

Addressing Workforce Challenges Across the Behavioral Health Continuum of Care

Keynote Panel

Sergio Aguilar-Gaxiola, MD, PhD

Professor of Clinical Internal Medicine

Director, Center for Reducing Health Disparities

UC Davis School of Medicine

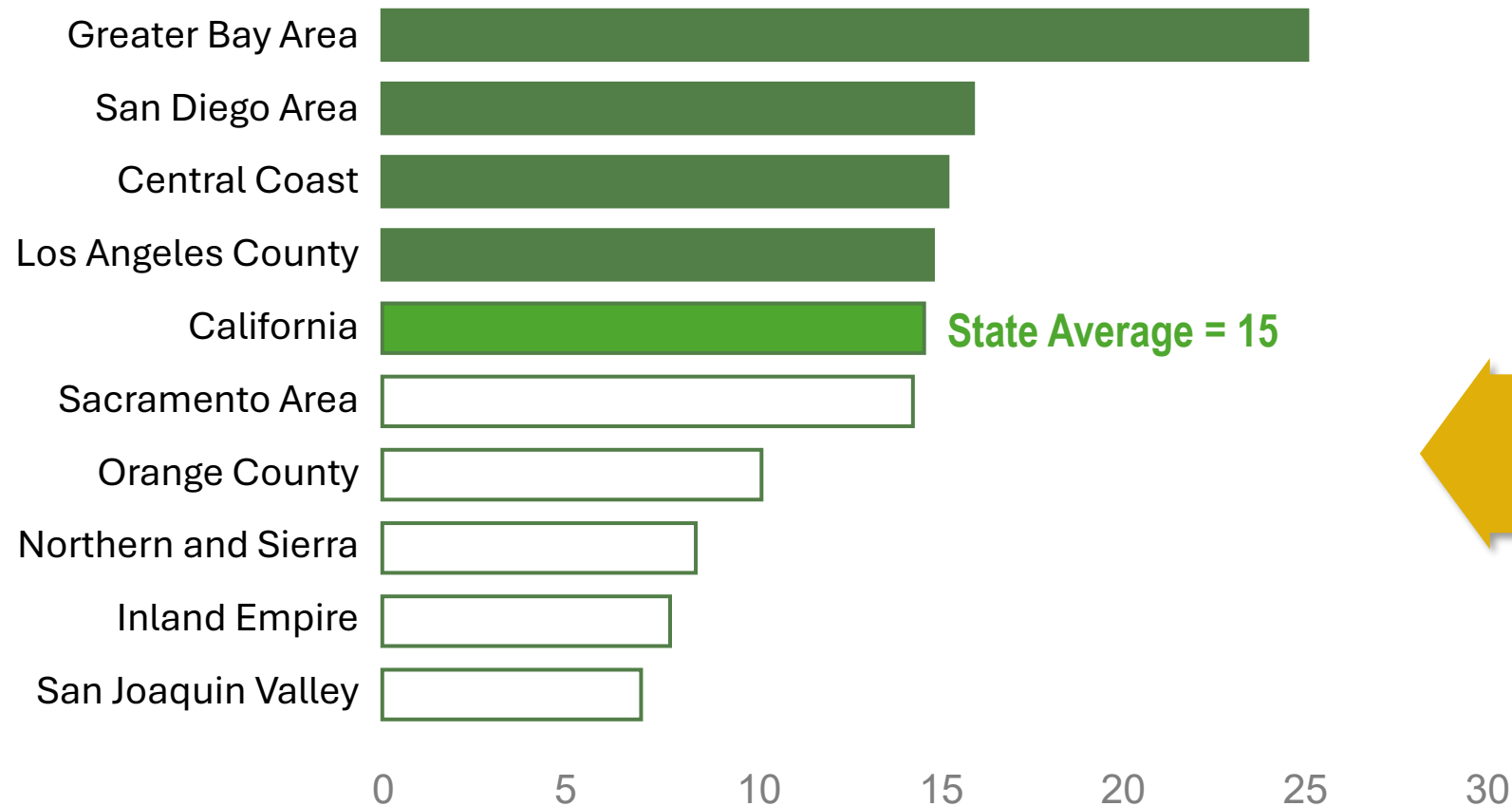
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NASEM Workshop

