

NNED Virtual Roundtable: Partnering to Strengthen the Behavioral Health Infrastructure and Capacity in Communities of Color

We will be starting soon, thank you for joining us!



Attendees are muted, so please share comments and ask questions in the **Q&A box**



Closed captioning is available through Zoom using the **CC button**



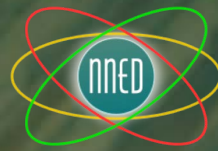
Resources and the recording will be available following the roundtable at share.nned.net



Provide us with feedback in the post-roundtable survey

A man and a woman are seated at a wooden table, facing each other in conversation. The man, on the left, is wearing a grey t-shirt and has a shaved head. The woman, on the right, is wearing a blue sweater and has dark hair. A laptop is open on the table between them. The background is a wall with a herringbone wood pattern. The entire image has a blue tint.

The views, opinions, and content expressed in this presentation do not necessarily reflect the views, opinions, or policies of the Office of Behavioral Health Equity (OBHE), the Substance Abuse and Mental Health Services Administration (SAMHSA), or the U.S. Department of Health and Human Services (HHS).



National Network to Eliminate
Disparities in Behavioral Health

**Community-Based Organizations Build Pathways to
Behavioral Health Equity for Communities of Color**

PART 2

**Partnering to Strengthen the Behavioral Health
Infrastructure and Capacity in Communities of Color**

WELCOME & INTRODUCTIONS – ABOUT THE NNED



National Network to Eliminate
Disparities in Behavioral Health

A network of nearly **5,000 individuals**, including more than **1,200 community-based organizations** striving for behavioral health equity for for all individuals, families, and communities.



Annie Guo VanDan

Change Specialist, Change Matrix
Virtual Roundtable Coordinator, NNED
National Facilitation Center

WELCOME & INTRODUCTIONS - LOGISTICS



Share comments
and ask questions in
the **Q&A box**



Closed captioning
is available through
Zoom using the
**CC button / Full
Live Transcript**
option



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Provide us with
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post-roundtable
survey



National Network to Eliminate
Disparities in Behavioral Health

Community-Based Organizations Build Pathways to Behavioral Health Equity for Communities of Color

PART 2

Partnering to Strengthen the Behavioral Health Infrastructure and Capacity in Communities of Color

Introductions
of Panelists

Setting the
Stage

Panelist
Discussion

Resources

Final
Thoughts



National Network to Eliminate
Disparities in Behavioral Health

OBJECTIVES FOR THE DAY

- Understand how both funders and CBOs are responding to disparities in funding and behavioral health services within the current context of COVID-19.
- Learn about unique funding partnerships between government agencies/foundations with CBOs serving diverse racial/ethnic communities and underserved populations.
- Identify fiscal challenges and solutions related to behavioral health services faced by CBOs, including billing and reimbursements.



SETTING THE STAGE



Dr. Mary Roary

Director

Office of Behavioral Health Equity

Substance Abuse and Mental Health Services Administration



National Network to Eliminate
Disparities in Behavioral Health

FACILITATING TODAY'S DISCUSSION



Rachele Espiritu, PhD

Founding Partner

Change Matrix

Director

NNED National Facilitation Center



Lucas Peterson

Government Markets County/Community Liaison

Blue Cross and Blue Shield of Minnesota



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Disparities in Behavioral Health

SETTING THE STAGE



Lucas Peterson

**Government Markets County/Community Liaison
Blue Cross and Blue Shield of Minnesota**



National Network to Eliminate
Disparities in Behavioral Health

BlueCross BlueShield of Minnesota



Blue Cross® and Blue Shield® of Minnesota and Blue Plus® are nonprofit independent licensees of the Blue Cross and Blue Shield Association

Mission

We're on a mission to inspire change, transform care and improve health for the people we serve – you.

- BlueCross BlueShield of MN is a non-profit organization founded in 1933 in St. Paul, MN
- We are members of the Blue Cross Association
- Our 2.8 million members can be found in every Minnesota county, all 50 states and on four continents.

BlueCross BlueShield of Minnesota



Blue Cross® and Blue Shield® of Minnesota and Blue Plus® are nonprofit independent licensees of the Blue Cross and Blue Shield Association

- We have more members, the largest network of doctors, and more products and services than any other health plan in Minnesota.
- About one in three Minnesotans has a health plan with us.
- MN population is approximately 5.6 million
- Approximately 20% of MN residents identify as people of color
- Roughly half of MN residents on MA identify as people of color
- Approximately 1.1 million on Medicaid (MA)
- BCBS of MN serves over 400,000 Medicaid members

ROUNDTABLE PANELISTS



Coretha Claiborn

Executive Director
ALAMO Addiction Recovery Center



**Jennifer Numkena
Downs, LCSW**

**Nashville Area Behavioral Health
Consultant**
Indian Health Service



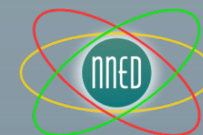
Victor Loo

Executive Director
Seattle Counseling Service



Valerie L. Liggins

Program Officer
The Cameron Foundation



National Network to Eliminate
Disparities in Behavioral Health

ALAMO Addition Recovery Center

providing hope and healing support
for adults struggling with addiction

Serving:

- Under-served Tri-Cities region of Virginia
- Referrals from Riverside Regional Jail, John Randolph Hospital, Southside Regional Hospital, Petersburg Probation & Parole, and VA Department of Corrections
- Walk-in requests from individuals seeking a safe, supportive environment to help fight their addiction

Holistic approach for long term sobriety,
individual self-sufficiency, and improved health.



