



## Behavioral Health Services - *Communications*

### September is National Suicide Prevention Awareness Month



In honor of **National Suicide Prevention** awareness – September 2019, the San Francisco Department of Public Health Behavioral Health Services is partnering with California's Each Mind Matters movement ([eachmindmatters.org](http://eachmindmatters.org)) to promote the statewide suicide prevention campaign of "Know the Signs"

([suicideispreventable.org](http://suicideispreventable.org)). The Know the Signs (**KTS**) campaign is designed to help people early identify someone who may be experiencing suicidal thoughts and/or behaviors and how to connect that person with proven care.

KTS is a social marketing campaign that aims to prevent suicide by:

- encouraging individuals to **find the words** to talk to someone they are concerned about
- reaching out to **resources** for help
- learning more about the complex nature of suicidal thoughts/behavior and how to supportively **intervene**
- understanding that this issue **appears differently** among age groups & ethnic/cultural groups, so supportive interventions may look very different for each person

**Heather Haney**, Behavioral Health Services Liaison, distributed KTS materials to seven different participating program sites and encouraged five different sites that serve coffee to utilize suicide prevention materials contained on a convenient sleeve. These vital resources were also shared with SFDPH BHS MHSA's (Mental Health Services Act) Advisory Committee members.

Lastly, the MHSA team has also distributed the National Alliance on Mental Illness (NAMI) monthly newsletter to our MHSA stakeholders and providers to bring further awareness to Suicide Prevention Month. This newsletter provided additional tools and resources for warning signs, risk factors, and support in crisis. NAMI will also host a series of webinars that will provide an overview of suicide prevention and culturally-based practices that have proven to work in the efforts of preventing suicide. To register for NAMI's upcoming webinars, please visit: <https://namica.org/localevents/>

Suicide is a crisis that requires ongoing solutions implemented in and by the many sectors of society. Suicide prevention is an interagency and community collaborative effort that must take a holistic approach to address the needs of our most vulnerable and underserved communities. No single entity can solve this complex crisis alone.

For more info about suicide prevention and to help distribute Know the Signs campaign materials, please contact Heather Haney at [heatherhaney@ramsinc.org](mailto:heatherhaney@ramsinc.org).

To download FREE suicide prevention materials, visit the new Each Mind Matters Resource Center at [EMMResourcesCenter.org](http://EMMResourcesCenter.org).

## 6th Annual Reentry Conference and Resource Fair

On Friday, September 6, 2019, the BHS Vocational Outreach Team, Travis Hill and Anthony Sarabia, attended the 6th Annual Restorative Justice Reentry Conference and Resource Fair organized by the Archdiocese of San Francisco. The event was held at Saint Mary's Cathedral located at 1111 Gough Street and was attended by 95 Bay Area organizations offering services in housing, education, health services, job readiness, employment training, etc. Each year the Reentry Conference and Resource Fair brings hundreds of

individuals and organizations to explore the latest concerns, opportunities, and



advancements of justice-involved and crime-affected individuals and families.



Staff from UCSF Citywide and the Occupational Therapy Training Program joined the Vocational Outreach Team network with participants and community-based organizations interested in learning more about our BHS Vocational Co-op Services. According to the organizer of the conference, Julio Escobar, from the Archdiocese of SF, 575 people were in attendance.

If you have any questions or are interested in doing outreach at next year's conference, please contact Julio Escobar at 415-614-5572 or [escobarj@sfarch.org](mailto:escobarj@sfarch.org).

## Community and Client Feedback Encouraged at MHSA Input Meetings



The Mental Health Services Act (MHSA) is a highly engaging and collaborative department that values community member feedback on existing and innovative MHSA programming. To accomplish this, we facilitate and manage the Community Planning Process (CPP) meetings which allow us to engage with our stakeholders at all levels of the planning, implementation, evaluation and budgeting process for MHSA funded programs. Our CPP meetings provide

opportunities for our stakeholders to develop and inform our Integrated Three-Year Plan and Annual Updates.

In the fiscal year 2018-19, MHSA hosted 23 community engagement meetings to collect community member feedback on existing MHSA programming and better understand the needs of the community. Attendees included mental health and other service providers, consumers of mental health services and their families, representatives from local public agencies, community- and faith-based organizations, residents of San Francisco, and other community stakeholders.

For the fiscal year 2019-20, MHSA is launching a series of CPP meetings across the County, including some that prioritize Behavioral Health Services (BHS) client input.

