



BHEC

BEHAVIORAL HEALTH EQUITY COLLABORATIVE

ABOUT THE BEHAVIORAL HEALTH EQUITY COLLABORATIVE

The Behavioral Health Equity Collaborative (BHEC) is dedicated to advancing mental health equity in California by uplifting the voices of Black, Indigenous, and People of Color (BIPOC) communities in state policy making. BHEC is one of the few collaboratives in California that explicitly focuses on mental health equity in BIPOC communities. The members represent BIPOC led organizations across California counties and regions. Our goals include: highlighting policy research and development, engaging in advocacy with state agencies and legislature, building capacity of BIPOC-led and community serving organizations.

CPEHN'S NETWORK MODEL

CPEHN uses a network model, as opposed to a coalition model, for BHEC because our collaboration is ongoing and intended to build towards long-term systemic change. It is our belief that deep relationships are necessary to advance equity and racial justice. CPEHN is a network with several “micro-networks”, including BHEC. By convening these spaces, we strive to achieve meaningful change through three main network functions of connectivity, alignment, and action.

Connectivity:

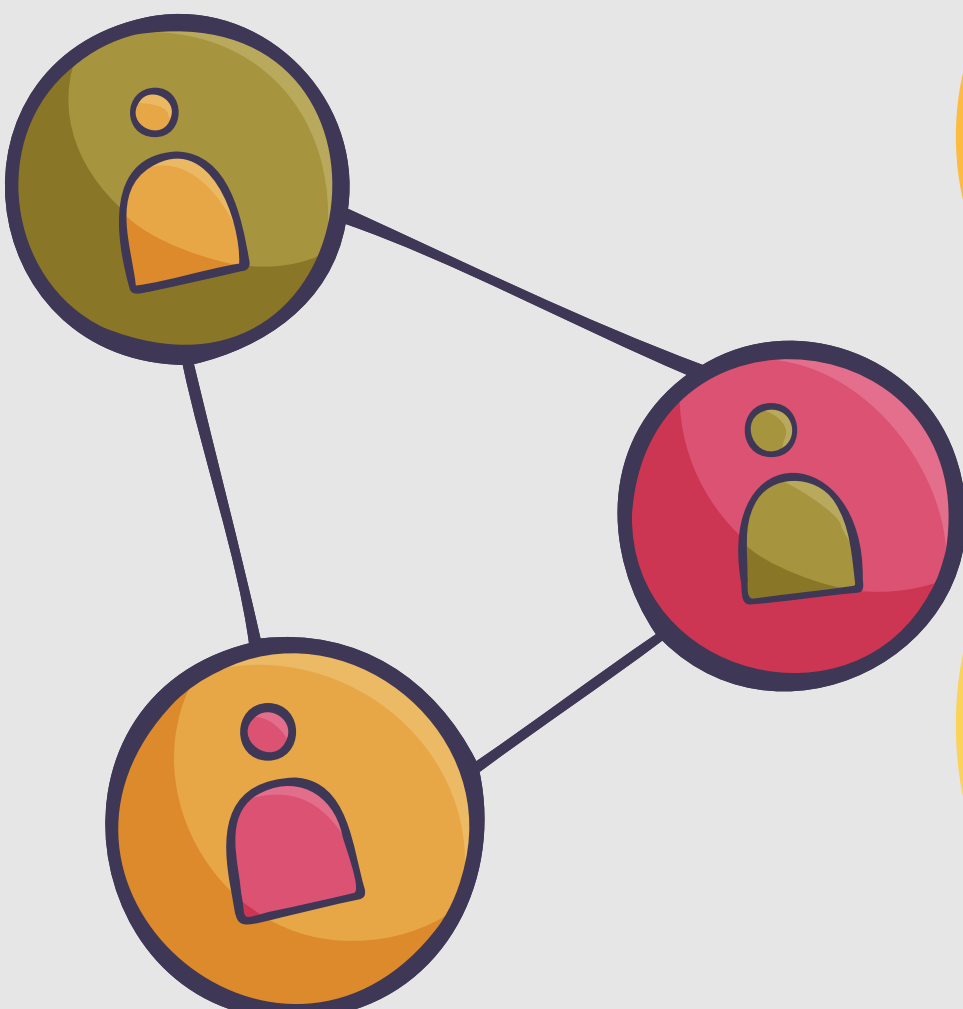
Networks build connectivity by forming relationships within the partnership to share information, ideas, resources, experiences, interests and passions.

