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MAMH BOARD REORGANIZATION

In 2022, the MAMH Board reorganized into two separate, cooperative bodies. The Governing Board of Directors determines the organizational mission and purpose, strengthens programs and services, and ensures resources are adequate to advance goals. The Community Board of Advisors leads the policy and program direction of MAMH's work.

Special thanks to members of the MAMH Board committees, including the Friend & Leader Planning Committee, Nominating Committee, and others for their work and dedication this year to ensure the success of MAMH.

Clifford Beers started a national and international mental hygiene movement in 1905 and led the establishment of MAMH in 1913.
In many ways, this past year was a turning point for mental health advocacy. For years, we struggled to get policymakers, educators, and the media to prioritize or even recognize mental health as a critical health policy issue. That has all changed.

With a growing awareness of the devastating impact of the COVID pandemic on mental health, there is now a consensus that mental health must be valued, supported, and promoted across the lifespan. News stories and social media focus almost daily on the impact of growing mental health needs, and legislators regularly reach out to MAMH to help identify solutions to service system gaps.

During this past year, MAMH took advantage of this new attention to mental health to help secure record funding increases and launch significant new programs across diverse mental health priorities. These successes, which you’ll learn more about in this Annual Report, were possible because of close partnerships among funders, advocates, policymakers, mental health workforce leaders and, most important, people living with mental health conditions and their families.

Our challenge for 2023 is to build on the momentum of the past year and think even bigger.

Our sights are set on providing mental health education to every K-12 student in the Commonwealth; breaking down barriers to true mental health parity; ensuring the successful launch of the “Behavioral Health Help Line” to guide people in crisis through service systems; and implementing behavioral health urgent care across the Commonwealth to help avoid crises in the first place.

With your leadership and support, MAMH is committed to ambitious goals. We look forward to working with you to achieve measurable progress for people with mental health conditions and their families in the Commonwealth.

Danna Mauch, PhD
December 2022

Ambassador (ret.) Barry White
December 2022
GOAL 1
SERVE AS AN EFFECTIVE CHANGE AGENT TO ADVANCE THE BEHAVIORAL HEALTH SYSTEM

BEHAVIORAL HEALTH SYSTEM REFORM

The year 2022 was truly a historic year for the advancement of multiple, comprehensive behavioral health reform efforts in Massachusetts. State reforms, including the Executive Office of Health and Human Services (EOHHS) Roadmap for Behavioral Health Reform (Roadmap); the Mental Health Omnibus Law, Chapter 177 of the Acts of 2022 (Omnibus Law); the MassHealth 1115 Waiver extension; and the Fiscal Year 2023 (FY23) State Budget; as well as national endeavors like the launch of the 988 Suicide and Crisis Lifeline, set the pace for major initiatives to better meet the needs of individuals with behavioral health conditions and their families across the Commonwealth.

Serving as a member of the Behavioral Health Advisory Commission, charged with advising on the spending of the Behavioral Health Trust Fund; Commenting on regulations proposed by MassHealth governing the operations of Community Behavioral Health Centers (CBHCs) and of mental health centers; and Adding new programs, such as CBHCs and behavioral health urgent care centers, to the Network of Care Massachusetts service directory.

The Roadmap is a multi-year state initiative designed to improve access to community-based, culturally appropriate, and timely behavioral health services. MAMH is supporting implementation of the Roadmap by:

- Serving as a member of the Behavioral Health Advisory Commission, charged with advising on the spending of the Behavioral Health Trust Fund;
- Commenting on regulations proposed by MassHealth governing the operations of Community Behavioral Health Centers (CBHCs) and of mental health centers; and
- Adding new programs, such as CBHCs and behavioral health urgent care centers, to the Network of Care Massachusetts service directory.

A key element of the Roadmap is the designation of 25 CBHCs, where Massachusetts residents can access close-to-home mental health and substance use services. CBHCs will provide early intervention, urgent care, routine treatment, recovery support, and crisis services (including mobile crisis intervention and community crisis stabilization) – all elements of a comprehensive community-based behavioral health care system.

