ALAMEDA COUNTY BEHAVIORAL HEALTH

Behavioral Health Services Act (BHSA)

Community Input Survey for FY 26-29 Integrated Plan

Alameda County needs your input and feedback! Alameda County is seeking community feedback as part of the community program planning process for the Behavioral Health Services Act (BHSA). BHSA replaces the Mental Health Services Act (MHSA) of 2004. BHSA is funded by a one percent income tax on personal income in excess of $1 million per year.

BHSA reforms behavioral health care funding to prioritize services for people with the most significant mental health needs while adding the treatment of substance use disorders (SUD), expanding housing interventions, and addressing the behavioral health workforce priorities. It also enhances oversight, transparency, and accountability at the state and local levels.

We need your assistance to prioritize needs and to offer ideas/strategies/solutions. There are 31 voluntary questions in the survey, and it takes about 10 minutes to complete. Your responses are anonymous and optional. You're welcome to leave questions blank. Please contact the BHSA Division at bhsa@acgov.org with your questions.

Thank you for your help with this community effort!

Instructions to return survey: Please save and email your completed survey to bhsa@acgov.org with your highlighted answers. Or print out this survey and mark your completed answers and mail to 2000 Embarcadero Cove, Suite 400, Oakland, CA 94606 Attention BHSA team.

Question Title

1. Are you a resident of Alameda County?

Yes

No

Question Title

2. Please select the one that best applies to you:

I have family/loved ones that reside in Alameda County

I work in Alameda County

I am part of the behavioral health workforce in Alameda County: substance use disorder services or wellness workforce

None of the above

Question Title

3. How much do you agree/disagree with the following statement: Mental Health services are accessible in Alameda County.

In the language I speak:

Strongly Agree

Agree

Neutral

Disagree

Strongly Disagree

Question Title

4. How much do you agree/disagree with the following statement: Substance Use Disorder services are accessible in Alameda County.

Strongly Agree

Agree

Neutral

Disagree

Strongly Disagree

Question Title

5. Please rank the following *systems* needs in order of importance from your perspective. ("1" is most important; "6" is least important).

Access, Coordination, and Navigation to Mental Health or Substance Use Services

Behavioral Health Workforce (Recruitment, Development, Training, and Retention Incentives, Loan Repayment, Licensing Fees, Continuing Education, Internship and Apprenticeship Programs, Increasing Diversity)

Crisis Services

Housing Interventions

Substance Use Disorder Prevention and Treatment Services

Community Violence and Trauma

Question Title

6. For the Area of Need that you ***Ranked as #1, Most Important****,* please share any ***Ideas/Strategies/Solutions*** to help us improve this area for communities in Alameda County.

Question Title

7. For the Area of Need that you ***Ranked as #1, Most Important****,* please share any ***Ideas/Strategies/Solutions*** to help us improve this area for communities in Alameda County.

Please rank the following *population* needs from your perspective. ("1" is most important; "6" is least important).

Needs of Children (ages 0-5), Youth (ages 6-15), Transitional Age Youth (ages 16-25)

Needs of Adults (ages 25-59), Older Adults (ages 60 and over)

Needs of Family Members

Needs of (the) Disability Community

Needs of Veterans

Needs of the Re-entry Community

Question Title

8. For the Area of Need that you ***Ranked as #1, Most Important****,* please share any ***Ideas/Strategies/Solutions*** to help us improve this area for communities in Alameda County.

Question Title

9. What is your Zip Code?

Question Title

10. My Age Range is:

Under 15

16-25

26-59

60 and over

Prefer not to answer

Question Title

11. Do you speak any other language(s) at home besides English?

Yes

No

Question Title

12. What is your current *Gender Identity*?

Genderqueer or Gender Fluid

Man/Male

Non-binary

Two-Spirit (a term used by some Native American/Indigenous communities)

Woman/Female

Prefer not to answer

Other (please specify)

Question Title

13. Do you identify as Transgender?

Yes

No

Prefer not to answer

Question Title

14. Which of the following Best Represents how you think of yourself?

Asexual

Bisexual

Gay/Lesbian

Pansexual

Same gender loving

Straight/heterosexual (not lesbian or gay)

Prefer not to answer

Question Title

15. Which of the following *STAKEHOLDER GROUP(s)*, do you primarily represent? (Please select all that apply)

Active Military/Reserve/National Guard

Veteran

Caregiver

Community Member

Current or Former involvement with Foster Care System

Educator/works in the Education System

Family Member of person living with Mental Health and/or Substance Use Disorder

Faith Community Member

Formerly Incarcerated/Re-entry

Healthcare Workers

Individual who is current or former recipient of Mental Health and/or Substance Use Services

Law Enforcement Agency/Court Staff

Provider of Mental Health or Substance Use Disorder programming

Peer Advocate

Student

Prefer not to answer

Other (please specify)

Question Title

16. Asian: Which category/categories describe you? Mark all that apply AND add details. You may report more than one group.

Asian Indian

Bangladeshi

Chinese

Filipino

Hmong

Indonesian

Japanese

Korean

Pakistani

Sri Lankan

Taiwanese

Thai

Vietnamese

Specify:
(For example: Afghani, Burmese, Cambodian, Kyrgyz, etc.)

Question Title

17. Black or African American: Which category/categories describe you? Mark all that apply AND add details. You may report more than one group

African American

Ethiopian

Haitian

Jamaican

Nigerian

Somali

Specify:
(For example: Ghanaian, South African, Barbadian, Congolese, etc.)

