



EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES

COMMONWEALTH OF MASSACHUSETTS

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April 14, 2026

Michael D. Hurley, Clerk
State House, Room 335
Boston, MA 02133

Timothy Carroll, Clerk
State House, Room 145
Boston, MA 02133

RE: Community Behavioral Health Promotion and Prevention Commission

Dear Clerks Hurley and Carroll:

On behalf of the Community Behavioral Health Promotion and Prevention Commission (Commission), I am pleased to provide the following letter summarizing the Commission's activities from the prior year, pursuant to M.G.L. Chapter 6, Section 219. Please accept this letter as the Commission's annual report.

In the past year, the Commission met six times, focusing primarily on efforts to support the Executive Office of Health and Human Services (EOHHS) and the Department of Mental Health (DMH) in establishing the Office of Behavioral Health Promotion and Prevention (OBHPP). Led by Assistant Commissioner Dr. Funmi Aguocho, the OBHPP has launched a number of statewide initiatives, in close collaboration with the Commission. These initiatives include the organization of an official launch event for the Office and the rollout of a statewide, behavioral health awareness campaign to promote the importance of behavioral and mental health and reduce the stigma surrounding mental health, ultimately contributing to a culture of acceptance and support. The campaign used a cross-channel approach to reach the general population and caregiver audiences statewide, with a particular focus on communities identified in the Advancing Health Equity in Massachusetts (AHEM) initiative. Ads in various languages (English, Spanish, Brazilian Portuguese, Haitian Creole, Simplified Chinese, Arabic, and Vietnamese) ran

on billboards, transit stops, vehicles, multiple social media channels (Meta and Snapchat), the radio, and streaming video services (YouTube TV, Prime Video). In addition, the campaign featured a robust community engagement effort that involved soliciting feedback from diverse community organizations, in-person materials distribution to all 26 gateway cities, and tabling opportunities at events across the Commonwealth. The campaign messages were seen by many people across the state and had a broad reach:

- **Community Engagement** – estimated reach of over 65,000 people statewide
- **Paid Media** – 5.9 million social media image and video impressions leading to approximately 33,500 clicks to the campaign website
 - o 2.7 million streaming video impressions
 - o 2,500 digital and broadcast radio spots
 - o 642 billboard and transit ad placements

Additionally, this past year, Commission members were instrumental in collaborating with OBHPP on the establishment of a grant-making program to fund initiatives across the Commonwealth that reduce loneliness, social isolation, and family stress, as well as promote infant, early childhood, and maternal mental health. The grant program was developed in consultation with the Commission and based on findings from a landscape analysis, Request for Information (RFI), and a series of listening sessions conducted by the OBHPP team in 2025. The Request for Applications (RFA) for OBHPP's grant was posted on October 3, 2025 and was open through November 21, 2025. A Bidders' Conference was organized by OBHPP on October 17, 2025 with nearly 300 attendees, who posed nearly 200 questions. Due to the massive response, OBHPP extended the RFA deadline to November 21, 2025. The Office received a total of 246 applications, far exceeding expectations. The grant applications are currently under review by the OBHPP Grant Review Committee, comprised of 36 individuals, including Commission members who volunteered. Funding is anticipated to begin in April 2026.

The Commission's members remain committed to promoting initiatives centered on behavioral health promotion, with a focus on children/young adults. Members also want to ensure the voices of community coalitions, young adults and marginalized communities are reflected in the Commission's work, along with a focus on equity.

The Commission is deeply grateful that \$24,452,367 has been allocated to the Community Behavioral Health Promotion and Prevention Trust Fund. A portion of these funds has been used to staff the OBHPP, as well as to staff an Interagency Response Team (IRT) for Complex Cases that coordinates support for youth with complex behavioral health or special needs. Additional funds, a lifetime total of \$7 million, are being utilized to expedite and secure placements and other behavioral health supports for children with complex cases. In the coming months, these Trust Fund dollars will begin supporting numerous community-based initiatives focused on behavioral health promotion and prevention across the Commonwealth through the OBHPP's grant-making program currently in progress.

As the Commission's members continue to develop the specific recommendations for the EOHHS Secretary, the Commission will ensure that its proposals will complement the behavioral health initiatives of the Healey-Driscoll Administration.

I would be happy to offer additional details on the Commission's ongoing work and answer any questions you may have.

