



mhaac

Mental Health & Addiction
Advocacy Coalition

20

YEARS

Improving access by confronting
the workforce shortage

Meredith Poynter | Southwest Ohio Hub Director

Who we are



mhac
Mental Health & Addiction
Advocacy Coalition



The MHAC is a statewide member organization that unifies diverse local voices to advocate with the goals of:

- increasing awareness of issues impacting people with mental illnesses and addiction disorders, and
- advancing policies that positively impact Ohioans affected by mental illnesses and addiction disorders.



Who we are



mhac
Mental Health & Addiction
Advocacy Coalition



- | | | | | |
|--|---|--|--|---|
| <p>A Beautiful Mind Foundation
Addiction Services Council
Aetna OhioRISE
Alcohol, Drug and Mental Health Board of Franklin County
Alcohol, Drug Addiction and Mental Health Services Board of Cuyahoga County
Apple of His Eye, Inc.
Area Agency on Aging Region 9, Inc.
Asurgent Health
Athens HOPE
Beckett Springs Hospital
Beech Acres Parenting Center
Beech Brook
Benjamin Rose Institute on Aging
Best Point Education & Behavioral Health
Black Women Cultivating Change
BrightView
Butler Behavioral Health Services
Canopy Child Advocacy Center
Care Alliance Health Center
CareSource
Catholic Charities Diocese of Cleveland
CDC Mental Health Services
Center for Addiction Treatment
The Center for Community Solutions
The Centers
Central Clinic Behavioral Health</p> | <p>El Centro de Servicios Sociales
Child Focus, Inc.
Cincinnati Children's Hospital Medical Center
Cleveland Rape Crisis Center
Clinton County Common Pleas Court
Community Assessment and Treatment Services
Community Behavioral Health
Community Medical Services
Coordinating Centers of Excellence at NEOMED
Council on Aging of Southwestern Ohio
County of Summit Alcohol, Drug Addiction & Mental Health Services Board
Courage to Caregivers
Cover2 Resources
Crossroads Health
Cuyahoga County Board of Developmental Disabilities
Drug Free Clubs of America
The Edna House for Women
Educational Service Center of Northeast Ohio
Emerald Development and Economic Network, Inc. (EDEN)
Epilepsy Association
Excel Development Company, Inc.
First Step Home
Foster Wallace Sheard Consulting
Found Village
Friendly Inn Settlement, Inc.
FrontLine Service</p> | <p>Gathering Hope House
Glenwood Behavioral Health Hospital
Goldberg, Quill & Associates, LLC
Grant Us Hope
Greater Cincinnati Behavioral Health Services
Hamilton County Mental Health and Recovery Services Board
Highland Springs
Hitchcock Center for Women
Hispanic UMADAOP
Holistic Mental Health Network, Greater Cincinnati
Hope Partnership Project
Hopewell
IBH Addiction Recovery
Journey Center for Safety and Healing
Lake County Alcohol, Drug Addiction and Mental Health Services Board
Lake-Geauga Recovery Centers
The LCADA Way
The LGBT Community Center of Greater Cleveland
LifeAct
Lighthouse Youth & Family Services
Lindner Center of HOPE
Lorain County Free Clinic
Lutheran Metropolitan Ministry
Magnolia Clubhouse, Inc.
May Dugan Center
Medina County Alcohol, Drug Addiction & Mental Health Board
Mental Health, Addiction and Recovery Services Board of Lorain County</p> | <p>Mental Health America of Northern Kentucky and Southwest Ohio
MetroHealth
Miami University Center for School-Based Mental Health Programs
MindPeace
Murtis Taylor Human Services System
NAMI Geauga County
NAMI Greater Cleveland
NAMI Lake County
NAMI of Lorain County
NAMI Southwest Ohio
NAMI Urban Greater Cincinnati Network on Mental Illness
National Association of Social Workers Ohio Chapter Region III
Neighborhood Allies
Neighborhood Family Practice
NEOH Solutions LLC
NewPath Child & Family Solutions
New Housing Ohio
Nexis Wellness
The Nord Center
Ohio Society of Addiction Medicine
OhioGuidestone
1N5
Oriana House
Our Daily Bread
People, Places, and Dreams
PLAN of Southwest Ohio</p> | <p>Positive Education Program
Positive Leaps
Practice Innovation Partners, LLC
Problem Gambling Network of Ohio
Project White Butterfly
Psalms and Him, LLC
Recovery Center of Hamilton County
Recovery Resources
Red Oak Behavioral Health
Relink.org
Removing The Stigma
Rocky River Municipal Court
The Salvation Army Harbor Light Complex
Signature Health, Inc.
Sisters of Charity Health System
Stella Maris
Steps to Wellness
Talbert House
Tender Mercies
Thrive Peer Recovery Services
UMADAOP of Cincinnati, Inc.
UnitedHealthcare
United Way of Greater Cleveland
Visiting Nurse Association
WARMI Mental Health
Western Reserve Area Agency on Aging
WomenSafe, Inc.</p> |
|--|---|--|--|---|

