

CAN Presentation

2023 CAN Priority: Addressing Community Mental Health & Wellness

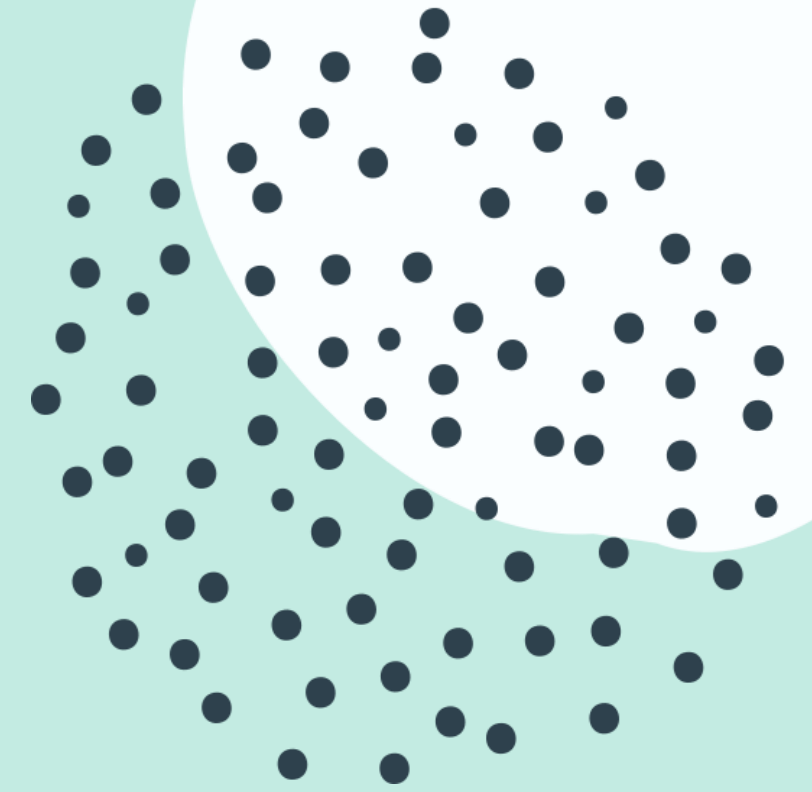
Presentation by Austin City Council

Public Health Committee

May 10, 2023

COMMUNITY
ADVANCEMENT
NETWORK



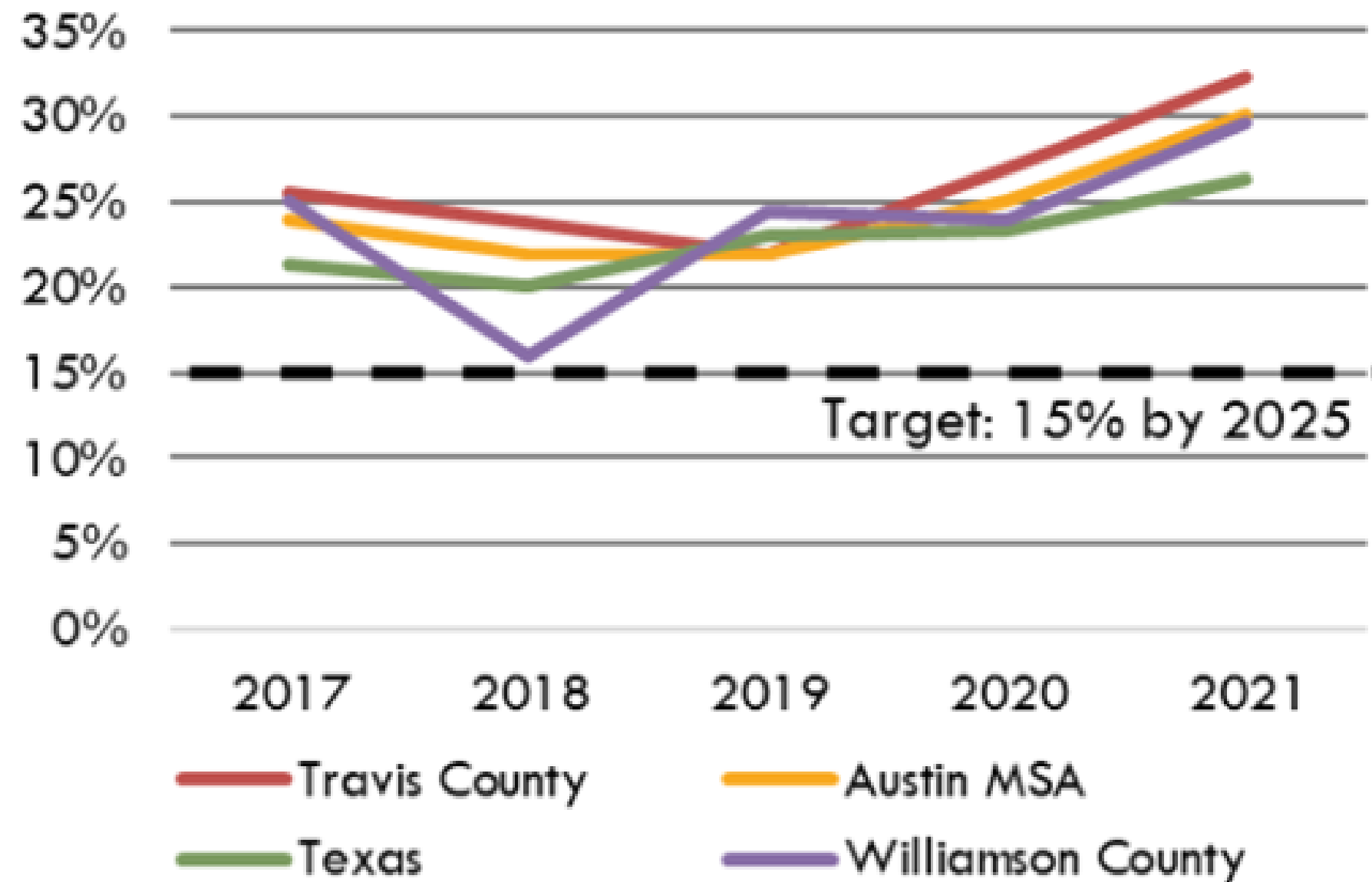


CAN Community Council 2023 Mental Health Report “We All Have A Role”

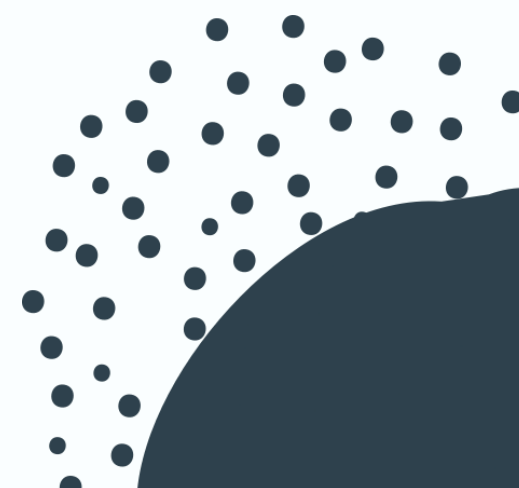
**What We Learned:
Background and Data**

