State of Mental Health Funding in California  June 19, 2020

A budget should reflect the values and priorities of our nation and its people.

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Today is Juneteenth

- Ta-Nehisi Coates' opening statement to Congress regarding reparations on June 19, 2019
- From Vox, an interview with Prof. Karlos Hill from June 19, 2018
- A Twitter thread from Jelani Cobb on Juneteenth 2019
- From The New York Times, an article on black chefs and celebrating Juneteenth in 2020
- Angela Davis, of course (part of a larger interview with Democracy Now!)
- ABA Webinar on Juneteenth https://americanbar.zoom.us/webinar/register/WN_lf8ozYbeQZSw2HCipmmtPw
The onset of the COVID-19 pandemic underscores the need for an equitable mental health system.

- do not even account for the longstanding mental health disparities we all know about. [https://cpehn.org/page/mental-health-care-california-inequities-persist](https://cpehn.org/page/mental-health-care-california-inequities-persist)
- these facts and figures do not account for what we may not know yet. While the state has promoted the use of telehealth, is it really work?
As a result, California has experienced an unprecedented economic crisis.

- Due to COVID-19, California is experiencing an unprecedented economic crisis.
- Governor proposed $54 billion in cuts
- You may heard about some of the cuts, including cuts to Health4All elders, adult dental benefits, the black infant health program.
Cuts to behavioral health initiatives

- Eliminates Behavioral Health Quality Improvement Program
- Defers Mental Health Services Act (MHSA) Reforms
- Maintains Proposition 56 Funding for Trauma Screenings
- Eliminates Screening, Brief Intervention and Referral to Treatment for Opioids and Other Illicit Drugs
- Fails to Implement an Expansion to Screening for Additional Substances
- Maintains Funding for Drug Medi-Cal Organized Delivery System
- Maintains Funding for Mental Health Services for Inmates
- Maintains Funding for Prevention, Early Intervention and Treatment Services to Prevent Opioid Deaths.
- Disregards Proposed to establish Separate DMC-ODS System for Native American and Alaskan Native Communities.
California’s budget shortfall directly impacts access to mental health services.

<table>
<thead>
<tr>
<th></th>
<th>18/19</th>
<th>19/20</th>
<th>20/21</th>
<th>21/22</th>
<th>22/23</th>
<th>% Change 18/19-22/23</th>
</tr>
</thead>
<tbody>
<tr>
<td>1991 MH Realignment</td>
<td>$1,270.8</td>
<td>$1,134.6</td>
<td>$1,134.6</td>
<td>$1,134.6</td>
<td>$1,134.6</td>
<td>-10.7%</td>
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<tr>
<td>2011 BH Realignment</td>
<td>$1,483.2</td>
<td>$1,250.2</td>
<td>$1,278.5</td>
<td>$1,322.9</td>
<td>$1,383.7</td>
<td>-6.7%</td>
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<tr>
<td>MHSA</td>
<td>$2,105.3</td>
<td>$1,847.8</td>
<td>$2,242.3</td>
<td>$1,919.3</td>
<td>$1,704.0</td>
<td>-19.1%</td>
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<tr>
<td><strong>Total</strong></td>
<td>$4,859.3</td>
<td>$4,232.6</td>
<td>$4,655.4*</td>
<td>$4,376.8</td>
<td>$4,222.3</td>
<td>-13.1%</td>
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<tr>
<td>Dollar Change</td>
<td>-$626.70</td>
<td>$422.80</td>
<td>-$278.60</td>
<td>-$154.50</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percent Change</td>
<td>-12.9%</td>
<td>9.9%</td>
<td>-6.0%</td>
<td>-3.5%</td>
<td></td>
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</tr>
</tbody>
</table>
California has masked the impact of the cuts on access to mental health services

- Many of California’s mental health programs are funded through non-state general revenue funds.
- **Non-state general revenue funds are special fees or taxes, such as a vehicle license fees, tobacco taxes, or taxes on millionaires.**
- In mental health, two big sources of non-state general revenue include Realignment and the Mental Health Services Act.
- Currently, total funding for county behavioral health services is 9 billion dollars.
Other “non-mental health” cuts will also have an impact on access to mental health services.

