

SAMHSA's Child, Youth, and Family Serving Programs: A National Perspective on Youth Mental Health

Michigan Health Policy Forum

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Substance Abuse and Mental Health Services Administration

October 3, 2022



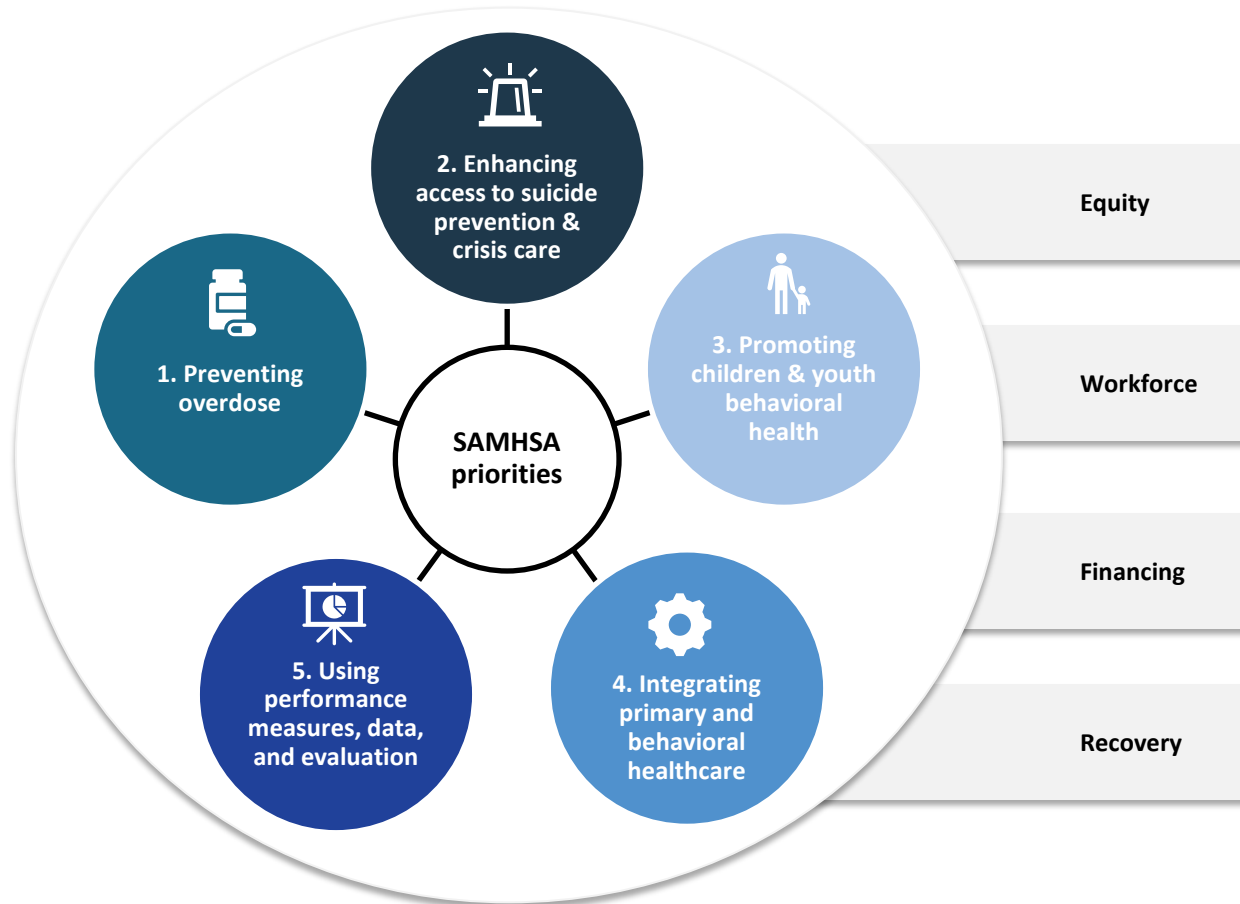
SAMHSA
Substance Abuse and Mental Health
Services Administration

President's Strategy to Address Our National Mental Health Crisis

- **Strengthen System Capacity**
 - Invest in proven programs that bring providers into behavioral health
 - Pilot new approaches to train a diverse group of paraprofessionals
 - Build a national certification program for peer specialists.
 - Promote the mental well-being of our **frontline health workforce**.
 - Strengthen our crisis care and suicide prevention infrastructure
- **Connect Americans to Care**
 - Expand and strengthen parity.
 - Integrate mental health and substance use treatment into primary care settings
 - Expand access to tele- and virtual mental health care options
 - Expand access to mental health support in **schools and colleges and universities**
 - Embed and co-locate mental health and substance use providers into community-based settings
- **Support Americans by Creating Healthy Environments**
 - [Supporting Child and Student Social, Emotional, Behavioral, and Mental health Needs](https://www.whitehouse.gov/briefing-room/statements-releases/2022/03/01/fact-sheet-president-biden-to-announce-strategy-to-address-our-national-mental-health-crisis-as-part-of-unity-agenda-in-his-first-state-of-the-union/)
 - Invest in research on social media's mental harms
 - Expand **early childhood and school-based intervention** services and supports.
 - Increase mental health resources for justice-involved populations
 - **Train** social and human services professionals in basic mental health literacy

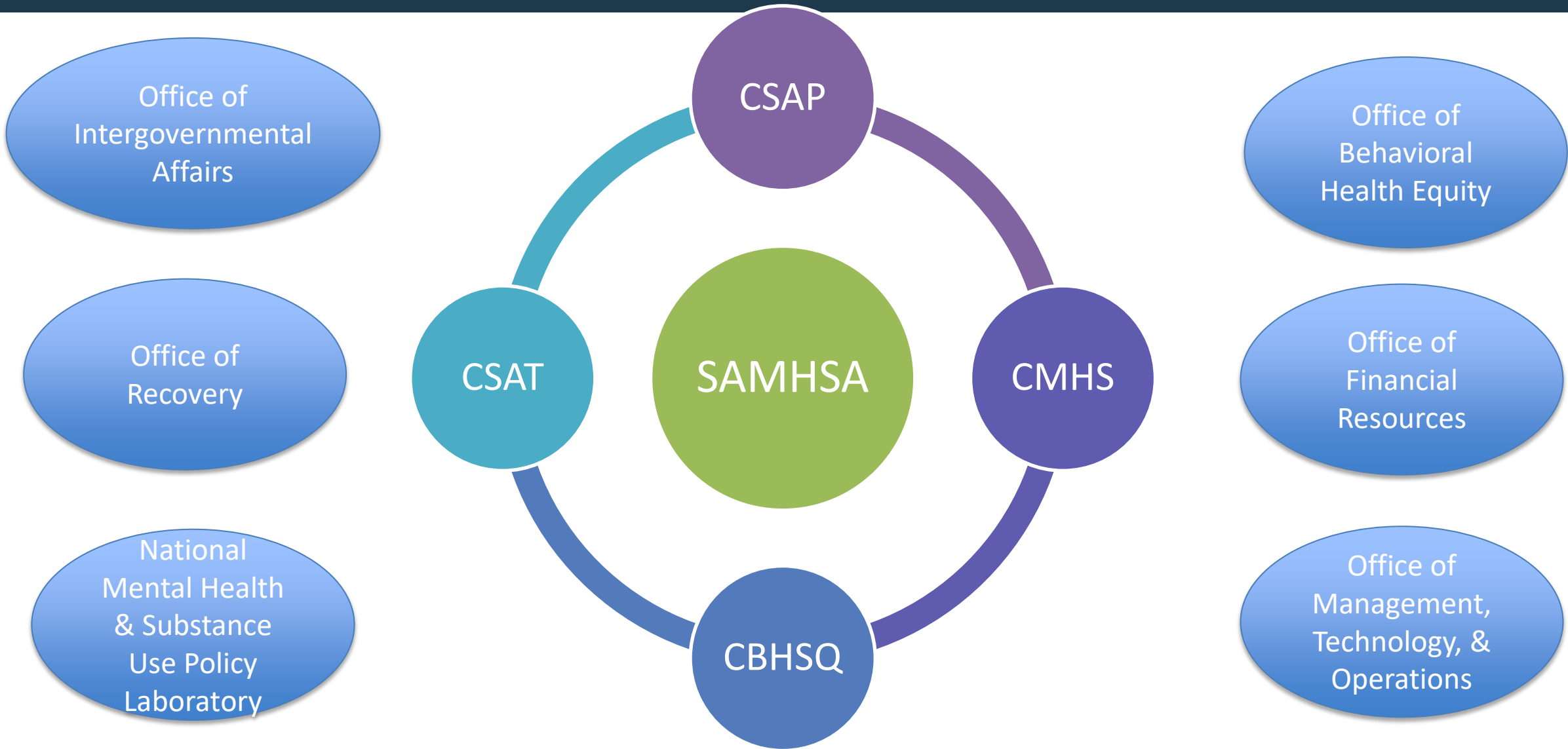


SAMHSA Priorities and Cross-Cutting Principles



Miriam Delphin-Rittmon, Ph.D.
Assistant Secretary for Mental
Health and Substance Use

SAMHSA Centers and



***Right Child,
Right Service,
Right Time***



Youth Emotional Well-Being

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graph TD; A[Youth Emotional Well-Being] --> B[Health]; A --> C[Wellness]; A --> D[Wellbeing]; B --> B1[Weight Loss/Gain]; B --> B2[Physical Discomfort]; B --> B3[Chronic Conditions]; C --> C1[Mental Health]; C --> C2[Substance Use]; C --> C3[Family Environment]; D --> D1[SDOH]; D --> D2[Quality of life]; D --> D3[Community Connectedness];
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Health