Local Data

Percent of Adults Who Report 5 or More Days of Poor Mental Health

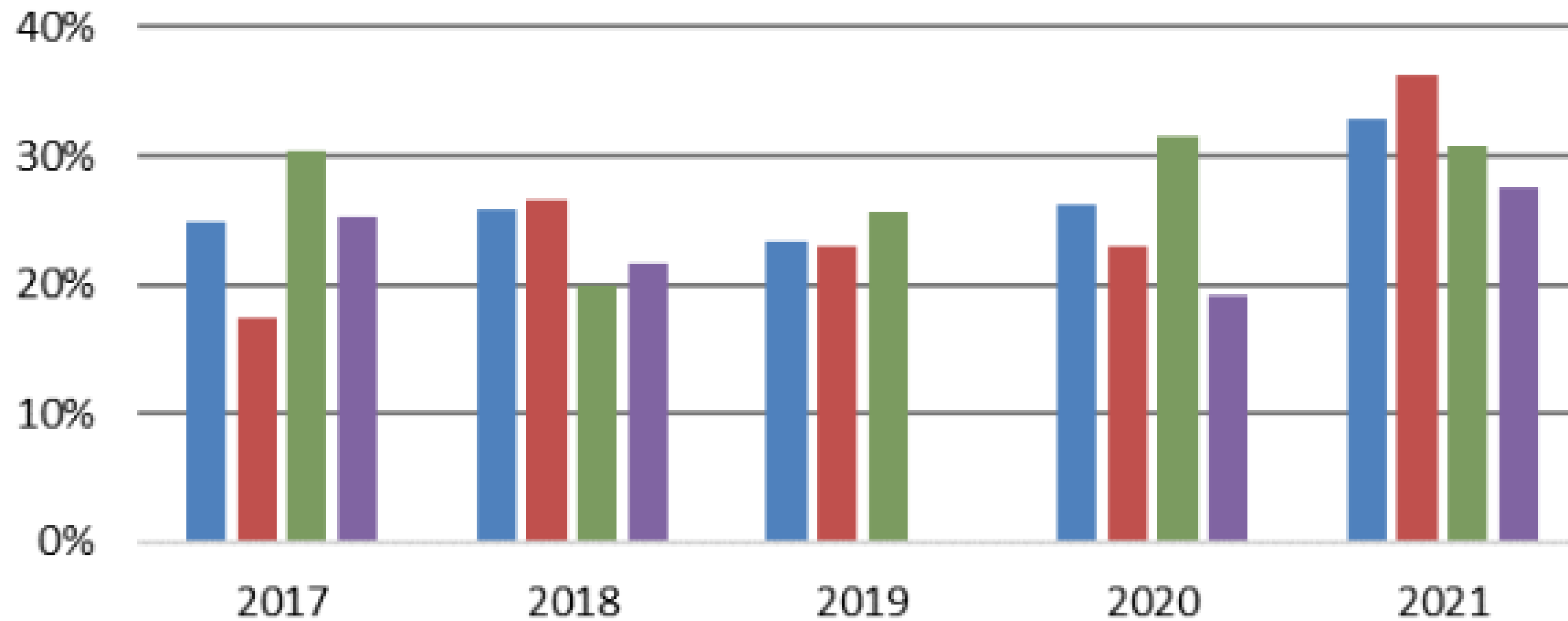


Source: [Texas Behavioral Risk Factor Surveillance System \(BRFSS\)](#) and Austin Public Health



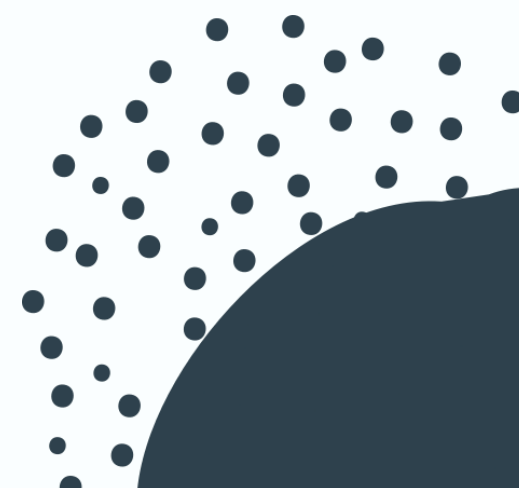
Local Data

Poor Mental Health by Race & Ethnicity, Travis County



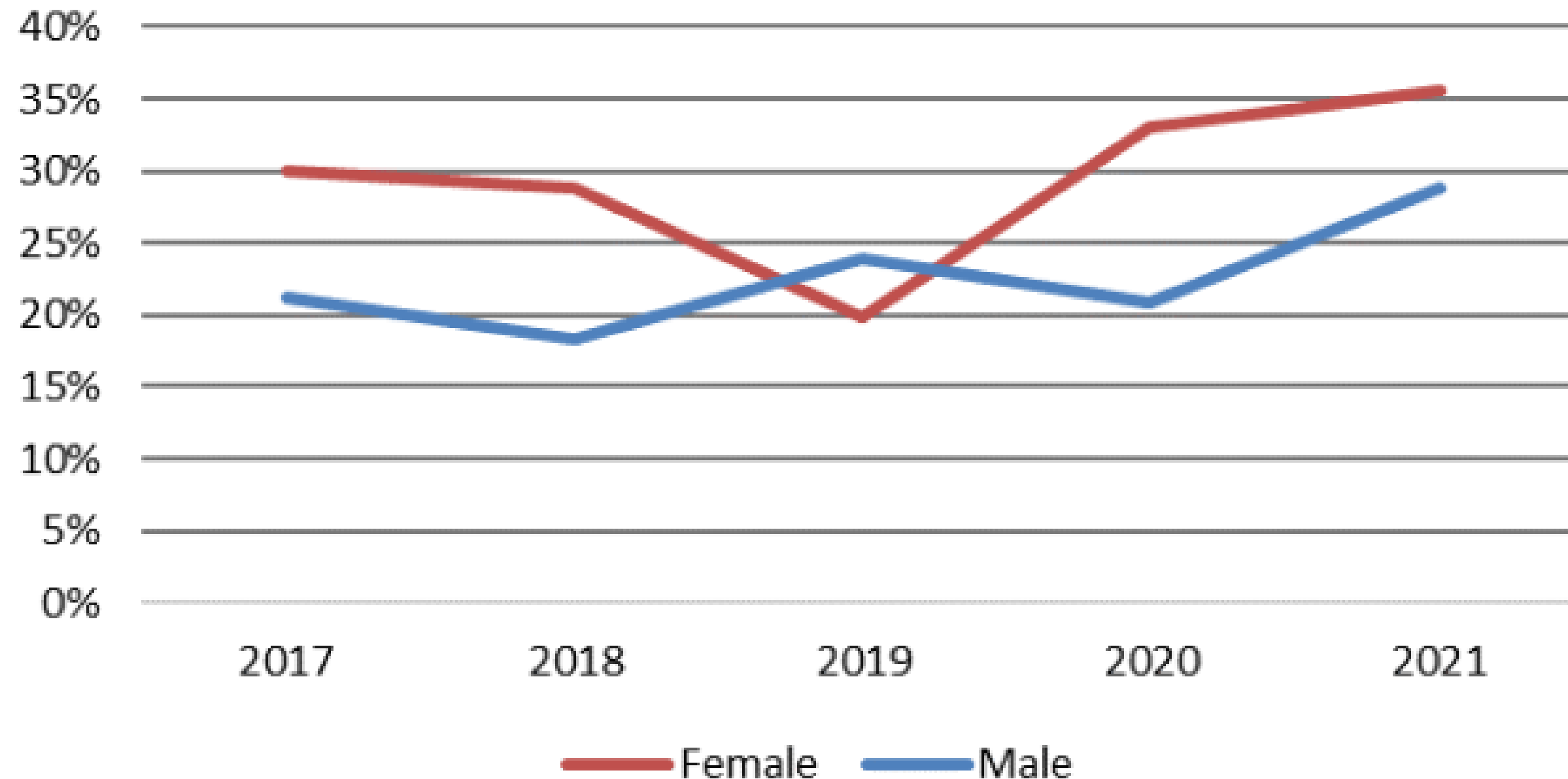
Source: [Texas Behavioral Risk Factor Surveillance System \(BRFSS\)](#) and Austin Public Health

