

Network on Youth Mental Health Care

Objectives

One-fifth of the children in the United States have a diagnosable mental disorder. About 10 percent of American children receive some form of mental health care each year. Unfortunately, many of those who do receive treatment may not be getting *effective* treatment: Most of the mental health interventions children receive today have not been shown scientifically to work.

It's not that effective treatments don't exist. In fact, there are evidence-based interventions for most of the problems that bring children and adolescents into treatment. The problem is, most of these interventions are used primarily in universities and other research settings. Out in the field, in most clinical settings, care is generally not guided by empirical evidence, and the outcomes are not nearly as good.

Why is there such a gap between state-of-the-art, evidence-based treatment and what is typically delivered in practice? And how can scientific advances be brought into real-world settings, where they have the potential to benefit millions of children with mental disorders? These are the questions that drive the Network on Youth Mental Health Care. Its objectives are to identify scientifically validated treatments, make them practical for use in clinical settings, and develop strategies to encourage and facilitate their implementation — bringing appropriate, effective, and efficient care to young people with mental illness.

Approach

The Network's core group members represent the fields of psychology, pediatrics, psychiatry, sociology, social work, anthropology, statistics, family advocacy, and state mental health program administration. They began their work by identifying the treatments that have the strongest scientific support. Next, they examined reasons for the gap between science and practice — including inadequate financing, inappropriately designed benefits, and fragmentation of services — and they identified steps that could bring research findings into real-world settings. From that exploration grew two complementary, multi-site research projects:

Clinic Treatment Project. This study will help practitioners in busy, community-based clinics incorporate evidence-based procedures into their work, and then assess whether they adhere to these procedures and how this affects outcomes for the children and families they serve. The researchers are testing two different approaches to organizing and delivering evidence-based practices: standard manuals, used exactly as they were originally tested in clinical trials, and modular manuals that can be individualized for each child using a guiding clinical algorithm. The special significance of the study lies in its use of real-world clinics, the practitioners they employ, and the children they ordinarily see.

Clinic Systems Project. The second project is a descriptive study — the first ever to examine the factors that are likely to influence the use of evidence-based practices in mental health clinics and systems. The factors being studied include governance structures across several service sectors, including mental health, child welfare, juvenile justice, education, and health; service financing structures and reimbursement mechanisms; and service provider organizations. The information for this project will be provided by the CEOs and clinical staff of 200 clinics nationwide.

Progress and Plans

The findings of the treatment and systems projects will be used to move the Network from a focused test in several clinics to a wider dissemination and assessment across a broad range of providers and multiple systems of care. Findings from the Clinic Treatment Project will determine *what* should be disseminated, while the Clinic Systems Projects will suggest *where* and *how* to expand the use of evidence-based practices.

In the early phase of the Network, the group held a series of discussions with policy experts, practitioners, government officials, managed care directors, and other stakeholders. One of the more intriguing findings to emerge from these meetings was that current fiscal pressures throughout the nation make this a good time to propose changes in practice patterns — especially changes that are likely to make treatment more effective and ultimately reduce the total costs of care. By focusing on key policy levers — governance, financing, reimbursement, and benefits design — the Network could play a significant role in improving the delivery of effective mental health services to children and families.

For additional information, contact the Program Administrator, Program on Human and Community Development, (312) 726-8000 or 4answers@macfound.org. Also see our Web page: www.macfound.org.

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