



Alameda County Mental Health Services Act

SPOTLIGHT ON:

Hope and Wellness

Fall/Winter 2015



What is the Mental Health Services Act?

More than two million Californians are affected by potentially disabling mental illnesses every year. About 30 years ago, California cut services in state mental hospitals, without providing adequate funding for mental health services in the community.

To address this, in 2004 voters approved the Mental Health Services Act (MHSA), also known as Proposition 63. It places a 1% tax on personal income above \$1 million. The MHSA emphasizes transformation of the mental health system while improving the quality of life for people living with a mental illness.

Community Services & Supports

The Mental Health Services Act provides funding to help reach community members who are difficult to engage and those who need culturally appropriate supports.

Full Service Partnership programs serve those who are homeless and/or formerly incarcerated. The African American Steering Committee is making recommendations about how to better serve community members who are developing or experiencing a serious mental health, alcohol or drug concern.

Alameda County Behavioral Health Care Services (BHCS) is committed to maximizing the recovery, resilience and wellness for Alameda County residents who are experiencing a serious mental health or substance use challenge. Improving care is a continual process. People living with mental illnesses can, and do, live full lives.

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Seasoned Innovator Joins County Leadership



Photo by Tue Nam Ton

Dr. Karyn L. Tribble, Deputy Director of Alameda County Behavioral Health Care Services (BHCS), joined the department in May 2015 and has worked in health and mental health for more than 20 years. "When I came here, the staff and community welcomed me with open arms," Tribble says.

Tribble enjoys working with people. She believes that everyone deserves to be treated with dignity and respect. While working at a private psychiatric hospital on the East Coast, Tribble encountered a woman who refused to eat. She happened to be an African immigrant and thought the disconnected voices she heard would go away if she stopped eating. The medical

staff tried everything. Yet, the woman continued to lose weight and refused medication. Her family brought spiritual healers from her home country and eventually the voices subsided. She was willing to eat and take medications.

"It was such an experience," Tribble says. "[It showed me that] you need to meet a person where they are."

"Our behavioral health department should work to provide a comprehensive system of supports and care on behalf of the community," Tribble says. This means partnering with other agencies and welcoming feedback from consumers and family members. "Services that speak to a variety of needs in the perspective and language of the individual are extremely important."

Tribble is the co-author of the "Psychology Education & Careers Guide for College (and High School) Students of Color." She is an LCSW and has worked with all ages in community organizations and hospitals in executive management. Tribble conducted research with Howard University's African Burial Ground Project. She earned Masters degrees in both Social Service and Science. Tribble holds a Doctorate degree in Clinical Psychology.

Cover photos top left, lower left, and center photos by Tue Nam Ton. Top right and lower right photos by Janny Castillo.

Editor, Sally Douglas Arce. Designer, Nadja Lazansky.

HOPE AND RECOVERY FOR THE HOMELESS

Full-Service Partnerships (FSPs) are designed to do ‘whatever it takes’ to improve residential stability, mental health and health results for some of the hardest to reach men and women in Alameda County. Some have been homeless and/or formerly incarcerated. Research and experience has shown vulnerable individuals are best assisted with a mix of treatments and supports—services that make wellness and recovery a reality for people living with mental health conditions. In the year 2014–2015, FSPs, which are funded by the Mental Health Services Act (MHSA), served 400 people in Alameda County.

“FSP’s build upon clients’ strengths, hopes and dreams, rather than shortcomings,” says Jennifer Mullane, Clinical Program Specialist, Alameda County Behavioral Health Care Services (BHCS). “We want people to do more than just survive and stay out of the hospital.

We want them to thrive and have a happy life. Just like we all do.”

Housing First

Housing First is based on the idea that the first and main need for people who are homeless and have a mental health concern is to obtain stable housing. An alternative to shelters and transitional housing programs, Housing First has positive results.

“Once in housing, we [staff] wrap the other services around them,” says Mark Shotwell, Program Director, Homeless Outreach Stabilization Team (HOST), a program of Bonita House. “You have to meet people with what they are willing to do.”

People are not required to participate in treatment in order to have housing. On average, HOST serves 90 individuals annually. Eighty-five percent have remained in their housing.



Danielle Richardson, Jay Mahler, Jodi Monahan and Mary Hogden spoke on a panel at the Full Service Partnership Conference on September 25th. Photo by Paul Takayanagi.