Upcoming CPP meetings include:

- Thursday, October 3, 2019 – 10AM at 25 Van Ness, Room 610 – City & County Workforce
- Friday, October 4, 2019 – 2:00 p.m. at Koret Auditorium (Ground Floor), SF Public Library, 100 Larkin Street, 94102. – BHS, HSH, & Other Providers Connected to Supportive Housing – Space is limited
- Tuesday, November 19, 2019 – 3PM at 1380 Howard, Room 515 – BHS Client Council & BHS Clients
- Monday, December 2, 2019 – Time TBD at SF Public Library – People Experiencing Homelessness & People of Trans Experience



### BHS Client Council Recruitment & November 19th CPP:

San Francisco Behavioral Health Services recognizes the unmatched value of integrating client feedback into mental health services. Thus, MHSA is partnering with the BHS Client Council to host a CPP meeting that is open to BHS clients (Intensive Case Management/Full Service Partnership, Outpatient, and Substance Use Disorder clients).

The BHS Client Council meets every third Tuesday at 3PM and is always open to new members. If you know someone who might be interested in joining the BHS Client Council, the November 19th meeting is a great space to see how Client Council helps inform mental health services. *For more information, contact [MHSA@sfdph.org](mailto:MHSA@sfdph.org).*

## Training for Peer Support Service Providers



Richmond Area Multi-Services, Inc. is pleased to present its **September 2019 Leadership Academy Training** designed to support and educate peer counselors, advocates, and others providing or interested in providing peer support services in the mental health field

in San Francisco. Please see below for further details and RSVP instructions.

When: Friday, September 27th, 9 AM-12 PM

Where: San Francisco State Downtown Campus @ 835 Market Street, room 619

Cost: FREE! Light breakfast provided.

### Topic: Suicide Awareness & Prevention

About The Training: Dany Ricci, the Youth and Outreach Coordinator with San Francisco Suicide Prevention, will facilitate this critical training as September is suicide prevention month. Participants will learn to build skills around assessing for suicide risk, identifying warning signs of suicidal ideation, and ways to offer effective peer support with individuals at risk of suicide.

RSVP required: Click [here](#) to fill out the RSVP form. Please contact Priscilla Kyu, at (415) 579-3021 x 131 or via email at [priscillakyu@ramsinc.org](mailto:priscillakyu@ramsinc.org) with any questions or concerns.

## Client Success with Law Enforcement Assisted Diversion

"S" has been a LEAD client since July 2018. When they were referred to LEAD, they had open legal cases in multiple counties and were involved with other providers but had difficulty meeting all of the various requirements. Since the addition of LEAD providers to his team, this individual been able to make all court dates for the Community Justice Court (CJC). The LEAD legal team also facilitated a disposition in an out of county case that allows "S" to complete community service hours in San Francisco.



While the community service hour commitment is significant, the LEAD team is closely supporting this individual to help them meet the requirement to avoid going to jail in the other county. Relatedly, the LEAD legal team filed for a reasonable accommodation, and "S" was granted a later community service start time which better meets "S"'s mental health needs. Currently, "S" is housed through CJC and is working with providers to develop the most successful plan for permanent housing. "S" is also on an injectable psychotropic medication as well as Suboxone. Congrats to "S" and the LEAD team for this great collaboration!

## Staffing Updates: Forensic/Justice Involved Behavioral Health Services

### Drug Court



**Jessie Escobar**, who is joining DPH as the Drug Court Coordinator, believes that education and health can transcend barriers to a higher quality of life. In previous roles, Jessie has gained experience working in the fields of community health with youth and adults, including those experiencing physical handicaps, mental health illness, and substance use disorders.

Most recently, he worked as the Community Outreach Manager at HealthRIGHT360 to enroll homeless and uninsured adults to medical and dental services and substance use disorder treatment through street outreach and collaborative partnerships. He is passionate about the transformative power of rehabilitation, recovery support, and personal development. He has also worked with SFUSD's Wellness Initiative, organizing student support groups and providing health resources to youth and their families.

In 2018, he received a Masters in Public Administration from the University of San Francisco. Jessie looks to continue to serve his hometown of San Francisco and its diverse population through the mission of the Department of Public Health and through his role at the Drug Court Treatment Center at 555 Polk Street.

*For more information on Drug Court, please contact Linda Wu (415-202-2818, [linda.h.wu@sfdph.org](mailto:linda.h.wu@sfdph.org)).*

### Law Enforcement Assisted Diversion

We are excited to have a new Program Manager for LEAD, **Michael Huff**. Michael has been working as a criminal justice and substance use disorder specialist for Alameda County. In this role, he developed public and private partnerships, fostering humane, client-centered treatment, and support services for individuals within the criminal justice system. He has also served in the Office of Urban Male Health in the Alameda County Public Health Department, addressing the health care needs of underserved populations.



