

Testimony
Long-Term Care Committee
Study for the Feasibility & Desirability of Establishing a Transition
to Independence Program for Young Adults with Mental Illness
Senator Dever, Chairman
November 7, 2007

Senator Dever and members of the Long-Term Care Committee, I am Lauren Sauer, the Adult Mental Health Services Administrator, with the Mental Health & Substance Abuse Services Division, Department of Human Services.

Transition-aged youth in the public mental health, foster care and other systems of care have been a recent national topic of concern. Young adults with mental illness transitioning from the children's public mental health system to the adult public mental health system experience unique barriers and challenges.

During the past year, the Children's Mental Health Administrator and I have conducted statewide stakeholder meetings to discuss the strengths, needs, and gaps in transition services for these young adults. Common barriers and challenges have emerged to include: housing, employment opportunities, resources, complexity of diagnoses, and independence in decision-making.

I would like to provide an overview of Attachments A, B, and C, which include the flow chart for the Public Mental Health System-Human Service Centers Transition Aged Youth (**A**), Adults in the Community in need of Extended Care Services (**B**) and the Comprehensive Independent Living

Program (C). The Definitions for the Public Mental Health System are found in **Attachment D**.

As stated earlier, barriers and challenges for transition-aged youth is of a national concern. Included in your packet are supplemental articles on what other states are doing to address transition-aged youth. I will provide a brief synopsis of those articles.

Carla Kessel, the Children's Mental Health Administrator, is a member of the Technical Assistance Partnership for Child and Family Mental Health-Transition Learning Community. She will participate in a network and series of calls with other states to discuss priority topics such as, youth development and advocacy, housing, insurance, gaps in service delivery, juvenile justice and child welfare.

The state of Missouri focuses on providing a variety of high-quality transitional services to youth with co-occurring mental health disorders and developmental disabilities and their families. Four critical components to help these youth transition from child to adult services and from school to work include: 1) youth and family voices, 2) specialized care management, 3) natural supports within the community, and 4) interagency partnerships.

The Partnerships for Youth Transition Initiative (PYT) article provides statistics on young adults with serious mental health needs transitioning to adulthood and provides principles of developmentally appropriate practice: Transition to Independence Process (TIP) Model. The seven key principles are engage youth, tailor services, respect youth independence, ensure a safety net of support, strengthen competencies, and help

maintain focus on outcomes, and involve young people, parents and other community partners.

The Information Brief-Models of Collaboration and Cost Sharing in Transition Programming outlines the effectiveness of collaboration and “forming partnerships that seek to coordinate agendas and collaborate with as many stakeholder groups as possible. To be successful and sustaining, these collaborations must be able to work together, share resources and find creative and flexible ways to fund programs and share the financial burden.” The Information Brief also describes various states blended and braided funding initiatives for transitional services.

The article Improving Outcomes for Youth in Transition from Foster Care provides information in regard to national statistics, programming efforts and that the “needs of older youth were recognized in the Foster Care Independence Act of 1999, and now long overdue efforts are underway at federal and state levels to address the unique needs of older youth in transition.” These efforts include: best practice models, develop new assessments and outreach services, collaboration with community partners to build a supportive network, and training professionals that work with these youth.

The state of California’s legislative body has voted for a bill that “requires county child welfare agencies to screen all foster youth age 16 and 17 for a mental or physical disability and assist them in applying for Supplemental Security Income, which provides a monthly cash benefit for the disabled. The goal is to have SSI in place for eligible youth once they age out of the foster care system. The bill allows youth with pending SSI application to remain in foster care past their 18th birthdays until their

applications are processed." "The bill now goes to the Governor for his signature or veto."

The Department of Human Services is available to provide any additional information to this committee as you proceed with this study, to include information on foster care youth, special education transitioning, juvenile justice, options for establishing a transition to independence program, and the public mental health care delivery system; to include programs and services provided to young adults with mental illness.

If you have any questions, I would be happy to answer them at this time.