



HEALTHY MINDS POLICY INITIATIVE

Sept. 15, 2021

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www.healthymindspolicy.org/newsletter

Healthy Minds: What we do

- Data-driven **research** and **problem-solving**
- Identifying and advancing **policy** to improve systems
- Building a **better climate** for change



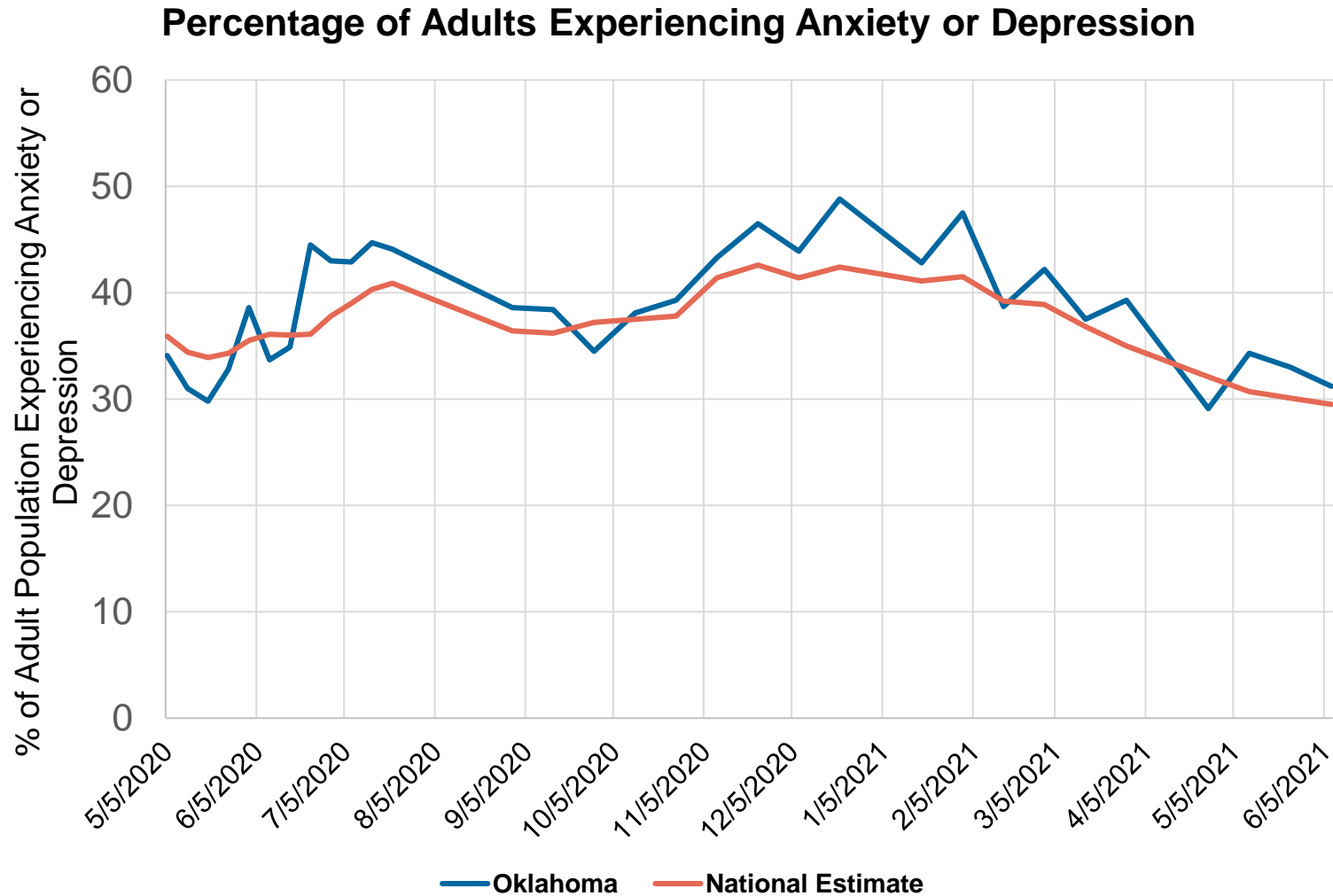
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We support policymakers with collaborative, data-informed strategies and approaches that **reduce the devastating effects of mental illness and substance use disorder** on Oklahomans, their communities and their state budget.