The Cameron Foundation Service Area Health Needs Assessment



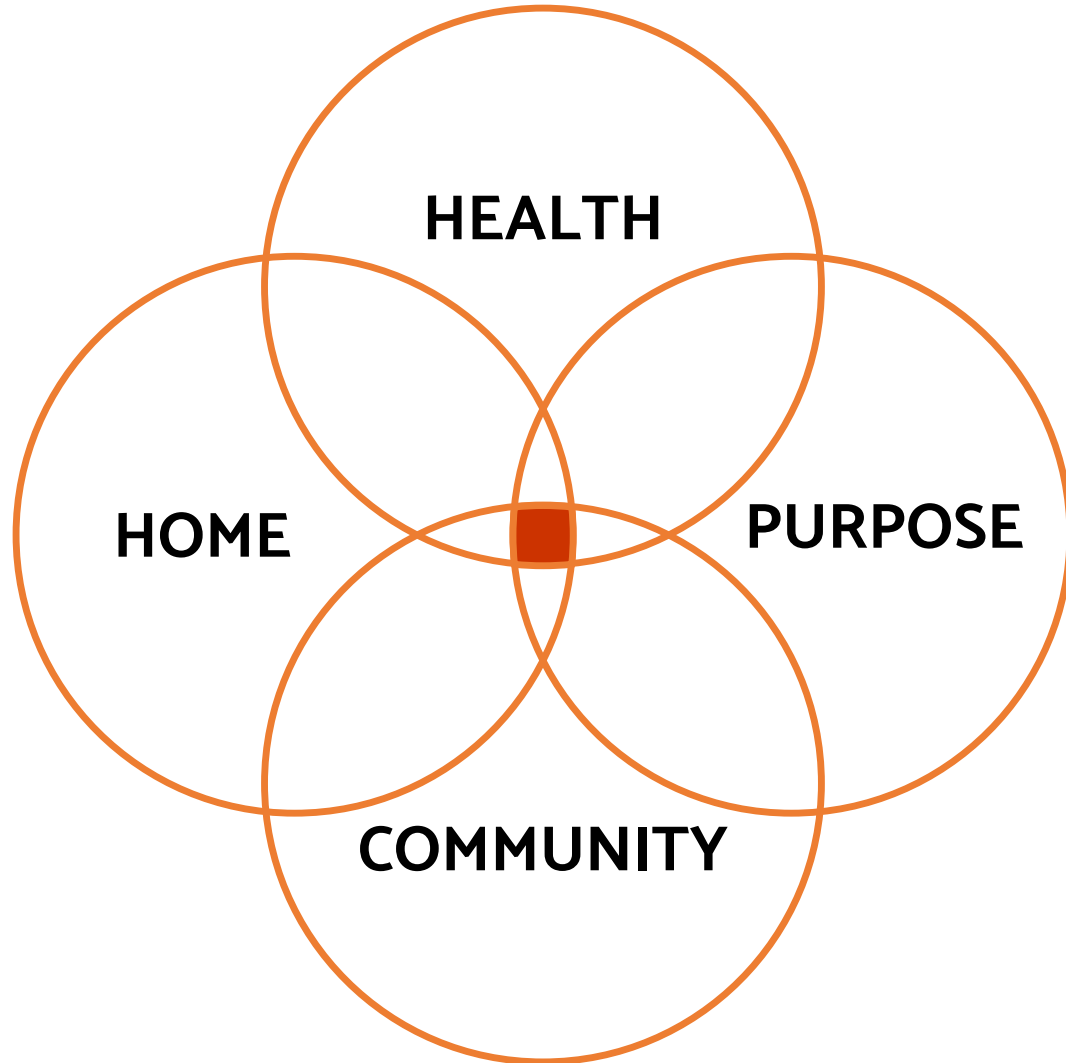
December 2018

Cameron Foundation Health Needs Assessment report (2018)

- Petersburg's rankings for health factors were **worst in Virginia for six out of eight years.**
- Health outcomes rankings for Hopewell, Petersburg consistent with very low health factor rankings.
- **16% of adults** in Prince George, **20% of adults** in Dinwiddie report **drinking excessively.**

The Recovery Village study (2020)

COVID-19 increased use, misuse, and abuse of substances; notably due to stress, boredom, coping with mental health symptoms



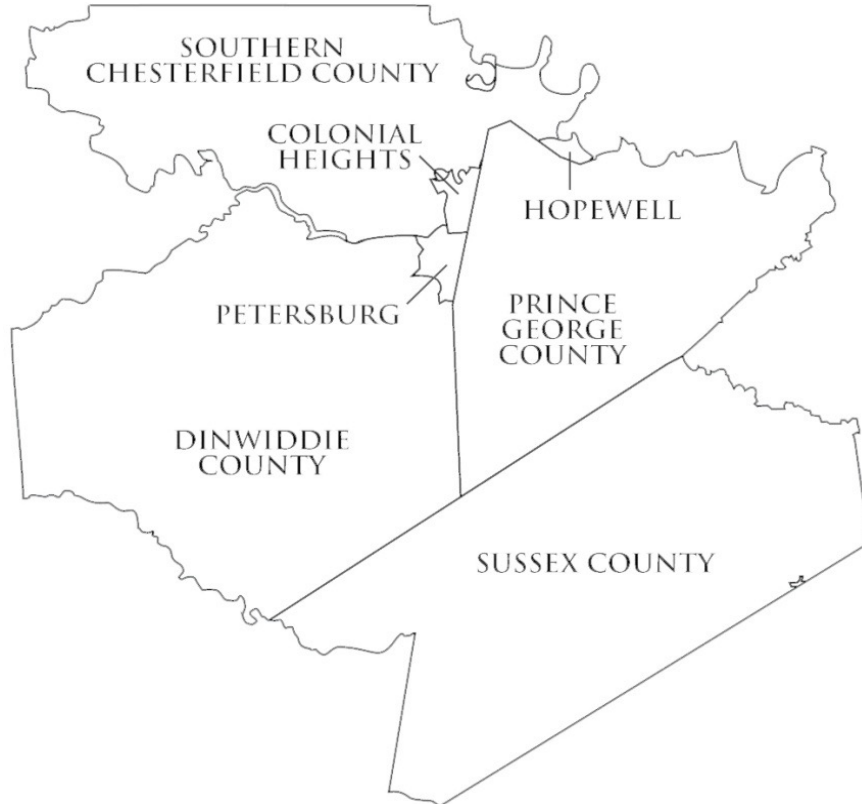
Substance Abuse and Mental Health
Services Administration's

Four Dimensions that Support Recovery

The ALAMO Addiction Recovery
Center strives to provide support
in all these areas.

