



## Preserving Resources for Pennsylvania's Families With Children with Behavioral Health Challenges

Every day millions of families struggle to meet the needs of their children with behavioral health challenges. Many of these families do not have adequate resources to care for their loved one at home or maintain the least restrictive setting at school without additional support. Pennsylvania recognized this need and responded by creating Behavioral Health Rehabilitative Services (BHRS). BHRS are a worthwhile investment, a less costly and more productive option than institutionalization.

*"Without the Behavioral Health Rehabilitative Services support the Department of Public Welfare provides, many youth with behavioral health challenges will be at great risk of costly institutional placement in the mental health, juvenile justice or other systems."*

In FY 2010-2011, the Department of Public Welfare provided support services to 796,895 people who need behavioral health services<sup>1</sup>. In-home behavioral health supports as well as school- and community-based behavioral health services enable families to remain intact. BHRS support parents and others in the community in their ability to care for these youth. They also empower youth to overcome some of their challenges through learning new skills that will

support a more independent and meaningful life in the community. These services provide a unique ability for people with expertise in behavioral health care to connect to and help youth unlikely to find the same intensity and individualized service in *any* institution, including schools, residential homes, group homes or detention centers.

Yet, continued support of these programs that help these most needy families is at risk. Families already overwhelmed are now uncertain that both parents will be able to continue working, or that their children have access to the treatments they need. Without the BHRS support the Department of Public Welfare provides, many youth with behavioral health challenges will be at great risk of costly institutional placement in the mental health, juvenile justice or other systems.

<sup>1</sup> DPW By The Numbers, <http://www.dpw.state.pa.us/publications/dpwbythenumbers/>,



Families have already absorbed cuts to these services and the threat of more cuts will devastate them. If additional cuts are realized, it will also be counterproductive to Pennsylvanians for other reasons. Cutting costs for behavioral health services is a *de facto* redirection of resources from in home care to other institutional systems. These systems lack the expertise and skill to help this population. It is also at cross purposes to Governor Corbett's recent \$10 million investment in deinstitutionalizing youth in the juvenile justice system<sup>2</sup>. It is estimated that 70% of incarcerated youth have behavioral health diagnoses<sup>3</sup>. Without services, the percentage will increase. Now is not the time to reverse the cost savings that will result from reducing the number of incarcerated youth by increasing the likelihood that youth with behavioral health challenges will be placed in state institutions.

### *Why Families Need Support*

Behavioral health challenges manifest themselves differently in each child affected. To help youth and families living with these challenges, behavioral health supports can provide in-home care based on building trusting relationships. Taking care to match the worker with the youth, together they can identify and build on the youth's strengths and interests and also integrate techniques to help modify behavioral response to triggers, including role playing and social storytelling, among others.

One YAP youth diagnosed with Oppositional Defiant Disorder was abandoned by his father after many failed promises. He became physically aggressive and demonstrated defiant behavior such as hiding knives and then throwing them at the ceiling. Our Mobile Therapist worked with him to first build a trusting relationship and then identify his strengths and interests. Upon learning that he was interested in sports, the therapist began to help him find ways to use his affinity for sports as a constructive outlet for his aggressiveness. At the same time, she discussed with him healthier ways to express his feelings by talking about what triggers his anger.

### YAP Approach

Emphasis on Relationships

Collaboration with Community Supports

Individualized Services

No Reject, No Eject

Flexibility

Professional Staff

Commitment to Quality Service Delivery

Meet the Youth and Family  
Where They Are

<sup>2</sup> Governor Corbett Invests \$10 Million for At-Risk Youth and Juvenile Offenders, January 15, 2013, PR Newswire <http://www.prnewswire.com/news-releases/governor-corbett-invests-10-million-for-at-risk-youth-and-juvenile-offenders-186952501.html>

<sup>3</sup> National Disability Rights Network: Juvenile Justice, <http://www.ndrn.org/en/issues/juvenile-justice.html>



