

Feb. 1, 2013

Dear Rep. Ritter and legislators,

I will never forget the anguished mother I, working as a freelance journalist for The New York Times, interviewed for an article on mental health services for children in Connecticut. She talked about calling dozens of mental health providers' offices in an arduous search to secure an appointment for her adolescent son. Most told her they had no availability and ended the conversation there. One indicated they could offer an appointment: more than a month in the future. She said her reply was: My son is suicidal. Do you think I can tell him to wait?

I know the legislature has been inundated with stories such as these as it seeks solutions to the current crisis in mental health services in Connecticut. I, too, have heard many stories as well as experienced many issues - as a journalist writing about mental health issues, as an individual who has dealt with depression first-hand, as a family who has witnessed loved ones struggle to find the services they need and as Board of Education member approached by parents frantic for appropriate help for their children.

Because you already have heard so much and because, in my mind, there are so many problems with the state's mental health system, I will strive to be as concise as possible and choose a few of what I consider the most egregious problems.

1. A shortage of pediatric/adolescent mental health professionals - There simply are not enough professionals in these fields. Children's and teens' mental health issues are unique to their age group. And mental health issues should not be diagnosed and treated, as too often happens, by pediatricians who specialize in physical ailments.
2. Inadequate research into mental health issues - many who have suffered mental health issues, or have family members who have, will recount stories of getting a huge variety and spectrum of diagnoses and suggested treatments. Far too little financial resources have been dedicated for research that can lead to more appropriate and precise diagnosis and treatment.
3. Stuck in the middle syndrome - Mental health professionals say that too often only the very rich or the very poor have hope of getting any mental health treatment at all. The poor may be able to access government-subsidized programs and the wealthy can pay out of pocket. Many psychologists and psychiatrists refuse any type of insurance and the few who accept insurance often have full patient loads.
4. Hospital emergency rooms as mental health treatment centers - Because of the difficulties in securing proper outpatient treatment, many children and adults with mental health problems end up being warehoused in hospital emergency rooms. Instead of focusing on preventative care, we allow

patients to get to crisis levels again and again, at which point an emergency room must accept them. This is wrong on so many levels.

5. Prisons as repositories of the mentally ill – the vast majority of prisoners – both juvenile and adult – suffer some type of mental health issue. These institutions are not designed or equipped to appropriately treat the mentally ill, and simply provide an even more inadequate and heartless warehouse for them than does the hospital emergency room.
6. Compassion – More it is needed throughout the system – from top to bottom and in every related profession (education, physical health care, etc.) Individuals and families dealing with mental health issues are in crisis, feeling isolated, frightened, stressed and confused. They need compassion and empathy and often are faced with a cold, bleak system that is low on all these qualities.

I know legislators face a huge challenge in seeking meaningful solutions to the state's mental health care crisis. I can think of few more important tasks to tackle, however. Please take the desperately needed steps to improve the lives of so many who struggle in our state.

Sincerely,

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