

Mental Health Service Recipients on Other State Agency Caseloads in Connecticut

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This poster will provide an overview of the rates at which individuals on the Connecticut Department of Mental Health and Addiction Services (DMHAS) mental health caseload also appear on the caseloads of a number of other state agencies. The other state agencies included in this analysis are the Departments of Mental Retardation, Children and Families, Public Safety and Social Services. Service populations included in the analysis are welfare recipients (Temporary Assistance for Needy Families and State Administered General Assistance), substance abuse treatment clients, child protective services cases (abuse and neglect) as well as a number of levels of criminal justice involvement such as arrests, probation/parole and incarceration. Findings will be provided for the mental health caseload as a whole and for age, gender, and for white and non-white service recipients when that information is available. The poster will present findings, provide the background for this analysis, and suggest policy implications and directions for future research.

DMHAS' interest in other state agencies populations as mental health and substance abuse service recipients dates back to the enactment of a 1999 legislative initiative requiring DMHAS to establish uniform policies and procedures for collecting, standardizing, managing, and evaluating substance abuse service data related to programs administered other by state agencies, state-funded community-based programs, and the Judicial Branch. More recently, Connecticut's involvement with the NRI OSA project and the receipt of a state Mental Health Transformation State Infrastructure Grant by the state of Connecticut have increased the demand for information regarding the involvement of mental health service recipients with other state agencies.

Preliminary analyses indicate that approximately 43,000 adults were on the Connecticut DMHAS community mental health caseload during FY2005. State administered general assistance recipients represented the greatest amount of other state agency involvement (between 15% and 20% of the mental health caseload). Men and women were about equally represented in this program. Less than 5% of individuals on the mental health caseload received financial assistance from other state agencies, with more women than men represented on these other state agency caseloads. Between 5% and 10% of the DMHAS caseload were on the state's corrections or probation/parole caseload, and about 4% were identified as child abuse or neglect perpetrators on the state's child protection agency. The mental health correction/probation/parole caseload was predominately male, but the mental health child abuse/neglect caseload was predominately female. Only 1% of the public mental health caseload was also on the caseload of the Connecticut Department of Mental Retardation.