- Weight Loss/Gain
- Physical Discomfort
- Chronic Conditions

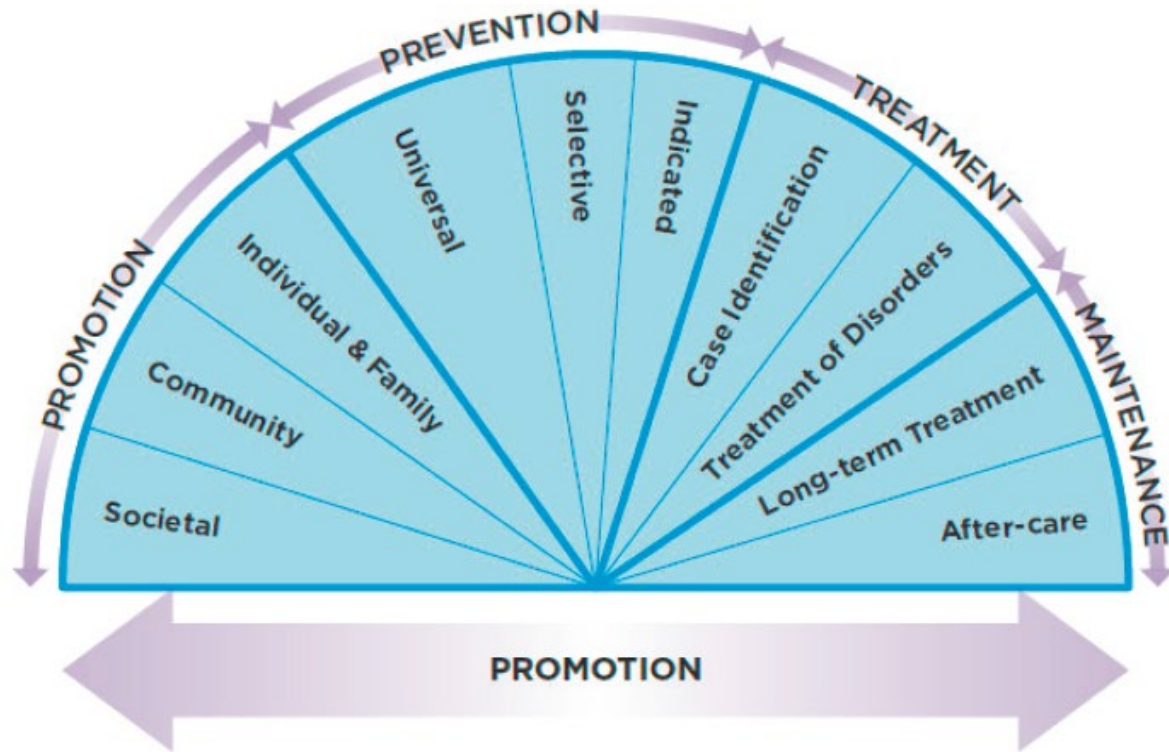
Wellness

- Mental Health
- Substance Use
- Family Environment

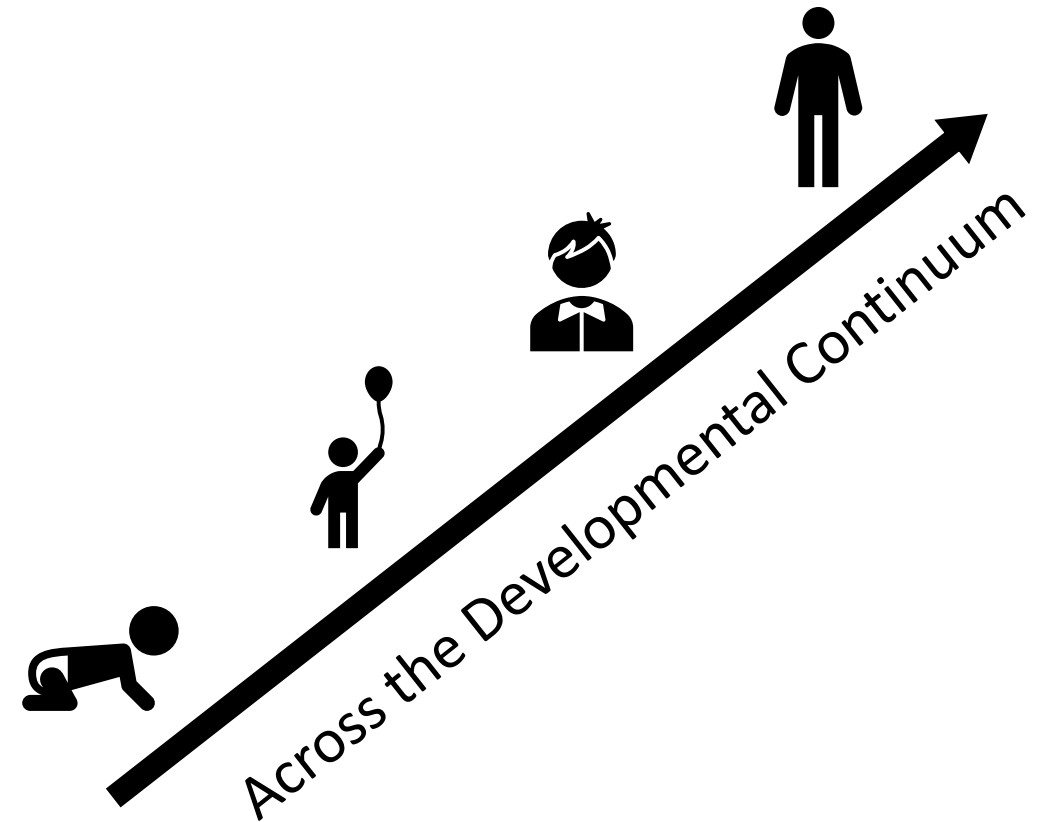
Wellbeing

- SDOH
- Quality of life
- Community Connectedness

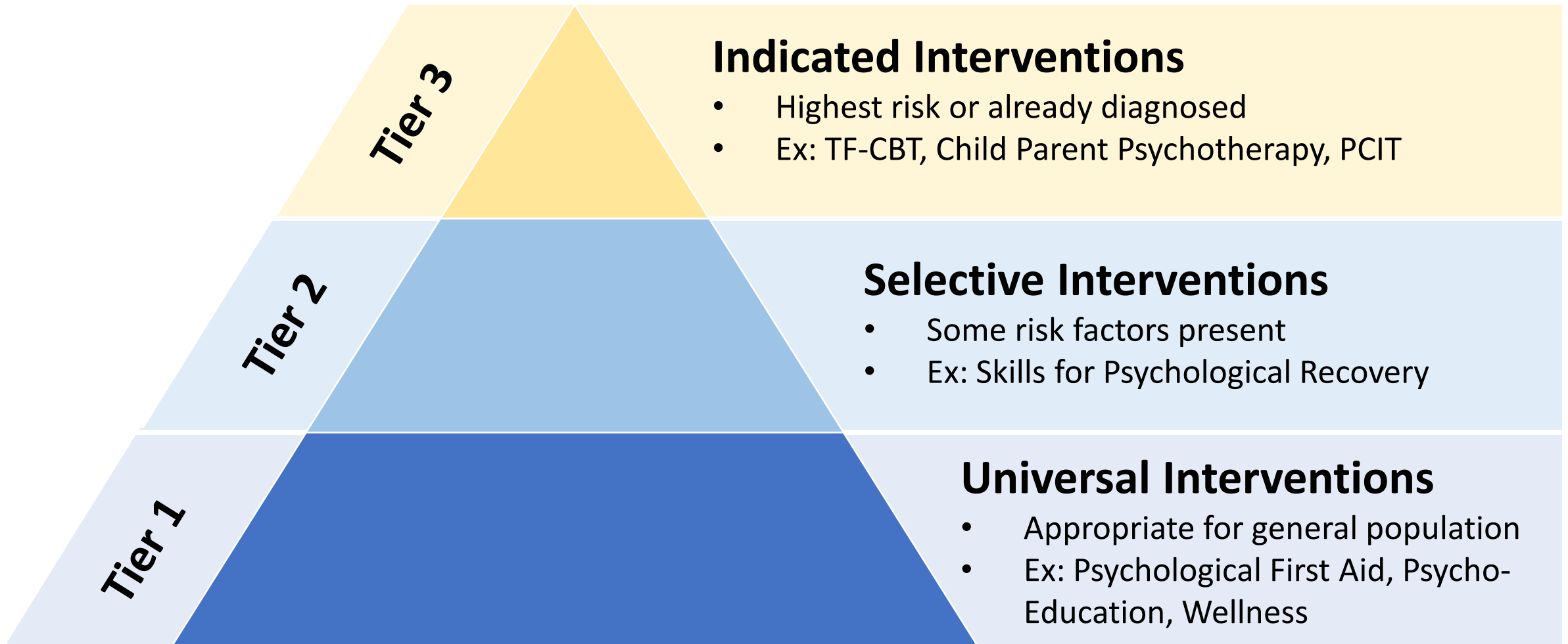
Division of Prevention, Traumatic Stress & Special Programs



Across the Intervention Spectrum



Tiered Approach to Intervention



DPTSSP Programs

Child, Adolescent, and Family Services Branch (CAFB)	Mental Health Promotion Branch (MHPB)	Emergency Mental Health & Traumatic Stress Services Branch (EMHTSSB)
Systems of Care <ul style="list-style-type: none"> Comprehensive Community Mental Health Services for Children with Serious Emotional Disturbances (SED) Program (CMHI) Clinical High Risk for Psychosis (CHRP) Circles of Care (COC) Transition Aged Youth <ul style="list-style-type: none"> Healthy Transitions (HTI) Disaster Response <ul style="list-style-type: none"> Adult, School-Based, & States Family <ul style="list-style-type: none"> Statewide Family Network (SFN) 	Early Childhood <ul style="list-style-type: none"> Infant and Early Childhood Mental Health (IECMH) Linking Actions for Unmet Needs Children's Health (LAUNCH) Mental Health Literacy <ul style="list-style-type: none"> Mental Health Awareness Training (MHAT) School-Based Mental Health <ul style="list-style-type: none"> Project AWARE – State Education Agency (AWARE-SEA) Community-Based Program <ul style="list-style-type: none"> Resiliency in Communities After Stress and Trauma (ReCAST) 	Partnership with FEMA <ul style="list-style-type: none"> Crisis Counseling Assistance and Training Program (CCP) Cooperative Agreement for Networking, Certifying, and Training Suicide Prevention Hotlines and Disaster Distress National Child Traumatic Stress Initiative <ul style="list-style-type: none"> National Center for Child Traumatic Stress (Cat 1) National Child Traumatic Stress Initiative – Treatment and NCTSI Service Adaptation Centers (Cat 2) National Child Traumatic Stress Initiative – Community Treatment and Service Centers (Cat 3)