EOHHS Roadmap for Behavioral Health Reform

In July 2022, the 988 Suicide & Crisis Lifeline was launched, providing a 24/7 talk and text hotline connecting callers to trained call operators who provide emotional support and compassionate listening and, if necessary, a warm handoff to additional services. 988 is supported by substantial financial investment by federal and state governments. MAMH helped lead advocacy and provided input to state leaders as Massachusetts began implementation of 988 as a critical gateway to crisis services.

MAMH-supported provisions – passed in the Omnibus Law (see page 5) – will help ensure the success of 988, including the establishment of a commission (on which MAMH has a seat) to advise the Administration on further development of 988 services. MAMH continues to invest in ensuring the success of 988 and its integration with other services, particularly 911 and the Roadmap’s Behavioral Health Help Line, set to launch in January 2023.
GOAL 1
SERVE AS AN EFFECTIVE CHANGE AGENT TO ADVANCE THE BEHAVIORAL HEALTH SYSTEM

Mental Health Omnibus Law
In August 2022, Governor Charlie Baker signed the Mental Health Omnibus Law, Chapter 177 of the Acts of 2022 (Omnibus Law). This historic achievement is a consequential step in transforming the Commonwealth's behavioral health system to better meet the needs of individuals, families, and communities. The Omnibus Law addresses a broad range of issues affecting individuals with behavioral health needs. The law:

- Helps children and adults who are boarding in emergency departments find therapeutic placements;
- Ensures behavioral health providers are paid the same as primary care providers for evaluation and management services;
- Expands private insurance coverage of certain behavioral health services, like emergency services programs;
- Strengthens enforcement of state and federal mental health parity laws;
- Implements Behavioral Health Urgent Care in more than 70 clinics; and
- Provides technical assistance to schools to better meet students' behavioral health needs.

The law also supports ongoing initiatives, such as implementation of the Roadmap for Behavioral Health Reform and the 988 Suicide and Crisis Lifeline.

As part of implementation of the Omnibus Law, MAMH:

- In collaboration with the Children’s Mental Health Campaign (CMHC), Health Care For All, and Health Law Advocates, participates in Division of Insurance information sessions and submits written comments to inform future regulations on provisions of the law related to insurance coverage;
- Will serve as a member of the state’s 988 Commission and the special commission on medical necessity determinations for behavioral health treatment, making recommendations for common sets of criteria and implementation standards in these respective arenas; and
- Serves on the Community Behavioral Health Promotion and Prevention Commission as it begins to advise a new Office of Behavioral Health Promotion within EOHHS.

MassHealth 1115 Waiver
MassHealth’s Section 1115 Demonstration is extended through December 2027, thanks to a request approved by the Centers for Medicare and Medicaid Services (CMS).

The demonstration extension supports integrated behavioral health and primary care for MassHealth recipients. The new agreement also:

- Offers new initiatives to expand substance use condition services and diversionary behavioral health services; and
- Advances health equity by addressing health care quality and access disparities.
GOAL 1
SERVE AS AN EFFECTIVE CHANGE AGENT TO ADVANCE THE BEHAVIORAL HEALTH SYSTEM

Massachusetts State Budget

The FY23 State Budget includes some of the largest investments in mental health and substance use services in recent decades and furthers supports many of the behavioral health care initiatives and services mentioned in this section. MAMH played a key part in advocating for and securing many of these initiatives and investments. Highlights include:

- $115M to expand outpatient and urgent behavioral health services at MassHealth;
- $6M to develop behavioral health systems of supports for K-12 students;
- $2.5M to expand Elder Mental Health Outreach Teams (EMHOTs) into new communities;
- $145M for homelessness programs and assistance for people with substance use conditions and disabilities;
- $125K for the Disability Law Center to monitor the efficacy of service delivery reforms at Bridgewater State Hospital;
- $455M for increased payments to behavioral health and human services providers to recruit and retain staff;
- $32.5M for loan forgiveness programs and recruitment efforts to address the workforce shortage in the behavioral health sector; and
- $145K for a special commission on the history of state institutions, including the history of the Walter E. Fernald State School and the Metropolitan State Hospital.

The MAMH policy team regularly publishes briefs, analyses, white papers, and other resources. Many of these documents summarize pieces of legislation and evaluate the impact on people with behavioral health conditions and their families.

