United Way of Connecticut

2-1-1

Judiciary Committee Public Hearing
April 15, 2013

Testimony Presented by Richard Porth, United Way of Connecticut

My name is Richard Porth. I serve as the CEO of United Way of Connecticut. Thank you for the opportunity to submit testimony today on:

Raised Bill No. 6684, AN ACT CONCERNING THE ESTABLISHMENT OF AN INTAKE, REFERRAL, AND INTERVENTION SYSTEM RELATING TO THE PROVISION AND DELIVERY OF MENTAL HEALTH SERVICES

We support the need for increased access to mental health services via an information and referral system, and would like to suggest that 2-1-1, Connecticut's statewide Health and Human Services information and referral contact center, can play a key role in expanding access to mental health services.

Working with the Department of Children and Families, United Way 2-1-1 currently serves as the state's primary access point for the Emergency Mobile Psychiatric Service for youth, which is available 24 hours a day, 365 days a year to connect parents/caregivers with trained counselors when children are experiencing a behavioral crisis. In addition, thousands of Connecticut residents of all ages turn to 2-1-1 for crisis intervention services, including suicide prevention and mental health needs.

Rather than creating a new phone line, we respectfully suggest that working with leaders in the Department of Mental Health and Addiction Services and building on existing infrastructure through DCF's EMPS program as well as the 2-1-1 crisis intervention service, both of which are already known to parents and families, seniors, physicians, and other community and mental health providers, would be more efficient and cost effective.

DCF's Emergency Mobile Psychiatric Service (EMPS) is a mobile intervention service for children and adolescents experiencing a behavioral or mental health crisis, which is accessed by calling 2-1-1, 24/7/365. The program involves a team of nearly 150 trained mental health professionals across the state that can respond immediately by phone or face to face within 45 minutes when a child is experiencing a behavioral or emotional crisis. The purpose of this program is to serve children in their homes and communities, reduce juvenile justice involvement and reduce the number of visits to hospital ER's. This diverts children from unnecessary high cost interventions at hospitals and other facilities and gets them connected to the appropriate ongoing treatment and supports. In 2012, 2-1-1 handled over 14,300 EMPS calls for this service of the Department of Children and Families.

In 2012, United Way 2-1-1 received over 41,000 calls for mental health related resources. And the www.211ct.org website recorded thousands of inquiries related to our on-line mental health resources. When people contact 2-1-1 for this help, they are served by 2-1-1 Call Specialists who are certified by the American Association of Suicidology to assist in crisis intervention. 2-1-1 received 4,000 suicide-related calls in 2012 and thousands more calls for other mental health needs. 2-1-1 is available 24/7/365 by dialing 2-1-1 and pressing "1" for crisis and has the ability to serve people in multiple languages.

I am also providing to you a copy of our latest 2-1-1 Barometer Report. Released just last week, it provides information and links to many mental health care resources in Connecticut.

Operating under the 2-1-1 umbrella, EMPS and 2-1-1's crisis intervention service provide access to a range of emergency and longer-term behavioral health services which are already in place and serving Connecticut's residents. We applaud you for your focus on this crucial and timely issue. We are eager to work with the Department of Mental Health and Addiction Services and other state leaders to provide more information and access to mental health services. And we request that you please consider building on existing assets to strengthen support for access to necessary mental health services.

Again, thank you for the opportunity to share our thoughts with you on this crucial issue.

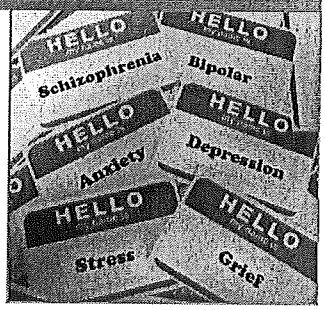
the 2-1-1 Barometer

United Way

April 2013

ACCESSING MENTAL HEALTH CARE RESOURCES

The 2-1-1 Barometer utilizes 2-1-1 data and other information to explore issues affecting Connecticut residents. 2-1-1 tracks the type of help that callers are seeking in order to create a database that serves as a barometer of the needs present in the state.