DPTSSP Grants located in Michigan

Grant Project	Organization/Agency	Project Start Date	Project End Date
MHAT	Kalamazoo Community Mental Health & Substance Abuse Services	9/30/2018	9/29/2022
MHAT	Kalamazoo Community Mental Health & Substance Abuse Services	2018-09-30	2022-09-29
MHAT	St. Joseph Mercy Chelsea	2021-09-30	2026-09-29
MHAT	Eaton Regional Education Services	2022-09-30	2027-09-29
MHAT	Ausable Valley Community Mental Health	2021-09-30	2026-09-29
MHAT	MICHIGAN RURAL EMS NETWORK	2022-09-30	2027-09-29
MHAT	EATON REGIONAL EDUCATION SERVICE AGENCY	2018-09-30	2022-09-29
IECMH	Easter Seals of Michigan, Inc.	2018-09-30	2023-09-29
LAUNCH	Inter-Tribal Council of Michigan, Inc.	2021-09-30	2023-09-30

DPTSSP Grants located in Michigan

Grant Project	Organization/Agency	Project Start Date	Project End Date
AWARE	Saginaw Chippewa Indian	2018-09-30	2023-09-29
AWARE	Michigan Department of Education	2020-09-30	2025-09-29
AWARE	Ottawa Area Intermediate School District	2022-09-30	2027-09-29
CMHI	County of Muskegon	8/31/2020	8/30/2024
CMHI	Ottawa Cty Community Mental Health	8/31/2020	8/30/2024
		9/30/2018	9/29/2023
HT	MI State Department of Health and Human Services		
RECAST	City of Flint	2021-09-30	2026-09-29
NCTSI-CATIII	Henry Ford Health System	2021-09-30	2026-09-29

Youth Mental Health in the United States

Risk Factors Contributing to Youth Mental Health Symptoms During the Pandemic *(not an exhaustive list)*

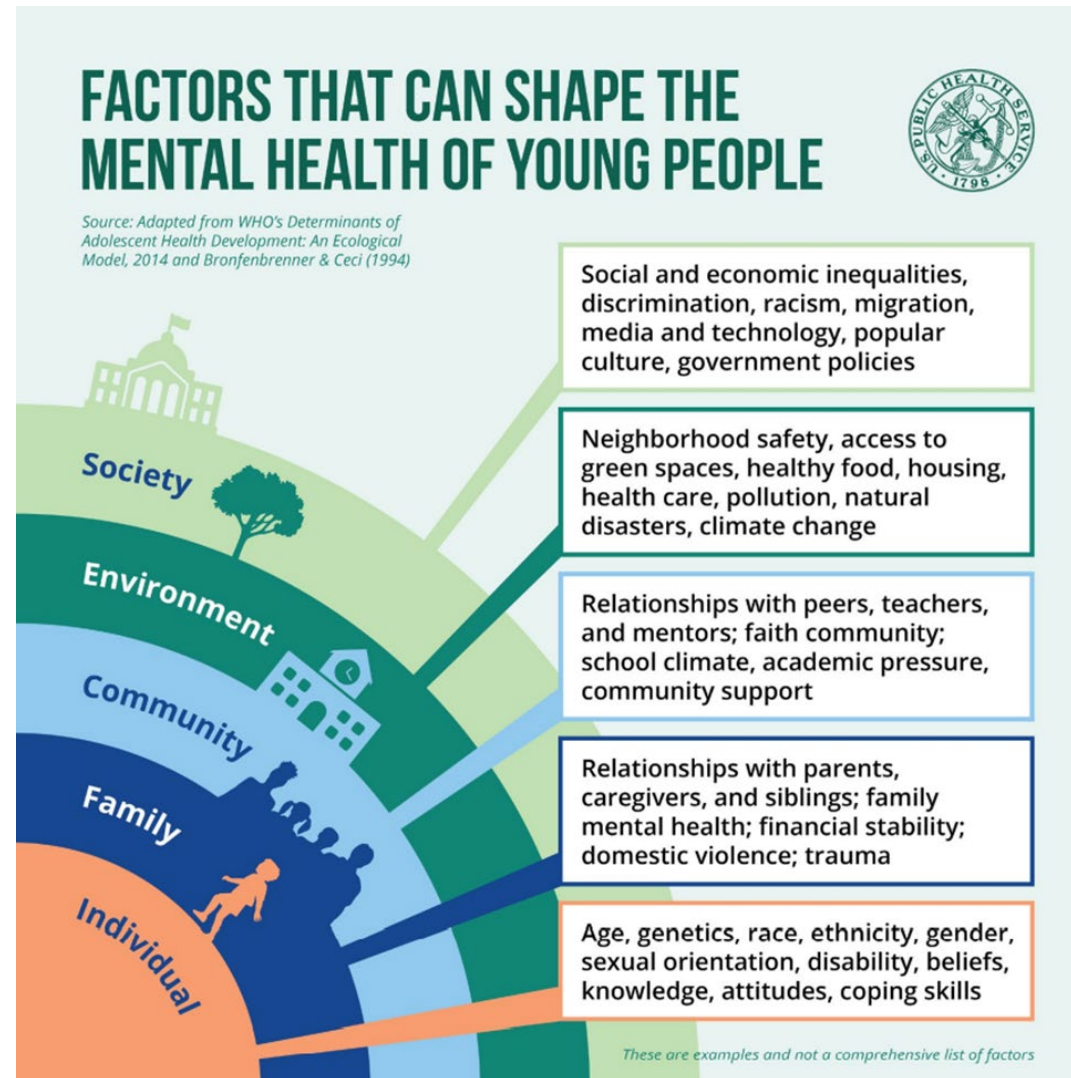
- Having mental health challenges before the pandemic
- Living in an urban area or an area with more severe COVID-19 outbreaks
- Having parents or caregivers who were frontline workers
- Having parents or caregivers at elevated risk of burnout (for example, due to parenting demands)
- Being worried about COVID-19
- Disruptions in routine, such as not seeing friends or going to school in person
- More adverse childhood experiences (ACEs) such as abuse, neglect, community violence, and discrimination
- More financial instability, food shortages, or housing instability
- Trauma, such as losing a family member or caregiver to COVID-19

General, U. S. (2021). *Protecting Youth Mental Health: The U.S. Surgeon General's Advisory*. Retrieved from <https://www.hhs.gov/sites/default/files/surgeon-general-youth-mental-health-advisory.pdf>

Administration, S. A. (2020). *Key Substance Use and Mental Health Indicators in the United States: Results from the 2020 National Survey on Drug Use and Health*. Rockville, MD: Center for Behavioral Health Statistics and Quality. Retrieved from <https://www.samhsa.gov/data/sites/default/files/reports/rpt35325/NSDUHFRPDFWHTMFiles2020/2020NSDUHFR1PDFW102121.pdf>

CDC (2022). Adolescent Behaviors and Experiences Survey (ABES). *Center for Disease Control and Prevention*. Retrieved from: <https://www.cdc.gov/healthyyouth/data/abes/tables/summary.htm#MH>

Protective Factors Impacting Youth Mental Health (2021)



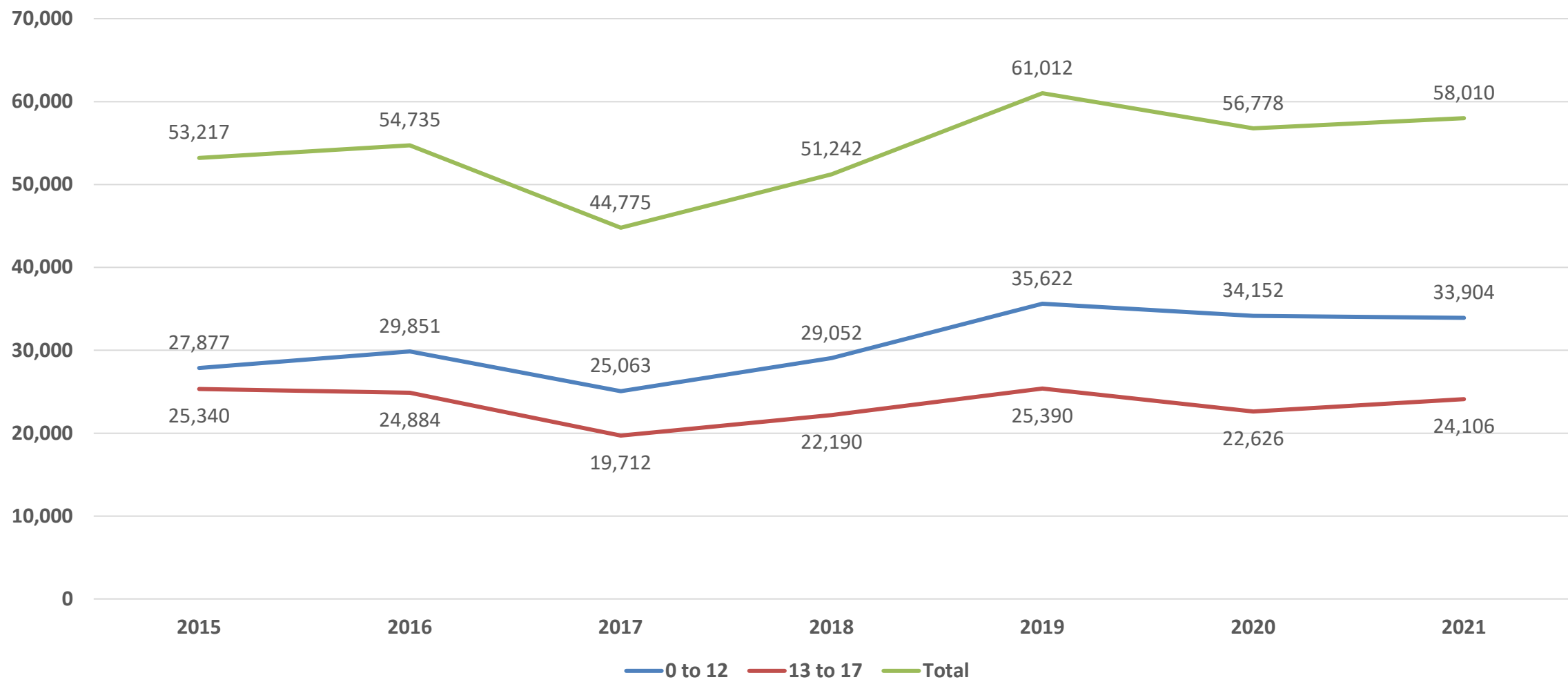
General, U. S. (2021). *Protecting Youth Mental Health: The U.S. Surgeon General's Advisory*. Retrieved from <https://www.hhs.gov/sites/default/files/surgeon-general-youth-mental-health-advisory.pdf>

