

(443) 901-0038
please verify you received



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	Susan K. McComas
Office Sought	House of Delegates
District	34 B
Campaign Contact	Susan McComas
Campaign Contact Phone	(410) 836-9449
Campaign Contact Email	smccomas@smccomas.com

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

Probably I would provide a public service announcement from famous people that had these issues. The individuals could be living or deceased. The point of the PSA is to illustrate that successful and professional people as well as the average citizen grapple with these issues. Also, I would encourage much more awareness and education regarding these issues as well as having programs about how to work with folks with mental illness and substance abuse. In fact, as we have first aid for physical conditions perhaps a first aid for mental health and substance abuse.

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

Provide walk in clinics and access to mental health professionals immediately so that folks who are in danger of harming themselves or others get immediate assistance before they act impulsively and harms themselves or others. Also, I think that more police training is important for dealing with those with mental illness.

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?

Providing parenting classes through the community colleges, parenting centers such as the Family Tree, PTA programs, as well as providing training to teachers and other gatekeepers that might spot that there is a problem that might be missed by a parent because they are too close to the situation.

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?

The first thing is awareness. Most people believe that older adults are retired and enjoy their families, hobbies, and traveling. Often times the older adults are isolated from family and friends. It is important that folks living alone are able to socialize with other people and have activities and a purpose that can sustain them through the loss of friends and family. Senior centers, churches, offices on aging, and those agencies that work with seniors can be a first line of defense. Also people need to know their neighbors so if there are emergencies or other issues they can help get the services the seniors need.

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

I would work with the medical schools, the schools of social work, and the nursing programs to encourage internships, residency programs, and public health initiatives to help with the needs. It is amazing how older adults (seniors) respond to young adults. Several assisted living facilities have taken in students as residents and they have bonded with the older residents. In other words, it is very important that neither the young or the old become isolated from society as a whole.

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?

I see this as the responsibility of the Insurance Commissioner and his office and staff. There can be audits and surveys to insure that there is parity and that consumers are educated about their rights and the obligations of the insurance industry.

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?

I would look into public/private partnerships for the rehabilitation of run down or abandoned housing. It is possible that students that are interested in the building trades could rehabilitate these houses while learning electrical, plumbing, carpentry, and other crafts to build quality, safe, and economical housing. Our education system has missed the need for instruction in the trades that require physical ability as well as good work habits.

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

Currently we have the Justice Reinvestment Act which has just been implemented. It is going to take time for the State of Maryland to see the effect of this policy. I do think that we cannot expect to see individuals that have been serving long sentences to leave the prison system which is a sheltered environment without safety nets such as a half way house system that can make sure that the substance abuse and behavioral health issues are being addressed in the community without AA or NA meetings, group counseling, appropriate medication, a job, continuing education and other supports.

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 first thing I would investigate is to see if any state has a system of true on-demand access and comprehensive behavioral health crisis response services. In other words, look for best practices and evidence based programs. The other issue is budgetary. How can this be funded without harming other important programs? There are always costs and benefits to what you spend or fail to spend on and that is always a hard calculus to project into the future. There are just too many stakeholders to predict how to handle the problem.