

## Strengthening Families Through Behavioral Health Coalition

### Co-Chairs:

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December 18, 2020

The Honorable Muriel Bowser  
Mayor of the District of Columbia  
1350 Pennsylvania Avenue, NW, Suite 306  
Washington, DC 20004

### *Children and Families in the District Need Access to Behavioral Health Services*

Dear Mayor Bowser:

The ongoing unpredictability of the coronavirus (COVID-19) pandemic, economic shutdown, distance learning, and other “new normals” have resulted in a documented rise in mental health issues among children and families nationally, which means that the District is facing a major mental health crisis.<sup>1</sup> DC children and families are feeling the full health and economic weight of the pandemic—with low-income residents and Black, Latinx, and immigrant residents shouldering an unequal burden. Black youth and families are facing even greater race-based trauma due to constantly seeing images and hearing stories of Black people being killed by the police and in the community. Further, the dramatic rise in gun violence and homicides this year is a clear indication of the magnitude of current crises and need for behavioral health services across the city. These same communities have limited access to grief counseling and other mental health supports.

Now more than ever, DC residents need *more, not less* access to consistent and affordable behavioral health care that enables them to cope not only with ongoing behavioral health issues, but also with the elevated stress and trauma associated with the COVID-19 pandemic. Therefore, the undersigned organizations strongly urge you to protect existing funding and expand investments in the Department of Behavioral Health’s (DBH) School-Based Mental Health program (SBMH) and community behavioral health services.

We recognize that the pandemic has created unprecedented economic challenges for the District, and that you have had to make many difficult choices. We appreciate all that you have done to support children and families during this hard time. As you seek to balance the many competing needs of DC residents, however, we ask you to remember that when people are struggling with behavioral health problems, they are unlikely to be able to cope with the other problems in their lives – unemployment, lack of housing, poor physical health, and instability in their families. Investments in these other areas won’t be effective if the District doesn’t adequately address residents’ behavioral health needs.

### **We Urge You to Protect and Expand School-Based Mental Health Services**

The FY 2021 approved budget included new investments in behavioral health resources for students through DBH’s School-Based Mental Health program (SBMH). Given the unprecedented struggles DC’s students are facing, it is paramount that District leaders do everything they can to help limit disruptions to care and ensure that even more students have access to the supports they need. To

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achieve this, policymakers must keep the SBMH's FY 2021 budget intact and invest new dollars in FY 2022 to allow DBH to expand the program to the more than 50 DC Public Schools (DCPS) and public charter schools that are still waiting on vital behavioral health resources.

The SBMH program is made up of several important components— school-tailored behavioral health service delivery with dedicated oversight (through DBH supervisory clinicians, community-based organization (CBO) clinicians, Office of the State Superintendent of Education (OSSE) and DCPS program managers), program evaluation, a community of practice, program materials and trainings. Together, all of these components currently allow over 130 schools to have a licensed clinician and provide a safe space for youth and families, clinicians, school leaders and other stakeholders to collaborate—just a few of the many activities that are possible with the current SBMH budget. If DBH is forced to reduce funding in either one of these areas, that will significantly undermine the strength and continuity of the program.

**We strongly urge you to protect investments in SBMH**, allowing students to better weather the COVID-19 storm. **We also ask you to make new investments in FY 2022** to allow DBH to expand the program to the next cohort of public schools in school year 2021-22.

### **We Urge You to Reverse Cuts to Community Behavioral Health Services to Avoid Collapse of System**

The FY 2021 proposed budget included approximately \$21 million in cuts to spending on community behavioral health services. The DC Council chose to restore about half of this. Yet, community-based organizations and other providers that administer behavioral health services—particularly to low-income residents—are still facing nearly \$9 million in cuts. The FY 2021 approved budget cuts \$4 million from community behavioral health services, however, \$2 million of this cut is matched by federal dollars—for every dollar, the District invests, the federal government invests \$3.3. It is unconscionable that the District would leave essential federal dollars on the table during a time when the federal government has already shortchanged DC from critical COVID-19 relief dollars.<sup>2</sup> **At minimum, DC leaders must return spending on community behavioral health services to FY 2020 levels and recover the \$5 million in federal dollars that were left on the table. To truly meet the behavioral health needs of DC's residents – we need more spending on community behavioral health services, not less.**

Failure to fully fund community behavioral health services will cause irreparable harm to DC residents. Community-based providers who were already operating on thin margins are now facing greater financial strain, making the behavioral health system more vulnerable during the worst possible time. Without additional funding, many CBOs will be faced with cutting back care for the people they serve, and people with behavioral health challenges cannot afford reduction in their care right now.

Continuing financial strain could also lead provider organizations to withdraw from the District or close their businesses altogether. Just a handful of provider organization closures could devastate our already fragile behavioral healthcare system—already short on providers that serve children.

