CLASP MH Kresge Project Theory of Change

Key Context

- Opioid Legislation
- SAMHSA and HRSA Maternal Depression Funding Opportunities
- Gubernatorial Elections
- Maternal Mortality Legislation
- Congressional Elections
- ACA threats
- Anti-immigrant sentiment/racially charged environment
- Potential for Trump impeachment
- Public charge

Assumptions

Funded project through April 2020	States will need help to embed racial equity	There's opportunity for and commitment to change these systems	Systems change now, policy change later	Everybody's schedules are busy	CLASP can be helpful to states/ we have something to offer

Inputs

- Voice of people with lived experience
  - Youth Focus Groups
- Stakeholder Engagement
  - Advisory Board
  - Convening Stakeholders
  - Partnerships
- Research
  - State Scans
- Staff Time
- Project Goals
  - Assets
  - Access
  - SDOH
  - Racial Equity/Culturally responsive practice
  - Partnership
  - Education
  - Quality

Outputs

- Learning Collaboratives
- Strategies to advance goals
- Sustainable Model/Replicable Model
- Recommendations based on needs/wants of different groups, presented in ways they want to engage and hear
- Strengthened Relationships Amongst States
- TA
  - Webinars
  - Conferences
  - Convenings
  - Tool kits
  - Cost-Benefit Analysis of integrated care
  - Criminalization Analysis
  - Measurement Tools
  - Phone calls
  - Peer to peer site visits

Outcomes

- Broadened definition of Maternal Depression
- Refined definition of Trauma informed care
- Informed policy makers
- Quality metrics identified
- Payments tied to quality metrics
- New Partnerships
- Expanding Communities Served

Impacts

- Additional states beyond the learning community move forward with policy framework
- Expanded model of what constitutes health care
- Normalize Inclusion of Lived Experience in Mental Health Policy Change

CLASP Young Adult MH State Theory of Change Menu

Key Context

- TBD

Assumptions

TBD

Inputs

- Stakeholder Engagement
  - Voices of people with lived experience
  - Convening stakeholders
- Research
- Technical Assistance

Outputs

- Strategies to advance goals
- Sustainable/Replicable Model
- Creative Screening/Implementation Tools
- Trainings for agency staff

Outcomes (Overall)

- Staff working with youth are more respectful, welcoming, and non-judgmental
- Asset driven interventions/services
- Work in non-traditional spaces
- Increased understanding of user friendly services
- Expanding communities served (e.g. LGBTQ, disability)
- Informed youth and mothers
  - Patient Activation and Empowerment
- Range of provider types engaged
- Provider buy-in

Outcomes (Youth)

- Increased awareness of youth culture and development
- **Work towards Policy Changes that expand the definition of healthcare to better support**
  - **SDOH**
  - **Integrated Care**
  - **Prevention**
  - **Wellness**
- **Systems Changes**
  - **Authentic youth engagement**
  - **Cross-sector Partnership**
  - **Adult-child system partnership**
  - **Racial Equity and Cultural Responsiveness**
- Expanded definition/interpretation of medical necessity
- Traditional Treatment Spaces are more Youth Friendly

Impacts

- Systems that reduce stigma
- Holistic Health addressed
- Integrated Services
- Change in Services Covered
- Diversification of providers/ Types of providers reimbursed
- Equitable and accessible mental health care
  - More personalized care
  - Culturally effective/reflective mental health care
  - No wrong door to engage
- Improved patient and family perceptions of care

CLASP MOMD State Theory of Change Menu

Key Context

- TBD

Assumptions

TBD

Inputs

- Stakeholder Engagement
  - Voices of people with lived experience
  - Convening stakeholders
- Research
- Technical Assistance

Outputs

- Strategies to advance goals
- Sustainable/ Replicable Model
- Creative Screening/ Implementation Tools
- Trainings for agency staff

Outcomes (Overall)

- Staff working with are more respectful, welcoming, and non-judgmental
- Asset driven interventions/services
- Work in non-traditional spaces
- Increased understanding of user friendly services
- Expanding communities served (e.g.LGBTQ, disability)
- Informed mothers
  - Patient Activation and Empowerment
- Range of provider types engaged
- Provider buy-in

Outcomes (Maternal Depression)

- Broaden definition of maternal depression to include
  - Anxiety
  - Prevention
  - Lifespan focus
  - Child age 0-6
- **Change in proportion of population screened**
- **Change in proportion of positive screens referred**
- **More women treated**
  - **Change in number of referrals used (uptake)**
- Increased Focus on Prevention
- Traditional treatment spaces are more mom friendly
- **Systems Changes**
  - **Cross-sector Partnership**
  - **Racial Equity and Cultural Responsiveness**
  - **Authentic Engagement of Mothers**

Impacts

- Systems that reduce stigma
- Holistic Health addressed
- Integrated Services
- Change in Services Covered
- Diversification of providers/ Types of providers reimbursed
- Equitable and accessible mental health care
  - More personalized care
  - Culturally effective/reflective mental health care
  - No wrong door to engage
- Improved patient and family perceptions of care