INTRODUCTION

Mental illness is generally used to describe a variety of psychiatric disabilities, including depression, schizophrenia, bipolar disorder, and panic/anxiety disorders. These illnesses impact people of all ages and, like most illnesses, mental illnesses have intertwined biological, psychological and environmental roots. In Connecticut, close to 109,000 adults and 39,000 children live with a serious mental health condition according to a recent report by the National Alliance on Mental Illness.[1]

While the need for mental health care is clear, barriers exist to accessing this type of care. Among the barriers are cultural and ethnic stigmas, reluctance regarding the inclusion of mental health issues on medical records and the lack of access to mental health coverage for those with private insurance. This 2-1-1 Barometer will: review the goals of Connecticut's current mental health plan that seek to address these barriers; and review the mental health resources available to various segments of the population in Connecticut. Throughout the report, click on the blue text for links to more information.

CONNECTICUT AREAS OF NEED

While the legislature is currently reviewing the accessibility of mental health care in Connecticut after the tragedy at Sandy Hook, Connecticut continues to be guided by work done through funding from the Mental Health Transformation Grant which recommended structural changes to the state's mental health delivery system. The goals of the grant stipulate that:

1. Connecticut's citizens will understand that mental health is essential to overall health and will treat it with the same urgency as physical health;
2. Mental health care will be person and family-driven and oriented to promoting resilience and recovery;
3. Disparities in mental health care that are based on culture, ethnicity, race, or gender will be eliminated so that all citizens will be able to participate equally in the promise of recovery;
4. Early mental health screening, assessment, and referral to services will become common practice;
5. Excellent mental health care, supported by research, will be provided;
6. Technology will be used to increase access to care and information;
7. There will be a focus on workforce transformation to increase awareness about mental health and the contributions persons in recovery can make within Connecticut's workforce.[2]

In Connecticut, close to 109,000 adults and 39,000 children live with a serious mental health condition.

[1] National Alliance on Mental Illness, NAMI State Advocacy, 2010.

[2] Connecticut Department of Mental Health and Addiction Services, *Mental Health Needs Assessment and Resource Inventory,* June, 2007.

Efforts to accomplish these goals are included in the state's Comprehensive Mental Health Plan which has focused on:

a. educating the community about the importance of mental health to overall wellbeing;
b. seeking the input of individuals in recovery when designing new programs;
c. developing a data driven decision making process; and
d. strengthening the mental health care workforce.

The plan reflects the strategies identified by the State to achieve its primary aim, "the promotion of resilience, recovery and inclusion in community life".[3] Efforts are also supported by the Network of Care for Behavioral Health, an online resource network that is meant to assist residents quickly find the resources they need.

MENTAL HEALTH RESOURCES

INFANT AND EARLY CHILDHOOD

The Connecticut Association for Infant Mental Health (CT-AIMH) asserts that optimal mental and emotional health begins very early in life with healthy relationship experiences. Research shows that the absence of healthy attachments and relationships at the very beginning of life compromises an individual's mental health. According to CT-AIMH, infants and young children learn in the context of relationships and these relationships are critical:

- *During the first three years of life, a young child's brain grows faster than at any future time. Secure, responsive, and warm relationships with caregivers influence the formation of neural structures in the brain that influence behavior over the life span.*
- *Research has demonstrated that brain development is altered when there is chronic stress caused by poverty, family violence, substance abuse, child neglect and abuse, or incarceration.*
- *When there are secure and warm relationships with parents/caregivers, the developing brain is buffered from significant harm in the event of stressful experiences.*

