



Doing the Work of Workforce Development: State and Local Partnership Strategies for a Reimagined Behavioral Health Workforce

MODERATOR: The Social Changery

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Doing the Work of Workforce Development

**State and Local Partnership Strategies for a
Reimagined Behavioral Health Workforce**

Agenda

❖ CYBHI Youth at the Center Calls to Action and Workforce Development

❖ Rethink Treatment: What it looks like and who provides it

- ❖ Emiliano Rosas -- Coordinator of Community Engagement
- ❖ PRO Youth & Families

❖ Help Must Be Available Before a Crisis

- ❖ Hovik Khosrovian -- Senior Policy Advisor for Health Workforce Development
- ❖ Department of Health Care Access and Information (HCAI)

❖ Building a Representative Workforce

- ❖ Robert Williams, PhD -- Dean of College of Education and Allied Studies
- ❖ Cal State East Bay

❖ Questions/Panel Discussion

12 CALLS TO ACTION

FOR A REIMAGINED BEHAVIORAL HEALTH ECOSYSTEM FROM CHILDREN, YOUTH, AND FAMILIES ACROSS CALIFORNIA

SHIFT THINKING



- Addressing stigma is a foundational first step.
- Culture is healing.
- Youth and communities want self-determination – not “empowerment.”
- Rethink treatment: what it looks like and who provides it.

REIMAGINE SERVICES



- Help must be available before it's a crisis.
- Make places for youth to belong, create, and connect to the outdoors.
- Take care of adults so they can take care of young people.
- Create a mental health system everyone can navigate, even when struggling.

TRANSFORM SYSTEMS



- Build a representative workforce.
- Decriminalize mental health – including substance use.
- Unacknowledged harm gets in the way of hope and trust.
- Take action to address systemic inequalities and oppression.

The Youth at the Center report is available at:
<https://cybhi.chhs.ca.gov/resource/youth-at-the-center-report/>

**THE
SOCIAL
CHANGERY**

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“Like, you are only supposed to talk to someone with a degree; but aren’t your friends or family the ones who should be able to support you? [Especially] if you don’t have access to therapy, or you don’t want to talk to someone you don’t know ... what if we all were better prepared to support each other?”

“[I’d like] a place where they walk in and it’s friendly, welcoming, and warm. Food, care. Someone they already know. Safety. Not ‘show me your insurance.’ It’s a shift – a state of mind shift. Layers of services. Not just a youth walking into a clinical setting and going straight to a therapist. Creating safe spaces for youth to open up.”

”
“I’d like to have a place where there were peers having lunch, not expressly for the purpose of mental health but having someone to talk to. Not having another human being who cares is part of mental health problems. [Going to talk to a] mental health professional feels like ‘something is wrong’ or like it’s a duty, not a human connection.”

1. Rethink Treatment: What it looks like and who provides it

Emiliano Rosas

Emiliano Rosas serves as the Coordinator of Community Engagement at PRO Youth & Families. In this role, he actively contributes to their mission of supporting and enhancing the lives of young individuals and families throughout Sacramento. As the Vice Chairman of the Parks, Recreation, and Intergenerational Commission for the City of West Sacramento, Emiliano plays a pivotal role in enhancing recreational opportunities and fostering connections between generations within the community. In addition to his responsibilities at the city level, Emiliano serves as a Commissioner for the Yolo County Juvenile Justice and Delinquency Commission. In this capacity, he focuses on addressing issues related to juvenile justice and delinquency, aiming to create more pathways for young people to succeed. His multifaceted roles and tireless efforts underscore his commitment to building a West Sacramento where all young people have the opportunities and support they need to thrive.





