

#### LOUIS DE LA PARTE FLORIDA MENTAL HEALTH INSTITUTE

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# RTC Quest Continues at CFS!

### Reflections from the Director

We have indeed been very fortunate. For the past 25 years, we have had the privilege of being one of two research and training centers in children's mental health, jointly funded by the National Institute on Disability and Rehabilitation Research and the Substance Abuse and Mental Health Services Administration. During that time we have had the opportunity to work with wonderful colleagues across the country to help increase awareness of the mental health needs of children, youth, and families, and change the way our communities respond to those needs. And we have been supported in these efforts in every way imaginable by the Louis de la Parte Florida Mental Health Institute, and its Department of Child and Family Studies (CFS). As our Center completes its fifth five-year grant, and our tenure as a federallyfunded Research and Training Center comes to a close, it is gratifying that CFS remains strong and dedicated to continue the work that began in the early 1980s.

#### A Starting Place

Not coincidentally, our Center began at the same time the Child and Adolescent Service System Program of the National Institute of Mental Health was started. Priority attention at the federal level was given to those youngsters with the most serious mental health needs and their families, and efforts were started to promote community-based systems of care based on a set of values and principles as an important part of the response to these needs. We had the opportunity to start a seven-year longitudinal study of children and youth from six states who had been identified either by the public mental health system or the public school system as having significant mental health challenges. With this study, which was unprecedented at the time and still remains one of a kind, we were able to enhance the knowledge base about the needs, strengths, and characteristics of the young people and their families, and of the consequences of being served in systems that were ill prepared to meet their needs.

The challenge of following 812 youngsters who were between nine and seventeen years of age at the onset of the study was substantial. With this study, however, we began a commitment to study complex real-world issues of importance to the



field, even though they typically did not lend themselves to easy study. We consciously committed ourselves to doing field-based research that would address significant questions, and be of great relevance to the field, even though we recognized that such research presented great methodological and logistical challenges. It is perhaps fitting that one of our last studies has been the only study to use a public health approach to examine the status of systems of care in a random sample of 225 counties throughout the country. We have not only produced important findings in this study, much as we did in our original epidemiological study, but we have demonstrated that such research is feasible and doable, and hopefully we have set the stage for researchers to continue with this type of research and funders to continue to support it.

#### **Digging Deeper**

In between we have studied alternatives to residential treatment, and approaches to assisting older adolescents make a transition to adulthood. We have had a multiyear study of financing issues in which we combined a broad look across all states with in-depth examination of the impact of particular policies, as viewed by diverse groups of stakeholders and as reflected in data on system performance. This type of in depth examination of complex phenomena from multiple perspectives has been reflected in much of our work, whether it be studying characteristics of effective systems of care, of schools that serve children and youth well who have emotional disturbances, or organizations that operationalize the concept of cultural competence well, or of family organizations that impact systems of care. Through this work we have not only produced important findings but have expanded methodological horizons so that more





## systems of care

multi-method studies are encouraged, and ethnographic and qualitative methods are employed as appropriate alongside of quantitative methods.

We have done research using a variety of methods on policy development and implementation, on leadership, on mental health services within schools, on theories of change and logic models, on the impact of federal policies on families, on cultural competence within organizations, on leadership, on outcome-based accountability, and, of course, on system of care implementation.

#### **Generating National Dialogue**

In 1988 we initiated our first national conference on system of care research primarily to enhance the capacity of the children's mental health field to systematically study important issues. We have continued this conference each year since then and plan to continue it indefinitely into the future.

Through the conference we have helped bring researchers, evaluators, policy-makers, administrators, parents, and advocates together to initiate dialogue about important issues, and to share new knowledge. We have been able to highlight significant accomplishments of the field and, importantly, we have been able to introduce new frameworks, conceptual models, and methodological approaches. Our conferences have showcased progress but they have also identified challenges that remain for the field. For us they have also been a chance to learn from the attendees, and to demonstrate our appreciation to them for all of their contributions.

#### **Disseminating Knowledge**

Our conferences have been but one approach to impacting the field. Our commitment has always been to make a difference through our work, and to make sure that important findings from our research and from the work of others reaches key audiences in a way that is helpful to them. From our first monograph on a system of care, done collaboratively with Georgetown University and distributed broadly (and freely) around the country, to our other monographs and books, articles and presentations, policy reports, newsletters, consultations, on-line courses and graduate certificate program, and electronic communications, we have always sought to get important messages out so that they reach the right audiences and can have a positive impact.

