

THE community foundation FOR NORTHERN VIRGINIA

2022 shape OF THE region CONFERENCE

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HOST
Drew Wilder
NBC4 Northern Virginia Reporter



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KEYNOTE

Regina S. James, M.D.
Chief, Division of Diversity &
Health Equity and Deputy Medical
Director, American Psychiatric
Association



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FINDING OUR WAY BACK TO MENTAL HEALTH

Shape of the Region Conference
The Community Foundation for Northern Virginia
March 15, 2022

Regina Smith James, M.D.
Deputy Medical Director
Chief, Division of Diversity and Health Equity

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In Northern Virginia over 500,000 adults are experiencing mental health issues like depression and anxiety.



Yet approximately 40% of those who want treatment don't have access

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Nearly everyone knows someone living with a mental health condition

Recent data from the Centers for Disease Control and Prevention indicate that between August 2020 and February 2021, the percentage of adults exhibiting symptoms of an anxiety or depressive disorder increased significantly, from 36.4 percent to 41.5 percent.



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OVERVIEW

Identification + diagnosis + treatment = better quality of life

Barriers to mental health services

Barriers exacerbated by COVID-19 pandemic

Consequences of unmet mental health needs

Addressing mental health needs

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Early identification, accurate diagnosis and effective treatment of mental health and substance use conditions can help individuals maintain a good quality of life.



- Improve your productivity
- Allow you to focus on daily tasks
- Give you the motivation to get things done in a timely manner
- Help individuals reach their full potential

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“BARRIERS TO MEETING MENTAL HEALTH NEEDS”

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Select
Barriers to
mental
health
services

Cost and Insurance Coverage

Access/Location & Long Waits

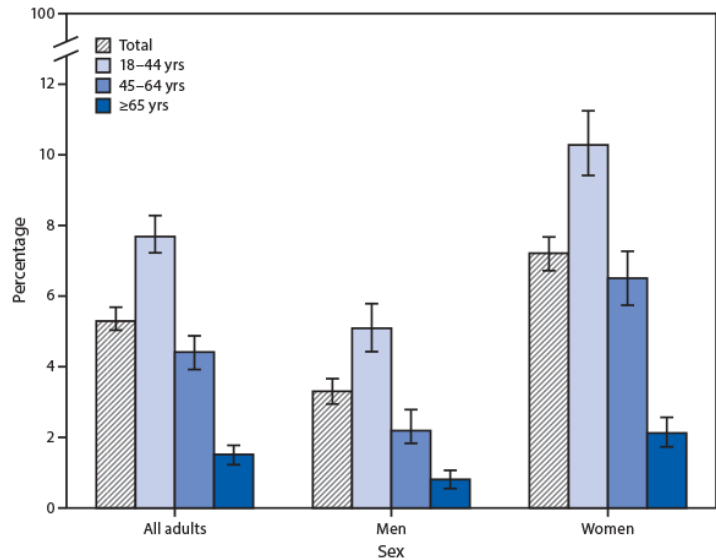
Difficulty Navigating the Process

Shortage of Behavioral Health Providers

Stigma, Shame, Emotional Hesitation

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Percentage of Adults Aged ≥18 Years Who Had an Unmet Mental Health Care Need Because of Cost in the Past 12 Months, by Age Group and Sex — National Health Interview Survey, United States 2019



QuickStats: Percentage of Adults Aged ≥18 Years Who Had an Unmet Mental Health Care Need Because of Cost in the Past 12 Months, by Age Group and Sex — National Health Interview Survey, United States 2019. MMWR Morb Mortal Wkly Rep 2020;69:1612.

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- There were more than 48 million uninsured people when the ACA passed.
- By pairing coverage expansions with access to mental health care, including allowing young people to stay on parents' plans until age 26, expanding the Medicaid program, the uninsured number dropped to 30.4 million by 2018.

- Despite the Affordable Care Act, many are still uninsured and even those with health insurance often don't have mental health services covered or have expensive co-pays or deductibles.

