

[NYAPRS Enews] Mental Health Weekly Readers Bracing For 2022 Amid Pandemic, Workforce Challenges

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on behalf of

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NYAPRS Note: The Mental Health Weekly asked several advocates to write about how COVID has changed the way their agency or organization operates and about the challenges and opportunities that await them in the new year.

Mental Health Weekly Readers Bracing For 2022 Amid Pandemic, Workforce Challenges

Debra L. Wentz, Ph.D., president and CEO of the New Jersey Association of Mental Health and Addiction Agencies Inc.:

A new year always is the harbinger of hope and promise, and that is true for 2022 despite the ongoing pandemic. Our association continues to operate mostly remotely, with one full-time in-office staff [member] and several on-site occasionally, and meetings and conferences being held virtually. The pandemic is generating ever-increasing requests and pressure on our staff and members who are facing recruitment and retention difficulties. Remaining staff bear heavier burdens amidst an ever-increasing demand for services. COVID-19 has also underscored health inequities that must be addressed wholeheartedly in a state as diverse as New Jersey with every ethnicity, race, language, culture, gender identity and religion represented. While the pandemic and social justice issues continue to challenge us in the new year, New Jersey is looking to carve in all behavioral health services under its proposed 1115 waiver renewal. In addition, we face the difficult task of implementing a 988 crisis response system in 2022. While the unprecedented investment of federal dollars for behavioral health does provide opportunities, the workforce crisis must be overcome if we are to successfully take advantage of all available funding — state, local and federal. Rates and contracts must cover the cost of care and assure competitive wages so we may expand the workforce and ensure access to quality, culturally competent care for our diverse population.

Joseph Rogers, founder and executive director of the National Mental Health Consumers' Self- Help Clearinghouse:

COVID-19 has presented huge challenges to the peer movement. For the last two years, groups that provide self-help and mutual support have had to go virtual, and many peer-run services, such as drop-in centers and recovery centers, haven't been able to function due to widespread restrictions against gathering in groups. In addition, we've had to hold our movement's national conference — the Alternatives conference — via Zoom. But nothing has prevented us from continuing to provide support to people, through online platforms. And Alternatives participants have judged our two virtual conferences — in 2020 (in partnership with Peerpocalypse) and in 2021 — to be very successful. At the same time, the movement has

continued to advocate through written communication and social media, and the clearinghouse has continued to respond to requests for information and to publish our monthly e-newsletter, the *Key Update*.

Looking ahead, we see great potential for the growth of the peer movement. With the National Coalition for Mental Health Recovery, we continue to raise our voices in the halls of power, and we have reason to hope that our voices will not only be heard but that our demands will lead to action. So we look to the future with confidence.

Muneer Panjwani, vice president of foundation, government, and corporate partnerships at The Trevor Project:

We continue to be committed to realizing our mission to end LGBTQ youth suicide. In order to do that, we take a holistic approach to be there for LGBTQ young people when they are in a crisis and to ensure they don't enter a crisis in the first place. To support as many of the 1.8 million+ LGBTQ youth who seriously consider suicide each year in the United States as possible, we will serve at least 350,000 crisis contacts in 2022. This is a 76% increase from the 201,000 crisis contacts we supported in 2021. To keep scaling, we are hiring new talent to build an incredible team and continuing to invest deeply in innovative technologies. We are also investing considerably in our research and public awareness programs so LGBTQ mental health remains a top priority, and creating a safer world for LGBTQ young people through our education and advocacy programs.

Due to COVID-19, the organization underwent a rapid, massive tech transformation in March 2020 to move its Lifeline's physical call centers in New York City and Los Angeles to completely remote operations for the first time ever, ensuring its crisis services remained 24/7 and uninterrupted for LGBTQ youth in crisis. This was made possible by a herculean, cross-team collaboration between Trevor's Lifeline and Technology teams. Now that geography is no longer a relevant requirement for our Lifeline counselors, we are able to establish more diverse pools of counselors to support our diverse youth 24/7. We also know that many LGBTQ young people were disproportionately impacted by the realities of the pandemic; many were forced to stay in unaccepting home environments and didn't have access to other support systems like school, extracurricular activities and friend groups.

COVID-19 only exacerbated the challenges that many LGBTQ already face, so our crisis services as well as our digital social media platform called TrevorSpace became a lifeline for many youth.

LGBTQ inclusion has made a lot of promising progress in the last decade, but we still face hateful and discriminatory movements at the policy level; 2021 was a record year for anti-LGBTQ legislation. We anticipate this harmful movement to grow in the coming years, leading to trans-gender and nonbinary young people facing extreme mental and physical health consequences. Our research has found that having one supportive adult in a young person's life can reduce their chance of suicide by 40%.