From the Director’s Desk



Photo by Tue Nam Ton

I am honored to serve Alameda County as the Director of Behavioral Health Care Services. It gives me pride to be surrounded by such a dedicated, compassionate and responsive service delivery team.

The Mental Health Services Act (MHSA) provides Alameda County new resources and new direction for prevention, early intervention, treatment and recovery. It is not an easy task but I am committed to continual improvement, depending equally upon all the consumers, constituents, stakeholders and staff who strive daily to design and provide meaningful and culturally relevant services to underserved persons and families in need in Alameda County.

I look forward to sharing our triumphs and successfully meeting the challenges ahead of us. Our roots are deep and our foundation is strong, with our core values intact: *1) collaboration, 2) inclusion, 3) collecting data and measuring outcomes and 4) ensuring accountability.*

Manuel J. Jiménez, Jr., MA, MFT

Director of Alameda County Behavioral Health Care Services

In southern Alameda County, Abode Services finds dwellings for homeless people with severe mental illnesses. “We don’t take ‘no’ very easily,” says Denah Nunes, Program Manager for Abode’s Greater HOPE FSP. “We keep trying to find ways to partner and find common ground on participating in services.”

Annually, Abode serves 85 south county residents and has a 90 percent retention rate for people who have stayed in housing for one year or longer. Participants have some say in choosing or refusing services.

Since 2007, in Alameda County MHSA dollars have helped more

than 600 homeless individuals with serious mental health issues obtain permanent housing.

**For information, contact
Dr. Robert Ratner, Housing
Services Director
510-567-8124 or
RRatner@acbhcs.org**

Competitive Employment

Persons living with a significant mental illness or substance use concern often live below the poverty level. FSPs help them obtain jobs or go to school. Most clients want to work. They see work as a way to

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Promoting Wellness for the African American Community

“As an important first step, the African American Health and Wellness Steering Committee is recommending that the County fund the research and design of an African American Wellness Hub,” says Gigi Crowder, Behavioral Health Care Services (BHCS) Ethnic Services Manager.

The Steering Committee recommends that the Wellness Hub be designed with satellite offices to meet the health needs of African Americans across the county. The Wellness Hub services would be offered in welcoming and nurturing environments. Staff would be hired who understand the cultural nuances and values embraced by African Americans.

The Steering Committee was announced at the Having Our Say, Because... Black Minds Matter 2! event in February 2015. The committee is supported by Mental Health Services Act (MHSA) dollars. This followed the efforts of the 2011 African American Utilization Study Report (see Resources box on page 5). This report offers goals and recommendations to better address and respond to the African American community's behavioral health needs.

Committee members represent a diverse group of African Americans. They contribute to this BHCS quality improvement effort, offering guidance and support to BHCS in the prioritization of steps to better serve the African American

community. The aim is to provide mental health and substance use services that are effective and culturally responsive, honoring and offering promise toward gaining a better quality of life.

Goals of the African American Steering Committee include:

- Give BHCS insight and support, charting a course for change that will improve the quality of care for African Americans
- Raise BHCS staff awareness and commitment to see community members as equal partners
- Ensure individuals living with mental health challenges and their family members' voices are validated and valued

Statistics show that most behavioral health care systems in California serve African Americans at a higher rate when compared to other ethnic communities. Crowder, lead in the Committee's efforts, states, “Due to cultural biases these services are provided in restrictive, involuntary settings such as hospitals and jails, and the



Senior Pastor Horacio Jones of Family Bible Fellowship and Gigi Crowder, Ethnic Services Manager and lead in the Steering Committee's efforts, at the Black Minds Matter event in February 2015 at the Family Bible Fellowship in Newark. Photo by Janny Castillo.

results are lacking”. Because culturally relevant services are generally not offered, African Americans tend to cycle in and out of services and are not making steady progress toward wellness.

Cultural Responsiveness

In making recommendations, Committee members believe it is critical to recognize that individual community members have unique social, cultural and faith leanings.

“We have a golden opportunity to come up with a set of services that are tailored for the African American community.”
–Lorna Jones

“When African Americans with a mental health challenge are incarcerated, their mental illness is being criminalized,” says Yvonne Rutherford, M.D., a pediatrician and Steering Committee member. “There are much better and cost effective ways to provide mental health services.”

