



Child Poverty Council

Testimony by

Charlie Biss, Director

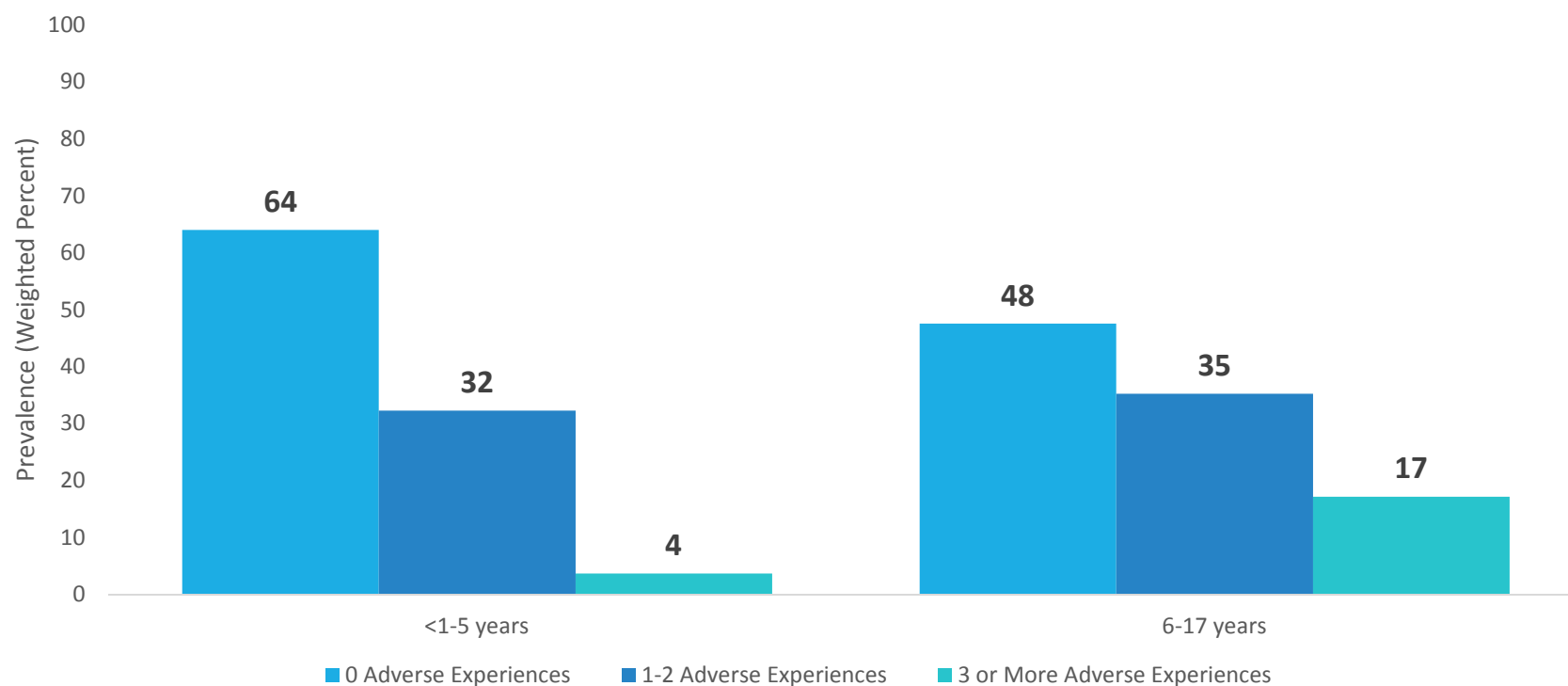
Laurel Omland, Assistant Director

Child, Adolescent & Family Unit

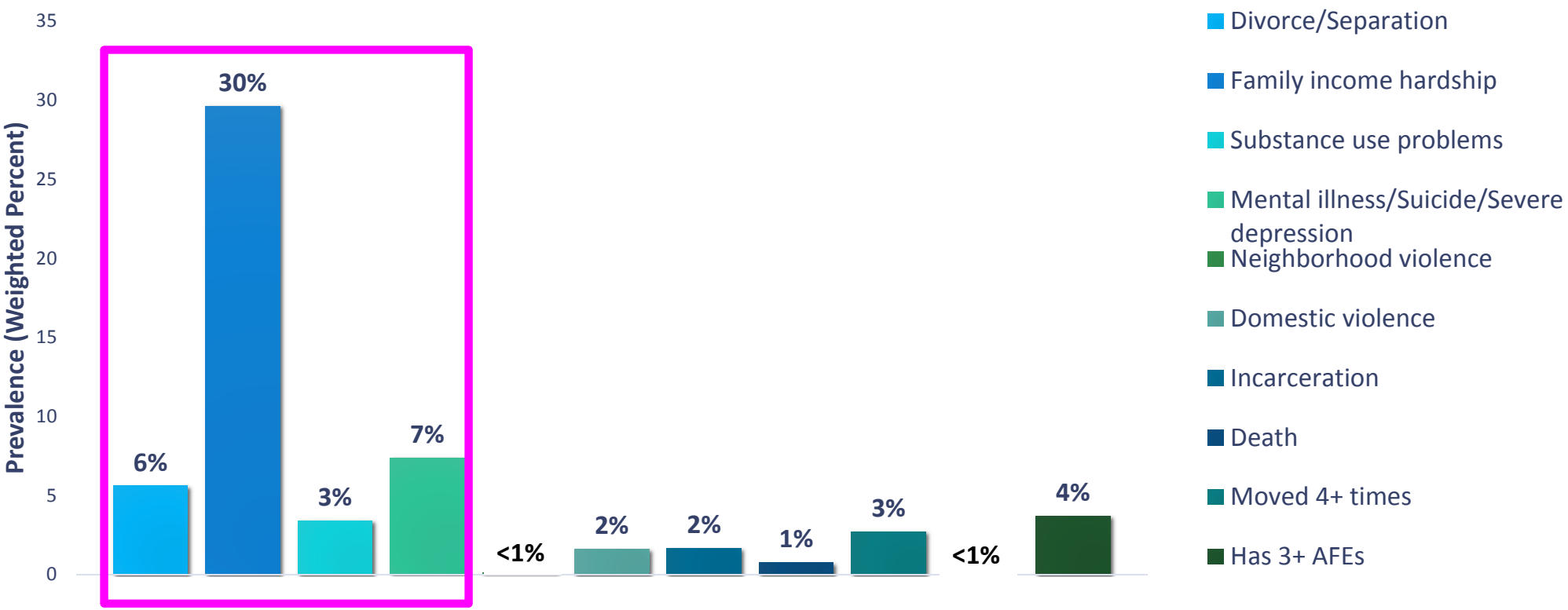
Department of Mental Health

December 21, 2017