Additionally, Michael directed the San Francisco African American Health Disparity Project for five years, collaborating with others to eliminate health disparities and barriers to health care. Prior to that, he was the director and site manager of the West Oakland Health Council's Transitional Housing program. Michael continues to teach sociology and criminology courses at Holy Names University. He also teaches men and women serving life sentences in the California State Prison system on how to provide trauma-informed care and substance use disorder treatment to their fellow inmates. He earned a Ph.D. in Sociology from Northwestern University and a master's degree in Public Administration from California State University, East Bay. He will be a great asset to our team!

*For more information on LEAD, please contact Michael Huff ([michael.huff@sfdph.org](mailto:michael.huff@sfdph.org), 415-489-7315).*

### Assisted Outpatient Treatment

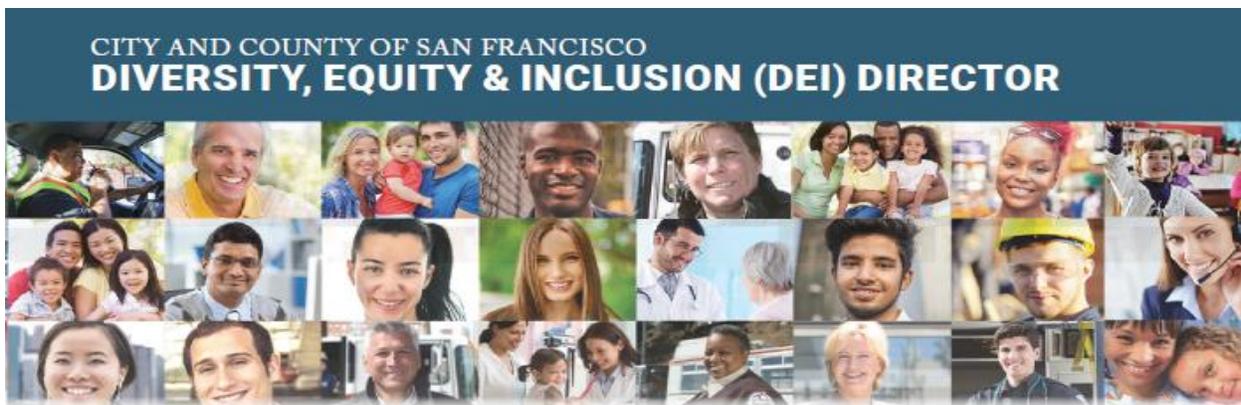


**Marley Shepard-Ohta** is joining the Assisted Outpatient Treatment as an Associate Social Worker after graduating from California State University East Bay's Masters of Social Work Program. Before getting his Master's Degree, Marley worked with homeless and at-risk youth in Harlem and then in college access programming in Los Angeles. Since then, Marley has narrowed his focus to working with the city's vulnerable adult population.

Marley has gained clinical experience in the non-profit sector, the criminal justice system, as well as community based clinics. He most recently worked with the Human Services Agency Disability Evaluation and Consultation Unit to secure Social Security benefits for adults with disabilities. Welcome to the DPH Team!

For more information on AOT, please contact Chris Wright ([christine.wright@sfdph.org](mailto:christine.wright@sfdph.org), 628-217-6435)

### Job Opening: Diversity, Equity & Inclusion Director



#### MINIMUM QUALIFICATIONS

**EDUCATION** – Possession of a baccalaureate degree from an accredited college or university; and

**EXPERIENCE** – Five (5) years of professional human resources experience with an emphasis on leading or managing a program around diversity, equity, and inclusion, of which three (3) years must have been in a supervisory role, supervising professional staff involved in the more difficult and complex matters associated with human resources with an emphasis in the areas of diversity, equity, and inclusion efforts.