These values affect the way each person looks at mental health and influence whether or not an individual seeks help.

“When you meet people where they are culturally, there's a better connection which helps to build trust, improve care and advance

short-term and long-term positive results,” Rutherford says.

When a mental health worker is viewed as condescending, not listening and not caring, individuals may quickly conclude, “I’m not going back.”

Committee member and the first elected Chair, Lorna Jones, Executive Director of Bonita House Inc., envisions the African American Wellness Hub having mental health, substance use and health pieces together at one location. “We have a golden opportunity to come up with a set of services that are tailored for the African American community,” says Jones. “It’s about developing a quality of life that each person chooses.”

Historical Trauma and Its Impact

Research shows trauma is carried over multi-family generations and may influence mental wellness. Some committee members cite under-addressed historical concerns as the main reason for the need of the Steering Committee.

“It is important to recognize the impact historical trauma has had on African Americans,” says Abu Rahim, committee member and Mentor on Discharge program coordinator at NAMI Alameda County South. “Racism has a profound influence on how African Americans come to a definition of self. Racism is subtle, systemic and ongoing.”

Rahim denounces the “one shoe fits all” approach to providing mental health services. “All preconceived notions on how to serve the African American community

must be abandoned. Meaningful input on how to provide effective services must be given in collaboration with the African American community,” he says.

Promoting Awareness and Training

Committee members want to offer ethnic-specific cultural competency training for all BHCS staff and its system partners such as probation, public health, social services and education. Crowder has begun this process.



Bre Williams speaking at the Black Minds Matter 2! event. Photo by Janny Castillo.

“Surveys have clearly indicated that the place people turn to first in times of crisis or need is their faith leader,” says Pastor Horacio Jones, Steering Committee member and the founder and Senior Pastor of Family Bible Fellowship.

From her experiences at Bonita House working with individuals with a mental health and a substance use concern, Jones believes that people receiving services often have the answers. “We need to take into account the natural and

“It is important to recognize the impact historical trauma has had. ... Racism has a profound influence on how African Americans come to a definition of self.”
–Abu Rahim

innate abilities that each person has,” she says. “And, we need to go at their pace, not our pace.”

Developing Partnerships and Improving Outreach

It’s important that BHCS and its behavioral health partners better understand, engage and offer non-biased support to African American community members who are experiencing or are at risk for serious mental health issues.

“We need to reach each person at their point of need,” Rutherford says. “You are creating a marriage between the health care worker, person and family. More subtle cultural differences take some understanding.”



Abu Rahim speaking at the Black Minds Matter 2! event. Photo by Janny Castillo.

The task of identifying real-life solutions to challenging and difficult matters won’t be easy. African American Steering Committee members are resolved to address the complex mental health and substance use needs of African Americans in Alameda County.

Resources in this article

For information about the African American Health and Wellness Steering Committee, contact Gigi Crowder. 510-777-2118 or GCrowder@acbhcs.org

Link to the 2011 African American Utilization Study Report. Found at www.acmhsa.org. Click on Documents.

Improving Outcomes for African Americans— Innovative Community-Based Learning Opportunities
 To receive funding for staff training. Through June 30, 2016.
510-777-2118
www.acinnovations.org

HOPE AND RECOVERY FOR THE HOMELESS

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Henry Ochs, aka "Hammerin' Hank," has worked part time at KRBB-FM (Q-102.1), a radio station in San Francisco, since December 2014. He writes and records public service announcements. "I love working there and the staff are great," Henry says. "I'd love to work more hours." Photo by Tue Nam Ton.

be productive and a way to reclaim their place in the community.

"We offer individual placement and support (IPS) and assist persons with a serious mental illness to get a competitive job," says Rick DeGette, MFT, Alameda County BHCS Vocational Services Director.

A competitive job is one that people can apply for whether or not they have a disability. "Our goal is to expand the number and types of jobs that will be a good match for our consumers' preference." These positions are in the administrative, retail, food service, warehouse, transportation and education fields.

Studies show that the total number of weeks in competitive work

or school has a positive impact on a person's ability to address their mental health concern, reducing hospitalizations and other costly care.

For two months, Cin, who is in her 50s, works part time as a demonstrator at a grocery store. "When I was not in the work force, I kept away from people and would rarely leave my apartment," Cin says. "It helps me a lot to work."