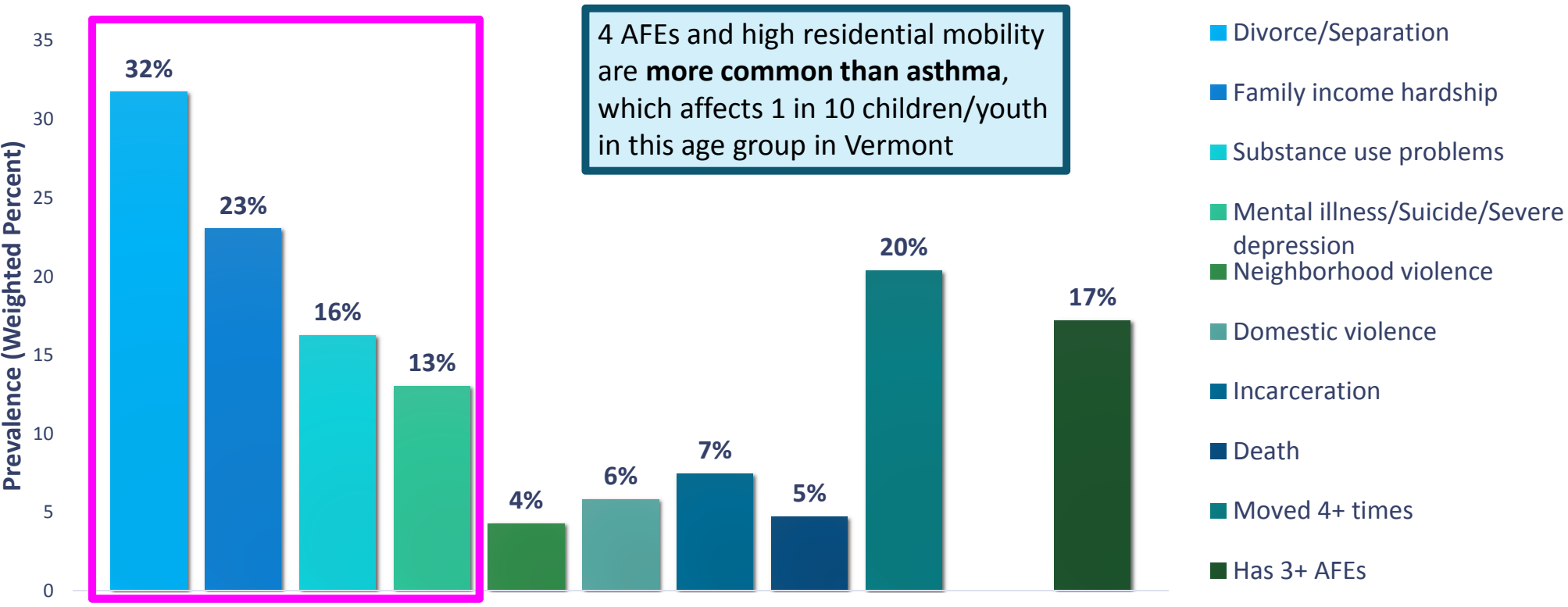
Burden of Adverse Family Experiences among Vermont Children, <1-17 years, by Age Group, 2016 National Survey of Children's Health



Burden of Adverse Family Experiences and Residential Mobility among Vermont Children <1-5 years, 2016 National Survey of Children's Health



