

## **MENTAL HEALTH CHEMICAL DEPENDENCY AND THERAPEUTIC COURT PROGRAM 2025 DEFINITIONS**

**Adverse Childhood Experiences (Aces)** – Adverse childhood experiences (ACEs) are traumatic events, such as abuse or neglect, occurring in a person’s life before the age of 18.

**Best Practice** - Method or technique that has been generally accepted as superior to any alternatives because it produces results that are superior to those achieved by other means or because it has become a standard way of doing things.

**Certified Counselor** - A person certified who is engaged in private practice counseling to the extent authorized in RCW 18.19.200.

**Certified Chemical Dependency Professional** - An individual certified in chemical dependency counseling, under RCW 18.205.020.

**Collective Impact** - Collective impact is a process that occurs when organizations from different sectors agree to solve a specific social problem using a common agenda, aligning their efforts, and using common measures of success.

**Communities of Color** – Includes Black, Indigenous, Asian, Pacific Islander and Latinx.

**Continuum of Care** - The continuum of care describes the delivery of health care over a period of time. An integrated system of health care that follows a patient through time or through a range of services.

**Culturally Appropriate Healthcare** - A healthcare approach that understands the influence cultural values and beliefs (for the patient and provider) in health care delivery and provides care to address cultural needs.

**Culturally Competent Care** - Cultural competence in health care is broadly defined as the ability of providers and organizations to understand and integrate factors such as race, ethnicity, language, gender, socioeconomic status, physical and mental ability, sexual orientation, and occupation into the delivery and structure of the health care system.

**Diversity** - The presence of differences that may include race, gender, religion, sexual orientation, ethnicity, nationality, socioeconomic status, language, (dis)ability, age, religious commitment, or political perspective, with a focus on underrepresented communities of color and groups.

**Equity** - Promoting justice, impartiality and fairness within the procedures, processes, and distribution of resources by institutions or systems. Tackling equity issues requires an understanding of the root causes of outcome disparities within our society.

**Evidence-Based Programs** - Programs, services, strategies, activities, or approaches which have been shown through scientific research and evaluation to be effective at preventing and/or delaying an untoward outcome.

**Health Disparities** – Differences that exist among specific population groups in the United States in the attainment of full health potential that can be measured by differences in incidence, prevalence, mortality, burden of disease, and other adverse health conditions.

**Health/Behavioral Health Equity** – The state in which everyone has the opportunity to attain full health/behavioral health potential and no one is disadvantaged from achieving this potential because of social position or any other socially defined circumstance.

**Health Inequity** - Differences in health determinants and health outcomes that are the result of social and structural imbalances and are thus avoidable and preventable.

**Historic Trauma** - Cumulative emotional and psychological wounding, over the lifespan and across generations, emanating from massive group trauma experiences.

**Implicit Bias** – The automatic and often unconscious association people make between groups of people and stereotypes about those groups.

**Inclusion** - An outcome to ensure that diverse communities of color actually feel and/or are welcomed. Inclusion outcomes are met when you, your institution, and your program are truly inviting to all. To the degree to which communities of color are able to participate fully in the decision-making processes and development opportunities within an organization or group.

**In-Kind Contributions** - In-kind contributions include goods or services, other than cash.

Examples of in-kind gifts include:

- Goods, like computers, software, furniture, and office equipment, for use by your organization or for special event auctions
- Services, like meeting space, photocopy and mail services, and administrative/financial support
- Expertise, like legal, tax, or business advice; marketing and website development; and strategic planning
- Cash equivalents, like stocks, bonds, mutual funds

**Innovative Programs** – Programs that introduce new ideas, methods and concepts that have not yet been researched however have some scientific research or data showing positive outcomes.

**Licensed Counselor** - A licensed marriage and family therapist, licensed mental health counselor, licensed advanced social worker, or licensed independent clinical social worker regulated under chapter 18.225 RCW.