First 10 years of the ACA and mental health services – Access to mental health care has improved

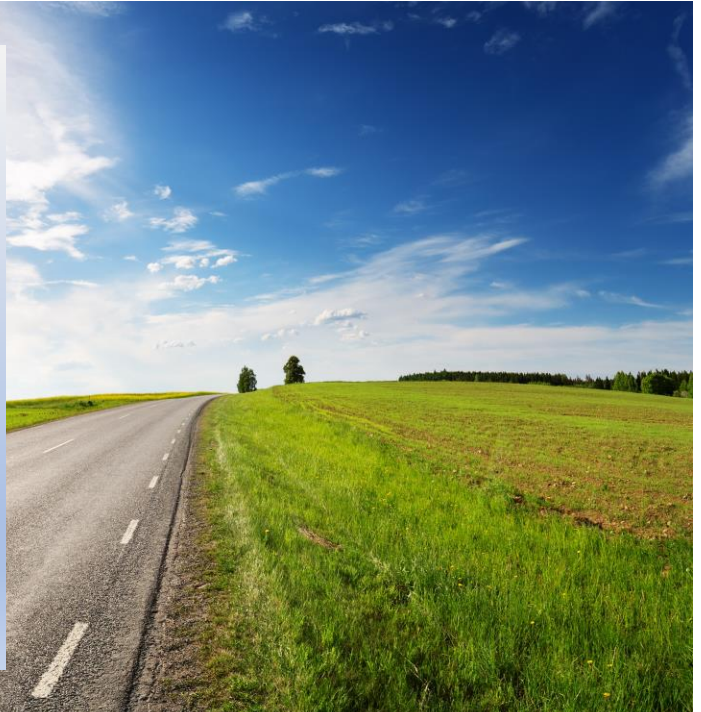


Cohen RA et al. 2019. Health Insurance Coverage: Early Release of Estimates From the National Health Interview Survey, 2018. U.S. Department of Health and Human Services. Centers for Disease Control and Prevention. National Center for Health Statistics. Released 5/2019

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ACCESS & LONG WAITS

- Nearly half of Americans, or 46%, have had to, or know someone who has had to drive more than an hour roundtrip to seek treatment.
- Long waits - 96 million Americans, or 38%, have had to wait longer than one week for mental health treatments.



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Difficulty Navigating the Process

- It can be an overwhelming process to try and reach a mental health provider.
- Where to begin
 - My primary care doctor
 - My insurance company
 - Online resources
 - Family, friends or faith leaders
- What questions should I ask?



12 radiating avenues leading to the Arc de Triomphe in Paris

22

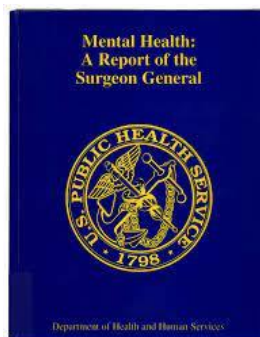
Shortage of Behavioral Health Providers

- People living in mental health professional shortage areas: 111 million, according to the U.S. Department of Health and Human Services.
- The United States is suffering from a shortage of psychiatrists and other mental health providers, particularly in rural, urban and community mental health centers that often treat the most severe mental illnesses.



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Stigma and Mental Health



“Stigma surrounding the receipt of mental health treatment is among the many barriers that discourage people from seeking treatment,” Satcher said in the report.

“Another manifestation of stigma is reflected in the public’s reluctance to pay for mental health services.”

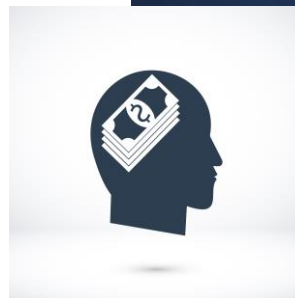
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"CONSEQUENCES OF UNMET MENTAL HEALTH NEEDS"

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Societal Cost of Untreated Mental Illness

- Lost productivity as a result of two of the most common mental disorders, anxiety and depression, costs the global economy **\$1 trillion (about \$3,100 per person in the US) annually.**
- The economic case for investment in mental health is strong:
for every \$1 invested in scaled-up treatment for depression and anxiety, there is a \$4 return in better health and productivity.