■ White, Non-Hispanic ■ Black, Non-Hispanic ■ Hispanic ■ Other/Multiracial, Non-Hispanic

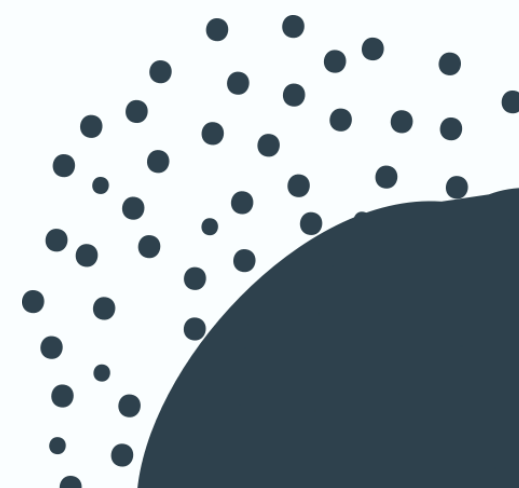


Local Data

Poor Mental Health by Sex, Travis County

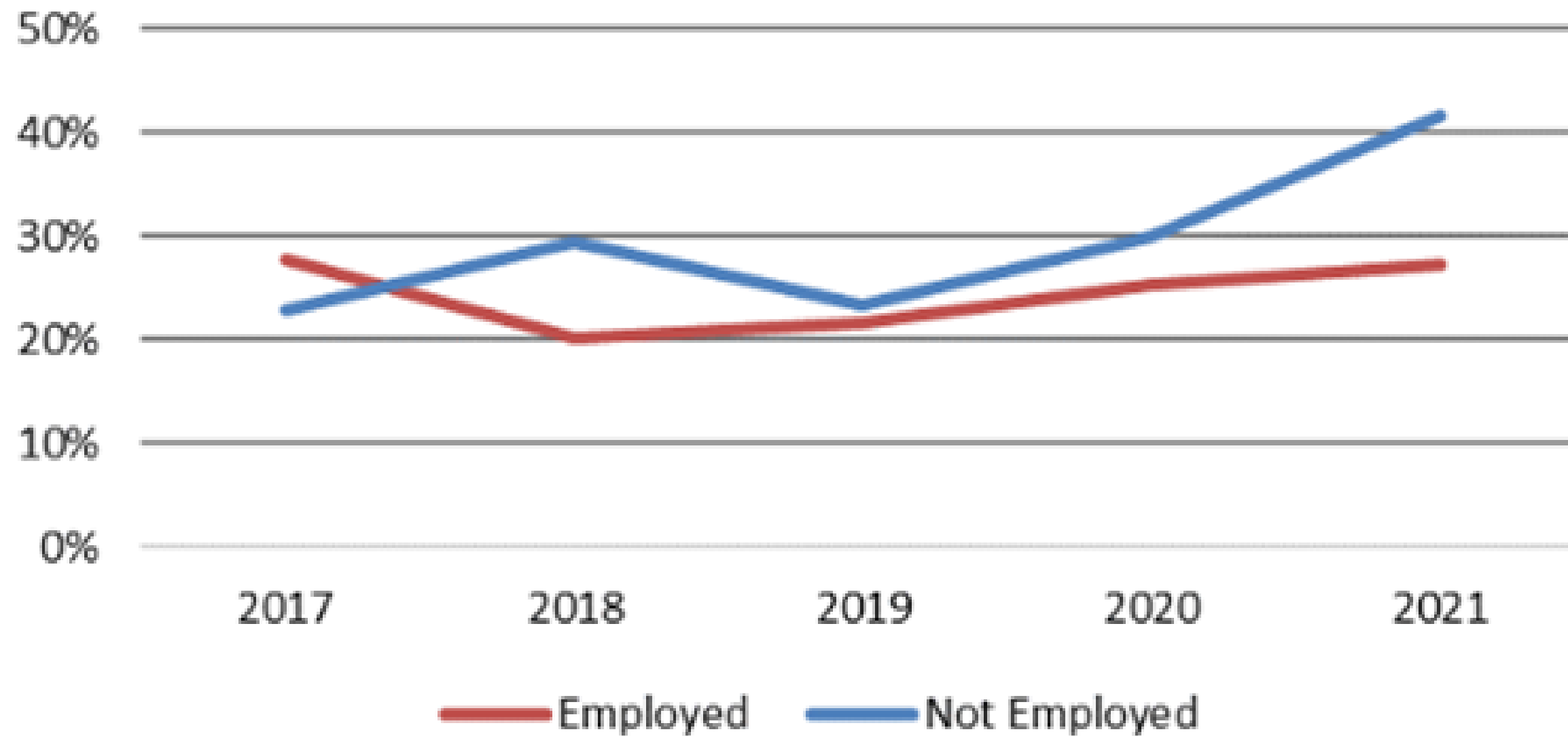


Source: [Texas Behavioral Risk Factor Surveillance System \(BRFSS\)](#) and Austin Public Health



