

TRANSITION TO INDEPENDENCE PROGRAMS - BACKGROUND MEMORANDUM

The 2007 Legislative Assembly approved Senate Concurrent Resolution No. 4005 ([copy attached](#)) providing for a Legislative Council study of the feasibility and desirability of establishing a transition to independence program for young adults with mental illness.

PREVIOUS STUDIES

The **2003-04 Budget Committee on Government Services** studied the needs of individuals with mental illness, drug and alcohol addictions, and physical and developmental disabilities, including individuals with multiple needs and how the state responds to those needs. The committee reviewed information regarding a community-based system of care for persons with mental illness and substance abuse disorders.

The committee did not make any recommendations regarding its study.

The **1999-2000 Budget Committee on Institutional Services** studied residential treatment centers and residential child care facilities.

The committee reviewed the results of a survey of residential treatment centers and residential child care facilities. The facilities identified the need for the following types of services:

1. Residential treatment, including treatment for children with lower IQs, for lower functioning children who need addiction counseling, for chemically addicted children, for sexually active children, for children under 14 years of age, and for children who have serious emotional disorders and who are mentally retarded.
2. Residential child care for extremely violent children.
3. Group home beds, including beds in the Fargo area, beds for children with autism who require residential support, and beds for school-aged children with developmental disabilities.
4. Therapeutic foster care homes.
5. Family foster care.

The committee made no recommendations regarding its study.

FOSTER CARE INDEPENDENT LIVING PROGRAM

The Department of Human Services, under the Children and Family Services Division, administers an independent living program for youth transitioning out of foster care. The program is the Chafee foster care independent living program. The program's purpose is to ensure that all youth aging out of the foster care system have the necessary support and services

available to them to assist in making the transition from foster care to adulthood. The goal of the program is for all foster youth to reach the following outcomes by age 21:

1. Access to physical and mental health services.
2. Sufficient economic resources.
3. Safe and stable living arrangement.
4. Academic/educational/vocational goal attainment.
5. Connections to persons and community.
6. Avoidance of illegal or high-risk behaviors.
7. Postponement of parenthood.

The program serves foster care youth age 16 and older who have been identified as likely to age out of foster care as well as former foster care youth up to age 23 who have aged out of foster care. The independent living program served 284 youth during the last federal fiscal year.

The program receives \$500,000 per year in federal Chafee grant funds requiring a 20 percent state match that is provided from the state general fund and eligible in-kind matching.

The funding is used for regional independent living coordinator positions; direct financial assistance to youth for rent, utilities, food, clothes, etc.; youth groups; teen conferences; and program-related materials, equipment, and supplies, etc.

The department also administers the federal Chafee education and training voucher program. This program provides funding to pay for tuition, books, and room and board expenses of foster care youth to attend higher education institutions.

This program receives \$115,000 per year in federal funds requiring a 20 percent state match.

Approximately 31 foster care youth are served by this program each year.

CHILDREN WITH SEVERE EMOTIONAL DISTURBANCES

Severe emotional disturbances (SED) is the term used to identify children under 18 years of age who have been diagnosed with a severe behavioral, emotional, or mental health disorder that has been a major impairment in a child's level of functioning at home, school, or community for at least one year.

The Department of Human Services Division of Mental Health and Substance Abuse Services provides therapeutic and support services to children with SED and their families. Examples of these services include individual, family, and group therapy; psychiatric services; psychological evaluations; care coordination; case aides; medication management; and residential and crisis services. The department contracts with private providers for some of these

services while others are provided directly at the human service centers.

Information available from the Department of Human Services indicates that in 2004 approximately 5,700 (4 percent) of North Dakota's 139,000 children under 18 years of age had SED. In 2005, 1,692 children with SED were served at the human service centers while in 2006, 1,538 were served.