Administration, S. A. (2020). *Key Substance Use and Mental Health Indicators in the United States: Results from the 2020 National Survey on Drug Use and Health*. Rockville, MD: Center for Behavioral Health Statistics and Quality. Retrieved from <https://www.samhsa.gov/data/sites/default/files/reports/rpt35325/NSDUHFRPDFWHTMLFiles2020/2020NSDUHFR1PDFW102121.pdf>

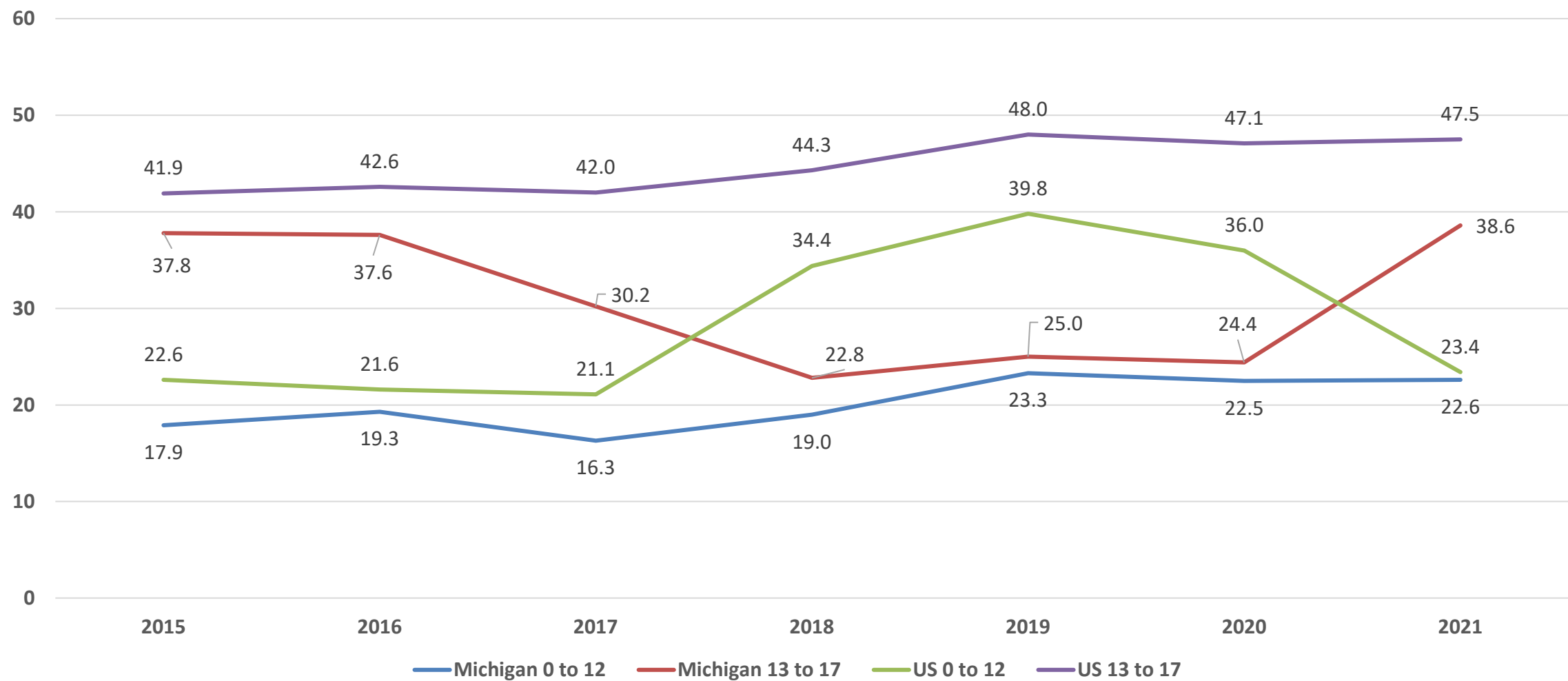
A look at the data.....

The data presented in this summary are from the 2015 – 2021 Uniform Reporting System (URS) Output Tables ([Reports Results | CBHSQ Data \(samhsa.gov\)](#))

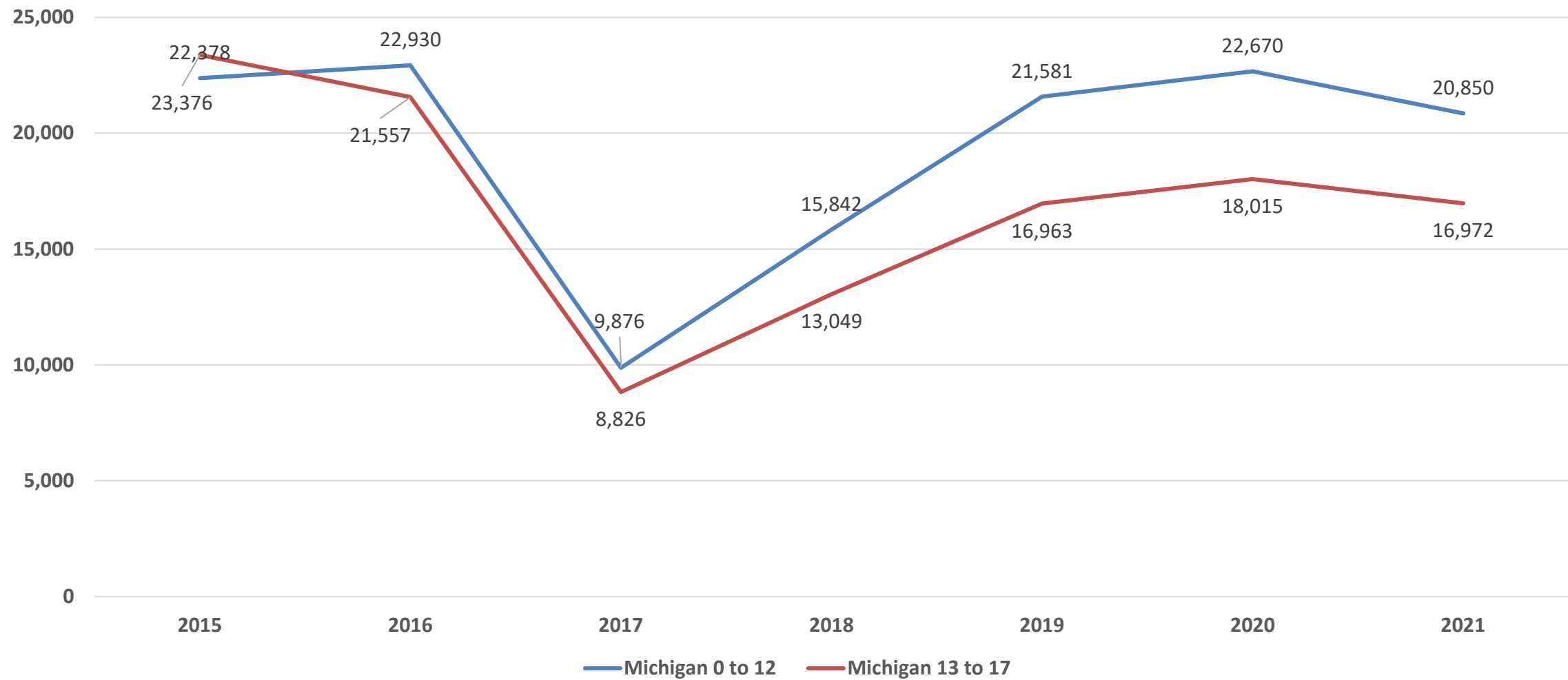
Number of Children (Age <18) Served



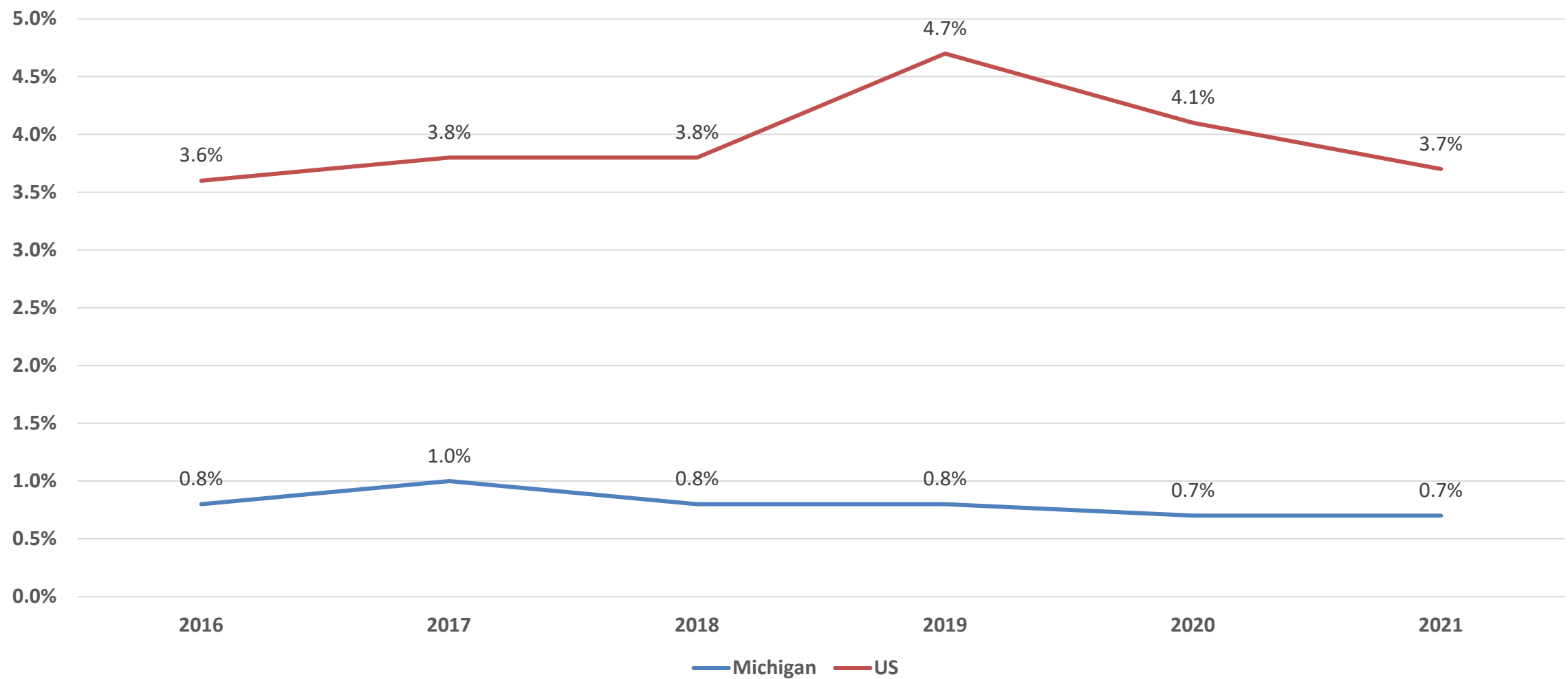
Utilization Rate for All Children (Age <18) Served