Local Data

Poor Mental Health by Employment Status, Travis County

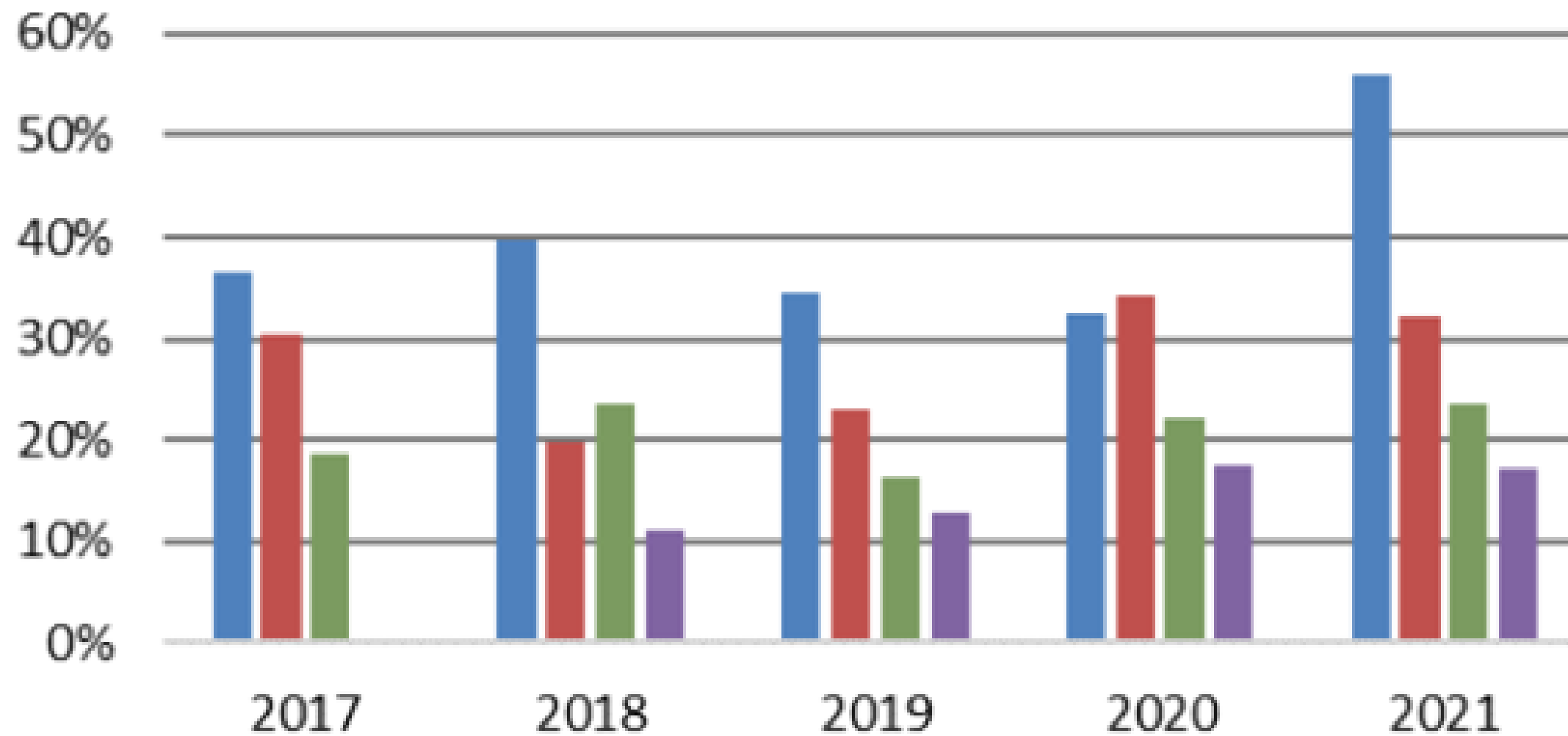


Source: [Texas Behavioral Risk Factor Surveillance System \(BRFSS\)](#) and Austin Public Health



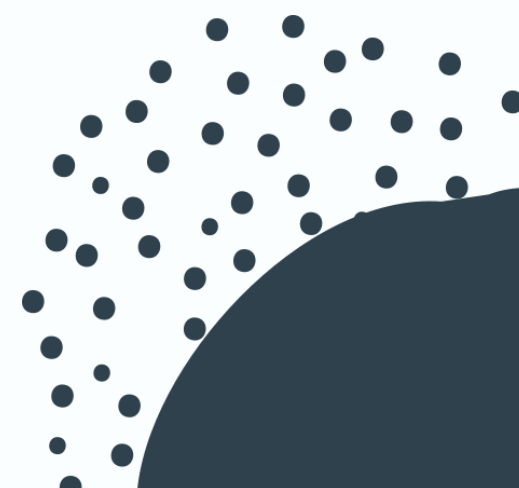
Local Data

Poor Mental Health by Age Group, Travis County



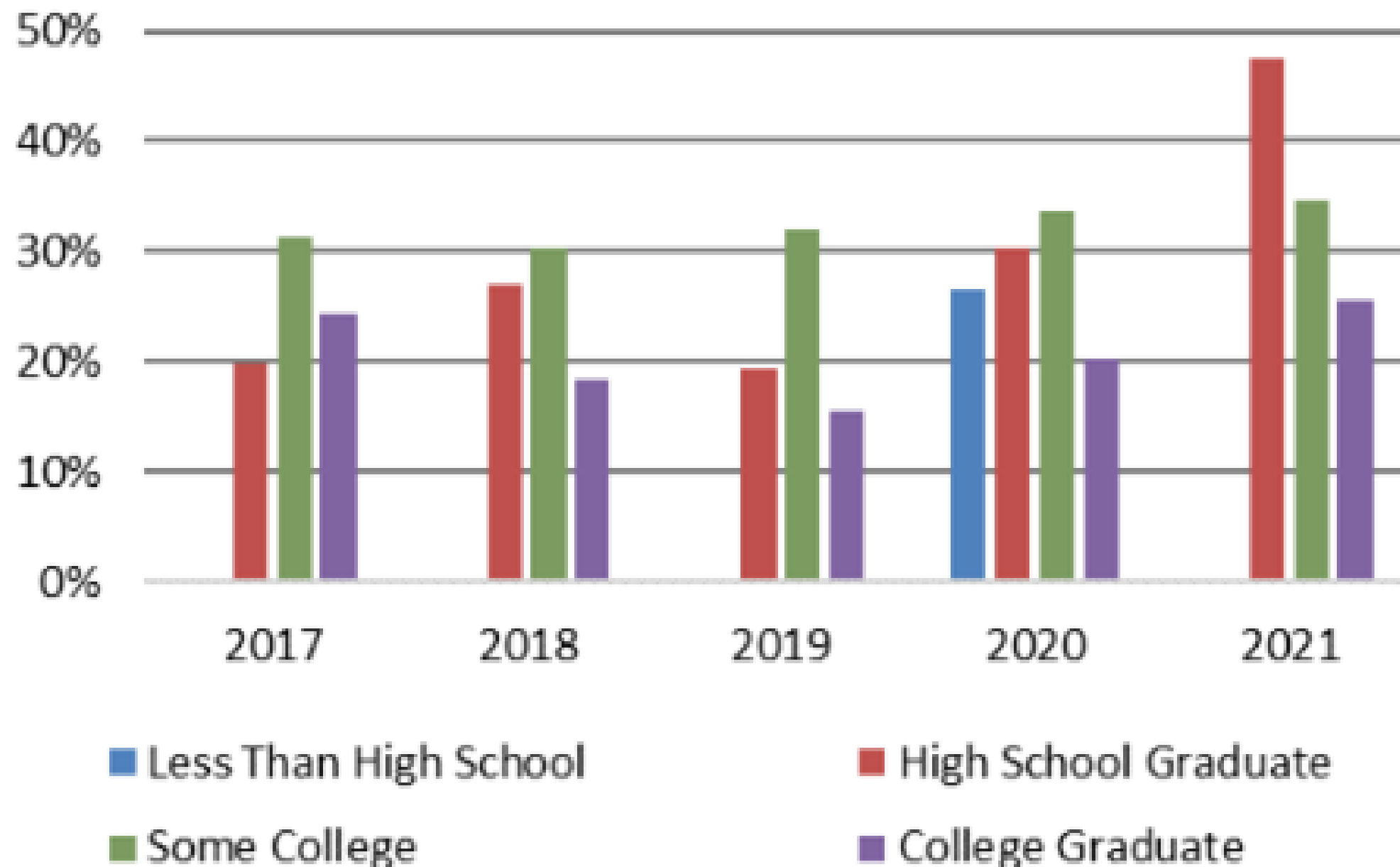
Source: [Texas Behavioral Risk Factor Surveillance System \(BRFSS\)](#) and Austin Public Health