2021: New levels of crisis

Anxiety and depression

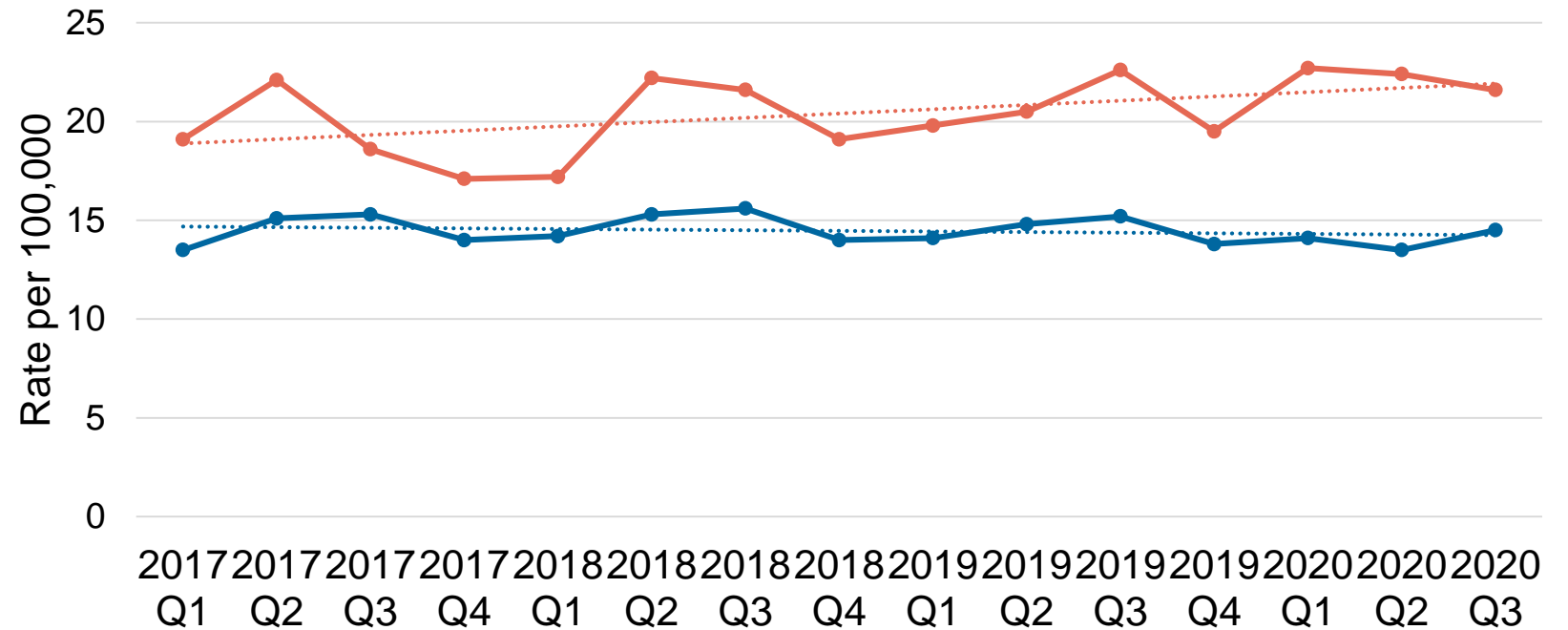


- **Before the pandemic:** Around 20% of Oklahomans had a diagnosable mental health condition.
- **During pandemic:** Nearly 45% of Oklahomans had symptoms of depression and anxiety.

Suicide

- **Statewide:** 8-10% increase
- **Rural:** 27% increase
- **Urban:** 2-3% increase

