Policy for Transformed Lives

Executive Summary

Nia West-Bey, Shiva Sethi & Paige Shortsleeves

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Are we a service industry? Or a transformational industry? A service industry is kind of like McDonald’s. How many burgers can we sell, as efficiently as possible, provide a quality product so people keep coming back. You know, when you have a line at the cashier, how do you move them quickly and efficiently through. And you’re really measuring your success by the number of burgers you sell. Or whatever you want to sell. We do a lot of that, out of necessity. We have to bill for services, so we capture time, we bill in increments of 15 minutes. We capture services. Whether it’s an individual service, or a family-based service, or a group therapy service, or in Kentucky we do collateral services which are with teachers and so forth. And then we capture all of that and we measure it ... All that’s great for service industries. But how would we have to change if we were in the business of transforming lives? Cause that’s what we really signed up for.

- Ron Van Treuren, Louisville
Executive Summary

Across the nation, young adults living in poverty experience serious threats to their mental health. More than one in five young adults ages 18-25 living in poverty report serious psychological distress within the past year. When young adults’ mental health needs are unaddressed, their economic stability, independence, and overall wellbeing can be undercut. The prevalence and persistence of mental health challenges in low-income communities underscores why policymakers and advocates need to take aggressive and creative action to better support this population.

To inform efforts to improve public policies, CLASP conducted an in-depth scan and analysis of how selected states and localities are addressing young adult mental health. Our findings, analysis, and recommendations are contained in this three-part brief series: Policy for Transformed Lives. The first brief, State and Local Efforts to Support Young Adult Mental Health, summarizes our methodology, provides an overview of the policy context in four states and three localities, and profiles innovative policy and practice efforts in each place. The second brief, Barriers to Meeting the Mental Health Needs of Young Adults, describes cross-cutting challenges and barriers to effectively supporting this population. The third brief, State Opportunities for Young Adult Mental Health Policy and Systems Change, describes transformational action steps for policy makers. This executive summary provides an overview of the topline findings from the three briefs.

Methodology and State/Local Context

Policy for Transformed Lives features four states (Maryland, Michigan, New Mexico, Oregon) and three localities (Los Angeles, CA, Louisville, KY, New York, NY) that are diverse in several ways; each represents a different region of the country, demographic composition, and approach to young adult mental health. We focused our conversations on young adults ages 18-25 and youth ages 16-17 on the cusp of the transition to adulthood. Young people at these ages often have reduced access to critical services while simultaneously navigating a major developmental transition. In each location we conducted interviews with stakeholders from a range of sectors including health, mental health, human services, and youth-focused systems. Each of the selected states and localities offers important lessons and examples.

Cross-Cutting Barriers and Challenges

Several barriers to providing mental health services to youth and young adults were consistent across the states and localities in our scan. These challenges are intersectional, persistent, and endemic. Each of these challenges represents an opportunity for advocates and policymakers to work together to improve mental health services for youth across the country:

- Medicaid pays for “health care;” Health care is narrowly defined: Medicaid providers told us that the program’s low reimbursement rates and narrow definition of ‘medical necessity’ limit their ability to provide preventative and non-traditional care.
- Workforce and reimbursement: Stakeholders described numerous staffing and reimbursement issues, including geographic variation in the supply of qualified providers,
lack of diversity and culturally relevant supports, high staff turnover rates, systemic underpayment, and devaluing of community health and peer support staff.

- **Almost no one is good at investing in prevention**: Stakeholders reported limited investment in preventative services despite recognition of the importance of getting “upstream” of mental health challenges.

- **Cross-sector collaboration**: We found challenges to strong collaboration across a broad swath of stakeholders, particularly between adult- and child-serving systems.

- **Justice system as entry point to services**: The criminalization of mental health challenges was a consistent theme. Particularly for youth of color, the justice system is often the entry point to mental health services even though the system can be traumatic and often exacerbates mental health challenges instead of treating them.

- **Meeting the needs of a diverse population**: Disparities in access by race, geographic region, language, and immigration status pervade the delivery of mental health services. Lack of culturally or linguistically appropriate services, fear of retribution for use of government programs, and stigma all contribute to these disparities.

**Opportunities and Next Steps**

Systemic change in young adult mental health that centers youth and young adults requires bold action. We have identified several opportunities for states to shift their approach to youth and young adult mental health away from a service-oriented model and toward a transformational model previewed in the diagram on the next page.
Opportunities and Next Steps

Guiding Framework: Youth/Young Adult Mental Health

MEDICAL NECESSITY: Medicaid Pays for Health Care

Current State: Service Model

MEDICAL NECESSITY: Medicaid Pays for Health Care

Target State: Transformational Model

Policy Changes

Systems Changes

Transformational Goal: Push the boundaries of how healthcare is defined to include innovative frameworks that are critical to supporting youth/young adults with low incomes.
The proposed framework argues for policy change that expands the boundaries of health care to include Medicaid support for:

- Integrated Physical and Behavioral Health
- Social Determinants of Health
- Prevention
- Wellness Promotion focused on Strengths, Assets, and Safety

The framework also identifies essential systems change strategies:

- Authentic Youth Engagement
- Effective Cross-Sector Partnerships
- Effective Adult-Child System Partnerships
- Racial Equity and Culturally Responsive Lens

The findings in *Policy for Transformed Lives* are evidence of the need to move our young adult mental health system from a service model to a transformational model. States have an exciting opportunity to identify and pursue policy changes that can make this shift by pushing the boundaries of the definition of health care and better serving youth and young adults.

**Acknowledgements**

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Appendix 1. Interview Participants

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Vice President of Education, Employment, and Training, Youth Development Inc.

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Behavioral Health Planning Council Manager

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Steve Kopelman
Executive Director of New Mexico Association of Counties

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<td>Jacalyn Dougherty</td>
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<td>Hank Hughes</td>
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<td>Craig Pierce</td>
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<td>Randi Walters</td>
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<td>Lauren Grimes</td>
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<td>Rebecca Gaston Jones</td>
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<td>Nick Moroney</td>
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<td>Eliza Steele</td>
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<td>Margi Joshi</td>
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<td>Ingrid Lofgren</td>
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<td>Carolynnette Scott</td>
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<td>Blair Franklin</td>
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<td>System of Care</td>
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Endnotes