What we do **Advocacy**



- Improve funding for mental health and addiction prevention, treatment, and recovery services
- Support initiatives that strengthen the behavioral health system and improve access to care
- Address the youth mental health crisis
- Reduce stigma by raising awareness and education
- Address mental health and addiction disparities for systemically oppressed Ohioans
- Build and strengthen the behavioral health workforce

What we do Research



Get reports at mhaadvocacy.org

Access Inadequacy

The average delay between symptom onset of a mental health condition and treatment is 11 years. (NAMI)

More than one-third of adults who attempt suicide receive no mental health treatment. (JAMA, 2022)

While only 15% of total healthcare spending is on behavioral health treatment, behavioral health patients spur 57% of commercial healthcare spending. (Milliman, 2019)

Barriers to Care



Stigma

Lack of Providers with
Cultural & Linguistic
Competency

Lack of Awareness

Behavioral Health
Workforce Shortage

Affordability

Lack of Data

Racial-Ethnic Bias &
Discrimination

Policy & System
Barriers

Negative
Sociocultural and
Religious influences

The need to address disparities in access and coverage through innovative workforce strategies is more important now than ever – and these data points support it.

- 90% of Americans who meet the clinical criteria for addiction started using substances before the age of 18. 1 in 4 Americans who began using substances before age 18 have addiction, compared to 1 in 25 who began at age 21 or older.
- Child mental health emergency department visits in 2020, compared to 2019, rose 24% for children ages 5 to 11 and 31% for children 12 to 17.
- 45% of LGBTQ youth seriously considered attempting suicide in the past year.
- Black children ages 5 to 12 are twice as likely to die by suicide as their white counterparts



Behavioral Health Workforce Shortage

- 353% increase in demand for behavioral health treatment between 2013 and 2019. Demand rose sharply in 2020-21 and is anticipated to rise further by 2030.
- 380:1 – The ratio of Ohioans who need behavioral health care to available mental health and substance use disorder professionals.
- More than 60% of Ohio behavioral health providers reported longer wait times for adults and youth mental health services from August to October 2021, and more than 50% reported longer waits for adult substance use disorder treatment.
- Stagnant behavioral health workforce salaries affect the workforce shortage at a time of intense need.