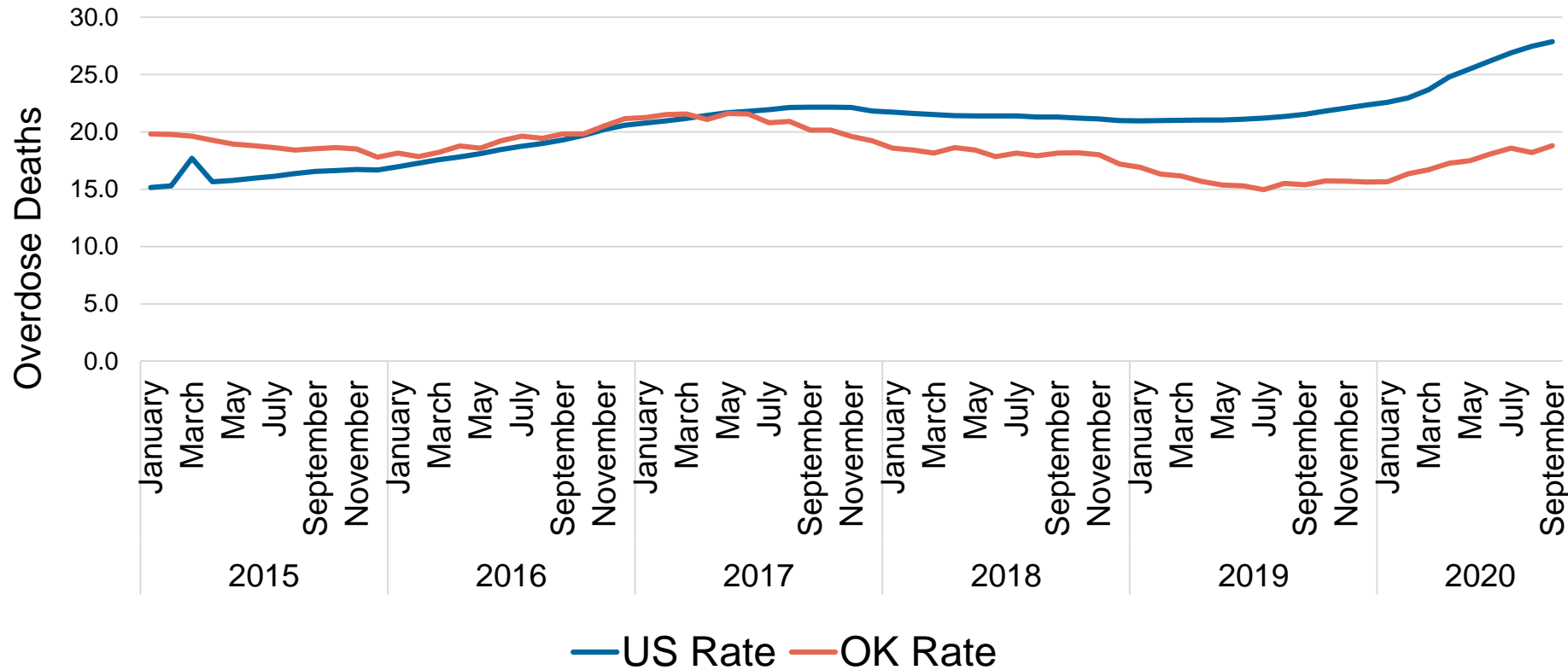
US and Oklahoma Provisional Suicide Rates



—●— US —●— Oklahoma Linear (US) Linear (Oklahoma)