Leadership, as we view it, is not just a characteristic of an individual. It is a characteristic of an organization, of a system, of a community, of a field. We have strived through our fortunate position as a federally-funded Center and our location within such a supportive department and institution, both to fulfill the responsibility of being good leaders ourselves and also to enhance and expand the leadership capacity of the professionals, the parents, the youth and young adults, and the advocates who collectively make up our dynamic and exciting children's mental health field.

#### Teamwork

As we transition to a new stage in our own organizational development, but continue our commitment to the values of systems of care, to the use of data for ongoing improvement, and to having an impact on the lives of children, youth, and families, we want to pause to thank our partners and our funders through these years. We have been fortunate to have had very dedicated and talented people assist us through serving on our Board of Advisors, chaired for 25 years by Christina Kloker Young, and cochaired for the past five years by Eric Bruns. We have been privileged to partner with such groups as:

- the National Technical Assistance Center for Children's Mental Health at Georgetown University as well as their Center on Cultural Competence;
- the Research and Training Center at Portland State University;
- Macro, International;
- the National Federation of Families for Children's Mental Health;
- the Division of Children, Youth, and Families of the National Association of State Mental Health Directors;
- the Technical Assistance Partnership;
- Other advocacy groups such as Mental Health America, the Bazelon Center, and the National Alliance for Mental Illness;
- Countless other colleagues, supporters, and friends from around the country.

We thank federal partners such as Gary Blau, Diane Sondheimer, Ira Lourie, Judy Katz-Leavy, Naomi Karp, Bonnie Gracer, and many others. We also thank leaders here at the Louis de la Parte Florida Mental Health Institute, such as Jack Zusman, Max Dertke, David Shern, Junius Gonzales, Catherine Batsche, Patricia Robinson, and Cindy Stark.

Of course, our accomplishments have required an extraordinary team here at the Center. I have been genuinely blessed to be able to serve for 25 years as Center Director and to have Krista Kutash and Al Duchnowski serve as Co-Directors during that entire time. I offer our team my most since appreciation and gratitude.

We wish to re-emphasize that we are at a point of transition and change—not at point of termination. One thing that we have learned over and over again during the last 25 years is that the future is not easy to predict—please continue to join with us as together we capitalize on the progress that has been made over the past 25 years and continue to work together to make the future a brighter one for children, youth, and families.

### Message from SAMHSA's Gary Blau & Diane Sondheimer

#### Dear Colleagues,

Since 1984, the Louis de la Parte Florida Mental Health Institute has received funding from the National Institute of Disability and Rehabilitation Research and the Substance Abuse and Mental Health Administration to support a Research and Training Center for Children's Mental Health. As federal funding for this Center comes to an end, we wanted to reflect on the tremendous impact the Center's work has made on expanding the research base for children's mental health and improving the lives of children and youth with serious mental health challenges and their families.

The Center, along with the Research and Training Center at Portland State University and the National Technical Assistance Center at Georgetown University, were first funded at an historic time in the field of children's mental health. Seminal documents such as Jane Knitzer's Unclaimed Children (1982) and the President's Commission on Mental Health (1978), among others, were exposing the enormous unmet needs of millions of children and youth in this country with serious mental health challenges. At the same time, the federal government was launching the Child and Adolescent Service System Program (CASSP) and conceptualizing the framework for a system of care, which has since become a national strategy for transforming children's mental health.

Since that time, substantial progress has been made in states and communities across the

country to improve mental health services and supports. The success of CASSP in building the capacity to develop services for children and adolescents with serious mental health challenges and their families at the state and local levels ultimately paved the way for Public Law 92-321, the act of Congress that launched the Comprehensive Community Mental Health Services for Children and Their Families Program (CMHI) in 1992. Since that time, the annual appropriation for CMHI has grown from \$4.9 million to \$121 million, having awarded 164 grants, 15% of which went to American Indian tribes and tribal organizations.

Systems of care are now being routinely developed, implemented and sustained all over the country and there have been huge strides made in offering individualized, strengthbased and culturally competent care. We have witnessed increased collaboration between service sectors and between professionals, family members and youth, and the vision and positive outcomes that result from a familydriven and youth-guided system of care are finally beginning to be realized.