Barriers to Building the Behavioral Health Workforce

Lack of Awareness

Stigma

Lack of Diversity

Lack of Culturally and Linguistically Competent Care

Fragmented Care Delivery System

Sustainable Funding

"One size fits all" Care Delivery

Lack of Data to Inform Strategies

Lack of Data to Understand Workforce Needs in the Region

Lack of Data to Create Effective Messaging

Limited Number of Graduating Professionals

Inefficiency in Use of Current Workforce

Retention of Qualified Professionals

Pay Parity

Insurance Parity Compliance

Barriers to Licensure

Upfront Student Investments

Regional Behavioral Health Workforce Coalition

Public Awareness & Trust	Care Delivery System	Regional Data & Research	Recruitment & Retention	Public Policy Advocacy
<p>Lack of Awareness</p> <p>Stigma</p> <p>Lack of Diversity</p> <p>Lack of Culturally and Linguistically Competent Care</p>	<p>Fragmented Care Delivery System</p> <p>Sustainable Funding</p> <p>"One size fits all" Care Delivery</p>	<p>Lack of Data to Inform Strategies</p> <p>Lack of Data to Understand Workforce Needs in the Region</p> <p>Lack of Data to Create Effective Messaging</p>	<p>Limited Number of Graduating Professionals</p> <p>Inefficiency in Use of Current Workforce</p> <p>Retention of Qualified Professionals</p>	<p>Pay Parity</p> <p>Insurance Parity Compliance</p> <p>Barriers to Licensure</p> <p>Upfront Student Investments</p>

TO BUILD THE BEHAVIORAL HEALTH WORKFORCE OUR REGION NEEDS





What is the Coalition?

Community-driven cross-sector collaboration to address short-term and long-term behavioral health workforce development barriers. The coalition's goals are to increase support, build evidence, and lead the scale-up of best practices that build the behavioral health workforce that our region needs.

GUIDING PRINCIPLES

- Solution-focused
- Data / Metrics-driven
- Local-focus, but include state-level engagement
- Inform public funding strategies
- Strategies include DEI principles
- Include both policy and system change





Shared Vision

Behavioral healthcare is healthcare.

Everyone in our region can access the quality behavioral health care they need because its workforce reflects the communities it serves, is culturally and linguistically competent and has the capacity to meet everyone's behavioral health needs.



Advisory Committee



Sharron DiMario, Co-chair
UC Area Health Education Center

Erin Day
Community First Solutions

Kristina Scott
United Way of Greater Cincinnati

Meredith Poynter, Co-chair
Mental Health & Addiction
Advocacy Coalition

Maureen Donnellan
Talbert House

Christi Valentini-Lackner
PreventionFIRST!

Pamela Massey
Workforce Council of SW Ohio

Debbie Gingrich
Best Point Education &
Behavioral Health

Deanna Vietze
Brown County Board of Mental
Health & Addiction Services

Marty Williams
The Health Collaborative

Suk-hee Kim
Northern Kentucky University

Gloria Walker
NAMI Urban Greater Cincinnati

Sharon Custer
Miami University

Delaney Schrenk
University of Cincinnati

Ashlee Young
Interact for Health

Coalition Members



Debbie Gingrich, Best Point Education & Behavioral Health
Ashley Glass, Black Women Cultivating Change
Deanna Vietze, Brown County MHAS Board
Joanna Lowery, Butler County MHARS Board
Renee Mahaffey Harris, Center for Closing the Health Gap
Bonnie Olds Carson, Child Focus
Cassie Wardlaw, Cincinnati Children's Medical Center
Lisa Amlung, Cincinnati Children's Medical Center
Dr. Amber Kelly, Community Engagement Collective
Erin Day, Community First Solutions
Terri Bunting, Council on Aging of Southwestern Ohio
Nan Cahall, Council on Aging SWO
Cassidy Lekan, First Step Home
Ashlee Young, Interact for Health
Lisa Myers, Interact for Health
Michelle Lyndenbergh, Interact for Health
Marilyn Schwemberger, Lindner Center for Hope
Meredith Poynter, Mental Health & Addiction Advocacy Coalition
Zach DeCamp, Mental Health & Addiction Advocacy Coalition
Amanda Shaw, Mental Health America NKY SWO
Matt Moore, Miami University
Sharon Custer, Miami University