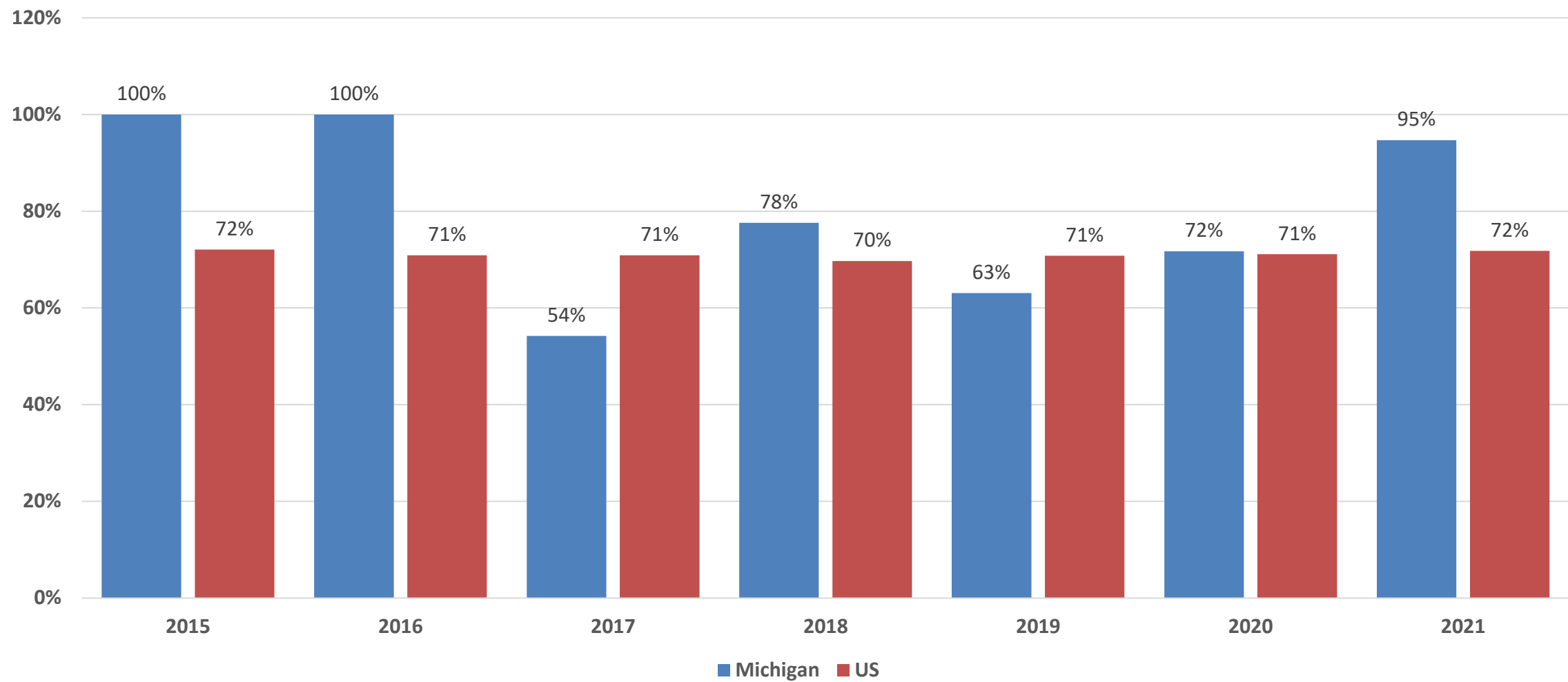
Number of Children (Age <18) with SED Served



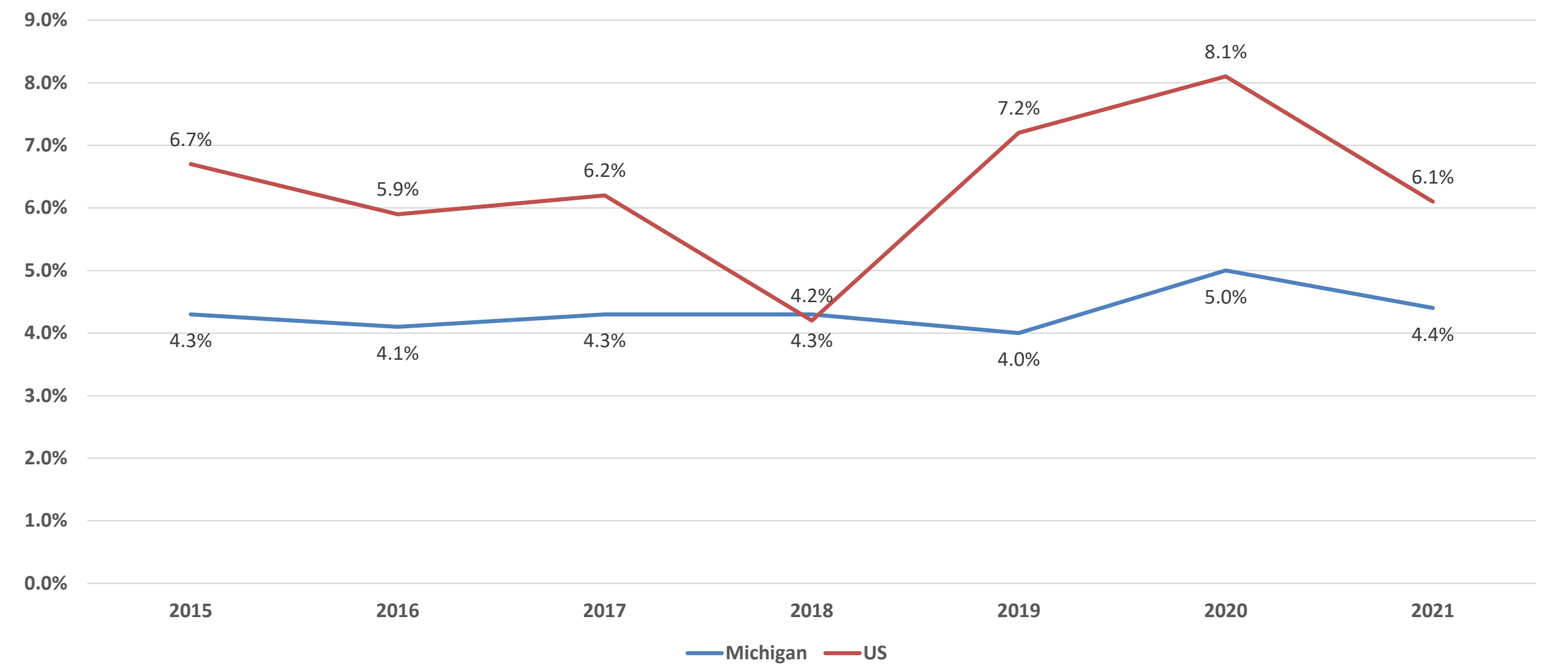
Percent of Children (Age <18) with SED Receiving Multisystemic Therapy



