



Data Explainer Series

Week 3: Justice Involvement – Office Hours

Series Schedule

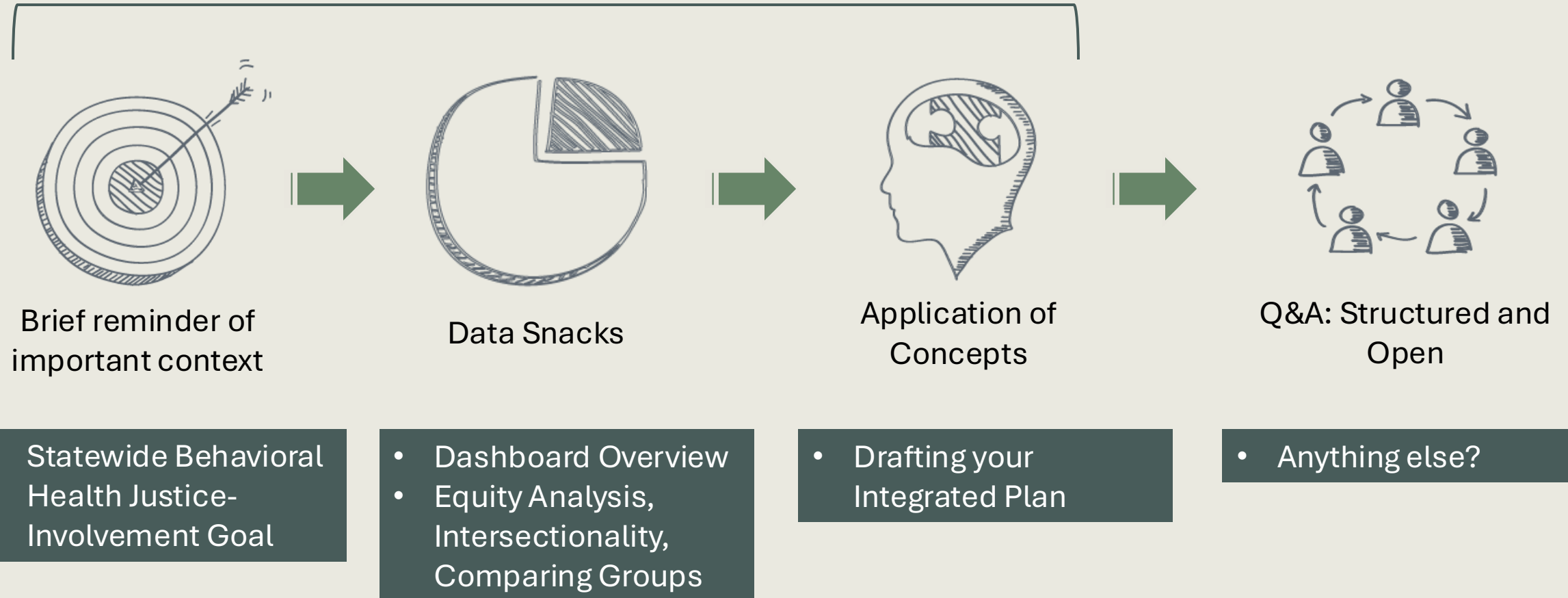
Webinar Date	Office Hours Date	Webinar Title
7/29/2025	8/1/2025	Introduction to Statewide Goals & Access to Care
8/5/2025	8/8/2025	Homelessness
8/12/2025	8/15/2025	Justice-Involvement ← <i>You Are Here</i>
8/19/2025	8/22/2025	Removal of Children from the Home
8/26/2025	8/29/2025	Overdoses and Suicides
9/2/2025	9/5/2025	Untreated Behavioral Health Conditions, Prevention and Treatment of Co-Occurring Physical Health Conditions
9/9/2025	9/12/2025	Care Experience, Quality of Life, Social Connection
9/15/2025	9/19/2025	Engagement in School and Work
9/23/2025	9/26/2025	Institutionalization
9/30/2025	9/30/2025	Collaborating with Local Planning Processes

Necessary Information

- Each week we have a new webinar topic and corresponding office hours.
- The aim of office hours is to dive a bit deeper and respond to questions.
- All webinars will be recorded and placed on our website (*office hours will not be recorded*).

Office Hours Grounding

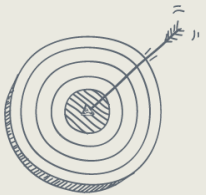
20-30 minutes



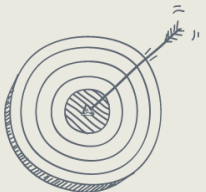
The Largest Picture

The vision for Behavioral Health Transformation is that all Californians have access to behavioral health services...

... this leads to improved health and happiness for individuals, better overall outcomes and reduced disparities.



The More Immediate Picture: Integrated Plan





Justice Involvement

Priority Goal

BHT Population Health Strategy

Use county performance on the six priority goals and choose one additional goal to inform the Community Planning Process and complete the BHSA Integrated Plan.

