

Prop. 63 Fast Facts for Prevention and Early Intervention

- **The Mental Health Services Act (Proposition 63)**, approved by voters in November 2004, included a focus on prevention and early intervention services.
- **Prevention and Early Intervention (PEI)** services, funded by MHSA dollars, are designed to prevent mental illness and emotional disturbance from becoming severe, disabling and costly to individuals, families, communities and the State.
- **Currently 49 counties have approved plans for PEI funding totaling over \$338 million.**
- As a result of PEI funding, all counties with approved PEI Plans are establishing prevention and early intervention programs for children and youth.

PEI Programs are intended to **improve access** to mental health services for persons underserved and **reduce the negative effects, including costs, of untreated mental illness** such as:

- **Suicide**
- **Homelessness**
- **Incarceration**
- **School Failure or drop out**
- **Removal of children and older adults from their homes**
- **Prolonged suffering**
- **Unemployment**

Approximately 542,000 Californians were estimated to receive PEI services in FY 08/09.

PEI programs are focused on:

- **Children and youth in stressed families**
- **Trauma exposed individuals and families including veterans**
- **Underserved ethnic and cultural populations**
- **Individuals experiencing the onset of serious mental illness**

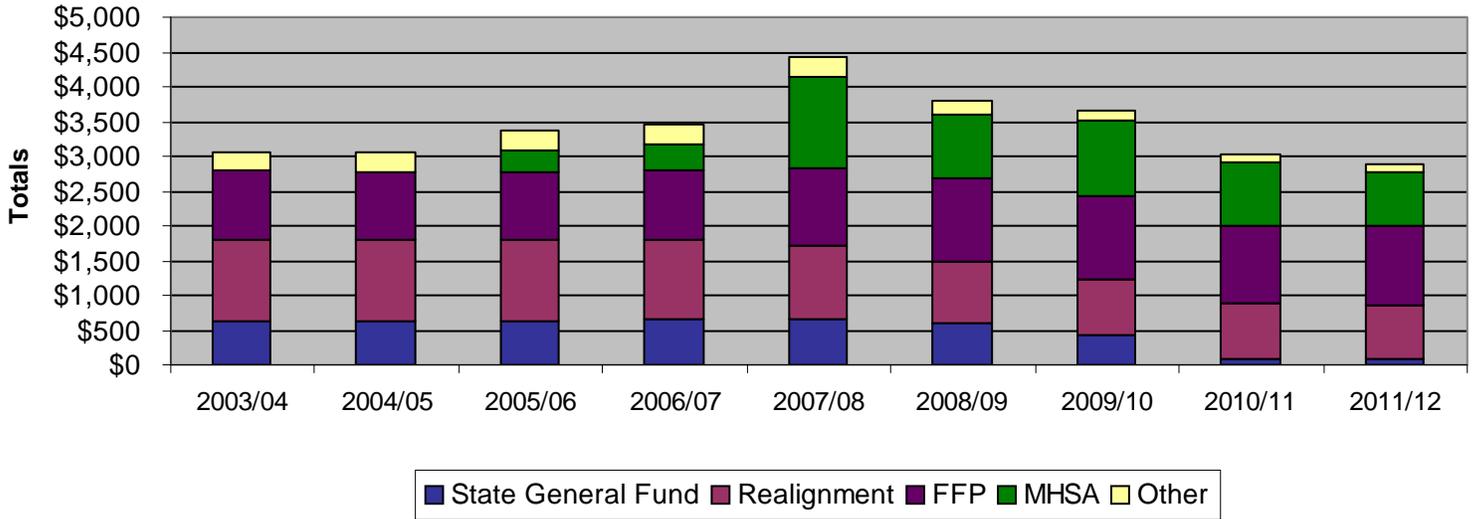
Since the passage of the MHSA, more than 100,000 Californians have participated in community planning efforts to identify local mental health needs and program priorities. **Maintaining PEI funds over the next two years is critical** to the successful impact of these local programs on individuals and communities.

Examples of County PEI Programs include:

- **Los Angeles County** is establishing a School-based Services Project focused on building resiliency among children, youth, and their families; identifying children early on who have risk factors for mental illness; and providing on-site services to address non-academic problems that impede success in school.
- **Stanislaus County** has expanded access to mental health services for underserved cultural communities by locating clinicians in primary health care clinics in their communities.
- **San Francisco County** - La Cultura Casa provides trauma recovery services to youth under 18 and their families to reduce the negative outcomes of street and gang violence. This program utilizes interventions that are community lead and nationally recognized.
- **Orange County** is establishing programs for children in stressed families to keep children in the home and in school. These include programs for children living in families that are impacted by domestic violence, trauma, homelessness, divorce, substance abuse and unemployment.
- **Butte County's** Older Adult Suicide Prevention, and Education Program reaches out to older adults who are experiencing depression, anxiety, complicated grief and/or loss, trauma, medication misuse, overuse or mismanagement to help people remain in their homes and reduce negative outcomes such as suicide and hospitalization.
- **San Luis Obispo County** has established the Launch Program for at-risk youth, including homeless youth. This program provides connections to housing and other critical services to support youth gaining and maintaining employment.
- **San Diego County** has a PEI program for veterans, active duty military, reservists, National Guard and their families to provide confidential peer-support services for those in this community at risk. The program includes peer counseling, linkages to additional mental health services, parenting education, and a referral hotline.

