

**Stanislaus County BHRS Prevention and Early Intervention Programs  
Fiscal Year 2013-2014**

➤ **Asset-Based Community Development (ABCD)**

ABCD funding helps local communities to develop and implement community-driven plans to strengthen and improve recovery, resiliency and mental health protective factor outcomes within neighborhoods and ethnic, cultural, un-served and underserved populations. Activities include, but are not limited to: asset mapping mental health supports, behavioral health leadership development, partnership development to increase mental health supports within communities, mental health training, stigma reduction campaigns, and suicide awareness campaigns and training.

**Selective Prevention**

**Targeted Population:** Neighborhoods with diverse ethnic, cultural, un-served and underserved populations

**Strategies:** Mental health training and education, outreach & engagement, community support, community capacity building

➤ **Promotores and Community Health Workers (P/CHW)**

Promotores and Community Health Workers play a critical role in developing opportunities for community members to gather, belong, and exercise their leadership to improve their personal well-being and that of their community. They plan and support community-led interventions that sustain well-being, reduce the “mental illness” stigma, and connect isolated individuals to a community of support. The latter intervention reduces the risk of serious illness in the future, as social isolation is often linked to a variety of negative outcomes.

Promotores and community health workers serve as true agents of change to create neighborhoods that promote wellness to reduce risk factors. Since they live in the communities they serve, they have a self interest in the results of community well-being projects.

**Selective Prevention, Indicated Prevention**

**Targeted Population:** Neighborhoods with diverse ethnic, cultural, un-served and underserved populations; individuals exhibiting onset of serious mental illness or who have mental health issues

**Strategies:** Mental health training and education, outreach & engagement, community support, community capacity building, screening & referral, peer support

➤ **The Community Outreach and Engagement (O&E)**

O&E was established to recognize special activities needed to reach diverse, underserved communities with high need that are disproportionately unserved by traditional types of mental health services. Two community based organizations provide education, depression screenings, transportation services, and resource linkages to individuals and families that are reluctant to enter traditional agency services.

Each organization seeks to reduce stigma and support access to more intensive services. The services are culturally competent, client/family-focused, and promote recovery and resilience while maintaining respect for the beliefs and cultural practices of individuals served. Emphasis is placed on diverse communities including Hispanic, African American, Southeast Asian, Native American, and Lesbian, Gay, Bisexual, Transgender, and Questioning (LGBTQ).

- **West Modesto King Kennedy Neighborhood Collaborative (WMKNC)** focuses on increasing outreach into neighborhood based supports that honor cultural practices by hiring individuals from the neighborhood. Among the objectives: 1.) Provide mental health depression screenings; 2.) Provide mental health referrals for West Modesto residents in need of specialty services; 3.) Provide peer support sessions for depression and substance abuse; 4.) Continue operation of the Wellness Drop-in Center in West Modesto.
- **El Concilio: Latino Behavioral Health** focuses on outreach to promote and educate the community on mental health and substance abuse recovery to underserved and unserved areas of Stanislaus County. As a founding member of the Central Valley Promotores Network Vision y Compromiso, El Concilio continues to work closely with Promotores to educate and outreach to Latino communities about health and behavioral health in ways that honor their culture and way of life.

**Selective Prevention, Indicated Prevention**

**Targeted Population:** Communities with diverse ethnic, cultural, un-served and underserved populations; individuals exhibiting onset of serious mental illness/seriously emotionally disturbed or who have mental health issues

**Strategies:** Mental health training and education, outreach & engagement, community support, community capacity building, screening & referral, peer support

➤ **Mental Health Promotion Campaign (MHPC)**

The MHPC is a countywide multimedia campaign that includes mental health and wellness messages aimed at increasing protective factors in communities and reducing the stigma associated with mental health issues including those co-occurring with substance abuse. The aim is to increase the public's awareness of behavioral health concerns and to provide information on how to develop and maintain emotional wellness and resiliency.

**Universal Prevention, Selective Prevention**

**Targeted Population:** All Stanislaus County residents; populations at risk for serious mental illness/seriously emotionally disturbed

**Strategies:** Mental health training and education, outreach & engagement

➤ **Friends are Good Medicine (FGM)**

FGM is designed to be a resource and provide information and support to community self-help groups. This program promotes community-based self-help efforts in both the general and professional community. It provides leadership training and consultations.

