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**Ohio House of Representatives
Finance Subcommittee on Health and Human Services
House Bill 110
Joan Englund
Mental Health & Addiction Advocacy Coalition
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Chairman Roemer, Ranking Member West and committee members, my name is Joan Englund, and I am the Executive Director of the Mental Health & Addiction Advocacy Coalition (MHAC). Thank you for the opportunity to provide testimony on House Bill 110 as it relates to services and supports for people with mental illness and substance use disorders.

The MHAC is a statewide policy organization engaged in local policy work in the 13 counties in our Northeast and Southwest Ohio Hubs, and state level policy work. With over 120 member organizations located around the state, our diverse membership reflects the breadth of organizations that see the impact of untreated behavioral health disorders every day. In addition to mental health and addiction services providers and ADAMH boards, our members include major medical institutions, for-profit businesses, faith-based groups, educational institutions, and government entities, among others.

With the COVID-19 pandemic causing the onset of new incidences of behavioral health disorders and relapse or exacerbation of existing behavioral health conditions, the MHAC and its members strongly believe that providing adequate levels of funding for behavioral health is especially critical at this time.

Ohioans' behavioral health relies on support from public policies and funding across many state agencies. The following highlights several important priorities the MHAC supports that are specifically aimed at helping Ohioans with mental health and substance use disorders.

Early intervention and prevention efforts can prevent illness, change the trajectory of potentially debilitating diseases, and save lives. Wise investments in these key areas will bear fruit now, and well into the future.

Student Wellness and Success funding can transform students' chances for achieving their greatest potential through the "whole child" approach to wellness. This philosophy envisions an environment where every student is healthy, safe, engaged, supported, and challenged, setting the stage for long-term wellbeing and success. Funding for this initiative began in the current biennium, and there is more opportunity for growth in terms of connecting children with services.

Ohio's behavioral health workforce needs support. There is a severe shortage of behavioral health professionals and a need to ensure more racial diversity, as well as cultural and linguistic competency. We support the investments in this area and urge additional, critically needed support. Funding that allows providers to offer tuition assistance, loan repayments, and other incentives would help attract and retain qualified individuals in the behavioral health field.

We are pleased with the plans to invest funding for **Multi-System Youth** to keep families together and provide care to children with the most complex needs before out-of-home placement, custody relinquishment, or entrance into the juvenile justice system occurs. We support investing in the implementation of a Child and Adolescent Behavioral Health Center of Excellence to expand the continuum of care and build service capacity to serve Ohio's highest need children and youth.

This budget also recognizes the fact that some **adults with severe and persistent mental illness are involved with multiple systems**. By dedicating funding to assist these individuals, like the targeted efforts focused on youth, stakeholders can begin to address ways to holistically assist Ohioans with complex lives.

We also strongly support funding for **crisis services and crisis infrastructure**. These services offer two critical supports: they intervene with individuals experiencing a behavioral health crisis, and they have the opportunity to provide connection to long-term supports and services that will help to prevent another behavioral health crisis in the future. Crisis services reduce the likelihood that individuals will utilize emergency departments or enter the criminal justice system, lessening the financial burden on these systems and helping people remain in the community while receiving the supports they need.

The investment in **equity** is a critical step toward addressing racial inequity in behavioral health. The MHAC encourages an additional investment in this area in order to improve health outcomes for Ohioans who are Black, Indigenous, and People of Color.

Investments in **housing** that provides supportive and recovery services will help ensure more individuals with behavioral health disorders have access to a place to call home. We know that having a stable living environment can help an individual stay in treatment and achieve recovery, while reducing the use of costly systems.

Please keep the mental health and wellness of Ohioans at the forefront of your priorities as we continue to face the effects from the pandemic collectively. We can positively impact the trajectory of a behavioral health surge by investing in behavioral health across state agencies.

Thank you for the opportunity to testify today. The MHAC and its members look forward to continuing our work with you to ensure all Ohioans receive the behavioral health care and supports they need.