Learn more on the MAMH website by following the QR code above.
GOAL 1
SERVE AS AN EFFECTIVE CHANGE AGENT TO ADVANCE THE BEHAVIORAL HEALTH SYSTEM

SAFE, AFFORDABLE HOUSING

Massachusetts urgently needs to provide prompt and effective responses to individuals with disabling mental health conditions who are experiencing chronic homelessness and housing instability. Housing is critical to both engaging in effective treatment and achieving and maintaining recovery. Significant investments were made in housing programs in 2022.

The Department of Mental Health’s (DMH) Rental Subsidy Program (RSP) is a rental voucher program designed to help those with severe and disabling mental health conditions who are experiencing homelessness and are DMH clients. For every $1M expansion of the RSP, approximately 71 individuals will secure stable, affordable housing. In 2022, MAMH led advocacy resulting in:

- **$1M for repairs for DMH-owned housing/residences** and **$4M to expand the RSP**, included in the April 2022 supplemental budget.
- **$4M for the DMH Rental Subsidy Program will help approximately 284 new individuals**, addressing a sizable portion of the need.

Safe Havens is a “housing first,” supportive housing model that provides an alternative to shelter placement. The model is designed to serve hard-to-reach individuals who are chronically unhoused and often have disabling mental health and substance use conditions. This year, MAMH led a coalition of 20 organizations – including community-based mental health providers, inpatient psychiatric providers, Clubhouses, Recovery Learning Communities, disability rights advocates, and housing advocates – in budget advocacy efforts to promote the expansion of Safe Havens.

- With leadership from Rep. Lindsay Sabadosa and Sen. Jo Comerford, **funding for three new Safe Havens created in 2022 was maintained in the FY23 state budget.**
- Recognizing the intense need for additional Safe Haven housing, EOHHS designated **an additional $2M to create three additional Safe Havens** in August 2022 using American Rescue Plan Act (ARPA) dollars.
- These investments bring the total count of Safe Haven programs in the Commonwealth from 12 to 15.
GOAL 1

SERVE AS AN EFFECTIVE CHANGE AGENT TO ADVANCE THE BEHAVIORAL HEALTH SYSTEM

CRIMINAL LEGAL SYSTEM REFORM

People with mental health conditions are significantly overrepresented in every aspect of the criminal legal system. MAMH aims to ensure that justice-involved individuals are treated fairly, receive the treatment they desire and need, and can access supports upon re-entry to the community. Progress made in 2022 includes improvements to jail diversion programming, mental health watch, and the state’s 911 system.

The Middlesex County Restoration Center Commission, co-chaired by Middlesex County Sheriff Peter Koutoujian and MAMH President and CEO Danna Mauch, continues the important work of criminal legal system diversion and is now in the procurement stages for the first pilot restoration center. Developments in 2022, guided by MAMH, include:

- A $1.65M designation in the federal appropriation bill and a $1M appropriation for continuation of the pilot in the Commonwealth’s FY23 budget; and
- Release of the Commission’s fourth annual report, including findings and recommendations, plus an implementation plan and timeline.

MAMH is a member of the Restrictive Housing Oversight Committee and advocates for better treatment of those in the criminal legal system, including incarcerated persons on mental health watch. In 2022, the Mental Health Omnibus Law established a new legal process by which an incarcerated person at risk of imminent and serious health harm may seek, through the judicial process, a transfer from mental health watch to a mental health treatment facility. This right establishes some protection for the potential risks to individuals on mental health watch, as exposed by the U.S. Department of Justice in its 2020 investigation of the MA Department of Correction.

The Omnibus Law also heralded several provisions to update and upgrade the state’s 911 system, which is essential to support the ongoing expansion of 988, including:

- Amending membership of the state 911 Commission to add: the Commissioner of the Department of Mental Health, an Association for Behavioral Healthcare representative/emergency service program provider, and a person with lived behavioral health experience and a history of interactions with the police;
- Expanding a grant program supporting Public Service Access Points (PSAPs) and regional emergency communication centers to include mobile behavioral health crisis response; and
- Requiring integration of training on identification of and response to callers experiencing behavioral health crises.
GOAL 1
SERVE AS AN EFFECTIVE CHANGE AGENT TO ADVANCE THE BEHAVIORAL HEALTH SYSTEM

CHILD AND ADOLESCENT MENTAL HEALTH

MAMH serves as an executive member of the Children's Mental Health Campaign (CMHC), a statewide network advocating for policy, systems, and practice solutions to ensure all children in Massachusetts have access to resources to prevent, diagnose, and treat mental health conditions in a timely, effective, and compassionate way.

