



STATE OF HAWAII  
DEPARTMENT OF HEALTH  
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**LATE**

**Testimony in SUPPORT of HB 948 HD2, SD1  
RELATING TO CHILD AND ADOLESCENT MENTAL HEALTH**

SENTATOR DONOVAN M. DELA CRUZ, CHAIR  
SENATE COMMITTEE ON WAYS AND MEANS

Hearing Date: March 31, 2023

Room Number: 211

1 **Fiscal Implications:** The Department of Health (DOH), Child and Adolescent Mental Health  
2 Division (CAMHD) supports this measure as long as it does not impact the Executive Biennium  
3 Budget. CAMHD needs additional funding to provide the services described in this bill:

4 *(b) The crisis mobile outreach team pilot program shall, to the extent practicable within*  
5 *available resources, provide the following services:*

6 *(1) Crisis prevention with community collaboration and community program*  
7 *development;*

8 *(2) Face-to-face intervention within one hour of a request for intervention;*

9 *(3) Crisis de-escalation and assessment; and*

10 *(4) Stabilization of up to eight weeks including:*

11 *(A) Connecting youth to community supports and services;*

12 *(B) In-home clinical support for youth and families;*

13 *(C) Connection with higher level support if determined necessary; and*

14 *(D) Collaboration with community partners and other state agencies.*

15 An increase in funds are needed to accommodate the expansion of Crisis Mobile Outreach  
16 (CMO) services and additional staff are required to provide these services on Oahu and a  
17 neighbor island. DOH/CAMHD suggests a funding allocation of \$3,560,000 or \$1,780,000 each  
18 for Oahu and a neighbor island, for successful execution of this pilot project on two islands.

1 **Department Testimony:** The Department of Health (DOH) **SUPPORTS** this bill to increase  
2 mental health supports for youth in crisis. DOH would also like to acknowledge and support the  
3 changes to this version of the bill which asks that two pilot sites be established, one on Oahu, and  
4 one on a neighbor island.

5  
6 While Oahu receives the highest number of CMO outreaches, the neighbor islands have less  
7 overall resources for mental health and would benefit from added crisis support services to  
8 reduce difficult, costly, and time consuming transport to Oahu for acute care and other high level  
9 services. Youth on neighbor islands are more likely to be waiting in Emergency Departments for  
10 longer periods of time, simply as a result of having to wait for transportation by life flight and for  
11 an acute bed to be open at the same time. This expansion of CMO services may help to divert  
12 youth from Emergency Departments across the state.

13 From January 2022 to February 2023 CMO response for youth among the islands were as  
14 follows:

15 Big Island: 152  
16 Maui: 198  
17 Kauai: 91  
18 Oahu: 260

19 These numbers suggest that all islands could benefit from expanded CMO support.

20 Statewide the number of reports CAMHD has been receiving has been consistently increasing at  
21 an alarming rate which indicates the need for increased supports for youth in crisis (see the data  
22 below):

23	January 1 2020 to January 1, 2021	300 reports
24	January 1, 2021 to January 1, 2022	533 reports
25	January 1, 2022 to January 1, 2023	659 reports

1 In addition to the increasing numbers within the state, studies conducted across the nation show  
2 strong support for increased crisis support services.

3 A 2020 paper from the National Association of State Mental Health Program Directors  
4 (NASMHPD) suggests that it is best practice for behavioral health crisis care to include helping  
5 families establish long-term community and mental health supports after crisis care  
6 (<https://www.nasmhpd.org/sites/default/files/2020paper6.pdf>). Many states, including  
7 Connecticut, Maryland, Massachusetts, New Jersey, Washington, and Wisconsin, among others,  
8 have implemented these supports in part, or all, of the state. Results from New Jersey show a  
9 reduced rate of out-of-home placements with increased use of the crisis response team for  
10 children and families  
11 ([https://www.nj.gov/def/childdata/continuous/Commissioners.Monthly.Report\\_1.22.pdf](https://www.nj.gov/def/childdata/continuous/Commissioners.Monthly.Report_1.22.pdf)). Results  
12 from a study of King County, Washington showed a savings of \$1 million for the county through  
13 diversion of 81% of children hospitalized at local emergency departments  
14 ([https://www.chdi.org/publications/reports/other/evaluation-connecticuts-mobile-crisis-  
15 intervention-services/](https://www.chdi.org/publications/reports/other/evaluation-connecticuts-mobile-crisis-intervention-services/)).

