

# Children's Behavioral Health Focus on Diversion by Becoming a Trauma Responsive System

**Bryce Pittenger, LPCC**

**Director Behavioral Health  
Services CYFD**

---

**cyfd**



Children Youth & Families Department

**PULLTOGETHER.ORG**

# Social Determinants of Health

---

The structural determinants and conditions in which people are born, grow, live, work and age.

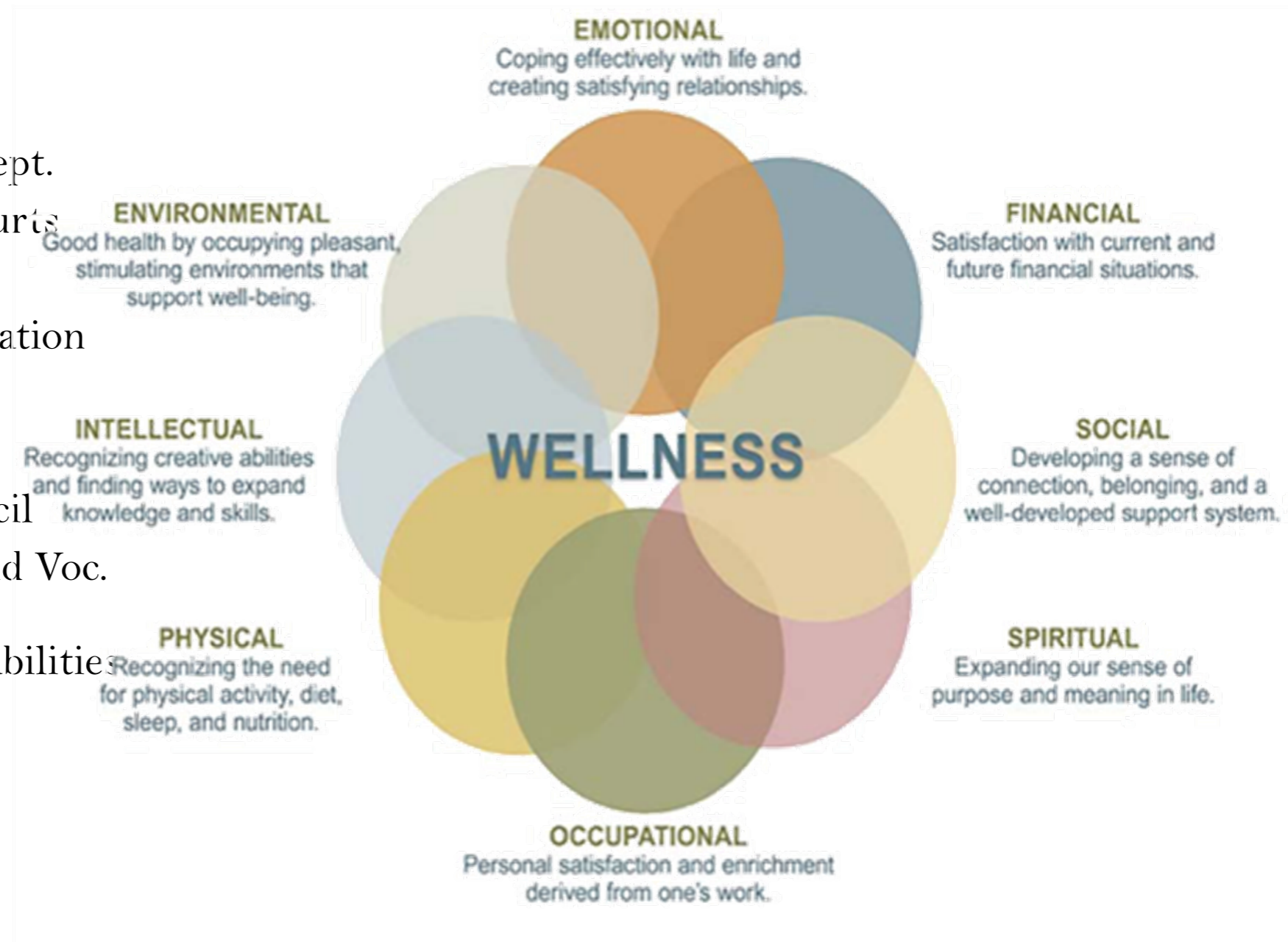
# Social Determinants of Health

---

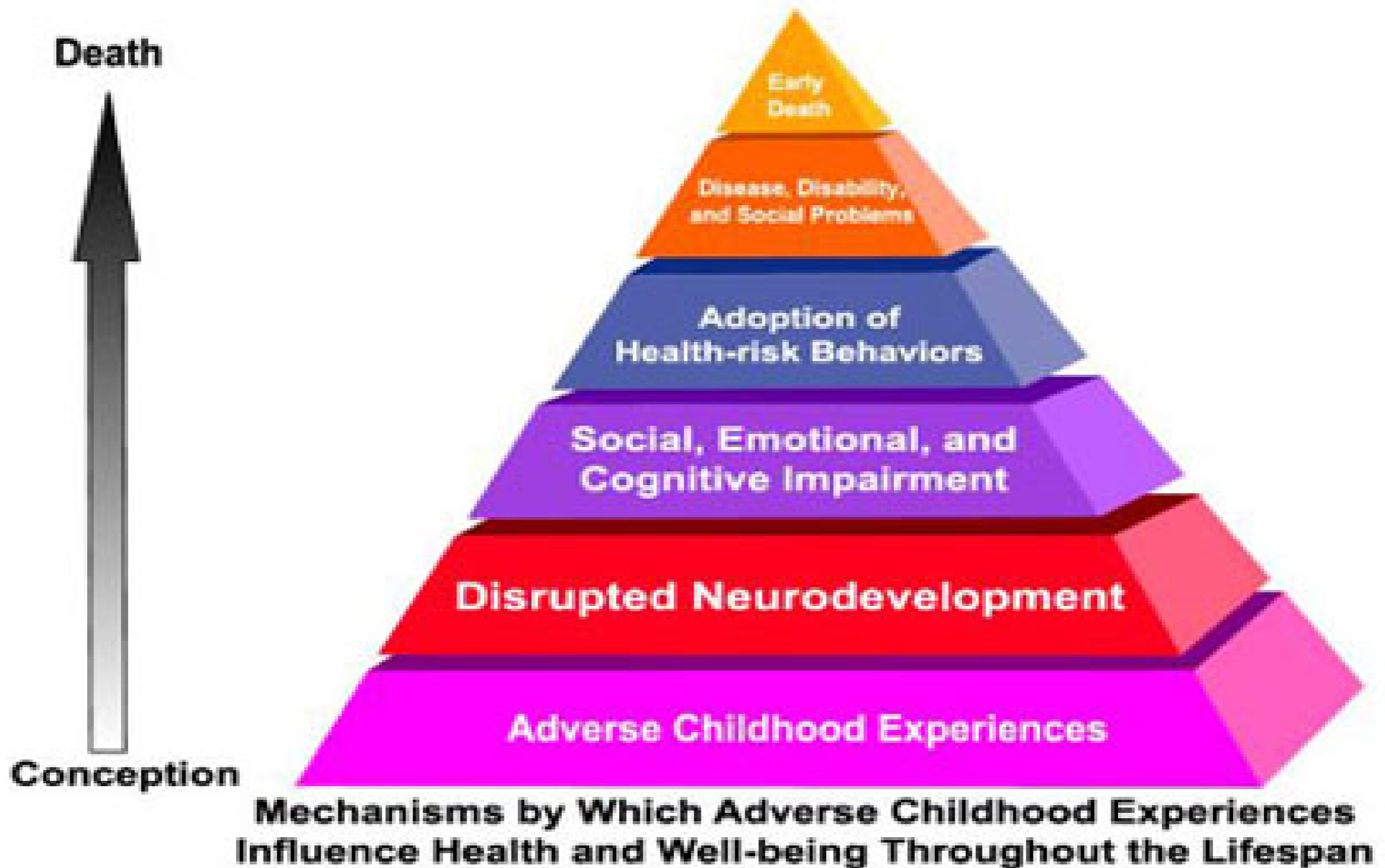
- Economic Stability
- Neighborhood and Physical Environment
- Education
- Food
- Community and Social Context
- Health Care System