The Cameron Foundation

Estimated Responsive Grantmaking (FY 2020) = approx. \$2,089,000



We serve:

The cities of Petersburg, Colonial Heights and Hopewell, the counties of Dinwiddie, Prince George and Sussex, and the portion of the county of Chesterfield south of Route 10.

County Health Rankings 2021

City/County	Health Ranking
Chesterfield	22
Colonial Heights	96
Dinwiddie	82
Hopewell	129
Petersburg	133
Prince George	27
Sussex	117

County Health
Rankings & Roadmaps

Building a Culture of Health, County by County

A Robert Wood Johnson Foundation program



Indian Health Service (IHS)

- Provides comprehensive health service to approximately 2.2 million American Indians/Alaska Natives
- Service 567 federally recognized tribes, within 35 U.S. states, in 12 IHS Areas
- 26 hospitals, 59 health centers, and 32 health stations
- Nearly 40 federal mental health programs
- 500+ Behavioral Health Providers

Mission: to raise the physical, mental, social, and spiritual health of American Indians and Alaska Natives to the highest level

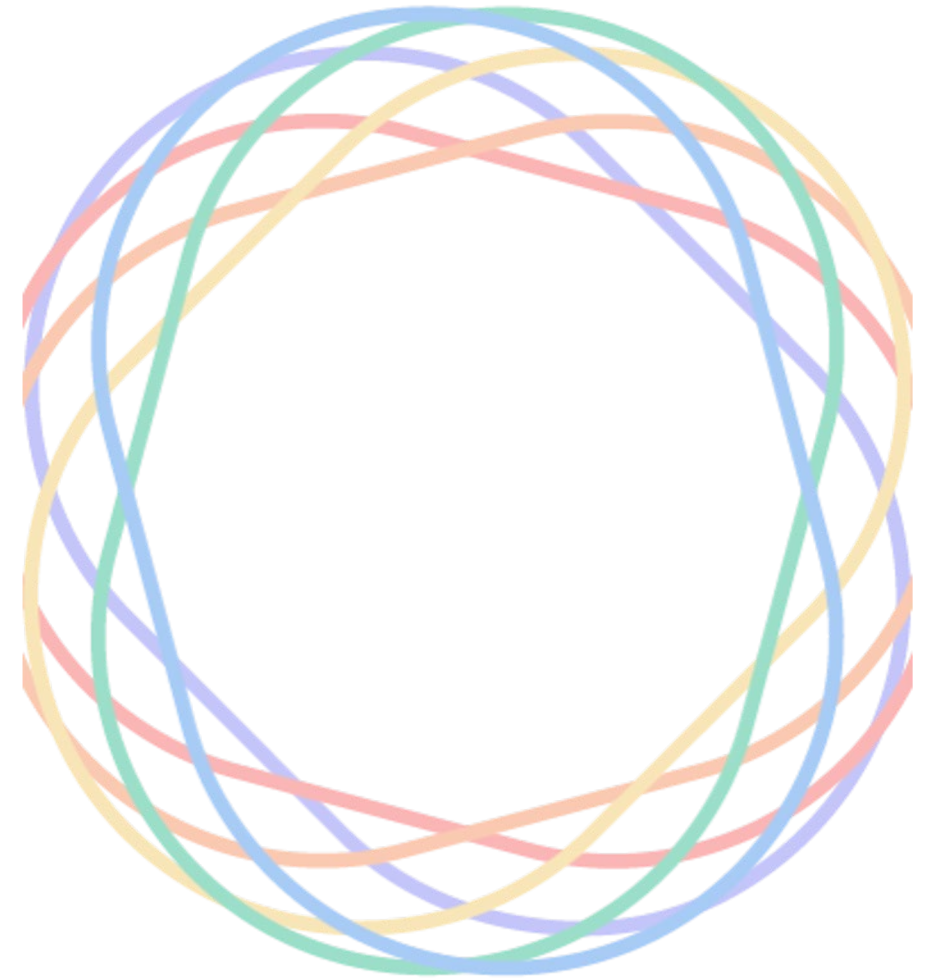


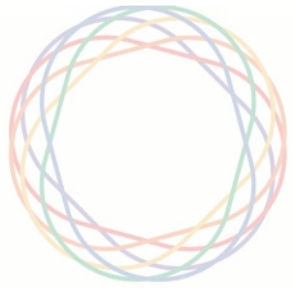
IHS Nashville Area

- Serves 52,000 Native Americans from 36 Tribes and Nations across 14 states and fields inquiries from an additional 14 states
- 5 Federal Service Units, 3 Urban Sites
- Culturally appropriate service is a primary focus
- Provider Challenges: Provider isolation, lack of integration, lack of staff or funding, lack of policies/procedures, difficulty transitioning to telehealth
- Community Member Challenges: Substance use, treatment stigma, patient isolation, grief and inability to engage in traditional community forms of grieving

Seattle Counseling Service (SCS)

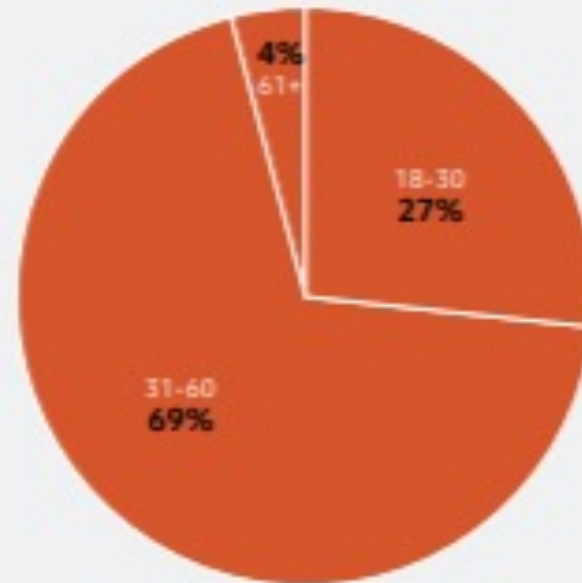
- Since 1969, SCS sought ways to provide a continuum of care for LGBTQIA clients.
- We are now so much more than a counseling center. Our services have expanded to include substance use disorder services; support groups; harm reduction programs; HIV prevention programs; peer-led outreach; and immigrant, refugee, and undocumented outreach.