Question Title

18. Latino/Latina/Latinx, Hispanic: Which category/categories describe you? Mark all that apply AND add details. You may report more than one group.

Cuban

Dominican

Guatemalan

Mexican or Mexican American

Puerto Rican

Salvadoran

Venezuelan

Specify:
(For example: Colombian, Ecuadorian, Argentinian, etc.)

Question Title

19. Middle Eastern or North African: Which category/categories describe you? Mark all that apply AND add details. You may report more than one group.

Algerian

Egyptian

Iranian

Lebanese

Moroccan

Syrian

Question Title

20. Native American, American Indian, or Alaska Native: Which category/categories describe you? Mark all that apply AND add details. You may report more than one group.

American Indian

Alaska Native

Central or South American Indian

Mam

Specify:
(For example: Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Inupiat, Nome Eskimo Community, etc.)

Question Title

21. Native Hawaiian or Other Pacific Islander: Which category/categories describe you? Mark all that apply AND add details. You may report more than one group.

Chamorro

Fijian

Guamanian

Marshallese

Native Hawaiian

Samoan

Tongan

Specify:
(For example: Palauan, Tahitian, Chuukese, etc.)

Question Title

22. White: Which category/categories describe you? Mark all that apply AND add details. You may report more than one group.

English

German

Irish

Italian

Polish

Spanish/Spaniard

Specify:
(For example: Scottish, Norwegian, Dutch, French, etc.)

Question Title

23. What kind of insurance (if any) do you have?

Medi-Cal

Private health insurance

Medicare

Medi-Medi (both Medi-Cal and Medicare)

Decline to answer

Question Title

23. What kind of insurance (if any) do you have?

Medi-Cal

Private health insurance

Medicare

Medi-Medi (both Medi-Cal and Medicare)

Decline to answer

I do not have any health insurance. Why?

Question Title

24. Do you agree with this statement: My Insurance covers Mental Health/Substance Use Disorder services?

Yes

No

I do not have health insurance

Unsure

Question Title

25. In the past two months, have you been consistently living in stable housing that you own, rent, or stay in as part of a household?

Yes

No

Other (please specify)

Question Title

26. What types of support services would someone with behavioral health challenges need in order to maintain stable housing?

Case Management

Child Care Services

Employment Support

Financial Assistance

Food Assistance

Health and Medical Support

Help Paying Utilities

Legal Support and Advocacy

Mental Health Counseling

Peer Support

Pet/Animal Support

Post Release from Incarceration/Re-entry Support

Substance Use Counseling

Supportive Housing Options

Other (please specify)

Question Title

27. Please indicate your level of awareness to changes coming to mental health services in Alameda County as a result of voters passing Proposition 1 - Behavioral Health Services Act (BHSA).

Fully aware

Aware

Neither aware or not aware

Not aware

Fully not aware

Question Title

28. Under BHSA there will be three funding categories: 1) Housing Interventions, 2) Full Service Partnerships and 3) Behavioral Health Services and Supports. The state allows counties to move a percentage of BHSA funds (up to 7% per category) from one category to another.

Do you recommend moving a small portion of funding from one category to another?

Yes

No

Question Title

29. If you answered Yes to the previous question, where would you move funds FROM?

***Housing Interventions*** - targets housing individuals who are undergoing homelessness due to serious mental illness, serious emotional disturbance, and/or substance abuse disorder.

***Full Service Partnerships*** - programs are designed for individuals with serious emotional disturbance (SED) or a severe mental illness (SMI) who would benefit from an intensive service program. The foundation of Full Service Partnerships is doing “whatever it takes” to help individuals on their path to recovery and wellness.

***Behavioral Health Services & Supports*** - includes crisis, outpatient treatment, early intervention, outreach and engagement, peer support, family support, workforce education and training, capital facilities, technological needs, and innovative pilots and projects.

Question Title

30. Which category would you move funding TO?

***Housing Interventions*** - targets housing individuals who are undergoing homelessness due to serious mental illness, serious emotional disturbance, and/or substance abuse disorder.

***Full Service Partnerships*** - programs are designed for individuals with serious emotional disturbance (SED) or a severe mental illness (SMI) who would benefit from an intensive service program. The foundation of Full Service Partnerships is doing “whatever it takes” to help individuals on their path to recovery and wellness.

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Question Title

31. ***What did We Miss***? Please share other concerns or solutions to mental health and substance use services that have not been mentioned.

Question Title

Thank you again for taking the time to provide your input on the County of Alameda's BHSA Community Input Survey. We appreciate you taking the time! To learn more about ways to get involved, please visit our website: <https://acmhsa.org/>. To see the data and results from this survey, please visit: <https://acmhsa.org/reports-data/>

Optional: Please provide your contact information if you'd like to be entered into our raffle. Five winners will receive a $25 gift card. The winner's first and last initial will be published on our website at <https://acmhsa.org/>.

Full Name

Agency/Company

Email Address

Phone Number

Question Title

This area is to rate the ease of completing this survey with 5 stars being the easiest and 1 star being difficult.

Thank you for your participation in the Alameda County Behavioral Health Services Act Community Input Survey for the FY26/29 Integrated Plan. Your input is important to us! We will share the results of the survey in our FY26/29 Integrated Plan.