

St. Paul > West Side

La Familia could be just the first to fall

Cuts affecting several mental health centers, experts say

By Frederick Melo
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selor — said co-founder Jose Santos gave them three days'

The La Familia Guidance Center closed this month, the victim of an unforgiving economy, changes in public funding and a lack of donations to sustain it. So say board members of the 15-year-old counseling center, which served hundreds of low-income Latino families, as well as Hmong and East African clients, in their native languages on St. Paul's West Side.

Many in the Twin Cities' mental health community say La Familia's closing Feb. 1 came as a shock. Given state and federal budgets, others see it as a sign of things to come.

Tax records show the organization served more than 800 children, teens and adults in 2009, many of them low-income Spanish-speakers, with additional mentoring support to students in at least a dozen Twin Cities public schools. So how will mental health agencies already stretched thin by the budget climate absorb so many new patients, especially those with language needs?

"They were one of the best organizations for working with folks from the Latino community, and referring them on, getting them connected with more direct services," said Dave Haley, assistant to the director of Ramsey County Community Human Services, which has stepped in to steer the clients to new providers.

The center's 19 mental health professionals — a bilingual crew that included psychologists, psychiatrists, social workers and a marriage coun-

COUNSELING CENTER, 3B >
notice that the agency was shutting down, leaving little time to place their clients with new therapists and get their own finances in order.

Sue Abderholden, executive director of the National Alliance on Mental Illness Minnesota, said changes in how the state supports low-income mental health patients probably took a big chunk out of La Familia's finances. Last year, the state altered its General Assistance Medical Care program so that patients first would have to check in with one of a handful of designated hospitals to access mental health services. The hospital, in turn, might refer the patient to a community mental health clinic or nonprofit counseling center.

"A place like La Familia would no longer get reimbursed," she said. "They'd have to go through Regions (Hospital in St. Paul)."

In addition, counties — which provide the bulk of mental health services to the poor through partnerships with mental health providers — lost \$11 million in state funding last year for adult mental health services.

Even so, La Familia's decision to shut down rather than seek out another agency to partner with took Abderholden aback.

"I was surprised they'd closed so quickly," she said. "There were a lot of people in the community that said, 'If we'd known, we could have helped.' They had just opened up a Hmong clinic, so they expanded within the past six



months. A lot of organizations are merging.”

John Pacheco, president of the La Familia board, said the board looked into merging with other nonprofits but money was too tight to continue paying staff while that option was explored.

Other community mental health groups are suffering, too. The National Association of State Mental Health Program Directors Research Institute recently reported that 45 states surveyed by his organization have cut more than \$2.2 billion from essential mental health services since 2009. In fact, the institute noted that 85 percent of state mental health agencies made cuts in services in 2009.

“We’ve seen 4,000 state beds around the country closed” in the past three years, said Ted Lutterman, director of research analysis for the research institute. “I haven’t seen as many mental health centers closed as downsized. ... We’re also hearing that once you shrink the budget to a certain level, places are merging. They’re trying to do things to be efficient and meet their needs.

“At the same time as the recession, we’ve seen an increase in demand,” he continued. “People lose their health insurance, so they turn to the state mental health safety net. The one thing that helped for a while is the stimulus bill increased Medicaid funds that went to states. Last year, Congress renewed that, but only for the first six months of this year. We’re expecting we’re going to have another round of cuts this year as state budgets continue to go bad and the Medicaid funds go away.”

Mary Weeks, executive director of the Walk-In Counseling Center in Minneapolis, said the situation in Minnesota is already difficult enough.

In Minneapolis, Reuben Lindh Family Services and the

Family Partnership merged in January, forming a new organization. Chrysalis, A Center for Women, a Minneapolis-based chemical-dependency organization, joined the Tubman Family Alliance in 2007.

“Almost every mental health service we refer clients to has experienced funding cuts and subsequent staff reductions,” Weeks said in an e-mail. “Many have had to change their sliding-fee scale to ask for more of a contribution from clients. One totally eliminated its sliding-fee scale.

“Mental health has always been a poor stepchild to other kinds of social issues,” Weeks continued. “It will certainly not improve in the future, I fear. And clients of La Familia — people of another culture and language, some of whom may be undocumented — probably will experience additional challenges in receiving services.”

Ed Eide, executive director of the Mental Health Association of Minnesota, said foundation giving dropped during the recession, and while it’s picking up, it’s still more likely to be directed toward education and programs to serve the homeless, or to increasingly specialized areas such as children’s mental health.

“It’s tough,” Eide said. “United Way cut our funding. Mental health services are becoming less important than other areas that they fund. Foundation giving is starting to come back up. It’s slow. ... Foundations are narrowing focuses, which makes it difficult for many nonprofit organizations.”

Eide said his organization always looked at La Familia as a reputable partner.

“The thing that set them apart was they reached a pretty isolated population group — Spanish-speaking residents of St. Paul,” Eide said. “That’s not a huge population group. Their concept was to bring the whole family into addressing mental

health issues. That's a unique approach, and that's just a wonderful approach. ... We knew that if someone came to us, and we referred them to La Familia, they would be taken care of."

Roberto Avina, co-founder of La Familia, retired from the organization in July and moved to Texas. He said the recession had affected the agency's finances, but he did not foresee such a sudden end.

"I was as surprised as people who are calling me about it," Avina said. "I don't know what could have happened."

Avina, a licensed clinical social worker and a marriage and family therapist, oversaw the organization's clinical work, leaving Santos to recruit foundation support as director of community affairs.

Ramsey County Commissioner Rafael Ortega worked with Santos and Avina years ago, when both men were employed by CLUES (Comunidades Latinas Unidas En Servicio), another St. Paul mental health organization that specializes in Spanish-speaking clients.

CLUES provides a broader array of services than La Familia did, such as job counseling, tax preparation and family services. That has helped the agency diversify its funding sources and spread out its overhead, Ortega said. Pacheco said he met with CLUES director Jesse Bethke Gomez about absorbing some of La Familia's clients, though it's doubtful any one organization will be able to accommodate them all.

Ortega, a clinical social worker, helped found CLUES in 1979 and served as its president. Some considered CLUES and

La Familia rivals for public money and foundation support. In an era of managed care, "Jose and I wanted to concentrate specifically on mental health," Avina said.

Ortega said he was less interested in a post-mortem on La Familia than in finding out how to help its patients.

"One thing I did right away was to make sure those case files were secured," Ortega said. "To my understanding, we have taken control of and stored and secured those files.

"That's the first thing. The second thing is getting an analysis — what are the contracts? How can we provide the service? There's a couple possibilities to explore," Ortega continued. "We will definitely fill the gap. We've got to do it through an orderly procedure. This was a surprise to us."

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