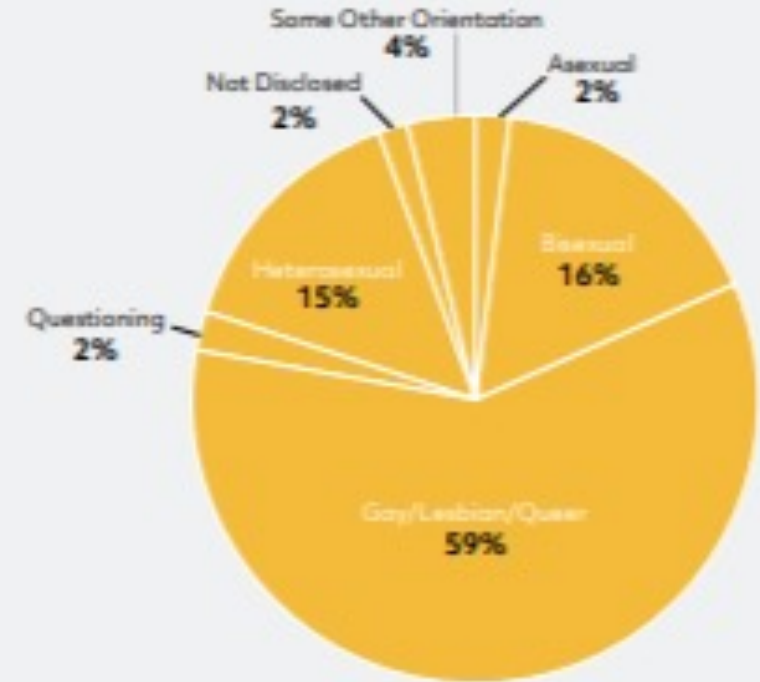
SEATTLE
COUNSELING
SERVICE

AGE

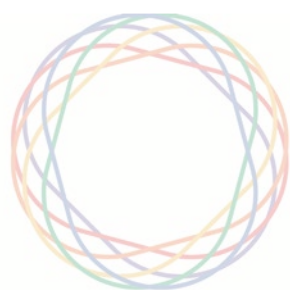


- (27%) 18-30
- (69%) 31-60
- (4%) 61+

ORIENTATION

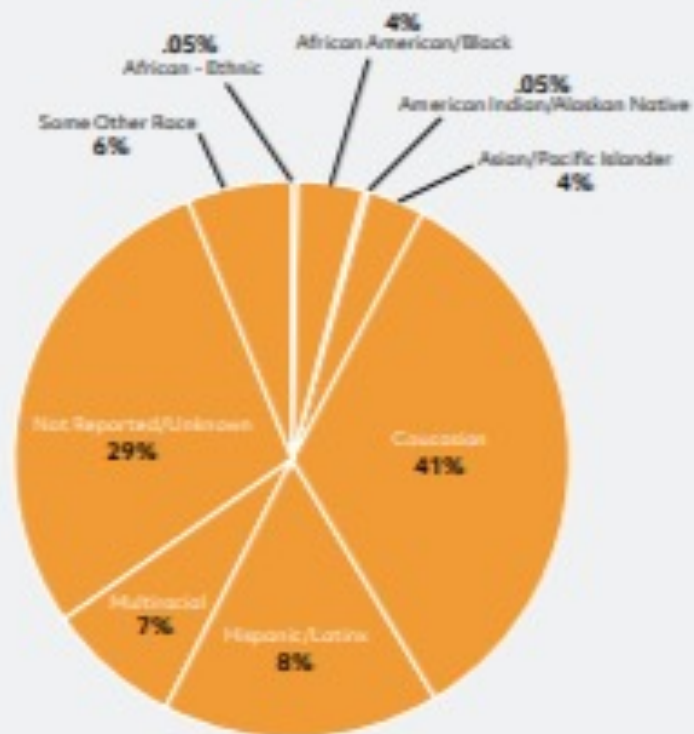


- (2%) Asexual
- (16%) Bisexual
- (59%) Gay/Lesbian/Queer
- (15%) Heterosexual
- (2%) Not Disclosed
- (2%) Questioning
- (4%) Other Orientation