**Matching Funds** – Contributions of cash.

**Measurable Outcomes** - Outcomes are benefits or changes for individuals or populations during or after participating in program activities. Outcomes may relate to behavior, skills, knowledge, attitude, values, condition, or other attributes. To measure outcomes, the service

must be able to provide evidence that the outcome was or was not achieved. Below is an example of an individual measurable outcome objective:

- 90% of participants successfully completing the program will not reoffend during the subsequent 18 months.
- 85% of participants remain drug free (for example, no positive UA results) during the current quarter.

**Medicaid** – The federally funded social health care program for families and individuals with limited resources. In Washington State, Medicaid is called Apple Health.

**Model Fidelity** - The strategies that monitor and enhance the accuracy and consistency of an intervention to ensure it is implemented as designed, and that each component is delivered in a comparable manner to all study participants over time.

**Other** – Budget line items that must be defined and excludes “miscellaneous” as an accepted description.

**Promising Programs** - Programs, services, strategies, activities, or approaches that have some scientific research or data showing positive outcomes in delaying an unfavorable outcome, but do not have enough evidence to support generalizable conclusions.

**Return on Investment (ROI)** - A performance measure used to evaluate the efficiency of an investment or to compare the efficiency of several different investments. ROI measures the amount of return on an investment relative to the investment’s cost. To calculate ROI, the benefit (or return) of an investment is divided by the cost of the investment, and the result is expressed as a percentage or a ratio.

**Supplanting** - Means to “replace” or “take the place of.” Existing funds for a project and its activities may not be displaced by TST funds and reallocated for other organizational expenses. TST funds must not replace those funds that have been appropriated for the same purpose.

**Supportive Housing** – A combination of stable housing and behavioral health services intended as a cost-effective way to help people with mental illness or chemical dependency live more stable, productive lives. Services may be delivered by 24-hour staff on premises, staff located on premises during business hours, visiting support staff, or mobile behavioral health teams that visit residents several times per week.

**Sustainability** - Refers to the continuation of the project or program beyond the grant funding cycle. Sustainability answers the question, “How will you continue your project if you do not receive further funding?” The focus is on developing new and creative funding mechanisms to help organizations become more sustainable in the long term, allowing them to focus more of their resources on the important programs and services they offer.

Examples:

**Agency 1:** Used the 1/10<sup>th</sup> funding to secure, train, and obtain certification for employees. Having the certified staff allowed them to leverage federal Medicaid funding and apply as an authorized private insurance provider.

Through this they established a model of success and demonstrated value to the agency, who then was able to integrate portions of the positions into general operations in the future. In addition, they identified other applicable grants for which they were eligible to apply.

**Agency 2:** Agency took direct action to apply for various other local funds from city to community housing and block grants. Although, they did not receive awards from all sources, they demonstrated clear action towards sustainability. The outreach engagement led them to other foundational funds for which they were able to leverage individual and organizational financial support. In addition, they actively conduct a variety of fundraising campaigns year round.

**Sustainability Plan** – The action plan to increase program sustainability.

**Systemic Racism** - A system in which public policies, institutional practices, cultural representations, and other norms work in various, often reinforcing ways to perpetuate racial group inequity.

**Trauma** - Trauma results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or threatening and that has lasting adverse effects on the individual's functioning and physical, social, emotional, or spiritual well-being.

**Trauma Informed Approach** - A program, organization, or system that is trauma-informed realizes the widespread impact of trauma and understands potential paths for recovery; recognizes the signs and symptoms of trauma in clients, families, staff, and others involved with the system; and responds by fully integrating knowledge about trauma into policies, procedures, and practices, and seeks to actively resist re-traumatization.

**Trauma-Informed Care (TIC)** - TIC is a strengths-based service delivery approach that is grounded in an understanding of and responsiveness to the impact of trauma, that emphasizes physical, psychological, and emotional safety for both providers and survivors, and that creates opportunities for survivors to rebuild a sense of control and empowerment. It also involves vigilance in anticipating and avoiding institutional processes and individual practices that are likely to retraumatize individuals who already have histories of trauma, and it upholds the importance of client participation in the development, delivery, and evaluation of services.

**Treatment Sales Tax (TST)** – A sales and use tax for Mental Health, Chemical Dependency and Therapeutic Court Programs (1 10<sup>th</sup> of 1%).