Significant accomplishments, supported and advocated for by MAMH and its CMHC partners, in the FY23 budget include:

- $6M to strengthen multi-tiered systems of support, which foster positive school climates for the social-emotional and behavioral health needs of students;
- $4.2M for student behavioral health services at state universities and community colleges;
- $3.5M for early childhood mental health consultation services in early education and care programs to limit the number of youth expulsions and suspensions from such programs; and
- Many more investments that support youth and their families in home, school, and community.

Massachusetts youth and their caregivers experienced worsening mental health during the pandemic. Communities of color, non-native English speakers, and members of the LGBTQ+ communities were disproportionately affected by the pandemic.

CHILDREN'S COVID-19 IMPACT STUDY (2022)

Significant accomplishments benefiting children and adolescents in the Omnibus Law include:

- A youth emergency department (ED) boarding data portal with a real-time bed search function for pediatric acute psychiatric beds, crisis stabilization beds, community-based acute treatment beds (CBAT), intensive community-based acute treatment beds (ICBAT), continuing care beds, and post-hospitalization residential beds;
- A statewide program to assist K-12 public schools in implementing behavioral health services and supports, including consultation, coaching and technical assistance; and
- Requirements that schools have an emergency response plan – both medical and behavioral health crisis response – including a method for establishing rapid communication between the school and mobile behavioral health crisis response.
GOAL 1
SERVE AS AN EFFECTIVE CHANGE AGENT TO ADVANCE THE BEHAVIORAL HEALTH SYSTEM

OLDER ADULT BEHAVIORAL HEALTH

MAMH is committed to promoting behavioral health and wellness across the lifespan. In 2021, with generous support from the Point32Health Foundation, MAMH launched the Older Adult Behavioral Health Network (OABHN) to increase the visibility of older adult behavioral health through advocacy, workforce development and training, and public information. During this past year, OABHN has:

- Led a successful advocacy campaign to more than double state funding for mental health outreach and support programs for older adults, resulting in $2.5M and 18 grants awarded to improve older adult access to behavioral health support;
- Advocated for new Elder Mental Health Outreach Teams (EMHOTs) by demonstrating how they will provide services to underserved communities, including cultural and linguistic minorities;
- Educated providers and the public through training and other events in partnership with the Massachusetts Councils on Aging, the Massachusetts chapter of AARP, the MA Department of Mental Health, and OABHN members;
- Engaged undergraduate and graduate social work students to encourage them to consider careers in older adult behavioral health and representing Massachusetts at the National Coalition on Mental Health and Aging;
- Participated in cross-disability and aging advocacy to expand community-based options for services for older adults, including older adult peer specialists, alongside the Massachusetts Dignity Alliance and the Peer Workforce Coalition; and
- Planned an in-person conference on Healing in Community scheduled for May 2023.

"We see behavioral health as critical and an important part of what we face every day. This is the decade when we are going to get this right. We need to make it a priority to have a statewide behavioral health network available to all older adults."

- DAVID STEVENS
  Older Adult Advocacy Champion
  Massachusetts Councils on Aging (1954-2022)

ACCESS TO PRESCRIPTION MEDICATIONS

Along with coalition partners, MAMH has long participated in advocacy efforts to expand the formulary of effective medications and curtail the practice of step therapy for individuals with behavioral health conditions. Step therapy refers to protocols used by health plans to require individuals to try less expensive prescription drugs even if they have already found a medication regimen that works for them. While the intent of step therapy is to lower costs, forcing individuals through repeated treatment failures to access a treatment their physician may already know is optimal can potentially compromise their functioning and increase their risk of disability.

On November 1, 2022, An Act relative to step therapy and patient safety was signed into law, which prohibits health plans from making a patient go through step therapy if they are stable on their current medication and switching off might harm them.
While insurance coverage was not identified as a barrier to accessing care in Massachusetts, caregivers reported difficulties in accessing services due to challenges contacting their child’s usual mental health providers, not knowing where to find access to new services and new providers, changes in access to school-based behavioral health services, and long wait times for both inpatient and outpatient services.

