

Social (In)Justice and Mental Health: Chapter 9- Social Injustice and the Healthcare System and Chapter 13- Social Injustice and Child Trauma

Zoom Poll Question: What are some of the more impactful suggestions you heard in your small group break out?

- Assess current resource streams to determine how to prioritize where gaps are. There's also an opportunity to be specific. For example, do we want to tackle fentanyl as a framing, etc.
- Expand trauma-informed care but ensure that the true work and implementation is done.
- Even people that are very privileged (wealthy, large network) still have a difficult time getting help with trauma, so low-income people have even less accessibility. The system is not accessible
- Education for Insurance and Physicians about health issues faced by POC to alleviate biases in determining healthcare needs.
- Provide opportunities for underrepresented individuals to access medical education and be part of the solution.
- Lack of resources for those that cannot afford great behavioral health care.
- "Need for social supports.
- Organizations & practitioners would benefit from in-depth training on trauma-informed care."
- Focus on how you can see the person receiving care as their best version (ask the person receiving are how they want to show up in life) focus on how to get them there through the lens of trauma care
- Stigma training for providers to identify labels of ODD. Increase ability for insurance to pay equally. Develop a plan for increase of workforce.
- Doctors should spend more time educating themselves on the historical racial medical markers when seeing patients of color
- "'- creating pathways for physicians
 - allowing local government funds to be flexible and covering gaps that private insurance and Medicaid don't cover"
- "Hospitals best practice care - gathering input from practitioners on improvements to psychiatric care.
- Physicians' entry - more pathways; technical support; training
- Insurance equity - low/no cost care"
- "Racism in insurance medical decisions
- All the data that is gathered to make decisions about patients
- How many Black people have died because of racism in the systems."
- "Expanding career pathways for behavioral health practitioners who reflect our diverse communities.
- Ensuring new crisis care centers are no cost to patients."
- Continued support for specific MIDD initiatives that touch the medical field (Examples of the ones we will be talking about today)
- WA Support Health Workforce Council, continue to work to fix the insurance system,
- Build pipeline of doctors and other medical providers that come from community. Include community/affected community members in policy and decision making

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- work on better access to insurance, more health care providers, more hospitals, better educated criminal justice participants.
- "include client voice during the policy development process
- increase equity by investing communities of color to increase the number of primary cares, behavioral health and administrators "
- "Find opportunities to have impact on workforce development/training and education programs
- What are the policy advocacy opportunities? New laws, etc.
- Mentorship programs for Black people "