Priority Goals

1. Access to Care ↑
2. Homelessness ↓
3. Institutionalization ↓
4. Justice-Involvement ↓
5. Removal of Children from Home ↓
6. Untreated Behavioral Health Conditions ↓

Choose at least one

Additional Goals

1. Care Experience ↑
2. Engagement in School ↑
3. Engagement in Work ↑
4. Overdoses ↓
5. Prevention/Treatment of Co-occurring PH Conditions ↑
6. Quality of Life ↑
7. Social Connection ↑
8. Suicides ↓


Reducing Justice Involvement

- This goal focuses on decreasing the number of adults and youth with behavioral health needs who become involved in the justice system.
- More than half of incarcerated individuals live with a behavioral health condition but often receive little or no treatment. After release, they face increased risks of overdose, suicide, and poor health outcomes.
- Building coordinated system of care can prevent justice involvement and support better outcomes for those returning to the community.

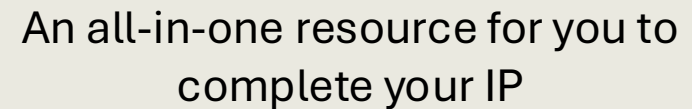
Justice Involvement Dashboard





 Research Triangle Institute 1205 High Campus Road Durham, NC 27709-2198 Phone: 919/194-4700 Fax: 919/194-4700 Email: hhs@rti.org	Primary Measure*	Supplemental*
<h1>County Population Behavioral Health Measure</h1> <h2>Workbook – Measure Access Instructions & Notes</h2>		
<h3>Table of Contents</h3>		
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Tips: The DHCS Workbook and IP Requirements

- ✓ The Workbook reflects a point-in-time as of June 2025; more recent data may be available from the primary source
- ✓ The Workbook provides calculated statewide rates that may not have been available in primary data sources
- ✓ In most cases, the year requested in the IP is available



Additional Data Tips for Your Integrated Plan

- ✓ When more recent data are not available, appropriate to use the most recent year of data available for the IP
- ✓ If publicly-available or local data are not available, can note on IP "None Available"
- ✓ Use locally available data to supplement publicly-available sources
- ✓ Phase 1 is focused on median and mean as benchmarks for planning rather than evaluation



Data Bite: Dashboard Orientation



CalMHSa is hosting an educational series through Sept. 30 to support counties in advancing California's statewide behavioral health goals and population-level measures under the Behavioral Health Services Act. The webinars and corresponding office hours will help counties incorporate these goals into Integrated Plans and strengthen data-informed strategies that improve population health outcomes. *Please note: Live participation in the series is only for county behavioral health staff.*

Visit this web page for links to recordings of each webinar, printable resource materials, and data dashboards as they are developed.

Each week's offering will focus on one or a related grouping of statewide goals and measures and examine them through:

- **Webinars (Tuesdays, 12-1 p.m.):** Focused on understanding the data, including statewide performance metrics, system context, and county health equity and disparity considerations
- **Office Hours (Fridays, 12-1 p.m.):** A collaborative, open forum for discussion and cross-county learning