The Lancet Global Health. 2020. Mental Health Matters, Editorial. Volume 8, Issue 11 E1352, Nov 1 2020

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Individual Consequences of Untreated Mental Illness

- Broken relationships
- Poor performances at school and work
- Poor physical health
- Substance use disorders
- Overdose
- Suicide
- Lost work productivity



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+
 ○
 Marginalized &
 Disenfranchised
 Individuals
 Disproportionately
 Experience Unmet
 Mental Health Needs

- Racial/Ethnic Minoritized Communities
- LGBTQ+ Communities
- Individuals Experiencing Homelessness
- Individuals Who Are Incarcerated
- Individuals With Severe Mental Illness
- Individuals With a Drug Addiction
- Immigrant Populations

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Unmet mental health needs for youth of color



Alegria, M., Vallas, M., & Pumariega, A. J. (2010). Racial and ethnic disparities in pediatric mental health. *Child and adolescent psychiatric clinics of North America*, 19(4), 759–774.

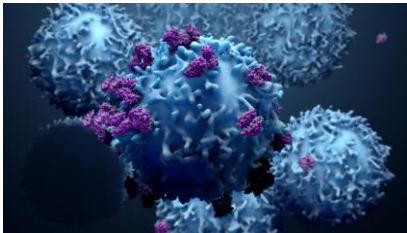
- Disparities in access to and intensity of quality mental health services exist for children of color.
- They are more likely to receive less and inferior health services as compared to white children.
- Those who have behavioral problems are more likely to be referred to the juvenile justice system than to healthcare providers, compared to non-minority youth.

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“MENTAL HEALTH NEEDS WERE ON THE RISE,
AND THEN CAME COVID-19”

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Northern Virginia and COVID 19



- Pre-covid **1 in 12 adults (8%)** in Northern Virginia had active symptoms of mental health disorders.
- Today, it is **1 in 4 (25%)**.
- The COVID-19 pandemic has not only affected people's mental health, but the consequences are likely to linger on for years.

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Young people & COVID 19 & Mental Health



- Disruptions in routines and relationships have led to increased social isolation, anxiety, and learning loss.
- An early study has found that students are about five months behind in math and four months behind in reading, compared with students prior to the pandemic.
- Emergency department visits for attempted suicide have risen 51 percent among adolescent girls.

Dorn E. et al 2021. McKinsey & Company. COVID-19 and education: The lingering effects of unfinished learning. McKinsey & Company July 27, 2021.

<https://www.hhs.gov/about/news/2021/12/07/us-surgeon-general-issues-advisory-on-youth-mental-health-crisis-further-exposed-by-covid-19-pandemic.html>

32

COVID-19 & Worldwide Disruptions of Mental Health Services



The pandemic has disrupted mental health services in 93% of countries around the world, according to a survey by the World Health Organization (WHO).

More than 40% of countries had a full or partial closure of community-based services.

In addition, three quarters of mental health services in schools and workplaces were disrupted, on top of about 60% of all therapy and counseling services.

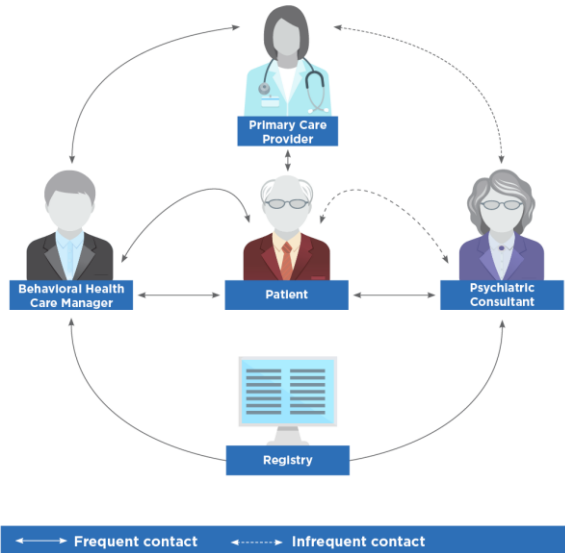
World Health Organization News Release. October 5, 2020. COVID-19 disrupting mental health services in most countries, WHO survey

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 The slide features a dark blue background with a large, faint, stylized dollar sign graphic. In the top right corner is the American Psychiatric Association logo, which includes the text "AMERICAN PSYCHIATRIC ASSOCIATION" and the tagline "Medical leadership for mind, brain and body." below a circular emblem containing a caduceus.