- 16 • A 2019 study comparing youth that received mobile crisis services to youth that received  
17 only behavioral health services in the Emergency Department, found that youth receiving  
18 mobile crisis services had a significant reduction in risk for additional behavioral health  
19 related visits to the Emergency Department  
20 (<https://ps.psychiatryonline.org/doi/epdf/10.1176/appi.ps.201800450>).
- 21 • Finally, a systematic review of multiple studies of crisis intervention services found that  
22 crisis intervention may reduce repeat hospital admissions, reduces family burden,  
23 improves mental state, and improved global functioning. Additionally, several of these  
24 studies suggested crisis intervention to be more cost-effective than hospital care  
25 (<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7052814/pdf/CD001087.pdf>).

26 Evidence across several studies clearly supports positive results from increased crisis supports.  
27 The passing of this bill would allow for the development of improved crisis response supports

1 for children and families in the community by establishing the Child and Adolescent Crisis  
2 Mobile Outreach (CMO) Team. This team would help families establish long-term community  
3 and mental health supports after crisis care. Doing so will help reduce the need for out-of-home  
4 placements such as foster care, and residential treatment. The research also suggests that this bill  
5 could help save money for the state by reducing the use of emergency departments and first  
6 responders who are not specialized in addressing mental health needs. These needs could better  
7 be addressed by a Child and Adolescent CMO Team specifically trained in mental health crises  
8 and support for children. Additionally, the use of high-cost, restrictive placements, such as  
9 residential treatment, may be reduced as children and families are better connected to more  
10 preventative, less restrictive, in-home, and outpatient supports.

11 Thank you for the opportunity to testify.

12 **Offered Amendments:**

13 DOH-CAMHD recommends the following allocations for the CMO pilot project:

14 \$1,780,000 for Oahu; and

15 \$1,780,000 for a neighbor island site.

16

**HB-948-SD-1**

Submitted on: 3/29/2023 12:10:30 PM

Testimony for WAM on 3/31/2023 9:45:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Mike Golojuch, Sr.	Testifying for Rainbow Family 808	Support	Written Testimony Only

Comments:

Rainbow Family 808 supports HB948. Please pass this bill.

Mike Golojuch,Sr., Secretary/Board Member



## CATHOLIC CHARITIES HAWAII

### **TESTIMONY IN SUPPORT OF HB 948 HD2 SD1: RELATING TO CHILD AND ADOLESCENT MENTAL HEALTH**

TO: Senate Committee on Ways and Means

FROM: Rob Van Tassell, President and CEO, Catholic Charities Hawaii

Hearing: Friday 03/31/2023 at 9:45 AM; CR 211 & via videoconference

Chair Dela Cruz, Vice Chair Keith-Agaran, and Members, Committee on Finance

We appreciate the opportunity to provide testimony in support of **HB 948 HD2 SD1**, to establish a two-year child and adolescent crisis mobile outreach team pilot program on Oahu. I am Rob Van Tassell, with Catholic Charities Hawaii.

Catholic Charities Hawaii (CCH) is a tax exempt, non-profit agency that has been providing social services in Hawaii for over 75 years. CCH has programs serving children, families, elders, homeless, and immigrants. Our mission is to provide services and advocacy for the most vulnerable in Hawaii. Catholic Charities Hawaii has a long history of providing services for the Child and Adolescent Mental Health Division (CAMHD).

There are many factors contributing to the increasing concern of youth mental health over the last few years, which was further compounded by the pandemic. Hawaii's youth continue to face severe challenges in the area of depression, anxiety, suicide, etc. The problem is further exacerbated by a shortage of mental health resources in Hawaii. According to Mental Health America, three-quarters of Hawaii youth with major depression didn't receive treatment and only 11% of youth with severe depression received "some consistent treatment". What is happening to the youth who are unable to access help?