Gloria Walker, NAMI Urban Greater Cincinnati NAMI
John Parran, NewPath Child & Family Solutions
Suk-hee Kim, Northern Kentucky University
Amanda Peters, Northern KY Office of Drug Control Policy
Jennifer Miller, NorthKey
Dr. Ruby Castilla, WARMI - Women's Mental Health
Christi Valentini-Lackner, PreventionFIRST!
Maureen Donnellan, Talbert House
Jennifer Hamilton, The Crossroads
Lauren Bartoszek, The Health Collaborative
Marty Williams, The Health Collaborative
Ta'Kiba S. Johnson, The Health Gap
Kristina Scott, United Way of Greater Cincinnati
Dana Harley, University of Cincinnati
Dr. Michael Wagner, University of Cincinnati
Dr. Lee Tyson, University of Cincinnati
Dr. Lisa Zimmer, University of Cincinnati
Delaney Schrenk, Student at University of Cincinnati
Sharron DiMario, University of Cincinnati Area Health Education Center
Pam Massey, Workforce Council of SWO
Audrey Treasure, Workforce Innovation Center Cincinnati Chamber
Dr. Jaylene Schaefer, Xavier University

Coalition Framework



Care
Delivery
System
Subcommittee

Regional
Data &
Research
Subcommittee

Recruit-
ment &
Retention
Subcommittee

Public
Awareness
& Trust
Subcommittee

Advisory
Committee

Public
Policy
Advocacy
Subcommittee

Shared Roadmap

Public Awareness & Trust	Care Delivery System	Regional Data & Research	Recruitment & Retention	Public Policy Advocacy
<p>Public Awareness about Career Opportunities and Growth, Especially in Underserved Populations</p> <p>Educate the Public, Employers, School Systems, and Health Plans about the Impact of Stigma on the BH Workforce</p> <p>Build Awareness of Professionals in Other Systems and Sectors through Training (MHFA)</p>	<p>Determine the Workforce Component and Implement Strategies that Improve Service Delivery to Underserved Populations</p> <p>Evaluate the System and Role of each Organization Type and Determine Impact / Opportunities on the Workforce. Build Collaborative Relationships to Address Identified Opportunities</p> <p>Evaluate Financial Models and Incentives through Integrated Care Models</p> <p>Identify and Address System Change Needs through the Lens of Different Geographic Makeup and Populations</p>	<p>Develop a Workforce Needs Assessment for the Region</p> <p>Research Salary Comparisons Across Professions</p> <p>Create List of Colleges and Universities in the Region and the Number of Seats and Current Demographics in each Program</p> <p>Survey Providers about their Experiences with Insurance</p> <p>Explore the Role of Financial Incentives on Workforce Capacity</p> <p>Identify Psychiatry Residencies, Internships and Trainings in Rural & Underserved Communities</p>	<p>Create Outreach Strategies to Reach Those Who Guide Students in Career Selection, Such as College Recruiters and Advisors in Order to make them Aware of the Opportunities</p> <p>Advocate for an Increase in the Number of Social Work and Counseling Students Able to be Enrolled in University Programs. Increase Number of Internship Sites</p> <p>Establish a Career Path Expand the Workforce through Paraprofessionals</p> <p>Build Provider Resiliency, Mentoring Relationships</p>	<p>Advocate for Higher Reimbursement Rates</p> <p>Address Barriers to Licensure</p> <p>Engage with Legislators and Enforcement Authorities about Behavioral Health Parity</p> <p>Support Policies that Expand Incumbent Worker Training Programs, Scholarships, Internships, Field Placements, and Residency Positions</p>



- According to the Association of Social Work Boards (ASWB) analysis of its licensing exam pass rate, White test takers had a pass rate of 83.9%, whereas Black test takers only had a pass rate of 45%.
- Considering all licensure types within Counselors and Social Workers (CSWs), White people make up proportionally more of the profession (80.87%) than Ohio's White population (77%) and Black CSWs (11.25%) number fewer than the Black population (12.5%).
- Although 12.5% of Ohioans identify as Black, only 4.68% of all Ohio psychologists are Black. Hispanic psychologists constitute 2.54%.
- As educational requirements increase for each level of Chemical Dependency Counselors (CDCs), Black professionals are increasingly underrepresented as compared to their White counterparts.



September 21, 2023

MIND HIVE means many minds, one body - and for the purposes of the collaborative work of the Regional Behavioral Health Workforce Coalition, this newsletter is to share information with Coalition members so that we all can be informed when making decisions and identify projects that need support. It features timely resource documents as well as webinars and podcasts related to behavioral health workforce issues. It also includes access to the Coalition's dashboard so that you can review where we stand with our goals, celebrate our wins, and help support each other in getting over our hurdles.

