

MENTAL HEALTH COLORADO

2021 POLICY AGENDA



Making sure that funding and resources for mental health and substance use remain a priority in the wake of the global pandemic is the highest priority for Mental Health Colorado.

ACCESS TO HOUSING, SUPPORTS, AND SERVICES



Advocacy Priority: Protect existing funding for behavioral health services and supports

According to a recent article from the Colorado Health Institute, there have been 443 recorded overdose deaths from January to April 2020 in Colorado. This represents 35% increase from the same time period in 2019. According to CHI, “the starkest difference can be seen for both March and April — the first few months of the COVID-19 lockdown. April saw a jump from 15.0 to 24.1 deaths per 100,000 people.” Colorado needs to be equally prepared to deal with the secondary health impacts from the pandemic: increased mental health and substance use issues in our communities. Our state needs to invest in behavioral health services and supports, instead of cutting needed funding.

Proposed Bill: Expand and enhance peer-delivered services in Colorado

People living in recovery from mental health and substance use conditions have proven to be effective in supporting positive health outcomes for others with similar health conditions. These professionals should be widely available, reasonably compensated, and well trained.

Proposed Bill: Enacting the 9-8-8 Suicide Prevention and Behavioral Health Crisis Response Hotline in Colorado

Colorado's suicide rate is of the highest in the nation, especially for youth. Studies show most suicide attempts are made within three hours or less of someone having suicidal thoughts, and some in as little as 5 minutes. Colorado needs a fast and easily accessible support system for individuals in need of immediate mental health services and supports. The proposed bill would enact federal legislation establishing the 9-8-8 crisis response number and creates a sustainable funding option for receiving and responding to those calls in the community.



REDUCE POTENTIAL HARM FROM DRUGS AND ALCOHOL

Proposed Bill: Ensure responsible practices for the prescribing of benzodiazepines

When prescribing benzodiazepines, prescribers must check to see that other medicines that could threaten the patient's life have not already been prescribed.



DECRIMINALIZE MENTAL HEALTH

Proposed Bill: End the use of solitary confinement in Colorado jails for people with specific health conditions

As with many other states in the nation, individuals with serious mental health conditions are entering the criminal justice system at alarming rates, often as a result of unmet health needs. Not only are individuals with mental health conditions more likely to be incarcerated longer, they are also more likely to be placed in solitary confinement while in jail. The practice of solitary confinement has detrimental impacts on individuals with health conditions such as mental health disorders and dementia. Multiple studies have shown that the psychological stress created from solitary is comparable to distress of physical torture.

Proposed Bill: Create a new transportation alternative and reimbursement model for people in a mental health crisis so that people are not transported by law enforcement to a health care facility

An individual experiencing a behavioral health crisis is often transported by an ambulance or a law enforcement patrol car. Lights and sirens can exacerbate a crisis, and law enforcement response further stigmatizes mental health.

Study Area: Keep a spotlight on enhanced sentencing laws and other practices that disproportionately impact individuals in a mental health crisis by engaging stakeholders and key decisions makers on the issue

No one should fear calling 911 when they or their loved one is in a mental health crisis because they fear they will end up in jail with felony charges, or worse. We are spearheading continued conversations about effective ways to keep first responders safe while not criminalizing individuals who need crisis services.

END SHAME AND DISCRIMINATION



Study Area: Create a stakeholder process to outline best practices when individuals are placed on an involuntary hold

Individuals who are placed on involuntary mental health holds often experience traumatic and discriminatory practices that lead to further harm. Colorado needs to reassess what happens to consumers during and after an involuntary civil commitment to ensure better treatment and outcomes for that individual.



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