

# ●●● *Bridging a Gap: Analyzing the Role of Behavioral Health Links in Advancing Reentry*



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AB 133 California Advancing & Innovating Medi -Cal  
(CalAIM ) Initiative - Behavioral Health Links:  
A Policy Analysis

# ●●● *Introduction*

- AB 133 (CalAIM ) legislated efforts to address health inequities for justice involved individuals in California, including the creation of Behavioral Health Links (Section 346 4011.11 (h)(5)) -
- BH Links mandates coordination between correctional facilities and community behavioral health agencies to bridge the gap between correctional health services and community -based behavioral health treatment for individuals transitioning from incarceration
- California had nearly one million jail and prison releases in 2019, with the vast majority from county jails, highlighting repeated gaps in reentry support (Wang, 2024)
- BH Links seeks to reduce recidivism, homelessness, and adverse health outcomes for returning citizens with behavioral health needs
- BH Links is part of the Justice -Involved Reentry Initiative (JIRI), which offers Medi -Cal physical and behavioral health services for up to 90 days before release (DHCS, 2023)

# ●●● *Social Work Relevance*

- BH Links is aligned with the NASW Code of Ethics, particularly the values of social justice, dignity and worth of the person, and the importance of human relationships (NASW, 2024)
- Social workers are commitment to equity, dismantling systemic barriers, and advancing health equity which are highlighted within this policy (Skeem et al., 2023)
- Centers the experience of returning citizens, promoting dignity and a strengths-based perspective on reentry
- Encourages a shift from punitive systems to restorative and supportive care models
- BH Links operationalizes social work values into public policy and reinforces the profession's advocacy role

# ●●● *Literature*

- This policy analysis explores the historical criminalization of mental illness and substance use disorders, starting with deinstitutionalization in the mid -20th century and continuing during the War on Drugs —policies that give context to the overrepresentation of individuals with behavioral health needs in the criminal legal system ( Egart , 2024)
- Research demonstrates that Black, Indigenous, and People of Color (BIPOC), along with LGBTQ+ individuals, are disproportionately represented within the carceral system and face systemic barriers to accessing equitable behavioral health care (Gottlieb et al., 2021; Hobaica et al., 2024; Veeh et al., 2018)
- The “Penrose Effect” shows that reduced community mental health services correlated with increased incarceration rates (Torrey, 1997; Grecco & Chambers, 2019)
- Prior CA legislation influenced the design of this program, including outcomes of CA reentry policies like AB 109 and WPC Pilot Program (Bird & Grattet , 2014; Pourat et al., 2022)
- Behavioral health disparities, particularly for those with co -occurring disorders, exacerbate reentry challenges (Gaba et al., 2023)

# ●●● *Methods*

## Policy Framework

- This policy analysis uses David Gil's policy analysis framework from Social Policy and Social Change (Jimenez et al., 2015)
- Includes analysis of social problem, objectives/values, effects, implications, and alternatives
- Sources include state legislation and DHCS implementation documents, scholarly research, lived experiences, and professional insights
- Limitations of analysis due to evolving state guidance, varied county capacity, and limited data. Full data will not be available until some time after 2026 when all CA correctional facilities are mandated to implement their pre-release services

# ●●● *Policy Analysis*

## Analysis of the social problem

- Systemic inequities have led to the over-incarceration of Black, Latinx, Indigenous, and LGBTQ+ individuals in California, who face higher rates of arrest and more barriers to behavioral health care (Gottlieb et al., 2021; Gali, 2020; Hobaica et al., 2024)
- Over 50% of California's incarcerated population now requires behavioral health care, an increase from 20% in 2010; 42% live with co-occurring mental illness and substance use disorders (Lofstrom & Martin, 2023; Gaba et al., 2023).
- Incarcerated women and LGBTQ+ youth face unique vulnerabilities—women are twice as likely to have severe mental illness, and LGBTQ+ youth are at elevated risk of trauma, suicide, and lack of access to affirming care (King et al., 2018; Hobaica et al., 2024).
- Reentry often disrupts behavioral health treatment, leaving returning citizens without medication, providers, or continuity of care—factors that increase the risk of relapse, homelessness, and reincarceration (Albertson et al., 2020).

# ●●● *Policy Analysis*

## Objectives & Values

- BH Links supports behavioral health continuity by requiring warm handoffs from correctional to community care (DHCS, 2023)
- Intended to reduce gaps in care, promote treatment engagement, lower recidivism and promote health equity

## Effects & Implications:

- Reduced recidivism, more stable reentry, and cost savings—estimated \$150,000 per recidivism event avoided (Nordberg et al., 2021)
- Missed behavioral health appointments often lead to reincarceration (Albertson et al., 2020). Continuity of care can help prevent recidivism

## Alternatives

- Some alternatives or additions to this policy could include: Creating community reentry centers near jails for short-stay support, offering training/grants to grow behavioral health workforce, and strengthen culturally responsive services to reduce disparities

# ●●● *Strengths & Challenges*

## Strengths

- Bridges a documented gap in behavioral health treatment at reentry
- Supports evidence-based warm handoffs and pre-release planning
- Federally funded via 1115 waiver and federal grants
- Recognizes the intersectionality of reentry challenges (e.g., race, gender, behavioral health)

## Challenges

- Risk of implementation gaps due to limited community provider capacity, workforce development, and lack of culturally competent providers
- Risk of excluding those with short stays or unpredictable release dates
- Cultural and systemic barriers for BIPOC and LGBTQ+ communities that limit service access (Lee et al., 2017)
- May deepen disparities if implementation is inconsistent

BH Links will directly impact social work clients from oppressed groups by promoting access to behavioral health care during reentry, helping to reduce systemic barriers that have historically led to reincarceration



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# ●●●*References*

Many pages of citations provided the foundation & validation for this policy analysis. Find all references cited within this presentation in:

AB 133 California Advancing & Innovating Medi -Cal (CalAIM ) Initiative -  
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