# SAMHSA's 8 Dimensions of Wellness

- Human Services Dept.
- Dept. of Health Dept.
- Children, Youth and Families Dept.
- Administrative Office of the Courts
- Aging and Long Term Services
- Dept. of Finance and Administration
- Dept. of Transportation
- Dept. of Workforce Solutions
- Dev. Disabilities Planning Council
- Div. on Instructional Support and Voc. Rehabilitation
- Governor's Commission on Disabilities
- Indian Affairs Dept.
- Mortgage Finance Authority
- New Mexico Corrections Dept.
- Public Education Dept.
- Dept. of Veterans Affairs



# ACEs



# ACEs and Behavioral Health

---

- Family approach to recovery and wellness
- Trauma Informed systems
- Understand effect of trauma
- Attempt to minimize re-traumatization
- Support care staff reduce vicarious traumatization
- Trauma Competent clinical and service staff
- Know how to intervene
- See behavior as pain based
- Focus on social/emotional regulation

# ACEs and Prevention Efforts

---

- Informing local decision-making by collecting state and county ACEs data
- Increasing awareness of ACEs and emphasizing the relevance to behavioral health disciplines
- Selecting and implementing programs, policies, and strategies designed to address ACEs including efforts focusing on reducing intergenerational ACEs

# Family Focus

---

There are common sense solutions to our economic problems and to the crisis that our kids and families are facing.

In order to give New Mexico families and kids more opportunities to succeed, we must bring together programs for children and adults and take a deliberate and coordinated two-generational approach.

All programs that seek to improve child outcomes should be coordinated with services that address the needs of parents.

*Source: NMVOICES.org*



# Complex Trauma

---

Children effected by chronic developmental trauma need adults in their lives who can understand the pervasive impact. Who recognize the pain from ruptured connections can lead to a range of challenging behaviors. They need trauma informed approaches that promote healing and connection.

*Source: Bessel Van der Kolk*

# Service Array / Geo-Mapping

---

“A number of initiatives are using geospatial analysis and community needs assessments to guide place-based approaches to address social and environmental factors impacting individual and community health.”

*Kff.org/disparities-policy*

CYFD Service Array / Geo-Mapping Project

– Coop Consulting, Inc.

# Service Array

---

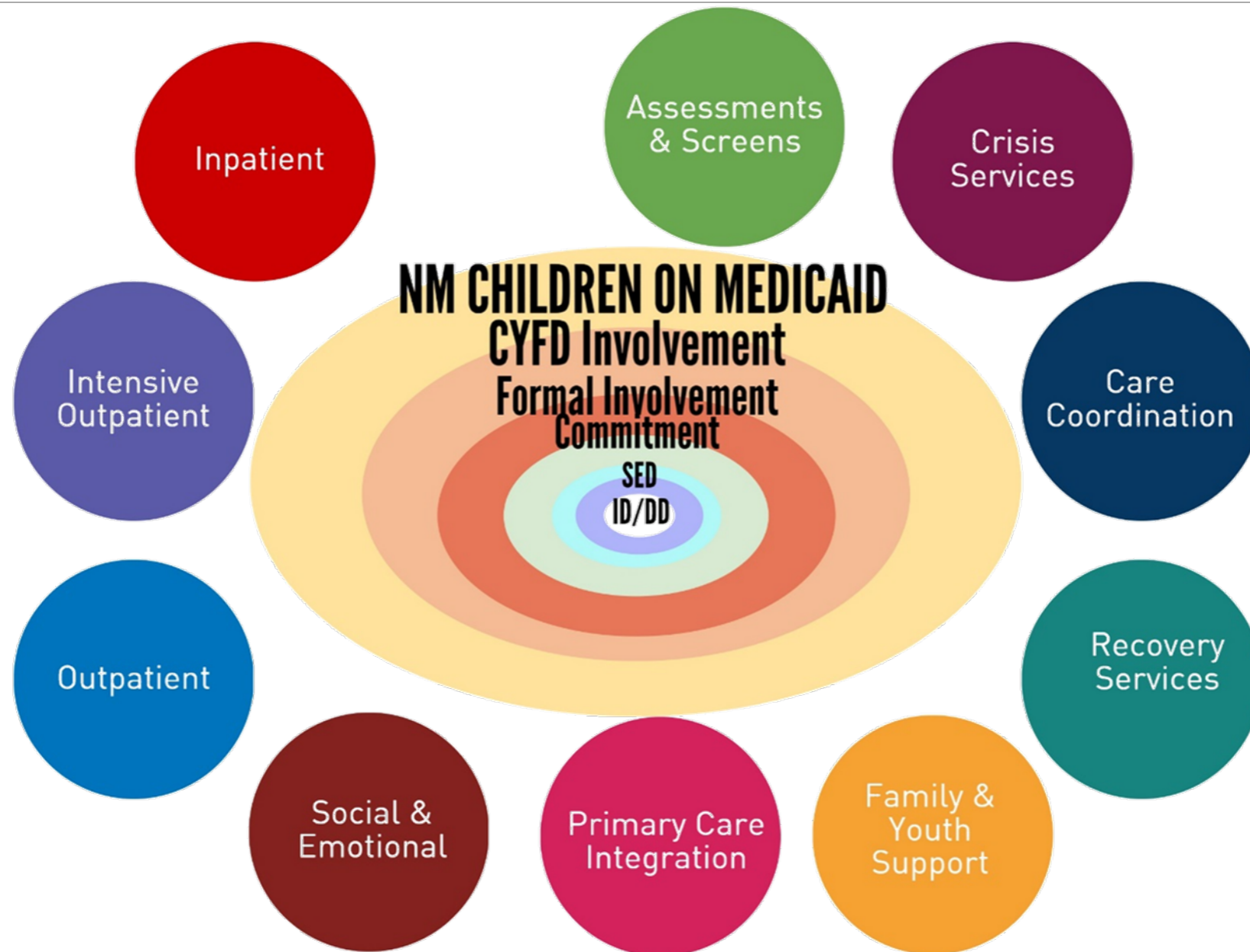
## CYFD Public Maps

- Publicly-Funded Services:  
<http://bit.ly/CYFDPublicMap>
- School-Based Health Centers:  
<http://bit.ly/SBHCMaP>
- FIT Providers:  
<http://bit.ly/FITProviderMap>

**PULLTOGETHER**.ORG

<https://pulltogether.org/resources-by-county/statewide-resource-map>

# Service Array



# CYFD's Intra- and Inter- Departmental Focused Populations and Initiatives

---

- Infants
- Family
- Complex Needs
- Multi-system Involved
- Homeless
- Developmental Approach
- Transition Age Youth