MHSA Funding Fast Facts

Community Mental Health Funding: Adjusted for Constant Dollars per Capita



MENTAL HEALTH FUNDS SHRINKING:

- Total mental health funding is projected to shrink in the next two fiscal years despite the success of Prop. 63 in providing new mental health funding over the past 5 years.
- In FY 2011/12 Counties will receive less funding per capita for community mental health than they received in FY 2004/05 per capita, while service mandates and expectations have increased.

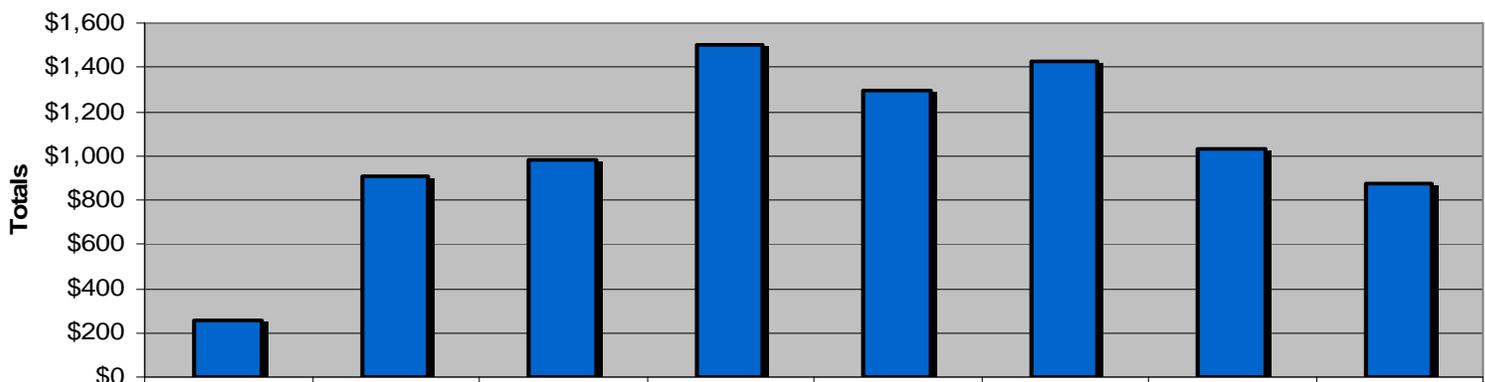
PROP. 63 REVENUES ARE DECLINING

- Due to the economy, Prop. 63 revenues are projected to decrease 28% in FY 2010/11 and another 15% in FY 2011/12 for an approximate reduction of \$557 million. State General Fund and Realignment funds for mental health are also declining.

REDIRECTION OF PROP. 63 FUNDS WOULD ADVERSELY IMPACT MENTAL HEALTH:

- The proposed redirection of Prop. 63 funds would occur at a time when all funding streams for mental health are already declining. This will not only adversely impact existing programs, but will also jeopardize the continuation of MHSA programs in communities across the state.
- The proposed redirection of Prop. 63 funding of \$900 million to \$1.7 billion, over the next two fiscal years, will lead to an estimated reduction of an additional \$500 million in federal dollars for California's mental health system because counties use Prop. 63 funds to draw down federal matching dollars.
- Last year, 66% of voters rejected a proposal to redirect \$230 million in Prop 63 funds.

MHSA Revenues Received (Cash Basis)



Prop. 63 (MHSA) Fast Facts

With the Passage of Prop. 63 – Californians are Getting What They Voted For

- ❖ The Mental Health Services Act (Proposition 63 or MHSA) was approved by voters in November 2004 and reaffirmed by a 2/3 vote with the defeat of a proposed diversion of MHSA funds in May of 2009.

