Good mental health is critical for the healthy growth and well-being of children and youth and for the stability of families. Unfortunately, there is a public mental health crisis in Michigan. Federal law requires the provision of mental health and substance use insurance benefits, but 56% of individuals living with mental illness in Michigan have not received care in recent years. A poor mental health system costs all of us, in both lost friends, family, and community members, and in state spending for education, criminal justice, and other systems to address the symptoms. Michigan must expand access to mental health services, both through health care and in the systems that serve children, youth, and families, including education, child welfare, and criminal justice.

Improving Mental Health for Infants, Toddlers, and Families
A child’s mental health begins at birth, and the factors that influence life outcomes, including mental well-being, begin long before birth. Children who have a parent or caregiver who lives with a mental illness face many barriers, including increased household responsibilities that can impede educational success; embarrassment or shame as a result of stigma, and toxic stress that can alter their own brain architecture and lead to behavioral problems, substance misuse and lifelong physical health challenges.

From infant mental health services, early developmental screening and services through Early On Michigan, to Mental Health Consultants in child care settings, some supports exist for families with young children, but access to these programs is limited, especially for families facing the most challenges. Problem solving courts, including mental health and substance use courts also help parents and young adults receive the treatment they need and stay out of the criminal justice system and with their families, but these programs are only available in about one quarter of courts around the state and are only as effective as the mental health treatment systems in those communities.

Mental Health Care throughout Childhood, Adolescence, and Beyond
A mental health issue can occur at any time, and the benefits of a healthy early childhood can be undone if a young person experiences an illness or traumatic event without the proper care to cope. Many Michigan schools and districts provide access to critical mental health care so students - and their families - can access support during the day where they already spend significant time. However, many schools lack the funds to provide access to these services. Basic access to health insurance is also critical, for children and parents - children are more likely to access mental health services when their
parents are insured too. Work requirements and time limits in public health insurance programs as well as a lack of parity in private insurance threaten this access for children of all ages whose families are at risk of falling through the cracks of bureaucratic exemptions.

Other systems fail to provide adequate services too. Children and youth who are in or transitioning out of foster care are entitled to timely mental health services, but often fail to receive them. Youth involved with criminal justice benefit most from rehabilitative services, but Michigan law requires 17-year-olds to be tried for offenses as adults, cutting off their access to more developmentally-appropriate juvenile justice programs, exposing them to severe trauma in adult jails and prisons, and increasing their chances of reoffending and committing more violent crimes.

Young adulthood is critical for building long-term well-being and financial stability for one’s future family. As young adults leave school and other systems and lose critical potential access points for mental health and substance use services, health care becomes even more vital for receiving them. While the Affordable Care Act allows young adults to remain on their parents’ health care until age 26, Michigan’s Healthy Michigan Plan work requirements will apply to recipients age 18 or older, putting many future parents at risk of falling through the cracks.

The Role of Policymakers
Federal and state policymakers both impact access to mental health services, both through health care and through education, child welfare, and juvenile justice policy. Federal lawmakers are responsible for much of Michigan’s health care spending through Medicare and Medicaid, and set health care laws to which state markets must adhere. The federal government also provides funding for child welfare, and authorizes funding for school-based health centers.

State lawmakers have the power over the details of the Medicaid service delivery and recent expansion. They also control funding for community mental health agencies, for Early On developmental services, for child care, child welfare and foster care, and for services for at-risk students, including school-based health. The state also sets policy that determines the age of juvenile court jurisdiction in Michigan.

Questions to Ask Candidates

- How will you ensure that children, youth, and their parents have access to the mental health and substance use services they need to stay healthy and productive?
- How will you ensure that children and youth in the foster care system receive the consistent mental health and behavioral services to which they’re entitled?
- Do you support applying Healthy Michigan work requirements to young adults and parents of school-aged children? If so, how would you protect children and youth from losing access to services?
- Do you support raising the age of juvenile court jurisdiction so 17-year olds have access to developmentally-appropriate juvenile services that make them less likely to reoffend?