Alignment:

The connections bring forth an alignment of values that allows network partners to achieve collective goals.

Action:

When there is an alignment of values and goals, coalitions are formed and partners are transitioned into taking action.



EVALUATION APPROACH & RESULTS

CPEHN continually evaluates our work and the health of our networks, including both process and outcomes. For 2022, the BHEC members were asked to rank the performance of the collaborative through a series of statements evaluating the network's goals and impact on participating organizations. On a Likert scale of 1-5, the participants of the survey indicated their level of agreement to these statements on behalf of their respective organizations. We combined a total of 18 responses on the network survey and scored a cumulative average percentage based on the amount of partners that "agreed" or "strongly agreed" to the statements.

DEVELOP

The network is supporting partners in developing shared solutions towards shared goals.

94%

AMPLIFY

The network is amplifying the perspectives of communities of color and other underserved communities in the policy process.

94%

BUILD

The network is supporting partners in building their power and the power of their communities.

82%

My organization has strengthened skills to advocate for our communities' priorities and taken on new or more leadership roles in our community.

94%

My organization has taken on new or more leadership roles in developing/advancing policies.

88%

My organization has collaborated with other partners to successfully pass shared policy goals.

88%

The communities my organization works with are engaging more in the development and implementation of policies that impact their health.

82%

My organization's level of influence with policymakers and/or key stakeholders has increased.

76%

My organization has helped foster new community leaders to focus on health equity.

82%

The network has internal communications and mechanisms channels that support information sharing and learning.

100%

Partners add value to each other's organizational work.

100%

The network centers equity principles in policy development.

100%

The network has mechanisms in place to support collaboration and joint action.

94%

Partners achieve more together than they could alone.

100%

Partner organizations trust each other.

82%

"Working within BHEC and creating a listening session [in the Hmong community] opened up a lot of doors in Butte County."

-Hmong Cultural Center of Butte County

EVALUATION ANALYSIS

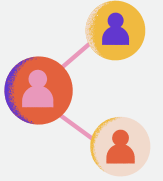
Based on the network survey and a series of one-on-one interviews with members, CPEHN has gleaned the following lessons for the future of BHEC:



BHEC is meeting the needs of partners for connectivity, capacity building, information sharing, and collaboration.



BHEC partners have taken collective action on some issues, and there is opportunity to do more coordinated advocacy.



BHEC can improve by creating more facilitated opportunities for partners to connect across regions, populations, and strategies.

BHEC has some policy issue area alignment among partners, particularly on:

- work related to community-based behavioral health workforce development
- community voice
- data equity
- the crisis continuum
- prevention and early intervention programs

2022 ACTIVITIES AND OUTCOMES:



Over 40 advocates from 27 organizations received monthly training opportunities on topics including: Advocacy 101, Public Comment/Testimony Training, Critical Race Theory.



Thanks to the support of the California Health Care Foundation and the Mental Health Services Oversight and Accountability Commission, CPEHN invested \$1.5 million in members to support participation and community voice.



CPEHN and member organizations held nine listening sessions and collected data from 447 community members, which led to the publication of “A Right to Heal: Mental Health in Diverse Communities”.

BHEC members advocated to advance the policy agenda through:

- 16 legislative visits
- 6 comment letters on topics including: mobile mental health crisis services, community health workers
- meetings with the Department of Health Care Services and the California Health and Human Services Agency to provide feedback on the design of mobile crisis mental health teams and amplify concerns about CARE Court’s disproportionate impact on BIPOC communities.

