

**Maryland Department of Health Student Internship Project**

**THE CROSS-SECTION OF CULTURAL AND LINGUISTIC COMPETENCY  
AND BEHAVIORAL EQUITY**

**Summer 2024**  
**Duration: May 28 to August 2\***

**CONTACT**

**Maryland Department of Health**

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**SCHEDULE AND STIPEND**

This project is being offered through the **University of Maryland Strategic Partnership: *MPOWERING the State*** (<http://mpower.maryland.edu>) – a formal collaboration between the University of Maryland, Baltimore and the University of Maryland, College Park. The University of Maryland Strategic Partnership provides the funding for the program.

- The selected student(s) will receive either \$5,500 or \$6,500 for a 400-hour project conducted over a 10- week period in Spring/Summer, mutually defined and agreed upon by the student(s) and mentor. The stipend will be determined based on the student's education enrollment: undergraduate program students will be paid \$5,500, and graduate degree program students will be paid \$6,500.
- At the end of the term, the student will write and/or present a short white paper on their completed project to the Joint Steering Council on/about September 1. The default schedule is from **May 28 – August 2\***.
- The student must be enrolled in the Fall 2024 semester to be considered a participant in the program.
- This project is expected to be delivered via a hybrid delivery approach consisting of remote activities online, through email, by phone, or by video conference, and may require some in-person activities. Travel to, and parking at MDH is the responsibility of the student. (MDH is located at state center in Baltimore City, accessible by car, bus, subway, or light rail.)

**\*Flexibilities to complete the 10 weeks of research may be considered on a case-by-case basis**

**ELIGIBLE STUDENTS:**

University of Maryland, College Park (UMCP) College of Behavioral and Social Sciences, School of Public Policy, School of Public Health to include Master's of Public Health (MPH) students or doctoral degree (PhD) students

**OR**



**UNIVERSITY OF MARYLAND  
STRATEGIC PARTNERSHIP  
MPOWERING THE STATE**

University of Maryland, Baltimore (UMB) School of Nursing, School of Pharmacy, School of Social Work, Graduate School, or School of Medicine (medical degree (MD), Master's in Public Health (MPH), or MD-Masters dual-degree) students

**IDEAL CANDIDATE:** This project would be ideal for students with an interest in data collection and analysis, strategic planning, participating in meetings, workgroups and webinars, literature review and administrative duties. Students who apply should have general knowledge of the public behavioral health system, equity in healthcare systems, cultural and linguistic competency.

### **PROJECT DESCRIPTION**

**Purpose/Mission of Agency:** The Maryland Department of Health Behavioral Health Administration will develop an integrated process for planning, policy, and services to ensure a coordinated quality system of care is available to individuals with behavioral health conditions.

**Background:** The Behavioral Health Administration (BHA) will, through publicly-funded services and support, promote recovery, resiliency, health and wellness for individuals who have or are at risk for emotional, substance related, addictive, and/or psychiatric disorders to improve their ability to function effectively in their communities. Within the BHA, the Systems Management Unit supports the Behavioral Health Advisory Council (BHAC) Cultural and Linguistic Competency Committee (CLCC) and the Behavioral Health (BH) Equity Workgroup.

**About the Project:** The intern will serve in the Systems Management division of the MDH-Behavioral Health Administration. The intern will support collaboration between the BH Equity Workgroup and the CLCC. The intern will be functional in the evaluation of public behavioral health programs, interventions and initiatives within BHA. The intern will meet with BH Equity Subcommittee Leaders to gather assignments based on the Workgroup Goals/Objectives (see attached BHA Equity Strategic Plan for reference). The intern will decipher the specific best practices to achieve the assigned tasks, based on knowledge about funded programs. These programs include the State Opioid Response, Crisis Services, Criminal Justice programs, and services for Child and Adolescent consumers. The intern will develop a research question and conduct research and data analysis under the tutelage of the BHA Applied Research Data Team, to aggregate data from programs across Maryland jurisdictions that BHA oversees. An example of a research question could be:

- Based on an internal survey of BHA Program Staff, from the BH Equity Subcommittee, what are the suggestions to improve equity in accessing services in rural communities?
- How have the Supplemental Block Grant funded programs improved the quality of crisis services for the child, adolescent and young adult population?
- What is the primary population being served by the Criminal Justice programs? Has this population changed over the last 5 years? Are returning citizens being linked to community service within 10 days of release?