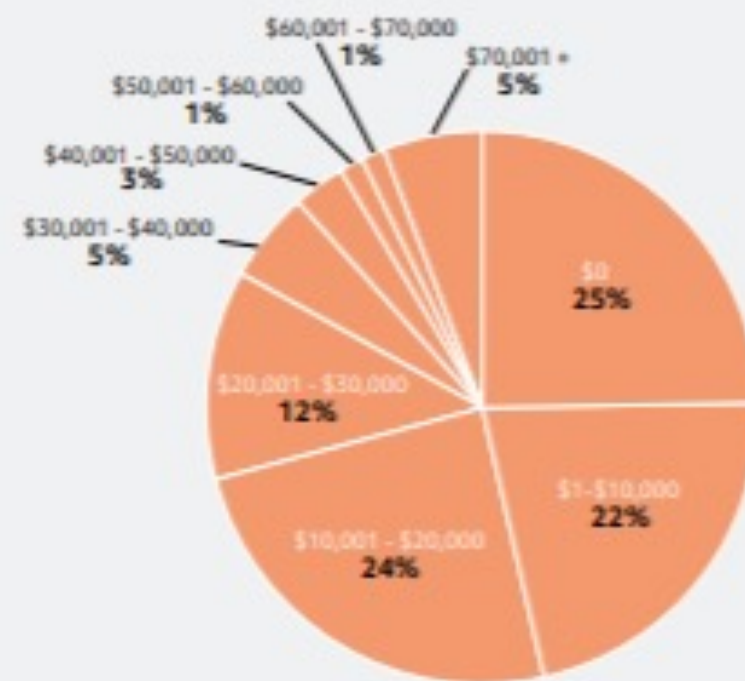
SEATTLE
COUNSELING
SERVICE

RACE

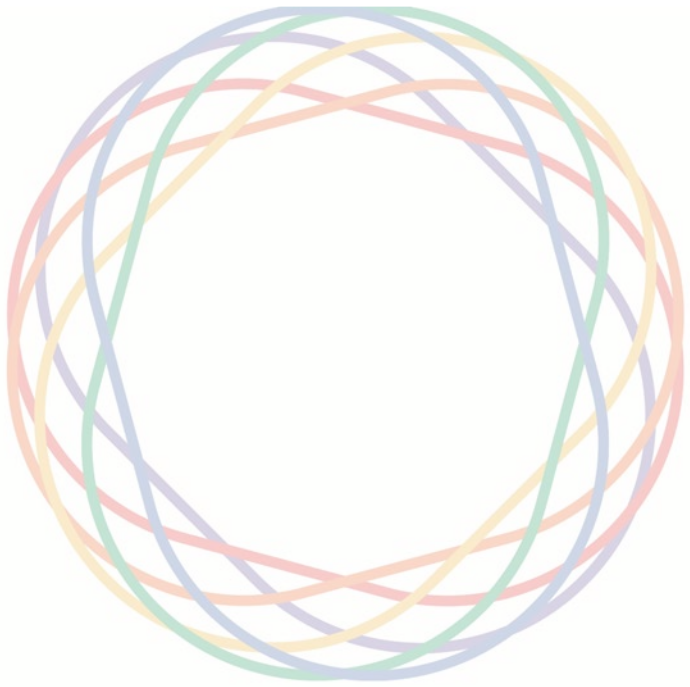


- (.05%) African - Ethnic
- (4%) African American/Black
- (.05%) American Indian/Alaskan Native
- (4%) Asian/Pacific Islander
- (8%) Latinx
- (41%) White
- (7%) Multiracial
- (29%) Not Reported/Unknown
- (6%) Other Race

INCOME



- (25%) \$0
- (22%) \$1 - \$10,000
- (24%) \$10,001 - \$20,000
- (12%) \$20,001 - \$30,000
- (5%) \$30,001 - \$40,000
- (3%) \$40,001 - \$50,000
- (1%) \$50,001 - \$60,000
- (1%) \$60,001 - \$70,000
- (5%) \$70,001+



SEATTLE COUNSELING SERVICE



Victor Loo | He/Him
Executive Director
Seattle Counseling Service

T: 206-323-1768 x 154
E: victorl@seattlecounseling.org
www.seattlecounseling.org



PANELIST DISCUSSION – QUESTION 1

What type of funding and resources do organizations working in and with communities of color need to better support behavioral health?



Coretha Claiborn



Jennifer Numkena
Downs, LCSW



Valerie L. Liggins



Victor Loo



Facilitated by

Rachele Espiritu



National Network to Eliminate
Disparities in Behavioral Health

What are some strategies for building CBO-funder partnerships in behavioral health?



Coretha Claiborn



**Jennifer Numkena
Downs, LCSW**



Valerie L. Liggins



Victor Loo



Facilitated by

Lucas Peterson



PANELIST DISCUSSION – QUESTION 3

How have funding practices shifted to more efficiently get funds out to communities for behavioral health services?



Coretha Claiborn



Jennifer Numkena
Downs, LCSW



Valerie L. Liggins



Victor Loo



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Lucas Peterson



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PANELIST DISCUSSION – QUESTION 4

How can CBOs set up reimbursements and why is this method of funding important?



