



# Presentation to the Alaska Mental Health Trust

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MAY 2022



# AMHB/ABADA Updates

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- History and Duties of AMHB/ABADA
- 2022 Legislative Priorities
- Mental Health Supports in Alaskan Schools-Update

The Alaska State Legislature (AS 47.30.661) and Federal Public Law #99-660 established AMHB in 1987. The Alaska State Legislature (AS 44.29.100) and Executive Order #71 established ABADA in 1988.

In 2005 the structure of AMHB and ABADA was changed to co-locate the Boards under one executive director and staff. The Boards maintain separate officers and elections, but operate under a joint executive committee, meet jointly in public meetings statewide, and carry out projects and advocacy efforts together.

In 2010, the Statewide Suicide Prevention Council (SSPC) was co-located under AMHB/ABADA's executive director but maintains separate staff. While the SSPC does not meet concurrently with the Boards, members of both boards are represented on the council and offer presentations and updates to each respective board regularly.

## History of AMHB/ABADA

# Current AMHB Board Members

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- Sharon J. Clark, Chair - Nenana - Public
- Charlene Tautfest, Soldotna - Consumer/Family
- Brenda Moore, Anchorage - Consumer/Family
- Monique Andrews, Eagle River- Provider
- William Cook, Eagle River - Attorney
- Robert Dorton, Fairbanks - Public
- Diane Fielden, Soldotna - Beneficiary/Family
- Tonie Protzman, Anchorage - Provider
- Karen Malcolm-Smith, Anchorage - Consumer/Family
- James Savage, Wasilla - Consumer/Family
- Tanya Hicks, Wasilla- Consumer/Family
- Kurt Hoenack, Palmer- Consumer/ Family

## Ex-Officio Members

- Tracy Dompeling, Juneau - Division of Juvenile Justice
- Sharon Fishel, Juneau - Department of Education
- Duane Mayes, Anchorage - Division of Vocational Rehabilitation
- Gennifer Moreau-Johnson, Anchorage - Division of Behavioral Health
- Adam Rutherford, Anchorage - Department of Corrections
- Catherine Stone, Anchorage - Alaska Housing Finance Corporation
- Albert Wall, Juneau – Department of Health & Social Services

# Current ABADA Board Members

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- Renee Schofield, Chair- Ketchikan- Public
- Lee Breinig, Anchorage - Beneficiary/Family
- Anthony Cravalho, Kotzebue - Public
- Diane Fielden, Soldotna - Beneficiary/Family
- Monique Andrews, Eagle River – Provider
- Robert Dorton, Fairbanks - Public
- Chase Griffith, Kenai - Beneficiary/Family
- Philip Licht, Palmer- Provider
- Christine Robbins, Fairbanks - Public

- Katholyn Runnels, Anchorage- Attorney
- Kara Nelson, Palmer-Beneficiary/ Family
- Kathleen Totemoff, Ninilchik- Provider
- Enlow Walker, North Pole - Physician

## Ex-Officio Members

- Gennifer Moreau-Johnson, Anchorage - Division of Behavioral Health

# Duties of AMHB/ABADA

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- Advocate for and with Alaskans with mental health and substance use disorders.
- Assist in the evaluation of Alaska's publicly funded behavioral health system.
- Educate the public and policymakers about mental health and substance misuse.
- Provide a public forum for the discussion of issues related to mental health and substance use disorders.
- Advise, plan, and help coordinate with state and local governments, Alaska Mental Health Trust Authority and partner advisory boards, community organizations, and the public on issues related to mental health and substance use disorders.
- Provide recommendations to the Alaska Mental Health Trust Authority concerning the Comprehensive Integrated Mental Health Plan and the use of money in the mental health trust settlement income account.