CONTENTS

Webinars



Data Dashboards



BHT Planning Documents



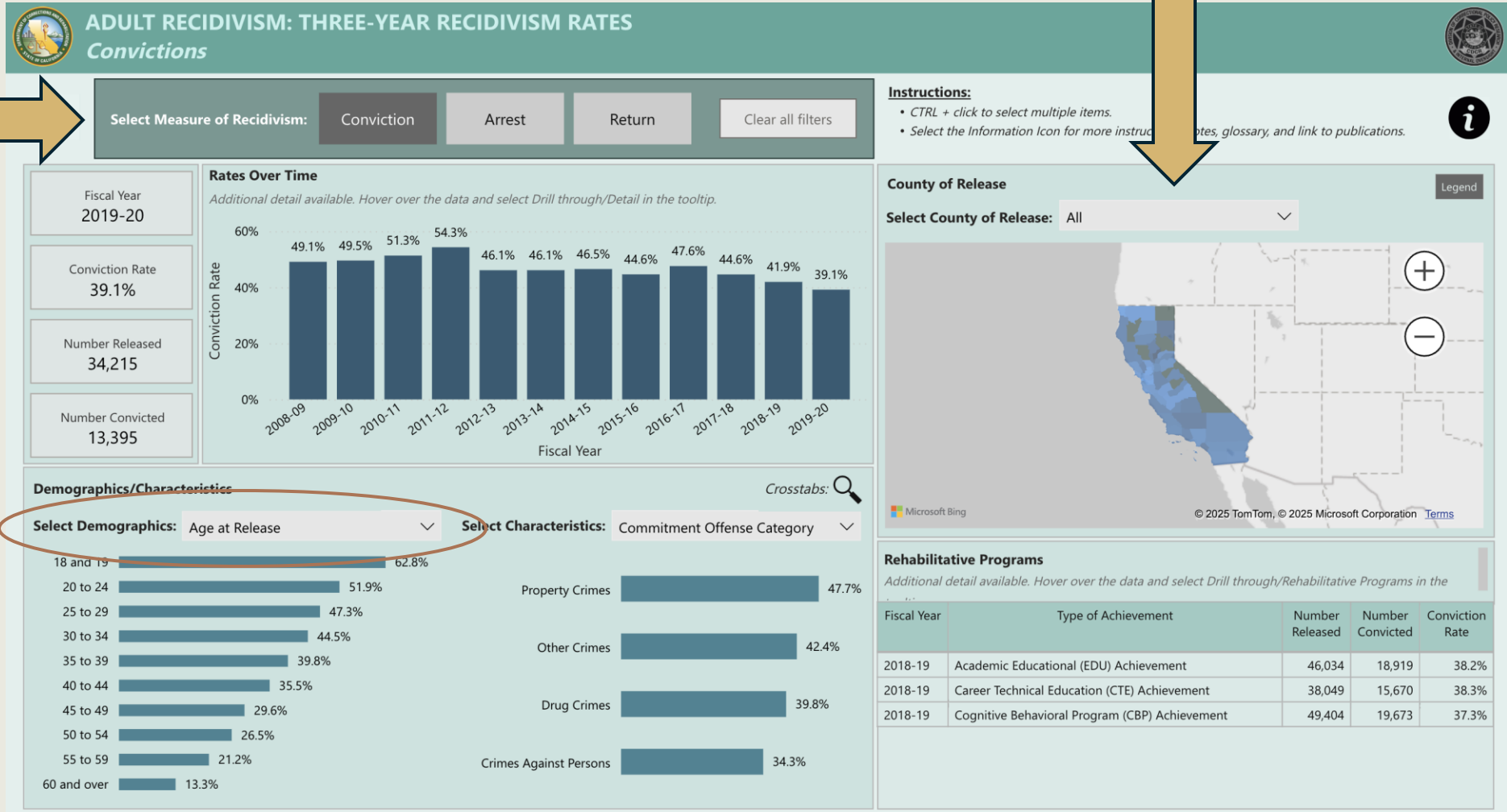
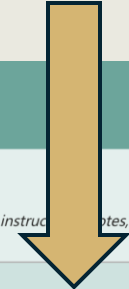
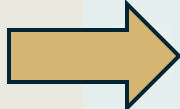
www.calmhsa.org/data-explainer-series



CDCR Recidivism Dashboard

Primary & supplemental recidivism measures

Select age, race/ethnicity, or gender



[CDCR Recidivism Dashboard Link](#)