■ 18-29 Years ■ 30-44 Years ■ 45-64 Years ■ 65+ Years



Local Data

Poor Mental Health by Education Level, Travis County

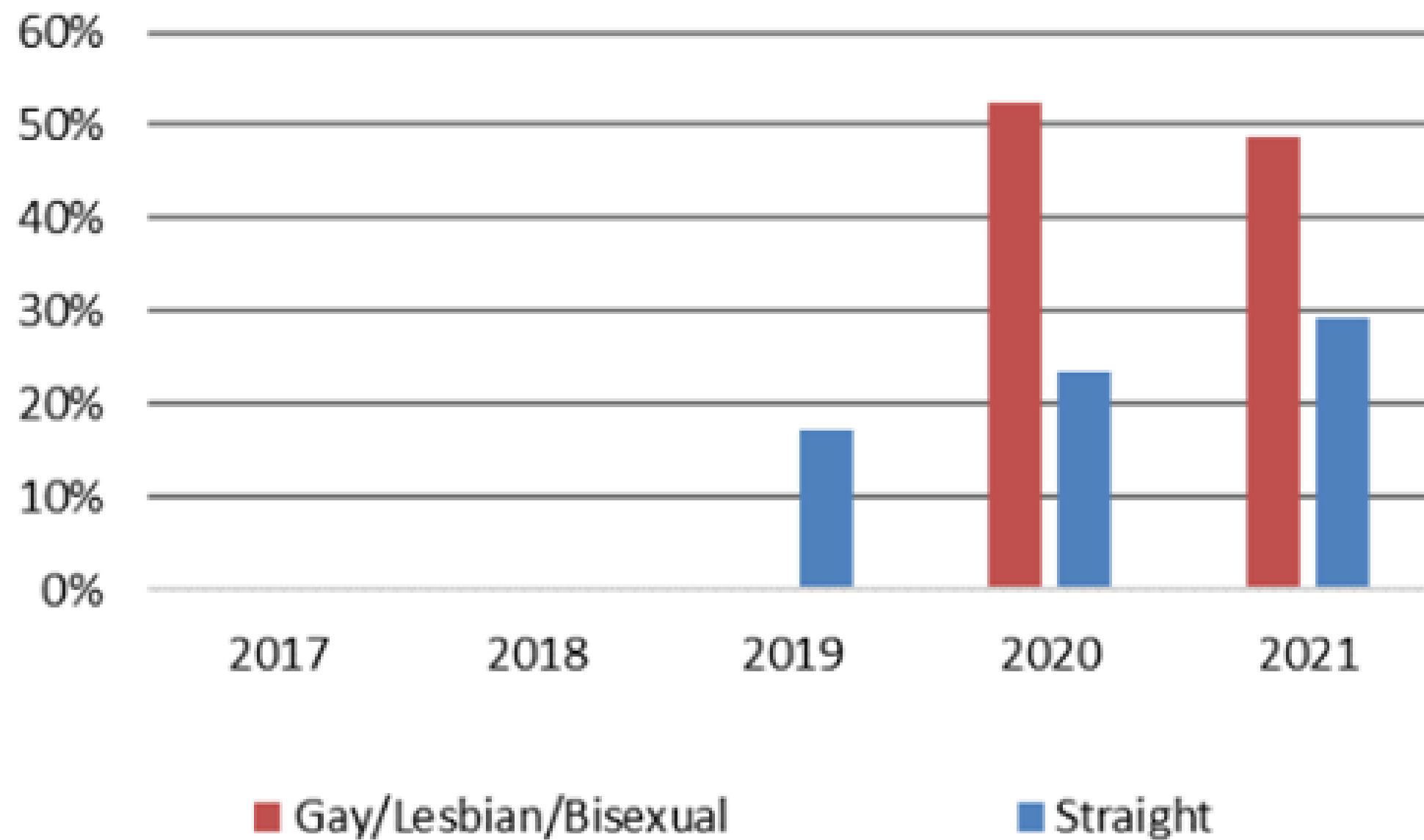


Source: [Texas Behavioral Risk Factor Surveillance System \(BRFSS\)](#) and Austin Public Health