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Shuttering community providers also threatens the stability of the School-Based Mental Health program – these are the same providers that partner with schools to place clinicians in our schools. **Without these community providers, the School-Based Mental Health program doesn't work.**

Any reduction in services means that more DC residents will suffer from unaddressed and emerging mental health challenges. Low-income residents who are shouldering an unequal amount of stress and trauma for an indefinite amount of time will have fewer places to turn for help. An inadequate supply of and access to behavioral health services will threaten low-income parents' ability to secure and maintain a job and safe place to live for their families. Children from these families will likely struggle to cope in the classroom, widening the already unacceptable racial and income gaps in learning outcomes.

**We strongly urge you to protect existing funding and expand investments in school-based mental health to include all DCPS and public charter schools. We also ask you to return spending on community behavioral health services to FY 2020 levels.** To do this, the District must find creative ways of raising revenue and strategically use any additional federal relief dollars. Good mental health is foundational to DC children and families coming out stronger on the other side of the pandemic—behavioral health services must be prioritized in the FY 2021-24 financial plan.

Sincerely,

### The Strengthening Families Through Behavioral Health Coalition and its Partners

ACLU-DC

Advocates for Justice and Education DC

After-School All-Stars, Washington DC  
(ASAS DC)

Amidon-Bowen LSAT

Bread for the City

Children's Law Center

Children's National Hospital

CityDance

Community of Hope

Community Wellness Ventures

DC Action for Children

DC Charter School Alliance

DC Education Coalition for Change

DC Fiscal Policy Institute

DC Health Matters Collaborative

DC Justice Lab

DC Statehood Green Party

Decoding Dyslexia DC

District of Columbia Behavioral Health  
Association

Education Forward DC

Education Reform Now DC

Empower DC

EmpowerEd

Fair Budget Coalition

Fair Chance DC

Global Kids

Homeless Children's Playtime Project

Jubilee Housing

Kid Power

Mary's Center

McClendon Center

Moms Demand Action, DC Chapter

Open City Advocates

PAVE

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School Justice Project  
SchoolTalk  
Shaw Community Center  
SOME, Inc. (So Others Might Eat)  
The Bard Early Colleges  
The Early Childhood Innovation Network  
The Expectations Project

The Maryland Association of Nonpublic  
Special Education Facilities  
The Washington Lawyers Committee for  
Civil Rights and Urban Affairs  
Unity Healthcare, Inc.  
Ward 5 Education Equity Committee  
Ward 7 Ed Council

CC:

LaToya Foster, Director of Communications, Mayor's Office of Communications  
Wayne Turnage, Deputy Mayor for the District of Columbia Health and Human Services and  
Director, District of Columbia Department of Health Care Finance  
Dr. Barbara J. Bazron, Director, Department of Behavioral Health  
Kevin Donahue, Interim City Administrator, Office of the City Administrator  
Jenny Reed, Director, Office of Budget and Performance Management

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<sup>1</sup> Fallout from the pandemic has given rise to significant negative behavioral health effects in children. See Patrick, Stephen W., Laura E. Henkhaus, Joseph S. Zickafoose, Kim Lovell, Alese Halvorson, Sarah Loch, Mia Letterie, and Matthew M. Davis, *Well-Being of Parents and Children During the COVID-19 Pandemic: A National Survey*, *Pediatrics* 146, no. 4 (1 October 2020), available at <https://doi.org/10.1542/peds.2020-016824>, and Gassman-Pines, Anna, Elizabeth Oltmans Ananat, and John Fitz-Henley, *COVID-19 and Parent-Child Psychological Well-Being*, *Pediatrics* 146, no. 4 (1 October 2020), available at: <https://doi.org/10.1542/peds.2020-007294>. A national survey found that 14% of parents with children age <18 reported worsening behavioral health for their children, while 27% of parents reported worsening mental health for themselves. See Patrick et al., p. 1. Many caregivers are experiencing mental health issues, resulting from pandemic-related pressures such as loss of income, housing insecurity, and childcare burdens, which can ultimately harm the parent-child relationship and have long-term behavioral implications for children. See Garfield, Rachel, and Priya Chidambaram, *Children's Health and Well Being During the Coronavirus Pandemic*, KFF (blog), 24 September 2020, available at: <https://www.kff.org/coronavirus-covid-19/issue-brief/childrens-health-and-well-being-during-the-coronavirus-pandemic/>. Early research has noted high rates of irritability, clinginess, distraction, and fear among children, as well as increases in substance use among adolescents. *Id.*, p. 7. Considering that most mental health disorders begin in childhood, the psychological issues stemming from this pandemic can have lasting health and economic impacts on the DC population if the behavioral health needs of children and families are not adequately addressed in a timely manner. See Golberstein E, Wen H, Miller BF, *Coronavirus Disease 2019 (COVID-19) and Mental Health for Children and Adolescents*, *JAMA Pediatr.* 2020;174(9):819–820. doi:10.1001/jamapediatrics.2020.1456, available at: <https://jamanetwork.com/journals/jamapediatrics/fullarticle/2764730>.

<sup>2</sup> Tazra Mitchell, “[Federal Aid Package Shortchanges DC, Forces District to Rely More Heavily on Reserves](#),” DC Fiscal Policy Institute, March 30, 2020.