Expanded access to tele-behavioral health services improved access for many Massachusetts youth, though some caregivers, especially caregivers of youth with special needs, felt that tele-behavioral services were less effective for their children due to concerns around concentration and engagement. Caregivers also cited issues with lack of access to stable and reliable internet as a concern.

Key findings from the report include:
- While insurance coverage was not identified as a barrier to accessing care in Massachusetts, caregivers reported difficulties in accessing services due to challenges contacting their child's usual mental health providers, not knowing where to find access to new services and new providers, changes in access to school-based behavioral health services, and long wait times for both inpatient and outpatient services.
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During the pandemic, the Commonwealth began rapidly innovating to meet existing and emerging behavioral health needs. Additional recommendations for initiatives include:
- Investing in mental health promotion and prevention,
- Enhancing and expanding access to interventions and treatments,
- Investing in growing and diversifying the workforce, and
- Promoting collaboration among children's mental health service provider sectors.

**CHILDREN’S COVID-19 IMPACT STUDY**

The Children’s Mental Health Campaign (CMHC), of which MAMH is an executive member, conducted an analysis of the existing and anticipated impacts of the COVID-19 pandemic on children’s behavioral health, the associated provisions and supports, and recommendations for further initiatives. Research for this legislative report, delivered to the Executive Office of Health and Human Services (EOHHS), included a review of key literature, listening sessions, focus groups, and participant surveys.

Key findings from the report include:
- While insurance coverage was not identified as a barrier to accessing care in Massachusetts, caregivers reported difficulties in accessing services due to challenges contacting their child's usual mental health providers, not knowing where to find access to new services and new providers, changes in access to school-based behavioral health services, and long wait times for both inpatient and outpatient services.
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- Enhancing and expanding access to interventions and treatments,
- Investing in growing and diversifying the workforce, and
- Promoting collaboration among children's mental health service provider sectors.

**48%**

IN 2020, ALMOST HALF (48%) OF YOUTH AGES 14 TO 24 YEARS OLD REPORTED FEELING SO SAD OR HOPELESS FOR TWO WEEKS OR MORE THAT THEY STOPPED DOING SOME OF THEIR USUAL ACTIVITIES.

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RATES OF FEELING SAD OR HOPELESS WERE HIGHER AMONG YOUTH IDENTIFYING AS TRANS (78%) OR NON-BINARY (83%), AND YOUTH WITH A MOBILITY DISABILITY (81%) OR COGNITIVE DISABILITY (78%).

GOAL 2

DISSEMINATE KNOWLEDGE AND EDUCATE POLICY MAKERS AND THE PUBLIC TO END DISCRIMINATION

BEHAVIORAL HEALTH WORKFORCE CHALLENGES

Despite being a leader in educating, training, and licensing a behavioral health workforce that is more robust than many states, Massachusetts is experiencing a shortage of qualified behavioral health providers. This is reflected in long waiting lists for outpatient services and an insufficient number of available community residential psychiatric beds, especially for children.

With support from the Blue Cross Blue Shield of Massachusetts Foundation, Charles F. and Beatrice D. Adams Charitable Trust, and MetroWest Foundation, MAMH worked with researchers at NRI, Inc. to develop an inventory of existing initiatives in the Commonwealth designed to recruit, retain, and increase diversity of the behavioral health workforce. The inventory includes hundreds of recruitment incentives, such as hiring bonuses, offered by private agencies across the Commonwealth and provides a framework to make information about these opportunities accessible to job seekers.

The report cites recent, significant investments by the legislature and state agencies and recommends better coordination of these initiatives. Additional recommendations include:

- Building and promoting career ladders for behavioral health professionals; and
- Supporting earlier exposure to behavioral health careers.

MENTAL HEALTH EDUCATION & STUDENTS

MAMH has long advocated that students should have information and resources to help them better understand, maintain, and protect their mental health. We will continue to pursue legislation to make age-appropriate mental health education part of K-12 health education requirements.