Proposition 63 Benefits All Californians

- ❖ Prop. 63 benefits all Californians through its focus on the comprehensive needs of individuals and families and the provision of services designed to prevent more costly interventions.
- ❖ Proposition 63 is intended to provide the resources to expand programs that have demonstrated their effectiveness, that will save lives, and that will save money.
- ❖ Proposition 63 provides outreach and mental health services to underserved populations, including cultural, ethnic, racial, and linguistic communities.
- ❖ Approximately **378,000 individuals** (unduplicated count) **received MHSA-funded community mental health services** in FY 07/08.
- ❖ Approximately **542,000 individuals were estimated to receive Prevention and Early Intervention services in FY 08/09.** (Based on information provided in FY 08/09 County PEI Plans.)

Proposition 63 is Cost Effective

- ❖ Proposition 63 avoids more costly services for state and county governments by reducing homelessness, emergency medical care, long term nursing home care, unemployment, hospitalization, and incarceration.
- ❖ Community Wellness/Drop-in centers, newly established in most counties with MHSA funds, are designed to provide easy and welcoming access to community services and supports for persons who may not typically seek system services but frequently need more costly emergency services. These centers, many of whom are peer run, provide a broad array of cost effective services that are benefiting communities across California.
- ❖ In addition to persons receiving community mental health services, the MHSA is focused on delivering **Prevention and Early Intervention** services to **prevent mental illness and emotional disturbance from becoming disabling and costly for individuals, families, communities and the state.**

Prop. 63 (MHSA) Fast Facts

Proposition 63 Produces Positive Life Outcomes for Individuals

- ❖ With the passage of Prop. 63, Californians voted to provide **new mental health funding**, to be **used in a cost effective way**, for services including prevention and early intervention services, **focused on reducing the negative outcomes of untreated mental illness** such as:

Suicide	Homelessness
Incarceration	Hospitalization
School failure or drop out	Substance Abuse
Children and older adults	Prolonged Suffering
removed from their homes	Unemployment

Proposition 63 Leverages Other Funds

- ❖ Prop. 63 created new funding for mental health services and new dollars that could be leveraged for California throughout the mental health system. The proposed redirection of \$900 million to \$1.7 billion in MHSA funds over the next two years would lead to the loss of millions of dollars in leveraged funds.
- ❖ In the next two fiscal years, Prop. 63 will leverage \$500 million in federal dollars for California's mental health system because counties use Prop. 63 funds to draw down federal matching dollars. This federal funding will be lost to California if MHSA funds are diverted.
- ❖ Many counties are addressing the community costs associated with homelessness by using MHSA funds to build affordable housing units in their communities for persons with mental illness who are homeless or at risk of homelessness. MHSA housing programs include comprehensive support services to maintain positive housing and life outcomes and prevent the need for more costly services and interventions.
- ❖ Counties use Prop. 63 funds, available through the MHSA Housing Program, to leverage funds from other sources to build affordable supportive housing in their communities. As of August 2009, **\$159.7 million MHSA dollars have leveraged nearly \$1.1 billion additional dollars for affordable housing units in California.**
- ❖ Prevention and Early Intervention programs are leveraging funds and resources through school based projects that contribute existing school based staff, work space, and matching funds.

Prop. 63 (MHSA) Fast Facts

Outcomes reported for individuals receiving the most comprehensive MHSA services indicate that Prop. 63 has delivered on its promise.

What follows are a few examples of counties' success in reducing the negative outcomes of untreated mental illness.

<i>Decreased Number of Days Spent Homeless</i>	<i>Reduction of:</i>
For Youth:	
❖ Stanislaus County:	92%
❖ San Francisco County	100% (CBHS TAY)
For Adults:	
❖ Sacramento County	100% (Integrated Service Agency)
❖ Placer County	88%
For Older Adults:	
❖ Stanislaus County	90%
❖ San Diego County	89% (Heritage Clinic)
<i>Decreased School Suspensions for Children and Youth</i>	
❖ Los Angeles County:	90% (Child and Family Center)
❖ Riverside County:	81%
❖ San Bernardino County	79%
<i>Decreased Incarceration/Arrest Rates</i>	
For Youth:	
❖ Riverside County (Incarcerations)	86%
❖ San Mateo County (Incarcerations & Arrests)	81%
For Adults:	
❖ Orange County (Incarcerations)	85%
❖ Contra Costa County (Arrests)	77%
For Older Adults:	
❖ Orange County (Incarcerations)	93%
❖ San Diego County (Incarcerations & Arrests)	93% (Heritage Clinic)
<i>Decreased Hospitalization Rates</i>	
For Children and Youth:	
❖ San Mateo County	81%
❖ Yolo County	100% (Rural Children's Mental Health)
For Transition Age Youth (16-25)	
❖ Contra Costa County	70%
❖ Los Angeles County	90% (Tessie Cleveland Services)
For Adults:	
❖ San Francisco County	40%
❖ Orange County	52%
For Older Adults	
❖ Sonoma County	77%
❖ San Mateo County	50%