Hawaii needs various levels of care to appropriately support the mental health needs of our youth this includes crisis services. Catholic Charities Hawaii supports this bill to establish and provide funding for a two-year child and adolescent crisis mobile outreach pilot program on Oahu. This bill would provide trauma-informed, crisis response services to youth and families on Oahu and provide an avenue to connect them with appropriate mental health services.

We urge your passing of this bill and ask for your assistance during this legislative session.

Please contact our Director of Advocacy and Community Relations, Shellie Niles if you have any questions.





# Parents And Children Together

BUILDING THE RELATIONSHIPS  
THAT MATTER MOST

ParentsAndChildrenTogether.org

## TESTIMONY IN SUPPORT OF HB 948 HD2 SD1

**TO:** Chair Dela Cruz, Vice-Chair Keith-Agaran, & Members  
Senate Committee on Ways and Means  
**FROM:** Ryan Kusumoto, President & CEO  
**DATE:** March 31, 2023 at 9:45 AM

**Parents and Children Together (PACT) supports HB 948 HD2 SD1 Relating to Child and Adolescent Mental Health**, which increases mental health services to children and adolescents by establishing a two-year pilot program to expand and support existing crisis response services and programs, including one neighbor island site. This program would be administered by the Department of Health's Child and Adolescent Mental Health Division (CAMHD).

Founded in 1968, PACT is a statewide community-based organization providing a wide array of innovative and educational social services to families in need. Assisting more than 15,000 people across the state annually, we help identify, address, and successfully resolve challenges through our 20 programs. Among our services are early education programs, domestic violence prevention and intervention programs, child abuse prevention and intervention programs, childhood sexual abuse supportive group services, child and adolescent behavioral health programs, sex trafficking intervention, poverty prevention and community building programs.

PACT's mission is to work together with Hawaii's children, individuals, and families to create safe and promising futures. Currently we provide mental health services to families with children through Family Functional Therapy and Multi-Systemic Therapy contracts with CAMHD. Our teams of professionals serve families with children with severe mental health conditions, and we are painfully aware of the growing need for child and adolescent mental health services.

One of the tragic consequences of the growing mental health crisis is the increase in suicide, suicide attempts and suicidal ideation our youth have been experiencing, as reflected in sources such as the CDC's Youth Risk Behavior Surveillance System survey. Crisis mobile outreach is a key resource for helping individuals struggling with thoughts of suicide and can be deployed as a preventive strategy. The structured follow-up included in this bill will provide needed support to youth in crisis.

Thank you for the opportunity to testify. Please contact me at (808) 847-3285 or [rkusumoto@pacthawaii.org](mailto:rkusumoto@pacthawaii.org) if you have any questions.



# HINAMAUKA

**HB948 HD2 SD1 Youth Mobile Crisis**  
COMMITTEE ON WAYS AND MEANS  
Senator Donovan M. Dela Cruz, Chair  
Senator Gilbert S.C. Keith-Agaran, Vice Chair  
Friday, Mar 31 2023: 9:45 : Room 211 Videoconference

## **Hina Mauka supports HB948 HD2 SD1**

*ALOHA CHAIR, VICE CHAIR AND DISTINGUISHED COMMITTEE MEMBERS. My name is Alan Johnson. I am the current chair of the Hawaii Substance Abuse Coalition (HSAC), a statewide organization for various substance use disorder and co-occurring mental health disorder treatment and prevention agencies.*

The crisis mobile outreach team pilot program is very much needed:

- (1) Connect crisis prevention with community collaboration and groups.
- (2) Quickly connect with youth in a face to face interventions.
- (3) Provide assessments while stabilizing.
- (4) Connect to stabilization beds while engaging provider groups and support services.

## **WHY DOES THIS MATTER?<sup>1</sup>**

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Suicide is a serious public health problem among all age groups and especially among youth, enacting an enormous toll due to the significant years of potential life lost.

A much larger number for adolescents is those who have suicidal thoughts or attempt suicide and survive. **Youth suicidal ideation, attempt and completion are on the rise.**

Results from the 2019 Youth Behavioral Risk Factor Surveillance System show that **18.8% of high school students seriously considered attempting suicide and 8.9% actually attempted suicide.** The cost of suicide in the United States in 2019 was estimated to be **\$926 billion** in medical costs, loss of productivity and value of statistical life.

