

The logo for the New York City Bar, featuring the text "NEW YORK CITY BAR" in a serif font, centered between two horizontal blue bars.

NEW YORK  
CITY BAR

**MENTAL HEALTH LAW COMMITTEE**

**REPORT ON LEGISLATION**

S. 6672  
A. 9649

Senator Morahan  
M. of A. P. Rivera

*AN ACT to provide for the establishment of a children's mental health plan; and to amend the education law, in relation to requiring the incorporation of social and emotional development standards in the development of elementary and secondary school educational guidelines.*

**THIS BILL IS APPROVED**

The Association of the Bar of the City of New York supports the passage of "The Children's Mental Health Act of 2006" (A9649 and S6672), and also offers several suggestions for its improvement (*see infra*).

This Act would direct the Commissioner of the Office of Mental Health to establish a children's mental health plan and implement such plan statewide. The Act attempts to address, from the outset, the management of problems of children which traditionally have been overlooked and allowed to exacerbate until becoming less manageable. As the Act states, one in ten children in this state suffers from a mental illness severe enough to cause some level of impairment, and 15% to 22% of the nation's youth experience social, emotional, and mental health problems requiring treatment. A recent report of the Office of Mental Health indicates that the rates of graduation from High School of children with such disabilities is a small fraction of those without such disabilities (see NYSOMH website, "Achieving the Promise"). Thus, the Act promotes the implementation of "social and emotional learning" so as to improve attendance records, classroom behavior, grade point averages and enjoyment of school generally.

The Act is also important, however, in that it indicates an emphasis on comprehensive mental health assessments, early intervention and treatment services for children as early as possible. Treatment of mental illness is generally most effective when procured early in the illness. With children particularly, through appropriate and early identification, evaluation and treatment, children may be afforded the opportunity to lead productive

lives not significantly altered because of their illness. Sadly, however, a study released in June of 2005 by the National Institute of Mental Health found that half of all lifetime cases of mental illness begin by age 14 and that despite the existence of effective treatments, there are long delays - sometimes decades - between the first signs of symptoms and when people obtain treatment.<sup>1</sup> New York has the opportunity not only to ameliorate the learning conditions in its schools, but also to preemptively salvage what might otherwise be lives full of anguish and despair.

The Association supports this Act but has several suggestions likely to realistically make this law more effective. We believe that the OMH should hold a series of hearings on children's mental health so that an action plan can be developed with the participation of all stakeholders, including the state and local government offices charged with planning pursuant to Mental Hygiene Law Article 41.

In addition, the Act's lack of any mention of the funding needed to further its objectives is problematic. In that regard, the Act contrasts with the latest initiative of OMH titled, "Achieving the Promise for New York's Children and Families," which intends to allocate \$62 million annually toward changing the ways that services are provided to children and the means through which services are accessed, and bringing about improvements in clinical quality.<sup>2</sup> Thus, the Association suggests that the Act include language to the effect of coordinating its plans with that of OMH's existing initiative.

Finally, and most importantly, we urge the passage of Senate Bill 6735-a, which would require insurance companies to provide the same coverage for mental health problems as that for physical health problems ("Timothy's Law"). Such appropriate insurance coverage would better ensure that families would be able to access needed mental health treatment and services for their children.

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<sup>1</sup> see <http://www.nimh.nih.gov/healthinformation/ncs-r.cfm>

<sup>2</sup> <http://www.omh.state.ny.us/omhweb/budget/2006-2007/children.htm>