4/18/2001

HB 1901 S. Turner, Naishtat

SUBJECT: Planning for juveniles with mental health and substance abuse disorders

COMMITTEE: Corrections — favorable, without amendment

VOTE: 8 ayes — Haggerty, Farrar, Allen, Hodge, Ellis, Gray, Hopson, Isett

0 nays

1 absent — Ritter

WITNESSES: For — Pat Cole, National Training Center on Domestic and Sexual Violence;

Registered, but did not testify: Amy Mizcles, National Alliance for the

Mentally Ill

Against — None

On — Steve Robinson, Texas Youth Commission; *Registered, but did not testify:* Thomas Chapmond, Texas Department of Protective and Regulatory Services; Vicki Spriggs, Texas Juvenile Probation Commission; Deborah Berndt, Texas Department of Mental Health and Mental Retardation; Dee

Kifowit, Texas Council on Offenders with Mental Impairments

BACKGROUND: The Texas Council on Offenders with Mental Impairments (TCOMI) was

established in 1993 to address the needs of mentally and physically impaired offenders in the criminal justice system and to provide continuity of care for these inmates after they leave the system. TCOMI consists of 30 members appointed by the governor, including the executive head of 21 state agencies, divisions and organizations, including the Texas Department of Criminal Justice (TDCJ), the Texas Youth Commission (TYC), the Texas Juvenile Probation Commission (TJPC), the Texas Department of Mental Health and

Mental Retardation (MHMR), the Texas Commission on Alcohol and Drug

Abuse (TCADA), and the Texas Education Agency (TEA).

DIGEST: HB 1901 would add Health and Safety Code, secs. 614.018 and 614.019 to

require TCOMI to conduct a study and develop a comprehensive plan for juveniles with mental health and substance abuse disorders who already are involved in or who are at risk for becoming involved in the juvenile justice

system. The plan would be required to address the following issues:

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- ! how to define and identify juveniles with mental health and substance abuse disorders, including development of uniform screening, assessment, information sharing, and data collection and reporting processes;
- ! how to improve coordination and communication among state and local actors, including opportunities for cross-training in related fields;
- ! which community-based, residential, institutional, and aftercare treatment services for juvenile offenders as well as early intervention efforts for high-risk children have proven to be effective; and
- ! which federal, state, and local policies, procedures, rules, regulations, and financial or programmatic barriers could have an impact on the development and implementation of a comprehensive juvenile justice plan.

TCOMI could include persons it deemed necessary for the study and the plan, including but not limited to family members of the juveniles, the Texas Department of Protective and Regulatory Services (DPRS), and individuals from the fields of juvenile justice, mental health, substance abuse, and education.

TCOMI would have to submit the study and plan, including funding proposals, to the Legislature by December 1, 2002, when the bill would expire.

TCOMI, within existing resources, could establish pilot programs for juveniles offenders with mental health and substance abuse disorders in cooperation with certain state agencies, including TCADA, MHMR, DPRS, TJPC, TYC, and TEA.

This bill would take immediate effect if finally passed by a two-thirds record vote of the membership of each house. Otherwise, it would take effect September 1, 2001.

SUPPORTERS SAY:

HB 1901 is needed to address the serious lack of attention and services for children and adolescents with mental health and substance abuse disorders in the current juvenile justice system. Approximately 40 percent of juvenile offenders have a diagnosable mental health disorder, and many do not receive appropriate services. Whenever possible, they should be diverted from the juvenile justice system and toward appropriate care. Participants at

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a national conference on juvenile justice identified the most pressing need in the juvenile justice system to be developing ways to handle and respond to the growing presence of juveniles in the system with mental health disorders. The goal of HB 1901 would be to lower rates of recidivism of mentally-ill prison populations by finding ways to provide proper treatment and services as early as possible.

HB 1901 would create a coordinated, interagency, statewide plan to address the needs of this specialized population. It would standardize screening and treatment at the state level, which would help ensure that more mentally-ill offenders received the treatment they needed.

A comprehensive interagency plan would help reduce duplication of services and ensure that juvenile offenders with mental health and substance abuse disorders receive a continuum of care. These children now are sent to the juvenile justice system because there is no other way for them to receive the treatment they need. This creates a burden on juvenile justice agencies to provide tremendous amounts of supervision and treatment for which they are ill-equipped. There also is little or no continuity of care once the child has been released from the justice system. Lack of proper initial and continuing treatment increases the risk that these juveniles will continue to recycle through the criminal justice system.

Article 5 of the House version of CSSB 1, the general appropriations bill for fiscal 2002-03, contains \$35 million to fund the TCOMI plan for juvenile and adult offenders with mental illnesses.

OPPONENTS SAY: The planning and developing of mental health and substance abuse services for juvenile offenders would be better handled at the local level. Many counties, including Harris, Bexar, and Travis, have achieved success with this type of initiative. Local communities are best suited to develop plans for adult and juvenile justice programs because they deal with the populations on a daily basis.