# ACEs Data

---

## CYFD Behavioral Health Services Infant And Early Childhood Mental Health



# ACEs Data

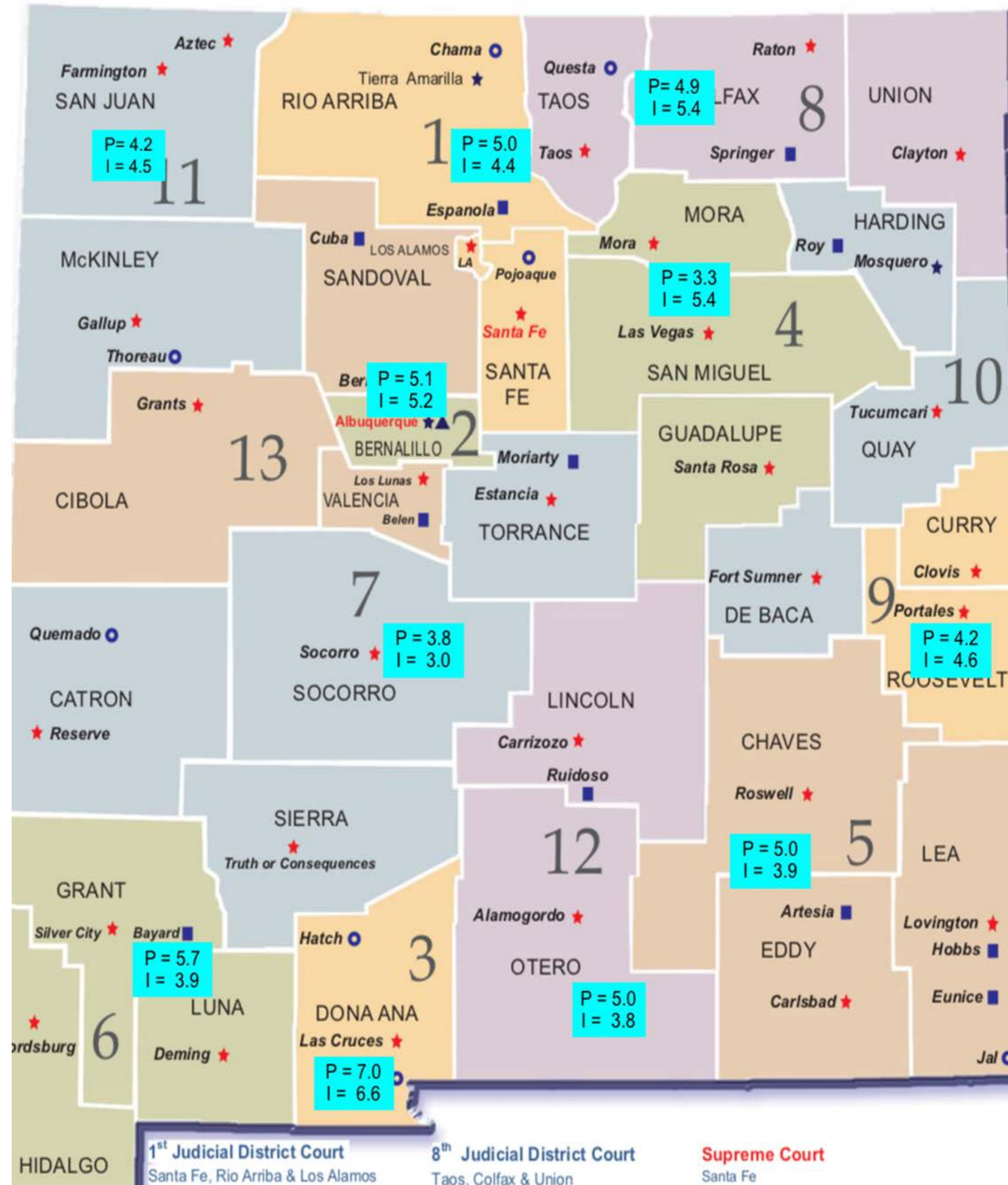
---

## High Levels Of Trauma

- Original Study = 12.5% of the General Population Has 4+ Aces
- Our Parents = 62% have 4+
- Our Infants = 69% have 4+

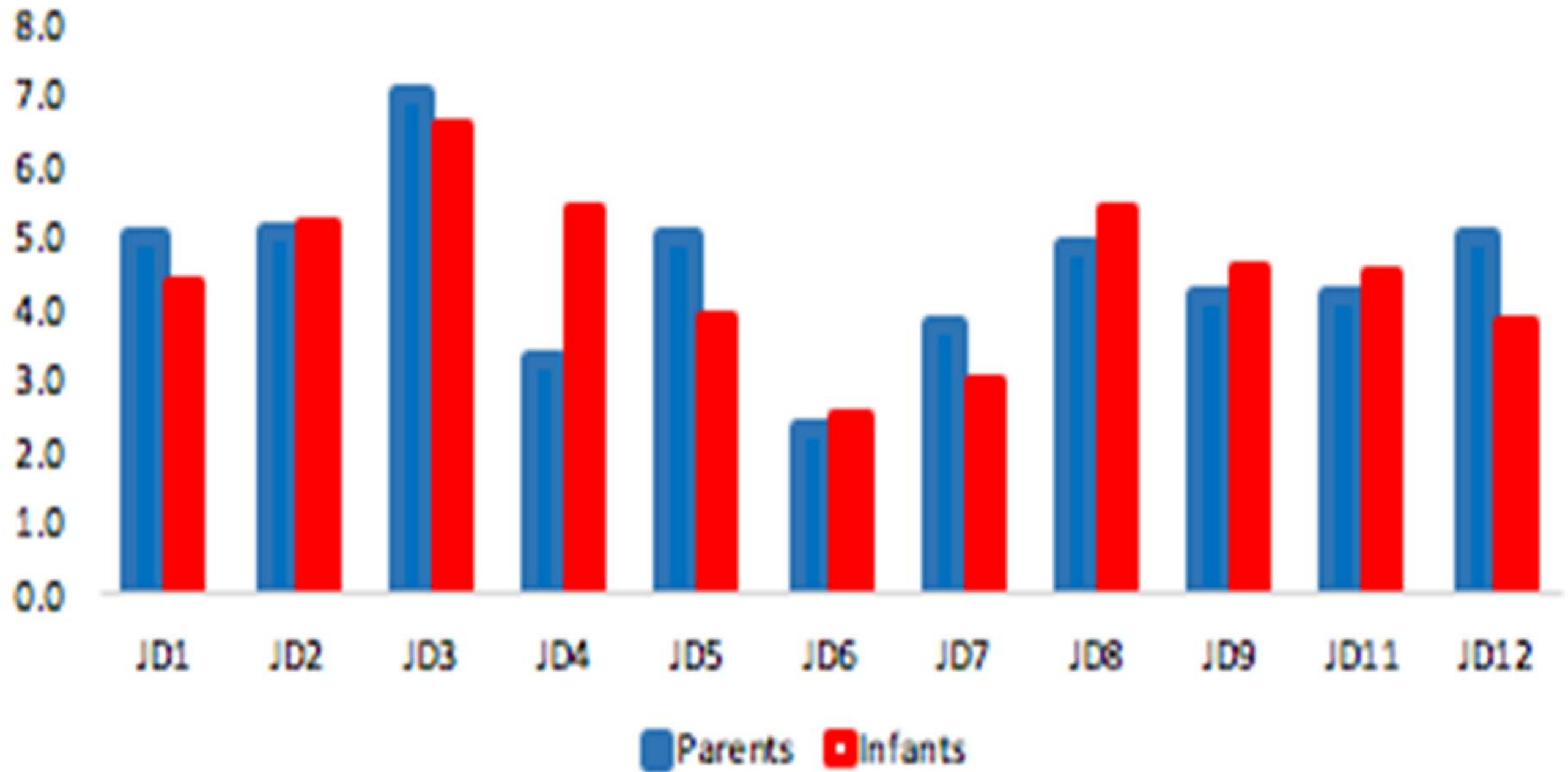
**High Levels of Trauma Need to be Treated to Improve Individuals Lives and Minimize Costs to Society.**

# STATE COURTS





## Average ACEs CYFD- BH Infant & Early Childhood Mental Health Section Clients by JD





**Children who are identified as hard to manage at ages 3 and 4 have a high probability (50:50) of continuing to have difficulties into adolescence (Campbell & Ewing, 1990; Egeland et al., 1990; Fischer, Rolf, Hasazi, & Cummings, 1984).**

# Prevention

---

## **CYFD Prevention Efforts Include:**

- Home Visiting
- Parenting Programs
- Youth Support Services

# Family Peer Support Worker

---

- Primary caregivers who have “lived-experience” of being actively involved in raising a child who experiences emotional, behavioral, mental health and/or substance use challenges.
- Have experience navigating child-serving systems and have received specialized training to empower other families who are raising children with similar experience.

**FPSW supports parents and other primary caregivers to ensure that:**

- Their voice is heard
- That their preferences are incorporated into their children’s plans of care
- That their natural support systems are strengthened.

# Youth Peer Support Worker

---

- Based on the Adult Peer Support Worker infrastructure, lessons learned from that system, and its continued focus on being youth guided, driven and directed - CYFD BHS is developing a system of Youth peer supports.
- The youth peer support system will meet the unique needs of youth and young adults making their transition into adulthood.

