Informational Webinar on Proposition 1



Seminario Web Informativo sobre la Proposición 1

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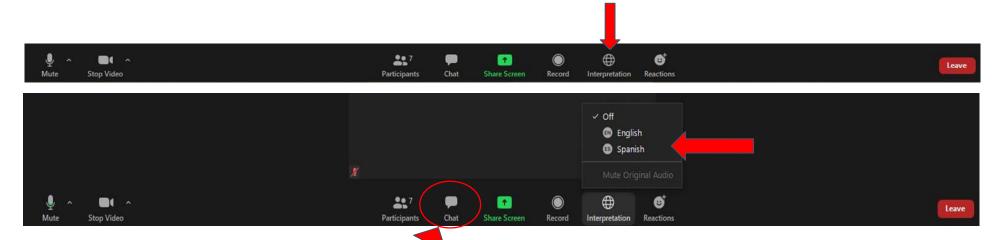


English

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Si solo habla/o prefiere escuchar en español, seleccione el icono de interpretación que parece a un mundo en la parte inferior de la pantalla, luego seleccione español y no olvide silenciar el audio original. Si está usando Zoom en un teléfono o tableta, seleccionará los tres puntos para ver más opciones, seguido por interpretación y después español.



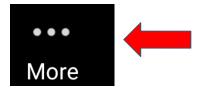


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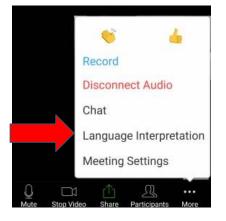
ASK QUESTIONS AND COMMENT HACER PREGUNTAS O DAR COMENTARIOS

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APLICACIÓN DE ZOOM POR TELÉFONO O TABLETA



SELECT THE THREE DOTS
SELECCIONE LOS TRES PUNTITOS





SELECT YOUR LANGUAGE
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About Children Now

Research, policy development and advocacy dedicated to promoting children's health, education and well-being in California.

Leads The Children's Movement of California, a unique network of more than 5,400 diverse organizations.





Today's Discussion

 Level-setting: California's response to mental health and housing needs of children and youth

 What is Proposition 1 and how does it impact children and youth and child serving organizations?

What does a 'Yes' or a 'No' vote mean?

Q&A

Resources





About us



About CA Alliance of Child and Family Services

Passionate representative for California's children and families facing vulnerable circumstances. More than 160 chief executives of organizations come together under the CA Alliance to advocate on behalf of the most vulnerable children, youth, and families in California.

Adrienne Shilton, CA Aliance Of Child and Family Services

What problem does Prop 1 address?

- California voters say homelessness is their #1 issue of concern
- Of the 181,399 estimated unhoused Californians (2023)
- 25% had a severe mental illness
- 24 % had substance use disorder*
- Shortage of adult psychiatric and residential beds impedes help for unhoused people to access BH care, get off streets
- * overlap unclear

Prop 1 Approach

- Redirect existing resources vs new taxes
- Focus spending on highest needs individuals vs prevention
- Co-author backed update of 20 year-old law
- Nationally, increased focus on compelled treatment (Care Court, LPS reform, Prop 1 funding for involuntary treatment and locked facilities)



Funding Context

- CalAIM reforms intended to fill in gaps for counties and providers previously filled by MHSA
- Increased responsibility of Medi-Cal Managed Care Plans (enhanced care management, a new statewide benefit)
- Children and Youth Behavioral Health Initiative investing in the youth behavioral health crisis





Prop 1 Changes to CA's Mental Health System

Courtney Armstrong, Director of Government Affairs First 5 Association of California



FIRST SSOCIATION OF CALIFORNIA

The First 5 Association of California (F5AC) is a membership and advocacy organization dedicated to ensuring that children prenatal to 5 years old in every single county in California are safe, healthy and ready to thrive in school and life.



Prop 1 is a two-part measure that:

- 1.Restructures the Mental Health Services
 Act (MHSA) and changes how counties
 deliver mental health and substance use
 treatment
- 2.A \$6.3 billion bond to fund behavioral health treatment and residential facilities for veterans and people at risk for homelessness with behavioral health challenges





What is the MHSA?

- Created by Proposition 63 in 2004, MHSA instituted a 1% tax on millionaires to increase funding for mental health services
- When it was created, MHSA had 5 main goals:
 - 1. Community services and supports
 - 2. Prevention and early intervention
 - 3. Innovation
 - 4. Capital facilities and technological needs
 - 5. Workforce education and training





95% of MHSA Funds go to counties:

Counties are required to spend those funds on the following programs:

- 1. Community services and supports
- 2. Prevention and early intervention
 - 1.51% are to be spent on kids 0-25
- 3.Innovation



^{*}Remaining 5% is set aside for state administration of funding







Prop 1 changes MHSA in the following ways:

- Changes focus to behavioral health, becomes the Behavioral Health Services Act (BHSA)
- Expands scope to include substance use disorders
- Modifies how funds are allocated
- Changes the accountability and community planning process
- Moves an additional 5% from counties to state
- Changes allocation across categories but without increased revenue



BHSA county allocation model:

- 30% for housing interventions for children and families, youth, adults, and older adults living with serious mental illness/serious emotional disturbance and/or substance use disorder. Can include:
 - Rental subsidies, operating subsidies, family housing, and shared housing.
 - Half must be spent for housing interventions for people experiencing chronic homelessness
- 35% for full service partnership programs comprehensive and intensive care models for people at any age with the most complex needs, also known as the "whatever it takes" model.
- 35% for behavioral health services and supports includes early intervention, outreach and engagement, workforce education and training, capital facilities, technological needs, and innovative pilots and projects.
 - 51% must be used for early intervention
 - 51% of these early intervention services must be for those 25 years and younger

^{*} Does allow for limited flexibility including exemptions for counties with a population of less than 200,000. It also allows counties to transfer up to 14% of their funding between these categories, with a limit of 7% per category (pending state approval).