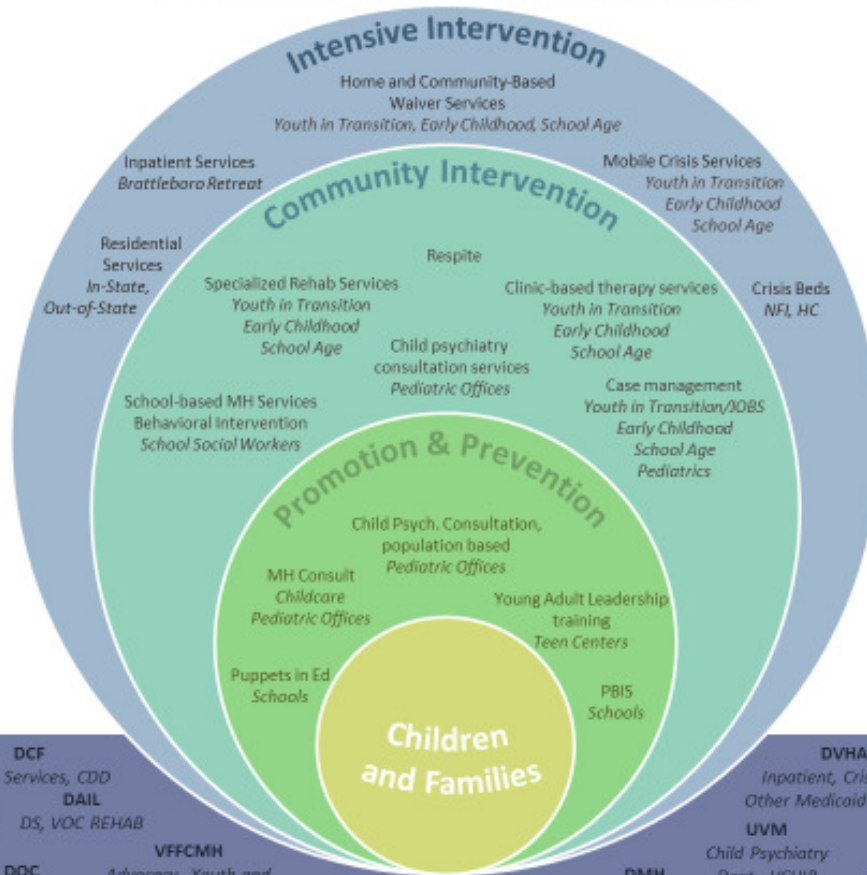
Burden of Adverse Family Experiences and Residential Mobility among Vermont Children & Youth 6-17 years, 2016 National Survey of Children's Health



Do Vermont Children with Family Income Hardships Show Higher Odds of ...