# Youth MOVE NM

---

Youth MOVE (Motivating Others Through Voice and Experience) NM is chapter of the Youth MOVE national organization. Youth MOVE NM connects youth that receive services or have received services in the past and are active advocates in their community.

## **Mission:**

*Youth advocating for youth to push on when we feel we have no push left, by empowering youth voice to create a brighter future for NM.*



# Wraparound Definition

---

“Wraparound is an intensive holistic method of engaging with individuals with complex needs so that they can live in their homes and communities and realize their hopes and dreams.”

*(From The National Wraparound Institute)*

# Wraparound Eligibility

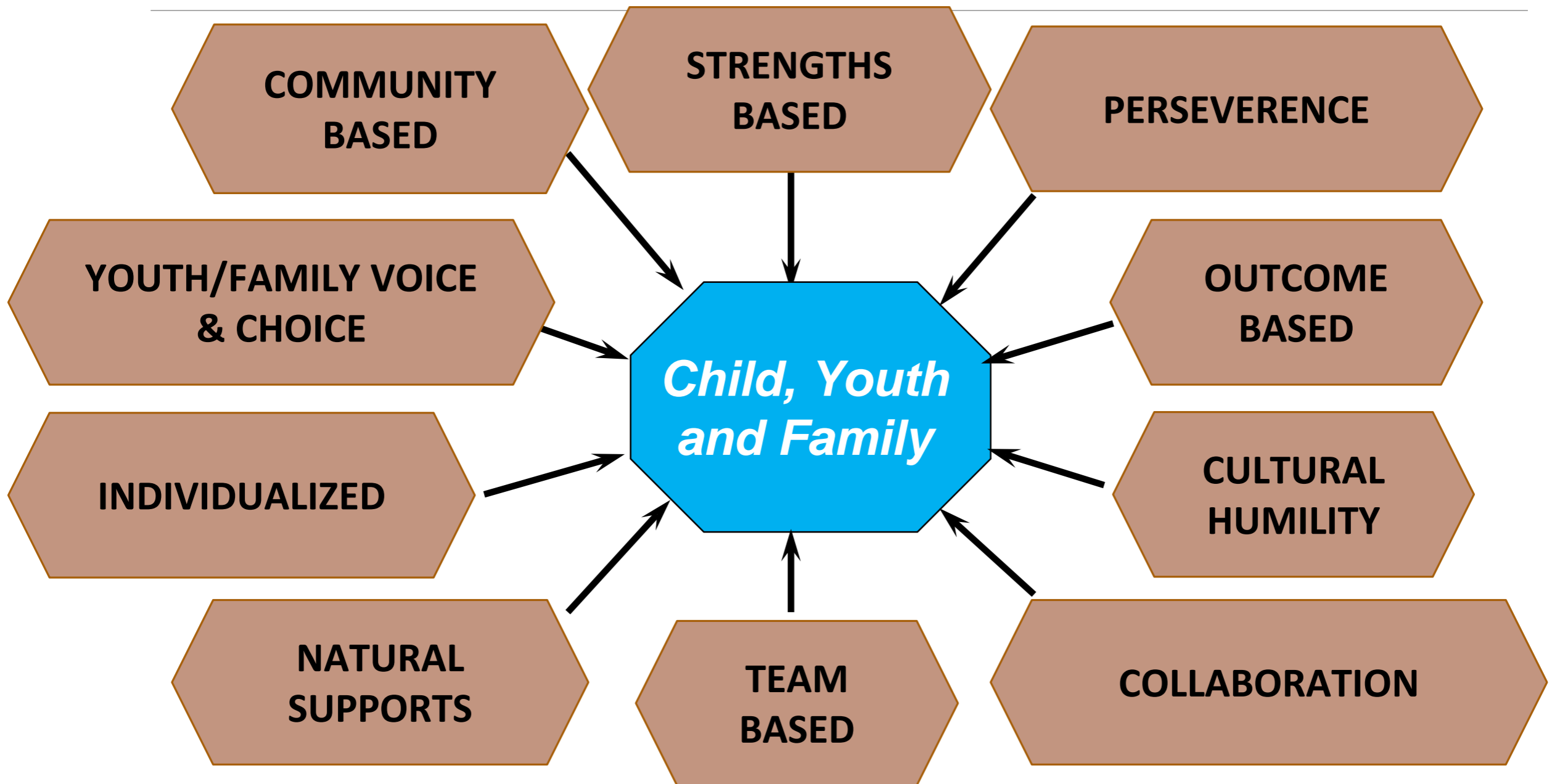
---

**Children and youth ages 4-21 years, experiencing the following:**

- Serious Emotionally Disturbed (SED) diagnosis;
- Multi-system involvement; i.e. two or more systems involvement including Juvenile Justice, Protective Services, special education, or behavioral health;
- At-risk of or in an out-of-home placement, or previous out-of-home placement, incarceration, or acute hospitalization within a two-year period prior to evaluation; and
- Functional impairment in at least two areas (home, school, or community), as measured by a functional assessment tool such as the Child and Adolescent Needs and Strengths (CANS).



# NM Wraparound CARES Values



# Wraparound Costs and Outcomes

---

Nationally range from \$580 to \$1900 per child per month.

## Outcomes include:

- Reduced costs of care for community-based care versus out-of-home placements
- Improved school attendance and performance
- Increased behavioral and emotional strengths
- Improved clinical and functional outcomes
- Reduced suicide attempts; and
- Decreased contacts with law enforcement

# Community Behavioral Health Clinicians (CBHCs)

---

- Transfer of 36 CBHC positions from JJS to BHS
- CBHCs consult, assess, coordinate, team and advocate internally and externally for the target population children and youth in PS, JJ, Crossover.

