

A group of diverse people are seated in a panel discussion. A woman in the center is speaking into a microphone, gesturing with her hand. Other panelists are listening attentively. The background is slightly blurred, showing an audience and event setting.

**Start where you are.
Use what you have.
Do what you can.**

**A Toolkit for Community Members
Advocating for Youth Behavioral
Health in California**

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Introduction

Why Your Voice Matters

In 2022, more than 600 young people, families, and community members across California came together to share their vision for a transformed behavioral health system. That process demonstrated something important: Programs designed with communities rather than for communities create better outcomes, reduce disparities, build trust, and address root causes rather than just symptoms.

But transformation only happens when communities show up. Decision-makers need to hear from you—not just once, but consistently. Your lived experience provides insights that no research study or expert analysis can match. When you speak up, you're not just sharing your story—you're helping shape systems that will impact thousands of other youth and families across California.

This toolkit is designed for anyone who wants to make their voice heard. You don't need credentials or expertise in policy. You don't need to have all the answers. What you bring—your experience, your perspective, your vision for what healing could look like—is exactly what's needed.

Every advocate started somewhere. One meeting. One comment. One story shared. Start where you are. Use what you have. Do what you can.

How to Use This Toolkit

This toolkit is organized to take you from interested community member to effective advocate:



Part I: Preparing to Engage helps you develop your personal story, gather background information, and understand when and how to engage strategically.

Part II: Where to Show Up maps California's behavioral health landscape and identifies specific opportunities at the state, county, and community levels.

Part III: Practical Tools provides checklists, sample testimony, follow-up templates, and guidance on social media advocacy.

Part IV: Finding Your Entry Point offers a quick-start action plan and resources for finding organizations and opportunities in your area.

Each section builds on the previous one, but you can also jump to specific areas based on your immediate needs. Use what's helpful. Skip what isn't. Come back as your advocacy evolves.

Part I: Preparing to Engage

Building Your Personal Story



Your story is your most powerful advocacy tool. Decision-makers hear data and policy arguments constantly. What stays with them—what changes minds—is hearing directly from people whose lives are affected by the systems they oversee.

Sharing your story in a public setting can feel vulnerable. That’s normal. Before you speak, take time to think about what you’re comfortable sharing, especially since some meetings may be recorded or livestreamed. You get to decide what to share and what to keep private.

- A strong advocacy story has three parts:

The Challenge (about 30 seconds)

- What barrier did you or your family face?
- How did the system fall short?
- What was the impact?

The Vision (about 30 seconds)

- What would have made a difference?
- What would a better system look like?
- What does healing-centered care mean to you?

The Ask (about 30 seconds)

- What specific change do you want to see?
- What action should decision-makers take?
- How will you follow up?

Example opening:

“My name is Maria, and I live in Fresno. I’m here because my 16-year-old daughter waited eight months for a therapy appointment after her first suicide attempt. By the time she got in, she had already been hospitalized twice more. Today I want to talk about why prevention and early intervention need to be a funding priority—and what I’ve learned from other families about what actually works.”

Tips for sharing your story:

- Practice with a timer. Most public comment periods are two to three minutes.
- Write it down. Having notes helps when nerves kick in.
- Focus on one or two key points rather than covering everything.
- It’s okay to show emotion. Authenticity is powerful.
- You don’t have to have all the answers. Naming the problem is valuable.

RESOURCE SPOTLIGHT: Honest, Open, Proud (HOP)

Deciding whether, when, and how to share your mental health experiences is deeply personal. The Honest, Open, Proud (HOP) program offers a structured, peer-led approach to help you think through these decisions on your own terms.

Developed by people with lived experience, HOP is a three-session program that guides participants through:

- Weighing the costs and benefits of disclosing your experiences
- Exploring different ways to share—from full openness to selective disclosure
- Crafting a personally meaningful story
- Identifying supportive people in your life

Research shows that people who have worked through disclosure decisions report greater confidence and a stronger sense of personal empowerment. HOP won't tell you what to share or push you toward any particular choice. It simply provides tools to make the decision that's right for you.

