Strengthening Mental Health in Child Welfare

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Agenda

Why Focus on Mental Health in Child Welfare

Challenges to Improving Mental Health

Solutions to Improve Mental Health

Closing: Q & A
Our Team Presenting Today

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Vision, Mission, Core Change Strategy

**Vision:** We envision Texas to be the national leader in treating people with mental health needs.

**Mission Statement:** To provide independent, non-partisan, data-driven, and trusted policy and program guidance that creates equitable systemic changes so all Texans can obtain effective, efficient behavioral health care when and where they need it.
Why Focus on Mental Health in Substitute Care

- Mental health is a pervasive need in substitute care.
- Children and youth in substitute care have been found to have poorer mental and physical health relative to children in every other type of family situation.
- Compared to their peers, children and youth in substitute care are:
  - 5x more likely to experience **anxiety**
  - 6x more likely to struggle with **behavioral problems**
  - 7x more likely to struggle with **depression**
Why Focus on Mental Health in Substitute Care

Up to 80% of children in foster care have significant mental health concerns

Almost 1 in 4 youth in foster care will experience post-traumatic stress disorder (PTSD) symptoms

Of those who age out of foster care, over 80% have received a psychiatric diagnosis
Why Focus on Mental Health in Substitute Care

Untreated mental health needs in children and youth in substitute care impact other areas of childhood and long-term outcomes.

- Over a quarter of Texas teens who spend time in foster care in high school end up dropping out of school.
- Up to 46% of young adults exiting foster care experience homelessness by the time they turn 26 years old.
Addressing the mental health needs of children and youth in substitute care is critical for many reasons, including for placement stability, permanency, and, most importantly, a child’s long-term health and well-being.

- Placement stability impacts a child’s mental health and is impacted by their mental health.
- There is a direct relationship between poor mental health and children without placement.

However, individual short and long-term outcomes can improve significantly with the right type of mental health related services and supports.

Why Focus on Mental Health in Substitute Care

Graphic from Mathematica
www.mathematica.org/features/child-well-being
What are the challenges?

They are situational but also systemic.
Situational Contributors Affecting Mental Health in Child Welfare

• Children and youth who are involved in the child welfare system are significantly more likely than the general population of children and youth to have experienced adverse childhood experiences (ACEs).

• Removal from the home and placement into substitute care is its own unique trauma.

Graphic from Kaiser Permanente
https://thrive.kaiserpermanente.org/
Systemic Elements to Improving Mental Health

- Policy
- Regulatory
- Financing
- Communication

Systemic Elements

Equity
Many children and families in the foster care system lack access to evidence-based mental health services and supports, especially ones that are family and caregiver centered.

- Often these options are unknown in communities. In other instances, deciding which interventions to invest in can be daunting.

- Moreover, complex financing rules and the lack of resources to support coordination between health and child welfare agencies hamper the creation of a mental health system designed to match the needs of the child and their family.

- Continuity of care is also uniquely challenging for children and youth in substitute care.
Despite parental substance use being the most significant single factor driving removals and preventing healthy reunification (in at least 70% of cases), there is widespread inconsistency in access to recovery services and insufficient knowledge and incorporation of interventions shown most likely to help parents struggling with substance use.

• Parents in need of substance use treatment often lack access to the interventions known to be effective, resulting in extended separation between parent and child and delayed permanency.
What are the solutions?

There are effective, evidence-based solutions to address these challenges.
Our goal is to create a **trauma-informed care** and that offers a **continuum of mental health services** for children and youth in substitute care, their families, foster families, and kinship caregivers. It must include:

- Ongoing skills training and coaching for children, youth, and their families;
- A person-centered crisis services array linked to a broad range of post-crisis supports;
- Strategies to address the needs of those at highest risk for serious mental health concerns (older youth, LBGTQ+, and others with multiple placements or longer time spent in care);
- A robust network of community-based, evidence-based services;
- Continuity of care; and
- Heavy use of non-medical supports such as skill building and family peer support.
Launch solution-driven provider learning communities focused on increasing and improving the continuum of evidence-based, community mental health services for children and youth with child welfare involvement.

• While many community providers have the interest and desire to provide needed services, the complexity and investment required to identify, build staff capacity and competency for, and sustain delivery of these services prevent them from doing so.

• This effort would promote clinical best practice and community collaboration and leverage state-level efforts to increase Medicaid flexibility to fund children’s mental health services to address financing and sustainability within the continuum of care.
Address longstanding system and policy barriers by creating a community informed implementation roadmap.

- We recommend the creation of a multi-region initiative to develop an action-oriented implementation roadmap for bridging the gap between the knowledge and accessibility of appropriate, effective mental health interventions for children and youth in foster care.

- The roadmap should include targeted strategies addressing how providers, caregivers, clinicians, agency leaders, payors, policymakers, and other stakeholders can overcome long-standing barriers that have hampered access to appropriate mental health care for children and youth in foster care.

- Such efforts should address: improvements in financing and sustainability, network adequacy and provider availability, and outreach and awareness so that families know about available services and supports.
Strategies to Strengthen Mental Health in Foster Care

Complete a comprehensive analysis of the intersection of substance use, parental mental illness, and child welfare involvement to create an implementation framework for communities and statewide decision-makers.

• A strong implementation framework should:
  • Improve access to effective substance use treatment for parents with children involved in the child welfare system;
  • Promote consistency across jurisdictions to ensure parents have access to the most appropriate treatment options regardless of their location
  • Remove unnecessary barriers to recovery and reunification; and
  • Bolster supports for recovery management for those with substance use disorders.
Texas has launched new opportunities to improve mental health in foster care:

- YES Waiver
- Multisystemic therapy
- Community-based Care
- Emerging flexibility through Medicaid (in lieu of services)
- Dedicated mental health focus at DFPS
- Certain efforts through STAR Health

The flexibility and community orientation of philanthropy is critical for scaling many of these investments and identifying the best places for future investments.
Questions?

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Thank You!

For more information visit mmhpi.org.