Fostering Hope



Founded as People
Reaching Out in
1981



Rebranded as PRO
Youth in 2017



Our areas of work:
- Youth Voice
- Wellness
- Collective Impact

**Peer-to-Peer
programs
increase equity
and diversity by:**

01

Supporting youth from different backgrounds on path to mental health careers

02

Diversifying the pool of trusted campus messengers who can reduce cultural stigmas

03

Increasing the sense of belonging on campus

04

Increasing the knowledge of mental health resources



MINDONESIX

- Created in 2020 as a non-clinical, youth-friendly response to youth mental health and wellness needs
- MindOneSix is comprised of 10 lessons that discuss:
 - Defining Mental Health Terms
 - Dimensions of Wellness
 - Stigma Reduction
 - Stress and the Brain
 - Resiliency and Self-Care
 - Trusted Adults
 - Impact of Social Media
 - Resources

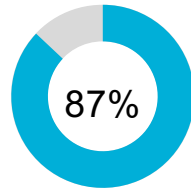


MINDONESIX

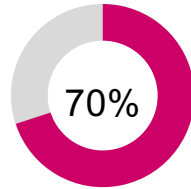
PRO
youth

- 2021-2023: Partnership with Sacramento City Unified School District
 - Served 5-7 schools
 - Delivered on campus to middle and high school students
- Delivered by community partners
 - More diversity in trusted messengers
 - Increased the capacity for PRO to offer the program

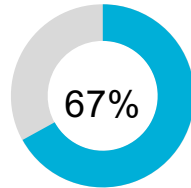
Impact of MindOneSix on Youth



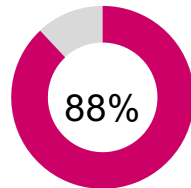
of youth participants learned new things about mental health and wellness



of youth participants felt more confident to talk with peers about mental health



of youth participants felt more confident to talk to family about mental health



of youth participants were more interested in mental health careers

*Data from 2021 Pilot Cohort

"If the youth had more help with their wellbeing, emotional, physical, et cetera, then they would also do better in school and life in general."

"During the pandemic, it was too much. Really hard for me. I couldn't go anywhere, do anything in person. My parents are the type of people who can't really talk about this type of thing. I looked to some of the resources that were posted by my counseling department – I called the hotline. The reflective listening didn't help me – I needed actual resources, feedback, [and] help, not just 'are you saying you feel X, that must be hard.' All of the responses are trained responses. I know they care, but they can't help."

"If we can embed more preventative interventions or even just really looking at our environment as a whole, then we would have better mental health. And yes, resources are cool, but also it's kind of like solving problems at the end of the stream, right? Like it's already too late."

2. Help must be available before a crisis

Hovik Khosrovian

Hovik Khosrovian serves as the Senior Policy Advisor for Health Workforce Development at the Department of Health Care Access and Information (HCAI), overseeing health workforce policy and research development, strategy, and implementation. He has been with HCAI for nearly 14 years, previously serving as the Health Workforce Policy Section Chief overseeing the design and development of workforce programs focused on creating and expanding a diverse workforce in primary care, behavioral health, and allied health to meet the needs of the state's underserved and underrepresented communities. He also served as the California Primary Care Office and State Office of Rural Health Program Director within HCAI, which administers federally funded programs to identify workforce shortages in the state and assist underserved communities in expanding access to health care services.



HCAI Health Workforce Development

- **Support and increase a health workforce that:**
 - Serves medically underserved areas
 - Represents the California it serves through racial and language diversity
 - Serves Medi-Cal members.
- **Offer programs that provide financial support for:**
 - Primary Care, Behavioral Health, Nursing, and Allied Health education and training
 - Individuals pursuing health careers and/or currently part of the health workforce.