For information, contact
Rick DeGette, MFT, Vocational Services Director
510-383-1600 or
RDeGette@acbhcs.org

Client-Directed Treatment

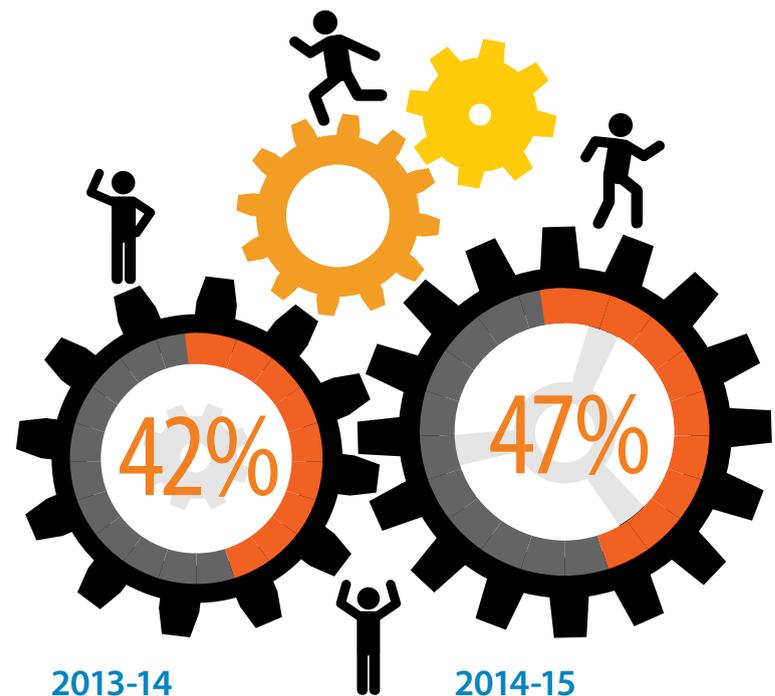
Assertive community treatment (ACT) is a successful way to engage the homeless or formerly incarcerated in mental health recovery.

"Full Service Partnerships embrace client-driven services and supports with each client choosing services based on individual needs," says James Wagner, LMFT/LPCC, Adult System of Care Director, Alameda County BHCS.

ACT provides:

- Low staff-to-person ratio
- Assistance with housing, employment and education
- Team approach to services, with clients having access to any team member

For information, contact
James Wagner, LMFT/LPCC,
Adult System of Care Director
510-567-8269 or
ECayce@acbhcs.org



2013-14

133 people found competitive jobs of their choice, out of 315 people served.

2014-15

197 people found competitive jobs of their choice, out of 419 people served.

The above Alameda County statistics are from IPS program data. Non-IPS employment programs for the same group average 23 percent.

Housing First Makes a Difference!

Jim's Story

Up to his mid-50s, Jim (a fictitious name) had housing. He went off his psychiatric medication and was homeless for more than 10 years.

Abode Services program staff tried to engage with Jim several times. He was preoccupied with delusions and the voices that he heard, which are part of the mental illness he lives with. Jim started an encampment on the front lawn of the city government buildings, yelling that he was the rightful mayor.

Abode Services staff partnered with the police department and arranged for Jim to be relocated. A few Abode Services staff intensely worked with Jim while he was homeless. Jim connected with one case manager, who was able to build a relationship with him and get him to take an injectable medication.

Now, Jim has been housed for five years. He had a heart attack and was open to work with his case manager to reduce the risk of further heart problems.

Jim speaks regularly with his family, after being out of touch with them for several years. It's a meaningful relationship and something Jim holds dear to his heart.



Since 2007 in Alameda County, MHSA dollars have helped more than 600 homeless individuals with serious mental health concerns obtain permanent housing.

Mental Health Information & Resources

Education and Advocacy Services for Alameda County Mental Health Services Users

Peers Envisioning and Engaging
in Recovery Services (PEERS)
510-832-7337
www.peersnet.org

Family Education and Resource Center (FERC)

Warm-line: 1-888-896-3372
www.askferc.org

Support and advocacy for family
caregivers dealing with a serious
mental health challenge.
Services in Spanish & Korean.

Mental Health Education and Support

National Alliance on Mental Illness (NAMI)

Education and support for those
affected by mental illness—people
living with a mental health concern,
family members and friends.