Changes to State Allocation

- Shifts 5% of dollars from the counties to the state (from the previous 5% under MHSA to 10% under BHSA) and revises the allocation of state-level funds in the following way:
 - At least 3% to implement a statewide behavioral health workforce initiative.
 - At least 4% for a population-based mental health and substance use disorder prevention program
 - At least 51% of these funds must be used for programs serving those who are 25 years or younger



Who We Are

The Children's Partnership is a California advocacy organization advancing child health equity through research, policy and community engagement.

Homelessness in California

- As of January 2022, there were 171,500 people experiencing homelessness in CA
 - 10,400 were veterans
- In 2023, of the 254,914 people who accessed the homelessness response system
 - 34% were people in families with children
 - 9% were unaccompanied youth
 - 49.16% of unaccompanied youth are Black, Indigenous, and people of color (BIPOC)
 - 47.65% of unsheltered unaccompanied youth are BIPOC
- ●36.4% of youth in California are experiencing homelessness
 - Of these youth 35.2% are unsheltered (defined as "sleeping in a place not meant for human habitation")
 - There currently exists enough youth-designated-beds for 22.8% of homeless youth

What Will Prop 1 do for Housing?

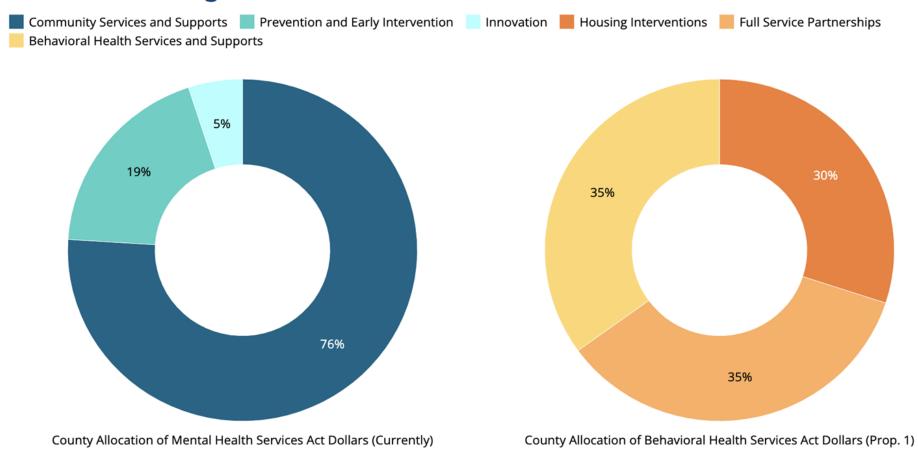
- Prop 1 would authorize a \$6.4 Billion in bonds for programming this means that the state would borrow this money and repay it over the span of 30 years using money from the State General Fund
 - Oup to \$4.4B (about 70%) for mental health facilities, \$2B (about 30%) for housing (over half set aside for veteran housing)
- Prop 1 Restructures MHSA to reallocate \$2 billion of Prop 63 revenue annually to local governments in order to construct new housing units in hotels, motels, and other buildings
 - OThis is 30% of MHSA county funds
- The State estimates that 4,350 housing units will be built with 2,350 set aside for Veteran housing

The Children's

- ONo priorities or set-asides for families with children or transition-aged youth
- Housing units would be available to those who
 - OAre at risk of becoming homeless or are currently experiencing homelessness
 - OHave mental health, drug, or alcohol challenges

What Will Prop 1 do for Housing?

Prop. 1 Would Require Counties to Redirect About One Third of Mental Health Dollars to Housing Interventions



Note: Both charts show the majority of Mental Health Services Act & Behavioral Health Services Act funding. A small portion of overall funding is reserved for state-level administration.





Voting on Proposition 1

Yes Vote:

Will change the Mental Health Services Act to include drug treatment services. Counties would need to change some of the mental health care and drug or alcohol treatment services provided currently to focus more on housing and personalized support services.

The state would borrow \$6.4 billion to build

- More facilities for mental health care and drug/alcohol treatment.
- More housing for people with mental health, drug, or alcohol challenges .

No Vote:

There is no change to the Mental Health Services Act.

The state could not borrow \$6.4 billion to build more treatment facilities and housing units



Resources

- Analysis of Proposition 1, Legislative Analyst's Office
- Understanding Proposition 1: Implications for Californians and the State's Behavioral Health System, California Budget and Policy Center
- Endorsement: Yes on Proposition 1, a modest step forward on mental health care, Los Angeles Times
- Letters: Here's how Prop. 1 will hurt mental health care, which the Chronicle's endorsement ignores, San Francisco Chronicle
- Recauda Gobernador millones para iniciativa de salud mental, CalMatters
- La Proposición 1 y las personas sin hogar, CalMatters





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