"ADDRESSING UNMET MENTAL HEALTH NEEDS"

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Collaborative Care Model

- Collaborative care is more cost-effective than usual care in all categories measured, including medication costs and inpatient, outpatient, and mental health specialty care, as well as for the management of mental health with comorbid physical disorders.
- This model improves access, outcomes and patient satisfaction.

Ee, C., Lake, J., Firth, J. *et al.* An integrative collaborative care model for people with mental illness and physical comorbidities. *Int J Ment Health Syst* 14, 83 (2020).

35

Presidents FY 23 budget proposes to double funding for primary & behavioral health integration programs

The Department of Health and Human Services will test payment models that support the delivery of whole-person care through behavioral health integration and authorize Medicaid reimbursement of inter-professional consultations so that primary care providers can consult with a specialist.



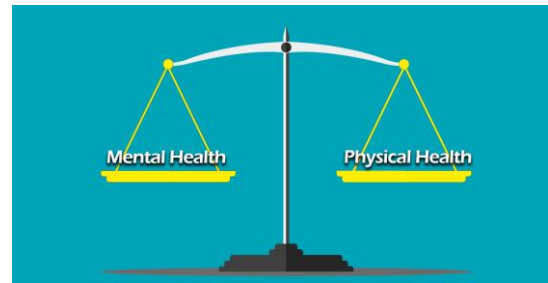
Retrieved on 3/7/2022 from <https://www.whitehouse.gov/briefing-room/statements-releases/2022/03/01/fact-sheet-president-biden-to-announce-strategy-to-address-our-national-mental-health-crisis-as-part-of-unity-agenda-in-his-first-state-of-the-union/>

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Mental Health Parity and Addiction Equity Act

- Recent 2022 MHPAEA Report to Congress shows that companies continue to violate this requirement.
- The agencies continue to place more rigorous enforcement, greater stakeholder engagement, and increased collaboration to identify ways to support the Administration's effort to increase access to MH/SUD treatment.

Mental health parity is a straightforward concept insurance coverage for mental health conditions, including substance abuse disorder (SUD) treatment, should be equal to coverage for any other medical conditions.



The Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA)

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President's FY 23 Budget proposes to improve rate parity

The President's budget will propose that all health plans cover behavioral health services with an adequate network of providers, including three behavioral health visits each year without cost-sharing.



Retrieved on 3/7/2022 from <https://www.whitehouse.gov/briefing-room/statements-releases/2022/03/01/fact-sheet-president-biden-to-announce-strategy-to-address-our-national-mental-health-crisis-as-part-of-unity-agenda-in-his-first-state-of-the-union/>

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Addressing Social Needs Can Improve Mental Health Outcomes



Social determinants of health where we are born, live, learn, work, play, worship.

Research supports that 90% of health outcomes are influenced by social and behavioral factors.

Addressing social need such as

- Food insecurity
- Transportation
- Housing

Can help improve mental health outcomes.

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Accountable Health Communities

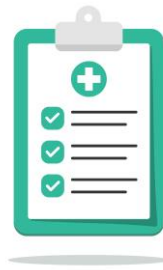
- The Accountable Health Communities Innovation model aims to address a critical gap between clinical care and the health-related social needs of Medicare and Medicaid beneficiaries.
- This includes housing insecurity, hunger and interpersonal violence. Community-based organizations are eligible and encouraged to apply.



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Health plans can consider:

- ✓ Addressing social determinants of health in health insurance benefit designs.
- ✓ Establishing incentives to improve the acquisition of social determinants of health data.
- ✓ Support research to evaluate the best approach to integrating and financing non-medical services as part of health insurance benefit design.



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Expand & Diversify the Behavioral Health Workforce

- Expand the behavioral health workforce.
- Diversify the behavioral health workforce.
- Studies support improved health outcomes when there is racial/ethnic concordance between patient and provider.



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President's FY23 budget proposes to expand training for behavioral health workforce

The proposed budget will invest \$700 million in programs – like the National Health Service Corps, Behavioral Health Workforce Education and Training Program, and the Minority Fellowship Program – to encourage healthcare providers to practice in rural and other underserved communities.