# Budget Priorities- Conference Committee

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- **Behavioral Health Treatment & Recovery (BHTR) Grants (DOH).** Adds +\$859,500 GF/MH for grants to community mental health and substance use treatment providers for outpatient and residential treatment and other behavioral health services.
- **Behavioral Health Prevention & Early Intervention (BHPEI) Grants (DOH).** Adds +\$246,700 GF/MH for grants to community providers for prevention and early intervention services, FASD awareness and training, suicide prevention, and substance misuse prevention.
- **Public Assistance Field Services (DOH).** Adds +\$1,331.9 Fed; GF/Match for new 20 positions in the Office of Public Assistance to address the backlog of applications needing processing.
- **Providence Medical Center Crisis Stabilization (DCCED).** Adds +\$8 million UGF for crisis stabilization services at Providence Alaska Medical Center.
- **Division of Public Assistance E-Forms and Online Noticing (DOH).** Adds +\$8 million UGF/Fed to create online applications and electronic notices to replace using paper notices for public assistance applicants.

\*This is not a comprehensive list of AMHB/ABADA's FY23 budget priorities.



# Legislative Priorities- Bills that Passed

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- **SB 9 – Alcohol Beverage Control (ABC) Board, Alcohol Regulations** (Sen. Micciche). Related to regulation of manufacturers, wholesalers, retailers of alcohol beverages; alcohol licensure, permits; transporting or delivering alcoholic beverages; changes to the ABC Board.
- **HB 172/SB 124 – Crisis Stabilization, Mental Health Facilities** (Governor Dunleavy). Improves access to crisis stabilization services for Alaskans experiencing a mental health or substance use emergency.
- **HB 265/SB 175 – Health Care Services By Telehealth** (Rep. Spohnholz/Sen. Wilson). This bill expands access to behavioral health telehealth services, including Medicaid recipients.
- **HB 168 – Electronic Application for State Benefits** (Rep. Snyder). Requires DHSS to establish an electronic application process for all public assistance programs under the department and allows for applicants to use either paper or electronic applications.

\*This is not a comprehensive list of AMHB/ABADA's FY23 bill priorities.



# Mental Health Supports in Alaska Schools

This project was funded by the Alaska Mental Health Trust through a contractual agreement with the Stellar Group and in collaboration with the State of Alaska Departments of Education & Early Development and Health & Social Services.

# Protecting Youth Mental Health- US Surgeon General's Advisory 2021

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- Before the COVID-19 pandemic, mental health challenges were the leading cause of disability and poor life outcomes in young people in the U.S., with up to 1 in 5 children ages 3 to 17 having a mental, emotional, developmental, or behavioral disorder.
- Additionally, from 2009 to 2019, the share of high school students who reported persistent feelings of sadness or hopelessness increased by 40%, to more than 1 in 3 students.
- Suicidal behaviors among high school students also increased during the decade preceding COVID, with 19% seriously considering attempting suicide (a 36% increase from 2009 to 2019) and about 16% having made a suicide plan in the prior year (a 44% increase from 2009 to 2019).
- Between 2007 and 2018, suicide rates among youth ages 10-24 in the U.S. increased by 57%, and early estimates show more than 6,600 suicide deaths among this age group in 2020.

Source: <https://www.hhs.gov/sites/default/files/surgeon-general-youth-mental-health-advisory.pdf>



BY THE NUMBERS					
<b>158,000</b>	<b>10,000</b>	<b>6,000</b>	<b>1 : 5,368</b>	<b>1 : 6,240</b>	<b>1 : 417</b>
Number of K-12 Students (2022 Projection) <sup>i</sup>	Children with major depression <sup>ii</sup>	Children with major depression who do not receive treatment <sup>iii</sup>	Ratio of School Psychologists to Students (Recommended Ratio 1:500)	Ratio of School Social Workers to Students (Recommended Ratio 1:250)	Ratio of School Counselors to Students (Recommended Ratio 1:250)

There is a national emergency in children’s mental health. Children and youth are experiencing soaring rates of anxiety, depression, trauma, loneliness, and suicidality. Mental health challenges can affect success at school and in life, yet few students get the help they need to thrive.