Sincerely,



Amy Rosenthal

Undersecretary for Health, Executive Office of Health and Human Services
Chair, Community Behavioral Health Promotion and Prevention Commission, serving as the
designee of Secretary Kiame Mahaniah

Cc: Senate President Karen E. Spilka
House Speaker Ronald J. Mariano
Joint Committee on Health Care Financing
Joint Committee on Mental Health, Substance Use and Recovery

Community Behavioral Health Promotion and Prevention Commission Charge

Legal Authority: M.G.L. Chapter 6, Section 219

Section 219:

(a) There shall be a commission on community behavioral health promotion and prevention located within, but not subject to the control of, the executive office of health and human services. The commission shall work to promote positive mental, emotional and behavioral health and early intervention for persons with a mental illness, and to prevent substance use disorders among residents of the commonwealth.

(b)(1) The commission shall consist of 23 members, as follows: the secretary of health and human services or a designee, who shall serve as the chair; the secretary of veterans' services or a designee; the commissioner of mental health or a designee; the commissioner of public health or a designee; the chief justice of the trial court or a designee; the director of the center for health information and analysis or a designee; the house chair of the joint committee on mental health, substance use and recovery; the senate chair of the joint committee on mental health, substance use and recovery; 1 person appointed by the speaker of the house; 1 person appointed by the senate president; 1 person appointed by the house minority leader; 1 person appointed by the senate minority leader; 1 person appointed by the governor representing a veterans organization in the commonwealth; and 1 representative from each of the following 10 organizations: the Association for Behavioral Healthcare, Inc.; the Massachusetts Association of Community Health Workers, Inc.; the Massachusetts Association for Mental Health, Inc.; the Massachusetts Organization for Addiction Recovery, Inc.; the Massachusetts Public Health Association; the Massachusetts Society for the Prevention of Cruelty to Children; the National Alliance on Mental Illness of Massachusetts, Inc.; the Social-Emotional Learning Alliance for Massachusetts, Inc.; the Freedman Center at William James College; and the Massachusetts chapter of the National Association of Social Workers, Inc.

(2) Members of the commission shall serve for a term of 4 years, without compensation. Any member shall be eligible for reappointment. Vacancies shall be filled in accordance with paragraph (1) for the remainder of the unexpired term. Any member who is appointed by the governor may be removed by the governor for cause.

(c) The commission may establish advisory committees to assist its work.

(d) The commission shall:

(1) promote an understanding of: (i) the science of prevention; (ii) population health; (iii) risk and protective factors; (iv) social determinants of health; (v) evidence-based programming and policymaking; (vi) health equity; and (vii) trauma-informed care; provided that the commission may use, as a guide for its work, the recommendations of the report of the special commission on behavioral health promotion and upstream prevention established pursuant to section 193 of chapter 133 of the acts of 2016;

- (2) consult with the secretary of health and human services on grants from the community behavioral health promotion and prevention trust fund established in section 35EEE of chapter 10;
- (3) collaborate, as appropriate, with other active state commissions, including but not limited to the safe and supportive schools commission, the Ellen Story commission on postpartum depression and the commission on autism;
- (4) make recommendations to the legislature that: (i) promote behavioral health and prevention issues at the universal, selective and indicated levels; (ii) strengthen community or state-level promotion and prevention systems; advance the identification, selection and funding of evidence-based programs, practices or systems designed to promote behavioral health and early intervention for persons with a mental illness and to prevent substance use disorders; and (iv) reduce healthcare and other public costs through evidence-based promotion and prevention; provided that the commission may use state and local prevalence and cost data to ensure commission recommendations are data-informed and address risks at the universal, selective and indicated levels of prevention;
- (5) facilitate the development of interagency initiatives that: (i) are informed by the science of promotion and prevention; (ii) advance health equity and trauma-responsive care; and (iii) address the social determinants of health;
- (6) develop and implement a comprehensive plan to strengthen community and state-level promotion programming and infrastructure through training, technical assistance, resource development and dissemination and other initiatives;
- (7) advance the identification and dissemination of evidence-based practices designed to further promote behavioral health and the provision of supportive behavioral health services and programming to address substance use conditions and to prevent violence through trauma-responsive intervention and rehabilitation;
- (8) collect and analyze data measuring population-based indicators of behavioral health from existing data sources, track changes over time and make programming and policy recommendations to address the needs of populations at greatest risk;
- (9) coordinate behavioral health promotion and wellness programs, campaigns and initiatives;
- (10) hold public hearings and meetings to accept comment from the public and to seek advice from experts, including, but not limited to, those in the fields of neuroscience, public health, behavioral health, education and prevention science;
- (11) serve as an advisory board to the office of behavioral health promotion established in section 16DD of chapter 6A; and

(12) submit an annual report to the legislature as provided in subsection (e) on the state of preventing substance use and promoting behavioral health in the commonwealth.

