

## **Region 6 Behavioral Health Board Gaps and Needs 2024**

Person Completing Form: Victoria Byrd  
Region: Region 6  
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Please list your Behavioral Health Board's Sub-Committees along with each sub-committee's Chair name and contact information:

Children's Mental Health: Kimberly Jackman  
Recovery Support Services: Michelle LaRock

Please list your region's top three goals:

1. To improve awareness of treatment providers in our region
2. Amplify our Voice
3. Promote training for both local treatments providers as well as general community members

Please list the top 3 action items for these goals:

1. Work collaboratively with another organization to compile treatment provider information in our region that can be easily accessed by the general population.
  - a. Identify barriers to treatment
  - b. Continue to work toward decreasing stigma
2. Work collaboratively with Veteran Affairs to find areas we can assist them in communication of resources and reducing stigma.
3. Foster relationships with area agencies and organizations that are working to raise awareness to prevent suicide.

Please provide short answer on your success or outcome. If not, explain why.

As a Board we continue to work to grow our membership as we continue to recruit applications for the vacant seats that we currently have. This action will help us ensure that all seats are represented on our Board within our region. We have worked hard to identify and to collaborate with local stakeholders regarding behavioral health needs identified in Region VI by inviting them into our board meetings to better educate us on the services they offer as well as seek feedback as how to support them in the concerns that they are expressing. This year we have spent the vast majority of our meetings maintaining momentum after losing our fiscal agent along with access to funding. We've spent time educating our board members on the structure and function of the Behavioral Health Board and our relationship with DBH. We now receive a monthly update from DBH by way of Talking Points and have just gotten information on a new funding request process. We have built a healthy working relationship with the new Managed Care Contract provider, Magellan. They report regularly to our board and have

kept us informed throughout the transition. We have also worked to collaborate with Idaho State University as well as the Bannock County Sheriff's Department, and City of Pocatello Police to understand from their unique perspectives what our areas biggest areas of need are.

What education and/or community events did you participate in?

- Provided mini grants to community agencies that support our mission
  - NAMI Idaho Training
- Continually dispersing information shared for local and on-line training / education opportunities (Farmer's Market)
- Children's Mental Health Wellness Wiggle in May 2024
- Awarded Mental Health Advocate of Year Award in Region 6 to Effie Jones in collaboration with Empower Idaho
- Education about Idaho Harm Reduction Program
- Provided Mini Grant to support Center for Hope South and their request for their family night initiative
- Education about a Coroner's Project to that aims to improve drug overdose death investigations and postmortem toxicology testing procedures.
- Support and distribute information on the National Crisis Hotline 988
- Support, Promote and participate in the Community Kick-Off Event for Suicide Prevention and Awareness Month/Proclamation Signing
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Please list your region's top 3 greatest gaps and needs in behavioral health.

1. Access to Treatment Providers
  - a. Particularly Children and Adolescents
2. Suicide Prevention Resources
3. Veteran's Mental Health Care
  - a. Particularly Resources and Stigma

Do you feel access to Mental Health services in your Region has improved, decreased, or is staying the same? Please explain why.

Access to acute crisis care has increased within certain parts of the Region. Transportation and access to reliable internet services are still a barrier for many. Inkom City Library will be receiving a Third Space, provided by DBH that will benefit many to access telehealth. Magellan's Mobile Crisis Teams have been organized and we are hopeful these will begin to fill a part of the gap. Access to managed primary care for mental health/illness has also seen a negligible movement. Idaho State University has contracted to University of Utah to bring Psychiatry Residents to our area. They are providing services not only to ISU students but also within many existing agencies. Providers/Clinicians continue to have long wait times for treatment. We have seen a few new agencies and providers who offer a variety of treatment modalities.

Do you feel access to Substance Use Disorder services (Prevention, Treatment, Recovery) in your Region has improved, decreased, or is staying the same? Please explain why.