Retrieved on 3/7/2022 from <https://www.whitehouse.gov/briefing-room/statements-releases/2022/03/01/fact-sheet-president-biden-to-announce-strategy-to-address-our-national-mental-health-crisis-as-part-of-unity-agenda-in-his-first-state-of-the-union/>

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988 Dedicated call-in line

- The 988 system will be the dedicated call-in line for dispatching trained staff to respond to the mental health and substance use emergencies now met primarily by law enforcement.
- A new federal law mandates that, as of July 16, 2022, every U.S. state must have in place a call system to make it easier for people to seek immediate and appropriate for mental health or substance use crises. The National Suicide Hotline Designation Act of 2020 adds a complement to 911.

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Enhancement of mental health crisis response through the American Rescue Plan

Through the American Rescue Plan, the Administration has provided \$180 million to support local capacity to answer crisis calls and establish more community-based mobile crisis response and crisis stabilizing facilities to minimize unnecessary emergency department visits.



Retrieved on 3/7/2022 from <https://www.whitehouse.gov/briefing-room/statements-releases/2022/03/01/fact-sheet-president-biden-to-announce-strategy-to-address-our-national-mental-health-crisis-as-part-of-unity-agenda-in-his-first-state-of-the-union/>

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TELEMEDICINE

• PROVIDER FACING CONSIDERATIONS

- ✓ Investment in telemedicine platforms versus utilizing more affordable technologies like Facetime and Zoom.
- ✓ Resource limited health organizations may not have sufficient bandwidth to achieve reliable internet connection, and sound and video quality.
- ✓ Workflow/training – on telemedicine technologies, can require additional time and resources.

• PATIENT FACING CONSIDERATIONS

- ✓ Access to telemedicine may be particularly challenging for low-income patients and patients in rural areas, who may not have reliable access to internet through smartphones or computers.
- ✓ While use of telehealth has opened the door for patients to maintain access to care during this public health crisis, ensuring quality of care of telehealth visits is still important.

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We need to recognize, embrace
and educate everyone that
**Mental health and physical
health are inseparable**
Because if we don't the result is
continued stigma, discrimination
in health coverage for mental
health and the list goes on.

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*Everyone who
needs help
should be able
to access care
when and where
they seek it.*



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THANK YOU

Regina Smith James, M.D.
Deputy Medical Director
Chief, Division of Diversity and Health Equity
American Psychiatric Association
rjames@psych.org

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DATA PRESENTATION: *Finding our Way Back to Mental Health*

Elizabeth Hughes
Senior Director, Insight RegionTM
Community Foundation for
Northern Virginia

