

THE PROBLEM

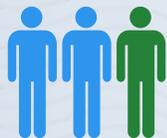
More than two million Californians are affected by potentially disabling mental illnesses every year.

Research has shown that mental illness can lower or negatively impact a person's life expectancy. Adults in the U.S. living with serious mental illness (SMI) die at least 25 years earlier than the general population. This is largely due to treatable medical conditions.

In 2003, a report by the California Mental Health Planning Council estimated that as many as 1.7 million Californians were not receiving the mental health services they needed. As many as 80% of children with mental health needs were undiagnosed or unserved. The consequences of untreated mental illness were seen throughout health systems, schools, and the criminal justice system. To address these challenges, California voters passed Proposition 63, known as the Mental Health Services Act (MHSA), in 2004. It places a one percent tax on personal income above \$1 million. MHSA was designed to expand and transform the mental health system while improving the quality of life for people living with mental health challenges. MHSA's core values include: community collaboration; cultural competence; consumer and family-driven services; focus on wellness, recover, resiliency; and integrated services for clients and families.



In California, **women** were more likely than men to experience serious mental illness



About two-thirds of **adults** with a mental illness



and two-thirds of **adolescents** with major depressive episodes **did not get treatment**



One in 13 children in California had a serious emotional disturbance that could interfere with home, school, or social functioning.

The Annual Cost of Untreated Mental Illness in U.S. ⁽¹⁾



EMERGENCY ROOM CARE

\$38.5 billion



INCARCERATION

\$37 billion



MEDICAL COMORBIDITIES

\$132.6-\$351 billion, est.



LOST PRODUCTIVITY

\$193.2 billion



1 in 4

Americans live with a diagnosable mental illness



3 out of 4

people are not having their mental health needs met in California

Nearly **45,000** people aged 10 and older **DIED BY SUICIDE** in 2016

In California, the rate of **suicide** was 10.9 suicides per 100,000 population in 2016; this represents a **14.8% increase** from the rate in 1999

PREVENTION SOLUTIONS

Prevention programs address stigma reduction, increase protective factors and reduce risk factors, increasing resiliency, interpersonal connections and health and wellness for individuals, families and communities. Prevention programs engage individuals before the development of mental illness and prevent mental illness from becoming severe and disabling. These services are designed for residents who are unserved, underserved, and inappropriately served. Prevention programs emphasize strategies to reduce the following negative outcomes:

- Suicide,
- Incarcerations,
- School failure or dropout,
- Unemployment,
- Prolonged suffering,
- Homelessness, and
- Removal of children from their homes

Prevention activities include:

- Build protective factors and reduce risk factors for developing a potentially serious mental illness.
- Improve mental health for individuals/groups whose risk of developing a potentially serious mental illness is greater than average.
- Relapse prevention for individuals recovering from a serious mental illness.

Suicide Prevention activities include:

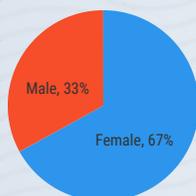
- Preventing suicide as a consequence of mental illness without a focus on or intended outcomes for at-risk individuals.
- Prevention or early intervention programs.
- Strategies such as information campaigns, survivor informed models, screenings, training, and education.

Alameda County Prevention Services in FY 17/18

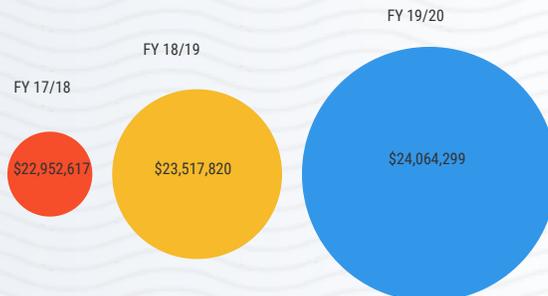
20 Ongoing Prevention Programs

1 Suicide Prevention Program

Individuals Served by Gender

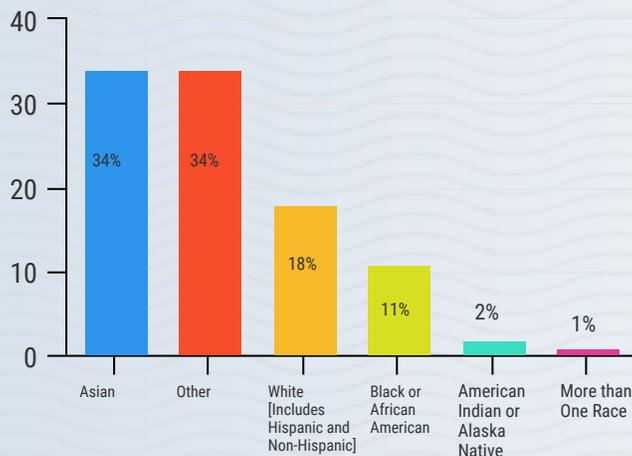


Total Prevention Mental Health Expenditures (Estimated)

