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FOR IMMEDIATE RELEASE:

Clarity Child Guidance Center FACT SHEET

Founded in 1886, <u>Clarity Child Guidance Center</u> is the only nonprofit in South Texas providing a continuum of mental health services for children ages 3-17 and their families to manage mental health conditions ranging from depression and anxiety to suicidal ideation, bipolar disorder and/or schizophrenia. In keeping with its mission to heal young minds and hearts, what makes Clarity unique:

- Stand-alone mental health hospital on an eight-acre kid-friendly, open campus in the South Texas Medical Center
- 66-bed, four-unit inpatient hospital with a six-bed Crisis Services unit offering specialized treatment for children
- Serves more than 7,300 children annually in need of care, regardless of their family's ability to pay; the majority of patients are disproportionately low-income
- Offers the region's largest concentration of child and adolescent psychiatrists through onsite affiliations with Southwest Psychiatric Physicians and UT Health San Antonio
- Serves as teaching hospital for the esteemed nursing schools of UT Health San Antonio and University of Incarnate Word

Clarity CGC's innovative continuum of care model allows families to easily flow between various services without having to start over somewhere new every time a child's mental state changes. Clarity has garnered national attention for its holistic approach to children's mental wellness treatment, intervention, and prevention services:

- Psychiatric emergency care in 24/7 Crisis Services area;
- Inpatient treatment for children in crisis and/or children experiencing long-term complex problems;
- "First Step" appointments to help caregivers recognize when a child's behavior escalates from age-appropriate challenges to mental health disturbances requiring professional help;
- Partial hospitalization (day treatment) during daytime; children return home in the evening to practice coping skills outside of the treatment setting;
- Outpatient therapy, including individual, group, and family sessions, and onsite pharmacy;
- Wraparound services such as case management, medication management and education support;
- Innovative "Play with A PurposeTM" therapeutic art and active play program including gym; rock-climbing wall; art, yoga, and music therapy rooms; outdoor swimming pool; and playscape;
- "Next Step" program, where families receive rapid access appointments, urgent care assessments, and evaluations with a licensed clinician; includes brief therapy, bridge appointments, school referrals, and care coordination;
- Care Coordination team helps families that are transitioning out of treatment by ensuring medications are filled; answering questions; helping with school re-entry; connecting families with resources, food and clothing; and making follow-up care appointments;
- Free online resources for teens, caregivers and professionals including blogs, videos, panel discussions and handbooks:
- <u>Claritycon</u>, an annual children's mental health summit/CEU event it has sponsored and underwritten for 10 years, with 50+ renowned experts speaking to 250+ educators, therapists, physicians and social workers
- Community partnerships and collaborations aimed at quality assurance, providing parent education, increasing
 children served, increasing children's mental health providers, and reducing duplication of services with many
 partners and United Way partner agencies, including Center for Health Care Services, Hill Country MHDD Centers,
 Roy Maas Youth Alternatives, Stonebridge Alliance, San Marcos Treatment Center, St. PJ's Children's Home and
 Meridell Achievement Center.
- "Food for the Soul" initiative allows volunteers to bring and serve a meal to the kids. Other volunteer opportunities include gardening, campus upkeep, in-kind donation drives to provide food and clothing, and Amazon wish list.

THE NEED: Medical experts quote alarming statistics about the nation's youth mental health crisis "further exposed by

COVID-19 pandemic" on local, regional and national levels:

- U.S. Surgeon General Dr. Vivek Murthy: Before COVID-19, mental health challenges were the leading cause of disability and poor life outcomes in young people, with <u>up to 1 in 5 children</u> ages 3 to 17 in the U.S. having a mental, emotional, developmental, or behavioral disorder. Suicidal behaviors among high school students also increased during the decade preceding COVID, with 19% seriously considering attempting suicide, a 36% increase from 2009 to 2019, and about 16% having made a suicide plan in the prior year, a 44% increase from 2009 to 2019. Early estimates show more than 6,600 suicide deaths among youth ages 10-24 in the U.S. in 2020.
- Kaiser Family Foundation in 2020 noted: (1) Parents with children ages 5-12 reported their children showed elevated symptoms of depression (4%), anxiety (6%), and psychological stress (9%); and experienced overall worsened mental or emotional health (22%); (2) More than 25% of high school students reported worsened emotional and cognitive health, and only one-third of high school students felt they were able to cope with their sources of stress; (3) LGBTQ adolescent respondents ages 13-17 reported symptoms of anxiety (73%) and depression (67%), and serious thoughts of suicide (48%) during the pandemic; and (4) the most frequently diagnosed mental health conditions in 2020 were depression, anxiety, and adjustment disorder.
- In Texas, more than 67% of children who need treatment will never receive it—even though 25% have onset by age 7—due to three barriers: a lack of service providers where they live; stigma around mental health; and the ability to pay for services.
- The Meadows Mental Health Policy Institute 2017 study of needs in Bexar County reports that only 22% of the children with serious emotional disturbances and in poverty are being helped by the two main community/public mental health providers for such services in our region.
- Absence of treatment harms children and their families, often leading to: (1) higher risk for incarceration as adults; (2) 60% of Texas youth entering state juvenile justice facilities have a moderate to severe mental health issue; (3) high school students to drop out of school since students with significant symptoms of depression are twice as likely to drop out; (4) substance use disorder, with average onset for substance use disorders at 15 years old.
- While overall emergency room visits declined by 42% when shelter-in-place orders were in effect between March and October 2020, emergency room visits for psychosocial reasons increased by 44% in children and teens when compared to data for the same reporting period in 2019.

Clarity CGC is experiencing these alarming stats in real time. Over the last two years, Clarity has encountered:

- 86% increase in the number of patients admitted and placed on suicide risk precautions
- 89% increase in law enforcement referrals
- 172% increase in emergent walk-ins (i.e. sudden, unexpected onset of a health condition that requires immediate medical attention)
- 22% of bed days were Star Health/Star Kids (Medicaid managed care program serving children and youth in foster care and/or those who have disabilities)
- 12% increase in inpatient admissions
- In FY2020-2022, Clarity treated over 12,900 children with 9,364 inpatient admissions, 1,664 partial (day treatment) hospital admissions, and 48,000 outpatient visits. Children served resided predominantly in Bexar County, with the remaining from 48 other Texas counties and 7 states outside of Texas who could not find or afford services in their area. 60% were state-funded because they were uninsured, under-insured, or low-income. 53% were female; 58% were Hispanic.
- Its 66-bed hospital was often at capacity during the pandemic, and teenage girls aged 12-17 were the most impacted: between April 2020 and June 2021, the unit treating girls in this age group was at capacity 28% of the time, reaching 47% in September 2020.

POSITIVE RESPONSE: With the right treatment, the positive response rate for psychiatric disorders is high. Prevention programs and parental participation in treatment can reduce symptoms by as much as 60% in school-age children. 81% of children with anxiety respond in as little as 12 weeks, and 86% of children experiencing depression improve within 36 weeks.

Clarity CGC accepts most insurance and accommodates families by billing them on a sliding scale based on their income. However, for uninsured patients, mental health treatment remains cost prohibitive, and insurance company reimbursements, especially CHIP and Managed Medicaid, do not fully cover the cost of treatment. Day treatment is often completely excluded from coverage. Clarity serves all children in need of care, regardless of their family's ability to pay.

Those wanting more information about <u>Clarity Child Guidance Center</u> can visit www.claritycgc.org or contact 210-616-0300 or <u>info@claritycgc.org</u> . Those wanting to donate can visit <u>www.claritycgc.org/give-now/</u> .	