



California

In 2006, California's mental health care system received a grade of C. Three years later, it remains at that level. It is uncertain whether meaningful progress can occur in years ahead in the face of the state budget crisis.

California is both the most populous and diverse state in the nation. The mental health system has shown an ability to innovate, but it has also failed to meet major challenges.

The California Department of Mental Health (DMH) oversees a decentralized service system involving 58 county mental health agencies and two city agencies. Counties provide services directly or contract with providers and serve as the mental health managed care system for the state's Medicaid program (Medi-Cal). DMH allocates funds to the county-run system to provide stable funding for innovative programs. This structure allows flexibility to tailor programs to meet county-specific conditions, but also results in significant variations in access to, and quality of, services.

Several of California's good initiatives have encountered budget shortfalls and limited success. Proposition 63 (the Mental Health Services Act of 2004, or MHSA) created an innovative mental health services financing mechanism, but it has disappointed many advocates because of unintended consequences. A two-tiered system has resulted, in which new clients enter into newer MHSA programs such as Full-Service Partnerships that provide comprehensive services to people in great need, while longer-term clients receive reduced care based on restrictions in the law that prevent its funds from being used for existing programs. Of the \$3 billion MHSA has generated, only about \$725 million has reached the counties. There is no continuous funding stream, and distribution is often delayed.

In 2007, Governor Arnold Schwarzenegger eliminated funding for the state's Integrated Services for Homeless Adults with Serious Mental Illness program. However, DMH has been able to use MHSA funds to provide stable and affordable housing through an inter-agency housing program. Going into 2009, California faced a \$42 billion budget gap and the prospect of massive cuts. Proposed cuts to Medi-Cal, already in crisis from inadequate reimbursements and a shortage of providers, would further limit access to care for people living with serious mental illnesses.

Notably, California has excelled in plans to develop a culturally competent mental health workforce and an overall system of culturally competent care. In 2008, the state released an exemplary, comprehensive five-year workforce development plan with specific goals for diversity and cultural competence.

California also has made strides in jail diversion with 40 mental health courts and many police Crisis Intervention Team (CIT) programs involving law en-

Innovations

- Mental Health Services Act interagency housing program
- Full-Service Partnerships for individuals with great need
- Cultural competency in workforce development

Urgent Needs

- Streamline Mental Health Services Act funding to counties
- Improve hospital care
- Reduce incarceration of people with mental illnesses

Consumer and Family Comments

- *"The county mental health service providers do an excellent [job] of meeting the needs of most clients given the barriers of too little funding, too little affordable housing, and a large dually diagnosed population requiring additional services."*
- *"What saved my life is no longer available in my county because of budgetary cutbacks."*
- *"Mental health clients are treated like second class citizens. Any time there are budget cuts, the funding is cut. They are the most needy and least represented class of people. To send them to jails and prison is outrageous."*
- *"Our Proposition 63 Mental Health Services Act monies have been targeted towards . . . new programs. Meanwhile, old time clients are living in below standard board and cares with very little access to programs and services."*
- *"De los pocos profesionales disponibles, algunos tienen conciencia y entienden o pertenecen a la cultura latina/hispana y hablan el idioma."**

forcement. Even so, many people with mental illnesses remain in jails and prisons. Although California passed "Laura's Law" in 2003 to authorize court-ordered outpatient treatment, it is rarely used and has had little impact on "revolving door" issues with homelessness, hospitalizations, and the criminal justice system.

The U.S. Department of Justice continues to monitor inpatient care in California. Despite recent efforts to resolve problems, some abuse and poor conditions still exist in state hospitals. Since 90 percent of state hospital beds are used for forensic patients and sexual predators who have completed prison sentences, space for civil patients is limited.

Sadly, California's mental health care system is hostage to the state's massive budget crisis. For years, the system has seemed poised for progress, but now could easily find its foundation crumbling. Continued stagnation or slippage will be tragic for the lives of individuals and families who confront mental illness every day.

* Translation: "Of the few available professionals, some are conscious of and understand or belong to the Latino/Hispanic culture and speak the language."