

Helping Children and Youth With Serious Mental Health Needs: Systems of Care

In 1992, the U.S. Congress established the Comprehensive Community Mental Health Services Program for Children and Their Families to support the development of systems of care for children and youth with serious emotional disturbances and their families. "Serious emotional disturbances" refers to diagnosed behavioral, emotional, or mental disorders resulting in functional impairment that substantially interferes with or limits one or more major life activities. The Comprehensive Community Mental Health Services Program for Children and Their Families is funded through Public Law 102-321.

What Is a System of Care?

A system of care is a coordinated network of community-based services and supports that is organized to meet the challenges of children and youth with serious mental health needs and their families. Families and youth work in partnership with public and private organizations so services and supports are effective, build on the strengths of individuals, and address each person's cultural and linguistic needs. A system of care helps children, youth, and families function better at home, in school, in the community, and throughout life.

Why Are Systems of Care Needed?

Five to nine percent of children and youth between ages 9 and 17 have serious emotional disturbances that cause substantial functional impairment, and many do not receive the supports and services they need to reach their full potential at home, at school, and in their communities.

National Data Support the Effectiveness of Systems of Care

National data collected for more than a decade confirm the experiences of children, youth, and caregivers:

Systems of care work. Data from systems of care related to children, youth, and caregivers reflected the following:

Children and youth improved on clinical outcomes after 6 months.

- Emotional and behavioral problems were reduced or remained stable for 89 percent of children and youth.

Children and youth with suicide-related histories improved after 6 months.

- Almost 91 percent of children and youth with a history of suicide attempts or suicidal ideation improved or remained stable in their emotional and behavioral problems.

Children and youth improved or remained stable on school-related outcomes after 6 months.

- School performance improved or remained the same for 75 percent of children and youth.

Children and youth with co-occurring disorders improved after 6 months.

- Emotional and behavioral problems were reduced or remained stable for 89 percent of children and youth with co-occurring mental health and substance abuse diagnoses.

System of care communities adopted a strength-based approach to planning services.

- Ninety-one percent used child and youth strengths to plan services.
- Eighty-five percent reported that children and youth helped plan services.

Families/caregivers were satisfied with the cultural competence of service providers.

- More than 75 percent of families reported that they were satisfied with their providers' respect for their beliefs and values about mental health, understanding of their traditions, and ability to find services that acknowledged the positive traditions of their cultures.

For information about children's mental health contact the National Mental Health Information Center toll-free:
1.800.789.2647 (English/Spanish)
1.866.889.2647 (TDD)



Why Are Systems of Care Needed?

(continued)

Children and youth with serious mental health needs and their families need supports and services from many different child- and family-serving agencies and organizations. Often, these agencies and organizations are serving the same children, youth, and families. By creating partnerships among these groups, systems of care are able to coordinate services and supports that meet the ever-changing needs of each child, youth, and family. Coordinated services and supports lead to improved outcomes for children, youth, and families, and help prevent the duplication of services for authorized care among government agencies.

What Types of Services Are Coordinated Through Systems of Care?

Systems of care help parents and caregivers address the mental health needs of their children and youth while managing the demands of day-to-day living. Adequately meeting these needs requires multiple strategies and agencies. Some of the types of services that systems of care coordinate may include:

- Care coordination (case/care management);
- Child care;
- Community-based, inpatient psychiatric care;
- Counseling (individual, family, group, and youth);
- Crisis residential care;
- Crisis outreach;
- Day treatment;
- Education/special education;
- Family support;
- Health care;
- Independent living supports;
- Legal services;
- Mental health information resources;
- Protection and advocacy;
- Psychiatric consultation;
- Recreation therapy;
- Residential treatment;
- Respite care;
- Self-help or support groups;
- Small therapeutic group care;
- Therapeutic foster care;
- Transition from youth to adult mental health services;
- Transportation;

- Tutoring; and
- Vocational counseling.

What Are the Outcomes of Systems of Care?

Systems of care have helped tens of thousands of children and youth with serious behavioral, emotional, and mental health needs make improvements in almost all aspects of their lives. One of the greatest accomplishments systems of care have made in helping children and youth with serious mental health needs is making services and supports family-driven and youth-guided.