Why an Adequate Behavioral Health Workforce Matters

- **Demand for behavioral health services grew during the 2010s and accelerated during the COVID-19 pandemic**
- **Many people have unmet needs for behavioral health services particularly populations in rural areas such as immigrants and farmworkers**
- **There is a significant shortage of behavioral health providers in rural areas where the need for services is even more pronounced**

Active Patient Care Psychiatrist MDs per 100,000 Californians (2015) by Region



The Greater Bay Area has more than twice psychiatrists as Orange County, Northern and Sierra, Inland Empire, and San Joaquin Valley

Licensed Mental Health Professionals, by Region

California, 2020

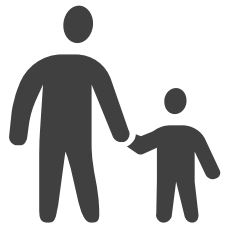
PER 100,000 POPULATION

■ HIGHER THAN STATE AVERAGE

	LICENSED PSYCHIATRISTS*	LICENSED CLINICAL SOCIAL WORKERS	LICENSED MARRIAGE AND FAMILY THERAPISTS	LICENSED PROFESSIONAL CLINICAL COUNSELORS	LICENSED PSYCHOLOGISTS	PSYCHIATRIC TECHNICIANS
Central Coast	11.6	61.8	144.4	5.2	47.1	52.6
Greater Bay Area	18.7	82.8	135.3	6.8	72.6	17.9
Inland Empire	8.2	39.0	60.8	3.7	15.9	40.9
Los Angeles County	12.0	81.1	106.2	4.0	48.7	8.8
Northern and Sierra	5.8	65.4	100.3	5.5	21.8	12.8
Orange County	7.9	56.8	106.3	5.6	40.1	15.2
Sacramento Area	12.3	72.6	98.4	5.7	37.6	12.4
San Diego Area	13.3	64.8	94.1	7.3	55.0	3.1
San Joaquin Valley	6.2	35.5	48.2	2.5	16.2	58.3
California	11.8	65.9	100.8	5.0	44.2	22.7

Mental Health Care Providers

The number of mental health professionals per population varied considerably by region in California. The Greater Bay Area's rates were higher than the state average for almost all of the professions shown, while the Inland Empire and San Joaquin Valley regions had rates that were lower than average for almost all of the professions shown.

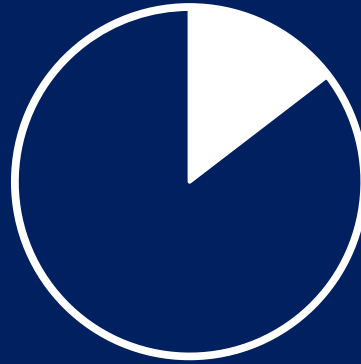


Few Mexican American and Mexican origin adults, utilize behavioral health care services when needed



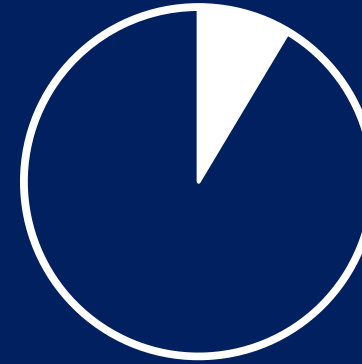
38%

U.S. Born
Residents



15%

Immigrants

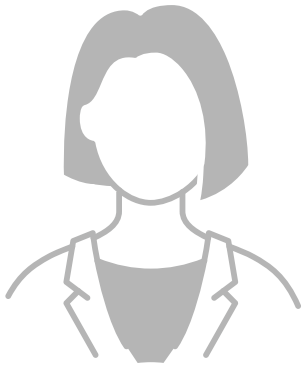


9%

Farmworkers

“Mexican American Prevalence and Services Survey” (MAPSS, 2000) study of 4,013 rural and urban Mexican American and Mexican origin adults. Aguilar-Gaxiola, et al. Translating research into action: Reducing disparities in mental health care for Mexican Americans, Psychiatric Services, 2000