**The Hopeful Futures Campaign**, a coalition of national organizations, is committed to ensuring that every student has access to effective and supportive school mental health care. The campaign’s school mental health report cards highlight accomplishments and provide important action steps to help address the children’s mental health crisis in every state.

Source: Hopeful Futures Campaign- America’s School Mental Health Report Card February 2022

# MH Supports in Alaska Schools Timeline

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# Research Overview

**31**

## **District Interviews**

Every Alaska public school district was invited to participate in an interview.

Thirty-one districts completed interviews, representing 91% of students in Alaska.

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## **Areas of Inquiry**

The interviews focused on five areas of inquiry:

- Mental health concerns
- Foundational elements
- Mental health supports
- Impacts and barriers
  - Ideal systems

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## **Summary Report**

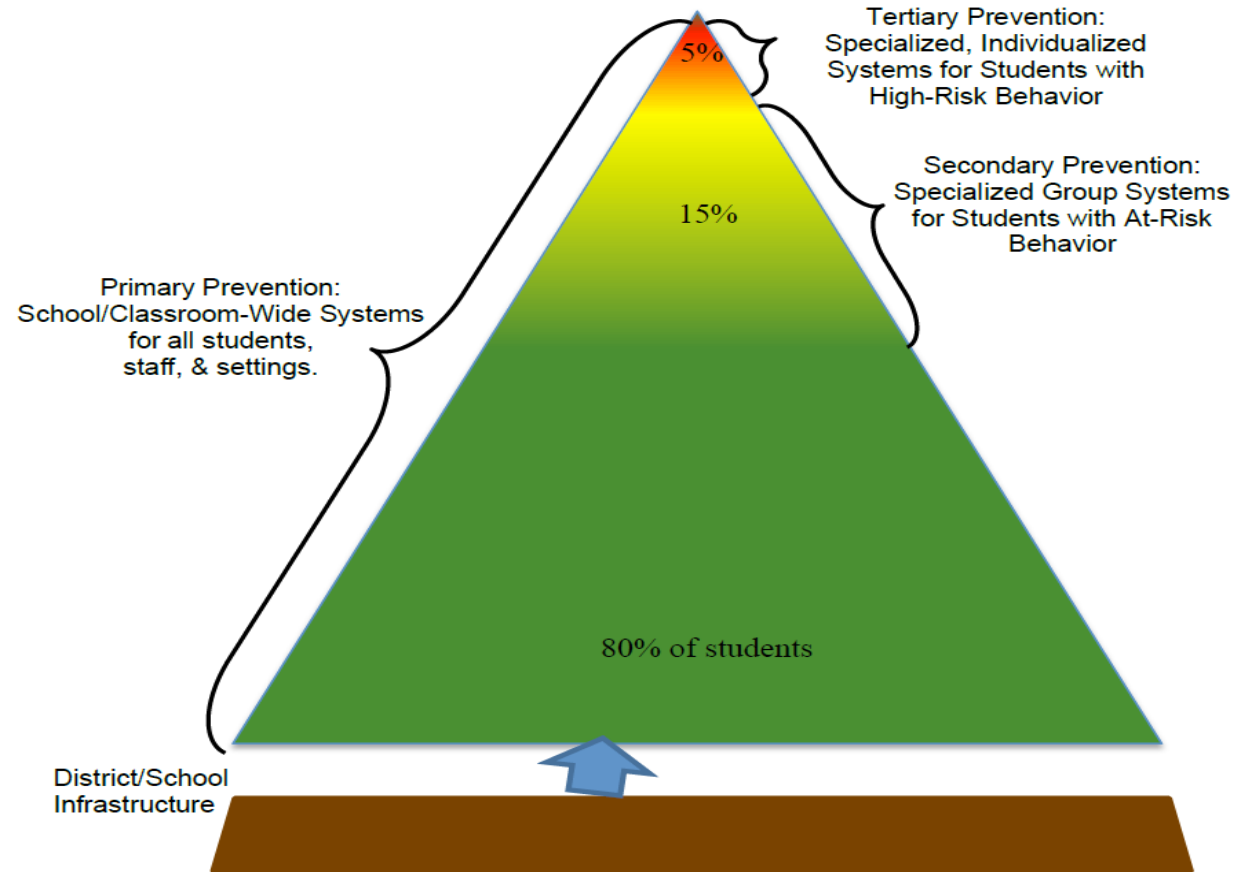
Findings were synthesized into a summary report of key themes and findings.