Children <6 years		
Demonstrating less resilience	No, young children with a family income hardship are no different than children without a family income hardship	1.1 (0.5, 2.5)
Children 6-17 years		
Demonstrating less resilience	Yes, children with a family income hardship have almost 3x the odds compared to children without a family income hardship	2.7 (1.7, 4.5)
Not sharing ideas or talking about things that matter	Yes, children with a family income hardship have almost twice the odds compared to children without a family income hardship	1.8 (1.1, 2.9)
Families of Children		
Not talking together when facing problems	No, families of children under 12 years with an income hardship are no different than families without a family income hardship	2.1 (1.0, 4.5)
	No, families of children 12-17 years with an income hardship are no different than families without an income hardship	0.9 (0.4, 1.9)
Not working together often when facing problems	No, families of children under 12 years with an income hardship are no different than families without a family income hardship	1.6 (0.7, 3.5)
	No, families of children 12-17 years with an income hardship are no different than families without an income hardship	1.3 (0.6, 2.7)
Not drawing on strengths when facing problems	No, families of children under 12 years with an income hardship are no different than families without a family income hardship	2.1 (0.9, 4.6)
	No, families of children 12-17 years with an income hardship are no different than families without an income hardship	2.0 (0.8, 5.2)
Not able to stay hopeful when facing problems	No, families of children under 12 years with an income hardship are no different than families without a family income hardship	2.3 (1.0, 5.5)
	No, families of children 12-17 years with an income hardship are no different than families without an income hardship	2.8 (1.0, 8.1)
Not able to handle demands of raising children	Families with an income hardship report they have a harder time handling the demands of raising children than those families without an income hardship	1.6 (1.1, 2.4)
Don't have someone to turn to for emotional support	No, families with an income hardship are no different than families without an income hardship	1.4 (0.9, 2.4)
Don't know where to go for help in the family's community	Families with an income hardship have 4x the odds of not knowing where to go for help in their community compared to those families without an income hardship	4.2 (2.4, 7.6)

Children's Mental Health System of Care



Acronyms

Providers

- DA – Designated Agency
- DH – Designated Hospital
- HC – Howard Center
- NFI – Northeastern Family Institute
- SSA – Specialized Service Agency

State Government

- AOE – Agency of Education
- DAIL – Dept. of Disabilities, Aging, and Independent Living
- DCF – Dept. for Children and Families
- DMH – Dept. of Mental Health
- DOC – Dept. of Corrections
- VDH – Dept. of Health
- ADAP – Alcohol Drug Abuse Programs at VDH
- EPI – Epidemiology at DMH/VDH
- MCH – Maternal Child Health at VDH

Partners and Programs

- PBIS – Positive Behavioral Intervention and Supports
- UVM – University of Vermont
- VCHIP – Vermont Child Improvement Project
- VFFCMH – Vermont Federation of Families for Children's Mental Health

Supported By

DCF Family Services, CDD	DVHA Inpatient, Crisis Beds Other Medicaid providers
AOE LEAs	UVM Child Psychiatry Dept., VCHIP
DAIL DS, VOC REHAB	VDH ADAP, EPI, MCH
VFFCMH Advocacy, Youth and Family Voice	DMH 10 DAs, 1 SSA, 1 DH
DOC Services for YIT	

What are the threats/challenges?

- Workforce
- Significant need
- Medicaid coverage

How are we strengthening families?

- Sustain Act 264 commitment to families
- Supports for families in community
- Strengthening Families framework 5 protective factors
- The primary protective factor for children & youth is having an adult who cares about them
- Integrating services – with primary care, developmental services, early childhood, schools
- Building Flourishing Communities initiative
- Apply resources across the public health continuum of promotion, prevention, early intervention – intensive intervention