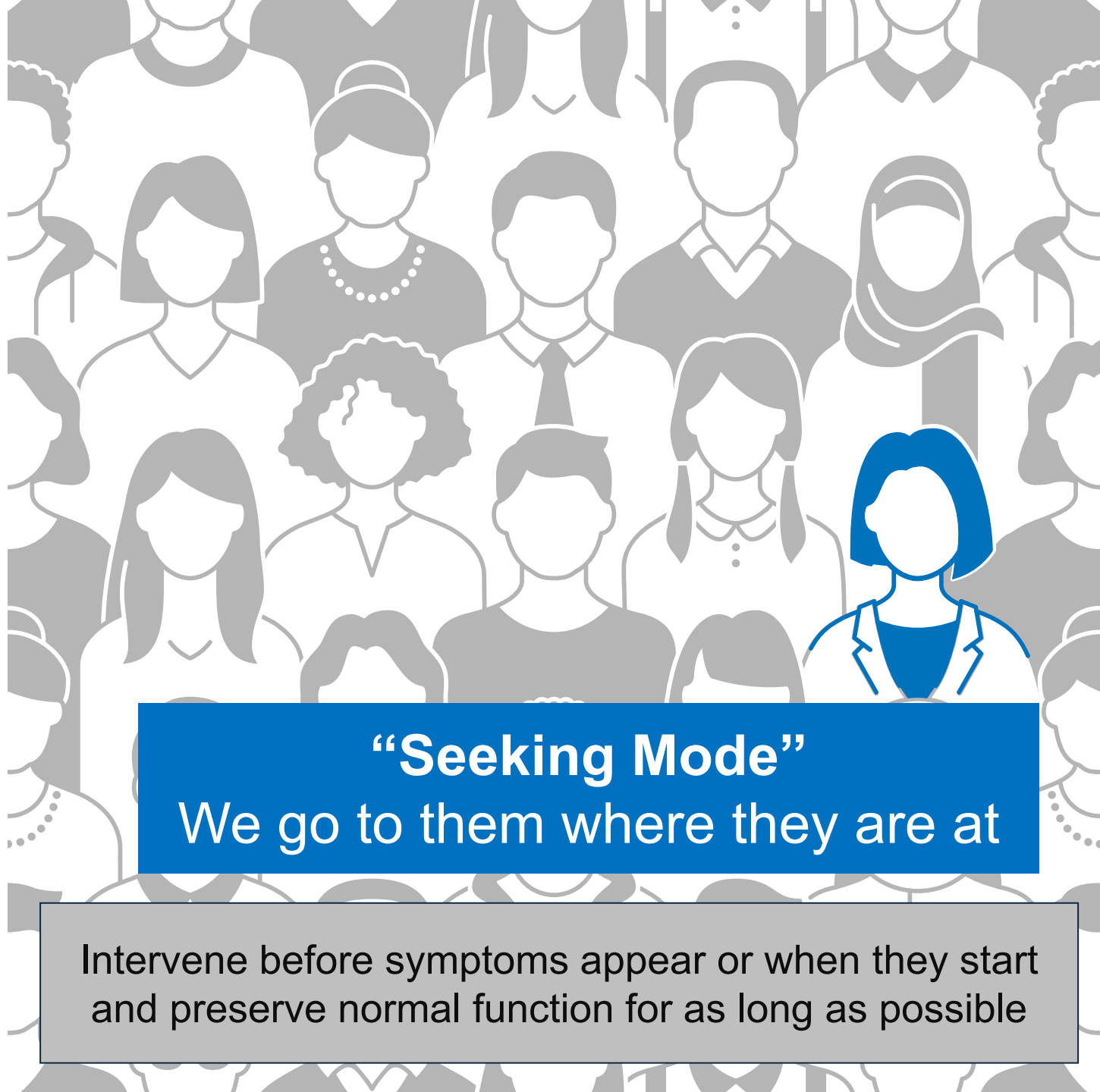
A Paradigm Shift In Service Delivery is Needed



“Waiting Mode”

Rather than waiting for
patients to come to us

Treat disorders when symptoms are
set, complications ensue and
normal function is lost



“Seeking Mode”

We go to them where they are at

Intervene before symptoms appear or when they start
and preserve normal function for as long as possible

Digital Health Equity Project



We go where people are
at, at the point of need



WELLSPACE HEALTH Sacramento County (FQHC)
AMPLA HEALTH Sutter, Glen, Colusa, and Butte
Counties (FQHC)

Digital Health Navigators



Student-Run
Free Clinics





Richland Migrant Housing Center



Clinica Tepati

Depression
screening