(e) Annually, not later than March 1, the commission shall file a report with the joint committee on health care financing and the joint committee on mental health, substance use and recovery on its activities and any recommendations. The commission shall monitor the implementation of its recommendations and update recommendations to reflect current science and evidence-based practices.

Community Behavioral Health Promotion and Prevention Commission Membership

Commission Chairperson

- Amy Rosenthal, Undersecretary for Health, Executive Office of Health and Human Services, replacing Secretary Kiame Mahaniah as his designee to chair the Commission in December 2025

Legislative Members

- Mindy Domb, State Representative, House Chair of the Joint Committee on Mental Health, Substance Use and Recovery
- Tram Nguyen, State Representative, Appointment of House Speaker Ronald Mariano
- Pavel Payano, State Senator, Appointment of Senate President Karen E. Spilka
- John Velis, State Senator, Senate Chair of the Joint Committee on Mental Health, Substance Use and Recovery

Ex Officio and Appointed Members

- Nancy Allen Scannell, Massachusetts Society for the Prevention of Cruelty to Children (MSPCC)
- Lena Asmar, Appointee of the Governor representing a veterans' organization in the Commonwealth
- Ruth Blodgett, Department of Public Health (designee of the Commissioner of Public Health)
- Jessica Collins, Public Health Institute of Western Massachusetts, representing the Massachusetts Public Health Association (MPHA)
- Georgia K. Critsley, Executive Office of the Trial Court (designee of Chief Justice Heidi Brieger)¹
- Yaminette Diaz-Linhart, Massachusetts Chapter of the National Association of Social Workers (NASW-MA)
- Lynette Gabrila, Executive Office of Veterans Services (EOVS)
- Elizabeth Ganz, Association for Behavioral Healthcare (ABH)
- Margaret Hannah, Freedman Center at William James College
- Jacqueline Hubbard, National Alliance on Mental Illness - Massachusetts Chapter (NAMI-MA)
- Sophie Jean-Felix, Massachusetts Association of Community Health Workers (MACHW)
- Jessica Larochelle, Massachusetts Association for Mental Health (MAMH)
- Danna Mauch, MAMH, Appointee of House Minority Leader Bradley H. Jones, Jr.
- Emma McNamara, Center for Health Information and Analysis (CHIA) (designee of CHIA Executive Director)
- Noel Sierra, Massachusetts Organization for Addiction Recovery (MOAR)
- Stephanie Sladen, Children's Friend and Family Services, Justice Resource Institute (JRI), Appointment of Senate Minority Leader Bruce E. Tarr
- James Vetter, Social-Emotional Learning Alliance for Massachusetts (SEL4MA)
- Charlene Zuffante, Department of Mental Health (designee of the Commissioner of Mental Health)

¹ In accordance with CJE Opinion No. 2014-4, "Serving on Statutory Commissions" (December 10, 2014), the designees from the Trial Court and Juvenile Court serve the Commission in a limited, consulting role and do not take a position on the Commission's overall recommendations.

Summary of Activities of the Community Behavioral Health Promotion and Prevention Commission for 2025-2026

April 17, 2025

Summary: *Discussion of the OBHPP hiring and ongoing initiatives*

Assistant Commissioner Aguocha provided status updates on the ongoing efforts to establish her office, including the hiring of two new staff members, a project manager and program director. She also explained that OBHPP engaged two firms: DMA Health Strategies to undertake a comprehensive landscape analysis and review of the request for information (RFI) submissions from earlier this year, as well as a public relations firm to assist with health campaigns funded through the Behavioral Health Trust under Chapter 28 of the Acts of 2023. Assistant Commissioner Aguocha proposed the formation of two workgroups focused on the topics of early interventions related to mental health wellness, substance use prevention, suicide prevention, and violence prevention; and school-based programming related to promotion and prevention.

