

Mental Health Services Act: Prevention & Early Intervention
Work Group: Ages 0-5
July 21, 2008 meeting notes

Attendees: Jerry Solomon (Facilitator), Alicia Nájera, Dane Cervine, Erika Hearon, Deutron Kebebew, Cathy Simmons, Sherra Clinton (for Ellen Timberlake), Susan True, Deborah Vitullo, Desiree Sanchez, Ginny Gomez, Jaime Molina, Deborah Helms.

Notes (taken by Alicia) are a summary of the meeting (not verbatim).

1. Agenda was reviewed. Group already determined to make decisions using gradient consensus, so we will skip that item on the agenda. Also moved “determining priority populations” item up on the agenda.
2. Introductions.
3. **Thoughts about last meeting?** Like the idea of having strategies that cut across age groups (e.g. stressed families); this is a common theme among the PEI work groups. May be a smart way to go given limited resources.
4. **Stakeholders.** Who is missing? La Manzana has a new director: Celia Organista.
5. **Resource Material.** DMH gave outlines of various programs. Reaction/Comments? DMH is less rigid about their criteria about using best practice models, as long as we use logic model. Programs need to be culturally competent. We will need to evaluate the program(s). Group noticed that there is very little in the DMH resources. We will also look at other Counties and see what they are proposing. Group mentioned parent training, and prenatal programs. Triple P (Positive Parenting Program) was discussed briefly; there are some conversations in Santa Cruz about Triple P.
6. **Defining Priority Population.** Discussed the 5 proposed priority populations, and after brief review/discussion narrowed the priority population for this group to “Children and Youth in Stressed Families”, and secondarily to “Trauma Exposed Individuals”.
7. **Stressed Families.** Brain storm on what this looks like in the 0-5 age group: poverty; substance abuse; child welfare (CPA has seen referrals for this age group go way up in last five year, mostly neglect, including substance abuse of parents); scarcity of resources (time, money, both parents working, one or two jobs); parents with mental illness causing stress on family (especially if they can’t get services); immigration status; immigration experience and/or knowing someone that has been deported, especially in their own family; domestic violence (and not enough resources to address this issue); single parents; multi-generation gang involvement; large families (with few resources); homelessness; isolated families; families with special needs kids; divorcing families; families with parent(s) involved in criminal justice system; Latino families involved with CPS (who don’t connect with resources, sometimes there is a waiting list for Spanish speaking services); people that speak a different dialect and have different cultural norms (such as marrying at a very young age) – they don’t always enroll in school or seek “traditional” (main stream) services. Today we are just brainstorming; we’ll narrow this down next time.

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8. **Where do these families show up?** Child welfare system (some served, some referred out); primary care physicians; head start and child care; substance abuse programs, and other families. Dominican Hospital has a home health care program for babies born there; Sutter and Watsonville hospitals do not have such a program. A lot of families with children ages 0-5 do not have a lot of “institutional” relationships, but we are aware of a lot of families already.
9. **Existing Programs.** Group discussed various resources, such as WIC; SPIN (Special Parents Information Network – CC Pineiro); Positive Discipline; Cara y Corazón and Papás (both are parent education programs, with the latter focusing on fathers). Cara y Corazón takes a holistic approach, and addresses not only children’s behaviors, but also provides parents support, and looks at substance abuse issues; program is in the process of being evaluated (by CDC and SAMSA. Papás stresses working with fathers, but also looks at co-parenting issues; families commit for 18 months and the group looks at the individual skills of the parent, the parent-child relationship, the couple/parents roles and communication skills, the family of origin issues, and community supports/stressors. There have been 30 years of research for this program. There are other programs at the Walnut Avenue Women’s Center, the Cradle Project, and Defensa. Discussed the importance of the engagement process for these and other programs. Some parents need more help engaging, and may need to be escorted to meetings at first. Transportation is also an issue.
10. **Build on existing resources?** Group talked about the idea of building on what exists, and not creating a new system. Also discussed having mobile services (that go where families are), and other natural settings (such as faith communities). Thought about the idea of “training the trainer” programs, that could include training consumers. Cara y Corazón already does this and Papás is interested in this, too.
11. **Decisions.** Interventions adopted should be multi-tiered going from universal approaches to selective interventions.
12. **Evaluation of Meeting.** What worked? What didn’t? People liked the fact that Jerry checked the temperature of the group during the brainstorm, and the fact that this was a very collaborative, nice group building on each other’s ideas. Liked the broad discussions, and some decisions being made.

Next meeting: Monday, August 4, 2008 from 9:30 to 11:30. 18 West Beach Street, Room 6, Watsonville, CA