The program is available in multiple languages and has versions tailored for high school students, college students, parents, veterans, and others.

Learn more: hopprogram.org

Sharing your story in advocacy settings is powerful—but it should always be your choice. If you're uncertain about what feels right to disclose, HOP can help you find clarity before you step into a public forum.

Gathering Essential Information



Effective advocacy is grounded in understanding the landscape you're trying to change. Before engaging, gather information that will help you speak with credibility and make strategic asks.

About the meeting or opportunity:

- What is on the agenda?
- Who will be in the room? (Elected officials, staff, other community members?)
- What decisions are being made, and at what stage in the process?
- Is there public comment? How do you sign up?
- Will the meeting be recorded or livestreamed?

About the issue:

- What programs or policies are relevant to your concern?
- What funding is involved, and where does it come from?
- What has been tried before? What worked and what didn't?
- Who else is advocating on this issue?

PART I

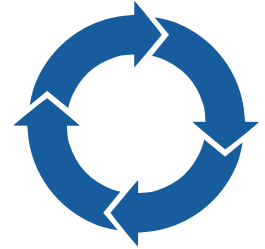
About the decision-makers:

- What is their role, and what authority do they have?
- What have they said publicly about this issue?
- What are their priorities and constraints?

You don't need to become an expert. But understanding the basics helps you ask better questions, make realistic requests, and build credibility over time.

Understanding Policy Cycles and Timing

Advocacy is always important, but some moments carry a little extra current. That said, meaningful advocacy isn't just about the calendar. It works best when it's grounded in the specific policy moment and responsive to what's happening in the broader landscape. Knowing the policy calendar helps you show up when your voice can have the most impact.



State Budget Process

The state budget is where major funding decisions are made. Key moments:

- **January:** Governor releases proposed budget.
- **February–May:** Legislative hearings and testimony opportunities.
- **June 15:** Constitutional deadline for budget passage.

County-Level Cycles

- **Board of Supervisors:** Usually meet weekly with public comment periods.
- **Mental Health Boards:** Usually meet monthly.
- **Budget discussions:** Usually spring and early summer—a critical time to engage.

Behavioral Health Services Act (BHSA) Planning

The Behavioral Health Services Act (BHSA), passed as California Proposition 1 in March 2024, replaces the Mental Health Services Act (MHSA) to transform the state's mental health and addiction treatment systems. It prioritizes services for individuals facing serious illness, homelessness, or substance use disorders (SUD), while emphasizing housing and workforce expansion.

- CDPH will publish updates on engagement opportunities related to behavioral health transformation planning on this webpage: [Partner and Community Engagement](#).

In addition to statewide opportunities, every county is required to engage community members in planning how they spend behavioral health funds. Under the Behavioral Health Services Act, counties must demonstrate meaningful partnership with stakeholders throughout the planning process—not just at the end.

PART I

Three-Year Integrated Plans are comprehensive planning processes where counties describe how they will use all available behavioral health funding. These require extensive community engagement, including listening sessions, town halls, focus groups, surveys, and public hearings. Draft plans are due each March, with final plans approved by the Board of Supervisors each June.

Annual Updates occur in years two and three of each planning cycle. While formal stakeholder engagement is encouraged rather than required, all updates must be posted for a 30-day public comment period before taking effect.

Who Counties Must Engage: The law specifically names over two dozen stakeholder groups that counties must involve, including people with lived experience, families, youth organizations, providers, education agencies, local public health jurisdictions, veterans, LGBTQ+ communities, people who have experienced homelessness, tribal representatives, and community-based organizations serving diverse populations. Importantly, engagement should not be limited to people who belong to organizations—individual community members are valued participants.

Making Participation Possible: Counties can use up to 5% of their behavioral health funds to support community participation, including stipends for people with lived experience, translation services, transportation, and childcare.

This information was obtained from the California Department of Health Care Services (DHCS) [Behavioral Health Services Act County Policy Manual](#)

- **Three-Year Plans:** Major planning processes with extensive community engagement.
- **Annual Updates:** Opportunities for input on modifications.
- **Innovation Plans:** Special projects requiring community input.
- **Timeline:** Planning typically begins six to nine months before implementation.