So Trevor aims to be there for every single person affected by these laws through our crisis intervention, advocacy and education programs. We are fortunate to have generous funding from corporate partners like Bristol Myers Squibb, which provides the backing we need to accomplish our ambitious goals. We're encouraged by all the companies and individuals that donate to our work, opening up so many

opportunities to help us build a more loving, affirming world for LGBTQ young people.

Harvey Rosenthal, CEO of the New York Association of Psychiatric Rehabilitation Services:

2022 should see an ever-increasing focus on 4 Cs — COVID, crisis innovations, criminal justice reform and cultural equity.

We'll need to make access to cell and Zoom technology much more available and affordable to low-income individuals, including paying for phones and minutes to promote their use. (In that spirit, NYAPRS answered the COVID challenge by making all of our conferences virtual (see <https://www.nyaprs.org/annual-conference-2021>, offering a steady stream of inspiring and instructive webinars (<https://www.nyaprs.org/nyaprs-presentations>)-and daily online meditation and yoga sessions and www.nyaprs.org).

Spurred by federal COVID dollars to the states, states and localities should work closely together to create a seamless continuum of crisis services, including major roles for peer 988 counselors and peer-run crisis stabilization and respite programs. Police training has not been enough, and too many of our mental health systems' failures are foisted on the criminal justice and corrections sectors. We need to see the wide- spread deployment of police alternatives that favor the use of teams of peer and EMT first responders to avoid unnecessary arrests, admissions and tragedies. States should join New York in banning if not severely limiting the use of barbaric solitary confinement in state prisons and local jails, especially for vulnerable groups like ours, and provide rehabilitation-focused alternative approaches.

All of the above need to be implemented in ways that promote skilled voluntary engagement, support and justice, most notably for people of color, LGBTQI individuals and other marginalized groups who all too often face highly disproportionate rates of crushing discrimination, poverty, criminal justice involvement, hunger insecurity, isolation and major health challenges.

We have been making small, slow but steady progress in all of these areas in pockets around the country. So much more can be done in 2022 if we can further our efforts to bring together the wisdom and will of recovering people; families; peer supporters; community health and behavioral health providers; federal, state and local agencies; and criminal justice reform organizations.

Chuck Ingoglia, president and CEO of the National Council for Mental Wellbeing:

The workforce shortage that organizations providing mental health and substance use treatment services face today represents one of the greatest threats to our collective well- being. Without immediate investment in people and programs, organizations will continue to have difficulty meeting the historic demand for mental health and substance use treatment. Recruiting and retaining employees is a huge barrier, with 97% of National Council members saying it has been difficult to recruit employees and 78% of them describ- ing it as "very difficult." The Mental Health Access Improvement Act (S. 828/H.R. 432) and the Promoting Effective and Empowering Recovery Services in Medicare (PEERS) Act (S. 2144/H.R. 2767) outline federal solu- tions and are under consideration by Congress. States have numerous le- vers at their disposal to help organizations, improve the delivery of care and

promote the well-being of people and communities, as we outlined in our policy paper with Health Management Associates (<https://www.thenationalcouncil.org/wp-content/uploads/2021/10/Behavioral-Health-Workforce-is-a-National-Crisis.pdf>). We must find a solution to the workforce shortage, because our collective well-being is at stake.

Benjamin Miller, Psy.D., president of Well Being Trust:

Another year into the pandemic and we are all reminded of the power of mental health. We have each experienced, albeit in very different ways, what it's like to live under an umbrella of uncertainty. 2021 had several highlights for the mental health community, all of which help bring more attention, and ideally change, to the issue.

- First, we had our athletes step up and lead. From Simone Biles to Naomi Osaka, athletes far and wide began to share their story — tell their truth — making it easier for others to do the same.
- Second, we learned more about the good, bad and ugly side of social media. Regardless of your opinion here, it forced our country to begin to pay attention to the role of these social platforms in our mental health, especially the mental health of our youth. This conversation will likely continue for the foreseeable future.
- Third, we saw milestones that forced us to acknowledge our failings in the area of drug overdose. More than 100,000 lives lost in the last 12 months from overdose means we have a lot of work to do as a nation to embrace more comprehensive and robust strategies. But even in the face of this disturbing data, we should have hope. Our Congress is holding hearings on mental health, information has been requested from the general public on how they can begin to pursue policy that helps and more states are looking to invest in a more complete infrastructure to help make us more successful for things like 988, the new mental health crisis and suicide prevention lifeline number that goes live in July of 2022.

Make no mistake, it's going to be all hands on deck in 2022, and these experiences from 2021 should give us more fuel to radically reform mental health in 2022 and beyond. •