Policy Strategies for Reducing Behavioral Health Disparities

December 6, 2018
CPEHN’s local advocacy

My Health LA Behavioral Health Workgroup

Stockton Reducing Disparities Public Hearing

Listening Sessions
CPEHN’s Immigrant Mental Health Research

• Behavioral Health Equity Collaborative Priority
• Reviewed existing research.
• 12 counties were interviewed (13 total responses, Napa County was interviewed twice).
• 12 community-based organizations were interviewed (including 4 county mental health subcontractors).
• Conducted 4 listening sessions with advocates and community-based organizations across California.

Watch out for January 2019 publication!
Out4MentalHealth Advocacy Workshop
#Out4MentalHealth

CALIFORNIA LGBTQ HEALTH AND HUMAN SERVICES NETWORK & NorCalMHA

Mental Health America

MENTAL HEALTH SERVICES AUTHORITY OF CALIFORNIA - 63

WELLNESS - RECOVERY - RESILIENCE

Mental Health Services Oversight & Accountability Commission
Why do we do this work?

- LGBT youth are 2 to 3 times more likely to attempt suicide.
- LGBT youth are more likely to be homeless.
- Lesbians are less likely to get preventive services for cancer.
- Gay men are at higher risk of HIV and other STDs, especially among communities of color.
- Transgender individuals have a high prevalence of HIV/STDs, victimization, mental health issues, and suicide and are less likely to have health insurance than heterosexual or LGB individuals.
- Elderly LGBT individuals face additional barriers to health because of isolation and a lack of social services and culturally competent providers.
- LGBT populations have the highest rates of tobacco, alcohol, and other drug use.

Health disparities are linked to societal stigma, discrimination, and denial of their civil and human rights. Discrimination against LGBT persons has been associated with high rates of psychiatric disorders, substance abuse, and suicide.

What are our rights to affirming care?

- **Local Control Funding Formula – Parent and Community Involvement (CA)**
  - Statute requires the inclusion of parents, including parents or legal guardians of targeted disadvantaged pupils in the planning and implementation of the LCFF.
  - Equity, Culture and Climate, Family and Community, Professional Development

- **Mental Health Services Act - Cultural Competence (CA)**
  - Equal access, appropriate interventions, addresses disparities, culturally specific services, trained providers, cultural understanding, and active strategies to engage diverse communities

- **Affordable Care Act - Section 1557 (Federal)**
  - First federal law to prohibit discrimination against LGBTQ people in the health system. The law contains explicit protections for transgender, gender nonconforming, non-binary, and intersex individuals as well as LGB people based on sex stereotyping.
Local Decision Makers

- MHSA Steering Committee
- Mental/Behavioral Health Board Representative(s)
- Drug and Alcohol Advisory Board
- Local School Boards
- Behavioral Health Department Director
- Board of Supervisors
How does the public mental health system work?

County

- **Regulations/Policies** - Board of Supervisors (advised by BH Boards, MHSA Committees, Alcohol and Drug Advisory Board, etc.), Director of the Department of Behavioral Health, School Boards, other local boards and commissions

- **Funding**
  - Receives federal and state Medicaid/Medi-Cal funds
  - Receives MHSA dollars,
  - Receives state realignment dollars
  - Some counties receive SAMHSA block grant monies
  - Some counties receive Medi-Cal Waiver program funds
  - Some counties have other revenue streams (local taxes, fees, etc.)
How does the public mental health system work?

State

- Regulations/Policies - legislation, executive branch (Governor, Health and Human Services Agency, MHSOAC, Board of Education)

- Funding
  - Medi-Cal provides Medicaid matching dollars to counties (50% rate)
  - Uses and distributes MHSA dollars
  - Distributes SAMHSA block grants
  - Provides “realignment” dollars
  - Distributes “Medi-Cal Waiver” funding
How does the public mental health system work?

Federal

- Regulations/Policies - legislation, executive order, and judicial rulings, SAMHSA (advised by state BHPC)

- Funding
  - Medicaid provides “matching” dollars for Medi-Cal
  - Provides additional funding for Medicaid/Medicare waivers
  - Provides SAMHSA block grant
Where can I engage in the mental health planning process?

- **County**
  - MHSA Steering Committee
  - Mental Health Board
  - Alcohol and Drug Advisory Board
  - School District Boards
  - Board of Supervisors

- **State**
  - Mental Health Services Oversight and Accountability Commission (MHSOAC)
  - California Behavioral Health Planning Council (BHPC)
  - Department of Health Care Services Stakeholder Engagement
  - Elected Representatives

- **Federal**
  - Substance Abuse and Mental Health Services Administration (SAMHSA)
  - Elected Representatives
Creating Change

What is one thing you would like to see changed? Be specific.

Who has decision making power to make this change?

Where do you start advocating first?
Handouts

County Mental Health Boards and Commissions

How to Make Public Comment

#Out4MentalHealth Project Fact Sheet
Thank you!

Questions, comments, confusion? Email me!

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Please Submit Public Charge Comments!

Make sure your comments are submitted before December 10, 2018.

The best way to comment is to go online to the federal public charge comment portal at regulations.gov. Click on “comment now.”

Join the Protecting Immigrant Families National Campaign – Go to: www.protectingimmigrantfamilies.org to learn about opportunities to take action and the latest updates on policy.

You are also welcome to reach out to us directly -- contact Keerti Kanchinadam at kkanchinadam@cpehn.org or 510-832-1160.
Thank you!

Questions?