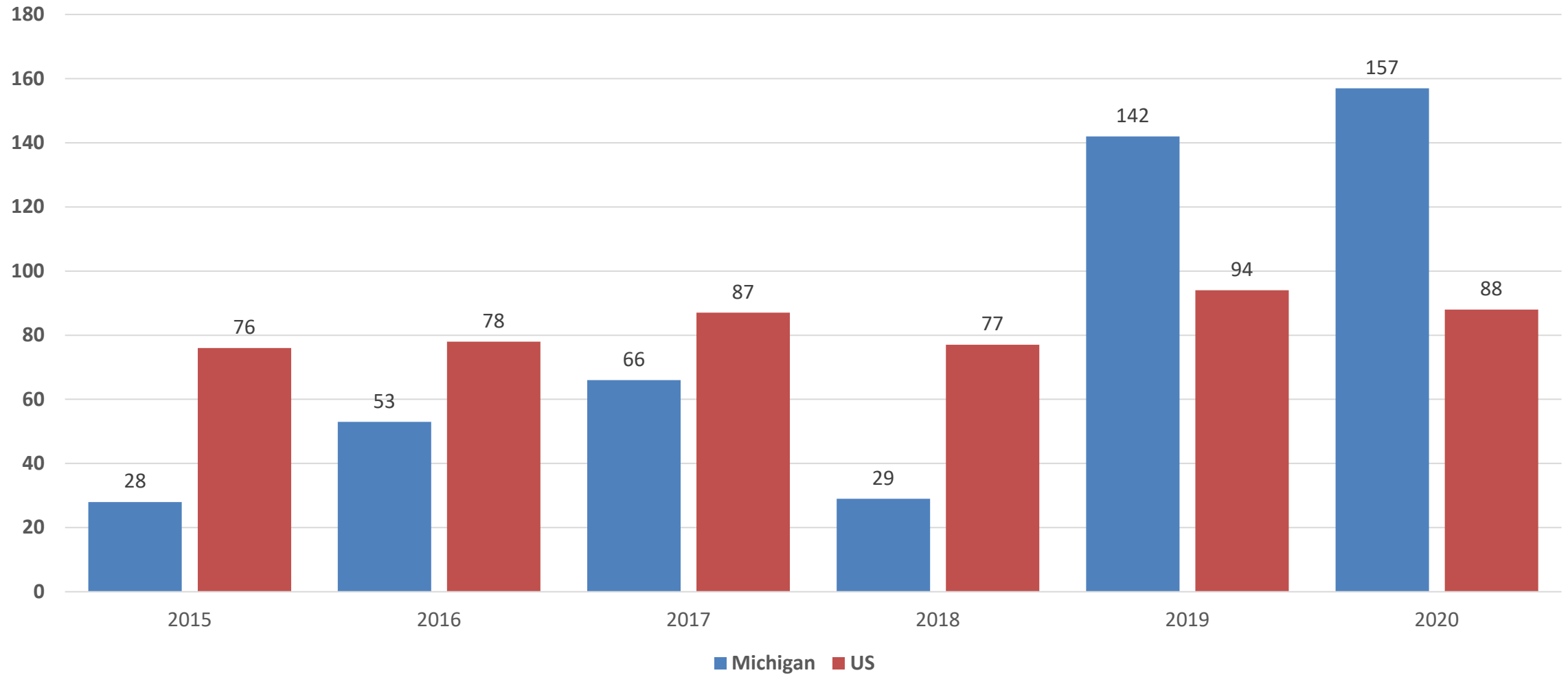
Percent of Children (Age <18) Served who Meet the Federal Definition of SED



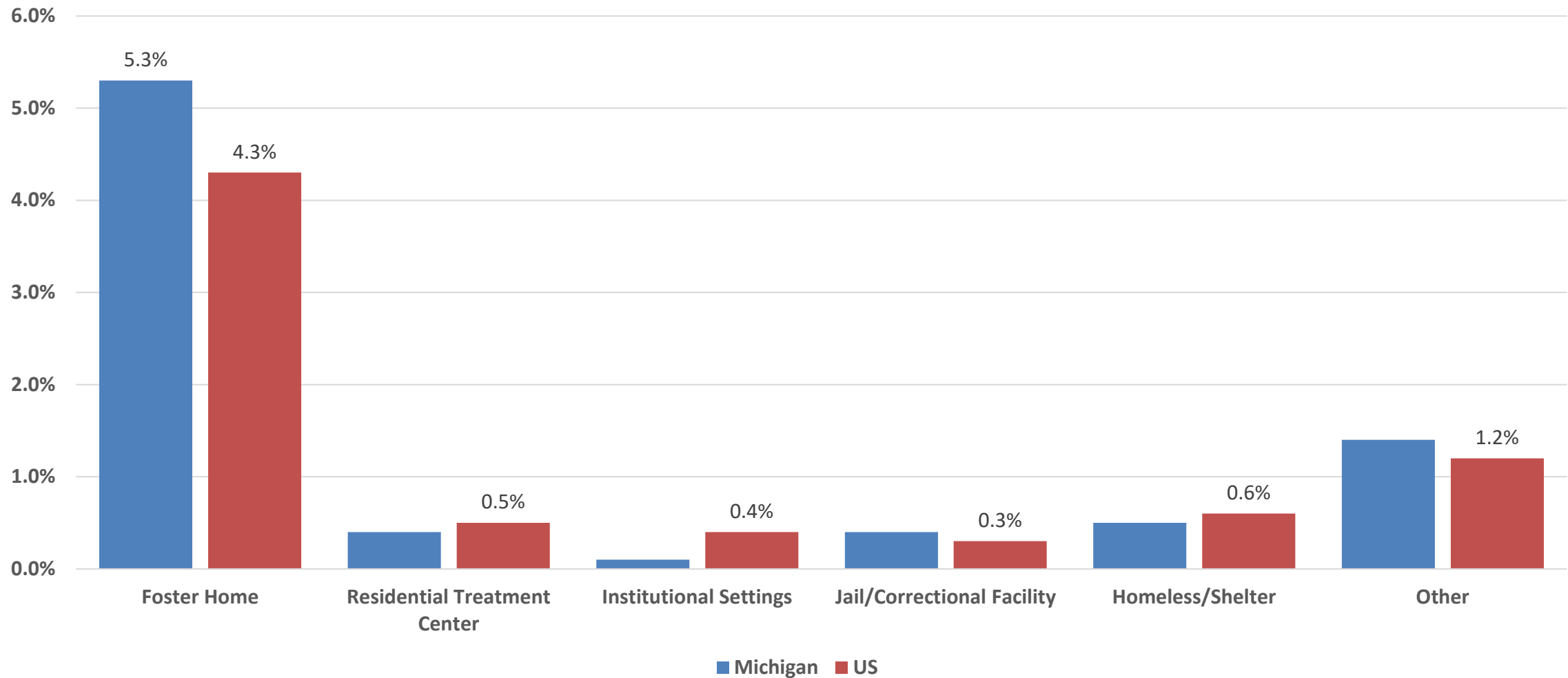
Percent of Children (Age <18) with Co-occurring Mental and Substance Use Disorders



State Hospital Average Length of Stay (in days) of Children (Age <18)

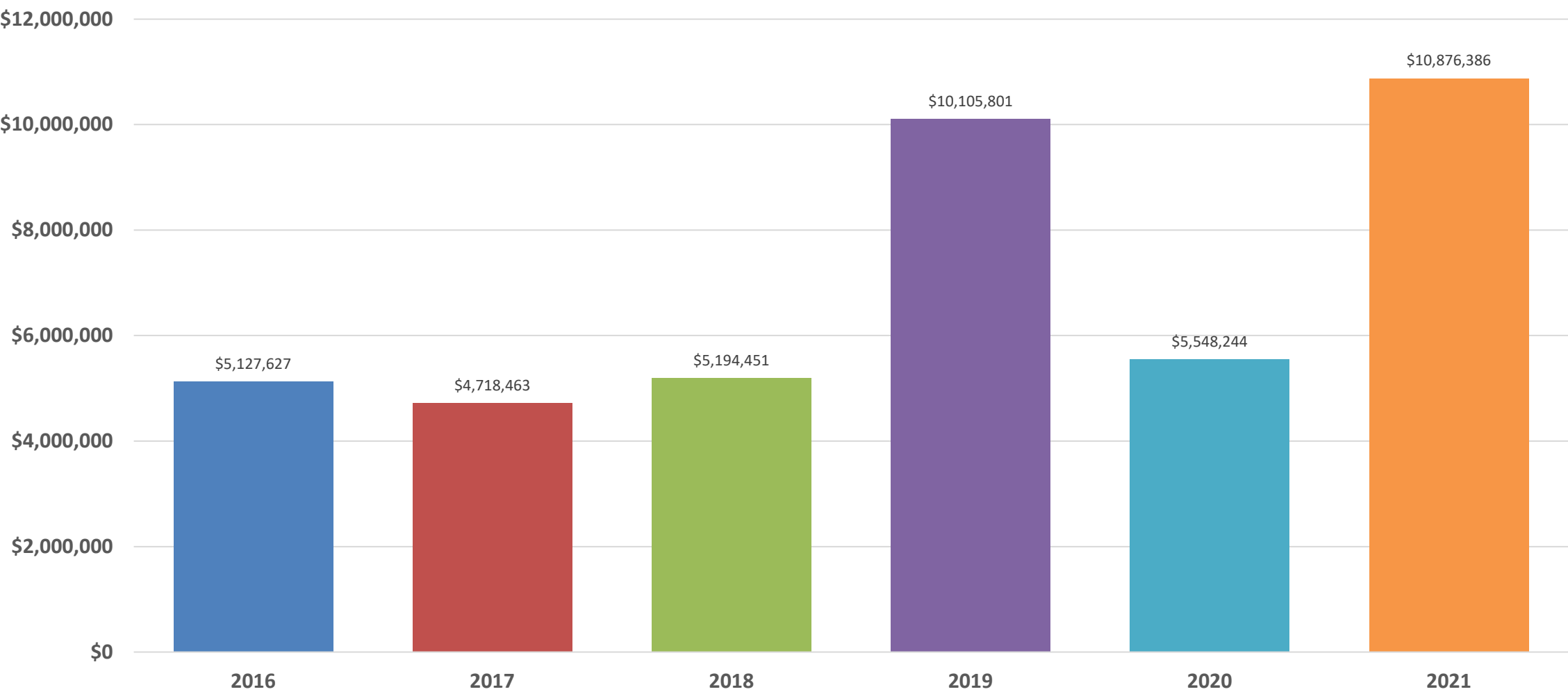


Living Situation of Children (Age <18) Served: 2021



Note: 91.8% of children served in Michigan lived in private residence (not charted)

MHBG Funds for Direct Services – Children (Age <18) with SED



SAMHSA Grants

SAMHSA's Behavioral Health Investment

SAMHSA's Behavioral Health Investment in Communities for Children, Youth, and Families

Substance Abuse Block Grant

- Prevention (20 percent set-aside)
- Treatment

Mental Health Block Grant

Programs of Regional and National Significance

- Strategic Prevention Framework-Partnerships for Success
- Sober Truth on Preventing Underage Drinking (STOP) Act
- Youth and Family TREE grant
- State Youth Implementation (SYT-I) grant
- Screening, Brief Intervention, and Referral To Treatment (SBIRT)
- Pregnant and Postpartum Women Programs (PPW & PPW Pilot)
- Children's Mental Health Initiative (CMHI)
- Project Linking Action for Unmet Needs in Children's Health (LAUNCH)
- National Child Trauma Stress Initiative (NCTSI)
- Children's Mental Health Initiative (CMHI)
- Project Advancing Wellness and Resiliency in Education-State Education Agency (AWARE-SEA)

Notice of Funding Opportunity Announcements

Currently “On the Street”