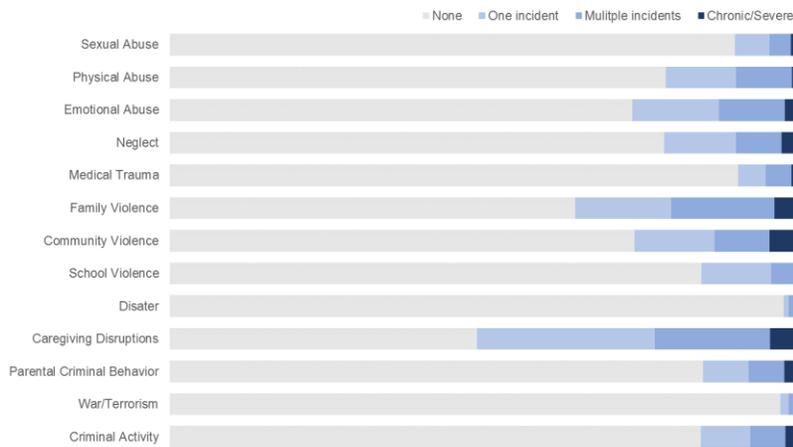
**EDUCATION SUBSTITUTION** – Additional experience as described above may be substituted for the required degree on a year-for-year basis (up to a maximum of two (2) years. One (1) year is equivalent to thirty (30) semester units/forty-five (45) quarter units.

**EXPERIENCE SUBSTITUTION** – Possession of a Juris Doctorate (J.D.) or Master's degree in Personnel Administration, Human Resources Management, Business Administration, Public Administration or Clinical/School/Industrial-Organizational Psychology, or other related degree may substitute for one (1) year of the required professional experience (note, the advanced degree cannot substitute for the required supervisory experience).

For more information click [here](#)

## Traumatic Experiences and Traumatic Stress Symptoms Among Children/Youth

The Behavioral Health Services' Children, Youth, & Families System of Care (CYF SOC) uses the Child and Adolescent Needs and Strengths Assessment (CANS) as a functional assessment tool to supplement clinical decision making, including level of care and service planning; to facilitate quality improvement initiatives; and to monitor the outcomes of services children and youth receive. The CANS includes a Trauma Module that consists of items about traumatic experiences such as physical abuse and exposure to family violence, as well as traumatic stress symptoms. Traumatic childhood experiences that are cumulative, severe, or chronic and happen in the absence of supportive adults can result in overactivation of the body's stress-response system and lead to wear-and-tear on the body and the brain (<https://developingchild.harvard.edu/resources/aces-and-toxic-stress-frequently-asked-questions/>).



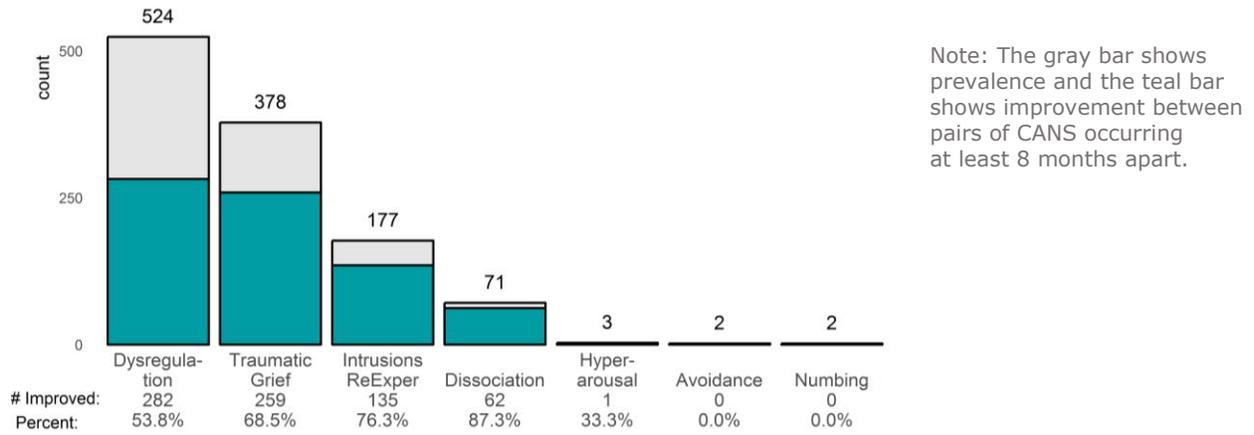
*Trauma History Among 968 Children/Youth Ages 6 through 20 as Indicated on Initial CANS Assessment Occurring During FY 18-19*

For children/youth ages 6 through 20 years entering the CYF SOC during Fiscal Year 2018-2019, the most prominent traumatic experiences were caregiving disruptions, family violence, emotional abuse, community violence. Half of the children entering the system had experienced at least one incident of caregiving disruptions. Community violence, caregiving disruptions, and family violence experiences also

had the largest proportion of a chronic/severe rating (i.e., repeated, chronic, on-going, and/or severe trauma with medical and physical consequences).

Quarter 4 data for Fiscal Year 2018-2019 show that emotional and/or physical dysregulation was the most prominent traumatic stress symptom experienced by children/youth aged 6 through 20 years. Dysregulation is a core symptom of trauma, and it reflects that children/youth who experience trauma have difficulties with identifying and describing internal emotional states, labeling or expressing their feelings, controlling their emotions, and communicating their needs.

