

# House Behavioral Health Committee

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Chris Bouneff

[chris@namior.org](mailto:chris@namior.org)

503-230-8009

[www.namior.org](http://www.namior.org)



## About NAMI Oregon

- Free programs
  - ✓ *Everything peer-based, common lived experience.*
  - ✓ *Nationally vetted and evaluated. Updated regularly.*
- Education classes & support programs for:
  - ✓ *Parents/caregivers.*
  - ✓ *Individuals living with mental illness.*
  - ✓ *Family members and friends with loved ones living with mental illness.*
- Workshops and seminars for:
  - ✓ *Students, educators, and parents.*
  - ✓ *Community groups, first responders, employers, and others.*
- Resource Helpline
  - ✓ *2,000 calls/emails at state office.*
  - ✓ *Chapters have own resource lines.*

Year	Events	Participants
2020	1,070	9,368
2019	1,330	14,222

## Education • Support • Advocacy

### Volunteer Run:

- Central Oregon (staff)
- Clatsop Co.
- Columbia Co.
- Coos Bay
- Douglas Co.
- Eastern Oregon
- Columbia River Gorge
- Klamath Falls
- Marion/Polk Cos.
- Mid-Valley
- Southern Oregon (staff)
- Yamhill Co.

### Incorporated:

- Clackamas Co.
- Lane Co.
- Multnomah Co.
- Washington Co.






## Pre-Covid Trends for Youth & Adults

- Long-term trend of worsening over time.
- Higher self-reports of depression and anxiety.
- Increase in self-harm attempts and deaths.
- Youth: Increase in self-reports of suicidal ideation.
- Youth: Increase in emergency room visits for suicidal ideation.
- Youth: Increase in classroom behavioral health issues.

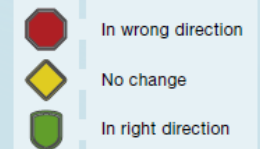
### PROGRESS AT-A-GLANCE FOR MENTAL HEALTH AND SUICIDE VARIABLES\*

Poor mental health can result in serious negative outcomes for the health and development of adolescents. It can lead to risky sexual behavior, illicit substance use, adolescent pregnancy, truancy/school dropout, and other delinquent behaviors.<sup>31,32,33</sup>

Mental health is measured in the YRBS with one question addressing persistent feelings of sadness or hopelessness that affects students' abilities to participate in their daily activities. Included are four questions on suicide ideation or behaviors including serious consideration of and planning for suicide, attempting suicide, and being medically treated for suicide attempts.

THE PERCENTAGE OF HIGH SCHOOL STUDENTS WHO:	2009 Total	2011 Total	2013 Total	2015 Total	2017 Total	2019 Total	Trend
Experienced persistent feelings of sadness or hopelessness	26.1	28.5	29.9	29.9	31.5	36.7	
Seriously considered attempting suicide	13.8	15.8	17.0	17.7	17.2	18.8	
Made a suicide plan	10.9	12.8	13.6	14.6	13.6	15.7	
Attempted suicide	6.3	7.8	8.0	8.6	7.4	8.9	
Were injured in a suicide attempt that had to be treated by a doctor or nurse	1.9	2.4	2.7	2.8	2.4	2.5	

Source: National Youth Risk Behavior Surveys, 2009-2019  
\*For the complete wording of YRBS questions, refer to Appendix.



ICIDE

## Impacts of Covid and Related Events

- Pre-Covid, there already were plenty of stressful external factors.
- March 11, 2020 – NBA shuts down.
- Beginning of an unpredictable environment that continues to disrupt all routines and to create economic uncertainty.
- Other significant sources of stress:
  - ✓ *Election and political tenor.*
  - ✓ *George Floyd murder.*
  - ✓ *Western wildfires.*
  - ✓ *Jan. 6 insurrection.*
  - ✓ *Vaccine, delta variant, lack of national cohesion.*
  - ✓ *Prevalence of natural disasters, climate change.*
- **Since NBA shutdown, we have experienced unrelenting stress.**



## Immediate Impacts

- Reduction in ER visits and outpatient enrollment as people suffered in place.
- Spike in eating disorders.
- Spike in substance use disorders.
- Children and families with complex needs went without as technology couldn't entirely fill the gap, particularly for families with young children.

## Current Status

- Significant growth in self-reporting of depression and anxiety.
- Return to Emergency Departments.
- Increased demand for information.
- Traditional treatment system not equipped or best suited to respond to cresting demands.
- **Children's system has collapsed.**
- **Adult system stuck.**
- Long waits to initiate any services at any level.
- Workforce: Not just shortage. Actually shrinking.

## How NAMI Is Adapting

- Conceiving programs and services that are:
  - ✓ *Free or low cost.*
  - ✓ *Low barrier.*
  - ✓ *In the moment.*
  - ✓ *Brief but frequent.*
  - ✓ *Peer-based.*
  - ✓ *Utilize technology as appropriate or necessary.*
- Rethink what health means in current environment.
- Rethink what environments should emphasize health.





## We're in Crisis. We Need a Crisis Response.

- Wages must increase for community treatment providers.
  - ✓ *Applies across lifespan. Includes mental health, substance use disorders, developmental disabilities.*
- Community capacity must expand faster.
  - ✓ *Oregon State Hospital cannot build/fund us out of this crisis.*
- Ensure ongoing funding for low barrier support:
  - ✓ *Safe+Strong Helpline*
  - ✓ *Oregon Behavioral Health Support Line*
  - ✓ *Oregon Youth Line*
  - ✓ *David Romprey Oregon Warmline*
  - ✓ *Reach Out Oregon Parent Warmline*

# Thank You!

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