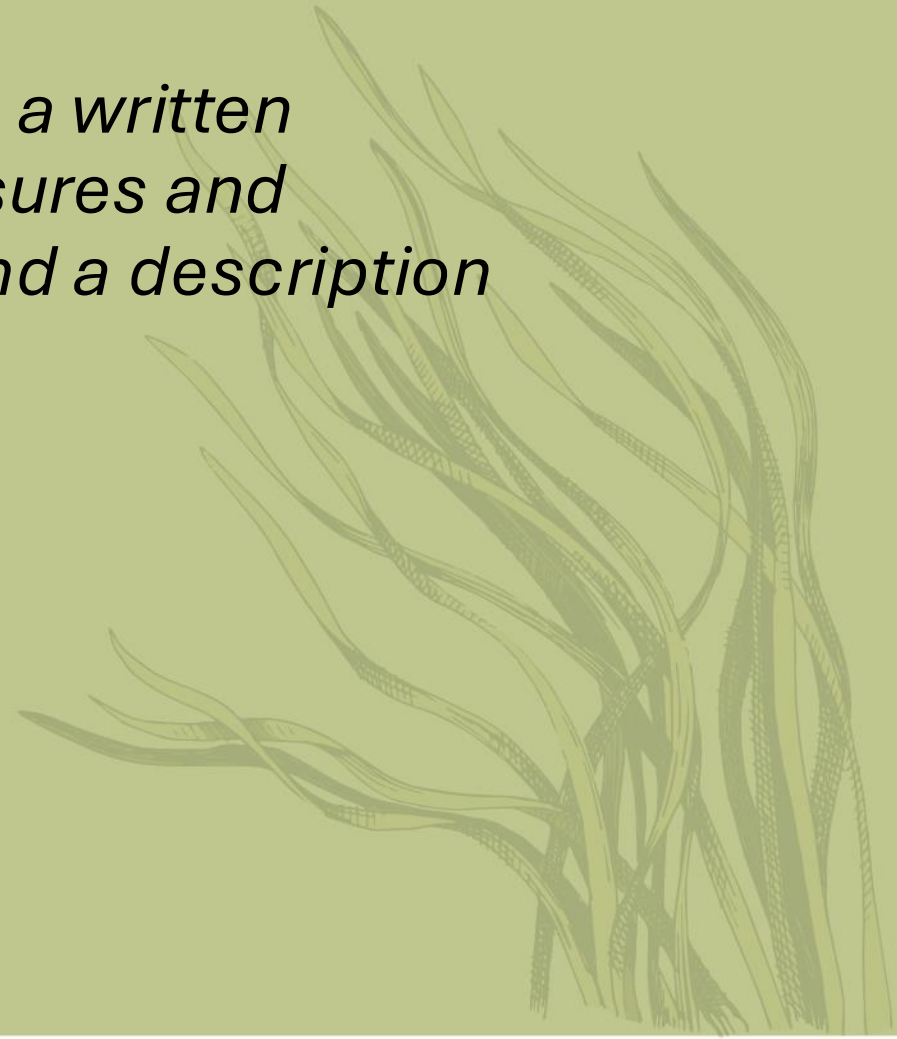
Equity & Disparities Analysis



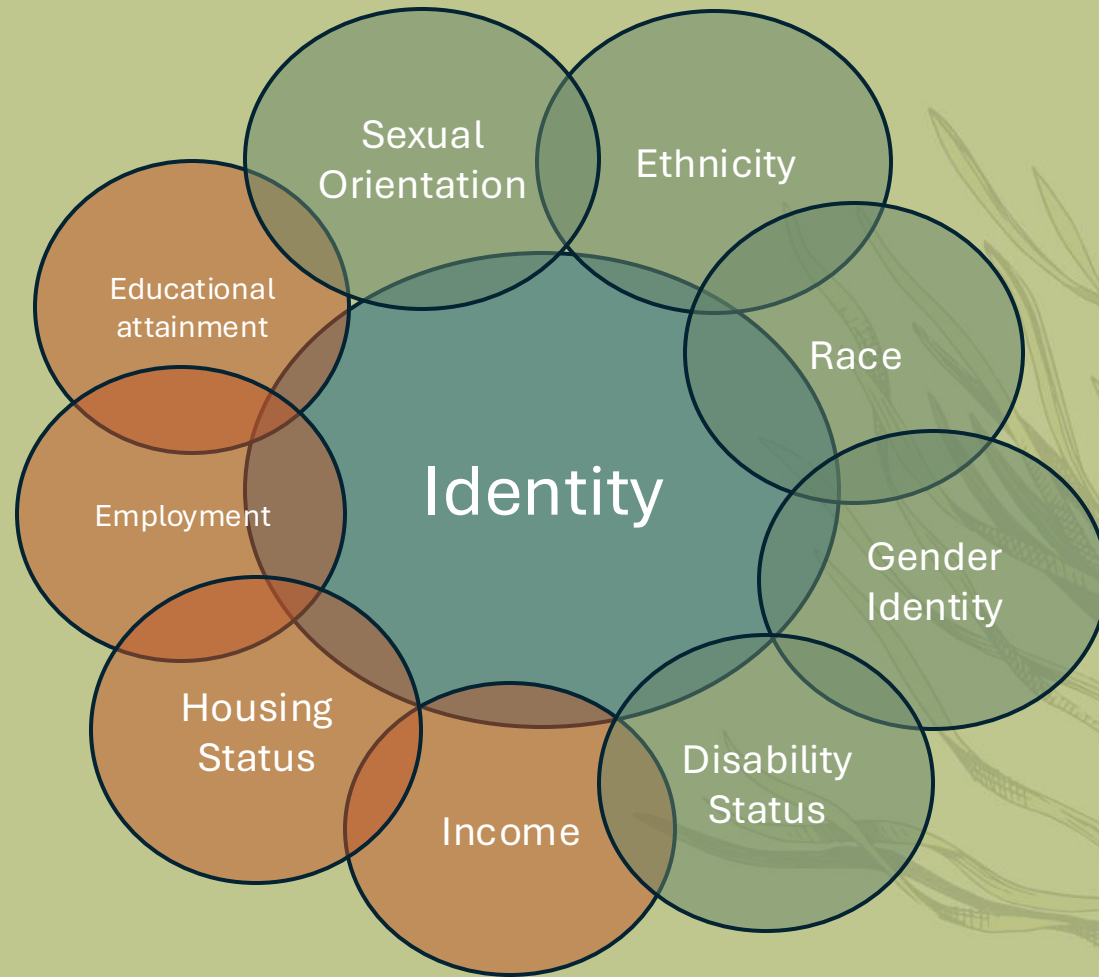
Integrated Plan: Disparities Analysis

“For any disparities observed, please provide a written summary of your findings, including the measures and population groups experiencing disparities and a description of the data that supported your analysis.”