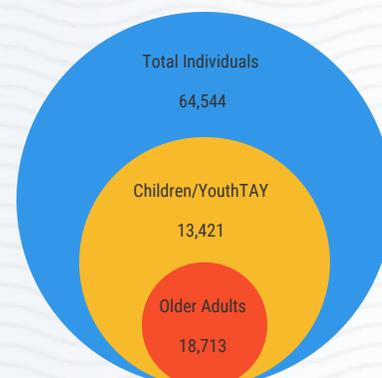


Conducted Prevention Outreach to **20,956** potential responders

Individuals Served by Race/Ethnicity



Number of Individuals Served Through Prevention Services



PREVENTION IN ACTION

Underserved Ethnic Language Population (UELPL)

Each UELP program is built on a framework of three core strategies: 1) Outreach & Engagement, 2) Mental Health Consultation, and 3) Early Intervention services. These strategies are implemented through a variety of services, including one-on-one outreach events; psycho-educational workshops/classes; mental health consultation sessions with a variety of stakeholders (e.g., families, teachers, faith community, and community leaders); support groups; traditional healing workshops; radio/television/blogging activities; and short-term, low-intensity early intervention counseling sessions for individuals and families who are experiencing early signs and symptoms of a mental health concern.

Several years of data had demonstrated that the UELP programming is the optimal design for improving the health and wellness of these often marginalized populations, by meeting their cultural, language, mental, and emotional needs. In FY 17/18, Alameda County was awarded a National Association of Counties (NACo) Achievement Award for the work with UELP and serves as a national model for local governments. UELP is continuing to transform the way mental health services are provided to underserved and unserved populations in Alameda County.

Successes/Outcomes from FY 18/19:

- 7,895 Prevention events, which is a 37% increase from last year;
- 56,848 people were served at these Prevention events (duplicated count)

Survey respondents reported improved quality of life because of their programs. The data has shown improvements in the areas of mental health, emotional health, stress, and family.



*"Helpful always, good people making me better."
-Prevention Participant*

Bay Area Community Services (BACS) (Towne House, Hedco, Valley, and South County Wellness Centers)

Wellness Centers provide a welcoming entry point for outpatient services for individuals who are unserved or underserved by the mental health system, including a step-down service for individuals transitioning from BHCS specialty mental health services. Wellness Centers provide services in an environment of inclusion and, more often than not, are managed and staffed by consumers who provide peer support, wellness, and recovery-oriented education.

Successes/Outcomes from FY 17/18:

- All of BACS wellness centers (WC) have increased efforts to connect participants with other resources. In total, nearly 800 referrals were made to ACCESS, housing support, and psychiatric services. Of these, nearly 600 referrals were for housing.
- Reached 2,884 unduplicated individuals
- More than 17,000 hours of peer counselor/site supervisor direct support to WC participants.

Crisis Support Services of Alameda County (CSS)

SUICIDE PREVENTION

Crisis Support Services of Alameda County (CSS) is a nonprofit, volunteer-based crisis intervention and suicide prevention agency. Services include crisis hotline, school-based suicide prevention training, community gatekeeper trainings and consultation, Mental Health First Aid, teen text line, Trauma Informed Care (TIC) trainings, grief counseling for all ages and crisis event counseling.

Successes/Outcomes from FY 17/18:

Community Education:

- Teens for Life program for middle and high school-aged youth reached 8,491 youth in 12 school districts.
- Community Gatekeeper 1,264 unduplicated adults

Text Line:

- 887 completed sessions this year, more than doubled the number of completed sessions compared to last year at 434 completed sessions.
- Served 361 individuals, the highest number of unduplicated texters in a fiscal year since the start of the program.

Crisis Line:

- Total Call Volume 57,551 calls
- Call from Transitional-Age Youth 3,342 calls
- Only 39% of high-risk calls resulted in police intervention and hospitalization. Utilizing collaborative problem solving and safety planning, the crisis line counselors deescalated suicidal crisis over the phone, evaluating and connecting the callers with suicidal desire and intent to their coping skills and their support network. Not only is this cost-saving to the county Behavioral Health Care system, it also reduces further traumatization that may occur when interacting with law enforcement agencies or mental health institutions.

*"I think that receiving education on suicide is helpful, because it shows that you are not alone on this and other people will try and help you."
- 6th Grade Student*

"You guys helped me wanna live." - Texter