

OFFICE OF THE GOVERNOR
ROD R. BLAGOJEVICH - GOVERNOR

NEWS

For Immediate Release:

June 15, 2005

Contact:

Cheryle Jackson
312/814.3158
Abby Ottenhoff
312/814.3158
Gerardo Cardenas
312/814.3158
Rebecca Rausch

217/782.7355

Kim Broome (DCFS) 312/814.9208

**Gov. Blagojevich signs legislation expanding
mental health services for children in state care;
Illinois one of the first states to address
wards' mental health needs**

*Unprecedented step reflects DCFS goals and priorities
under Blagojevich administration*

SPRINGFIELD - Gov. Rod. R. Blagojevich signed legislation today that puts Illinois on the cutting edge of addressing the mental health needs of children in state care and reflects an ongoing commitment to improve services for children.

“The children who come into state custody have been through incredible trauma - from the neglect or abuse that led up to DCFS intervention, to the anxiety and stress of being separated from their families. It’s imperative that our efforts to help these kids includes a comprehensive mental health component,” said Gov. Blagojevich. “With this law, Illinois is taking an unprecedented step to meet the needs of children in our care - a step that I hope other states will follow. Our investment in these young people’s health and development now will pay off ten-fold as they grow up and become stable, productive adults.”

House Bill 759, sponsored by state Rep. Lou Long (D-Skokie) and

state Sen. Susan Garrett (D-Highwood), puts into law a requirement that the state provide children in its custody mental health services in areas such as trauma, substance abuse, development disabilities and integrated assessment - areas the Department of Children and Family Services (DCFS) has been working to address since last year. DCFS currently provides services in several of these areas or is planning to implement new initiatives under a Program Improvement Plan (PIP), which has been approved by the federal government. The funding in the fiscal year 2006 budget dedicated to implementing the Program Improvement Plan, as well as the reallocation of existing funding, will enable DCFS to continue enhancing this service delivery.

“The Governor’s approval of HB 759, demonstrates Illinois is serious about improving the job we do for children,” said Rep. Lou Lang (D-Skokie), who sponsored the bill with Sen. Susan Garrett (D-Lake Forest). “Illinois is so committed to meeting and surpassing our goals that we put it into legislation the General Assembly approved unanimously, a step no other state has taken.”

“This is thoughtful, efficient legislation that puts into law the state’s goals and objectives regarding how we provide mental health and other services for children in the custody of DCFS,” said Sen. Garrett. “With the Governor’s approval of HB759, Illinois takes significant strides in the effort to improve the well-being of children in our care.”

Last year DCFS introduced a “Lifetime Approach” initiative to move the child welfare system in a new direction. For too long, child welfare systems have treated children coming into care as if their stays would be short. Research shows, however, that the average child in Illinois remains in care for 4.5 years.

“The Lifetime Approach better reflects the reality that today we care for fewer children whose average age is older than only a few years ago,” said DCFS Director Bryan Samuels.

In Fiscal Year 2006, DCFS projects it will care for 18,159 children, down significantly from more than 50,000 in FY 1997 and the lowest total since FY 1989 when DCFS cared for 17,451 children.

“New policies and practices may have dramatically changed the population of children in our care, but those initiatives have also strengthened our commitment to do a better job for children who need our help,” said Gov. Blagojevich. “I am pleased to approve legislation that reflects the progress we are making in Illinois.”

“This legislation addresses a critical need for early identification of mental disorders in children and adolescents,” said Lora Thomas, Executive Director of the Illinois chapter of the National Alliance for the Mentally Ill (NAMI). “Early intervention helps to avoid years of unnecessary suffering and reduces the risk of illnesses becoming much more severe and resistant to treatment.”

Thomas said the Governor’s approval of HB759 is especially timely with the release on June 6, 2005 of a study funded by the National Institute of Mental Health, “Mental Illness Exacts Heavy Toll, Beginning in Youth.” Findings from the study related to children and adolescents included:

- Half of all lifetime cases of mental illness begin by age 14 and three quarters have

- begun by age 24;
- Anxiety disorders often begin in late childhood, mood disorders in late adolescence and substance abuse in the early 20s;
 - Unlike heart disease or most cancers, young people with mental disorders suffer disability when they are in the prime of life and normally most productive;
 - Despite effective treatments, there are long delays -- sometimes decades -- between the first onset of symptoms and individuals seeking and receiving treatment;
 - The study reveals that an untreated mental disorder can lead to a more severe, more difficult to treat illness, and to the development of co-occurring mental illnesses; and
 - The study showed that the earlier in life a mental disorder begins, the slower a person is to seek treatment and the more persistent the illness becomes.

“The Illinois Chapter of the National Association of Social Workers commends Governor Blagojevich for signing HB 759 and applauds the Illinois General Assembly, DCFS and Director Samuels for moving forward with a vision to provide thorough integrated assessment and behavioral health services for all DCFS wards,” said Joel Rubin, MSW, Executive Director, National Association of Social Workers-Illinois Chapter.

“As social workers we are prepared to work with DCFS and other providers to meet the significant challenge of assuring that eligible children have access to quality behavioral health services to help them maintain and improve their mental health to insure their optimal development,” said Rubin.

HB759 is effective Jan. 1, 2006 and formalizes the “Lifetime Approach” initiatives DCFS has launched in the last year in mental health service areas such as trauma, substance abuse and developmental disabilities. More specifically, DCFS provides services in several areas that comply with the legislation, including:

Integrated Assessment: Integrated Assessments provide a comprehensive clinical understanding of the child from the moment he or she enters care. Service plans are developed for each child and are directly related to that understanding. DCFS has established partnerships with universities and hospitals across the state to provide the clinical and professional expertise required to conduct assessments. The geographical distribution of this capacity is closely aligned with state intake trends. Southern Illinois University, Northern Illinois University, LaRabida Children’s Hospital and Erikson Institute are leading partners in the implementation of this reform.

Child and Youth Investment Teams: The Child and Youth Investment Teams streamline the decision-making processes for available services. The reconfiguration serves two primary objectives: to deliver services to children and youth earlier and to foster continuity and communication about the youth.

Trauma Treatment: All components of the child welfare system must recognize and respond to the comprehensive impact that trauma has on the life of a child in care. Research presented at the Johnson and Johnson Pediatric Institute meeting in February 2004 concluded that, “The effects of trauma can be pervasive, impacting school readiness and performance, diminishing cognitive abilities and leading to substance abuse, disabling mental disorders and costly physical health problems.” These problems often include depression, anxiety, aggression, conduct disorder, sexualized behaviors and eating

problems. Reducing the negative childhood and adult consequences is possible with early and rapid identification of traumatized children.