(2,000 character limit)



Data Snack: Intersectionality



Source: Crenshaw, K. (1991). *Mapping the margins: Intersectionality, identity politics, and violence against women of color*. Stanford Law Review, **43**(6), 1241–1299. <https://doi.org/10.2307/1229039>

Measuring Equity

1. **What are the main drivers?** Identify determinants associated with the measures and goal.
2. **Which populations are most affected?** Compare sub-groups to county average and to each another.
3. **Why might you be seeing this result?** Examine potential causes of the result you're seeing.
4. **How do you want to make an impact?** Set specific goals based on inequities identified and locus of control.
5. **Are you meeting your goals?** Monitor progress and adjust when needed, including discussions and feedback from affected communities.



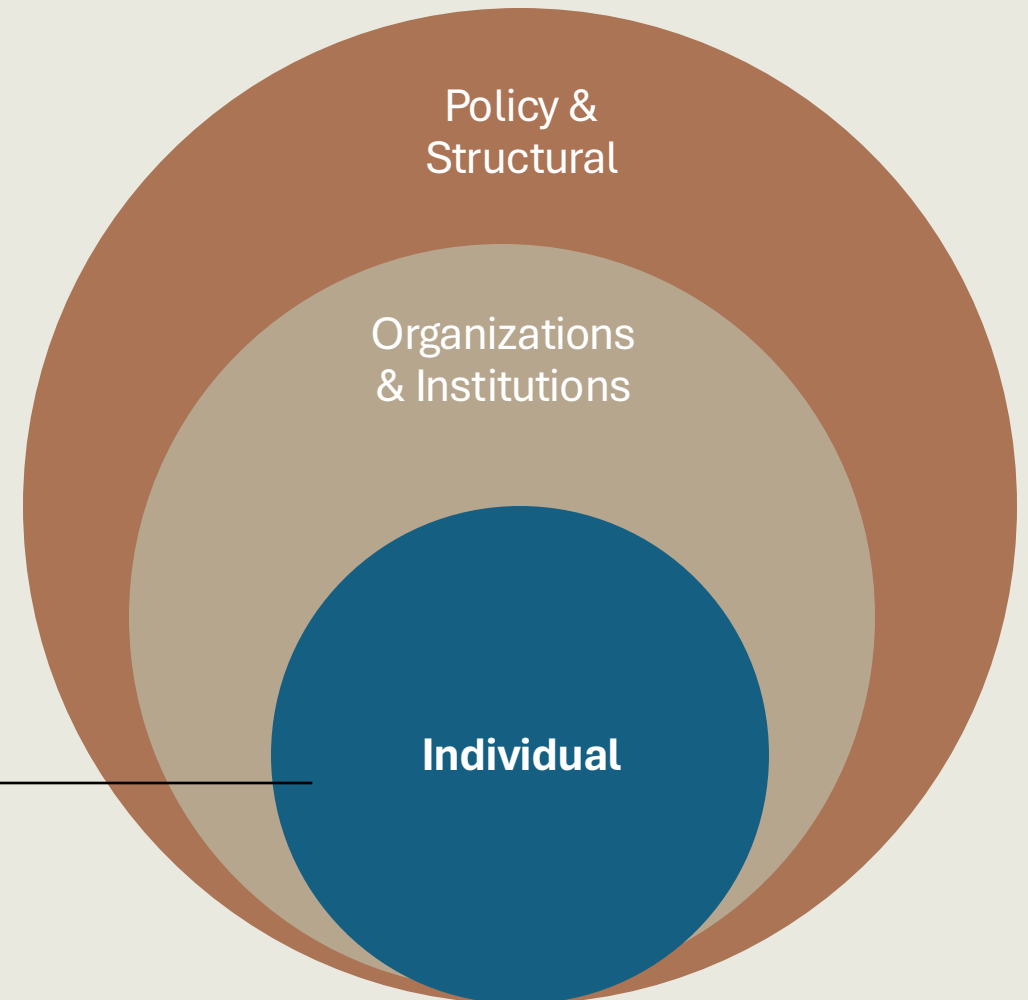
Measuring Equity

What are the main drivers?

Many factors influence the rates of justice involvement for individuals with behavioral health needs.

Individual-Level Factors

- Behavioral health acuity and treatment participation
- Poverty and economic hardship
- Housing status
- Employment/education status