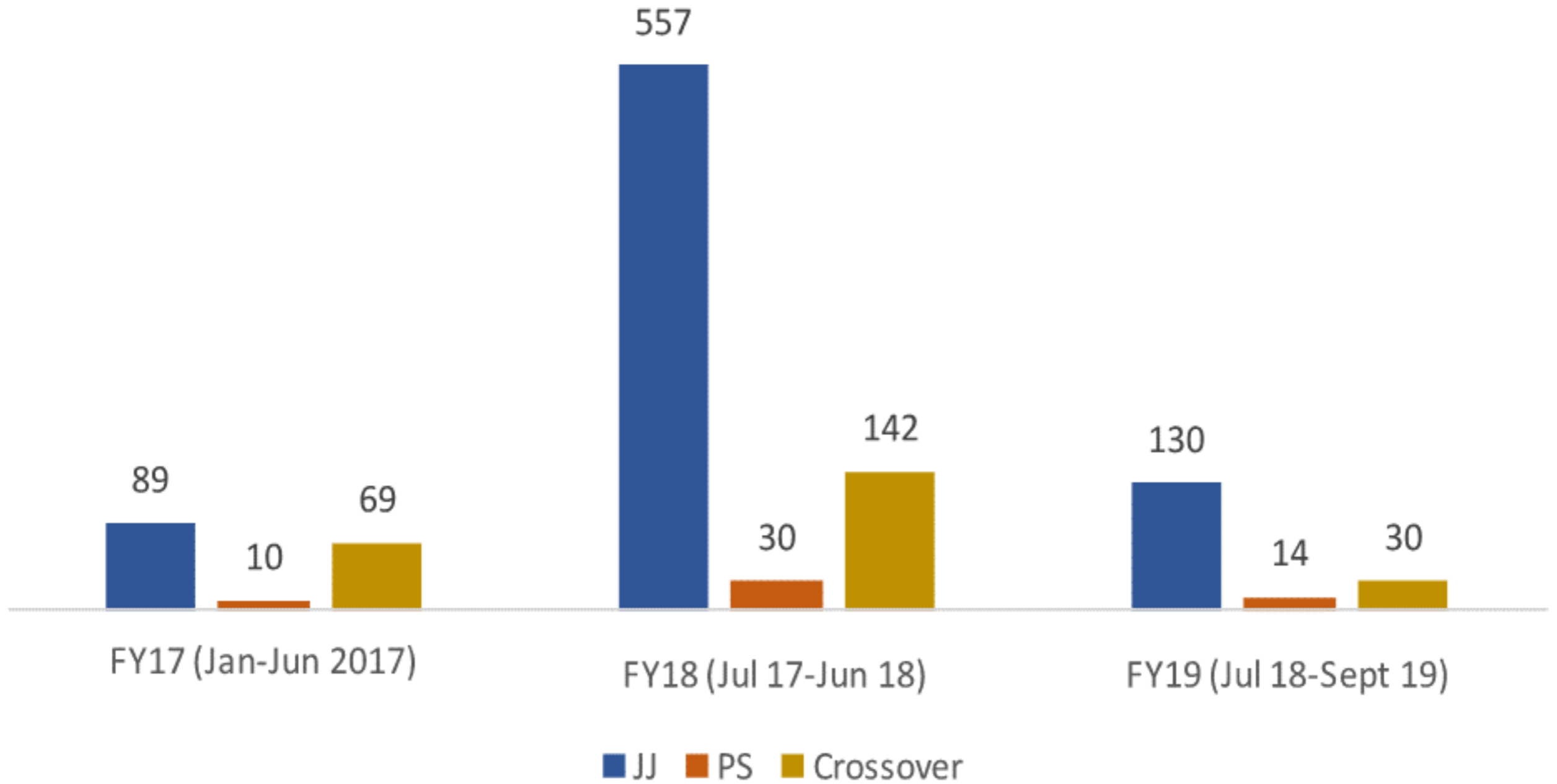
# CANS & ACEs

- CYFD created an algorithm to have the CANS generate an ACE score for youth based on the a subset of 20 trauma questions of the CANS

<b>Adverse Childhood Experiences (ACE)</b>							
0 = no need detected, 1 = possible need, 2 = action needed, 3 = immediate action needed, U = unknown							
	0	1	2	3	NA	U	
1. SEXUAL ABUSE - (1,2,3)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	=1
2. PHYSICAL ABUSE - (1,2,3)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	=1
3. EMOTIONAL ABUSE - (1,2,3)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	=1
4. NEGLECT - (1,2,3)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	=1
6. WITNESS TO FAMILY VIOLENCE (1,2,3)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	=1
or 34. FAMILY (3 only)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	

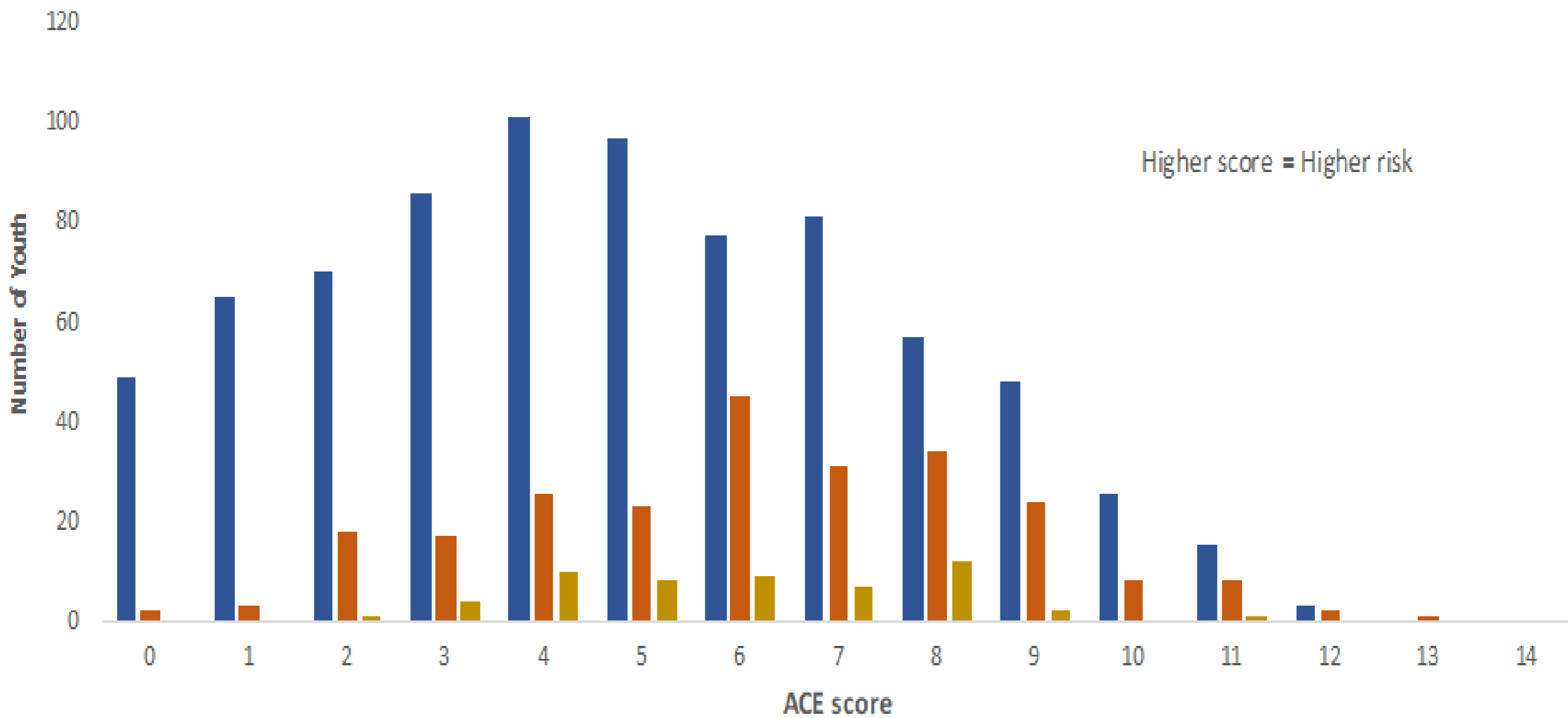
- CYFD has begun collecting ACE scores for the individuals served by state funded services
- ACES are collected for infants/young children and caregivers in Infant Mental Health services

# Number of Baseline CANS



## Number of Youth with each ACE Score (Dec 2016-Aug 2018)

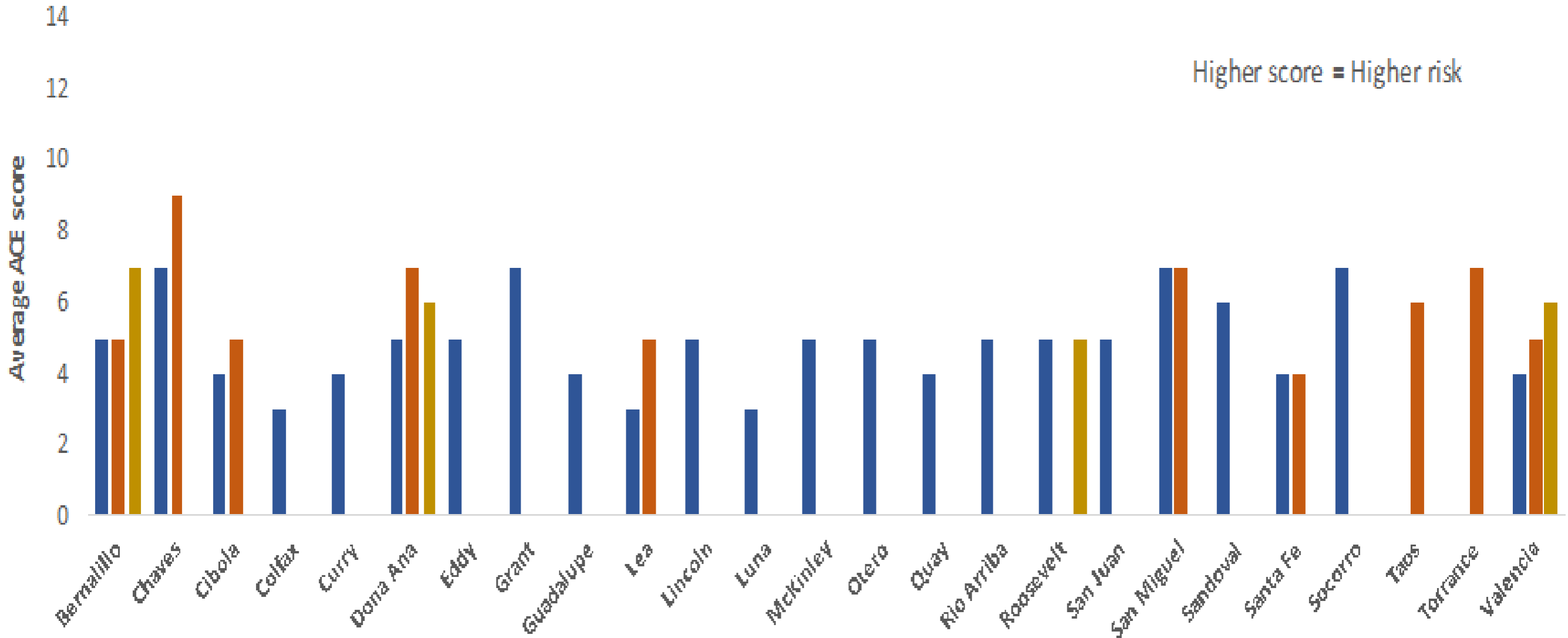
■ JJ only (n=775) ■ Crossover (n=242) ■ PS only (n=54)



