



Senator Baldacci, Representative Meyers and the good members of the HHS Committee;

My name is Betsy Sweet, and I represent the Behavioral Health Community Collaborative – eight non-profit community based mental health agencies for children and adults. (Sweetser, Opportunity Alliance, Spurwink, Shalom House, KidsPeace, Volunteers of America, Gateway Community Services, Oxford County Mental Health Services).

I testify today in support of LD 1305-- to Design and implement community-based care for adolescents.

There is a large gap in services for adolescents in Maine both in the mental health and SUD realms. There are cities and small rural towns in central Maine and on the midcoast that are at their wits ends to try and provide services and meet the needs of young people who do not have support at home or who are not in adequate foster care situations or do not have access to caring, responsible adults, and/or are living with behavioral health and SUD challenges.

I, several others in this room and some of you on this committee are working with your colleagues on the Criminal Justice committee to try and come up with ways to reach and help these young people *before* they tangle with law enforcement and corrections.

Twenty some years ago or so, Maine had an array of services that helped. We had CHINS (Children in need of Services) which was a program where a parent, or school or local law enforcement could petition to get a young person seen by a social worker/ case manager who could assess the need and then get them the services. We also had a system of "bridge homes" – small residential homes where teenagers could go who did not have a safe or nurturing place to be. Our Foster families and therapeutic foster families were reimbursed more adequately so that they could adequately care for the kids, and there were more families. We also had an incredible program "Community Partnerships for Protecting Children" where law enforcement, schools, behavioral health, town officials all got together to identify supports that were needed and even discussed how to help individuals in need of services. That program was allegedly replaced by

"Families First" but that replacement has yet to realize its potential or meet the needs that were being met.

When each of these programs ended, we were here – testifying, sharing with you our fears of where we would be ten, twenty years later and here we are. The start of a plan could be to reinstate some of the successful things that we had.

There are many young people and their families who are struggling with few resources available. At the same time the need just increases every day with more and more young people experiencing anxiety, depression, and even chronic mental illness.

The CJPS committee is developing a bill for children whose unmet needs lands them in corrections, but that has a component of providing grants to communities to do their own planning processes and assessments of what resources are available, and what is missing so that they can provide it at the local level. Hospitals are working daily to develop their own programs to address this crisis and these teens end up in their ED.

All of this speaks to a lack of leadership and planning that addresses this crisis at a systems level. The statistics on youth incarceration, SUD and suicide is very well known to this committee and this state. Yet, we have been very, very slow to do anything to adequately and quickly address this ~ which results in way too many kids falling through the cracks and getting involved with law enforcement.

There are many young people and their families who are struggling with few resources available. At the same time the need just increases every day with more and more young people experiencing anxiety, depression, and even chronic mental illness.

Please, pass this bill and demand that the DHHS take the lead in meeting the needs of these kids – who are our future.

I'm happy to answer any questions.