Local Data

Poor Mental Health by Sexual Orientation, Travis County

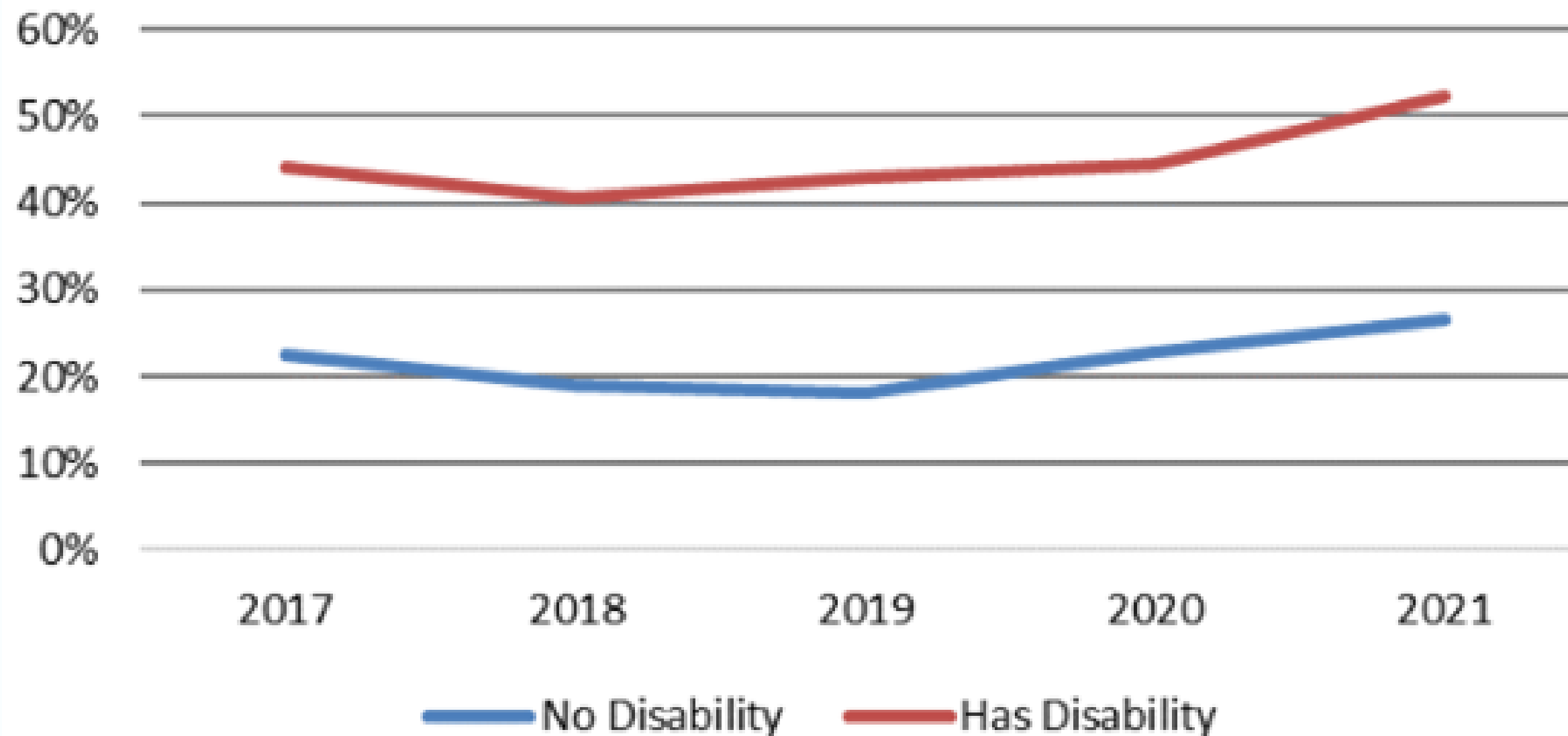


Source: [Texas Behavioral Risk Factor Surveillance System \(BRFSS\)](#) and Austin Public Health

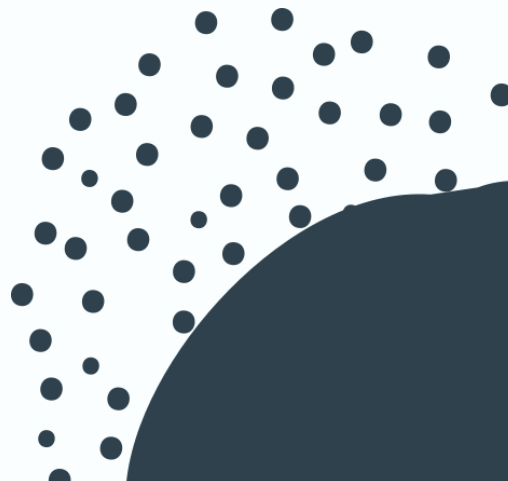


Local Data

Poor Mental Health by Disability Status, Travis County



Source: [Texas Behavioral Risk Factor Surveillance System \(BRFSS\)](#) and Austin Public Health





CAN Community Council 2023 Mental Health Report “We All Have A Role”

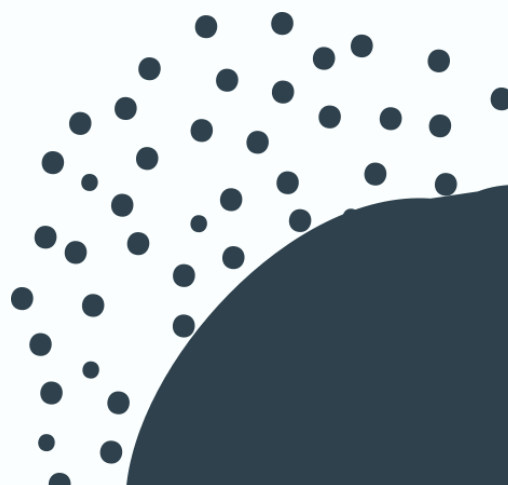
**What We Learned:
Effectiveness of Peer Support Approach**

What is a Peer Support Specialist?

A peer support specialist is recovering from mental and/or substance use disorders or a family member of someone living with a behavioral health condition who is trained to build connections with other individuals and help them navigate the road of recovery that they themselves experienced.

BARRIERS TO BEING / BECOMING A PEER SUPPORT SPECIALIST

- The credentialing process can require a lot of time and money which can be a barrier for people wanting to be peer support specialists. The estimated cost is \$845 to complete the whole process.
- If a person does become a credentialed peer support specialist, staying in the field becomes difficult due to the poor compensation.
- A lot of our healing doesn't come from licensed professionals. You have to value and recognize non-traditional providers that people have been going to and seeking help from for centuries and find ways to support them and their work.” - Vicky, Austin Area African American Behavioral Health Network



Peer Support Specialist Programs

- There are not enough programs available, especially in languages other than English.
- “Instead of trying to control people providing help who aren’t licensed, why not take trainings to the helpers in the community. For instance, training religious leaders and community helpers in mental health first aid.”
- Elexia, Asian Behavioral Health Network
- Manuel, with the Latinx Behavioral Health Network stated that “In the Latinx community many people aren’t educated about mental health and have other more culturally relevant methods for solving issues like pláticas.”
-Manuel, Latinx Behavioral Health Network

Organization	Topics	Modality	Languages Available
National Alliance on Mental Illness (NAMI)	Peer-to-Peer; Family-to-Family; Family and Friends; Basics (Parenting); Homefront (Veteran)	Virtual and In-Person	English and Spanish
Center for Grief and Loss	Grief & Loss Support Groups	Virtual	English and Spanish
Communities for Recovery	Substance Use Peer Support Groups or Mentors	In-Person	English
OutYouth	Caregiver peer support; teen peer support	In-Person	English
Austin Mental Health Community	Peer Mentor; Peer Crisis Recovery; Peer Support Groups	Virtual and In-Person	English and Spanish
SAFE	Survivor Peer Support	In-Person	English
Lifeworks	Community-Based Peer Support	In-Person	English
Recoverytexas.org	mental health and substance Peer Support	Virtual	English and Spanish

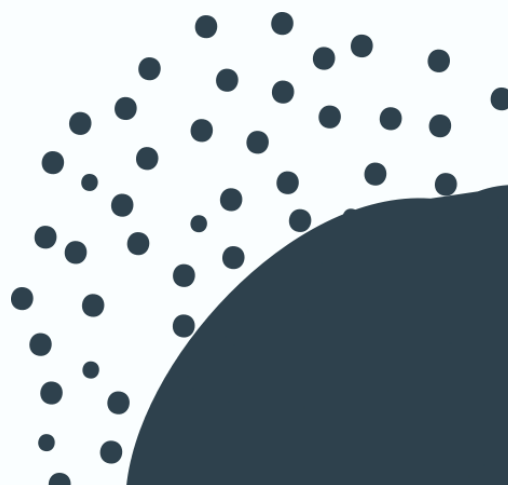
Return on Investment for Peer Support Services

