

September 15, 2023

The Honorable Robyn K. Kennedy

Senate Chair, Joint Committee on Children, Families, and Persons with Disabilities

The Honorable Jay D. Livingstone

House Chair, Joint Committee on Children, Families, and Persons with Disabilities

Dear Chair Kennedy, Chair Livingstone, Vice Chairs, and Committee members,

The Children's League of Massachusetts (CLM) is a statewide non-profit association of almost 60 private and public organizations that collectively advocate for the availability, accessibility, and quality of services that are in the best interest of the Commonwealth's children, youth, and families. We are writing **in support of "resolve providing for an investigation and study by a special commission relative to children and adolescents with intensive behavioral health needs" (S.88 / H.193).**

This legislation pulls together a robust group of child and adolescent welfare experts to examine the current availability of, and barriers to providing, behavioral health services and treatment to children and adolescents with intensive behavioral health needs. Currently, there are many youth both living at home and in foster care with a variety of behavioral health needs that are not being adequately addressed through inpatient psychiatric hospitalizations, Community Based Acute Treatment (CBAT) services, or existing residential or community treatment models. This bill ensures community-based providers who implement the programs for this population alongside and on behalf of state agencies have a seat at the table with state agency staff and involved families. Importantly, the legislation calls for the creation of aggregate demographic and geographic profiles of the population and the examination of best practices found in research and practice. We believe this Commission's work will lead to the development of innovative models to improve targeted service delivery, especially for youth whose needs cross over multiple agencies.

As mental health issues have risen, so have the numbers of youth with intensive behavioral health needs and the extent of behaviors that put youth and those who care for them at risk. The passage of the bill this session is essential because youth and providers in congregate care are living in crisis now. Massachusetts has attempted to slowly reduce reliance on congregate care in child welfare and juvenile detention. The unintended consequence has been an increased concentration of "high acuity" adolescents with intensive behavior health needs residing in other care settings, creating a mismatch between the youth's behavioral health needs and the care setting where they are placed. When the provider can't meet these needs, it fuels highly disruptive, dangerous environments that put youth themselves and their peers at risk of harm and increased trauma, and strains the already overstretched workforce. This increased trauma disrupts the healing milieu, sets back progress, and undermines the effectiveness of the care settings. (See more details in CLM's most recent report on high-acuity youth [here.](#)) This legislation supports much-needed collaboration to address these multi-faceted challenges.

With the coinciding implementation of the Behavioral Health Roadmap already underway, this legislation supports a cross-agency approach to expanding access to treatment, enhancing treatment effectiveness, and improving health equity for children and adolescents, both short and long term. CLM's work with Adoption providers gives just one lens through which we see complex intensive behavioral needs that challenge families and require cross-agency support. CLM has heard anecdotally that a significant number of adolescents receiving DMH support are adoptees. We also hear and see through research that adoptive families see more difficult to control behaviors emerge as their children enter adolescence. When these families have "aged out" of DCF's direct post-adoption services, they become overwhelmed during this more challenging time in a youth's life. A heartbreaking pattern seems to be resulting in more and more adoptees being placed in group home settings with adoptive families are unwilling to take them back in. Robust and well-rounded stakeholder work is needed to dig into these dire cycles associated with intensive behavioral health needs and the related factors.

Through this bill, the commission can inform the creation, coordination, and enhancement of exiting preventative measures and supports to ensure permanency goals and promises are kept by Massachusetts state agencies and provider organizations. More work is needed to effectively aid these children and families no matter what stage they are in and what crossroads they are at. Bringing cross-agencies together to better navigate these tricky and worsening conditions can support the agency and provider staff greatly impacted by these conditions. Youth and providers have an exceptional need for this bill. Please vote it out of committee and work diligently for its passage without delay.

Sincerely,



Rachel Gwaltney
Executive Director
Children's League of Massachusetts

Endorsing Members of the Children's League of Massachusetts

Ascentria Care Alliance
Devereux Advanced Behavioral Health
Family Continuity
Gándara Center
Hillcrest Educational Centers
HopeWell Inc.
LUK, Inc.
MARE (Massachusetts Adoption and Resource Exchange)
Massachusetts Society for the Prevention of Cruelty to Children
NFI Massachusetts, Inc.
Roxbury Youthworks, Inc. (RYI)
St. Ann's Home, Inc.
Youth Villages MA