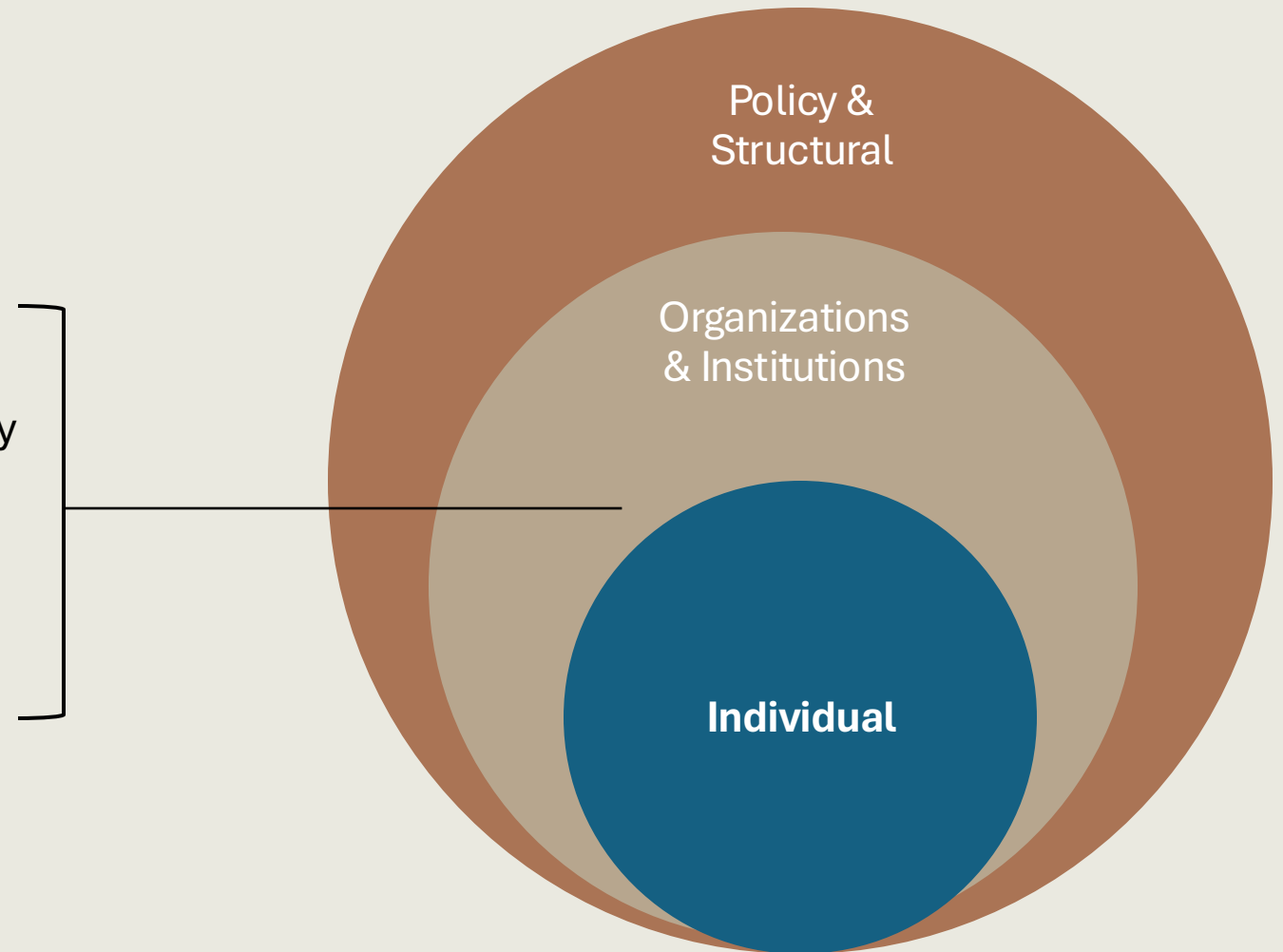


Measuring Equity

What are the main drivers?

Organization/Institution Factors

- Behavioral health service availability
- Re-entry/discharge planning
- Availability of housing and supports
- Law enforcement practices
- Social support networks

