Executive Summary

In the United States, 48% of the population will develop a mental disorder at some point in their life-times, with 75% having the onset before the end of adolescence (age 24) and 50% starting before the end of childhood (age 14).[1] This public health crisis is aggravated by the fact that many communities have neither the resources nor a strategy to address this pervasive threat to children's healthy development. The Children's Mental Health Initiative (CMHI) was designed to address these challenges and has, in just three years, significantly changed the way that the partner communities approach children's mental health.

With support from ILCHF, four CMHI teams have dramatically shifted community culture and practices surrounding children's mental health with the goal of identifying and serving all children in need of mental health care. The CMHI empowers communities through investments in their unique visions and capabilities, enabling providers to align their organizational focus and serve children through a community wide lens.

The most significant accomplishments of the CMHI communities at the mid-point of this initiative include:

1. **Increases in the number of children screened and accessing mental health services.** Communities are screening more children and thereby identifying more children with or at risk of developing mental illness. In 2014, more than 35,000 of a possible 86,000 children were screened across the four communities. As a result, more children are connected to appropriate services and there are early indications that this effort is improving children's mental health in the CMHI communities.

2. **Improvements in children's mental health care.** The implementation of innovative strategies that better standardize the integration of mental health services across practices and settings has improved care, as evidenced by:

   a. Improved cross-sector collaboration. Child-serving agencies and providers have expanded and improved their service coordination and collaboration, resulting in more children being served more effectively.

   b. Increased sense of ownership over the mental health of children. As key stake-holders have gained a better understanding of their respective roles in supporting the mental health and wellness of children in their communities, there has been an increased commitment to the CMHI projects. Collaborative, cross-sector leadership structures have developed to provide strong governance and oversight, fostering a shared sense of purpose and ownership.

   c. Improved ability to address children's mental health. Investments in workforce development and training opportunities for providers and community members have better prepared the CMHI communities to provide appropriate mental health services for children in natural settings, such as schools and medical offices.

3. Community-wide commitment to long-term, sustainable change. CMHI project teams have employed multiple strategies to increase their likelihood of sustaining the systems of care in their communities, including:

a. Continuously expanding the number of participants engaged in the CMHI. With an expanding contingent of providers and sectors engaged in the systems of care, improved practices are increasingly systematized and embedded across the communities.

b. Using local evaluation data to support the case for continued community investment. Data generated at the local level is a catalyst for ongoing community investment in the system of care.

c. Engaging in long-term planning from the outset. Because sustainability planning has been a requisite element of the CMHI since the initial planning period, the projects have been thoughtful about how their systems of care can be permanently embedded in the community. There are indications that some aspects of the systems will be sustained for years to come.

The four communities have encountered and are learning from the following common challenges:

1. Variability in provider buy-in and screening practices. Due to the independent nature of the child-serving organizations involved in the CMHI, their capacity to engage, as well as the extent of their participation in the CMHI, is highly variable. In order to increase engagement, participation, and standardization of processes, communities implemented multi-level organizational and peer support systems.

2. Recruitment and retention of skilled mental health professionals. Despite using various strategies to recruit and retain qualified mental health professionals, there continues to be a shortage in the CMHI communities. Additional supports are needed to expand the number and variety of these skilled clinicians, especially in rural areas.

3. System model replication. Although the creation of one or more fully replicable systems of care models was an initial goal of CMHI, full system replication does not seem possible because the systems are dependent upon each community's unique set of resources. Replication of selected elements of each of the systems is more likely.

4. Long-term financial sustainability of multiple system of care elements. From the inception of the CMHI, communities have been planning for and committed to the long-term sustainability of their programs. Nonetheless, the lack of public financial support will likely jeopardize some elements of the new systems of care at the end of the CMHI grant term.

5. Comprehensive evaluation of systems-change efforts. Though evaluation is critical to understanding the impact of systems-change efforts on children's mental health, it is difficult to evaluate the full range of CMHI's work and immediately apply the findings in practice.

Although these challenges are complex and at times overwhelming, they have made the CMHI communities more resilient, nimble, and committed to their communities' children's mental health. The communities continue to grow their systems of care and improve the delivery of mental health care to children. Their accomplishments and stories serve as inspiration to child-serving organizations, funders, practitioners, and policy-makers committed to improving the healthy development of children.