# SUPPORTING A COMPREHENSIVE AND EFFECTIVE CHILDREN'S MENTAL HEALTH SYSTEM IN IOWA



## In order to continue our progress toward making Iowa a leader in children's mental health and family wellbeing, CAMHI4Kids asks the legislature to:

- Maintain a dedicated stakeholder group made of state department leadership from Health and Human Services, Education, Juvenile Justice, Workforce Development, external children's behavioral health experts, and individuals with lived experience to evaluate and guide the development of a comprehensive children's mental and behavioral health system in lowa.
- Implement a coordinated approach to behavioral health screening across different systems, with informed consent by a child's parent or guardian, in order to provide prevention, early identification, and early intervention services for children and their families.
- Support workforce investments that expand the full array of children's mental health professionals, prioritizing services for families who rely on Medicaid.

#### The Coalition to Advance Mental Health in Iowa for Kids (CAMHI4Kids)

CAMHI4Kids represents statewide experts and organizations urging policymakers to listen to lowans and address the patchwork of services that is putting our children's mental health and wellbeing at risk.

Incremental progress and targeted investments have been made to expand the behavioral health workforce in lowa to meet critical mental health needs of children and adults, but these are only the first steps in developing an effective system. Families are facing new and increased stressors impacting both child and parent mental health. These challenges are being seen in schools, pediatric clinics, emergency departments, and within families across all demographics and geographic locations in lowa.

Expansion of these types of strategic workforce investments must continue to be a priority in lowa to meet the growing need and aging professionals in the behavioral health workforce.

Tapping into the potential of lowa's children is vital to the long-term health of our state. **lowa kids largely grow up and remain in lowa.**Care and investment along the continuum of services — from preventative services to crisis and intensive intervention services — will yield not just cost savings later, but healthier lowans for generations to come.



### **IOWA YOUTH MENTAL HEALTH:** WHERE ARE WE NOW?

36%

Percentage of Iowa 11th graders who felt so "sad or hopeless" almost every day for two weeks or more in 2021 that they stopped doing usual activities (compared with 25% in 2016).

Iowa Youth Survey

24%

Percentage of Iowa 11th graders who reported considering suicide in 2021. 21% of 8th graders and 17% of Iowa 6th graders considered suicide in 2021.

Iowa Youth Survey

From 2016-2019, visits by 6 to 12 year olds for mental health crisis needs have doubled for hospitals.

Children's Hospital Association, Pediatric Health Information System Database

Suicide is the secondleading cause of death among lowans aged 15 to 24 years old.

Iowa Department of Health and Human Services

of all lifetime mental illness begins by age 14, and 75% by age 24.

NAMI

#### Children's Mental Health and Well-Being



Complex Needs

- O Sub-Acute Care
- Intensive Outpatient Services
- O Day Treatment
- O Juvenile Justice Screening and Diversion
- Crisis Hotline
- **Mobile Crisis**
- Crisis Stabilization Residential Services
- Crisis Stabilization Community-Based Services

**Targeted** Interventions & Supports

- O Intensive Evidence-Based Interventions
- O Respite Care
- O Wrap-Around Services and Supports
- O Case Management and Care Coordination
- O In-Home Skill Building and Behavioral Supports
- O School-Based Behavioral Health Services
- ✓ Medications
- ✓ Therapeutic Services

Health Promotion, **Prevention &** Well-Being

- O Outreach and Home Visiting Services
- ✓ Screening, Assessment and Evaluation
- O Integrated Mental Health, Substance Use and Primary Health
- O Peer and Caregiver Education and Support Services

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Bolded text signifies mandated Core Services for children included in HF 690, signed into law May 2019.

