

Time to reform the children's mental health care system

By Rep. Mary Grant and Steve Schaffer

Recently in Salem, families of children with mental illness, doctors and nurses, educators and social workers, child advocates, legislators and other community members gathered together to share their stories and experiences with the state of children's mental health care in Massachusetts. At the forum — which was sponsored by more than 30 agencies — parents expressed their frustration and sometimes desperation, with a "system" that too often has failed their children. While Massachusetts has been a national leader in advancing health care for children, those advances have not reached children with mental illness.

Children's mental health has long been an afterthought of the health care system. Even if families are educated in the intricacies of mental health coverage, they are currently at the mercy of a fragmented system of care. Anguished parents are faced with long waits for care, and a seemingly impenetrable thicket of conflicting coverage and services. None of us would tolerate this in our personal health care access.

An estimated 100,000 children in Massachusetts do not receive the mental health care they need. Untreated mental health problems cause enormous individual suffering for families and noticeable impact on our communities. That is why "An Act Relative to Children's Mental Health" currently under consideration by the Massachusetts legislature, is so important. This legislation (which is based on a report by Children's Hospital Boston and the Massachusetts Society for the Prevention of Cruelty to Children, endorsed by more than 90 organizations and supported by more than 105 state legislators) targets four main areas where change needs to occur.

First, it helps to ensure the early identification of children with mental health needs by supporting behavioral health screenings by pediatricians. The bill also provides support to early education settings and schools, to identify and support children with mental health needs.

— The earlier mental health needs are identified, the more effective the outcomes of treatment. —

Second, the legislation addresses the serious problem of "stuck kids," who remain in acute care facilities not because of their specific mental health needs but because of conflicting state agency mandates or inadequate community-based settings. The Patrick administration has succeeded in reducing the number of "stuck" kids, and this bill will further that progress.

Third, the bill also mandates insurance coverage for time by mental health professionals working with a child's parents, teachers, and primary care doctors. Coordinated care is a requirement for quality care.

Finally, the bill begins to untangle the web of state agencies with overlapping responsibilities for children's mental health care by designating the Department of Mental Health as the lead agency in the design and delivery of mental health services for children, and creates mechanisms for coordinating their care.

Mental health problems cross all cultural and economic boundaries. National data indicates that 20 percent of children suffer from a diagnosable mental disorder each year. The vast majority of these children do not receive the care they need. We must make sure that no child or parent has to go it alone, and that the system is there for them when they, or we, need it.

Mary Grant is the state representative from Beverly and a former adolescent psychiatric nurse. Steve Schaffer is executive director of Children's Friend and Family Services in Salem.