



March 29, 2020

The Honorable Gavin Newsom  
Governor, State of California  
1303 10<sup>th</sup> Street, Suite 1173  
Sacramento, CA 95814

Dear Governor Newsom:

We are a diverse coalition of state and local organizations representing consumers, family members, parents, caregivers, advocates, providers, and other stakeholders committed to preserving the goals and services provided by the Mental Health Services Act (MHSA). Our organizations include those working alongside state, county and local decision makers; individuals living with mental illness that are involved with the criminal justice system; and those who are homeless or at risk of becoming homeless. Together, we are dedicated to elevating the conversation around behavioral health to advance and preserve prevention, early intervention, treatment and recovery-based services and supports.

We recognize that the unprecedented and fast-moving nature of the COVID-19 outbreak has required a swift and flexible response on the part of state and local agencies, as it has for our organizations. We stand ready to work with the Administration to inform and guide any short-term changes in MHSA needed for the duration of this crisis, from our vantage point on the frontlines of affected communities. Given the impacts of COVID-19 on communities already facing significant barriers to accessing health care, the MHSA's guiding principle of client-and community- driven care matter now more than ever.

At the same time, we caution against making sweeping, long-term changes in the MHSA during this crisis without the stakeholder involvement and significant deliberation required to understand the lasting impact of such permanent changes on affected communities. **We are united and resolute that community-based, client-driven services and supports must remain in place for people living with behavioral health care needs who are receiving PEI, CSS, and INN services funded by the MHSA.**



Many of our coalition members, both entities and individuals, were instrumental in the passage of the MHSA. From drafting its language to rallying communities in a comprehensive ground-level campaign to gather support, the MHSA was a true grassroots effort driven by and for the voices of those it was designed to serve. More than 15 years after the passage of the MHSA, there have been numerous conversations about its effectiveness, its purpose, and whether it has delivered on its promise to transform California's mental health care system. However, too many of these discussions are taking place at the state level, without the full inclusion of consumers and families – the very populations that stand to be the most impacted by any changes to the MHSA.

We are united in the belief that the core values of the MHSA must be retained. As stated in the MHSA: *“with effective treatment and support, including client-centered, family-driven, and community-based services that are culturally and linguistically competent and provided in an integrated services system, recovery from mental illness is feasible. The MHSA, if adequately enforced, provides California with the ability to save lives and save money by committing to the provision of timely, adequate services”* (Excerpt from Section 2 (e,f))

Our Unified Guiding Principles are as follows:

- Diverse **stakeholders must be meaningfully involved** in discussions and decisions regarding any proposed changes to the MHSA.
- The MHSA must retain the **voluntary** nature of services that the Act is based upon.
- The local Community Planning Process is a **foundation** of the MHSA and must remain a key foundation of service planning and delivery.
- The MHSA must continue to be guided by the MHSA General Standards (Community Collaboration; Cultural Competence; Client Driven; Family Driven; Wellness, Recovery, and Resilience Focused and Integrated Service Experience) 9 CCR § 3320.
- Services must continue to be driven by **clients, family members, and those with lived experience**.
- California must support a public mental health system that is **not a fail-first system**.
- MHSA funds should not be utilized as a way to solve the homelessness issue in its entirety with the exception of utilizing funds to assist those who are homeless and also have a mental illness.
- People currently receiving services should not lose those services.



- The MHSa must continue funding **community-based services** (full-service partnerships) that meet people where they are at. These services are the foundation of the MHSa and they have proven to be successful.
- Local control and fund allocation are crucial to ensure programs and services are designed to meet the needs of the many unique and diverse populations across the state.
- Collection, analysis and dissemination of data and outcome measures are essential to ensure that MHSa funds are spent consistent with the intent of the Act.
- Strong enforcement and accountability are critical to the success and effectiveness of the MHSa.

We urge you to uphold the MHSa by including individuals with lived experience and all potentially affected client stakeholder groups in all discussions regarding any changes to the MHSa, **including temporary changes**. We also urge you to ensure that the vision, values and general standards of the MHSa, which we worked so hard to create, remain intact. **These include the foundational principles of stakeholder involvement at all stages of service planning evaluation and delivery, and prioritizing voluntary community-based services.**

Again, we are sensitive to the crisis our state is experiencing, and understand that the state and counties are examining myriad ways to bolster the safety net, but we also believe that any changes should ensure that the spirit and intent of the Act are upheld and that safeguards are put in place to protect the provisions of the MHSa that so many fought for. We stand ready, willing, and able to assist you with these efforts.

Sincerely,

Susan Gallagher, MMPA, Executive Director  
**Cal Voices**

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CC: Dr. Kelly Pfeifer, Deputy Director, Behavioral Health, DHCS  
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