Access to Substance Use Disorder treatment has improved. It appears that referrals from the Crisis Center and court referrals to SUDS treatment providers have shorter wait times than in the past. The challenges that we have identified is the follow through or willingness of those receiving services to continue to participate in the services being provided. Engagement is an important key to success that remains a barrier. The expansion of partial hospitalization programs in our area has been very helpful.

Please provide a brief 20-50 word quote from a community member, peer, or BHB member about the importance of mental health services in your region.

“Access to mental health services is often a significant challenge in rural areas in our region, where resources can be limited and distances long. However, mental health is a cornerstone of overall well-being, just as vital as any other aspect of healthcare. To build the happy, healthy community we all deserve, we must break down barriers and prioritize mental health with the same urgency and importance as physical health. By ensuring everyone has access to the support they need, we foster resilience, connection, and a brighter future for all.”

~Kayla Pedigo, LCPC

Pocatello Clinical Services Director

Mentor Idaho

### **Behavioral Health Gaps and Needs**

<b>Rate each category with 1 being the most critical in your area.</b>	<b>1-13</b>
Access to treatment providers	1
Stable Housing	6
Community Crisis Center	10
Anti-Stigma education	8
Suicide Prevention Resources	2
Children/Adolescents Mental Healthcare	4
Veteran’s Mental Healthcare	3
Caregiver supports (including education, training, emotional support, respite care, etc.)	9
Peer supports (including education, training, emotional support, etc.)	7
Substance use disorder treatment centers	5
Crisis Intervention Team (CIT) training for law enforcement officers	11
Mental Health Court	13
Other:	12

If you chose “other”, please provide more information:

We gathered information from a survey sent throughout Region 6 and asked participants to provide any additional concerns or insights they have regarding behavioral health needs in our region. They were asked to share any specific challenges, barriers, or suggestions they believe should be addressed to improve behavioral health services in Idaho's Region 6. Below are some the comments we received.

“I genuinely don’t understand what resources are available at any given time, how to access them or who qualifies for what help. I see 1 counselor on the website. That doesn’t feel quite right. Finding a private provider is such a pain. Wait times are long and if you don’t mesh with your provider you almost have to stay because it takes so much effort to find another.”

“I think it is a travesty that we do not address the direct correlation between inactivity, electronic devices, sleep disruption, social media, the poor health outcomes from the standard American diet, obesity, etc that cause the inflammation in the body and brain that directly correlate to mental health problems.”

“I believe every one of these areas is a critical need; our State is comprised of so many different ethnicities, communities, and socioeconomic spectrums that the people themselves are overlooked for a general blanket-statement of policy. We are in dire need of treatment of all forms, available for all people, in all areas - with access to medical, dental, vision, physical and mental health. If we start by appropriately addressing anti-stigma with trauma-informed education, and follow up with ensuring our people have shelter, food, clean water, sanitation, and assistance without judgment, I believe that our substance use problem will begin to recede as time goes by. The need for CIT training is vital as well. I sincerely wish that ethical social workers could ride along with law enforcement to assist in mental health crises and public interactions; not every officer is CIT informed and the implicit bias and judgment against regular, every-day citizens is very high. Idaho needs a lot of work, and I am proud to belong to an organization that is an Agent for Change.”

“We need more access to services beyond Bannock County.”

“Physiological testing for children. The waiting list is several months out (6 in Pocatello). Once you get in the services are easier to access but in the meantime it is challenging to navigate kids who need help. I ended up leaving the region to get in sooner but my job allowed me flexibility to travel to make several appointments (half day) and that isn’t feasible for most working parents.”

“I think good progress is being made in the area of suicide prevention but there is still a stigma in the community around talking about this.”

“I don’t know a lot about it however I’m being told by some teachers that counselors are not allowed to talk with students about gender identification without parent

permission. I get the liability but also it's scary to think that struggling youth might not even have access to say hey I'm struggling-especially if their parents disapprove. Additionally-this is out of like everyone's control-but mental health services are expensive, even with insurance. It's at least \$100/session out of pocket. It's like unaffordable to get mentally healthy."