- [Resilience in Communities after Stress and Trauma \(ReCAST\)](#)
- [Advancing Wellness and Resiliency in Education \(AWARE\)](#)

September 30th Grant Starts:

- Center of Excellence on Social Media and Mental Wellbeing Cooperative Agreement
- Cooperative Agreements for School Based Trauma-Informed Support Services and Mental Health Care for Children and Youth (Trauma-informed Services in Schools)
- Advancing Wellness and Resiliency in Education (Project AWARE)
- Cooperative Agreements for the Garrett Lee Smith State/Tribal Youth Suicide Prevention and Early Intervention Program
- GLS Campus Suicide prevention Grant Program (GLS Campus)
- Infant and Early Childhood Mental Health Program (IECMH)
- ***Grants for Expansion and Sustainability of the Comprehensive Community Mental Health Services for Children with Serious Emotional Disturbances (Systems of Care)***
- Community Programs for Outreach and Intervention with Youth and Young Adults at Clinical High Risk for Psychosis (CHR-P)
- Statewide Family Network Program (SFN)

Federal Initiatives



Interagency Task Force for Trauma-Informed Care

Problem Statement:

Childhood trauma, including exposure to substance misuse, **is a serious public health problem** in the United States. It has potentially long-lasting negative impacts on physical and mental health. **Communities need support** to build infrastructure and capacity to prevent trauma, respond to those impacted by trauma, and enhance resilience. **A robust evidence base for a continuum of interventions** (e.g., prevention of traumatic exposures, early intervention to address acute reactions and responses, treatments for identified health, education and other adverse conditions) **at the individual, system, and community levels are needed to promote the provision of best practices.**

Outcome Statement:

A national, trauma-informed, and coordinated federal strategy to build community capacity to identify, disseminate, foster, and refine **evidence-based, evidence-informed, and best practices** regarding childhood trauma to **reduce the incidence** of trauma, **improve the response** to families with exposure to substance misuse, **enhance recognition** of and response to trauma, **strengthen resilience**, and **improve outcomes** for children, youth, and families.

BEST PRACTICES

To identify and make recommendations on evidence-based and evidence-informed practices with respect to prevention of exposure to potentially traumatic events, identification of trauma-related behavioral health and other health needs, referral, and implementation of trauma-focused interventions and practices.

RESEARCH

To evaluate and expand the knowledge base in the areas of preventing exposure to potentially traumatic events, identifying trauma related health, behavioral, academic, employment, and social needs, and interventions (individual and systems).

NATIONAL STRATEGY FOR TRAUMA INFORMED CARE



DATA

To coordinate data gathering, measurement, and tools used by programs and systems serving children and families impacted by trauma to better assess children, youth and family needs, and streamline services for, and enhance the care of children and families impacted by trauma.

FEDERAL COORDINATION

To promote communication, coordination, and collaboration in the areas of trauma, trauma risk and resilience, and trauma-informed care across the federal government.

A transformative moment for the crisis care system in the U.S.



Short-term goal

A strengthened and expanded Lifeline infrastructure to respond to crisis calls, texts, and chats anytime

Long-term vision

A robust system that provides the crisis care needed anywhere in the country

Crisis Contact Centers Are an Essential Component of a Broader Crisis Continuum

988



Decreased use of:

- Jail
- ED
- Inpatient

LEAST Restrictive = LEAST Costly

Youth Crisis Today

MANY SYSTEMS ARE NOT YET MEETING THE UNIQUE CRISIS SUPPORT NEEDS OF CHILDREN, YOUTH, AND FAMILIES.

Up to one in five

children has a reported mental, emotional, developmental, or behavioral disorder

In 2020

suicide was the second leading cause of death for people aged 10–14 and the third leading cause of death for people 15–24

60% increase

in pediatric emergency department visits for mental health reasons between 2007 and 2016





Emergency Department (ED)

Youth may be “boarded” for long periods and sometimes restrained while waiting to transfer to care

Law Enforcement

Youth in crisis may be disciplined, arrested, and/or restrained by police or school resource officers

Youth need trauma-informed, developmentally appropriate support.

NATIONAL GUIDELINES FOR
CHILD & YOUTH
**BEHAVIORAL
HEALTH CRISIS
CARE**

SAMHSA
Substance Abuse and Mental Health
Services Administration

New from SAMHSA
Final Clearance

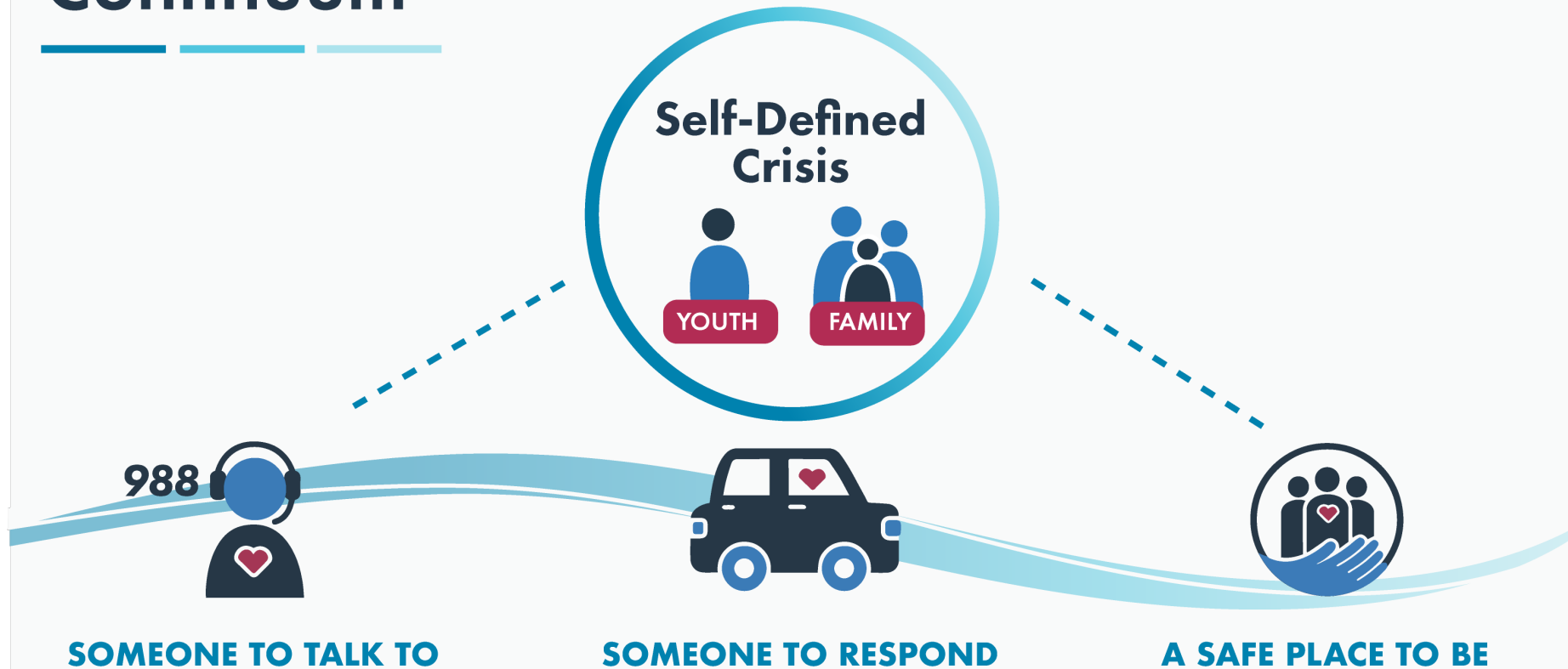
***National Guidelines for Child and
Youth Behavioral Health Crisis Care***

SAMHSA
Substance Abuse and Mental Health
Services Administration

Key Sources

- SAMHSA's *National Guidelines for Crisis Care – A Best Practice Toolkit*
- National Association of State Mental Health Program Directors (NASMHPD) crisis services series
- Children's Crisis Continuum Expert Panel
- Listening Sessions

Youth Crisis Continuum



CORE PRINCIPLES

Safety • Equity • Trauma-informed • Peer Support
Culturally and Developmentally Appropriate

Core Principles

No Wrong Door

Safety

Trauma-
informed

Equity

Peer Support

Culturally and
Developmentally
Appropriate

Crisis Continuum of Care

SOMEONE TO TALK TO

988/Crisis Call Hub Services

- 24/7/365
- Call, chat, text
- Youth and family expertise



Crisis Continuum of Care

SOMEONE TO TALK TO

Important:

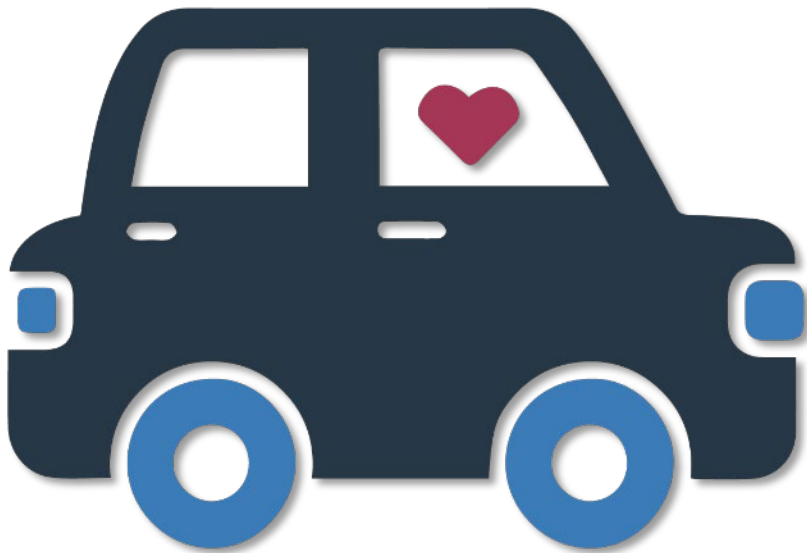
Children, youth, and young adults can call for help, too—not just families



