness in 2018 (9.2 million people).

**Mental Health Care Matters**

- **43.3%** of U.S. adults with mental illness received treatment in 2018.
- **64.1%** of U.S. adults with serious mental illness received treatment in 2018.
- **50.6%** of U.S. youth aged 6-17 with a mental health disorder received treatment in 2016.
- The average delay between onset of mental illness symptoms and treatment is **11 years**.
- Annual treatment rates among U.S. adults with any mental illness, by demographic group:
  - Male: **34.9%**
  - Female: **48.6%**
  - Lesbian, Gay or Bisexual: **48.5%**
  - Non-Hispanic Asian: **24.9%**
  - Non-Hispanic white: **49.1%**
  - Non-Hispanic black or African-American: **30.6%**
  - Non-Hispanic mixed/multiracial: **31.8%**
  - Hispanic or Latino: **32.9%**
- **11.3%** of U.S. adults with mental illness had no insurance coverage in 2018.
- **13.4%** of U.S. adults with serious mental illness had no insurance coverage in 2018.
- **60%** of U.S. counties do not have a single practicing psychiatrist.

To read the full article visit: [https://www.nami.org/Learn-More/Mental-Health-By-the-Numbers](https://www.nami.org/Learn-More/Mental-Health-By-the-Numbers)
Infographics for Mental Health Awareness

The information on these infographics and this page comes from studies conducted by organizations like Substance Abuse and Mental Health Services Administration (SAMHSA), Centers for Disease Control and Prevention (CDC) and the U.S. Department of Justice. The terminology used reflects what is used in original studies. Terms like “serious mental illness,” “mental illness” or “mental health disorders” may all seem like they’re referring to the same thing, but in fact refer to specific diagnostic groups for that particular study.

If you have questions about a statistic or term that’s being used, please visit the original study by clicking the link provided.

Visit [www.nami.org](http://www.nami.org) to:

- Learn More
- Find Support
- Get Involved
- Get information on:

Mental Health Public Policy

Infographics & Fact Sheets

To download and print these infographics visit: [https://www.nami.org/Learn-More/Mental-Health-By-the-Numbers](https://www.nami.org/Learn-More/Mental-Health-By-the-Numbers)

If you or someone you know is in an emergency, call The National Suicide Prevention Lifeline at 800-273-TALK (8255) or call 911 immediately.
Dear Valued Referral Source,

We would like to thank you for your ongoing referrals and support. We are proudly committed to patient care, so please don’t hesitate to call for any reason at all.

Sincerely,

*Jennifer Campbell, MSW, LSW*

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Greene County Crisis Line: 1-800-417-9460
Washington County 24-Hour Crisis Hotline: 1-877-225-3567
National Suicide Prevention Lifeline: 1-800-273-8255
Greenbriar Treatment Facility: 1-800-637-4673