



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://keepthedooropenmd.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 | Ronald Young |
| Office Sought | Senate |
| District | 3 |
| Campaign Contact | self |
| Campaign Contact Phone | 240-375-4058 |
| Campaign Contact Email | ryoung6446@hotmail.com |

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

Education is the most important factor in reducing the stigma associated with mental health and substance use disorders. The relationship between the two needs to be better established and dealt with as an illness.

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

Mental health resources are underfunded and reducing the stigma would enhance opportunities for increased funding. We need more innovative programs and increased staffing, as well as more providers.

Available treatment is scarce and we lose too many individuals while awaiting treatment. Many incarcerated individuals are clean but while locked up but do not receive real treatment. When released services are not available and they fall back into previous habits. Detox centers, 24-hour hotlines, and longer term care facilities are all needed.

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?

Apps on children's phones starting at fifth or sixth grade educating, warning and informing where services are available would be useful. Telemedicine is proving to be a very successful strategy for prevention, early intervention and the treatment needs of children

and youth. There is also an effective program in Western Maryland provided by the University of Maryland. They have access to all of the patients' medical records, which assists in diagnosis and treatment.

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?

Isolation and therefore lack of socialization is a major problem with seniors. We need to make greater outreach efforts to identify older adults with unmet mental health and substance use disorder needs. We need to find ways to bring them back into the community and to provide them information on resources. This population is very trusting of their doctors and is often hesitant to ask questions. It is too easy for them mix incompatible drugs or get hooked on pain pills.

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

The simple but difficult answer is to increase funding. With this more people would enter the field. Educational awareness of the need and encouragement to enter the field is also important.

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?

As in all the questions funding and education are major needs. We must raise public awareness for the needs and educate legislators of the connections so that through persuasion or legislation health insurance plans comply with parity laws. Mental Health Treatment

and Substance Abuse Treatment need the ability to bill for simultaneous services.

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?

Low-income housing is a major problem for way too many of our people. We need increased funding from both the State and Federal Government. Local governments need to waive many fees for housing particularly for special needs groups like those with mental health and substance use disorders. We will never solve the housing problem for low-income residents until we require businesses to pay a livable wage. With this we would have more resources for those with special needs.

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

Mental Health Courts would be a first big step. The money spent on incarceration could be better spent on treatment.

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?

The Behavioral Health Administration needs to integrate mental health and substance abuse treatment. A more comprehensive approach would help with insurance funding and should build some efficiencies into the treatment and delivery of services. As on every

question a greater recognition of the need and more and greater sources of funding is needed.

