



**Testimony for Health and Human Resources Subcommittee of the Senate Finance Committee  
January 13, 2014  
Margaret Nimmo Crowe, Executive Director  
Voices for Virginia's Children**

Thank you Mr. Chairman and Subcommittee members. I appreciate the opportunity to provide information to you today.

For those of you on the Governor's Task Force on Mental Health Services and Crisis Response, you heard me provide public comment at last week's meeting about the importance of greater participation from parents and caregivers of children with mental health disorders. Today, I'm giving you the opportunity to do just that by sharing my time with parent advocate Cristy Gallagher. I plan to lay the groundwork briefly for what the Governor's budget proposes for children, and then let her share some of her experience and explain what parents feel is needed.

First and foremost, I think it important to note that none of us speaking today is in competition with the others. The child and adult mental health systems are part of a continuum of care for individuals who have mental health needs, throughout the lifespan. Historically, parts of the continuum have gotten more attention than others, which is why in 2009 Voices for Virginia's Children partnered with NAMI Virginia, VACSB and more than 60 other organizations to create the Campaign for Children's Mental Health: to bring particular attention to the needs of children.

I am here today to bring that same message. While Gov. McDonnell's introduced budget includes more than \$38 million in new funding for the mental health system, it is heavily weighted toward the adult end of the continuum. This funding is needed for adults, and you will hear more about the particulars of that from my colleagues. But we are far from having a comprehensive array of services for children, and this proposed budget does nothing to expand that array for children except older teens.

You will recall that you asked the Department of Behavioral Health and Developmental Services to analyze the children's mental health system and give you a final report in the fall of 2011 (*Item 304.M. – Final Report: A Plan for Community-Based Children's Behavioral Health Services in Virginia*). That report identified a "foundational set of services that every community should have" for children: crisis response services, child psychiatry, case management, and intensive in-home services. It found huge gaps in the availability of three of the four services, and inadequate capacity even for communities that had the services.

We have been working together methodically the last two sessions to help fill in the gaps, specifically with funding for regional projects that provide community-based crisis response

services for children and greater access to child psychiatrists. The three projects initially funded are already providing positive outcomes, keeping many kids in their communities and out of the hospital, and the other two regions are in the process of bringing their services online. Cristy will talk more about the outcomes.

It is our request that you stay the course and increase funding so that we can build out a more robust array of crisis services in two sub-regions of the state. Communities would add crisis case management and additional outpatient services to children and their families to ensure stability in their communities during the time surrounding the crisis.

The \$7.5 million over the biennium for older teens and young adults in the introduced budget is also an important priority, and we request that you maintain this funding. Virginia has never had specialized services for this age group, which is a critical time for mental illness: certain illnesses have their onset at this age, and once children turn 18, parents can no longer be in charge of getting their children treatment. Moving from the child mental health system to the adult system, and from the k-12 education system to college or independent living, is also a time when many young people who need ongoing mental health treatment fall through the cracks.

Voices requests that the funding for this age group be used to support evidence-based and evidence-informed services. We do not need to reinvent the wheel; there is an extensive research base for providing services to this population. The TIP program is one such model; TIP stands for Transition to Independence, and it is a model of service delivery to the transition age group that involves intensive case management, among other things (<http://tipstars.org/>). There is also research and training center in Portland, OR funded by SAMHSA that disseminates best practice information around the transition age for youth with mental illnesses: <http://www.pathwaysrtc.pdx.edu/>.

Finally, while we don't often talk about home visiting and Part C early intervention programs in the same presentation as the mental health system, please realize that these programs do, in fact, help prevent mental health problems for children. They are at the prevention end of the continuum. CHIP and Healthy Families are results-oriented interventions in which home visitors work with highly vulnerable families with babies to promote healthy outcomes and prevent abuse and neglect. They result in pregnant women getting prenatal care; can help identify and get treatment for maternal depression; and help parents understand child development and the importance of preventive health care – all of which can mitigate the increased risk of children developing poor mental health. Similarly, the Part C early intervention program provides therapeutic interventions to infants and toddlers with significant developmental delays and disabilities, a group that is also at higher risk for mental health issues.

I would now like for Cristy to talk to you about her experiences with the child mental health system and what she believes is most needed. Thank you.

Contact information: Margaret Nimmo Crowe, Executive Director, Voices for Virginia's Children, 701 East Franklin Street, Suite 807, Richmond, VA 23219. [margaret@vakids.org](mailto:margaret@vakids.org). [www.vakids.org](http://www.vakids.org).