





Mental Health Services Act Guiding Principles

A Message from the MHSA Partners Coalition



Partners















































MHSA Partners Coalition

The MHSA Partners Coalition is a diverse coalition of organizations representing consumers/clients, family members, parents/caregivers, youth, county behavioral health agencies, providers, community clinics, and other stakeholders.

We are unified in our commitment to advancing the Mental Health Services Act's (MHSA) vision and protecting the services it funds. Many of our coalition members, both organizations and individuals, were instrumental in the drafting and passage of the MHSA and remain committed to its groundbreaking vision for community-driven, client-centered care.

For this reason, our coalition respectfully requests that you consider the following MHSA guiding principles as you review legislation, state budgets, and policy.



Our Unified Guiding Principles

Mental Health Service Act and the Recovery Vision

The Mental Health Service Act (MHSA) is required to be consistent with the philosophy, principles, and practices of the Recovery Vision for mental health consumers. MHSA is required:



To promote concepts key to the recovery of individuals who have a mental illness: hope, personal empowerment, respect, social connections, self-responsibility, and self-determination.



To promote consumer-operated services as a way to support recovery.



To reflect the cultural, ethnic and racial diversity of mental health consumers.



To plan for each consumer's individual needs.

*Welfare & Institutions Code Section 5813.5, paragraph (d)(1)-(4).



Retain Core MHSA Values and Goals

Consistent with the Recovery Vision in the Act, we believe that:

- The MHSA must retain the voluntary nature of services that the Act is based upon.
- Maintain MHSA General Standards (Community Collaboration; Cultural Competence; Client Driven; Family Driven; Wellness, Recovery, and Resilience Focused and Integrated Service Experience). See Section 5898, Section 5813.5(d), and Section 2(e).
- Services must continue to be driven by consumers/clients, family members, and those with lived experience.
- People from diverse ethnic, cultural, and racial backgrounds, including LGBTQ+ individuals and other historically unserved/underserved/inappropriately served communities, must be engaged in developing and implementing MHSA programs.
- Local control and the community planning process are crucial to ensure programs and services meet the needs of the many unique languages and diverse populations across the state. Counties must build a robust community engagement process that allows for stakeholder feedback to be acted on before the plan is brought for final approval.
- We encourage counties to partner with Community Based Organizations (CBOs) in offering services funded by MHSA.
- MHSA funds must not be used to reinforce a fail-first system.

Meaningful Stakeholder Involvement

- Diverse stakeholders must be meaningfully involved in discussions and decisions regarding any proposed changes to the Act.
- Local Community Planning Processes must be transparent, comprehensive, and accountable to stakeholders.

Advance and Preserve MHSA's Programs

- The MHSA must continue funding communitybased services that meet people where they are. These services are the foundation of the MHSA, and they have proven to be successful.
- Peer-run and peer-delivered programs must be preserved.
- People currently receiving services should not lose those services.
- Prevention and early intervention must remain a priority, including educating the general public about the prevalence of mental health conditions and services.

MHSA Funds Are for Mental Health Initiatives

- Access to mental health care and safe housing are fundamental human rights. The role of MHSA funds in alleviating homelessness is to assist people who are unhoused or at risk while living with a mental health condition or a co-occurring mental health and substance use condition.
- MHSA funds should not be diverted for purposes not consistent with its values or used to fund projects that should be financed through other revenue streams.

Accountability, Enforcement, and Outcomes-Driven Decisions

- 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.





Protect the Mental Health Services Act

Promise to Voters

Voter passage of the Mental Health Services Act (Prop 63) in 2004 was a historic turning point for mental health in California and our nation. The landmark law set forth two inseparable priorities: committing new resources to proven, intensive treatment models while at the same time investing in prevention and early intervention services to reduce the number of Californians who would experience severe and debilitating mental illness.

Nearly 20 years later, the act's vision has yet to be fully realized. The mental health and substance use disorder needs of our communities have grown - but the core values of the Act are more relevant than ever:

- The MHSA must retain the voluntary nature of services that the Act is based upon.
- · Services must be client-centered.
- Communities know their own needs best; improving the local community planning process and ensuring robust stakeholder engagement is vital.
- Racism, sexism, homophobia, transphobia, religious bigotry, health disparities/inequities, stigma, biases, and other forms of discrimination directly harm impacted Californians and make mental health and substance use disorder services less accessible. For these reasons, diverse racial, ethnic, and LBGTQ+ communities and individuals with intellectual, developmental, and physical disabilities must be centered and empowered in MHSA services by ensuring services provided are accessible as well as culturally and linguistically appropriate.

Why It Matters

The MHSA has too often been seen as a source of funding for many unmet needs in California, including the absence of a fully-funded behavioral health safety net and the catastrophic lack of affordable housing in California.

Diverting MHSA resources has severe consequences, including:



Eroding voters' intent



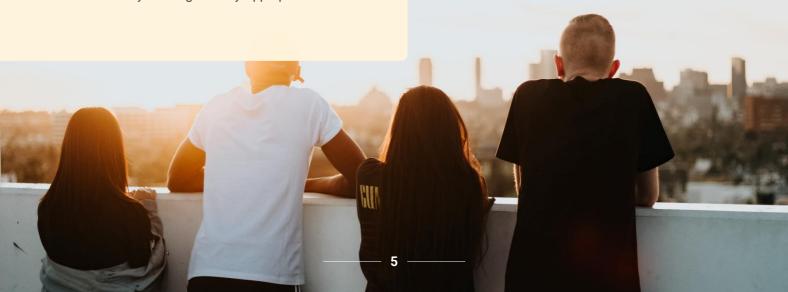
Devaluing community priorities



Increasing inequity



Reinforcing a failfirst cycle





Thank You to Contributors and Signatories

The MHSA Partners Coalition is made up of advocacy organizations, community members, mental health consumers, and people who care about improving California's behavioral health systems. Thank you to all who contributed to these principles, and for the work you do to uphold them throughout our great State.

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How to Learn More

If you would like to learn more about the MHSA, these guiding principles, and how you can help advance the vision of the Act, please reach out to any of the organizations listed in this document.