Substance use and overdose

Provisional Overdose Deaths Per 100,000 Population

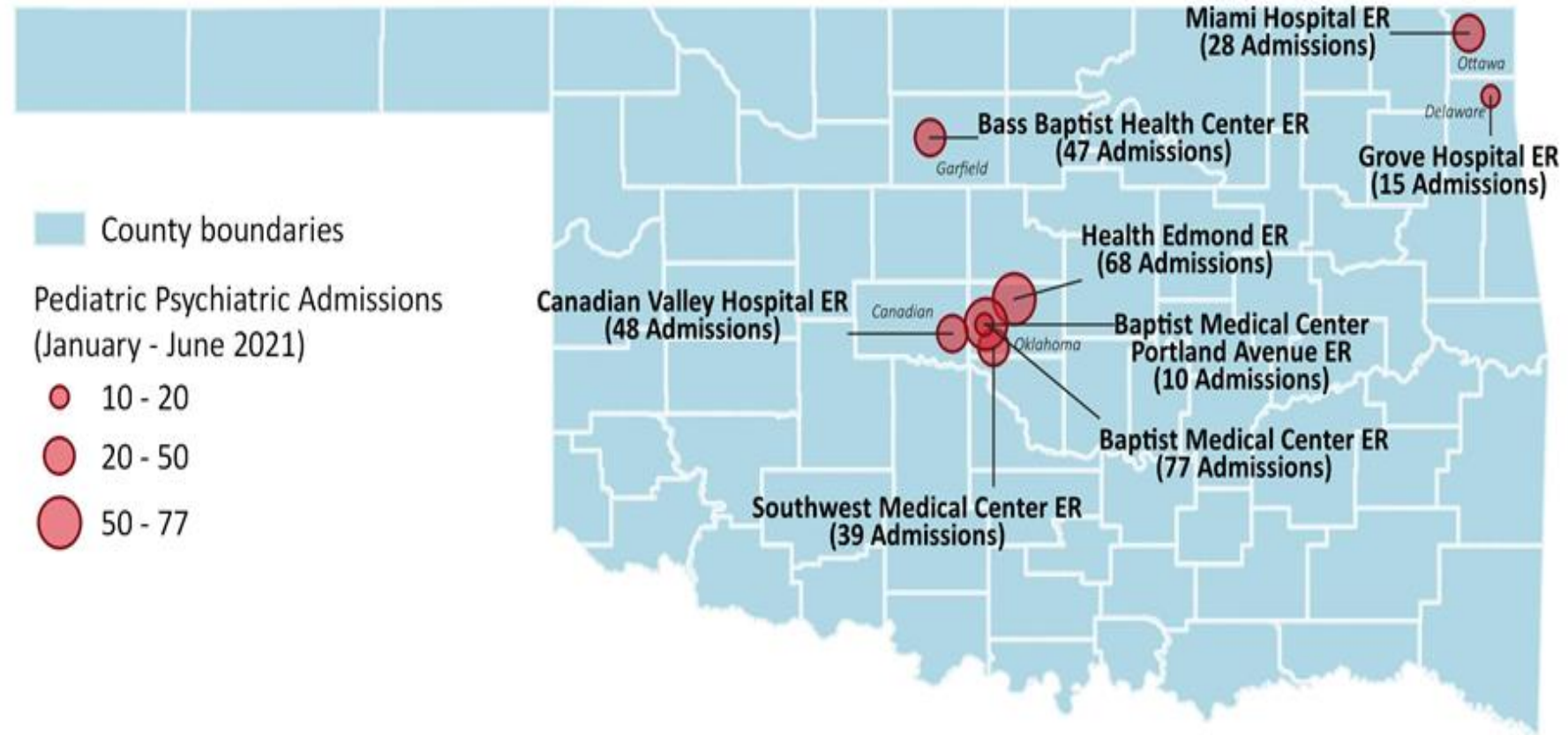


Overdose deaths have increased, reversing Oklahoma's strides in reducing its rates of overdose since 2017

Pediatric mental health crises

Gaps in children's crisis care means increased mental health need in hospital emergency rooms

Source: INTEGRIS





The model: Dealing with crisis

Mental Health: The cycle of unmet need



SOURCE: MHA (2021)

82%



Of Oklahomans who enter prison with non-violent offenses have mental health or substance abuse needs.



Untreated mental illness is costing us **2X-3X** more in health care overall.

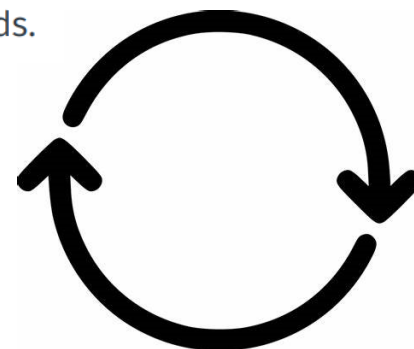


Patients end up in inpatient mental health hospitals and hospital emergency rooms — **the most expensive settings of care.**