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shape of the region

2022



finding our way back to MENTAL HEALTH

The need for accessible, affordable treatment in the midst of collective trauma

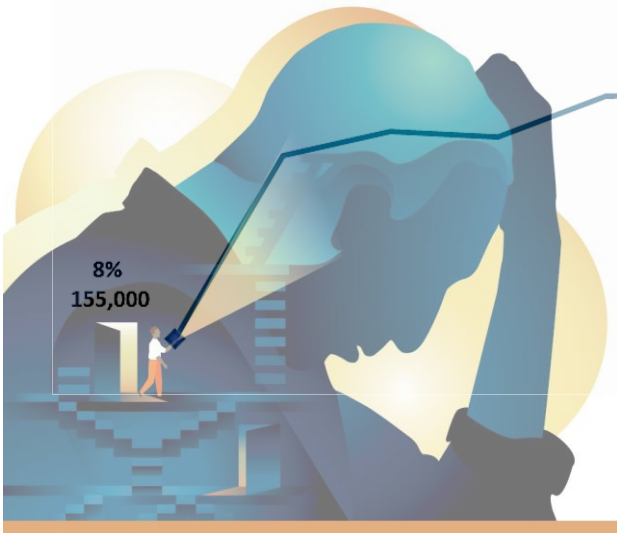
A Shape of the Region™ Special Report

cfnova.org/mental-health-report

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shape of need

IN NORTHERN VIRGINIA



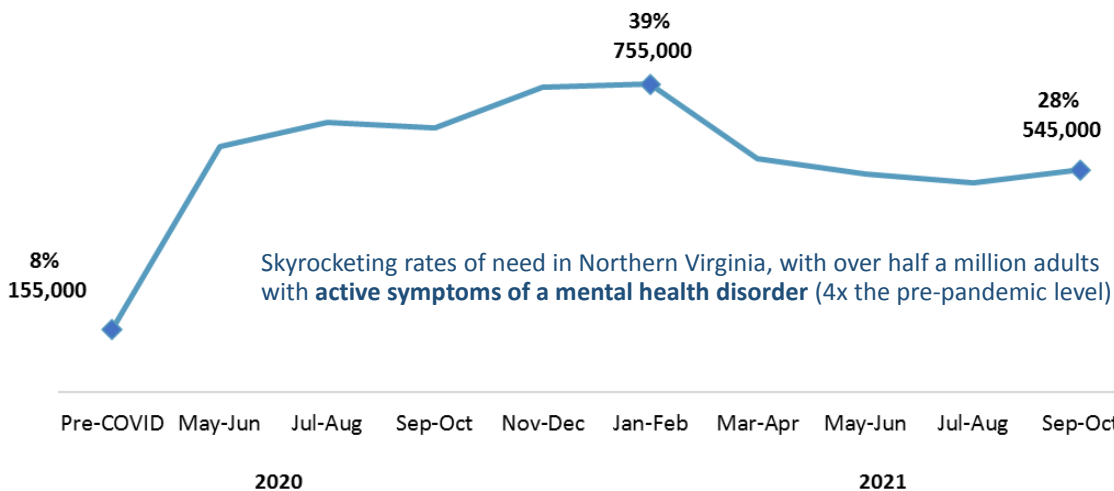
We have seen the numbers.

Read our full report at cfnova.org/mental-health-report

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shape of need

IN NORTHERN VIRGINIA



Skyrocketing rates of need in Northern Virginia, with over half a million adults with active symptoms of a mental health disorder (4x the pre-pandemic level)

Read our full report at cfnova.org/mental-health-report

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shape of need

IN NORTHERN VIRGINIA

What does this mean?

- TENSION** nervous, anxious, "on edge"
- + **WORRY** excessive, uncontrollable
- = **ANXIETY**

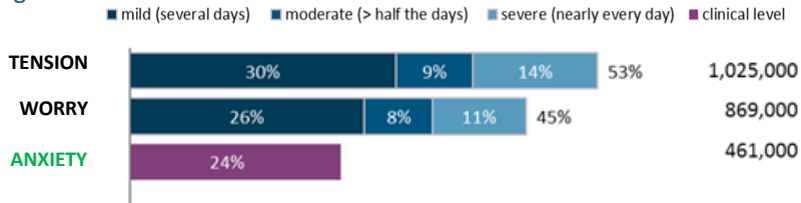
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IN NORTHERN VIRGINIA

In Northern Virginia...



Read our full report at cfnova.org/mental-health-report

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What does this mean?

- ANHEDONIA** loss of interest or pleasure
- + **SADNESS** feeling down, depressed, hopeless
- = **DEPRESSION**

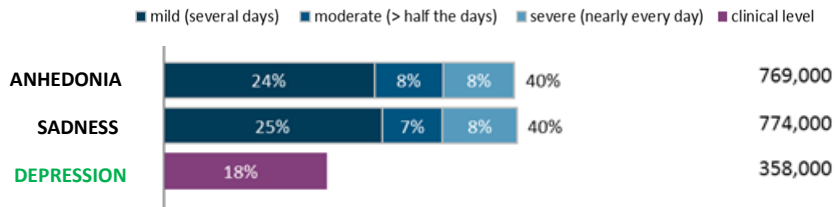
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IN NORTHERN VIRGINIA

In Northern Virginia...



