

Mental Health Advocacy for Adolescents in the Child Welfare System

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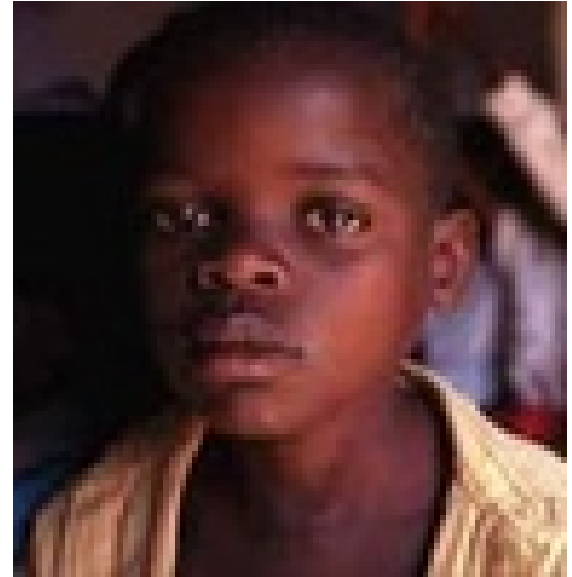
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Client Stories



Prevalence of Mental Health Issues for Children Entering State Care

Between 50%-75% of children entering foster care exhibit behavior or social competency problems that warrant mental health care.

J. Landsverk, B. Burns, L.F. Stambaugh, & J.A.R. Reutz, *Mental Health Care for Children and Adolescents in Foster Care: Review of Research Literature* (Feb. 2006).

And the system deepens and expands those problems...

“Volatile placement histories contribute negatively to both internalizing and externalizing behavior of foster children, and ... children who experience numerous placement changes may be at particularly high risk for these deleterious results.”

R. Newton, A. Litrownik, J. Landsverk, *Children and Youth in Foster Care: Disentangling the Relationship Between Problem Behaviors and Number of Placements*, *Child Abuse and Neglect*, Vol. 24 No.10 pp.1363-1374 (2000).

Summary of Causes

- Family of Origin:
 - Impact of parental abuse and neglect
 - Genetic component
 - Physiological component
- CW's Iatrogenic Impact:
 - Effects of removal
 - Effects of multiple placements
 - Effects of unsafe placements

R. Newton, A. Litrownik, J. Landsverk, *Children and Youth in Foster Care: Disentangling the Relationship Between Problem Behaviors and Number of Placements*, *Child Abuse and Neglect*, Vol. 24 No.10 pp.1363-1374 (2000).

Common Mental Health Issues for Youth in Care

- Post-Traumatic Stress Disorder
- Disruptive Behaviors:
 - Conduct Disorder/Oppositional Defiant Disorder
 - ADHD
- Depression
- Substance Abuse

Typical Treatment Options



Foster Youth Frequently Utilized Services

- Great majority receive outpatient treatment in the form of mental health counseling
- A few are hospitalized
- Many are placed in residential treatment centers or group homes

. Landsverk, B. Burns, L.F. Stambaugh, & J.A.R. Reutz, *Mental Health Care for Children and Adolescents in Foster Care: Review of Research Literature* (Feb. 2006).

Rates of Prescribed Drug Treatment

- Foster Youth vs. Poor Youth vs. Disabled Youth:
 - **Antidepressants**: Nearly three times as likely to be prescribed for FY than for SSI youth and thirty times as likely to be prescribed for FY than for TANF youth
 - **Stimulants**: Nearly twice as likely to be prescribed for FY than SSI youth and eighteen times as likely for TANF youth.

S. dosReis, J. Zito, D. Safer, K. Soeken, *Mental Health Services for Youth in Foster Care and Disabled Youth*, American JI. of Public Health Vol. 91, No. 7 p. 1094 (July 2001).

Complicating Factors in Securing Adequate Treatment

- Inconsistency in caregivers/advocates
- Inconsistency in treatment providers
- Treatment funding streams separate from child welfare funding streams
- Unavailability of high quality, appropriate treatment

The Demographics of Mental Health Care in CW

- Child welfare populations are disproportionately drawn from families of color.
- Within the child welfare population, however, children of color receive fewer mental health services than their white counterparts.
- To the extent that children of color receive mental health services, it tends to be in residential treatment settings.

What helps?

- Interventions that are behavioral or cognitive-behavioral and that address symptoms, behavior and functioning.
- Examples:
 - Trauma-Focused Cognitive-Behavioral Therapy
 - Parent-child Interactive Therapy
 - Interventions directed toward the caregiver and toward intensive wrap-around services in the home (Multisystemic Therapy and Multidimensional Treatment Foster Care)

What Hurts?

- Individual therapy can be ineffective or even deleterious
- Inpatient treatment can have iatrogenic effects, especially when the goal is to target self-harming or anti-social behaviors in a peer group setting.
- Effectiveness of medications has not been widely tested for children and youth; risk of harm heightened in this population by the lack of continuity in caregivers and treatment providers.

Basic Advocacy

- Pay attention to proposed orders that address mental health and propose your own informed orders.
- Secure client consent and ask for assessments and records regarding medications.
- Ask questions about available mental health services.
- Listen to your client!
- Know your role and limitations.

Advanced Advocacy

- Educate through experts
- Educate through the research
- Be aware of your state's age of consent for mental health treatment
- Be aware of federal requirements surrounding EPSDT to access assessments and treatment
- Make the constitutional substantive due process argument

Mental Health Mindfulness

- Resist and work to prevent placement change
- Support attachments with family
- Promote normalcy
- Monitor medications and discuss them with your client
- When your client has a trusted mental health professional, secure consent to work with him/her in a therapeutic way.

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