June 12, 2025

Summary: *Discussion of the OBHPP updates and presentation on the history and theory behind the formation of the Community Behavioral Health Promotion and Prevention (CBHPP) Commission*

Assistant Commissioner Aguocha introduced the two newest members of her team, Sarah Mughal and Cherline Gene, who were recently hired as the OBHPP Program Director and Project Manager, respectively. In addition, she shared top-level updates on the initial findings from the landscape analysis, request for information (RFI), and listening sessions her office conducted in May. Commission members Margaret Hannah, Jim Vetter, Jess Collins, and Yaminette Diaz-Linhart, along with Ben Thomas, Director of State Government Relations at Boston Children's Hospital, presented a detailed overview of the history and theory behind the formation of the CBHPP Commission. In their presentation, they summarized the work of the Promotion and Prevention Commission, a special legislative commission led by then Representative Jim Cantwell and Ben Thomas, which included in its recommendations the formation of a standing commission focused on promotion and upstream prevention.

August 7, 2025

Summary: *Discussion of the OBHPP updates, including details on the proposed grant program*

Sarah Mughal, OBHPP Program Director, provided status updates on the OBHPP's ongoing initiatives, including the completion of the OBHPP's environmental scan, which helped the Office identify seven areas that they deemed underfunded and/or underrepresented in state-wide initiatives: (1) Reducing loneliness and social isolation; (2) Reducing family stress and supporting caregiver well-being; (3)

Promoting infant, early childhood, and maternal mental health; (4) Reducing psychological distress in immigrant populations; (5) Promoting early intervention with youth and young adults; (6) Reducing family and intimate partner violence; and (7) Promoting population well-being through education, training, and skills development. She summarized the OBHPP notice of intent (NOI) for its upcoming grant program, which would award approximately \$3 million annually to community-based organizations across the state to develop new programs or expand existing programs that address one or more of the OBHPP's seven focus areas. Director Mughal noted that the OBHPP engaged the marketing agency ASG to design and implement OBHPP's first statewide behavioral health awareness campaign. She noted that the campaign would be launched in the coming months with the theme "What's on your mind?" and would be aimed at promoting the importance of behavioral and mental health to overall wellness; reducing the stigma surrounding mental health; and increasing health equity by focusing campaigns within prioritized communities as identified by the Advancing Health Equity in Massachusetts (AHEM) Initiative. Director Mughal shared updates on the two working groups, focused on school-based behavioral health initiatives and early interventions.

October 9, 2025

Summary: *Discussion of the OBHPP updates and presentation on AI in behavioral health promotion and prevention*

Assistant Commissioner Aguocha shared additional updates on the ongoing initiatives of the OBHPP, including the recent posting of the OBHPP's Request for Applications (RFA) for a multi-year grant opportunity, which would award approximately \$3 million annually to community-based organizations statewide to develop new programs or expand existing programs that address one or more of the OBHPP's seven priority areas that OBHPP has deemed underfunded and/or underrepresented in state-wide initiatives. She explained the grant structure, funding amounts, and key dates and deadlines related to the grant applications. As part of the OBHPP updates, OBHPP Program Director Sarah Mughal summarized the statewide behavioral health awareness campaign that their office would be launching in the coming months. Commission member Yaminette Diaz-Linhart presented an overview of artificial intelligence (AI) in the behavioral health (BH) promotion and prevention sector, with the goal of generating dialogue amongst the Commission's members in preparation for a more comprehensive presentation on the topic at a future Commission meeting.

December 11, 2025

Summary: *Discussion of the OBHPP updates and presentation on AI in behavioral health*

Assistant Commissioner Aguocha and Sarah Mughal, OBHPP Program Director, shared updates on the ongoing initiatives of the OBHPP, including the OBHPP's official launch event on December 2, the statewide behavioral health awareness campaign to promote the importance of behavioral and mental health to overall wellness and reduce the stigma surrounding mental health. They also provided updates on the OBHPP's RFA, which received nearly 250 bids. She noted that applications were under review by

the Grant Review Committee, comprised of 36 individuals, including Commission members who had volunteered. Vincent Paquin, a psychiatrist and researcher on artificial intelligence in mental health, presented to the Commission on the growing use of AI companions.

February 5, 2026

Summary: *Review of the Commission's draft annual report, continued discussion of numerous OBHPP initiatives, including the ongoing review of grant applications*

Assistant Commissioner Aguocha, and Sarah Mughal, OBHPP Program Director, shared additional updates on the ongoing initiatives of the OBHPP, including the review of the grant applications from the RFA in late 2025. Members reviewed and provided feedback on the draft annual report, due to the Legislature on March 1, 2026.