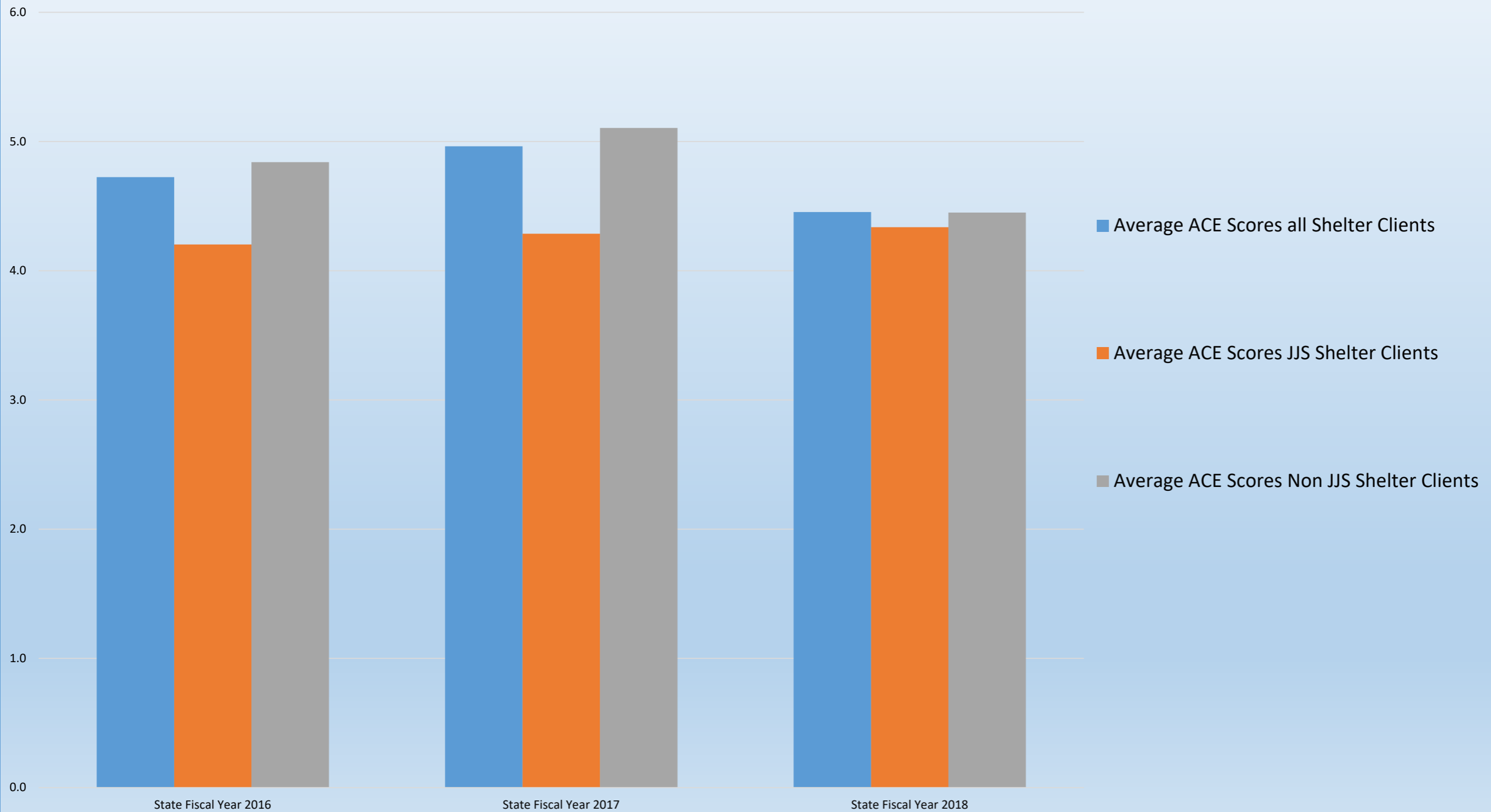
### Average ACE Score by County\* (Dec 2016-Aug 2018)