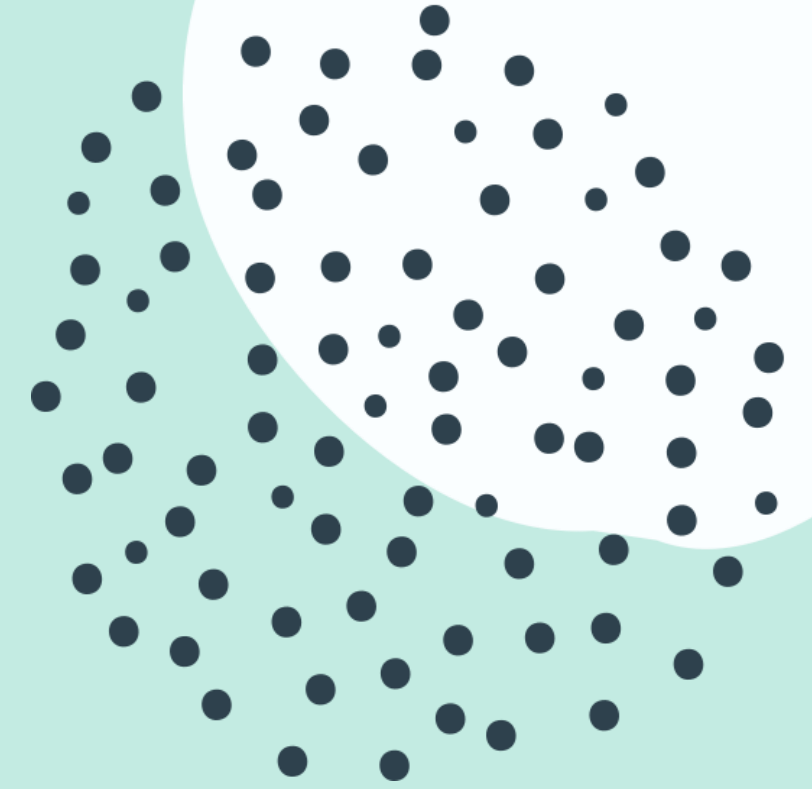
- Peer Support is seen as a transformative service as it adds value to the recovery support system which is desperately needed due to the increasing demand for services and the dearth of trained professionals in the field, as well as how long it takes to prepare these individuals for work in the field. (MHA 2018)
- A peer support behavioral health workforce can effectively extend the reach of treatment outside the clinical setting supporting the recovery process. (MHA 2018)
- These services improve outcomes such as reducing hospitalizations, improving self-determination and symptom management, increasing social support, and bettering one's quality of life. (MHA 2018)

The Mental Health National Organization published Evidence for Peer Support (May 2019). This report indicates that the return on investment of the peer support framework can show its true value through focus on measuring the improvement to a person's quality of life, increasing and improving engagement with services, and increases whole health and self-management.

The evidence listed in the MHNO report:

- Reduced re-hospitalization rates
- Reduced days inpatient
- Lowered overall cost of services
- Increased use of outpatient services
- Increased quality of life outcomes
- Increased engagement rates Increased whole health





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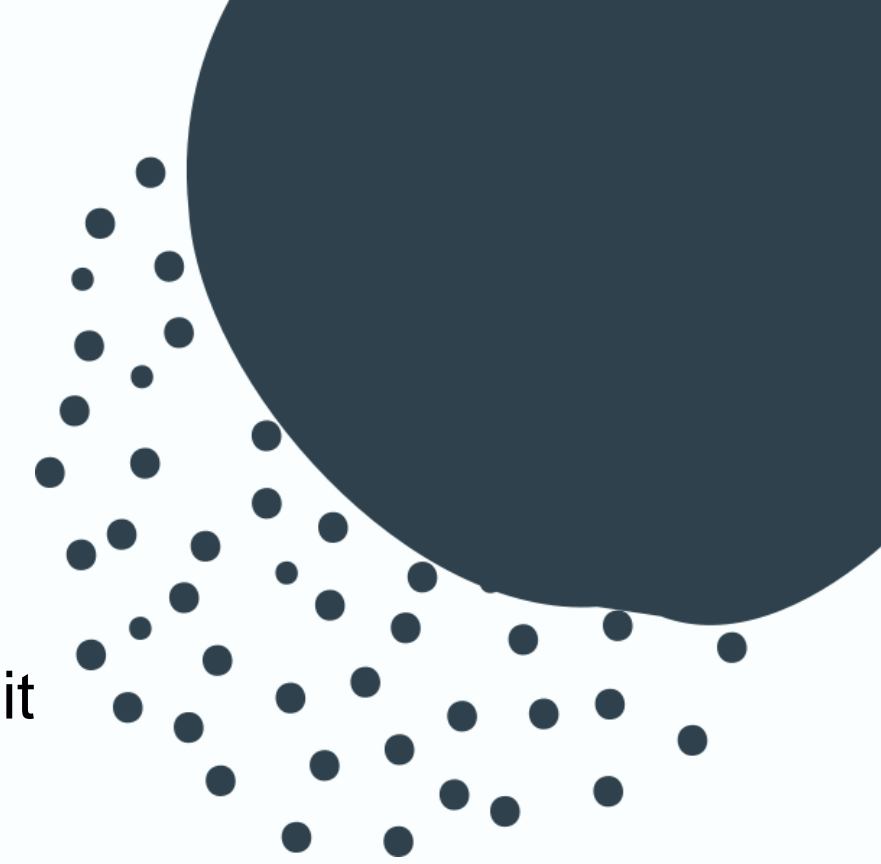
What We Recommend

REC 2. - PROVIDE FUNDING FOR OR PROVIDE SUPPORTS FOR PEER SPECIALIST

If peer support programs and peer support specialists are something that we will lean on to alleviate some strain on mental health providers while still providing support to people who may need them then we need to ensure we are able to recruit and retain Peer Support Specialists.

a. Vouchers - We need to ensure that we support peer specialists adequately so that we can retain them. We need to ensure that they are able to get through the credentialing process by providing any vouchers they may need for exams or supervisors, connecting them with opportunities. Organizations like Peer Force have vouchers, a list of supervisors, and job boards for peer support specialists.

b. Liveable Wage Compensation - Some organizations are able to provide compensation to peer support specialists that are still going through the process of getting fully credentialed based on experience (for example the closer to being fully credentialed, the higher the pay) and this may be something more organizations should practice. It is a good incentive to draw people to becoming a peer support specialist and to retain them as peer support specialists



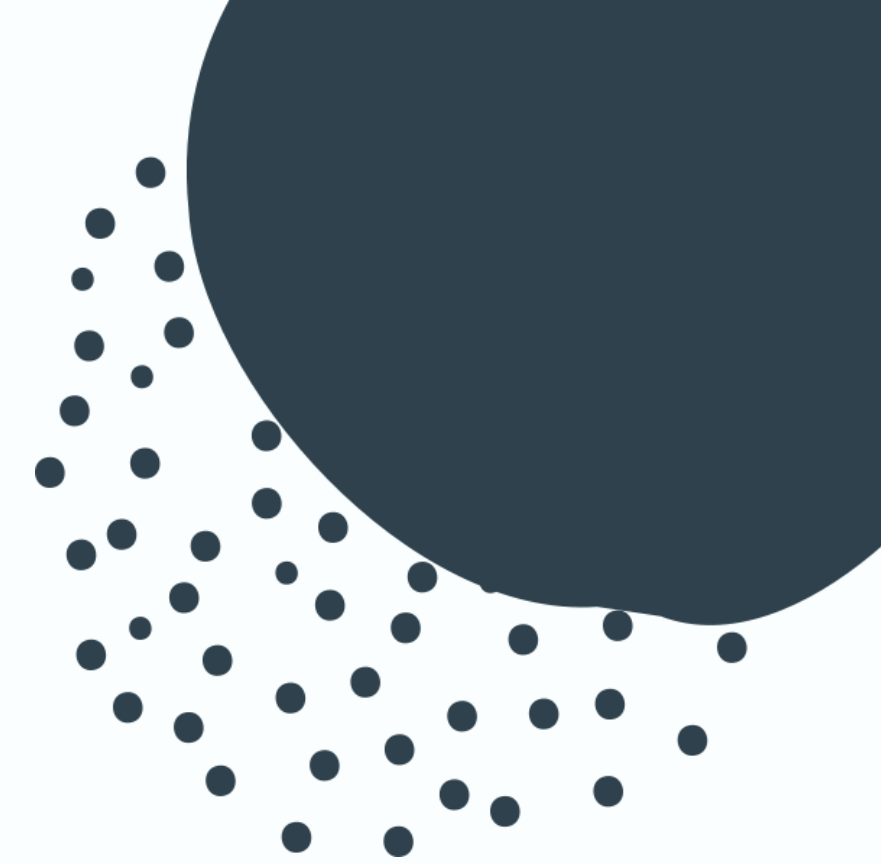
REC. 3 - EXPAND PEER SUPPORT PROGRAMS IN SPANISH (AND IN OTHER LANGUAGES)

