**Written Testimony for the Senate Finance Committee**

**On Custody Relinquishment and Multi-System Youth (MSY)**

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Chairman Dolan, Ranking Member Sykes, and members of the Senate Finance Committee, my name is Beth Pettey. I am a mother of an 18-year-old daughter with a mental illness. A daughter who had her first counseling session when she was a mere 2 ½ years old. A daughter who had her first diagnosis before she even entered kindergarten. A daughter who received multiple, ever-changing diagnoses throughout the years as she endured evaluation after evaluation and treatment after treatment by provider after provider. Her present diagnoses are generalized anxiety disorder, social anxiety disorder and acute stress disorder which I believe are likely accurate diagnoses. Notice how easily I can now list her diagnoses, but by doing so, it does not demonstrate the immense emotional and financial toll that our family endured as we tried time after time to connect her to appropriate supports in order to untangle the twisted, ugly, unrecognizable mess that her mental illness had become.

We live in Appalachia. By some measures, Athens County is the poorest county in Ohio. In many ways my children have been privileged growing up with 2 professional parents in this region. Because a large population of households receive Medicaid, the county can support a multitude of programs that provide mental health or related services to youth and their families. However, we would find that our family often could not access these services due to holding private insurance. And even when we could access these services, it was frequently through private pay at our own expense. Over the years, the financial burden compounded. Additionally, we often found ourselves traveling out of town for services even though they had a disconnect to our local resources. Although this approach was the best we could do at the time, it eventually became clear it was merely a band-aid. By 5th grade my daughter had suicidal ideation, by 7th grade she was self-harming, by 9th grade she could no longer attend school and we were in a persistent struggle for her life with frequent visits to the ER that would lead to hospitalizations. At that time, we considered relinquishing custody in order to access services through Medicaid that we could not access through private insurance, or at least, we could not access these services without a formidable cost to our family. Fortunately, we did not have to follow through with custody relinquishment because we became involved with our Family and Children First Council. FCFC became a main player in my daughter’s recovery.

Local wraparound care was essential to my daughter’s recovery. With Athen’s FCFC coordinating collaborative care between providers while allowing my family to be central participants, we were able to connect to local systems of care. FCFC also helped us utilize these systems without such a financial burden to our family. When agencies collaborate, they can pull their resources together to assist youth and their families more efficiently and effectively. Another important aspect of FCFC’s support is that it offered hope during some of my daughter’s darkest days. Enough hope that we were able to forego feeling the necessity to give up custody of our child to save her life. I am happy to report my daughter is graduating high school this week, will attend an academically rigorous college program in the fall, is on council of YouthMOVE Ohio, and is presently chartering a YouthMOVE Athens chapter with our local FCFC as the lead agency. My daughter is using her lived experience to help others.

In closing, I want to emphasize the need for increased funding for mental health services for middle class families with private insurance. I also want to emphasize the importance of local wraparound care that I feel is “best practice” by supporting families within their own communities where they feel most comfortable. Finally, I want to state my belief that FCFC’s are the most efficient and effective route to coordinating local wraparound care for multisystem youth and their families.