



MENTAL HEALTH SERVICES ACT (MHSA) – PREVENTION AND EARLY INTERVENTION (PEI) FACT SHEET

What is Prevention and Early Intervention?

The Mental Health Services Act (MHSA) allocates 20% of the Mental Health Services Fund to counties for PEI as a key strategy to “prevent mental illness from becoming severe and disabling” and improve “timely access for underserved populations.”¹ PEI Programs emphasize strategies to reduce negative outcomes that may result from untreated mental illness: suicide, incarcerations, school failure or dropout, unemployment, prolonged suffering, homelessness, and removal of children from their homes.

California’s historic commitment to prevention and early intervention through the MHSA moves the mental health system towards a “help-first” instead of a “fail first” strategy. PEI identifies individuals at risk of or indicating early signs of mental illness or emotional disturbance and links them to treatment and other resources. PEI creates partnerships with schools, justice systems, primary care, and a wide range of social services and community groups and locates services in convenient places where people go for other routine activities. The MHSA specifies that all funded PEI Programs must include:

- Outreach to families, employers, primary care health care providers, and others to recognize the early signs of potentially severe and disabling mental illness
- Access and linkage to medically necessary care...as early in the onset of these conditions as practicable
- Reduction in stigma and discrimination associated with either being diagnosed with a mental illness or seeking mental health services and reduction in discrimination against people with mental illness (MHSA, Section 4, Welfare and Institutions Code (WIC) § 5840(b)).

¹ Proposition 63: Mental Health Services Act 2004

PEI-funded services are expected to “include components similar to programs that have been successful in reducing the duration of untreated severe mental illness and assisting people in quickly regaining productive lives” (MHSA, Section 4, WIC §5840(c)).

MHSA PEI Programs serve Californians of all ages. Counties (except small counties) are required to spend 51% of PEI funds on individuals between ages 0 and 25 because half of all mental disorders start by age 14 and three-fourths start by age 24.²

As of January 2011, the Mental Health Services Oversight and Accountability Commission (MHSOAC) had approved more than \$742.5 million worth of PEI funds for all 58 counties. An additional \$129 million was approved for statewide PEI efforts to prevent suicide, reduce stigma and discrimination, and improve student mental health.

A MHSOAC analysis of 223 programs in 32 counties’ PEI plans noted the following trends:

- “At-risk children, youth, and young adult populations” were the focus most frequently addressed by counties (100 percent).
- Seventy-eight percent of counties included co-occurring mental health and substance-use issues as an element of at least one of their PEI programs.
- At least three-quarters of counties included one or more programs to address the MHSA priorities of reducing school failure (94 percent), incarcerations (75 percent), and mental health-related stigma and discrimination (75 percent).

² Kessler RC, Berglund P, Demler O, Jin R, & Walters EE. (2005). Lifetime prevalence and age-of-onset distributions of DSM-IV disorders in the National Comorbidity Survey replication. *Archives of General Psychiatry* 62: 593-602.