

Maryland Behavioral Health Coalition

2018 CANDIDATE QUESTIONNAIRE

The Maryland Behavioral Health Coalition respectfully requests that you respond to the questions below on issues related to mental health and substance use disorders. The Maryland Behavioral Health Coalition is a diverse mix of nonprofit organizations working to ensure that individuals with mental health and substance use disorders have access to quality care and services that meet their needs.

To educate voters impartially and on a nonpartisan basis, complete candidate responses will be published verbatim on the Maryland Behavioral Health Coalition website (<http://keepthedoropenmd.org/>) on October 16, 2018. To meet our publication deadline, your responses must be received no later than October 12, 2018. If you do not respond, the publication will state Did Not Respond.

Questions and responses will be used in compliance with all IRS rules for 501(c)(3) organizations.

Please respond to each question in 200 words or less, and submit completed questionnaires to Dan Martin via email at dmartin@mhamd.org.

Thank you for taking the time to complete this questionnaire, and for taking the opportunity to communicate your views on behavioral health issues and policy.

Candidate Name: Jessica Feldmark

Office Sought: State Delegate

District: 12

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1. What would you propose to reduce stigma associated with mental health and substance use disorders?

Reducing stigma associated with mental health and substance use disorders requires a cultural shift which will only occur with increased education and understanding. When individuals living with mental illness and substance use disorders are willing to speak openly about their experience, we need to recognize and appreciate the courage that takes, respect and value their perspective and insights, and hold them up as role models. As elected leaders, we need to be careful with our language to make sure we are not inadvertently reinforcing or perpetuating stigma, and we have a responsibility to question and challenge rhetoric that draws baseless connections between mental illness and violent, criminal, or malicious behavior.

2. What strategies would you employ to reduce overdose deaths and suicides?

We must make strong commitments to and invest sufficiently in both treatment and prevention. We need to allocate the necessary resources to offer adequate crisis and addiction treatment services including inpatient psychiatric/detox beds and rehabilitation treatment as well as continuing outpatient

rehabilitation, counseling, and support. When people struggling with addiction are ready to seek help, we cannot afford to put them on a waiting list. Similarly, when someone is experiencing a psychiatric crisis, the need for treatment is immediate. We urgently need greater access to inpatient beds and a full continuum of crisis services.

3. What specific initiatives would you propose to better address the prevention, early intervention and treatment needs of children and youth living with mental illness and/or substance use disorders?

We need to invest in and require training and supports to help teachers and other professionals working with our youth learn the signs and symptoms of mental illness and substance use disorders as well as how to connect youth to the appropriate resources for treatment. While broad-ranging training for educators is a critical component, we must also recognize that such training is not a sufficient alternative to actual behavioral health expertise. Therefore, it is also critical that we provide funding to have behavioral health professionals in our schools.

4. Maryland's older adults are the fastest growing demographic with unmet mental health and substance use disorder needs. How would you address the behavioral health needs of this population?

A significant contributing factor in depression among older adults is the social isolation which many seniors experience, and one major barrier to maintaining healthy social networks is a lack of transportation. I am proud to have been a founding board member of Neighbor Ride, a volunteer-based supplemental transportation service to help seniors stay connected to their community. We must also ensure that our senior centers and other aging services are adequately funded to serve our growing senior population and address this population's evolving needs. It is also important to make sure staff in senior centers and assisted-living facilities as well as in-home care givers are properly trained to recognize the signs and symptoms of mental illness and substance use disorders and to connect seniors to treatment.

5. What would you do to increase the availability of mental health and addiction providers in the state?

We need to strengthen and strictly enforce parity laws regarding coverage and access to mental health care. We also need to increase funding to ensure adequate in-patient treatment beds are available throughout the state as well as a full continuum of addiction and crisis services.

6. How would you ensure health insurance plans are in compliance with existing behavioral health parity laws and educate consumers about their rights to equitable mental health and addiction coverage?

We need to provide stronger oversight and enforcement to hold insurance companies responsible for ensuring parity. Insurance companies must be held accountable to ensure that plans provide access to adequate networks of providers who are actually accepting patients, including youth patients.

7. What would you do to ensure that low income individuals with mental health and substance use disorders have access to safe, stable and affordable housing?

Mental health and substance use disorders are a leading cause of homelessness and housing instability. I strongly believe a housing first approach is critical, helping people achieve safe housing as a stable foundation from which to seek treatment and additional support services. I am proud of the work I did when I was Chief of Staff to the County Executive in initiating plans for Howard County's first permanent supportive housing units. In addition to providing more permanent supportive housing units, we must also commit greater funding to rental assistance and rapid rehousing programs. Not only are these initiatives effective in better serving the individuals in need, but the funding invested in these proactive efforts reduces expenses for emergency services, hospitalization, and incarceration.

8. What strategies would you employ to address the overrepresentation of individuals with behavioral health needs in Maryland jails and prisons?

Tragically, with the lack of access to appropriate treatment options, incarceration is often the result. We need to do a better job of diverting individuals with mental illness and substance use disorders from the criminal justice system into appropriate treatment programs. We also need to make sure that our criminal justice system is better equipped to appropriately and effectively respond to individuals with behavioral health needs.

9. Given the continuing rise in demand for mental health and substance use disorder services, what steps would you take to move Maryland toward a system with true on-demand access and comprehensive behavioral health crisis response services?

An effective solution to provide true on-demand access and comprehensive behavioral health crisis response services will require significant commitment and collaboration from all stakeholders – policy makers, service providers, insurance companies, advocates, patients and family members. It will also most likely require a significant investment of funding from the State, but the cost of not fixing our system would ultimately be much greater.