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Proposed Amendments to TANF to Assist Adults and Children with Mental Disorders:

Screening and Assessment

- Individuals with mental illness and parents of children with serious mental disorders should not be sanctioned under TANF for failure to comply with requirements. Instead, such individuals should be identified and receive appropriate services to enable them to work or otherwise comply with TANF requirements.

- Federal law should encourage states to improve the screening of TANF recipients to identify adults with mental illness and children in the family with a mental disability.

- Prior to imposing sanctions, states should be required to screen individuals for presence of a mental illness or other disability and to screen for mental disability in children of TANF recipients, to identify problems that hinder ability to work or to comply with TANF.

- TANF recipients identified through such a screen, should then receive a full mental health assessment.

- Sanctions should not be permitted for those found to have such problems, and instead services and supports should be furnished.

RATIONALE

This change to the law is critical for a number of reasons:

- The high number of welfare clients who have a mental illness and/or other disability.

- How seriously such issues affect an individual’s ability to work.

- Because identification of mental health problems happens less often in welfare offices than does screening for low skills, learning disabilities, and substance abuse.

This change would include:

- Screening: A process to identify individuals who are most likely to have mental health conditions. Screens use common symptoms or characteristics of mental health conditions
and flag those who are likely to have a mental illness.

- **Assessment**: An in-depth examination of the nature and extent of an individual’s mental health condition that may lead to diagnosis.

**EXAMPLES OF GOOD PRACTICE**

- The Targeted Assessment Project (TAP) in Kentucky places Targeted Assessment Specialists on-site and full time at the TANF and child welfare offices. The specialists screen, assess, refer, and do follow-up services for TANF recipients. Services are focused on identifying mental health problems, substance abuse, domestic violence, and learning problems. The specialists work closely with each individual’s TANF case worker. Each specialist is a trained clinician/counselor.

- TANF applicants in Portland, Oregon participate in an “Addiction Awareness Class” at initial intake. During the class, the recipients also take the Zung Depression Scale. The results of the Zung are calculated immediately by the alcohol and drug assessment specialist who is onsite. Both the client and the client’s caseworker is informed of the test results and is given advice regarding what to do next.

- In Minnesota, the Early Childhood Screening Program screens for health and developmental problems in three and four year-old children. The children identified as having special needs are then targeted to receive services through the School Readiness Program. The School Readiness Programs are different for each community and focus on the specific needs of each person.

**FURTHER DETAILS OF THE RECOMMENDATION**

To implement this recommendation, the following steps should be taken:

- The Department of Health and Human Services should develop model screening instruments that may be used to identify adults and children with mental illness and distribute these to the states.

- States should be encouraged to adopt mechanisms that will improve screening and identification of mental health needs, such as co-location of mental health staff in TANF offices, contracting for mental health programs to screen TANF recipients, training specialized case workers to work with families suspected of having mental health problems, and ensuring that TANF children are given EPSDT screens through their Medicaid provider.

- States should monitor screening and assessment processes to ensure that interviewers are well-trained and clients are responsive during screens.