Taking Care of Yourself

Advocacy work can be emotionally demanding, especially when you're sharing personal experiences of system failures or harm. Taking care of yourself is not separate from the work—it makes the work sustainable.



Before a Meeting

- Get enough sleep the night before.
- Eat something and bring water and snacks (meetings can run long).
- Plan to arrive early so you're not rushed.
- Invite a friend or family member for support.
- Know that it's okay to feel nervous.

During a Meeting

If you feel overwhelmed, anxious, or disconnected, grounding techniques can help bring you back to the present moment.

4-7-8 Breathing:

- Inhale through your nose for 4 seconds.
- Hold for 7 seconds.
- Exhale slowly for 8 seconds.
- Repeat 3-4 times.

Tactile Grounding:

- Hold something textured—a piece of fabric, a key, a small object.
- Focus on how it feels: smooth, rough, cool, heavy.
- This sensory focus helps anchor you in your body.

Environment Grounding:

- Silently name five things you can see, four you can hear, three you can touch.
- Describing your surroundings engages your senses and shifts attention away from distress.

After a Meeting:

- Debrief with fellow advocates or a supportive person.
- Acknowledge what you accomplished, even if it feels small.
- Do something restorative—rest, move your body, connect with people who care about you.
- Remember that one meeting is one step in a longer journey.

Part II: Where to Show Up

Understanding California's Behavioral Health Landscape

California's behavioral health system operates at multiple levels, each with different roles and opportunities for community input.



State Level: Sets policy, allocates funding, and provides oversight. It is recommended to sign up for newsletters to know when public comment is opening.

- [California Health and Human Services Agency](#) (CalHHS)
- [Department of Health Care Services](#) (DHCS)
- [Department of Health Care Access and Information](#) (HCAI)
- [Department of Public Health](#) (CDPH)
- [Office of Youth and Community Restoration](#) (OYCR)

- [Department of Developmental Services](#) (DDS)
- [Department of Social Services](#) (DSS)
- [California Department of Aging](#) (CDA)

Commission for Behavioral Health (formerly MHSOAC) is the state body established by Proposition 63 to provide oversight and accountability for BHSO-funded programs, drive innovation across California’s behavioral health system, and ensure that people with lived experience and community stakeholders are at the center of decision-making.

- [Commission for Behavioral Health](#) (formerly MHSOAC)

California Mental Health Services Authority (CalMHSA) is a Joint Powers Authority made up of California county behavioral health departments that pools resources and expertise to develop collaborative, multi-county strategies that strengthen the workforce, improve service delivery, and advance behavioral health outcomes for all Californians.

- [California Mental Health Services Authority](#) (CalMHSA)

County Level: Delivers most services and programs

- [58 county behavioral health departments](#)
- [Local Mental Health Boards](#)
- [Local Health Departments](#)
- [Boards of Supervisors](#)

Community Level: Provides direct services and advocacy

- Community-based organizations
- Peer support networks
- Faith-based and cultural organizations
- Schools and youth-serving organizations

Understanding which level has authority over your concern helps you direct your advocacy effectively.

State-Level Opportunities

State-level advocacy can empower communities to help shape policy and ensure services reflect their needs.



CalHHS and Department-Level Engagement

CalHHS oversees multiple departments that shape and implement behavioral health policy. Opportunities include:

- Public comment during stakeholder meetings.
- Participation in advisory groups and task forces.
- Written comments during policy development.
- Engaging directly with staff members implementing programs.
- Testimony at legislative hearings on department budgets and programs.

Commission for Behavioral Health

The Commission provides oversight of BHSA implementation statewide. It holds regular public meetings where community members can:

- Public comment during stakeholder meetings.
- Participation in advisory groups and task forces.
- Written comments during policy development.
- Testimony at legislative hearings on department budgets and programs.
- Connecting directly with CalHHS after a program is enacted to raise questions, share feedback, or address implementation concerns.

Legislative Advocacy

The Legislature makes decisions about funding, policy, and oversight. You can:

- Testify at committee hearings on relevant bills.
- Contact your state representatives about behavioral health issues.
- Participate in advocacy days organized by coalitions.