To stay informed about all our programs and initiatives:

<https://hcai.ca.gov/mailling-list/>

Education and Training Programs

- Primary care and psychiatric professions
- Behavioral health education and training expansion
- Fellowships in psychiatry and addiction medicine for primary care providers
- Nursing and Home and Community Based Services
- Wellness Coaches
- Community Health Workers/Promotores/Representatives
- Reproductive Health

Recruitment and Retention Programs

- Loan Repayment – expanded to include reproductive health
- Scholarship – expanded to include reproductive health
- Stipends for behavioral health students

Pipelines and Pathways

- Health Professions Pathways Program
- Health Careers Exploration Program

Additional Workforce Efforts

- Health Workforce Education and Training Council
- Health Workforce Research Data Center
- Reproductive Health Access

The Need for Certified Wellness Coaches

The 2021-2022 California Budget included a \$4.7 billion investment and **five-year plan to transform the behavioral health (BH) system for children and youth.**

As part of that funding and plan, **HCAI received \$765M to strengthen and expand the BH workforce, including the design and build of the Certified Wellness Coach (CWC) workforce.**



Broad Behavioral Health Workforce (HCAI)

- **Psychiatry and Social Worker Educational Capacity**
 - Both programs are anticipated to launch on January 9th
 - In October 2022, HCAI awarded \$18.6M grants to 8 Psychiatry Residency programs and over \$19M to 7 Psychiatric Mental Health Nurse Practitioner programs (see list [here](#))
- **Behavioral Health Workforce Pipeline**
 - Cycle 1: 20 awards, 30 counties impacted
 - Cycle 2: The Health Professions Pathway Program (HPPP) application is open until October 16th
- **Loan Repayment, Scholarship, and Stipend Augmentation**
 - Behavioral Health Scholarship (BHSP) Award announcement will be available in the coming weeks
 - The Community-Based Organization Grants (CBO Grants) Central App is open until November 13th
- **Justice System Involved Youth Behavioral Health Pipeline**
 - Application is open until October 16th
- **Substance Use Disorder (SUD): Earn and Learn program**
 - Awarded \$23.3 million to six organizations. These programs are designed to increase the supply of Certified SUD counselors.



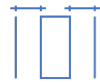
The CWC role is designed to...



increase overall capacity.



build a **diverse behavioral health workforce with lived experience** working in a **wide variety of settings**.



fill some of the **workforce gaps** that exist today.



ensure the role is both a **desirable occupation** and a **stepping-stone to more advanced BH roles**.



engage directly with **youth (aged 0 – 25)**.

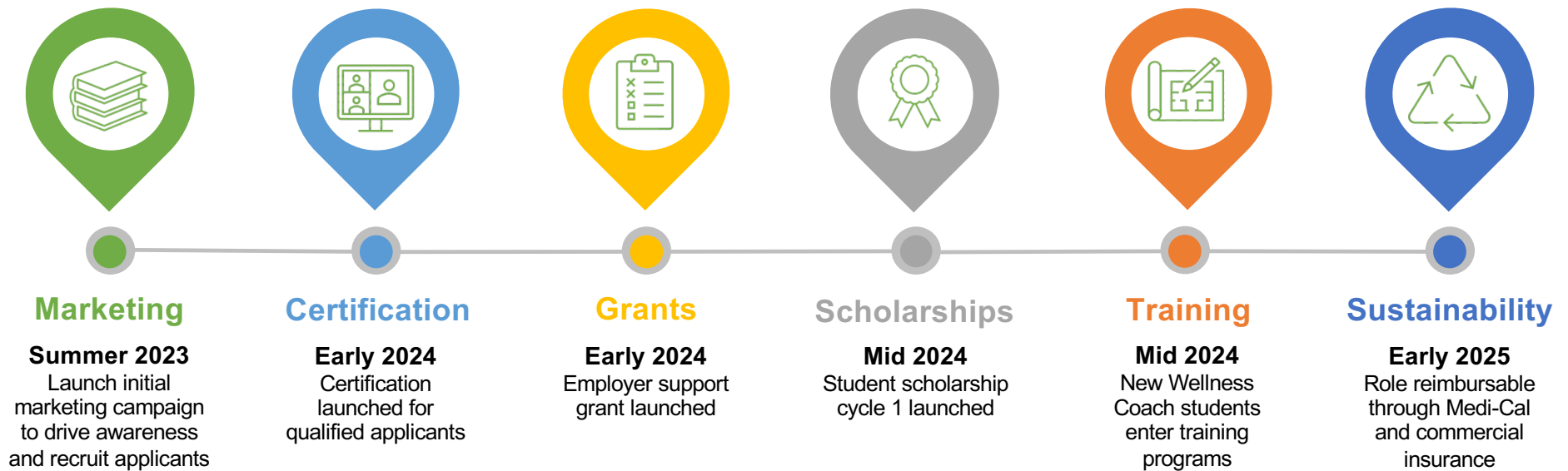


serve **vulnerable populations where they live, study, and work**.