\$193 billion in lost economic productivity for employers nationally

Police have become our **default mental health providers.**

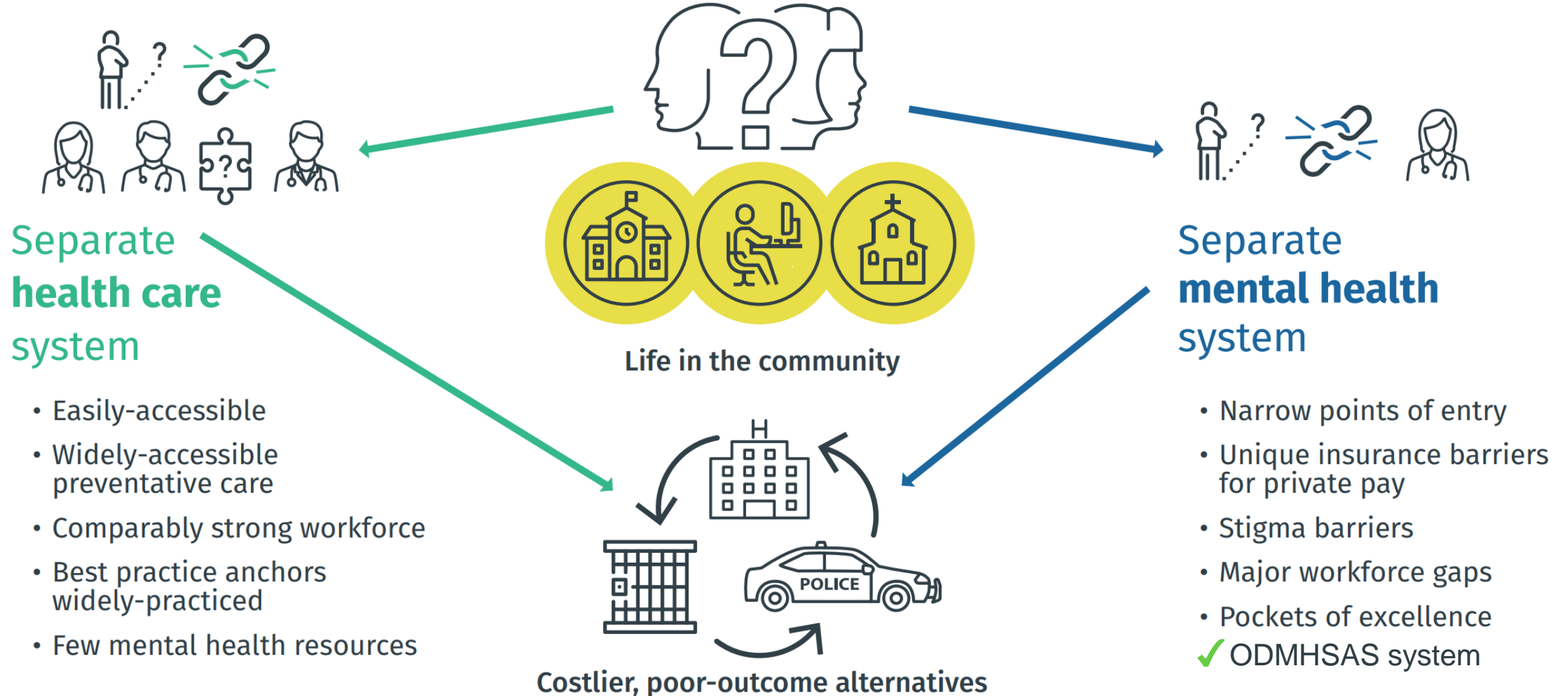


THE CURRENT MENTAL HEALTH SYSTEM

for an Oklahoman experiencing mental illness or addiction



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The ideal mental health system

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Community:

Supports & Resiliency



Ideal Continuum of Care

Seamless system of prevention, early intervention, and treatment that integrates physical & mental health and trauma-informed care

Fully-Integrated Prevention and Early Intervention

Primary care serves as entry-point for all

Specialty Care

Behavioral Health Outpatient Care when specialist needed

Rehab and Intensive Care

Intensive Outpatient, Assertive Community Treatment, etc.

Crisis Care

Quick intervention, mobile crisis, 23-hour beds



Inpatient Care

Beds with >24 hour stays

Residential Treatment

Live-in treatment with life building support

← Coordination between mental health and substance use care →

Service Coordination

Coordination Across Physical Health, Substance Use Disorder Treatment, and Mental Health Treatment

