

Children's Mental Health Coalition Introduces Bill of Rights for Families Living With Mental Illnesses

For Immediate Release

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Washington, D.C., April 15, 2008 - The children's mental health coalition has created a Bill of Rights for Children with Mental Health Disorders and their Families. The coalition includes the American Academy of Child and Adolescent Psychiatry (AACAP), the Autism Society of America (ASA), the Child and Adolescent Bipolar Foundation (CABF), Children and Adults with Attention-Deficit Hyperactivity Disorder (CHADD), the Federation of Families for Children's Mental Health (FFCMH), Mental Health America (MHA), and the National Alliance on Mental Illness (NAMI).

This Bill of Rights represents the standard of what families living with mental illnesses should expect from treatment," said AACAP's President, Robert Hendren, D.O. "Children do better when they receive consistent, tailored treatment. Few children receive any treatment and fewer still receive the sustained, quality care that they require."

The Bill of Rights was created because of the inconsistency of accessible mental healthcare services throughout the country.

The Bill of Rights:

1. Treatment must be family-driven and child-focused. Families and youth, (when appropriate), must have a primary decision-making role in their treatment.
2. Children should receive care in home and community-based settings as close to home as possible.
3. Mental health services are an integral part of a child's overall healthcare. Insurance companies must not discriminate against children with mental illnesses by imposing financial burdens and barriers to treatment, such as differential deductibles, co-pays, annual or lifetime caps, or arbitrary limits on access to medically necessary inpatient and/or outpatient services.
4. Children should receive care from highly-qualified professionals who are acting in the best interest of the child and family, with appropriate informed consent.
5. Parents and children are entitled to as much information as possible about the risks and benefits of all treatment options, including anticipated outcomes.

6. Children receiving medications for mental disorders should be monitored appropriately to optimize the benefit and reduce any risks or potential side effects which may be associated with such treatments.

7. Children and their families should have access to a comprehensive continuum of care, based on their needs, including a full range of psychosocial, behavioral, pharmacological, and educational services, regardless of the cost.

8. Children should receive treatment within a coordinated system of care where all agencies (e.g., health, mental health, child welfare, juvenile justice, and schools, etc.) delivering services work together to support recovery and optimize treatment outcome.

9. Children and families are entitled to an increased investment in high-quality research on the origin, diagnosis, and treatment of childhood disorders.

10. Children and families need and deserve access to mental health professionals with appropriate training and experience. Primary care professionals providing mental health services must have access to consultation and referral resources from qualified mental health professionals.

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To interview a child and adolescent psychiatrist about this bill of rights, please contact AACAP's Communications Coordinator, Adam Lowe, at 202-966-7300, ext. 154 or alowe@aacap.org.