Youth diagnosed with Attention Deficit Disorder may also commonly have difficulty interacting appropriately with peers and authority figures. The consequences of that challenge, if left untreated, can lead to arrests or removal from home. But youth with ADD can benefit greatly from one-on-one interactions with a Therapeutic Staff Support (TSS). The TSS possesses the specific expertise to work with youth one-on-one. They model appropriate behavior and skills related to self-control. A TSS can teach a youth better ways to handle social interaction, tools to facilitate better communication, and how to be more respectful and comply with authority. She can also help educate the family and school personnel how to accommodate the youth's challenges and support efforts to overcome them.

*"My son was diagnosed with autism eight years ago and I can't imagine where he would be today without the support we received."*

*-Shannon Kramer, parent*

Behavioral Health Services also help families who have a child diagnosed with Autism who may be non-verbal or have trouble communicating. Therapists and one-on-one staff (TSS) can help use intentional and innovative communication techniques to enhance understanding, and review and practice appropriate behaviors in different environments such as the school and the community.

Behavior Specialist Consultant (BSC) staff can analyze

behaviors in different environments and create behavior modification plans for the child. The child's family, school and community supports can use this plan to help improve the child's functioning in these environments. The combination of these approaches helps youth to communicate, teaches youth more appropriate ways to handle emotions and also gives them the experience of trust that many have lost.

Youth with behavioral health issues can be successfully supported in their homes and taught new skills to help them manage behavioral health challenges and live independently. Importantly, YAP's service delivery is *designed* to purposefully transition youth from needing services to independence. We recognize that our presence in their lives is temporary and finite. We build sustainability and avoid dependence.

### *How Services Help Families*

Without BHRS, caring for a child with behavioral health issues can be overwhelming. Without assistance, some families may feel like one parent needs to stay home to provide more full-time care and attention to their child, reducing the family income and taxpayer contribution.

Families may also not know how to help their children. And children who have behavioral health concerns are at greater risk of having their treatable behaviors misunderstood. These misunderstandings frequently lead to unnecessary and costly institutional placements

*"Each child came with a different... story, and case therapeutic teams provide individualized treatment tailored to the specific needs of each client and his or her family."*

*-Ayub Mathama,*

*Mobile Therapist/Behavior Specialist Consultant*



where they are even less likely to get the help they need.

On the other hand, providing BHRS strengthens families. With support, families can stay together; both parents are more likely to be able to work; placement in a more restrictive school setting can be avoided; institutional placement is avoided; and youth get the treatment and advocacy they need to be better understood in their communities. These services also help families access other resources.

The **benefits** of maintaining this kind of support for families are great:

- Prevention of institutional placement
- Support to individual and family
- Communication skills
- Manage Behaviors
- Appropriate Responses
- Connection to Youth
- Relationship Building
- Individualized Care
- Knowledgeable staff / Expertise
- Flexible
- Available
- Skill Development
- Patience
- Advocacy
- Training
- Agency Oversight (Community-based BHRS providers can help eliminate potential abuses by conducting background checks and having fidelity to core principles)
- Service oversight (Community-based BHRS providers will have a commitment to improving outcomes and ensuring quality services)

*"Having the opportunity to have services for both our home and in our community has made a huge difference for both our son and our family. Having these services also provides Michael with more opportunities to socialize with people outside of our immediate family."*

*-Parent of Recipient of YAP Behavioral Health Services*

Pennsylvania's families need the legislature and the Governor to continue to help provide them with the support to keep their families together.

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## About YAP

Youth Advocate Programs, Inc. (YAP) is a nationally recognized nonprofit organization founded in Harrisburg, Pennsylvania in 1975. YAP has programs in over twenty counties throughout PA, and serves over 13,000 families a year in more than 100 programs across 21 states and the District of Columbia in rural, suburban and urban areas. Since our founding, 100% of our programming occurs in the home communities of the people we serve.

*For more information*

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