- Failed to include funds for Health4All Elders
- Withdrew funds for the Black Infant Health Program
- Mental Health Services for Postpartum women in Medi-Cal
- provides $3.2 billion for the support of Public Health programs and services, a decrease of .3 percent from the 2020-21 Governor’s Budget.
- Withdrew Mental Health Equity Funds
- *Meanwhile, we can expect 1.3 million new people to join the Medi-Cal Program.*
Federal funding is a drop in the bucket.

The CARES Act:
The state is allocating $1.3 billion of its CARES Act funding directly to counties based on population size to address the public health, behavioral health, and other health and human services needs that have arisen as a result of the COVID-19 pandemic. However, counties must “duke it out” at the local level.

Federal Emergency Management Agency Crisis Counseling Assistance and Training Program – Immediate Services Program ($1.7 million for 60 days) requested grant funding for Regular Services Program (RSP) ($84.6 million)
In the midst of national protests fighting police violence, California policymakers are expressing commitment to divert funds away from law enforcement to other services while refusing to acknowledge the impact of budget cuts on mental health services.
alternatives to police for mental health crises are important, but details and budgets matter.

- city leaders have proposed to redirect some police calls to the mental health system. Other cities have made similar announcements.
  - Sacramento: https://www.capradio.org/articles/2020/06/15/sacramento-mayor-announces-plans-for-police-reform/
racism impacts our mental health system too.

- Institutional racism in mental health care. *BMJ (Clinical research ed.)*, 334(7595), 649–650. [https://doi.org/10.1136/bmj.39163.395972.80](https://doi.org/10.1136/bmj.39163.395972.80)

- **Anti-racism and anti-oppression in mental health services**
  sagepub.co.uk/journalsPermissions.nav DOI: 10.1177/1363461512441594 tps.sagepub.com


- Implicit Bias in Mental Health [https://www.kcrw.com/culture/shows/second-opinion/implicit-bias-in-mental-health](https://www.kcrw.com/culture/shows/second-opinion/implicit-bias-in-mental-health)


California has perpetuated the structural racism that we know drives mental health disparities.

- California has not even assessed the impact of telehealth on utilization of mental health services in California.
- Impact of economic crisis on ethnic-specific organizations has not yet been assessed.
- Historically, California has systematically disinvested in culturally appropriate mental health care for decades.
- California systematically dismantled the Office of Cultural Competence in 2010.
- California’s public mental health system has refused to address widespread disparities.
- Vetoed legislation to expand use of non-licensed mental health professionals such as peers.
- They’ve sunset funding for community-defined practices.
- Lack of investment in research development funds on culturally specific evidence based practices for communities of color, other than CRDP.
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- **Sacramento:** [https://www.capradio.org/articles/2020/06/15/sacramento-mayor-announces-plans-for-police-reform/](https://www.capradio.org/articles/2020/06/15/sacramento-mayor-announces-plans-for-police-reform/)
Advocacy Opportunities

• Many Californians are pushing for additional taxes and revenues at the state level. https://www.sacbee.com/article243245016.html
  – Higher Earners (Non-state general revenue funds), Gas Taxes, Online Sales Tax, Greenhouse Gas Reduction Tax, Marijuana
• getting involved in budget reforms at the local level.
• Advocates are asking for the state to declare racism as a public health crisis. https://ignatiusbau.com/2020/06/08/local-and-state-governments-are-declaring-racism-as-a-public-health-crisis/
• Some county behavioral health departments are investing in technical assistance funds for small CBOs:
  – In Los Angeles, Community Incubation Academy is designed to provide mentorship, training and technical assistance to small and mid-sized grassroots community based organizations
  – https://communitypartners.org/transforming-la-through-partnership

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Questions and Discussion