■ JJ only ■ Crossover ■ PS only

Higher score = Higher risk

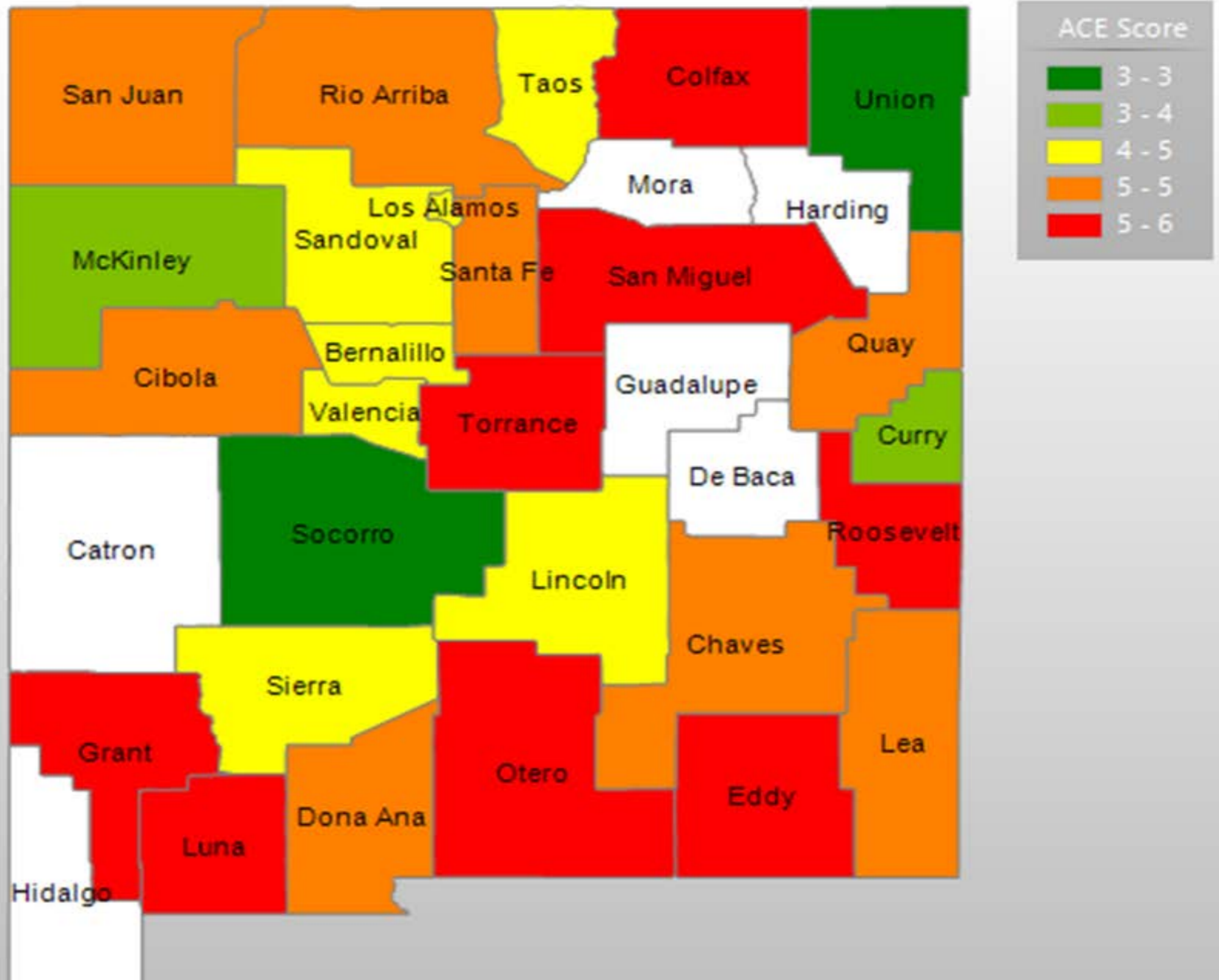


# Average Shelter ACE Scores by State Fiscal Year

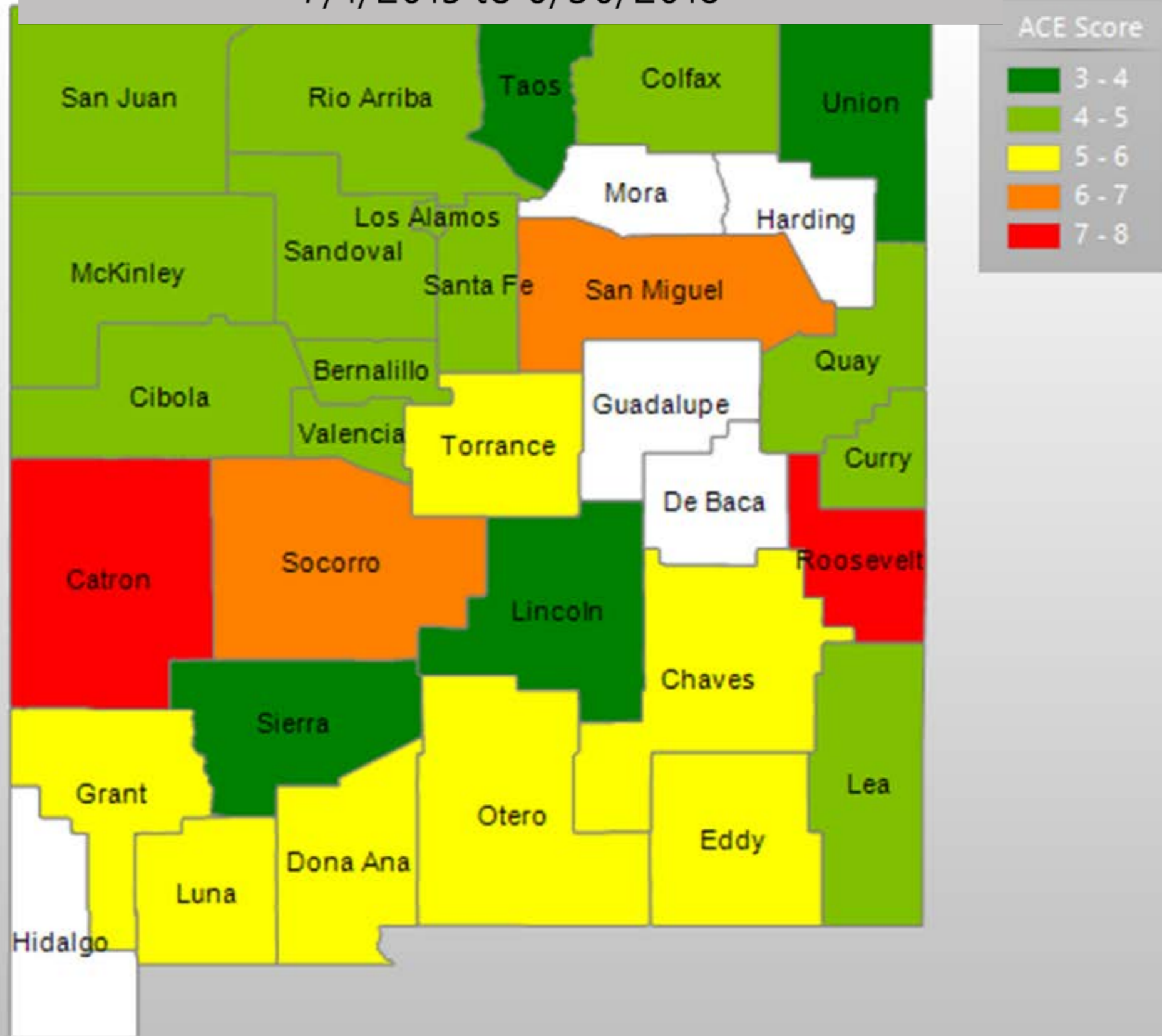




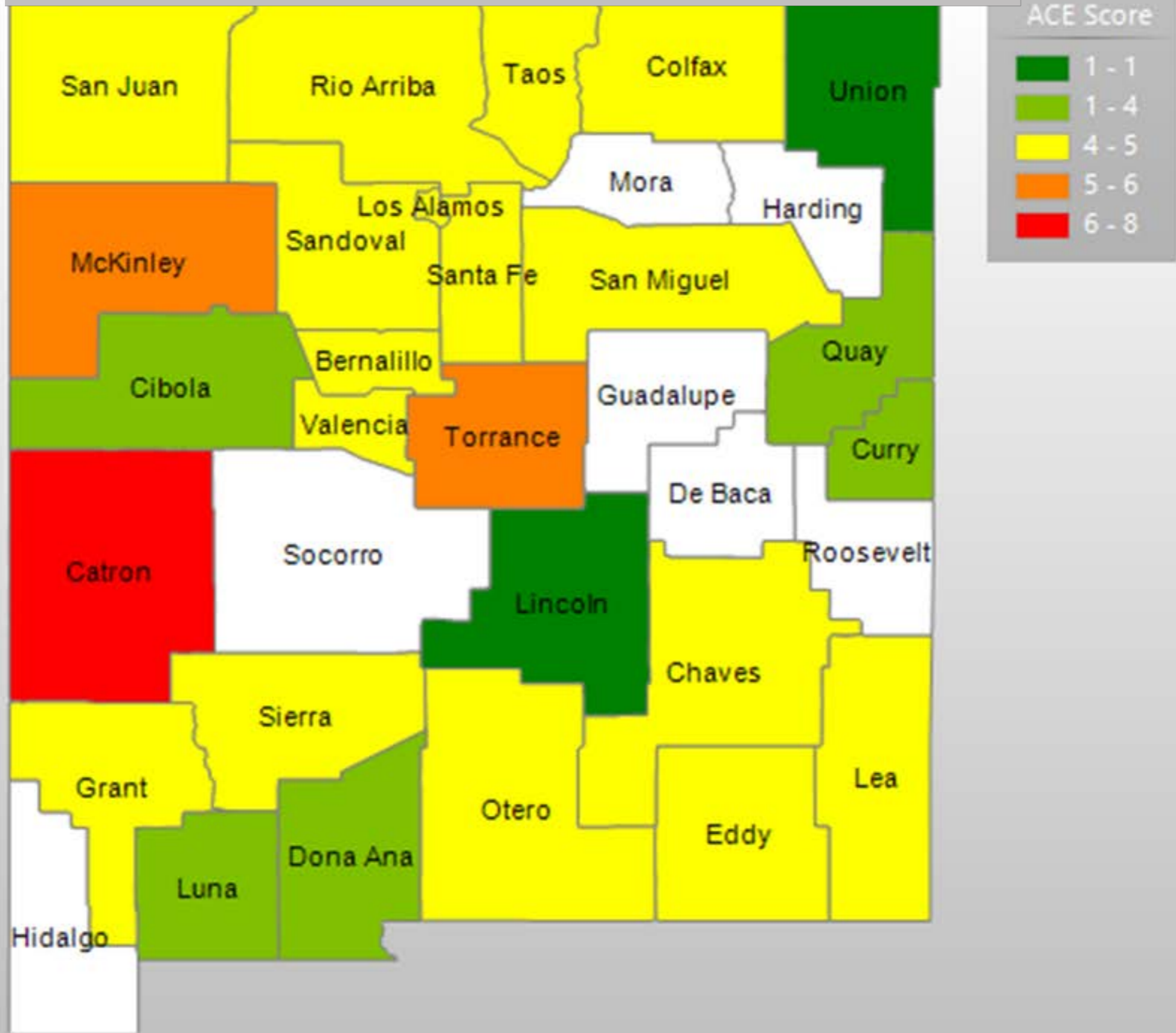
# Shelter Average ACE Scores by County From 7/1/2015 to 6/30/2016



# Shelter Average ACE Scores by County From 7/1/2015 to 6/30/2018



# Shelter JJS Referred Clients Average ACE Scores by County From 7/1/2015 to 6/30/2018



# Adolescent Substance Use Reduction Effort (ASURE)

---

ASURE is tasked with implementing training and the development/deployment of substance and co-occurring capable youth and young adult treatments (Intensive Outpatient Programs) and Youth Support Services (YSS).