**Universal Prevention, Selective Prevention, Indicated Prevention**

**Targeted Population:** All Stanislaus County residents; populations at risk for serious mental illness/seriously emotionally disturbed; Individuals with mental health issues or exhibiting onset of serious mental illness/seriously emotionally disturbed

**Strategies:** Mental health training and education, outreach & engagement, community support, community capacity building, peer support

➤ **Aggression Replacement Training (ART)**

Aggression Replacement Training® is a cognitive behavioral intervention program to help children and adolescents improve social skill competence and moral reasoning, better manage anger, and reduce aggressive behavior. The program specifically targets chronically aggressive children and adolescents. Developed by Arnold P. Goldstein and Barry Glick, ART® has been implemented in schools and juvenile delinquency programs across the United States and throughout the world. The 10 week program consists of 30 sessions of intervention training and is divided into three components - social skills training, anger control training, and training in moral reasoning.

**Early Intervention**

**Targeted Population:** Individuals with mental health issues or exhibiting onset of serious mental illness/seriously emotionally disturbed

**Strategies:** Brief counseling intervention

➤ **Expanded Child Sexual Abuse Prevention and Early Intervention (ECSAPEI)**

BHRS has partnered with Parents United/Child Sexual Abuse Treatment Team to address the trauma associated with child sexual abuse. The program provides additional Spanish speaking programming for adults who were molested as children and establishes a 24-hour/7 day a week Warm Line for individuals and families affected by child sexual abuse. There is also a Peer Sponsorship program where volunteers provide support to families experiencing child sexual abuse.

**Selective Prevention, Indicated Prevention, Early Intervention**

**Targeted Population:** Underserved/un-served; individuals at risk for serious mental illness/seriously emotionally disturbed; individuals with mental health issues or exhibiting onset of serious mental illness/seriously emotionally disturbed; families of individuals with mental health issues or exhibiting onset of serious mental illness/seriously emotionally disturbed

**Strategies:** Outreach & engagement, screening & referral, peer support, brief counseling intervention

➤ **Early Psychosis Intervention: LIFE Path**

LIFE Path is a program designed to provide Early Intervention services for 14 – 25 year-olds who have experienced initial symptoms of psychosis. The program provides intensive treatment for consumers,

families, caregivers, and significant support persons. The services are tailored to meet the unique needs of each participant and may include screening and assessment, diagnosis, individual and family counseling, and crisis and relapse prevention. A primary goal is to support consumers in discovering their life path potential by decreasing the disabling effects from untreated psychosis.

**Selective Prevention, Indicated Prevention, Early Intervention**

**Targeted Population:** Children/youth and TAYA at risk for serious mental illness/seriously emotionally disturbed, underserved Individuals with mental health issues or exhibiting onset of serious mental illness/seriously emotionally disturbed; families of individuals with mental health issues or exhibiting onset of serious mental illness/seriously emotionally disturbed

**Strategies:** Outreach & engagement, screening & referral, brief counseling intervention

➤ **Leadership and Resiliency Program (LRP)**

BHRS has partnered with four community-based organizations to support youth leadership development efforts. The partnerships include:

- Sierra Vista Child and Family Services - Bridge Youth Builders (BYB)
- Hughson Family Resource Center - HFRC Youth Leadership
- Center for Human Services (CHS) - Patterson Teen Center - Lifeplan
- West Modesto King Kennedy Neighborhood Collaborative(WMCKNC)-Leadership for the Future/Project UPLIFT

LRP are school-and/or community-based programs for youth ages 14-19 that enhance internal strengths and resiliency, prevent involvement with substance abuse and violence, and help youth avoid school failure and involvement with Juvenile Justice. Activities include resiliency groups, community service opportunities, conflict resolution, social skills training, and peer mentoring. Individuals who are the focus of this program are involved in its development.

**Selective Prevention**

**Targeted Population:** Children/youth and TAYA at risk for serious mental illness/seriously emotionally disturbed, underserved

**Strategies:** mental health training and education, outreach & engagement, community support, community capacity building

➤ **Children are People (CAP)**

CAP is a program designed to promote the well-being of children in the classroom. The program utilizes "Photovoice", a tool for exploration and identification of wellbeing in the life of participants. CAP is implemented in fifth grade classes for 10-16 sessions over an 8-10 week period. Some of the key areas include leadership, family values, relationships, meaningful connections, importance of community, and healthy lifestyles (i.e. exercise, sports, healthy eating). The program provides training and supervision to staff and qualified volunteers at different school sites.