Infant and Early Childhood Resources

- *Child Development Infoline* – provides information and access to services available for children with developmental delays, disabilities or behavior concerns.
- *Birth to Three* – provides services to children, birth to 36 months, with significant development delays or disabilities.
- *Head Start* – is a comprehensive child development program that serves children from birth to age 5 and their families.
- *Help Me Grow* – assists families with children from birth through age 8 who need information to help their child's development.
- *Child First* – provides home-based, parent-child therapeutic services for high risk families.
- *Early Childhood Special Education* – provides education to preschool and kindergarten age children with significant developmental delays.
- *Kids Mental Health Info.com* – provides information and access to mental health resources for children and youth.
- *CT Association for Infant Mental Health* – offers professional development to those working with infants and young children and their families.
- *Child Health and Development Institute for Connecticut* – works to improve the quality of care for children and is focused on both physical and behavioral health.

[3] Connecticut Department of Mental Health and Addiction Services, *Comprehensive Mental Health Plan update*, September, 2009.

YOUTH

A study by the National Institutes of Health found that about 8% of U.S. teens meet current criteria for having a serious emotional disturbance.[4] The study was based on a face to face survey of 10,000 teens ages 13 to 18. Parents and caregivers also completed a corroborating survey after the teens were interviewed. Anxiety disorders were found to be the most common conditions in adolescents; girls were more likely to have a mood, anxiety or eating disorder, while boys were more likely to have a behavior disorder like ADHD or substance use disorder. The study's findings suggest that most psychiatric disorders first manifest in childhood or adolescence and can persist during a person's life.

Youth Resources

- *EMPS – Crisis Intervention Services* – a mobile intervention service for children and youth experiencing a behavioral or mental health crisis. A service of the Connecticut Department of Children and Families, available by dialing 2-1-1.
- *Children and Youth with Special Health Care Needs* – for children and youth with chronic physical, developmental, behavioral, or emotional conditions.
- *National Institute of Mental Health, Child and Adolescent Mental Health* – mental health resources for families.
- *Reach Out.com* – information and support to help teens and young adults with mental health issues.
- *NAMI Programs for Youth and Young Adults* – programs focused on youth and young adults living with mental illness.
- *FAVOR, Inc.* – an advocacy organization serving families, children and youth dealing with a broad spectrum of behavioral and mental health needs.

ADULTS

Among the millions of Americans identified as having any form of mental illness, 38% receive mental health services while 60% of those with a serious mental illness receive care. The percent of adults with a mental illness was higher among those who are unemployed (28.0%) than for those who are employed full-time(16.1%). Adults living below 100% of the federal poverty level had the highest incidence of mental illness (29.6%).

[4] National Institutes of Mental Health, *Survey Finds More Evidence That Mental Disorders Often Begin in Youth, Science Update,* June 18, 2012. http://www.nimh.nih.gov/science-news/2012/survey-finds-more-evidence-that-mental-disorders-often-begin-in-youth.shtml.

Adult Resources

- *Connecticut Network of Care for Behavioral Health* – an online information portal that provides access to behavioral health care information.
- *Department of Mental Health and Addiction Services* – promotes and administers recovery-oriented services in the areas of mental health treatment and substance abuse prevention and treatment throughout Connecticut.
- *National Institute of Mental Health* – provides comprehensive mental health information and resources.
- *National Alliance on Mental Illness* – national advocacy and awareness agency for mental health.
- *Substance Abuse and Mental Health Services Administration (SAMHSA)* – national advocacy agency aimed at reducing the impact of substance abuse and mental illness.
- *Diagnostic and Statistical Manual of Mental Disorders (DSM-5)* – provides a comprehensive listing of diagnostic criteria.

MILITARY/VETERANS

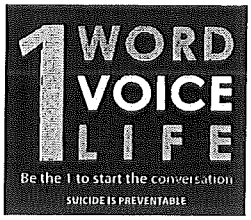
The U.S. Military has begun to expand mental health resources for active military and veterans. This is in the wake of prolonged periods of combat in Iraq and the continuing war in Afghanistan. In Connecticut, the Military Support Program (MSP) was established to address the behavioral health needs of National Guard and Reserve affected by deployment in Iraq and Afghanistan. The program has since been expanded to include veterans of active duty service and their families. MSP provides an array of behavioral health services with the central feature being a panel of over 425 licensed clinicians who provide free, outpatient counseling services to veterans, National Guard and Reserve members and their families.

