



Advocacy and Action  
for Connecticut's  
Mental Health

## Early Identification and Early Intervention Improves Lives

*Mental health is fundamental to overall health and well-being. As with most health conditions, the sooner mental health issues are identified and children are connected to quality services, the better the outcomes.*

### The Need

- Although one in five children and adolescents has symptoms of a mental health condition, only a quarter of these children have access to appropriate mental health services; in Connecticut, this leaves approximately 125,000 children with unmet behavioral health needs.
- Children and youth with a mental health diagnosis have the highest high school dropout and unemployment rate of any disability group.
- In Connecticut, the rate of children with a mental health disorder involved in the state's juvenile justice system is 64 percent.

### The Benefits

*Although early identification initiatives typically focus on identifying and responding to high (or clinical) levels of need, it is also essential to respond to at-risk children who may not need clinical-level care with appropriate preventive-level services and opportunities for resilience-building. When social, emotional and behavioral problems present as a “whisper” and not a “shout”, it is easy to ignore them. However, many children are in a position to benefit significantly from opportunities and services that will build their resilience and protective factors at an early age, and before problems manifest at a higher level of need.*

- Data collected from two community-based programs, **iCARE (Identifying Children and Responding Early)** in Middletown, CT and **VKB (Valley Kids Belong)** of Derby, CT, both of which were supported by the CT Health Foundation, indicate *significant improvement in participants:*
  - ✓ overall functioning ability and reduced severity of behavioral problems resulting from preventive-level interventions. **(iCARE)**
  - ✓ Resilience and protective factors; parents report that students have increased levels of functioning, self-confidence, participation, and positive peer social skills. **(VKB)**

- Negative outcomes and treatment in costly crisis settings can be avoided by investing in systems that identify and intervene early on in a child's life when a mental health concern is suspected.

## Opportunities for Improvements

In October 2014, the Department of Children and Families (DCF) released its statewide, comprehensive **Children's Behavioral Health Plan**, mandated by **Public Act 13-178** which was passed in 2013 in response to the Newtown tragedy. One of the key goals of the plan is the early identification and prevention of children's behavioral health concerns. Here are a few examples of prevention strategies under the Children's Behavioral Health Plan.

- *Standardized screening for mental health conditions in primary care, education, and home visit settings.* Although the number of children being screened in Connecticut for behavioral health has increased substantially, it is estimated that only about half of all recommended screening is currently taking place. Barriers to screening include inadequate reimbursement to providers, cost, lack of time, inadequate mental health training for health providers, and lack of resources for referral.
- *Increased prevention efforts for children under three.* The "Ages and Stages Questionnaire: Social Emotional" is a parent-completed screening tool to monitor a child's behavioral development from 3 months to 5 and a half years that is being administered in seven communities through the Office of Early Childhood.
- *Increasing the number of school based health centers to address the behavioral health needs of students.* Medical clinicians are now required to conduct behavioral health screenings at these sites which increases the likelihood of early detection and referral. The department of Public Health will need an increase in funds for staff support to implement and monitor this expansion.
- *Identifying successful early identification/intervention programs in schools, such as iCARE and VKB, and bringing them to scale across the state.*

More information about early identification/intervention in children's mental health and details on the iCARE and VKB initiatives can be found in the Keep the Promise Coalition's issue brief, "*Earlier = Better, Communities Proactively Addressing Children's Mental Health.*" To obtain a copy of this brief, go to resources at [www.ctkeepthepromise.org](http://www.ctkeepthepromise.org)

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