**Selective Prevention**

**Targeted Population:** Children at risk for seriously emotionally disturbed; underserved

**Strategies:** mental health training and education, community capacity building

➤ **In Our Own Voice (IOOV)**

IOOV is a unique public education program developed by NAMI in which two trained consumer speakers share compelling personal stories about living with mental illness and achieving recovery. The program was started with a grant from Eli Lilly and Company. IOOV is an opportunity for those who have struggled with mental illness to gain confidence and to share their individual experiences of recovery and transformation.

**Universal Prevention, Selective Prevention, Indicated Prevention**

**Targeted Population:** Stanislaus County residents; Individuals at risk for serious mental illness/seriously emotionally disturbed, underserved; individuals with mental health issues

**Strategies:** mental health training and education, outreach & engagement, peer support

➤ **Faith/Spirituality Behavioral Health Integration (FSBHI)**

This program facilitates and encourages faith based communities and spirituality groups throughout Stanislaus County to create increased social support and social connections for adults experiencing trauma and other risk factors. These activities include a variety of support groups, study groups, outreach, social and recreational activities, and personal/peer based support. Partnerships with other

PEI programs allow faith-based organizations to provide education and information about behavioral health concerns that reduce stigma, enhance emotional wellness, increase protective factors, and support recovery.

**Selective Prevention, Indicated Prevention**

**Targeted Population:** Individuals at risk for serious mental illness/seriously emotionally disturbed; unserved/underserved; individuals with mental health issues or exhibiting onset of serious mental illness

**Strategies:** mental health training and education, outreach & engagement, community support, community capacity building, referral

➤ **Program to Encourage Active, Rewarding Lives for Seniors (PEARLS)**

Modeled after a successful program developed by the University of Washington, PEARLS provides eight in-home counseling sessions over 19-weeks. The PEARLS counselor visits seniors at risk of worsening depression and teaches them problem solving techniques. They're also encouraged to become more socially and physically active. A depression screening tool is used at each session to monitor progress. Problems are identified and goals are set.

**Early Intervention**

**Targeted Population:** Older adults exhibiting onset of serious mental illness or have mental health issues

**Strategies:** Brief counseling intervention

➤ **Senior Peer Counseling**

Senior Peer Counselors are trained volunteer counselors who regularly visit older adults who have trouble overcoming difficulties or face significant change in their lives. Peer Counselors are senior citizens themselves. They attend an initial training supervised by a professional clinician and help connect seniors to services. They provide counseling and support to those experiencing emotional distress due to health problems, grief, loss of a loved one, depression, anxiety or other difficulties. These peers often share similar life experiences and offer comfort and understanding. The home visits are usually weekly and open ended in duration. There is no fee for the service which is for adults 60 years of age or older.

**Early Intervention**

**Targeted Population:** Older adults exhibiting onset of serious mental illness or have mental health issues

**Strategies:** Brief counseling intervention, peer support

➤ **Friendly Visitor**

Friendly visitor volunteers visit with lonely seniors in the community, usually two times a month. They provide socialization and support to seniors who may not otherwise have any contact with anyone else. Activities may include reading together, taking walks, playing cards, or having coffee and conversation.

**Selective Prevention**

**Targeted Population:** Older adults at risk for serious mental illness; unserved/underserved

**Strategies:** mental health training and education, outreach & engagement, community support, community capacity building, referral

➤ **Senior Center Without Walls (SCWW)**

SCWW is a phone-based program with offerings similar to activities you would find at a senior center. Once registered, each senior receives a monthly calendar of events. They can call in to join in group discussions, fun games, or learn about current health topics. This program offers a book club, support groups and much more.

**Selective Prevention**

**Targeted Population:** Older adults at risk for serious mental illness; unserved/underserved

**Strategies:** mental health training and education, outreach & engagement, community support

➤ **Health/Behavioral Health Integration**

This project expands on an effective model of behavioral health integration with primary care that is currently used in four Golden Valley Health Center (GVHC) clinics within Stanislaus County. Clinicians and psychiatrists are embedded in the clinics that serve primarily underserved cultural communities. The project interfaces with several other projects in the PEI plan to ensure continuity of care to older adults, children and youth, and adults who are at risk of depression and suicide due to untreated behavioral health issues. The GVHC sites are in Newman, Patterson, Turlock, and West Turlock. The Health/Behavioral Health Integration Project is the result of a collaborative planning process that involved diverse stakeholders throughout the county.