Coretha Claiborn



**Jennifer Numkena
Downs, LCSW**



Valerie L. Liggins



Victor Loo

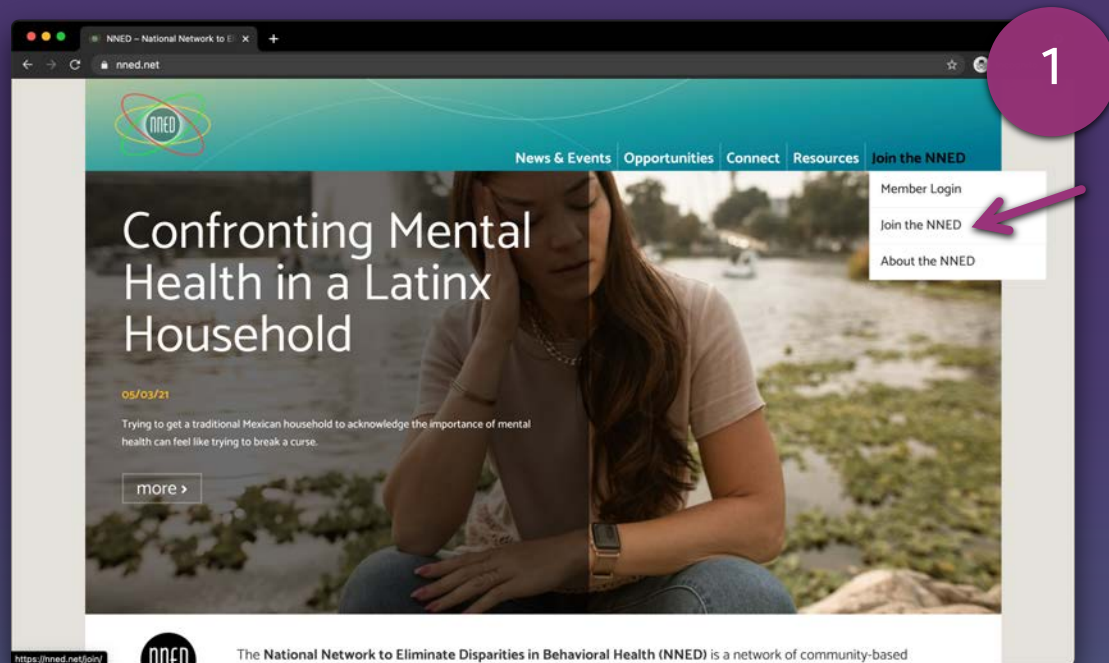


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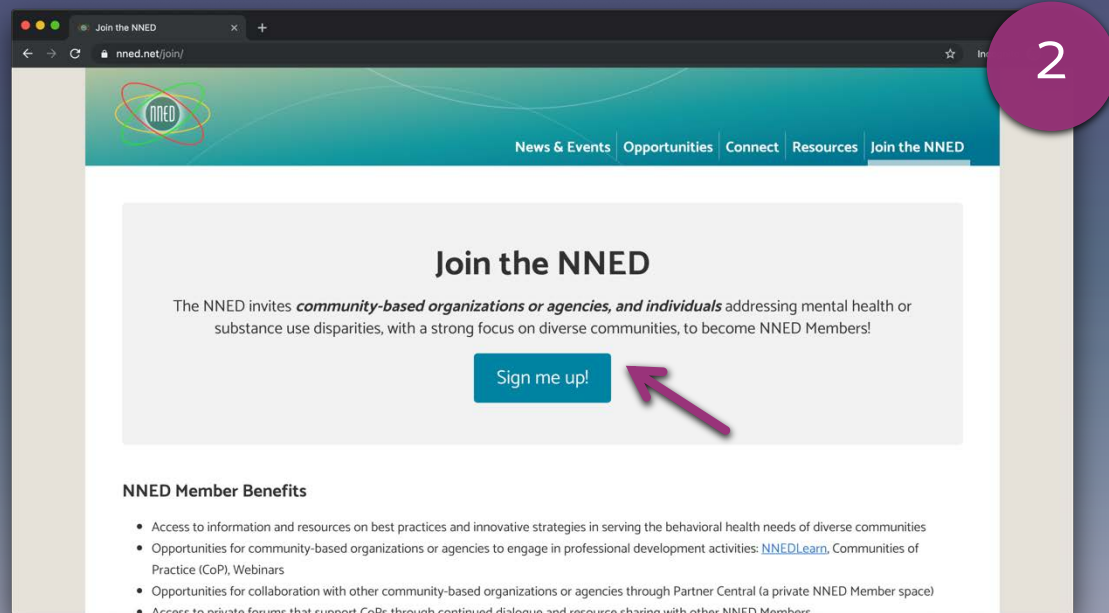


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RESOURCES – BECOME A MEMBER

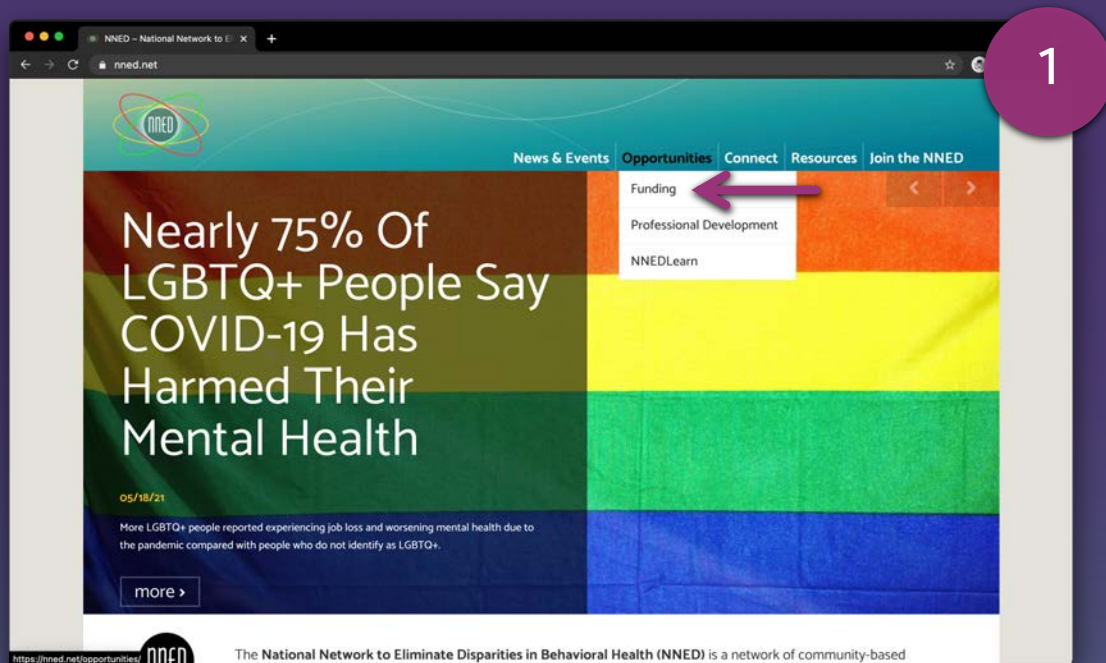
Join the Network!
<https://nned.net/join>