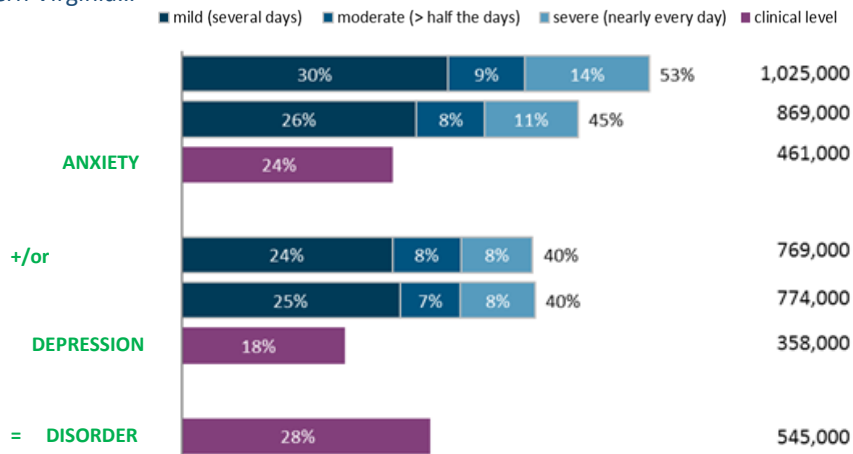
Read our full report at cfnova.org/mental-health-report

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IN NORTHERN VIRGINIA

In Northern Virginia...



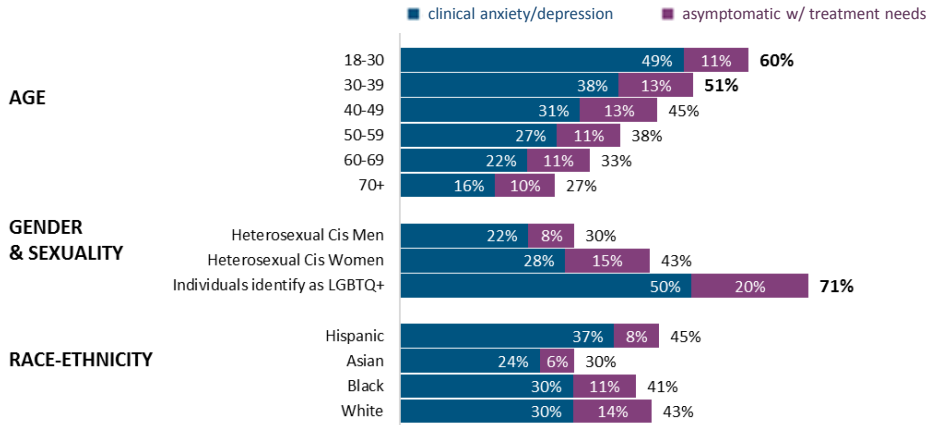
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IN NORTHERN VIRGINIA

Certain **demographic** groups in our region have especially high rates of anxiety/depression and/or service needs



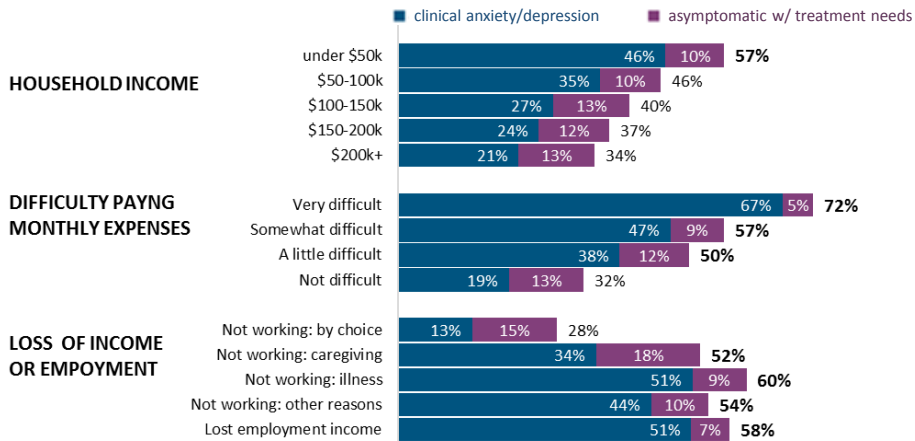
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IN NORTHERN VIRGINIA

Certain **economic** factors are also linked to high rates of anxiety/depression and/or service needs