Family-driven means that families have a primary decisionmaking role in the care of their children and the policies and procedures governing care for children and youth in their community, State, tribe, territory, and Nation.*

Youth-guided means that youth have the right to be empowered and educated decisionmakers in their own care and the policies and procedures governing care for youth in their community, State, tribe, territory, and Nation.*

In addition to the substantial roles children, youth, and families play in the care they receive, systems of care are successful because:

- Systems of care represent single points of contact for obtaining a comprehensive array of child, youth, and family services in homes and communities.
- Families work with service providers to develop, manage, deliver, and evaluate policies and programs.
- Services are delivered in the least restrictive, most natural environment appropriate for the needs of children, youth, and families.
- Child-, youth-, and family-serving agencies establish partnerships to coordinate services and supports.
- Care management ensures that planned services and supports are delivered and continue to help children, youth, and families move through the system as their needs change.
- Systems of care include evidence-based treatments and interventions.
- All services and supports are selected and designed in ways that are responsive to families' beliefs, traditions, values, cultures, and languages.
- Systems of care are accountable for evaluating the outcomes of services for children, youth, and families.

* For more information on "family-driven" and "youth-guided," visit www.systemsofcare.samhsa.gov.

Jordan's Story: A Case Study in System of Care Success

When Jordan first came to a system of care at age 10, he and his mother were having serious problems getting help for his mental health needs. Having been diagnosed with bipolar disorder at age 6, Jordan's needs were complex and compounded by his mother's own issues related to substance abuse, homelessness, and a chronic, life-threatening illness.

Jordan's mother first realized that he had special needs when he experienced speech delays at a very young age. As Jordan grew older, his "cycling" between periods of extreme highs and lows became more apparent, as did his suicidal thoughts and hallucinations. Jordan and his mother received assistance from agencies representing child welfare, education, public health, mental health, and public housing, but these services were not intensive enough. When Jordan reached a critical moment where he was hospitalized, his mother considered giving up custody so he could receive residential care for his symptoms.

Having been involved with the system of care for several years, the hospital knew that a system of care was ready to help children, youth, and families with complex mental health needs. Working closely with Jordan's school social worker and special education coordinator, the hospital's discharge planner helped enroll Jordan in the system of care.

Once enrolled in the system of care, Jordan began to see substantial improvements in his life. The first was that Jordan, his mother, and other people in their lives worked in partnership with service providers to create Jordan's care plan. Jordan's service providers included the hospital, his school, and the mental health department's children's intensive services system, which provided mobile mental health case management. Initially Jordan's

plan involved therapeutic respite care and a specialized camp for children with serious mental health needs, but additional supports and services were available because the entire county operated under the system of care's framework.

While at the camp, Jordan received highly structured services tailored to his unique needs. This camp presented an opportunity for service providers to try different approaches to see which ones were most effective. When camp concluded, the system of care facilitated communication between camp representatives and Jordan's school to ensure that the lessons learned were transferred from Jordan's camp counselors to his teacher. Because of this communication, Jordan's teacher learned strategies she could use in the classroom to effectively manage his behaviors, which in turn led to fewer disruptions and an improved learning environment for Jordan and his classmates. For instance, Jordan's teacher learned that his classroom behavior would improve dramatically if she gave him positive feedback three times an hour.

The collaboration among all the service providers has led to more than just improvements at school. The symptoms associated with Jordan's bipolar disorder have been substantially reduced. Jordan has far fewer hallucinations and periods of suicidal thoughts or behaviors than before. The personal situation of Jordan's mother improved because of the system of care's services. She now has adequate childcare for Jordan, which allows her to go to work. She also no longer blames herself for her son's situation. The relationships she developed through the system of care have helped her to be more trusting of others who genuinely want to help. The system of care worked because of collaboration, shared resources, and the close connection between the system of care and the family.

Who Can Help My Community Establish a System of Care?

Center for Mental Health Services

The Center for Mental Health Services (CMHS) within the Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services, administers the Comprehensive Community Mental Health Services for Children and Their Families Program.

Through Federal funding, this program supports States, communities, territories, and Tribal organizations and governments to develop, improve, or expand services to meet the needs of children and youth with serious mental health needs and their families. With Federal support, communities establish local systems of care that foster partnerships among a wide range of service and support providers.

Communities receive support from CMHS by submitting applications in response to requests for applications, which are listed on www.grants.gov. For more information, call CMHS at 240.276.1980.

For More Information

Resources

Child, Adolescent and Family Branch
Center for Mental Health Services
Substance Abuse and Mental Health Services
Administration
www.systemsofcare.samhsa.gov
Tel: 240.276.1980

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