Welcome to our First Edition!

Welcome to the Regional Behavioral Health Workforce Coalition's new newsletter! The Coalition was formed by the Mental Health Education Advocacy Coalition and the University of Cincinnati Area Health Education Center to address behavioral health workforce barriers through cross-sector community-driven collaboration with providers, educators, government, and community-based organizations. Our goals are to increase support, build evidence, and scale up best practices to build the behavioral health workforce that our region needs.

Shared Roadmap Dashboard

We have created this dashboard to track progress against the coalition's Shared Roadmap.

Public Awareness & Trust Subcommittee

Goals	Priority	Phase	Status
Develop public awareness about career opportunities and growth available in behavioral health professions, especially in underserved populations.	High	Planning	On Time
Educate the public, employers, school systems, government and health plans about stigma around behavioral health disorders that create barriers to workforce development, especially in underserved populations.	Medium	Planning	On Time
Build awareness of professionals in other systems and sectors through trainings such as Behavioral Health 101: Mental Health.	Low	Planning	On Time





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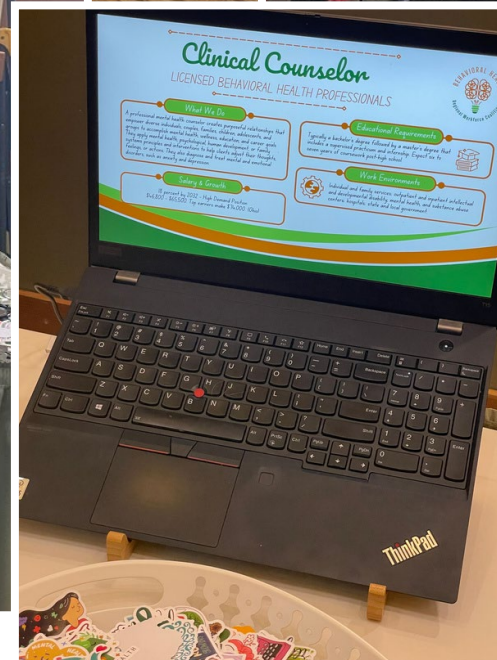
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Build awareness of professionals in other systems and sectors through trainings such as Behavioral Health 101: Mental Health.	Low	Phase 1

Developing messages and materials for the different targeted audiences. Need to work and which ones don't.
Contribution list for each of our audiences.
Deliverables





