



An Affiliate of the National Mental Health Association

Mental Health Association in Texas

8401 Shoal Creek Boulevard * Austin, Texas 78757 * 512-454-3706 (Office) * 512-454-3725 (Fax)

Jerry R. Grammer, Ph. D., Chair * Lynn Lasky, President & CEO * Mary Ellen Nudd, Vice President

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Children and Families Suffer Because of Unmet Need for Mental Health Services

- **419,070** children in Texas suffered serious mental illness, which impaired their ability to function at school, at home, and in the community in 2002 (7%).¹
- **151,464** children in Texas were considered 'At Risk' (having a significant impairment due to a mental disorder) and eligible to be served by the Texas Department of Mental Health and Mental Retardation in 2002.
- **39,598** children who were 'At Risk' and eligible were served in 2002 (26%).²
- **111,000** Texas children who are in need of and eligible for assistance are still waiting for mental health care.

	Children At Risk AND Eligible	Children Served	Percent Children Served
Bexar	10,147	2,023	20%
Dallas	16,129	4,671	29%
El Paso	5,577	1,322	24%
Harris	25,388	6,334	25%
Randall	678	140	21%
Tarrant	10,507	1,185	11%
Travis	5,080	1,173	23%
TOTAL	151,464	39,598	26%

Source: TDMHMR Dallas County includes the NorthSTAR program.

Lack of adequate coverage for mental health treatment in private insurance shifts the burden of care to public systems and taxpayers. If proper treatment solutions are available to families, children who experience severe emotional, behavioral and mental disturbances have an excellent chance to recover.

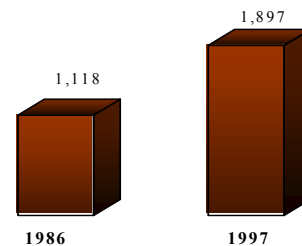
The problem is big and getting bigger. Youth needing mental health care is increasing.

Access to Care Varies by County

While 9 counties on Texas served more than 90 percent of children in the county who are 'At Risk' and eligible for MHMR services in 2002, 33 counties in Texas served fewer than 10 percent of children in the county.

Borden	Collingsworth	Crockett	Culberson	Falls
Fisher	Franklin	Freestone	Glasscock	Goliad
Hansford	Hemphill	Hill	Houston	Hudspeth
Irion	Kenedy	Kent	King	La Salle
Martin	McMullen	Ochiltree	Parmer	Rains
Refugio	Roberts	San Augustine	Sterling	Terrell
Van Zandt	Wheeler	Willacy		

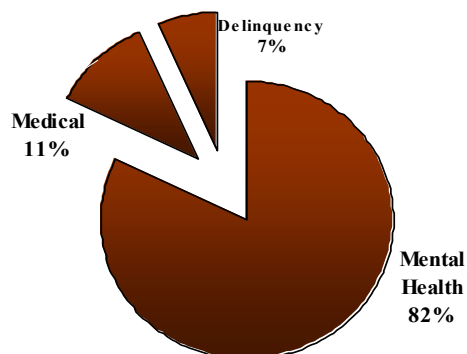
Cases of Mental Health Service Use per 100,000 US Youth Population



Source: Update. Rutgers University, US Dept. Health and Human Services, Annie E. Casey Foundation

Parents are forced to relinquish custody of their children in order to mental health care.

'Last Resort' Child Relinquishment ³



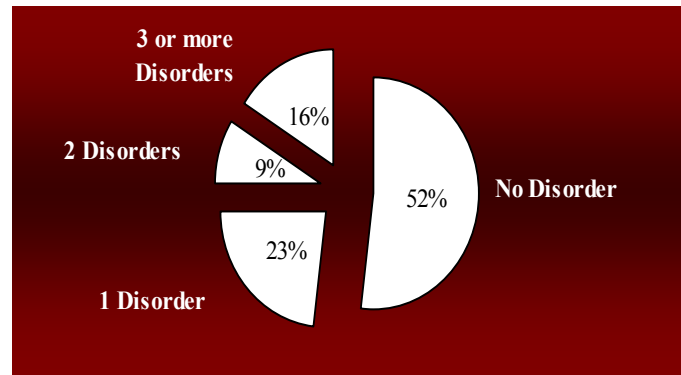
The Texas Department of Protective and Regulatory Services (TDPRS) has documented that 82% of the children in custody of that agency under parental relinquishment criteria are there because parents had no other way to access mental health services. There were **244 children relinquished** in this "last resort for mental health care" category in 2002. **Some of these families have private insurance that does not pay for the mental health care their child needs!**