Additionally, profiles were created for each of the 31 districts interviewed.

Phase II of the research is already underway

# Multi Tiered Systems & Supports (MTSS)

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# List of School Districts Interviewed

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Aleutian Region School District

Anchorage School District

Annette Island School District

Bristol Bay Borough School District

Chatham School District

Chugach School District

Craig City School District

Denali Borough School District

Dillingham City School District

Fairbanks North Star Borough School District

Galena City School District

Haines Borough School District

Hoonah City School District

Iditarod Area School District

Juneau Borough School District

Kenai Peninsula Borough School District

Ketchikan Gateway Borough School District

Kodiak Island Borough School District

Kuspuk School District

Lower Kuskokwim School District

Lower Yukon School District

Matanuska-Susitna Borough School District

Mount Edgecumbe High School

Nenana City School District

Nome Public Schools

Petersburg City School District

Sitka School District

Tanana City School District

Unalaska City School District

Yukon-Koyukuk School District

Yupiiit School District



# Key Findings- Mental Health Supports

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- Districts are providing some level of supports and services.
- A combination of internal and external resources generally allow most districts to provide some level of social emotional learning and mental health supports and services to students.
- However, the levels of services and supports available vary significantly between districts.

# Key Findings- COVID 19

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- Districts shared observations of pandemic-related student concerns such as isolation, trauma, depression, and anxiety, as well as burnout and increased stress and anxiety among staff.
- Increases in student mental health needs that are predicted to continue into SY 2021-2022 are prompting some districts to review the levels of social emotional learning and the mental health supports and services they will provide moving forward.
- Delivery of social emotional learning curriculums and student mental health supports and services were disrupted by COVID-19.
- Virtual delivery was generally found to be less effective than in-person.
- However, many districts are finding ways to use virtual platforms to address gaps and add additional student supports and services.

# Key Findings- In-Service and Staff Support

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- In-service and professional development time is leveraged to bring mental health training to staff.
- In-service and professional development opportunities for staff training help deliver content on school climate and mental health priorities.
- Training topics have included trauma-engaged principles, culturally relevant approaches, and social emotional learning, among numerous others.

# Key Findings- Community Partnerships

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- Trained school staff and community partners are critical to providing mental health supports and services.
- State, regional, and local community partners play integral roles in supplementing the services outside of a district's scope, such as more intensive Tier 3 residential treatment or ongoing psychological interventions.

# Next Steps-Phase 2 Research

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- Case Studies with Targeted School Districts
- Statewide School Counselor Survey
- Identifying Indicators of Behavioral Health Needs in Alaska Schools
- Policy Analysis
- Final Report
- Stakeholder Group Engagement

# Why This Work Matters?

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- To build a shared understanding of what services and supports are available in schools for Alaskan youth & families impacted by mental illness, substance misuse, developmental disabilities, and trauma.
- To support planning efforts that address mental health services and supports for Alaskan youth; including training and technical assistance from the Association of State and Territorial Health Officers (ASHTO), ASHNA's Child and Adolescent Behavioral Health Workgroup, the Governor's Parent/Foster Parent Collaborative Council, and ongoing Medicaid reform efforts.
- To better understand the needs of Alaska's crisis care system for youth.
- To work collaboratively to identify policy initiatives and advocate for resources, to address gaps and opportunities for improved mental health services and supports for Alaskan youth.

# Questions? Comments?

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