County-Level Engagement

Most behavioral health services are delivered at the county level, making local advocacy particularly impactful.



Board of Supervisors

- Meets weekly in most counties with scheduled public comment.
- Makes budget decisions that determine local funding priorities.
- Appoints members to advisory bodies.
- Most effective times: budget discussions in spring and early summer.

Local Mental Health Boards

- Provide citizen oversight of county mental health services.
- Can investigate complaints, review county plans, and make recommendations.
- Hold public meetings with comment periods.
- Often have openings for community members, including consumers and family members.

BHSA Community Planning Processes

- Counties must conduct community input for their BHSA plans.
- Major planning happens every three years, with annual updates.
- Your input directly shapes how millions of dollars get spent locally.
- These processes often have limited outreach—help spread the word in your community.
- CDPH supports and coordinates public health efforts across California. Because needs differ by region, we encourage you to [contact your local health department](#) for information tailored to your community and assist with expanding outreach locally.

Quality Improvement Committees

- Review service quality and outcomes.
- Many counties include consumer representatives.
- Offer direct influence on service standards and accountability.

Community-Based Advocacy

Sometimes the most effective advocacy happens outside of formal government meetings.



Join or Start Local Advocacy Groups

- [NAMI chapters](#) (National Alliance on Mental Illness)
- [Disability Rights California regional offices](#)
- Cultural community organizations with a behavioral health focus
- Parent and family advocacy networks
- Youth-led organizations

School District Engagement

- School board meetings address mental health services and supports.
- Student advisory groups often focus on youth mental health.
- Parent organizations increasingly engage on behavioral health issues.

Coalition Building

Partnering with existing organizations is often more effective than starting from scratch. Messages delivered by trusted community messengers have a greater impact. Look for coalitions already working on issues you care about and ask how you can contribute.

Part III: Practical Tools

Meeting Preparation Checklist



Before the Meeting

- Review the agenda and any relevant background materials.
- Research the officials or staff you'll be addressing.
- Prepare your comments (2-3 minutes maximum).
- Practice with a timer.
- Write out your comments to bring with you.
- Prepare written copies to leave with officials.
- Invite someone for support if helpful.
- Plan to arrive 15 minutes early.
- Pack water and snacks.

During the Meeting

- Sign up for public comment as soon as you arrive.
- Silence your phone.
- Use grounding techniques if needed.
- Take notes on officials' responses.
- Stay for the full discussion if possible.
- Connect with other advocates present.

After the Meeting

- Debrief with fellow advocates.
- Send a follow-up email within 48 hours with your written comments.
- Note any commitments made by officials.
- Share what you learned with your community.
- Plan next steps.

Follow-Up Strategies

What happens after a meeting often matters as much as what happens during it. Following up builds relationships, holds officials accountable, and positions you for ongoing engagement.

Within 48 Hours:

Send a follow-up email that includes.

- Thanks for the opportunity to speak.
- A written version of your comments.
- Any specific asks or requests for information.
- An offer to provide additional information or connect officials with others.

PART III

- A proposed timeline for follow-up.
- Copy relevant staff members (policy aides, program managers).

Ongoing relationship building:

- Track commitments made by officials and follow up on them.
- Attend meetings regularly, not just once.
- Acknowledge when officials take positive action.
- Connect officials with other community members and resources.
- Be a reliable source of information and perspective.

Sample follow-up email:

“Dear Supervisor [Name],

Thank you for the opportunity to provide public comment at yesterday’s meeting. As I mentioned, my family’s eight-month wait for a therapy appointment highlighted gaps in our county’s early intervention services. I’m attaching written comments along with information about early intervention programs that have reduced wait times in other counties. I believe similar approaches could work here.

Could we schedule a brief meeting to discuss how [County] might implement these strategies? I’m available [days/times] and would welcome the chance to continue this conversation.

I’ll follow up in 1 week if I haven’t heard back. Thank you for your attention to this issue.