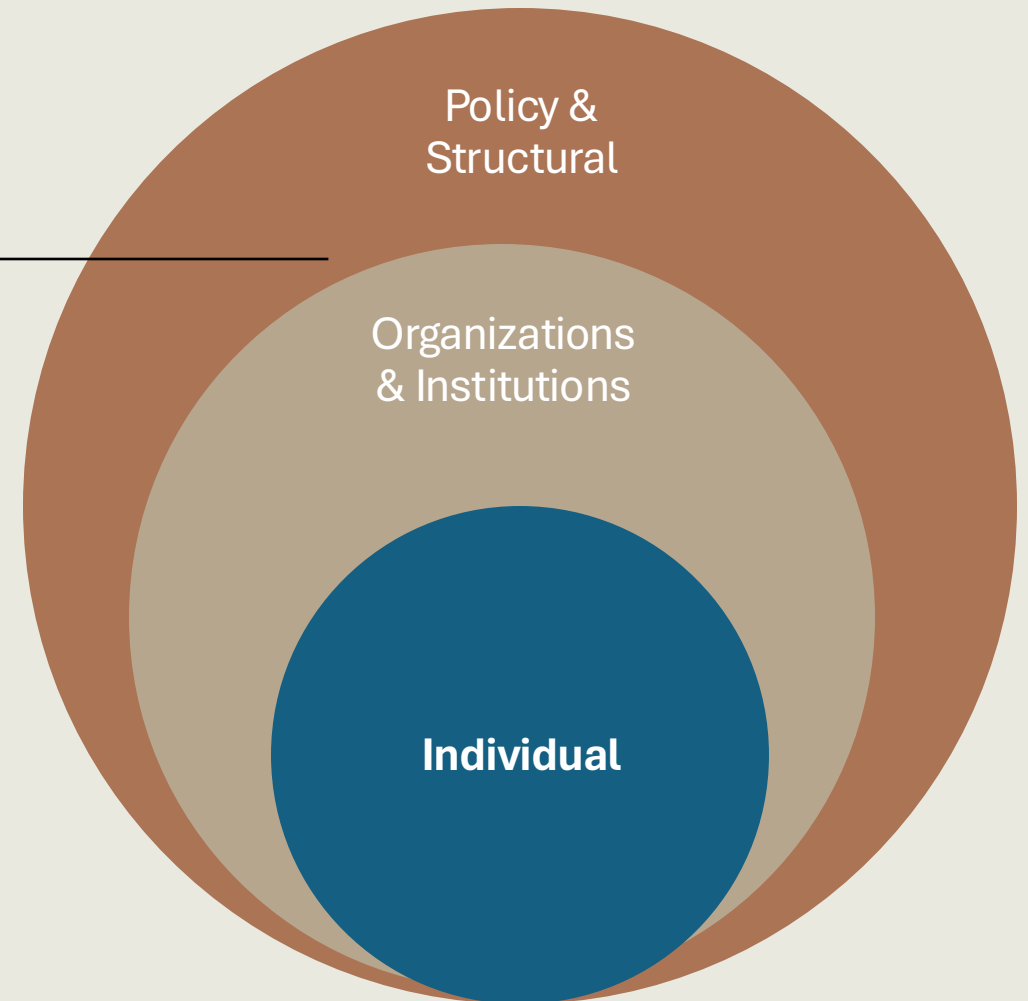


Measuring Equity

What are the main drivers?

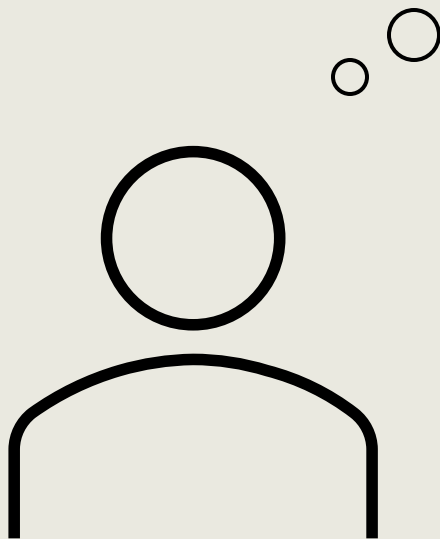
Policy and Structural Factors:

- Structural racism and disproportionality
- Community trauma, violence, and social determinants of health
- Availability of economic opportunity
- Local, state, and federal policies



Measuring Equity

Which populations are most affected?



How do other subgroups compare to the best-performing or most socially advantaged group?

How far off are different groups from the county-wide rate?

Are all racial and ethnic groups meeting minimum performance level targets?**

**** During Phase 1, DHCS does not expect BHPs to meet or exceed specific benchmarks on statewide goals or measures.**

Source: Zyllia E, Stewart A, and Lukanen E. Robert Wood Johnson Foundation. [Health Equity Measurement: Considerations for Selecting a Benchmark](#). Sept 2023.



Measuring Equity

Which populations are most affected?

	Reference	Benchmark
How do other subgroups compare to the best-performing or most socially advantaged group?	Best-performing group	Rate of the subgroup with the best rate
	Most socially advantaged group	Rate of the subgroup with most social advantage
How far off are different groups from the county-wide rate?	Comparing against a population average	County or State rate
Are all racial and ethnic groups meeting a pre-defined benchmark?**	Comparing against a set target or goal**	Example: Minimum performance level (MPL) for HEDIS measures

**** During Phase 1, DHCS does not expect BHPs to meet or exceed specific benchmarks on statewide goals or measures.**

Measuring Equity

Which populations are most affected?

Reference Point	Best-performing group	Most socially advantaged group	Comparing against a population average	Comparing against a set target or goal**
Pros & Cons	<ul style="list-style-type: none">• Expectation that “best” performance is achievable by all• Focuses on performance rather than assumptions• Focuses improvement efforts on sub-groups experiencing greatest disparities• Could change across categories• Might reinforce problematic narratives	<ul style="list-style-type: none">• Consistent group across comparisons made• Opportunity to miss intersectionality – assuming groups are a monolith of experiences• Might reinforce problematic narratives and assumptions	<ul style="list-style-type: none">• Consistent across comparisons made• Commonly used, easy to interpret• Stable given size• Some groups will always fall above and below• Might miss capturing full extent of disparities	<ul style="list-style-type: none">• Consistent across comparisons made• Encourages simultaneous improvement among all groups• Straightforward, easy to interpret• Difficult to set a realistic target• Risk of diluting focus on health equity

**** During Phase 1, DHCS does not expect BHPs to meet or exceed specific benchmarks on statewide goals or measures.**

Measuring Equity

Why might we be seeing this result?