Services and Competencies

Services <i>Activities core to the Certified Wellness Coach roles</i>	1	Wellness promotion and education
	2	Screening
	3	Care coordination and extension
	4	Individual support
	5	Group support
	6	Crisis referral
Additional Competencies <i>Demonstrated areas of knowledge to be evaluated against during field experience</i>	7	Cultural competency, humility, and mitigating implicit bias
	8	Professionalism, ethics, and legal mandates
	9	Communication
	10	Operating in role and different environments

Wellness Coaches: Multi-Year Timeline



“... One change we need is that the high schools in my neighborhood have to have a counselor who is Black. It should be mandatory. Why? Because the youth [I work with] come up to me and say ‘I can’t trust this person, they don’t look like me’.”

“When we’re seeking out mental health providers, sometimes you want someone who can validate us. It’s not necessarily validating when a therapist who is blonde haired [with] blue eyes, a white woman, a citizen – all of these identity markers that you don’t share – tells you that you’re okay and nothing is wrong, but they come from a place of privilege.”

”
“... with these counselors, they go to school, and they learned it through a textbook, compared to people that have actually experienced [the things that we have]... those people know the struggle, and they know how it was for them; they could really help the youth.”

3. Build a Representative Workforce

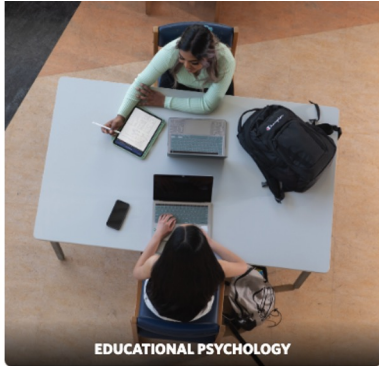
Robert Williams, PhD

Robert Williams, Dean of the College of Education and Allied Studies at Cal State East Bay, is a licensed clinical psychologist and was a visiting Fulbright Scholar from August 2001 to 2002 with the University of the West Indies, Cave Hill Campus in Barbados in the Department of Government, Sociology and Social Work. Williams, who grew up in St. Louis, completed his bachelor's degree at Howard University and his doctorate at the University of Missouri – Columbia. He completed his clinical psychology predoctoral internship at the University of Maryland at Baltimore and he was a NIDA fellow at the University of Miami, School of Medicine, Department of Psychiatry and Behavioral Sciences. Having studied under the top family therapy researchers in the nation, Williams led the Marriage and Family program at San Francisco State University for eight years.