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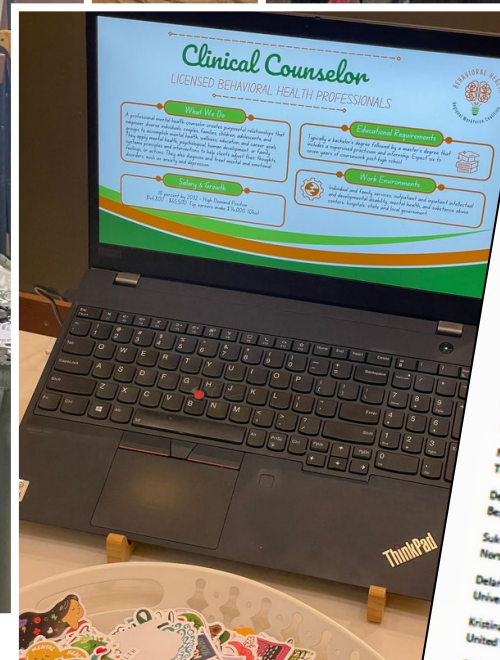
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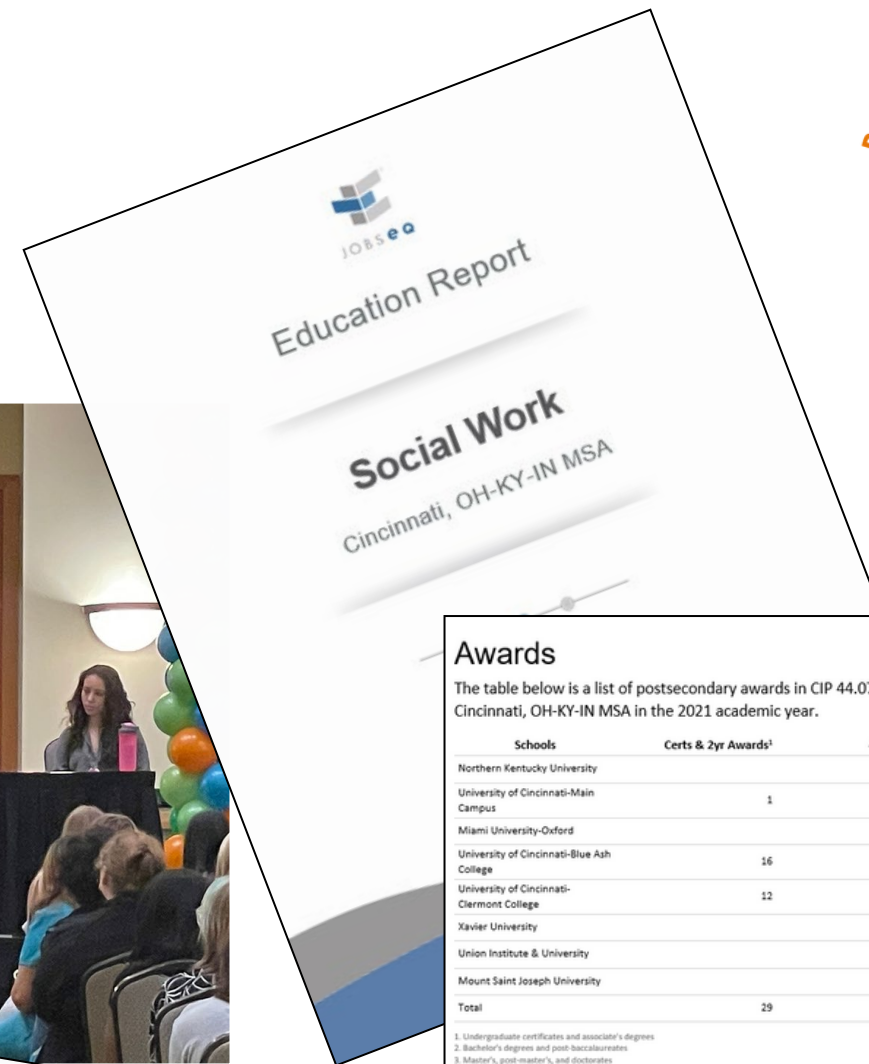
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Educate the public, employers, school systems, government and health plans about stigma around behavioral health disorders that create barriers to workforce development, especially in underserved populations.	Medium	Phase 2
Build awareness of professionals in other systems and sectors through trainings such as Behavioral Health 101: Mental Health.	Low	Phase 3





Awards

The table below is a list of postsecondary awards in CIP 44.0701 that were granted by institutions located in the Cincinnati, OH-KY-IN MSA in the 2021 academic year.

Schools	Certs & 2yr Awards ¹	4yr Awards ²	Post-Grad Awards ³	Avg Net Price ⁴
Northern Kentucky University		73	72	\$9,664
University of Cincinnati-Main Campus	1	59	63	\$22,767
Miami University-Oxford		33	26	\$24,345
University of Cincinnati-Blue Ash College	16			\$12,971
University of Cincinnati-Clermont College	12			\$8,152
Xavier University		12		\$34,945
Union Institute & University		10		\$19,861
Mount Saint Joseph University		9		\$18,646
Total	29	196	161	

¹ Undergraduate certificates and associate's degrees
² Bachelor's degrees and post-baccalaureates
³ Master's, post-master's, and doctorates
⁴ Average net price represents full-time beginning undergraduate students who paid the in-state or in-district tuition rate and were awarded grant or scholarship aid from federal, state or local governments, or the institution. Data is for the 2020-2021 academic year.
 Awards data are per the National Center for Education Statistics (NCES) and JobsEO for the 2021 academic year. Any programs shown here reflect only data reported to the NCES; reporting is required of all schools participating in any federal finance assistance program authorized by Title IV of the Higher Education Act of 1965, as amended—other training providers in the region that do not report to the NCES.