Military/Veterans Resources

- *Military Support Program* – Support for the Connecticut National Guard and Reserve.
- *Operation Military Kids* – Support for children of military parents.
- *Military Pathways* – Mental health screening and information.
- *U.S. Department of Veterans Affairs* – Mental health resources.
- *Veterans Crisis Line* – Suicide prevention hotline, dial 2-1-1.

SUICIDE

In 2011, 8.5 million adults across the country had serious thoughts of suicide while 1.1 million attempted suicide. The number of suicides in Connecticut (371) reached a 20-year high in that same year. United Way 2-1-1 handled over 6,000 suicide-related calls in 2012, 4,000 from Connecticut residents. 2-1-1 is available 24 hours a day to handle crisis and suicide calls. 2-1-1 Call Specialists are certified by the American Association of Suicidology. Dial 2-1-1 and press "1" for crisis.



Suicide Resources

- *National Suicide Prevention Hotline* – provides free and confidential emotional support to people in suicidal crisis or emotional distress 24 hours a day, 7 days a week.
- *EMPS – Crisis Intervention Service* – a mobile intervention service for children and youth experiencing a behavioral or mental health crisis. Available by dialing 2-1-1.
- *2-1-1* – Connecticut's 24 hour crisis line. Dial 2-1-1 and press "1" for crisis and you will be connected to a trained crisis call specialist. 2-1-1 also has a listing of suicide survivor support groups.
- *Prevent Suicide CT* – a collaborative focused on prevention, intervention and health and wellness promotion.
- *Connecticut Youth Suicide Advisory Board* – focused on public awareness or youth suicide, prevention and policy recommendations.

UNITED WAY 2-1-1 RESOURCES

In 2012, United Way 2-1-1 received over 41,000 calls for mental-health related resources. Many of these calls were seeking access to psychiatric mobile response teams, helplines and suicide prevention hotlines.

- **EMPS – Crisis Intervention Service** - mobile intervention for children and adolescents experiencing a behavioral or mental health crisis that is provided by DCF and accessed by calling 2-1-1. The program comprises a team of nearly 150 trained mental health professionals across the state that can respond immediately by phone or face-to-face within 45 minutes when a child is experiencing an emotional or behavioral crisis. 2-1-1 received over 14,300 EMPS calls in 2012.

- **Child Development Infoline** – provides information and access to services available for children with developmental delays, disabilities or behavior concerns, including: Birth to Three, for children birth to 36 months with significant developmental delays or disabilities; Help Me Grow, for families with children birth through age 8, who need information or services to support their child's development; Children and Youth with Special Health Care Needs, for children and youth birth to age 21 with chronic physical, developmental, behavioral, or emotional conditions; and Early Childhood Special Education, for preschool and kindergarten age children with significant developmental delays.

- **2-1-1 eLibrary** – contains brief papers on various topics that include resource links. Click on these links to read about bullying, Child Guidance Clinics, Mental Health Information, Suicide and Cutting: Self-Injury.

- **The 2-1-1 Database** – contains mental health resources. Visit www.211ct.org, enter your zip code and use the following terms to search for resources:
  - Anger Management
  - Counseling, Outpatient
  - Suicide Prevention Hotlines
  - Perinatal Depression/Postpartum Depression
  - Psychiatric Services, Inpatient
  - Psychiatric Services, Outpatient
  - Residential Programs: Adults with Mental Illness
  - Residential Programs: Children with Mental Illness
  - Support Groups

The mission of the United Way of Connecticut is to help meet the needs of Connecticut and its residents by providing information, education and connection to services. United Way of Connecticut provides services with support from the State of Connecticut and Connecticut United Ways.

To access other issues of the 2-1-1 Barometer online go to: www.ctunitedway.org/barometer.asp