- **Trainings:** Community Reinforcement and Family Training (CRAFT), Motivational Interviewing, Global Appraisal of Individual Needs Short Screener (GAIN-SS), American Society of Addiction Medicine (ASAM) assessment and placement criteria, and Youth Support Services (YSS).
- **Healthy Transitions:** Improves access to treatment and support services for 16 to 26-year-olds who have, or are at risk of developing, a serious mental health condition.
- **ASURE - Treatment Implementation:** Increases access to and improve the quality of treatment and support services for youth (and their families) ages 12-21 with substance and co-occurring disorders.

# Youth Support Services are... Life Skills

---

The World Health Organization has defined life skills as

"the abilities for adaptive and positive behavior that enable individuals to deal effectively with the demands and challenges of everyday life."

*www.who.int*

# Why YSS?

---

## *It Builds Resilience*

- **Protective Factors:** Something that protects youth from the influence of risk factors (violence, addiction, abuses, etc.) on their lives.
- **Core Competencies:** fundamental skills for adult independent successful living
- **Resilience:** When a youth has positive outcomes despite repeated exposure to risk factors.

The nature of a "touchstone" service is that Youth can maintain contact with the Life Skills Coach before, during and after treatment episodes.



# Where is New Mexico Now?

---

- High rates of trauma, poverty, and substance use

<b>Prevalence of Most Expensive Child Behavioral Health Disorders in New Mexico, 2015</b>		
<b>Diagnosis</b>	<b>Estimated Number of NM children</b>	<b>Expenditures</b>
Post Traumatic Stress Disorder	22,063	\$18,693,766
Mood Disorders (Depression, Bipolar and Other/Unspecified)	77,222	\$16,981,272
Attention Deficit Hyper-activity Disorder	60,674	\$14,698,563
Adjustment disorder	40,817	\$10,673,540
Oppositional defiant disorder	69,500	\$7,329,244

Source: Medicaid, CDC and Cornelius et al. 2014\* Number may be unreliable due to lack of national epidemiological survey data

- New Mexico spends 48% of expenditures on acute, out of home treatment



# Youth Support Services are... Life Skills

---

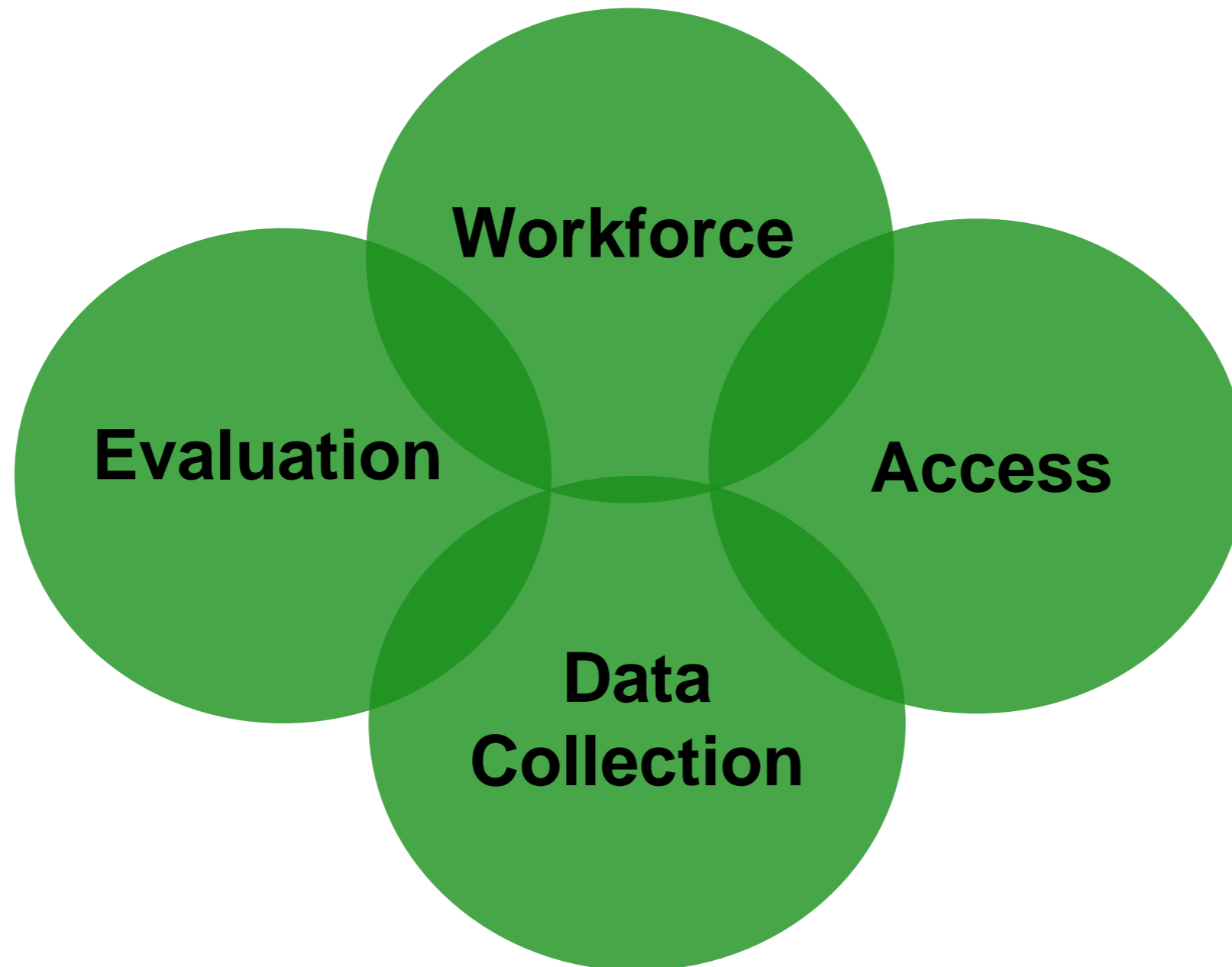
The World Health Organization has defined life skills as

"the abilities for adaptive and positive behavior that enable individuals to deal effectively with the demands and challenges of everyday life."

*[www.who.int](http://www.who.int)*

# What Obstacles Do We Face?

---



# Opportunities

---



Public Law 115-123  
DIVISION E—HEALTH AND HUMAN SERVICES EXTENDERS  
TITLE VII—FAMILY FIRST PREVENTION  
SERVICES ACT

2



# What We've Identified as Necessary for NM's Children's BH System

---

- Trauma Responsive System
- System that is Responsive to the Needs of Priority Populations
- Statewide Access & Quality & Coordination

*Children, Youth and Families Department, in partnership with Behavioral Health Services Department and the Behavioral Health Collaborative,*

*Invites you to participate in*



## *Strategic Planning, Development, and Action for New Mexico's Children and Families Behavioral Health*

***When:*** September 25, 2018

***Time:*** 8:30-4:30 lunch provided

***Where:*** Marriott Pyramid Hotel

5151 San Francisco Rd. NE

Albuquerque NM 87109



*Thank you!*

---



Children Youth & Families Department

**PULLTOGETHER.ORG**