As CAN moves forward with a focus on language access, we have to pay attention to the small amount of peer support programs available in Spanish when Spanish-speakers make up 19% of the people in Travis County with 251,531 people Spanish speakers in 2021 according to ACS 5 Year Estimates. of our community. Non-English speakers deserve to access meaningful and culturally appropriate care just as much as English-speakers.

REC 4. - UTILIZE EXISTING TRUSTED SYSTEMS LIKE COMMUNITY HEALTH WORKERS

Community Health Workers already have established relationships with communities.

- A. We recommend that peer support specialists partner with community health workers to offer more services to the community.
- B. Create a dual role for Community Health Workers with lived experience.
- C. Support legislation to provide tiered Medicaid reimbursement for Certified Community Health Workers and additional reimbursement for CHW certified to provide peer support.



REC 6. - LAUNCH A CAMPAIGN TO TRAIN SERVICE PROVIDERS AND COMMUNITY MEMBERS TO RESPOND TO MENTAL HEALTH EPISODES

CAN should move forward with plans to expand the number for individuals in our local community who are trained in Mental Health First Aid. We suggest the following:

- If the overall goal is to train 3% of the overall population in Travis County in Mental Health First Aid, then CAN could launch the campaign by having each partner commit to train 3% of its own staff.
- CAN should identify individuals who are trained in the delivery of the Mental Health First Aid training so that we can leverage their skills in support of a broader community campaign.
- Trainings will likely not be made available “free of charge.” In order to ensure access for community members who may not be able to pay for the training, efforts should be undertaken to establish a scholarship pool that community members can access. One option may be that individuals who register could be given the option of donating into a scholarship pool.
- CAN partners should collaborate to host a “train the trainers” for Mental Health First Aid each year so that training capacity is increased on an annual basis.

REC 7. USE DATA SOURCES, LIKE THE ONES SHARED IN THIS REPORT AND OTHERS, TO DIRECT MENTAL HEALTH SERVICES TO HIGH NEED POPULATIONS.

If resources are limited, target resources in such a way as to address the health disparities outlined in the above data. The groups that appear to show the greatest levels of mental health needs are LGBTQIA+ individuals, people with disabilities, individuals in the 18 to 29 age category, individuals who are unemployed and individuals who have not attended college. All of these subgroups have a proportion of 40% or greater reporting “poor mental health.”

CAN member organizations could serve as champions and exemplars with regard to serving the needs of these particular demographic groups as an employer, particularly if the individual workforce of a particular member may have many members who are part of one of these subgroups. Here are a couple of related recommendations:

- A good first step may be to assess what percentage of an entities workforce falls into this category and then prioritizing support based on the findings.
- Since mental health for low-income workers (making less than \$25,000) and those who do not have a college degree report a higher rate of poor mental health, specific members (as employers) may consider increasing pay for these individuals (or articulate a plan for doing so over time) as a way of helping their economic and mental health.
- Work with local chambers (e.g., LGBTQIA+ Chamber, Women’s Chamber, the Young Chamber, Minority Chambers), Quality of Life Commissions (and Joint Inclusion Committee), and Workforce Solutions to see how we might better serve these high need populations.
- Goodwill Central Texas may be a good member with whom to partner on helping individuals with disabilities.



Other CAN Efforts to Address Community Mental Health & Wellness

Expanding Availability of Mental Health Training: 2023 CAN Challenge: Train 1000 Staff of CAN Members Agencies

What is Mental Health First Aid?

Mental Health First Aid is a course that gives people the skills to help someone who is developing a mental health problem or experiencing a mental health crisis. The evidence behind the program demonstrates that it does build mental health literacy, helping the public identify, understand, and respond to signs of mental illness. Mental Health First Aid is a low-cost, eight-hour seminar designed to teach participants how to identify and help people with mental illness.

CAN Challenge for 2023 & Beyond

CAN is launching a challenge to expand Mental Health First Aid training opportunities for CAN member organizations with a goal of training at least 1000 employees by April 30, 2024.

The intent is to set a community-wide goal for training in the Mental Health First Aid model that would launch shortly upon conclusion of the 2023 CAN Challenge.

To lead a successful community-wide training campaign, we would recommend that as many CAN partners as possible allocate funding for a “train the trainers” program in 2023-2024 so that we can maximize the availability of this training for community members.



Improving Access to Mental Health & Wellness Resources for Non-English Speakers

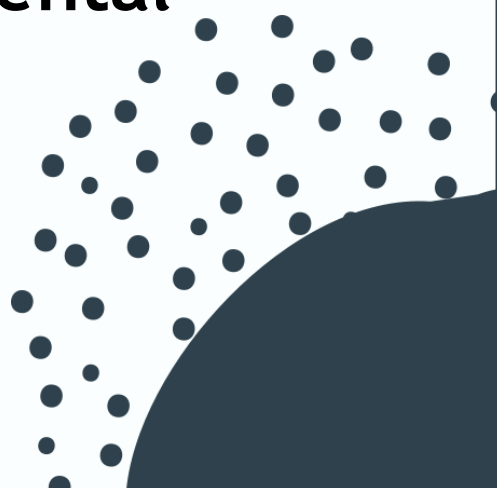
Through this project, CAN aims to support non-English speaking residents in stabilizing their mental health/wellness and connecting them with services by developing mental health toolkits to serve the needs of three language communities (Spanish, Arabic & Vietnamese). The goal of the project is to normalize mental health coping strategies and to seek help from professionals when necessary by:

Convening a collaborative of community stakeholders to Assist in Developing Resources and Facilitate Engagement Using the Following Approach:

- Strengthen Ties Between Interested Organizations
- Identify & Build on Existing Resources
- Develop and Deliver Culturally/Linguistically Appropriate Messaging

Involving and Supporting Individuals in Becoming Self-Sufficient in Learning About and Using Mental Health Services By:

- Promoting the Availability & Use of Project Resources
- Helping individuals understand how to navigate services
- Encouraging individuals to talk about and share information about this topic



CAN Presentation to City Council Public Health Committee

Q & A

For More Information Please Contact:

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