Crisis Continuum of Care

SOMEONE TO RESPOND

Mobile Crisis Team Services

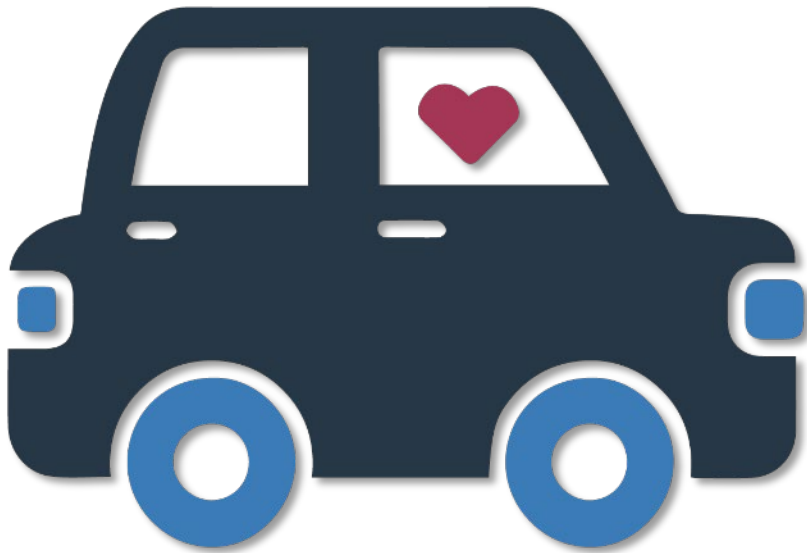


- Rapid response where the crisis is happening
- Professional/paraprofessional teams
- Includes Mobile Response and Stabilization Services (MRSS)

Crisis Continuum of Care

SOMEONE TO RESPOND

Mobile Crisis Team Services



- De-escalation with youth and family
- Assessing risk for harm
- Safety planning and resource identification
- Coordinating follow-up care

Crisis Continuum of Care

A SAFE PLACE TO BE

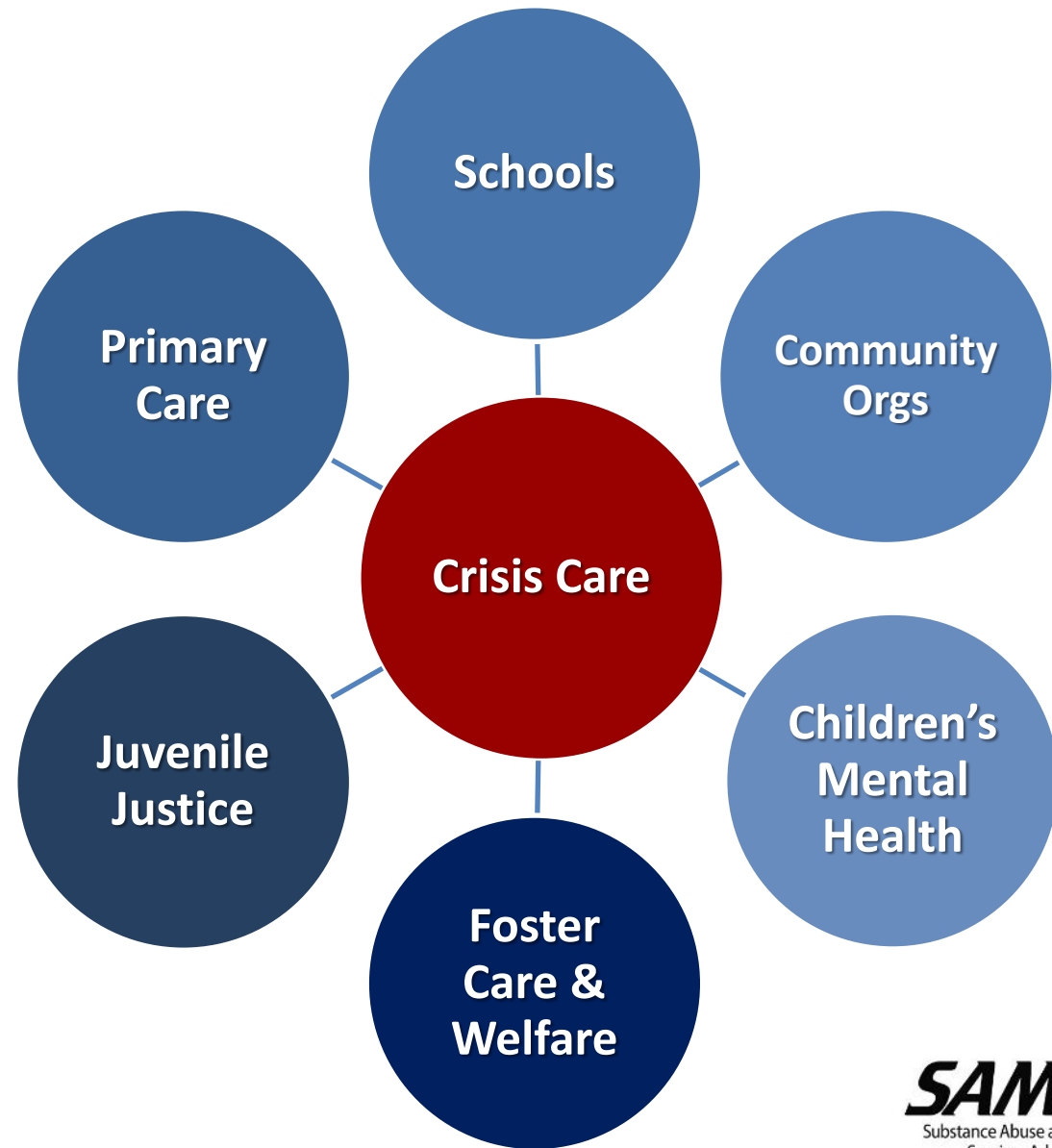
Crisis Receiving and Stabilization Services

- Safe home or community environment
- Person centered
- Ensure immediate safety
- Safety planning and limited counseling
- Transition to community services and supports



System of Care

Crisis services and supports are part of a broader children's System of Care



Unique Considerations

- **Avoiding out-of-home placements**
- Self-defined crisis
- Developmentally appropriate and trauma-informed services
- Staff training
- Youth and family voice, choice, empowerment

- Black, Indigenous, and People of Color (BIPOC) youth and families
- Early childhood
- LGBTQ+ youth
- Transition-age youth (TAY)
- Youth with Intellectual and Developmental Disabilities (IDD)

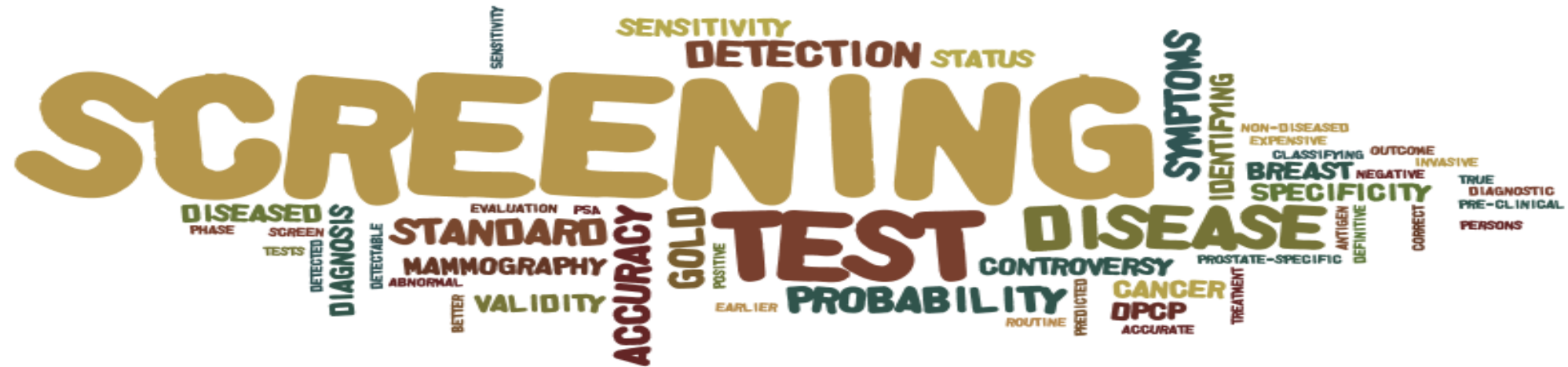


Unique Considerations: Rural and Frontier

- Long transportation times
- Limited specialized workforce
- Telehealth opportunities
- Strengths-based approaches



Screening as a Prevention Strategy



- Early and periodic screening is widely recognized as one of the best ways to prevent the progression of more severe disease states in general and substance use specifically.
- Screening often focuses on one disease at a time. However, this can create a high burden when trying to screen a larger population, which leads to multidimensional screening for multiple things at a time.
- The results may identify strengths and areas to build on, early misuse that may only require brief intervention, and/or the need to refer for (hopefully early) intervention in one or more areas.

Bipartisan Safer Communities Act – Investment in Children and Family Mental Health Services



- Expands existing Medicaid **Certified Community Behavioral Health Clinic (CCBHC)** programs to all states
- Appropriates \$240 million over four years for programs that:
 - **increase awareness of mental health issues** among school-aged youth,
 - **provide training** for school personnel and other adults who interact with school-aged youth to detect and respond to mental health issues,
 - **connect** school-aged youth who may have behavioral health issues and their families to **needed services**
- Appropriates \$40 million over four years to **improve treatment and services** for children, adolescents, and families who have experienced **traumatic events**
- Appropriates \$150 million to support **implementation of the 9-8-8 Suicide and Crisis Lifeline** that provides 24/7, free and confidential support to people in suicidal crisis or emotional distress.

Senator Chris Murphy. *Bipartisan Safer Communities Act*. (2022). Retrieved from https://www.murphy.senate.gov/imo/media/doc/bipartisan_safer_communities_act_one_pager.pdf

What is the future of youth mental health?

What services & supports do we need?



Questions?



Thank You!

SAMHSA's mission is to reduce the impact of substance abuse and mental illness on America's communities.

Melinda J Baldwin, Ph.D, LCSW

Director, Division of Prevention, Traumatic Stress, & Special Programs

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www.samhsa.gov

1-877-SAMHSA-7 (1-877-726-4727) • 1-800-487-4889 (TDD)



My Virtual Door is always OPEN!