Our website includes a specific section providing mental health education resources for students, as well as their parents, caregivers, and supporters. These student resource pages provide a place where mental health subjects and challenges are explained and addressed plainly and without stigma. The links to written articles and books, activities, videos, podcasts, apps, and other resources enable students to understand, explore, and improve upon their mental health and empower them to lead healthy lives. More planning for outreach and promotion is underway to reach students across Massachusetts wherever they are in their mental health journey.
With funding support from Mass General Brigham, MAMH awarded pilot grants to five Community Behavioral Health Centers (CBHCs) to expand student access to behavioral health urgent care services through partnerships with schools.

Each grantee will collaborate with one or more schools to implement key components of pediatric behavioral health urgent care, including:

- **Assessments for students** with an emerging behavioral health need, including on-site assessments at school;
- **Referrals** for ongoing or out-of-school care;
- **Extended hours**, including evening and weekend availability;
- **Same-day access** to psychiatric consultation; and
- **24/7 access to crisis services** if needed.

Pediatric behavioral health urgent care was developed with the Children’s Mental Health Campaign and aims to deliver services to children with emerging mental health needs before they are in crisis. The services are designed to provide an **effective alternative to the use of police or 911 crisis calls** for students in emotional distress; **minimize emergency department visits** that can better be addressed with earlier, less intensive interventions; and **minimize school expulsions, suspensions, and absences** due to behavioral health concerns.

Grantees participate in a learning community led by former DMH Commissioner Joan Mikula and receive ongoing technical assistance to support planning and implementation. With additional funding support from the Charles F. and Beatrice D. Adams Charitable Trust, an independent evaluator will help to measure the effectiveness of the interventions. MAMH is working now with an anonymous donor advised fund to support two additional sites in urban communities in the Greater Boston area.

"Emergency departments continue to be overwhelmed with patients seeking mental health care, and many are experiencing unacceptable delays in receiving treatment. The need to help students before they are in crisis is critical."

**Joy Rosen, Vice President, Massachusetts General Brigham System Behavioral and Mental Health**
GOAL 2

DISSEMINATE KNOWLEDGE AND EDUCATE POLICY MAKERS AND THE PUBLIC TO END DISCRIMINATION

COMMISSION & GROUP INVOLVEMENT

MAMH is an active member of several commissions, committees, and working groups. Many of these collaborations produce important research, communication, and advocacy results.

- ACES Coalition (NASW-MA)
- Blue Cross Blue Shield of Massachusetts Foundation
  Behavioral Health Advisory Committee
- Bridgewater State Hospital Reform Coalition
- Cambridge Health Alliance (CHA) Population Health Committee
- CEO Alliance for Mental Health ●
- Children's Behavioral Health Advisory Council
- Children's Mental Health Campaign ★
- Community Behavioral Health Promotion and Prevention Commission
- Dignity Alliance Massachusetts
- Global Alliance for Behavioral Health and Social Justice
- Health Policy Commission Advisory Board
- MARCH Coalition (Mass and Cass)
- Massachusetts Coalition for Suicide Prevention (MCSP)
- Massachusetts Fail First Coalition
- Massachusetts Housing and Shelter Alliance (MHSA)
- Massachusetts Law Reform Institute - Health Care Working Group
- Massachusetts Mental Health and Substance Use Parity Coalition
- Massachusetts Peer Workforce Coalition
- Massachusetts Rx Drug Affordability Coalition
- Massachusetts Task Force to End Loneliness and Build Community
- MassHealth and Justice Involved Coalition

- Mental Health America Affiliate
- Mental Health Coalition
- Mental Health Technology Transfer Center (MHTTC) Network National Advisory Board
- MGH Center of Excellence for Psychosocial and Systemic Research
- Middlesex County Restoration Center Commission ▲
- NEHI PCORI Advisory Committee on Integrated Care Network of Care Massachusetts Steering Committee ■
- Older Adult Behavioral Health Network (OABHN) ■
  - Discrimination Against Parents with Mental Health Conditions in Custody and Visitation Proceedings (MHLAC)
- Public and Community Psychiatry Steering Committee
- Restrictive Housing Oversight Committee
- School-Based Behavioral Health Advisory Board
- Segregated Confinement (UU/MA Against Solitary Confinement)
- State Mental Health Planning Council ▲
  - Older Adult Mental Health Collaborative
  - Housing Subcommittee
- Supported Decision Making Coalition
- Supportive Housing Coalition, United Way of Mass Bay Trauma-Informed Hampshire County Steering Committee
- We Work for Health