1-800-950-6264 • www.nami.org
M-F, 10am-6pm Eastern Time

FOUR LOCAL NAMI AFFILIATES:

NAMI Alameda County South
(Fremont, Newark, Union City)
510-969-6479

www.namiacs.org
Some services provided in Mandarin.

NAMI Alameda County
510-334-7721
www.nami-alamedacounty.org

NAMI East Bay (Albany, Berkeley)
510-524-1250
www.namieastbay.org

NAMI Tri-Valley (Livermore,
Pleasanton, Dublin)
925-980-5331
www.nami-trivalley.org

For People with a Mental Health Concern and Families

**Mental Health Association
of Alameda County**
Provides direct assistance
and support to people with a
mental illness and their families.
510-835-5010
www.mhaac.org

Services for LGBTQ and Two Spirit People

The Pacific Center has drop-in
support groups and therapy by
appointment for youth, adults
and seniors.

510-548-8283 (ext. 250 for appts.)
M-Fri. 10am-9pm, Sat. 10am-4pm
www.pacificcenter.org

UPCOMING EVENTS

Mental Health Association of Alameda County

Annual Awards Dinner
Wed. Jan. 20, 6:30pm
Sequoiah Country Club
4550 Heafey Rd, Oakland
For tickets and nomination
info, email main@mhaac.org
or call 510-835-5010.

Alameda County Mental Health Board

Advocacy, review and evaluation
of mental health system.
Meets 2nd Monday of each
month, noon-2pm. Free and
open to public.
1100 San Leandro Blvd.,
San Leandro.
510-567-8107

Alameda County Behavioral Health Care Services (BHCS)

Call **911** in case of a life
threatening emergency

Such as...

- In immediate physical danger or harm
- In the process of a suicide attempt

CRISIS & URGENT CARE

MULTILINGUAL HOTLINE 24 HOURS A DAY—7 DAYS A WEEK

For mental health or
substance use help, call ACCESS
1-800-491-9099

ACCESS is a multilingual, culturally responsive call center that provides information, screening and referrals for mental health and substance use disorder treatment for Alameda County residents.

CRISIS SUPPORT, INFORMATION & REFERRAL—MONDAY TO FRIDAY

Para español, llame al:
510-535-6200—Oakland
510-300-3180—Hayward

中文電話線: **510 869-7200**
Bằng tiếng Việt, xin gọi:
510-869-7200

SUPPORT SERVICES

WELLNESS CENTERS

Welcoming and accessible drop-in services offering classes and programs, skills-building, and behavioral health services for people with a known or suspected mental illness. No appointment is necessary.

Alameda, Four Bridges
510-827-2097

Oakland, Towne House
510-658-9480

Fremont, South County
510-657-7425

Pleasanton, Valley
Wellness Center
925-484-8457

Hayward, Hedco House
510-247-8235

SUICIDE PREVENTION

For people having suicidal thoughts and feelings or who have a specific plan to end their life.

24-hour crisis line: 1-800-309-2131

Or

Text “safe” to 20121 4-11pm, 7 days a week

PARENT SUPPORT HOTLINE

Hotline for parents and caregivers of children 0-21 years of age. Call anonymously for support, resources and positive parenting tips. English and Spanish spoken. Multilingual translation. Multiple phone sessions available.

**24-hours a day
7 days a week
1-800-829-3777**

WALK-IN URGENT HELP Sausal Creek Outpatient Clinic

2620 26th Ave., Oakland
A crisis walk-in service for adults 18 and older.

510-437-2363
M-Fri. 8am–8pm
Sat. & holidays 8am–4:30pm

Only Berkeley & Albany residents

MOBILE CRISIS TEAM
510-981-5254
**11:30am–10 pm, 7 days
a week, including holidays**

BERKELEY MENTAL HEALTH SERVICES

Day-to-day skills and support for individuals with serious mental illnesses.

510-981-5290
(18 & older)

510-981-5280
(youth & family)

CRISIS INTERVENTION AND BRIEF TREATMENT

BHCS Crisis Response Program

M–F, 8:30am–5pm

North County

(Alameda, Oakland and Emeryville)

510-383-5020

South County

(All county areas not included above)

510-891-5600

BHCS services are primarily for people with MediCal or no health insurance. This list includes services provided by BHCS and other organizations. Not all the services listed here receive MHS funds.



www.acbhcs.org