2014 *Community Innovation Awards*

The *Connect 4 Mental Health® (C4MH) Community Innovation Awards* program is designed to recognize local organizations across the country that are working to implement innovative, collaborative approaches to address serious mental illness in their communities. *C4MH* will issue four awards to U.S.-based community programs exhibiting innovative work in four pillars – early intervention, creative use of technology, continuity of care, and service integration (one winner in each pillar).

➢ Winners will exemplify the *C4MH* mission, implementing approaches that support individuals living with serious mental illness and their families, and that also may positively impact the communities in which they live.
➢ Submissions will be judged on the program's impact on their community, measurability/sustainability and effectiveness in building community partnerships, among other considerations.
➢ Each winner will receive a $10,000 award to support program efforts in their communities, as well as access to a one-on-one *Mentorship Program.*
➢ Entries are due by October 3, 2014 and winners will be notified in November of 2014. Visit www.Connect4MentalHealth.com for a full description of the awards and to apply.

Mentorship Program for Award Winners

Mentorship is an important component of the *Community Innovation Awards* program and will give winners the opportunity to learn from exemplary community-based programs that were recognized as "national success communities" in 2013.

While there is no one-size-fits-all approach to addressing mental healthcare locally, there may be best practices and actionable steps that communities could consider as they establish or improve upon their mental health programs or service offerings.

About *Connect 4 Mental Health*

C4MH is a nationwide initiative calling for communities to prioritize serious mental illness. The initiative encourages collaboration among mental health and other community-based organizations – such as emergency services, law enforcement and public housing – to develop new approaches that support individuals and families living with serious mental illnesses and that also may help address larger community problems.

> ### *The need for innovative community-based programs and broader community engagement is reflected in the numbers.*
>
> #### 40%
> *The estimated percentage of adults living with serious mental illness who do not receive mental health services[2]*
>
> #### 63 million
> *The annual number of visits to physician offices, outpatient facilities and emergency rooms associated with mental health disorders[3]*
>
> #### 1.25 million
> *The estimated number of jail and prison inmates across the country who have reported mental health problems[4]*
>
> #### $100 billion
> *The estimated cost of untreated mental illness each year in the U.S.[5]*

C4MH is a partnership between the National Alliance on Mental Illness (NAMI), the National Council for Behavioral Health (National Council), Otsuka America Pharmaceutical, Inc. and Lundbeck. It launched in November 2013 with a Community Collaboration Summit in Washington, D.C., where mental health advocates and criminal justice, housing and other community-based stakeholders introduced several approaches aimed at helping the estimated 1 in 17 Americans living with serious mental illness, their families and their broader communities.[1]

References
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2. U.S. Department of Health and Human Services. (2012). Results from the 2011 National Survey on Drug Use and Health: Mental Health Findings (HHS Publication No. (SMA) 12-4725). Rockville, MD: Substance Abuse and Mental Health Services Administration.
3. (2013, May 30). Mental Health. *Centers for Disease Control and Prevention.* Retrieved October 4, 2013, from: http://www.cdc.gov/nchs/fastats/mental.htm.
4. U.S. Department of Justice. (2006). Bureau of Justice Statistics Special Report: Mental Health Problems of Prison and Jail Inmates (NCJ 213600). Washington, DC: Office of Justice Programs.
5. Madhusoodanan, S., et al. (2010). Primary Prevention in Geriatric Psychiatry. *Annals of Clinical Psychiatry, 22* (4), pp. 249-261.