2022 POLICY PRIORITIES:

1

Workforce Development: BHEC supports Community Health Workers, Promotoras, and Representatives, who are trusted members in their communities, to develop an equitable career ladder for growth and sustainability of this impactful and critical career field in mental health services.

2

Addressing Crisis: For many BIPOC communities, experiencing a mental health crisis has historically resulted in more violence and trauma at the hands of law enforcement or other state sponsored institutions rather than receiving the mental health support services that are needed. BHEC supports initiatives that are re-framing how we respond to those experiencing a mental health crisis with direct mobile services from mental health professionals.

3

Prevention & Early Intervention: BHEC continues to champion initiatives that create universal, equitable, and culturally congruent access to mental health care for BIPOC communities. This includes an investment in prevention and early intervention that will address mild to moderate mental health needs. BIPOC communities should not have to experience a mental health crisis before accessing early preventative and early intervention support services.

4

Funding/Capacity Building/Training: The COVID-19 pandemic has only affirmed that community based organizations are critical in serving the needs of BIPOC communities. BHEC advocates for centering health equity and racial justice, especially in mental health services. Sustainable funding/capacity/training are needed so that communities can thrive.

2022-2023 PARTNERS:

API Equality- LA	Southern CA/Los Angeles	Asian Pacific Islander LGBTQIA+	Advocacy
Bakersfield American Indian Health Project	Central Valley/Bakersfield	Indigenous/Native American	Direct Service
California Black Health Network	Statewide	Black/African American	Advocacy
California Black Women's Health Project	Southern CA/Los Angeles	Black/African American	Direct Service
California Consortium for Urban Indian Health	Statewide	Indigenous/Native American	Advocacy
California Pan-Ethnic Health Network	Statewide	Multiracial	Advocacy
The Cambodian Family	Southern CA/Santa Ana	Cambodian/Refugee and Immigrant Families	Direct Service
Central Valley Immigrant Integration Collaborative	Central Valley/Fresno	Immigrant Community	Direct Service
El Sol Neighborhood Education Center	Southern CA/Inland Empire	Latinx	Direct Service
Empowering Pacific Islander Communities	National/ Southern CA based	Native Hawaiian & Pacific Islander	Advocacy
Hmong Cultural Center of Butte County	Northern CA/Butte County	Hmong	Direct Service
Korean Community Center of the East Bay	Northern CA/East Bay Area	Korean	Direct Service
Latino Coalition for a Healthy California	Statewide	Latinx	Advocacy
Little Manila Rising	Northern CA/Stockton	Filipinx	Direct Service
Multi-Ethnic Collaborative of Community Agencies	Southern CA	Multiracial	Direct Service
Mental Health Advocacy Services	Southern CA	Multiracial	Direct Service
Native American Health Center	Northern CA/San Francisco	Indigenous/Native American	Direct Service
On Track Program Resources	Northern CA/Sacramento	Multiracial	Direct Service
Painted Brain	Southern CA/Los Angeles	Multiracial	Direct Service
Restorative Justice for Oakland Youth	Northern CA/Oakland	BIPOC youth	Direct Service
Southeast Asia Resource Action Center	National	Southeast Asian	Advocacy
San Diego Refugee Communities Coalition	Southern CA/San Diego	Refugee Community	Direct Service
True North	Northern CA/Eureka	Indigenous/Native American	Direct Service
United Women of East Africa	Southern CA/San Diego	Black/East African Community	Direct Service
Vision y Compromiso	Southern CA/Los Angeles	Latinx	Direct Service
Vista Community Clinic	Southern CA	Multiracial	Direct Service
California TRANScends	Statewide	BIPOC Transgender Community	Advocacy
Mixteco Indigena Community Organizing Project	Central Coast/Oxnard	Indigenous Migrant Community	Direct Service