EDUCATIONAL LEADERSHIP



EDUCATIONAL PSYCHOLOGY



KINESIOLOGY



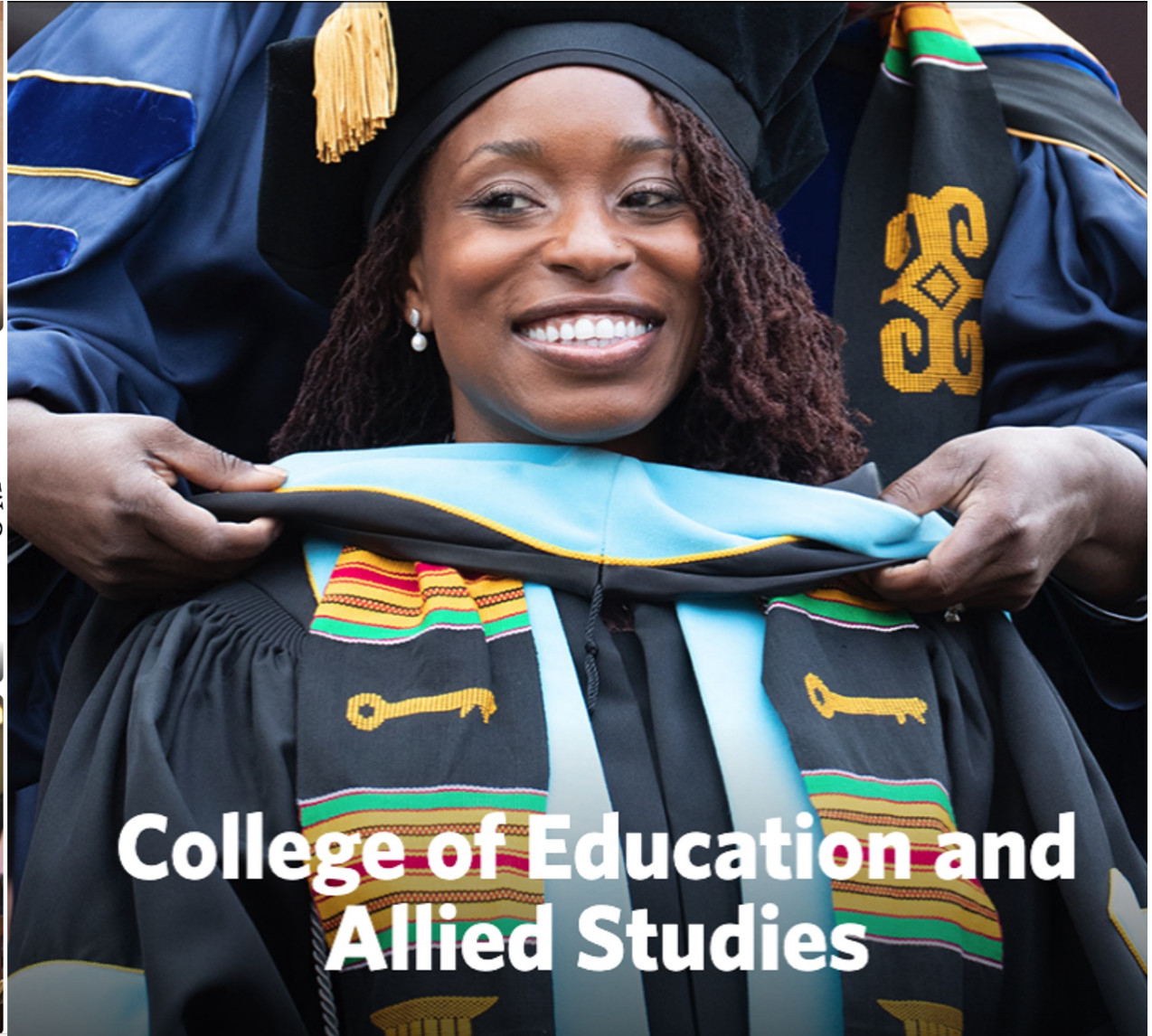
HOSPITALITY, RECREATION & TOURISM



TEACHER EDUCATION



ONLINE TEACHING AND LEARNING DEGREE PROGRAM



College of Education and Allied Studies

The background of the slide is a vibrant blue color, densely populated with numerous speech bubbles. Each speech bubble is a different color, including shades of red, yellow, pink, and light grey. Inside each speech bubble is a large, dark blue question mark. The speech bubbles are scattered across the entire frame, creating a pattern that suggests a multitude of questions or topics for discussion.

Questions for panelists

Resources for Practice

- Wellness Coach: <https://cybhi.chhs.ca.gov/workstream/wellness-coach-workforce/>
- Youth Programs: <https://proyouthandfamilies.org/programs/>
- Educational Psychology program: <https://www.csueastbay.edu/epsy/>
- CalSWEC (DEIB): <https://calswec.berkeley.edu/about/deib>
- Safe Spaces: <https://osg.ca.gov/safespacestoolkit/>