**Early Intervention**

**Targeted Population:** Individuals exhibiting onset of serious mental illness or who have mental health issues

**Strategies:** Brief counseling intervention

➤ **Student Assistance and School-based Consultation Program:** BHRS has partnered with two community based organizations to implement this program in area school districts.

- **Nurtured Heart Approach (NHA)**

Center for Human Services (CHS) in Patterson Unified School District: NHA is designed to change the school culture of Apricot Valley and Las Palmas Elementary Schools to one that engages the positive and strengthens the inner wealth of its students. The goal: to build the capacity of each school to enhance the emotional resiliency of their students through the school-wide implementation of the Nurtured Heart Approach. The NHA is a system of relationships where all energy and attention is directed to what is going right, and little or no energy is given toward negative behaviors or choices. The program unites students, teachers, and parents in their efforts to build a more positive school community.

- **Creating Lasting Student Success (CLaSS)**

Sierra Vista Child and Family Services (SVCFS) in Modesto City Schools: CLaSS is a prevention and early intervention model that strives to see students succeed at home, at school, and in the community. It's built upon strength-based and evidenced-based practices that have proven results. CLaSS seeks to work with children who are considered "at risk" for behavioral issues that lead to problems at school and in the home. CLaSS consultants are trained to work with children, their families and teachers by helping them develop action plans that everyone can follow. The focus is on helping children succeed.

**Selective Prevention**

**Targeted Population:** Children at risk for seriously emotional disturbance; underserved

**Strategies:** mental health training and education, outreach & engagement, community capacity building, screening and referral

➤ **Parents and Teachers as Allies (PTAA)**

NAMI-operated Parents and Teachers as Allies education program helps families and school professionals identify the key warning signs of early-onset mental illnesses in children and adolescents in schools. It focuses on the specific, age-related symptoms of mental illnesses in youth. PTA emphasizes that families and school professionals are natural allies in working to ensure that youth with early-onset mental illnesses receive timely and appropriate treatment.

**Selective Prevention**

**Targeted Population:** Children/youth at risk for serious emotional disturbance; underserved

**Strategies:** mental health training and education, outreach & engagement

➤ **PEI/Statewide Campaign (Stigma and Discrimination Reduction, Suicide Prevention, and Student Mental Health)**

CalMHSA, the Joint Powers Authority that was established in 2009, was originally created to more effectively implement three of the five statewide PEI projects through a single entity. Using funds that counties have assigned back to the California Department of Mental Health, three statewide initiatives were funded with these dollars. The three initiatives are Stigma and Discrimination Reduction, Suicide Prevention, and Student Mental Health. The funding for these initiatives will end on June 30, 2014. Stanislaus County has benefited from all three of these initiatives. For example, many have seen the signs posted on freeways and in cities statewide, referencing "Know the Signs". In both Spanish and

English, these signs provide information about resources for suicide prevention. "Each Mind Matters" has provided a wealth of information and publicity statewide focused on reducing the stigma and discrimination associated with mental illness. Lastly, the Student Mental Health Initiative has funded projects locally in K-12 schools, Modesto Junior College, and California State University, Stanislaus. Given the amount of one-time funds that the county must expend, the stakeholders endorsed funding the statewide initiatives at the 7% level.

**Universal Prevention, Selective Prevention**

**Targeted Population:** Stanislaus County residents; Children/youth at risk for serious emotional disturbance; underserved

**Strategies:** mental health training and education, outreach & engagement

➤ **Health/Behavioral Health Integration – Golden Valley Health Center (GVHC) Corner of Hope**

This expansion will allow GVHC to serve underserved cultural and ethnic populations in the homeless community in Stanislaus County. It would expand behavioral health services for the homeless and those at-risk for homelessness at the "Corner of Hope" medical service center in Modesto. It would provide low cost, no cost services and increase access to the underserved homeless sub-population experiencing the onset of severe mental illness and/or severe emotionally disturbance.

The expansion will focus on stigma reduction, direct early intervention services, and increased timely access.

**Indicated Prevention, Early Intervention**

**Targeted Population:** Latino and underserved populations exhibiting onset of SMI; Latinos and underserved populations with MH issues; Individuals who are homeless or at-risk for homelessness exhibiting onset of SMI; Individuals who are homeless or at-risk for homelessness with MH issues

**Strategies:** Low cost/no cost mental health counseling; culturally competent services to help reduce stigma; additional mental health clinicians to increase access and timeliness of early intervention.