Justice Involvement Measures: Fresno County

Measure	State Rate	Fresno County Rate	Equity-Stratified Data
Adult Arrest Rate	2,440	3,637	Black males (11,993), Hispanic males (4,837), Black females (4,262), Black all (8,198), Ages 30-39 (6,063), Ages 20-29 (4,992), Adult males (5,534)
Juvenile Arrest Rate	372	600	Male youth (983)
Adult Recidivism Conviction Rate (3-Year)	39.6%	30.8%	Black (35.4%), Ages 20-24 (41%), Ages 25-29 (39%), Ages 30-34 (34%)
Incompetent to Stand Trial (IST) Counts	14.3	19.7	N/A

Measuring Equity

Why might we be seeing this result?

Observation:

Fresno County's adult arrest rate is 3,637 per 100,000—well above the statewide rate (2,440) and median (2,646). Juvenile arrests are also elevated at 600 per 100,000, compared to the state average of 372.

When disaggregated, the data shows clear disparities: Black residents—especially men and women—face significantly higher arrest and conviction rates. Young adults (20–39) and Hispanic males are also disproportionately impacted.

Hunches & Strategies



Prompts for Generating Hunches

Start with the
Data

Center
Community
Insight

Look at
System Gaps
and
Breakdowns

Build from
What's
Working

Prompts for Generating Hunches

Start with the Data

- What patterns or disparities stand out?
- Which populations appear most impacted — and why might that be?
- Are there high-need populations being missed?
- Who isn't showing up in your data — and what might explain their absence?

Look at System Gaps and Breakdowns

- Where are people falling through the cracks?
- Where might access, trust, or system design be contributing to inequity?
- What parts of your system feel like missed opportunities for earlier support or prevention?

Prompts for Generating Hunches

Center Community Insight

- What do frontline staff, peers, or people with lived experience say is happening?
- Who are your underutilized community-based partners?
- Are there specific neighborhoods, institutions, or settings where outcomes are worse?

Build from What's Working

- What programs or partnerships are already working?
- What would it take to scale what's working?
- Where might small shifts lead to outsized impact?

Measuring Equity

Why might we be seeing this result?

Hunches: Fresno County

- What if we partnered with schools, probation, and MCPs to expand behavioral health screening, referral, and early intervention programs for youth at risk of arrest?
- What if we offered peer-led engagement and community-based stabilization services for adults with SMI or SUD who frequently encounter law enforcement?
- What if we partnered with trusted CBOs serving Black and Hispanic communities to inform and deliver outreach in ways that build trust and increase engagement?
- What if we worked with justice partners, MCPs, and Path-JI programs to better understand disparities in arrest and recidivism—and co-design more equitable diversion and treatment pathways?

Example BHSA Integrated Plan: Advancing Equity Through BH and Justice Collaboration

Problem Statement: Fresno County's adult and juvenile arrest rates are significantly higher than statewide benchmarks. Black, Hispanic, and young male residents are overrepresented across arrest and recidivism measures.

Goal: Reduce arrest and recidivism rates among overrepresented populations by expanding upstream behavioral health supports, leveraging MCP and Path-JI resources, and strengthening partnerships with trusted community organizations.

Target Populations: Black, Hispanic, and young adult residents (ages 20–39) with SMI or SUD and youth at risk of justice involvement.

Strategies:

- Partner with schools, probation, and MCPs to expand behavioral health screening and referral for youth at risk of arrest.
- Implement peer-led, community-based stabilization and crisis services for individuals with SMI/SUD.
- Work with trusted community organizations that serve Black and Hispanic residents to co-design culturally responsive outreach and services and expand reach in high-arrest neighborhoods.
- Collaborate with justice partners, MCPs, and Path-JI providers to share and analyze data that identifies racial and gender disparities in arrest and recidivism, and co-design equity-driven solutions.

Key Outcomes:

- Reduced arrest and recidivism rates among target populations
- Increased access to culturally responsive, community-based behavioral health supports
- Stronger alignment between behavioral health, MCPs, Path-JI, and justice system partners

Reminder: There are Six Priority Goals and One Additional Goal

Designing strategies that
address more than one
goal/measure at once will
work in your favor!






Office Hours Q&A

Turning Data Into Action

Discussion Question



What challenges or opportunities
have you encountered when
conducting equity analyses in your
community?

What's Next?

Please fill out the survey in the chat!

BHT Data Explainer Series: Office
Hours Experience Survey



Data Explainer Week 4: Removal of
Children from Home

Tuesday 8/19, 12-1 p.m.

Questions:

managedcare@calmhsa.org





Thank You!

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