

Mental Health Services Act: Prevention & Early Intervention
Work Group: 18 - 25
September 17, 2008 meeting notes

Attendees: Jerry Solomon (Facilitator), Alicia Nájera, Linda Betts, Bill Manov, Carly Galarneau, Carol Williamson, Diana Carpenter, Dianne Avelar, Fred Koelher, Guy Grant, Joanne Yablonsky, John Wright, Patrick Meyer, Lorraine Cahn, Steve Ruzicka, Tara Fisher, and Yana Jacobs

1. Agenda review.
2. Introductions.
3. Recap of previous meetings: Priority population, Transition Age Youth - Trauma involved, and Onset of Serious Mental Illness.
4. **Speaker.** Kelly Wolf, CASA (Court Appointed Special Advocates), designer and program manager for the “Independent Living Advocacy Program.” CASA serves 0-18 age youth, with 9 staff, and 150 Volunteers. Served 196 children in ‘06-’07, providing a voice for those taken under the protection of the juvenile court because of severe abuse and neglect by their family. The Independent Living Advocacy Program was designed to provide professional, volunteer advocacy for the older youth, transitioning out of the system. The goal is to support youth on their path to becoming healthy, successful, contributing young adults in the community. Incorporates three components: Independent Living Advocate (ILA) Role, staffed through volunteers, with 2-4 cases each working collaboratively with community partners to meet the youth’s goals. Independent Living Consultants (ILC) is comprised of trained and professionally supported CASA advocates and community members, becoming the “expert” on resources and information one specific area (i.e. housing, education, employment...). ILA’s and CASA’s can contact particular ILC’s when a youth’s needs are identified. The third component is the “Peer Mentor,” comprised of emancipated foster youth (“nothing about us without us”). With this program in place, mental health needs can be more readily addressed because the time a therapist has with these youth will not be spent advocating.
5. **Outcomes.** Jerry compiled the outcomes and strategies into a one-page document for review by the workgroup members with emphasis on the three major outcomes: Educations (gatekeepers), System wide, and addressing direct counseling for psycho/social needs of TAY. This document was reviewed and edited as requested by the group. See proposed project and strategies below.
6. **Gatekeepers:** Prioritized the list:
 - Parents and families
 - School staff, students, and programs
 - Social service providers
 - Health care professionals
7. Phone numbers as requested for the following:
 - Women’s Crisis Support: 831-425-4030 and 831-722-4532
 - Parents Center: 831-426-7322 and 831-728-6445
 - Suicide Prevention: 1-877-663-5433
8. This workgroup has completed their tasks. One more meeting will be held (tba) when the draft plan is ready for review.

Prevention and Early Intervention for Transition Age Youth

Proposed Project: Coordination of the delivery of peer and professional support/counseling evidence-based services to transition age youth and their families in traditional and non-traditional settings. This program addresses transition age youth (persons ages 16-25) experiencing onset of serious mental illness, trauma-exposed individuals, and disparities in access to services.

Strategy #1: To offer low cost/free client-centered mental health services to transition age youth that are culturally sensitive, trauma-informed, and promote an independent and productive life for TAY at risk of onset of mental illness, especially targeting the LGBT and Latino youth.

- (Early intervention) Counseling services to TAY with special emphasis in foster care and alcohol/drug programs
- Assessment of psychosocial and drug/alcohol treatment needs with treatment planning/consumer goal statements
- Outreach programs to LGBT and Latino youth
- Peer-to-peer programs
- Advocacy
- Paid stipends and work crew options

Outcomes: Increased access to mental health services to at risk transition age youth.

Evaluation:

Strategy #2: To offer mental health/support services to family members (or other support system) of targeted TAY.

- Involve the family/support system early in treatment planning and offer them support services
- Offer peer-to-peer support groups
- Educate family about mental illness and the services available to the consumer and family

Outcomes: Increased mental health education and support to family members/support system of targeted TAY

Evaluation:

Strategy #3: To provide training, technical assistance and consultation to gatekeepers serving targeted youth to help them identify youth at risk of suicidal behavior or serious mental illness, and how to effectively assist them in a culturally sensitive manner.

Targeted gatekeepers are: parents/family/support system; school staff, students, and school programs; social service agencies; and health care providers.

- Training, technical assistance and consultation will include early intervention, how to clinically manage at risk transition age youth in diverse program settings, and how to adapt programs to better serve at risk transition age youth.

- Create a speakers bureau
- Educate gatekeepers about unique cultural issues facing LGBT and Latino consumers

Outcome: Targeted gatekeepers will demonstrate increased knowledge about the signs and symptoms of suicidal behavior and mental illness.

Evaluation

Referral data from service agencies

Activity data on training and technical assistance and consultation contacts