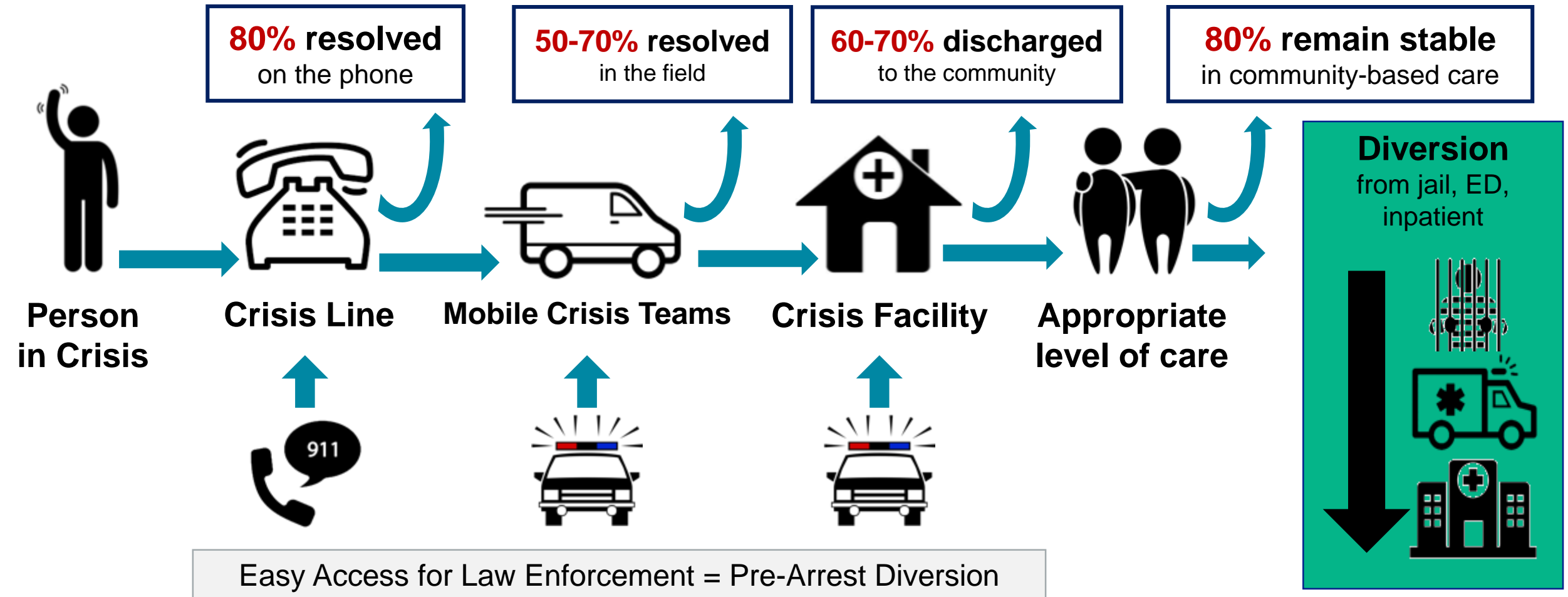
Case Management

Wraparound

System Intersections: Child Welfare, Juvenile Justice, Housing, Law Enforcement

Recovery Supports: Outreach and engagement, transportation, education support, peer-to-peer services, mentoring, faith-based support, parenting education, self-help groups

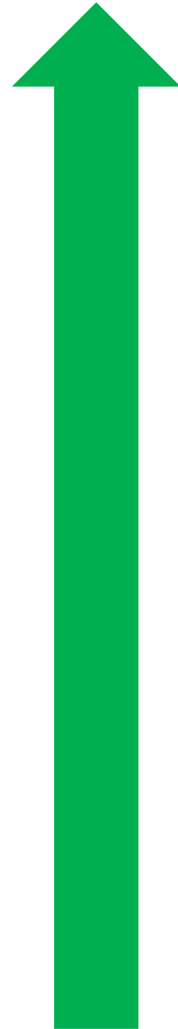
The ideal crisis care system



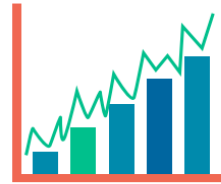
Mental Health: The opportunity



SOURCE: MHA (2021)



11 percentage point increase in test scores
possible with appropriate school services



Businesses gain back **31 days of lost productivity, \$193B in lost economic potential**



Better use of **police and criminal justice** time and money.



Better health outcomes overall, less early death, and less expense transferred to ratepayers



More **economic activity**, more **effectively-used resources** in public and private sectors

Where do we go from here?

Recent momentum

- 988 implementation & crisis services expansion (2021 legislative investment)
- Certified Community Behavioral Health Clinics (CCBHC), federally & state funded working to provide full continuum of care by geographic region
- Telehealth expansion
- iPads and tech-based service connections for law enforcement

Needs

- Better integration of behavioral health in primary care settings
- Additional capacity at virtually every level of care (continued state investment is key)
- Full implementation of mental health parity
- Children-specific crisis continuum
- Train & extend reach of behavioral health specialists



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