Occupation Details

As of 2023Q1, total employment for occupations linked to Social Work in the Cincinnati, OH-KY-IN MSA was 6,572. Over the past three years, linked occupations shed 42 jobs in the region and are expected to need in aggregate approximately 4,806 newly trained workers over the next seven years.

Snapshot of Occupations Linked to Social Work in the Cincinnati, OH-KY-IN MSA¹

SOC	Occupation	Current			3-Year History		7-Year Forecast						
		Empl	Mean Ann Wage ²	EQ Unempl Rate	Unempl Rate	Online Job Ad ³	Total Demand	Empl Exits	Empl Transfers	Avg Ann Growth %			
21-1011	Child, Family, and School Social Workers	2,080	\$49,400	0.84	21	1.0%	76	-0.2%	1,637	510	928	138	1.3%
21-1022	Healthcare Social Workers	1,247	\$63,300	0.96	17	1.3%	33	0.1%	882	357	474	51	0.6%
21-1023	Mental Health and Substance Abuse Social Workers	982	\$45,900	1.14	64	6.1%	265	-0.5%	731	361	289	80	1.1%
11-9151	Social and Community Service Managers	959	\$73,200	0.76	13	1.2%	77	0.9%	674	232	372	71	1.0%
21-1029	Social Workers, All Other	434	\$60,100	1.05	8	1.6%	n/a	-5.1%	305	103	187	16	0.5%
21-1092	Probation Officers and Correctional Treatment Specialists	330	\$62,900	0.52	16	3.6%	10	-1.1%	197	67	127	2	0.1%
21-1019	Counselors, All Other	278	\$45,500	0.72	6	2.0%	1	2.7%	212	90	112	11	0.6%
21-1013	Marriage and Family Therapists	168	\$62,300	0.30	5	2.7%	1	5.2%	110	51	47	13	1.1%
25-1113	Social Work Teachers, Postsecondary	95	\$76,400	1.08	2	1.7%	3	-0.3%	58	30	26	2	0.3%
Total - Linked Occupations		6,572	\$56,900	0.82	150	2.1%	465	-0.2%	4,806	1,801	2,561	444	0.9%
Total - All Occupations		1,145,817	\$59,500	1.00	40,129	3.4%	\$4,592	0.2%	972,361	392,268	552,232	27,861	0.3%

Source: BLS/DC



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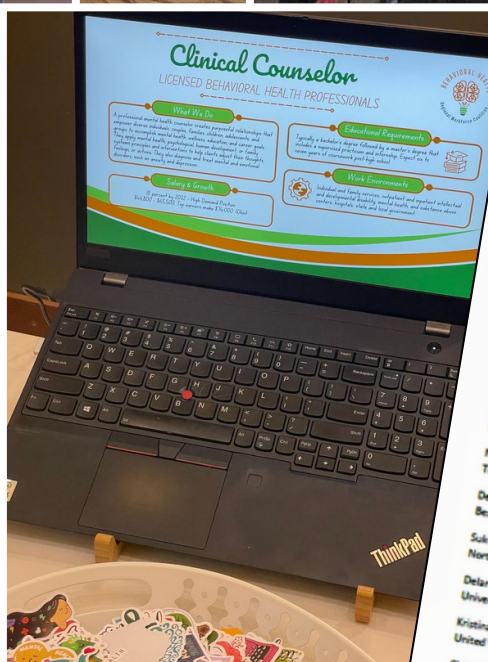
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To Register



HIGHER EDUCATION
LEARNING CIRCLE:

**BUILDING
THE BEHAVIORAL
HEALTH WORKFORCE**



NOVEMBER 2, 2023
9:30 AM - 2:00 PM



COUNTRYSIDE YMCA
1699 DEERFIELD RD
LEBANON, OH 45036