The intern will also participate in meetings with community stakeholders and provide administrative support to behavioral health professionals in the management of public health programs. The Intern will provide recommendations to the Systems Management team, based on their research and data analysis.



**Examples of work the intern could accomplish during the placement:**

- Utilize the intended work of the BHA Equity Sub-Committees to connect with the implementation of the Local Behavioral Health Authority CLC Strategic Plans.
- Research content of the BHA Equity Workgroup Strategic Plan and the BHA CLC Strategic Plan for intersectionality of purpose.
- Update the framework for the CLCC and BHA Equity Workgroup to work together.
- Make recommendations to the BHA Equity Workgroup and the CLCC on how to work collaboratively during FY2024.

**To apply for this position:**

Go to the [MPower-MDH Student Internship Application](#) and follow the instructions.

Applications will be accepted & reviewed on a *rolling basis*. The **final deadline** to apply is **11:59 PM on Sunday, February 25, 2024**.

If you have any questions, please contact Fiama Romero, [fromero@som.umaryland.edu](mailto:fromero@som.umaryland.edu) (Senior Program Specialist, Office of Student Research, UM School of Medicine).

## FY 2024-26 Behavioral Health Administration Equity Strategic Plan

Background: Behavioral Health Administration staff members gathered to create a Behavioral Health Equity Workgroup in August 2020. The Workgroup met monthly and created sub-committees, set goals and activities to achieve expected outcomes.

It should be noted that the MDH, the LBHA/CSA/LAA, and the local behavioral health partners are committed to developing strategies that result in a comprehensive and well-integrated community behavioral health system that provides equitable, accessible, high quality, culturally competent, and medically necessary services for individuals seeking services. This includes, but is not limited to, individuals who have experienced or are experiencing homelessness, trauma, or brain injury; have forensic or criminal justice involvement; are pregnant, postpartum, or parenting; are deaf or hard of hearing; identify as a member of a marginalized racial, ethnic, religious, or cultural group, tribe, or tribal organization; whose sexual orientation and gender identity or gender expression departs from prescribed sexual and gender norms; identifies as a service member or veteran; or who may need additional assistance, because of language or immigration barriers, such as non-English speaking, Limited English Proficiency (LEP) or undocumented legal status.

Mission statement - Create a behavioral health system and administration that is equitable, accessible, and provides quality services to all Marylanders.

Vision statement - Through collaboration with stakeholders and community engagement, implement practices and services that includes, recognizes and values all individuals, regardless of their age, culture, disability, gender identity, ethnicity, race, religious and/or sexual orientation.

### CORE ELEMENTS, GOALS, AND ACTIVITIES

| CORE ELEMENT 1: DATA AND EVALUATION   |
|---|
| Goal: Through a data analysis, identify and inform areas where there are gaps in health disparities within the PBHS.  |
| Activities: <ol style="list-style-type: none"><li>Analyze current data reports to examine health inequities and disparities.</li><li>Conduct environmental scan to identify data systems and information with Social Determinants of Health disparities data.</li><li>Conduct assessment of BH systems to identify health disparities data gaps and needs</li></ol>                         |
| Expected Outcomes: <ol style="list-style-type: none"><li>Identify gaps within the data that do not collect appropriate elements to identify any disparities.</li><li>Where indicated, recommend data collection elements to enhance the data collection within the PBHS.</li><li>Use data analysis as a key element to direct and retool programming to lead with an equity lens.</li></ol> |
| Intended impact: <ol style="list-style-type: none"><li>Enhance BHA's data collection to capture Social Determinants of Health (SDOH)</li><li>Drive data-led decision making related to programming and policy decisions that lead with equity.</li><li>Develop evaluation tools that will assist in measuring and progress of closing the disparity gap</li></ol>                           |

## FY 2024-26 Behavioral Health Administration Equity Strategic Plan

### CORE ELEMENT 2: PROGRAM POLICY AND IMPLEMENTATION

#### Goals:

1. To define roles and responsibilities of the BHE Workgroup.
2. Develop a framework that ensures that policies and procedures address health disparities and equity.
3. Develop policies and procedures that make addressing health disparities a focus.
4. Create and design innovative programs centered around enhancing Behavioral Health Equity.
5. Develop resource and grant framework to assess current funding allocations.
6. Identify additional resources to fund behavioral health equity activities (state and federal).
7. Make recommendations on potential reallocations to achieve behavioral health equity goals.