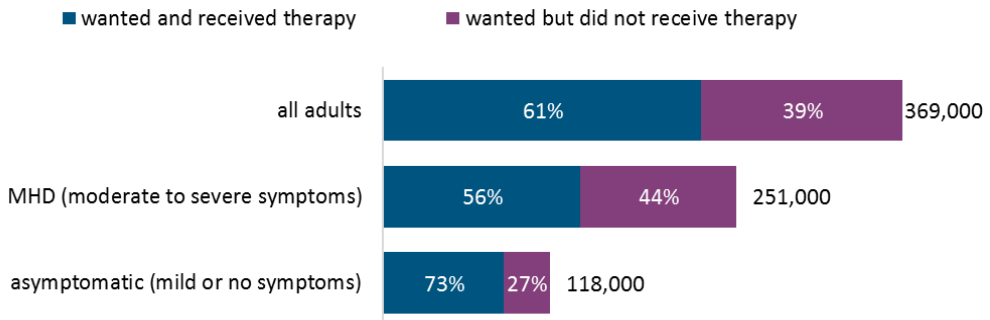
Read our full report at cfnova.org/mental-health-report

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shape of need

IN NORTHERN VIRGINIA

370,000 adults in Northern Virginia want therapy...
and 40% have not been able to get it



Read our full report at cfnova.org/mental-health-report

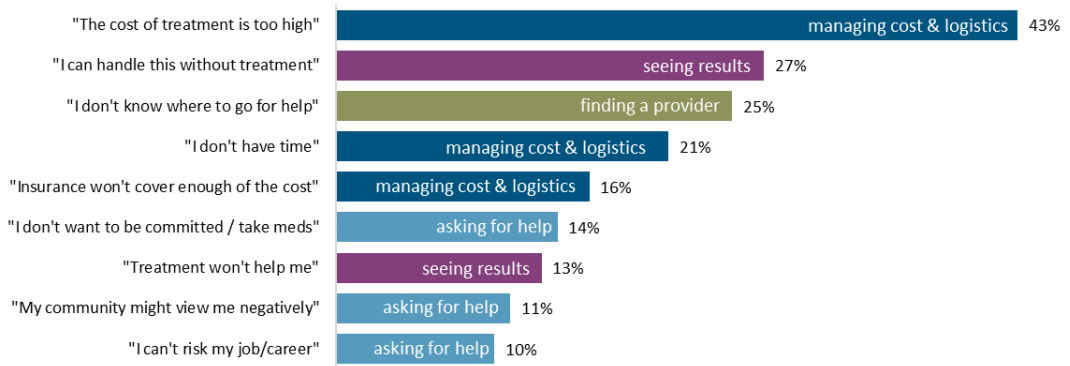
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shape of need

IN NORTHERN VIRGINIA

Why? Our report examines the relevance of four national barriers to receiving treatment in Northern Virginia...

(1) asking for help ... (2) finding a provider... (3) managing cost and logistics... (4) seeing results



Read our full report at cfnova.org/mental-health-report

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shape of need

IN NORTHERN VIRGINIA



How do we respond...

and help Northern Virginia find its way back to mental health?

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Sandy L. Chung, MD, FAAP, FACHE
AAP President 2022,
CEO, Trusted Doctors



Darcy E. Gruttadaro, JD
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Association Foundation



Germaine Buck Louis, PhD, MS
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Mason University



Deborah D. Oswalt
Executive Director, Virginia
Health Care Foundation



Navid Rashid, MD, FAPA
Medical Director, Northern
Virginia Mental Health
Institute



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PANEL #2: EQUITABLE SOLUTIONS

THE community foundation FOR NORTHERN VIRGINIA



Chaplain Tahara Akmal
 Clinical Pastoral Education
 Manager, MedStar
 Washington Hospital Center



Dr. Alfiee M. Breland-Noble
 Founder, The AAKOMA
 Project, Inc.



Claudia Campos Galván
 Chief Programs Officer
 Nueva Vida, Inc.



Keith D. Renshaw, PhD
 Department Chair and
 Professor of Psychology,
 College of Humanities and
 Social Sciences, George
 Mason University



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THE community foundation FOR NORTHERN VIRGINIA

THANK YOU!

Mental Health Campaign for Northern Virginia

Campaign Progress: \$54,130 / \$60,000



Help build a permanent community endowment to forever benefit the mental health needs and challenges of the region!

Your gift will be matched 1:1.

www.cfnova.org/donate/mental-health-fund



DOWNLOAD THE REPORT:



www.cfnova.org/mental-health-report



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