With an average cost of \$109.38 per day, these 244 children will cost the State **\$9.7 million for a year of care as compared to \$6.3 million for community-based services.**

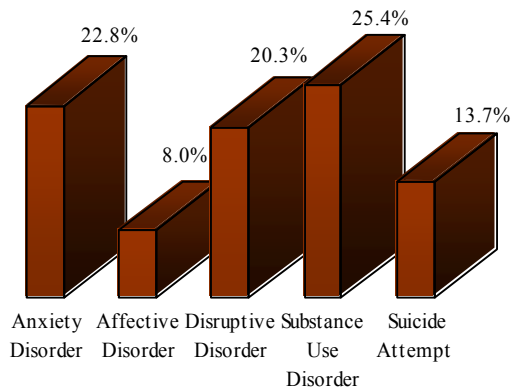
Children who do not get adequate mental health care end up being served in our juvenile justice system, in homeless shelters, and emergency rooms.

Mental Health Disorders Among Youth in Juvenile Justice System

- **2,585** youth in the Texas Youth Commission and (50%) and nearly half referred to the Juvenile Probation Commission (48%) had a mental illness.⁴
- **12,737** youth on probation or paroled had mental illness in 2001. Only **3,976** (31%) were receiving mental health care either through MHMR or the justice system.⁵



Mental Disorders Among Juveniles Referred for Probation in 2002



*Untreated mental health problems put young people on a trajectory toward jail rather than college. Approximately **HALF** of youth in the Juvenile Justice System have at least one mental disorder. (Juvenile Probation Commission, 2003; and Criminal Justice Policy Council, 2003)*

Without proper intervention, children's mental, emotional and behavioral problems grow worse and often lead to far worse problems later on, including development of full blown mental illnesses and/or involvement in the juvenile justice system.

- Texas should be increasing funding for mental health in these times—not reducing it. **Our state dollars should go into community based mental health care** to ensure that the cost of care is not shifted to more expensive agencies that are also seeing cuts or to communities. The proposed budget cuts could force communities to compensate by raising already onerous property taxes.
- Appropriate **NEW** funds for a Medicaid Home and Community-Based Services (HCS) waiver to provide community services to children who require services at a psychiatric inpatient level of care.
- Access to new generation medications should be available to all who need them, regardless of income.
- Texas should pass insurance **parity legislation** so that organic brain dysfunctions are covered the same as any other health problem.
- Children and youth with mental illness who come into contact with the juvenile justice system should be diverted to appropriate community mental health facilities for treatment rather than filling already overcrowded jails and prisons.
- Children need access to wraparound services in a system of care that is targeted to the unique needs of an individual family including new medications, mentoring, and respite for the caregivers.
- Insurance companies must discontinue discrimination against mental disorders in children.

¹ U.S. Department of Health and Human Services. Mental Health: A Report of the Surgeon General, 1999; President's New Freedom Commission on Mental Health, 2002. This was calculated using 7% (as a midpoint of the 5-9% quoted in the report) of current population estimates.

² Texas Department Mental Health and Mental Retardation, data provided to the Mental Health Association in February 2003.

³ Fact Sheet from Texas Department of Protective and Regulatory Services; 2003 (based on reading of 1395 cases). Cost of community services based on average cost of Children's Partnership services (\$2,600 per month with average length of stay of 10 months).

⁴ Overview of the Enhanced Mental Health Services Initiative. Criminal Justice Policy Council, May 2002 p. 10; A study of 1300 juveniles randomly selected from the youth referred for probation during the 6 month time period between Jan. 1 and Aug 28 2002 in eight counties (Bexar, Cameron, Dallas, El Paso, Harris, Hidalgo, Tarrant, and Travis. These counties comprise over half of the juvenile population in Texas. Mental Health and Juvenile Justice in Texas. Juvenile Probation Commission Feb. 2003.

⁵ Overview of the Enhanced Mental Health Services Initiative. Criminal Justice Policy Council, May 2002, p. 6