#### Activities:

1. Analyze current policies for potential implicit bias and/or barriers to access service.
2. Develop recommendations on strategies to address implicit bias.
3. Design and develop programs that address health disparities.
4. Develop framework for use by programs to address health equity
5. Conduct a scan of existing resources to be repurposed to meet the needs.
6. Seek out grant funding opportunities to expand activity efforts.

#### Expected Outcomes:

1. Review policies and procedures developed for Acadia.
2. Review LBHA, LAA, and CSA administrative contract
3. Review COMAR 10.63 Regulations
4. Review BHA's Cultural and Linguistic Plan to ensure policies align with plan.
5. Review ASO Provider Manual
6. Review National Best Practices
7. Recommendations on strategies after review of best practices and existing policies.
8. Utilize Train the Trainer model for MH First AID for minority/ faith-based community organizations, through Mental Health Association of MD.
9. Seek funding opportunities to expand Behavioral Health Equity programming.
10. Access existing funding where resources to Behavioral Health Equity programs
11. Submit recommendations to BHA leadership on how to maximize resources to enhance equity

#### Intended impact:

1. Influence COMAR and policy changes to lead with equity and enhance access.
2. Ensure providers treat clients with cultural humility and increase quality standards.
3. To create pilot projects that can be seen as EBP and create pathways to expansion.
4. Creating new partnerships that will expand the reach of the workgroup and create new stakeholders.

### CORE ELEMENT 3: PARTNERSHIP AND COLLABORATION

#### Goals:

1. Identify all the stakeholders and Partners
2. Participate in the BH equity process.

#### Activities:

1. Identify stakeholders and partners for the process.
2. Develop a list of partners.
3. Organize listening sessions.
4. Conduct listening sessions with community partners to learn their stated needs.

## FY 2024-26 Behavioral Health Administration Equity Strategic Plan

5. Use results of listening sessions to plan/inform stakeholder meetings.
6. Leverage existing Regional Stakeholder meetings (through DOP)

**Expected Outcomes:**

1. Stakeholders and partners identified for participation in the BH Equity Process
2. A comprehensive list of partners developed.
3. Listening sessions organized and held.
4. Needs and gaps identified; priorities set to address BH disparities.
5. Agenda for the BH equity stakeholder meeting set and meeting materials developed based on results of listening sessions. Draft BH framework developed.
6. Stakeholder meeting organized and held.

**Intended impact:**

1. Create a repository of equity partners within PBHS and external to the system.
2. Ensure that feedback stakeholders steer the strategic plan and ensure that it's inclusive.
3. To influence current funding and ensure equity leads the way resources are allocated.
4. Seeking targeted funding to expand reach of Behavioral Health Equity Work

### CORE ELEMENT 4: AWARENESS, OUTREACH, AND COMMUNITY ENGAGEMENT

**Goal:** Create and promote learning and awareness of the social determinants of health, BH equity and the impact racism plays on mental health

**Activities:**

1. Hold a Race and Mental Health Symposium
2. Create public awareness campaigns that speak to culture, gender, sexual orientation and age, for communities that are being targeted.
3. Work with the Department of Public Safety and Correctional Services to aid in the cultural competency training.
4. Host Brown bag lunch presentations
5. Restorative circles
6. Training and Webinars
7. Organization of Behavioral Health Conference

**Expected Outcomes:**

1. Create a culture within BHA and among stakeholders that enhance the understanding of equity.
2. Provide educational opportunities to conduct knowledge transfer and community support.
3. Expand awareness of Behavioral Health Equity among staff, stakeholders and providers

**Intended impact:**

1. Creating a culture of Equity and challenging staff and stakeholders to address bias.
2. Enhance knowledge and create a common language of diversity, equity and inclusion.