MENTAL HEALTH SERVICES FUNDING

The following schedule presents funding provided for mental health services in the Department of Human Services' central office and human service centers since 1999-2001 (the schedule does not include mental health funding at the State Hospital):

	1999-2001 Adjusted Appropriations	2001-03 Adjusted Appropriations	2003-05 Adjusted Appropriations	2005-07 Adjusted Appropriations	2007-09 Preliminary Appropriation ¹
Department of Human Services					
Central office - Mental health	\$3,608,211	\$2,311,363	\$2,702,553	\$2,493,459	\$2,260,499
Human service centers - Mental health	32,333,850	30,025,003	27,994,663	28,244,485	32,119,642
Total	\$35,942,061	\$32,336,366	\$30,697,216	\$30,737,944	\$34,380,141
Less estimated income	22,210,636	18,334,225	17,930,549	16,710,321	15,184,336
General fund	\$13,731,425	\$14,002,141	\$12,766,667	\$14,027,623	\$19,195,805

¹The 2007-09 appropriation amounts are preliminary and subject to change as the department is still in the process of allocating legislative changes to specific programs (i.e., inflationary increases, salary adjustments, etc.). The amounts shown do not include funding for the new community treatment program for sex offenders administered by the Division of Mental Health and Substance Abuse Services.

STUDY PLAN

The committee may wish to proceed with this study as follows:

1. Receive information from the Department of Human Services on programs and services provided to young adults with mental illness and options for establishing a transition to independence program for these young adults.
2. Receive information on the number of young adults with mental illness that transition out of other state-sponsored programs and the number that may not be receiving services.
3. Receive testimony from interested persons regarding the feasibility and desirability of establishing a transition to independence for young adults with mental illness.
4. Develop committee recommendations and prepare any legislation necessary to implement the committee recommendations.
5. Prepare a final report for submission to the Legislative Council.

ATTACH:1

**Sixtieth Legislative Assembly of North Dakota
In Regular Session Commencing Wednesday, January 3, 2007**

SENATE CONCURRENT RESOLUTION NO. 4005
(Senators Mathern, Fischer, J. Lee)
(Representatives Ekstrom, Hawken, Schneider)

A concurrent resolution directing the Legislative Council to study the feasibility and desirability of establishing a transition to independence program for young adults with mental illness.

WHEREAS, all youth are challenged by the transition to young adult roles in employment, education, independent living, and community life; and

WHEREAS, during this transition period, young adults face decisions about future career and educational goals, social responsibilities, self-management of one's behavior, alcohol and drug use, social problem-solving competencies, and maintenance of friendships and intimate relationships; and

WHEREAS, young adults with, or at-risk of, mental illness are particularly challenged by this transitional period; and

WHEREAS, current foster care, mental health, education, and other programs have not provided the community-relevant skills and experiences needed to facilitate successful transitions from home and school to young adult roles for those young adults with mental illness; and

WHEREAS, the transition period for young adults is complicated further by the lack of coordinated services among children's mental health, child welfare, educational, adult mental health, substance abuse treatment, and rehabilitation sectors; and

WHEREAS, in order to improve the likelihood of these individuals becoming contributing members of society, systems and methods that will effectively prepare them for transition to the community need to be explored and researched; and

WHEREAS, a transition to independence program helps to prepare and support young adults with mental illness in their movement into adult roles and personal functioning and success through an individualized developmentally appropriate process; and

WHEREAS, a transition to independence program helps emphasize strength-based services that can help young adults acquire skills in the key life domains of education, employment, community living, and managing relationships;

NOW, THEREFORE, BE IT RESOLVED BY THE SENATE OF NORTH DAKOTA, THE HOUSE OF REPRESENTATIVES CONCURRING THEREIN:

That the Legislative Council study the feasibility and desirability of establishing a transition to independence program for young adults with mental illness; and

BE IT FURTHER RESOLVED, that the Legislative Council report its findings and recommendations, together with any legislation required to implement the recommendations, to the Sixty-first Legislative Assembly.