Shared by
Alina Taniuchi



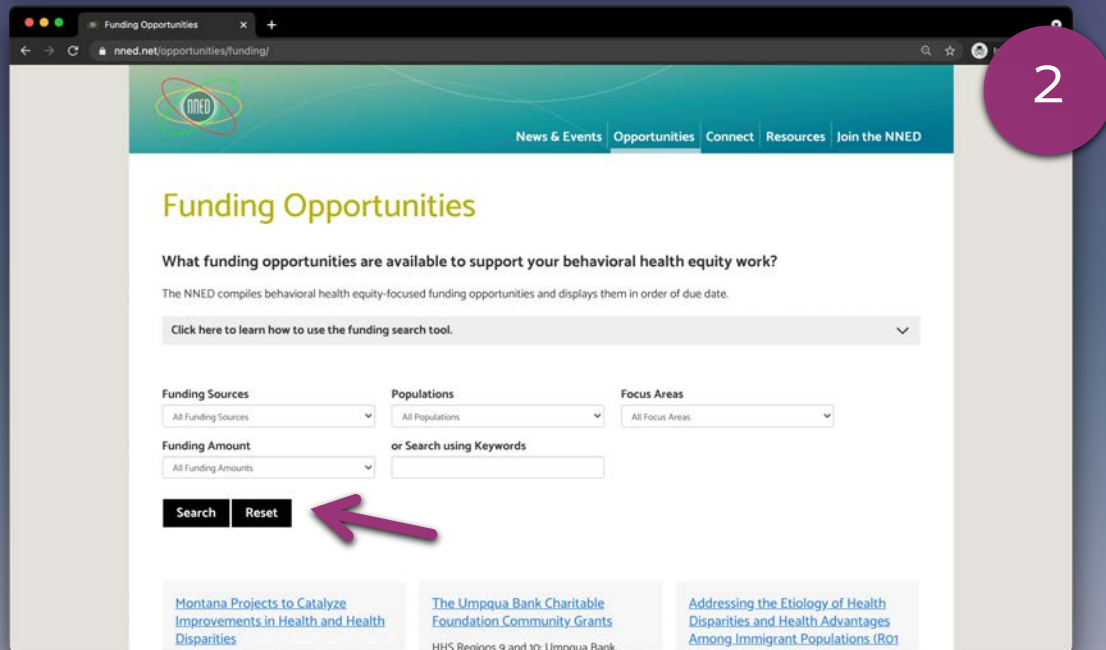
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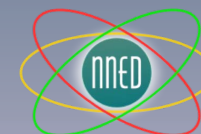
RESOURCES - FUNDING OPPORTUNITIES

Find Behavioral Health Funding Opportunities

<https://nned.net/funding>



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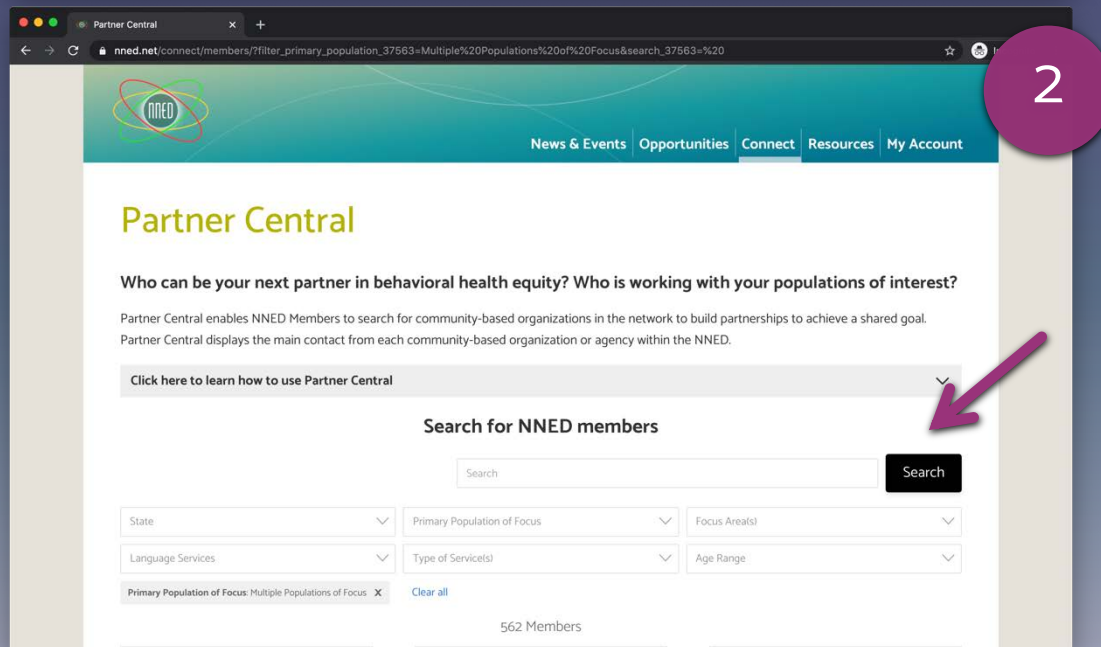
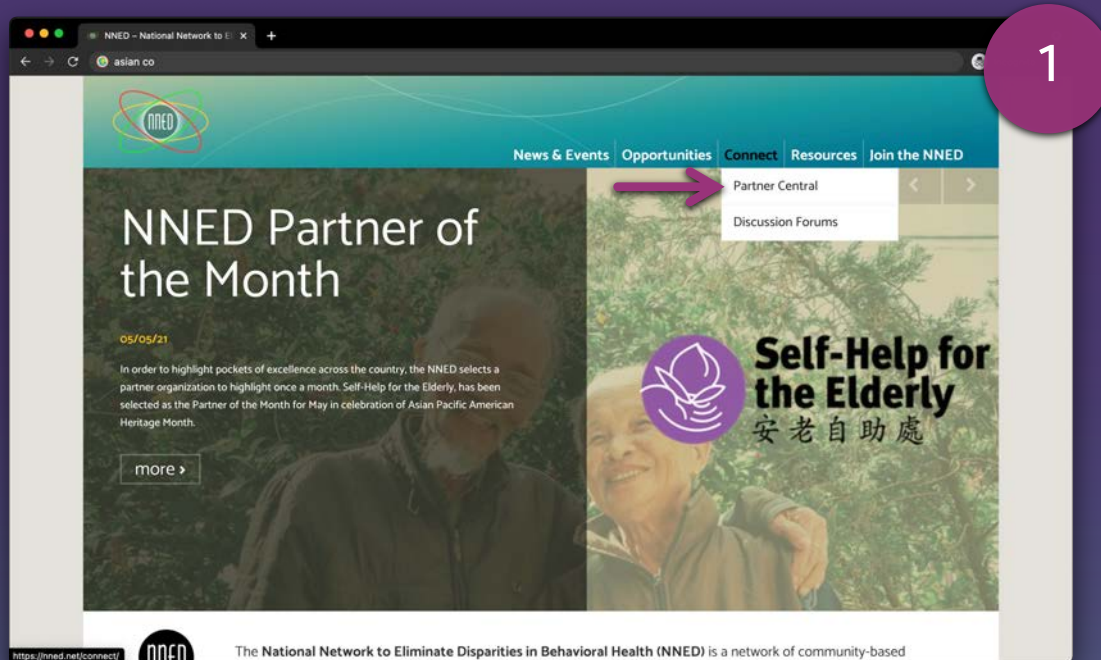


