

## How well does your state serve individuals with co-occurring Mental Illness and Intellectual Disabilities?

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There has been much discussion with regard to the need to improve efforts toward effective service provision between state service systems dedicated to providing mental health care and services to individuals with intellectual disabilities (ID) in order to better serve people with co-occurring issues. In evaluating and or planning services for people with ID and mental health needs, policy planners must use a framework which incorporates what we have learned about effective service provision. The necessary elements for effective services can be conceptualized as follows: access to services, appropriateness of services and accountability of services. Although all of these areas have been covered throughout the literature, the need to balance and integrate the elements is often overlooked. Without a balanced perspective, policy planning is often inadequate in meeting the needs of individuals with intellectual disabilities who use mental health services.

In April, 2003 the National Association of State Directors of Developmental Disabilities Services (NASDDDS) published a technical report written by Dr. Chas Moseley, Director of Special Projects, of the outcomes of a joint survey between NASDDDS and the National Association of State Mental Health Program Directors (NASMHPD). Participants of this survey (conducted in 2002) were state directors of the two organizations, with 37 states represented in all. The goal of the survey was to identify key components associated with successful service delivery. The survey included important measures of service effectiveness and findings indicated a need for improvements across effectiveness indicators.

In November, 2003 NADD disseminated the same survey via e-mail to participants at the NADD annual conference in Chicago as well as the NADD membership. This brief article will present the results associated with one of a number of important survey questions: How well does your state serve individuals with co-occurring Mental Illness and Intellectual Disabilities?

There were a total of 229 NADD respondents; 91% from 37 U.S. states and the District of Columbia, 8% of respondents were Canadian, while approximately 1% of the respondents from Europe and Australia.

Unlike the original survey, most of the respondents were not state directors. The table below provides a description of NADD respondents with regard to their stated area of specialty (4% responded as "other").

### Area of Specialty

Admin	42%
Clinician	12%
Education Trainer	2%
Family Member	2%
MD	1%
Nurse	2%
Psychiatrist	6%
Psychologist	16%
Researcher	1%
Social Worker	10%
Direct Care Provider	2%

The question "In your opinion, how well does your state serve individuals with co-occurring MI/DD?" was broken down into several components to measure service effectiveness:

- a) Access to services in the appropriate service system(s);
- b) Quality, appropriateness and effectiveness of services provided;
- c) Overall effectiveness of collaboration between the state MH authority and DD authority in planning, developing and delivering services;
- d) Overall effectiveness of collaboration between local ( regional/ area/county) MH authorities and their counterpart local DD authorities in serving people;
- e) Overall effectiveness of collaboration between state MH and DD authorities and local authorities serving the same populations;
- f) Overall effectiveness of statewide training, technical assistance and other related efforts to disseminate current, state-of-the art information concerning treatment and support; and
- g) Importance of improving services in the context of competing agency priorities.

Consistent with the original NASDDS/NASMHPD survey, the NADD e-mail survey respondents were asked to rate the components on a scale ranging from one, least effective to five, most effective. The results are outlined in the table below.

Rating	Access to appropriate services (a)	Quality and appropriate services (b)	Measures of Cross systems collaboration (c-e)	Training and technical assistance (f)
1 (least effective)	22%	18%	25%	38%
2	32%	37%	35%	26%
3	34%	34%	38%	23%
4	12%	11%	10%	12%
5 (most effective)	<1%	<1%	2%	1%

The results from the original NASDDS/NASMHPD survey conducted in 2002 indicated that state directors found problems existed with regard to service effectiveness measures across systems for individuals with co-occurring intellectual disabilities and mental disorders. A significant number of state directors found services to be less than effective in all indicators. Although outcomes were similar to those found in the original survey, the current survey results indicate that NADD respondents were even more discouraged by their experiences in the system, with a significant majority of respondents rating access, quality, cross systems collaboration, training and technical assistance as less than effective.

Efforts on behalf of mental health and ID service systems to collaborate in order improve services is a very positive development. It is important for policy planners to measure the effectiveness of the current system in order to implement meaningful change in the future. The survey developed by the state DD and MH directors is an important step to gain a better understanding of ways to promote effective service provision. Clearly, all stakeholders have an important role to play in creating positive change in the system of care. The NADD results indicate that it may be useful to repeat the survey again to include both state directors and service providers who may provide ongoing information and feedback with regard to attempts to improve service effectiveness over time.

We would like to thank the state directors for granting permission to use their survey. For more information about the NASDDDS/NASMHPD survey, please contact Chas Moseley, Ed.D, Director of Special Projects at [cmoseley@nasdds.org](mailto:cmoseley@nasdds.org).

This article is dedicated to the memory of our friend and colleague, Dr. John Jacobson who dedicated much of his professional life to improving services to people with disabilities.

Published in NADD Bulletin, Vol. 7, #4, July-August 2004, p. 78