Legislation is needed to curb the placement of foster youths in for-profit psychiatric facilities

LOS ANGELES, CALIFORNIA, UNITED STATES, February 12, 2020 /EINPresswire.com/ -- Legislation introduced in Oregon calls for better oversight of for-profit behavioral hospitals where foster children have been chemically and physically restrained.[1] It's a measure that Citizens Commission on Human Rights International (CCHR), a mental health industry watchdog applauds and has argued for since 2015 when it discovered that private psychiatric hospital chains were profiting from Medicaid-covered children being admitted to their facilities, including those in foster care.

The Wall Street Journal reported that foster children in Oregon were sent to privately run group homes out of state which an Oregon state memorandum said were owned by Acadia Healthcare and Sequel Youth and Family Services (Sequel).[2]

States and various tribal governments sent kids, including those in foster care, to one facility, Acadia Montana,[3] which closed last year after a 9-year-old Oregon girl placed there was chemically restrained and frequently put in seclusion. Annette Smith, a public defender who represented the girl, contacted state Oregon Senator Sara Gelser, who chaired a Senate Committee on Human Services about the injections being given the child.[4] She and others introduced legislation this year to help curb this practice. Children aged 5 to 18 were treated for "behavioral" issues that included hyperactivity and so-called "oppositional defiant disorder,"[5] conditions CCHR says are highly subjective.

The Center for Health Journalism pointed out that kids—especially teens—taken into state custody are “disproportionately placed in treatment programs for behavior not uncommon for their age, like smoking pot or sneaking out at night with friends.” According to their article, “It’s time to start asking hard questions about treatment foster care near you.”[6]
Starting in 2015, CCHR question this, reporting to legislators in every state that children were a lucrative market for for-profit psychiatric facilities. For example, according to Acadia’s 10-K SEC filing, “Management believes that children and adolescents are a patient class that is less susceptible to reductions in reimbursement rates.”[7] It estimated that the Child and Adolescent Behavioral Healthcare market would have reached $11 billion in 2014.[8] Acadia’s 2018 Annual Report recorded total revenue of $3.01 billion, up 6.2% compared with $2.84 billion in 2017.[9]

Utah state regulators recently criticized Sequel’s Red Rock Canyon School that closed in August 2019 after “numerous accounts of mistreatment, abuse, acts of violence and overall disrespect toward residents.”[10] Sequel’s Mount Pleasant Academy in central Utah was also shut down, due, the company said, to low enrollment. But Senator Gelser told The Salt Lake Tribune she was concerned the foster children from her state were not safe, at Red Rock and other Sequel facilities.[11] The Oregon Department of Human Services also vowed that it will no longer send kids to any other facility run by Acadia Healthcare.[12]

The chemical restraint of foster youth continues despite in 2011, the Department of Health and Human Services stating its concern about use of psychotropic drugs among children in foster care. They represented 3% of children covered by Medicaid, yet, based on a study of pharmacy claims in 16 states they were enrolled in Medicaid and prescribed antipsychotic drugs at nearly nine times the rate of other children receiving Medicaid.[13]

As exposed in 2019, one in four children in foster care between ages 6 and 17 are administered at least one psychotropic drug. A significant number of children are given a combination of two, three, or four drugs at the same time.[14] Nearly one-quarter (24%) of children eligible for child welfare assistance used a psychotropic drug, almost five times the rate of children eligible on a basis other than disability or child welfare assistance (5%), according to Medicaid and CHIP Payment and Access Commission.[15]

The use of dangerous antipsychotics is not the only drug administered foster children. CCHR International recently filed Freedom of Information requests for state information on the number of 0-17 Medicaid recipients was prescribed psychotropic drugs. To date, 11 states have responded reporting stimulants are the top class of drugs prescribed in 10 of these states. Between 2013 and 2017, a total 616,594 Medicaid covered children and adolescents in 11 states alone were prescribed psychiatric drugs, of which 73,523 were aged 0-5.[8]

A September 2017 study of 3,271 081 Medicaid-enrolled children also revealed that stimulants (amphetamine-type) accounted for both the highest proportion of expenditures (20.6%) and days of prescription drug use (14.0%) among all medication classes.[16]

Jan Eastgate, President of CCHR International said, “The Oregon bill is a step in the right direction
but all states should have regulations that prohibit the use of chemical and physical restraints on any child—foster youth or not.” Further, “Almost weekly, media report heinous abuses being committed in for-profit psychiatric hospitals, requiring greater government oversight. Only this can reverse the child neglect crisis in an industry that is putting profit before child patient safety. Medicaid should also be curbing the mass psychotropic drugging of Medicaid-eligible children and teens while those psychiatrists prescribing the drugs require closer scrutiny of their practices and action taken where abuse is found.”

CCHR is the mental health watchdog responsible for more than 180 laws that now protect patients from damaging practices. DONATE to support its work here.

Read the full article here.

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Amber Rauscher
Citizens Commission on Human Rights
+1 323-467-4242
e-mail us here
Visit us on social media:
Facebook
Twitter

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