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<sup>1</sup> Cause of Death Files, United Health Foundation, AmericasHealthRankings.org, accessed 2023. [https://www.americashealthrankings.org/explore/health-of-women-and-children/measure/teen\\_suicide/state/HI](https://www.americashealthrankings.org/explore/health-of-women-and-children/measure/teen_suicide/state/HI)



Risk factors associated with suicide among adolescents include:

- Psychiatric disorders such as major depressive, bipolar, substance use and conduct disorders.
- Psychiatric comorbidity, especially the combination of mood, disruptive and substance abuse disorders.
- Family history of depression or suicide.
- Loss of a parent to death or divorce.
- Physical and sexual abuse.
- Lack of a support network.
- Feelings of social isolation.
- Bullying.

HB948 is a positive step to addressing the large number of adolescents who have suicidal ideation.

We appreciate the opportunity to provide testimony and are available for further questions.

**HB-948-SD-1**

Submitted on: 3/29/2023 11:46:23 AM

Testimony for WAM on 3/31/2023 9:45:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Cards Pintor	Individual	Support	Written Testimony Only

Comments:

Aloha,

I support this bill.

Mahalo nui,

Cards Pintor

**HB-948-SD-1**

Submitted on: 3/29/2023 7:46:41 PM

Testimony for WAM on 3/31/2023 9:45:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Will Caron	Individual	Support	Written Testimony Only

Comments:

Please support HB948 HD2 SD1.

# Opportunity Youth Action Hawai'i

Committee: COMMITTEE ON WAYS AND MEANS  
Hearing Time: 9:45 a.m., March 31, 2023  
Location: State Capitol  
Re: HB948 HD2 SD1, Relating to Child and Adolescent Mental Health

Aloha e Chair Dela Cruz, Vice Chair Keith-Agaran, and members of the Committee:

We are writing in **support** of HB948 HD2 SD1, Relating to Child and Adolescent Mental Health.

This bill establishes a two-year child and adolescent crisis mobile outreach team pilot program on O'ahu to expand existing crisis response services and appropriates funds.

Crisis mobile outreach centers can be a vital resource for adolescents during a period in their lives in which they face many significant challenges. Social and academic pressures, family conflicts, mental health challenges, and bullying are all risk factors associated with suicide among adolescents. Results from the 2019 Youth Behavioral Risk Factor Surveillance System show that almost 20% of high school students nationwide seriously considered attempting suicide and nearly 9% actually attempted suicide. Mobile outreach centers offer quick, flexible, and confidential services and can provide care that addresses the specific needs of adolescents and reach areas that may be underserved by traditional service providers.

In 2022, the Hawai'i Department of Health: Child and Adolescent Mental Health Division received 659 reports of youth mental health crises - doubling the total reports from just two years prior. According to the Hawai'i Medical Association, over 70% of children in Hawai'i suffering from major depressive episodes prior to the COVID pandemic did not receive treatment, while calls to the Hawai'i Crisis Text Line increased by 54% in April of 2020. Data from the National Alliance for Mental Illness Hawai'i further indicates that Hawai'i lost 176 lives to suicide within a single year. Supporting crisis mobile outreach is essential to support the mental health and well-being of our adolescent population. The funding of this project ensures that our keiki have access to the support and care they need during difficult times.

Opportunity Youth Action Hawai'i is a collaboration of organizations and individuals committed to reducing the harmful effects of a punitive incarceration system for youth; promoting equity in the justice system; and improving and increasing resources to address adolescent and young adult mental health needs. We seek to improve the continuity of programs and services for youth and young adults transitioning from minor to adult status; eliminate youth houselessness and housing market discrimination against young adults; and promote and fund more holistic and culturally-informed approaches among public/private agencies serving youth.

**Please support HB 349.**

**HB-948-SD-1**

Submitted on: 3/30/2023 8:27:51 AM

Testimony for WAM on 3/31/2023 9:45:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Marion K A Kapuniai	Individual	Support	Written Testimony Only

Comments:

**SUPPORT WITH AMENDMENT TO INCLUDE ALL COUNTIES.**

**Thank you, M Kapuniai**