- Founding Member
- Executive Committee ★
- Co-Chair ■
- Chair
GOAL 3
CREASE INCLUSION AND ENSURE ACCESS TO EFFECTIVE SERVICES

NETWORK OF CARE MASSACHUSETTS

Network of Care Massachusetts (NoC MA), launched in March 2020, continues to help Massachusetts residents of all ages with mental health and substance use needs find information about resources in their communities. In 2022, the MAMH NoC MA team,

- Expanded its capacity for data maintenance, improved its ability to gather and utilize data/website analytics, and updated current service listings, including community/outpatient mental health services;
- Refreshed the Emergency Page and other crisis resources to direct users to the Behavioral Health Help Line and 988 Suicide and Crisis Lifeline;
- Maintained the Culturally Responsive Behavioral Health Hub, which provides Black, Latinx, Asian - American, and other people of color information on online support groups, local and national organizations, therapist directories, culturally responsive clinics and programs, and wellness resources;
- Was featured at the American Public Health Association's 150th Annual Conference in Boston; and
- Increased visits to the NoC MA site by 48% year over year, amounting to 761 average daily page visits. Top keywords for 2022 included: therapist, therapy, psychiatrist, mental health, and psychologist.

MAMH ONLINE: COMMUNICATIONS GROWTH IN 2022

MAMH increased our social media presence and engagement with the addition of staff to help lead communications and advancement activities. In 2022, MAMH:

- Increased our Twitter followers by nearly 34%, with more than 41,000 impressions;
- Increased our Facebook followers by almost 14%, with 43,000 impressions;
- Had a nearly 70% increase in Twitter post engagement compared to 2021, with almost 380 post link clicks and 1,100 engaged users;
- Engaged 475 advocates and supporters who collectively sent 700 emails to legislators during the 2021-2022 Legislative Session in response to Action Alert communications; and
- Shared research, knowledge, and more on our blog at MAMH.org, which saw an increase of more than 80% in unique visits compared to 2021.

Follow MAMH on Twitter @MentalHealth_MA, and find us on Facebook and LinkedIn.
FINANCIAL STATUS

FISCAL YEAR 2022 REVENUE, SOURCES AND USE OF FUNDS

FY22 MAMH revenue from all sources continued to grow.

MAMH revenues were higher than FY21 by 15% due to receipt of new grants and expanded state government funded initiatives.

MAMH also exceeded its budgeted revenue estimate for FY22 by $130,664.

MAMH draws upon the respective strengths of the organization and grant partners to move the needle on behavioral health reform in a number of key focus areas (see above).

MAMH expenditures in FY22 were lower than budgeted by $178,798 (8.8%) primarily in the area of staffing due to longer than budgeted hiring timeframes. Spending in FY22 was approximately $100,000 higher than in FY21. As of July 1, 2022, MAMH had 9.5 employees.

An unexpected and much appreciated gift: In November, 2022, MAMH received the bulk of proceeds from the Financial and Insurance Conference Professionals’ (FICP) silent auction at their annual conference in Boston. FICP presented MAMH with a check for nearly $82,000 in unrestricted funds, which Danna Mauch accepted at the Omni Boston Hotel at the Seaport (see image at left.)
THANK YOU TO OUR DONORS...

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Robin Andrews
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Since 1913, Massachusetts Association for Mental Health (MAMH) has worked to **improve understanding of mental health conditions** and **combat disparities in access to health services**.

Stay up-to-date with the work we do by following MAMH on social media or subscribing to our email newsletters. Follow the QR code to the left.

**EDUCATE.**

**MOBILIZE.**

**ADVOCATE.**

**VISION**
MAMH envisions a day when all Massachusetts residents have access to the social and economic opportunities that protect overall health and promote resilience.

**MISSION**
Advance mental health and well-being by promoting prevention, early intervention, effective treatment and research to address social, emotional, and mental health challenges. Eliminate stigma and discrimination and ensure full social, economic, and political inclusion in all aspects of community life.

**VALUES**
All people with mental health challenges should be treated with dignity and respect, and have access to services and supports they need.