Sincerely, [Name] [Contact information]”

PART III

USING SOCIAL MEDIA FOR ADVOCACY

Social media has transformed how communities organize and make their voices heard. It enables rapid information sharing, builds community across geographic boundaries, and amplifies voices that traditional media often overlooks.

Effective strategies

Set clear goals. Are you trying to raise awareness, mobilize people to take action, promote an event, or influence a specific decision? Different goals require different approaches.

Share accurate information: Verify facts before posting. Misinformation undermines credibility and can harm the causes you care about.

Include calls to action. Tell people what you want them to do: “Attend this meeting,” “Sign this petition,” “Contact your supervisor,” “Share this post.”

Lift up community voices: Share stories and perspectives from people directly affected. Amplifying others is as powerful as sharing your own experience.

Connect online and offline: Social media is a tool, not the destination. Use it to build toward in-person organizing, meeting attendance, and relationship building.

Protect yourself and others: Be thoughtful about what personal information you share. Ask permission before sharing others’ stories. Be aware that advocacy can sometimes attract negative attention.

Document and share: Post about meetings you attend, testimony you give, and responses you receive. Transparency builds accountability.

Part IV: Finding Your Entry Point

Quick Start Action Plan



This Week:

- Identify your county’s behavioral health department and find their meeting schedule.
- Join one local advocacy organization’s mailing list or follow them on social media.
- Start developing your personal story using the framework in Part I.
- Identify one upcoming meeting you could attend.

This Month:

- Attend your first public meeting (you can just observe to start).
- Learn about your county’s Mental Health Board and how to get involved.
- Find your county’s current BHSA plan and review it.
- Connect with at least one other advocate in your community.

Next Three Months:

- Provide public comment at a meeting.
- Request a meeting with your county supervisor or their staff.
- Apply to join an advisory group or planning committee.
- Bring someone else to a meeting for the first time.

PART IV

Ongoing:

- Track legislation and policy changes that affect your community.
- Build relationships with other advocates and with officials.
- Share what you learn with your community.
- Support and mentor new advocates.

Finding Local Organizations

Search for organizations in your area using terms like:

- “[County] NAMI chapter”
- “[County] mental health advocacy”
- “[County] youth mental health coalition”
- “[County] family advocacy organization”
- “[County] peer support network”

Cultural and community-specific organizations:

Many communities have behavioral health advocacy within broader cultural organizations:

- Asian Pacific Islander community organizations
- Black mental health coalitions
- Latinx health and advocacy organizations
- Native American health centers
- LGBTQ+ community centers and advocacy groups
- Immigrant and refugee services organizations
- Faith-based community organizations

Statewide resources:

- [California Behavioral Health Planning Council](#)
- [Disability Rights California \(regional offices statewide\)](#)
- [Mental Health America of California](#)
- [California Youth Empowerment Network \(CAYEN\)](#)
- [Children Now](#)
- [The Children’s Partnership](#)
- [California Pan-Ethnic Health Network](#)
- [Behavioral Health Services Act Community Partner Toolkit](#)

County Resources

Every California county has:

- A Behavioral Health Department with public meetings.
- A Mental Health Board providing citizen oversight.
- BHSA community planning processes requiring public input.
- Board of Supervisors meetings with public comment periods.

To find information for your county:

1. Search “[Your County] behavioral health department.”
2. Look for “meetings,” “community input,” or “public participation” pages.
3. Call the main number and ask for the community engagement coordinator.
4. Check the county website for Board of Supervisors meeting schedules.
5. Ask local advocacy organizations for guidance.

Closing

The young people and families who shaped the 12 Calls-to-Action showed up because they believed change was possible—even when experience had taught them skepticism. They trusted that sharing their stories might make a difference.

But the vision communities articulated will only become reality if people keep showing up—at county meetings, in planning processes, through relationships with decision-makers, and in partnership with other advocates. You don’t need to be an expert. You don’t need to have all the answers. You don’t need to change everything at once.

"Start where you are. Use what you have. Do what you can." —Arthur Ashe

Your voice—grounded in your experience, connected to your community, raised alongside others—is what moves systems from where they are to where they need to be.

The work continues. And it needs you.