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Connect with Community-based Organizations in Partner Central*

<https://nned.net/members>

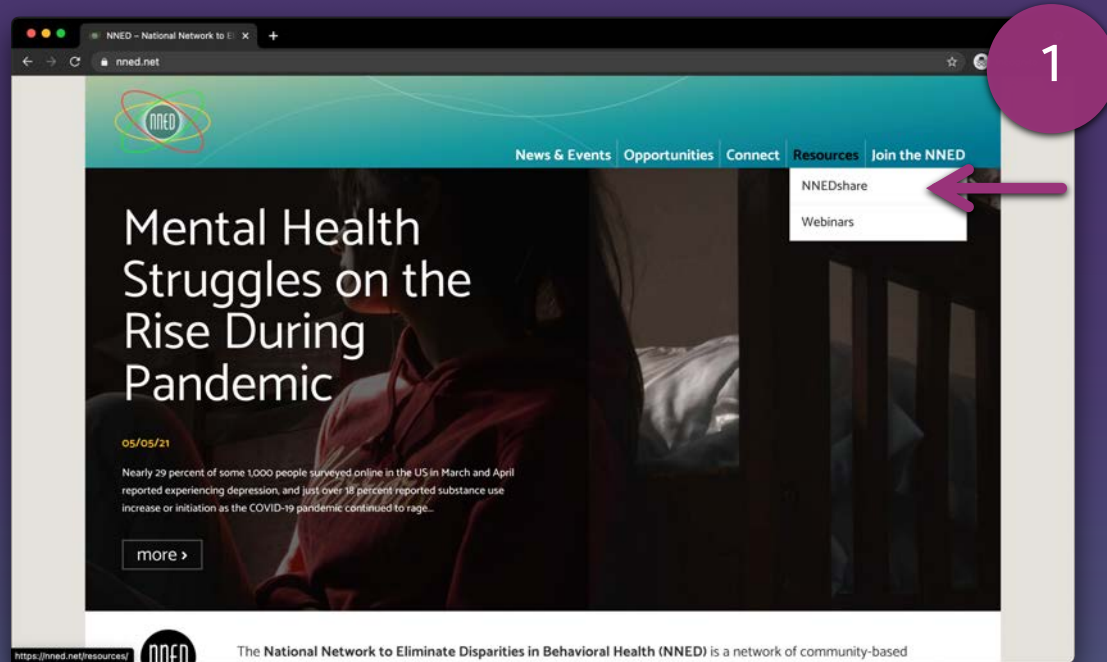
*NOTE: You must be a logged-in NNED member to access Partner Central



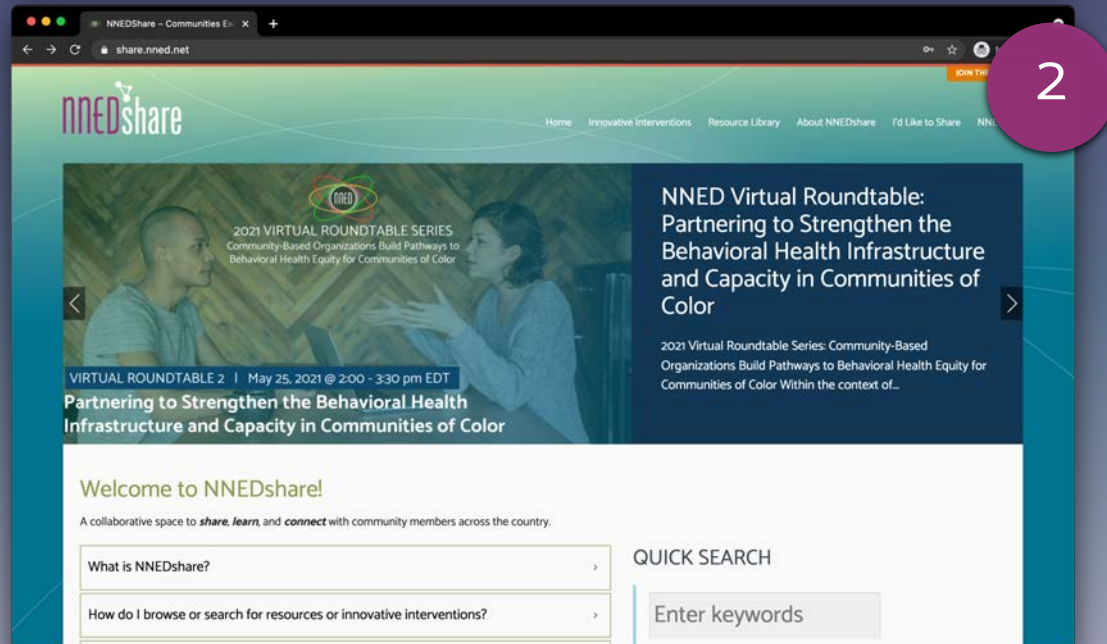
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Explore NNEDshare!
<https://share.nned.net>



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FINAL THOUGHTS – LIGHTNING ROUND

What can CBOs do to best build funding streams and grow organizational capacity to sustain their important work?



Coretha Claiborn



Jennifer Numkena
Downs, LCSW



Lucas Peterson



Valerie L. Liggins



Victor Loo



Facilitated by

Rachele Espiritu



National Network to Eliminate
Disparities in Behavioral Health

FINAL THOUGHTS

THANK YOU FOR JOINING US TODAY!



To view resources related to this webinar and the recording, visit share.nned.net



Questions? Email connect@nned.net



Join the NNED to join us for future learning opportunities: nned.net/join



Please provide your feedback in the survey!

PLEASE PROVIDE FEEDBACK

<http://bit.ly/VR2Feedback>