In 1988, the Research and Training Center held its first annual conference on systems of care research in children's mental health. This conference has grown into an outstanding forum for the exchange of new research findings and methodologies, and for exploration of new ideas and important issues relevant to the field. Such exchanges are essential to keeping a field focused on its goals, reflective of its progress and open to new ideas and practices. We are pleased that the Department of Child and Family Studies, which has administered the Center for many years, will be continuing to hold annual conferences.

The work of the Center has been of enormous value to the field. It began with an ambitious longitudinal study of children and youth with serious mental health challenges in six states. Since that time, the Center has studied and disseminated reports on implementation of systems of care, school-based mental health, alternatives to residential treatment, theories of change, outcome-based accountability, the impact of policies on families, the qualities of culturally competent organizations, and financing strategies in support of systems of care, among others. The Center has also launched an on-line graduate certificate program on systems of care for children's mental health, a first of its kind.

It is with deep gratitude that we acknowledge the important work the Center and its' staff have accomplished over the past 25 years and look forward to working with them as they continue their efforts to improve the lives of children, youth and families.

Gary M. Blau, PhD Chief Child, Adolescent and Family Branch Center for Mental Health Services SAMHSA



Diane Sondheimer, MSN, MPH, CPNP Deputy Chief Child, Adolescent and Family Branch Center for Mental Health Services SAMHSA

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## Website: http://rtckids.fmhi.usf.edu/

The Center's website will remain online and will continue to serve as a powerful vehicle for dissemination. In addition to written works, the website provides access to videos and handouts of key presentations from our conferences, and is the doorway to the National Directory of Family-Run and Youth-Guided Organizations and Learning On-line, the portal for the Center's distance learning initiatives.



## RTC Points of Pride

The Center's PI (Dr. Bob Friedman) served as Co-Chair of the System Change Workgroup for the Council on Collaboration and Coordination of the Child, Adolescent, and Family Branch, Center for Mental Health Services. In this capacity, he was the lead author of a report on "Bringing Systems of Care to Scale," which has been widely distributed by the Child, Adolescent, and Family Branch, and is helping to guide further growth of systems of care. Dr. Friedman also delivered an invited presentation at the annual mental health symposium of the Carter Center in November, 2008, on the integration of a public health approach and systems of care.

Dr. Mario Hernandez, Chair of the Department of Child and Family Studies and a key member of the Center leadership team, served as President of the Board of the National Alliance for Minority Behavioral Health Associations. Dr. Hernandez delivered several invited addresses on cultural and linguistic competence, and the conceptual framework and research findings from Study 5, of which Dr. Hernandez is PI, has been accepted for publication in Psychiatric Services, one of the key journals in the field.

Dr. Krista Kutash, Co-PI for the Center, serves as Co-Editor of the *Journal of Behavioral and Emotional Disorders*. Dr. Kutash, along with Dr. Al Duchnowski, also a Center Co-PI, have published several reports and made numerous presentations on their NIDRR-supported "Parent Connectors," project, which results from the work of the Research and Training Center. Dr. Duchnowski and Dr. Kutash have received additional funding from the Institute for Educational Sciences to continue their research on services within the schools.

Dr. Mary Armstrong, PI of Study 3, serves as Co-Chair of the Outcomes Roundtable for Children. Under her leadership, the Study 3 team has produced this past year an updated resource compendium on comprehensive financing of systems of care, and has added a special report on the financing of early childhood services. Technical assistance on financing has been provided to six different states, and numerous presentations have been made as well.

Dr. Sharon Hodges and Ms. Kathleen Ferreira, of Study 2, have initiated a process of review of the important components of the definition of systems of care. A very prestigious journal in the field, *Evaluation and Program Planning*, is providing them with a special issue, and this was published in January 2010.

Prior to its annual conference in March, 2009, the Center, in partnership with the National Technical Assistance Center for Children's Mental Health at Georgetown University, convened a special meeting of leaders in the field to help plan future directions for the children's mental health field, particularly in the context of changes in leadership and new opportunities and challenges. A summary of the recommendations from this group has been completed and distributed broadly.

Also, at the biennial Training Institutes in Children's Mental Health, the Center made presentations on findings from every one of its studies, and also from its graduate certificate program. Additional funding was received to from the Child, Adolescent, and Family Branch to help the Center in its outreach efforts to minority universities to inform them of the graduate certificate program, and also to support the activities of the system change workgroup. The Center also collaborated with Macro, International, Inc. in a successful proposal to evaluate the next wave of grantees in the system of care grant program.

