

Families struggle to get help for mentally ill kids

State budget mess hits kids

KRISTEN MCQUEARY | OCT. 17, 2011

Mental illness knows no boundaries. It affects all incomes, all races and all ages.

But for parents who notice signs of mental illness in their children, the state of Illinois offers few options. The National Alliance on Mental Illness in 2009 gave Illinois a “D” for mental health services offered. And that was before budget cuts this year ravaged human service programs.

What is left is a fragile network that leaves thousands of families without help.

For almost 10 years, one group has been trying to raise awareness about children’s mental health. They’re mostly advocates and social workers called the Illinois Children’s Mental Health Partnership. They meet quarterly.

In 2002, they were part of a task force that described children’s mental health as an urgent priority. They recommended better training for teachers, more coordination between state agencies and more counselors and therapy for kids.

But the reality is this: They haven’t been able to do *nearly* as much as they planned 10 years ago.

The problem is, the state has no money.

"There are parts of the state that have no child or adolescent psychiatrists. The need far surpasses the availability of the resources. That’s just the fact of it. And it’s being cut. Kids who are seriously emotionally disturbed, it’s estimated only half of those children are really getting the services that they need," said Barbara Shaw, director of the Illinois Violence Prevention Authority and leader of the mental health task force.

State Rep. Sara Feigenholtz (D-Chicago) chairs the House budget committee that cut funding to mental health programs in May.

"We don't want to cut these programs. The irony of so much of this is that many of the programs are programs that the very committee members who are cutting have established. So we're faced with some very gruesome decisions. It's not a celebration. There are tears," she said.

Money to train teachers, doctors and day care workers has been scaled back. Counseling to help kids transitioning out of juvenile detention and foster care is almost gone entirely. Ten years after advocates started working on the issue, most families still aren’t getting the intervention they need.

Jennifer Humbert is lucky. She has two children who *are* getting state aid, but only because they qualify for a program for severe cases. Her 13-year-old son was hospitalized three times this summer.

"Once for talking about killing himself, once for making a gesture where he picked up a table knife and threatened to hurt himself, and then for taking 27 of one of his medications in an attempt to kill himself," she said.

Before the help came, she considered moving her family to Maine, a state with a much better track record of helping kids.

"Unless you can get your hands on some very specialized grant money and in order to get it your child really truly has to be on the verge of killing themselves or someone else or unless you know the system really, really well, you're not going to get what you need," Humbert said.

In 2003, based on the task force recommendations, the legislature passed the Children's Mental Health Act which sought to improve programs for families with a mentally ill child. Some of the goals were put into place.

The partnership worked with about 80 schools to be on the lookout for signs of mental illness. It started a long-distance, tele-psychiatry program to help kids in rural areas. There was some training of doctors and daycare workers.

But the programs are small and facing severe cutbacks.

"Government does have its limitations. It's not as if government has all the money and resources that it needs to get from A to Z in a short period of time. And so it's a large ship and you can't turn a large ship on a dime," Shaw said.

The families hurt the most by the lack of resources are the ones who make too much money to qualify for Medicaid but whose private insurance doesn't cover everything they need.

Angela Kimball is with the National Alliance on Mental Illness.

"In many cases, it does not matter how much money you have in the private sector. You simply cannot buy the kinds of services that are needed for children with intensive behavioral health needs," Kimball said.

Advocates say cutting mental health means a higher price down the road.

"We pay more for the jail and the prison than we would if we would have invested in that person's mental health issues when they were younger and those mental health issues were maybe less severe," Shaw said.

Some studies say up to 70 percent of kids in the juvenile justice system suffer from some form of mental illness. Illinois taxpayers spend more than 150,000 thousand dollars on each of them, every year.