*Prevalence of and Improvement in Traumatic Stress Symptoms Among Children/Youth Ages 6 through 20 in FY 18-19 (total number of CANS pairs = 1649)*



The CYF SOC has become more trauma informed as the science on traumatic experiences has strengthened over the past decade. That includes providing trauma-informed treatments like Trauma-Focused Cognitive Behavioral Therapy and strengthening trauma-informed approaches of workforce development to address vicarious trauma. The CYF SOC continues to examine other trauma-focused interventions to augment currently available treatment approaches. Children/youth’s improvement on the traumatic stress symptoms is complicated, however, by the ongoing trauma many of them experience in their home, school, and community.

For more information contact Petra Jerman at [petra.jerman@sfdph.org](mailto:petra.jerman@sfdph.org).



San Francisco Health Network  
Community Behavioral Health Services  
Children, Youth, and Families System of Care

## Our Latinx clients and their stories

### What are the stories of our Latinx children/youth?

- Many strengths of Latinx children/youth highlight the importance of **relationships** and *colectivismo*.
- Latinx children/youth have the highest needs in **Adjustment to Trauma** and **Depression** compared to African-American/Black, Asian, and White children/youth. For the 6 thru 20 age group, they are the second highest to White youth in Anxiety needs, and second highest to African-American/Black youth in Anger Control needs. They are highest in Anxiety needs for 0 thru 5.
- Among the 4 groups listed above, Latinx (4.6%) falls second to White youth (6.1%) in the prevalence of **Suicide Risk**.
- **Cultural Stress** is experienced by almost half (44.9%) of Latinx children/youth and this is strongly influenced by their combined race/ethnicity, language, and socio-economic status.
- Parents/caregivers of Latinx children/youth, compared to other groups, view their children as having predominantly **Attention** problems, and second highest in Internalizing problems.

### How do these stories inform our practice?

- There's a need to assess more systemically; and explore integrating family and other relationships into intervention.
- Explore use of **family-based approaches** such as *Multidimensional Ecosystemic Comparative Approach* (MECA); and *Safety, Awareness, Life, Undocumented and Dios* (SALUD). MECA is a therapeutic approach to help Latinx families manage cultural stress and adapt to the host country (Falicov, 2014). SALUD integrates structural family therapy and narrative therapy together with principles of positive and cognitive psychology to address the unique traumatic experiences of immigrant Latinx youth (Cervantes, 2019).
- Consistently assess for trauma among Latinx children/youth in terms of both historical and ongoing trauma. **Culturally modified Trauma-informed practices** need to be integrated in interventions (e.g. Hendricks, 2017)
- Routinely conduct suicide and other self-harm risk assessment, especially in the context of the rise of psychiatric hospitalizations among Latinx youth in California (KHN, 2016).

For more information contact Ritchie Rubio at [Ritchie.Rubio@sfdph.org](mailto:Ritchie.Rubio@sfdph.org).

## Spotlight on the Richmond Area Multi-Services Peer Wellness Center

In the fall of 2015, RAMS Division of Peer-Based Services, Peer Wellness Center program began providing services to a small but growing group of clients accessing Behavioral Health Services. Today, located in the Civic Center/Mid-Market neighborhood of San Francisco, the RAMS Peer Wellness Center has accomplished significant outcomes.

- 1,200 active client members.
- Over 5,000 support, psycho-educational and recreational groups.
- Over 32,000 individuals access our services.
- The program is staffed by approximately 20 Peer Counselors, all of whom identify as having mental health and/or substance use as lived experience.
- The Peer Wellness Center is 100% peer-staffed, including the direct supervisors.

The program operation hours are Monday, Wednesday, and Fridays, from 9:00am-5:00pm, Tuesday and Thursdays from 9:00am-7:00pm, and Saturdays from 10:00am-3:00pm. The Center is closed on Sundays. The Peer Wellness Center is located at 1282 Market Street, San Francisco, CA 94102.

RAMS Peer Wellness Center provides a respite and a safe space for its members to participate and engage with their peers as part of their healing and recovery journey. Based on the principles of Wellness and Recovery, the Peer Wellness Center promotes a milieu that encourages healthy living activities, establishing strong social network supports, accessing resources to increase stabilization with housing and healthcare as well as establishing more structure in their daily lives. The peer counselors offer an invaluable dimension to support as having shared lived experiences and can listen to and provide hope to members and clients who are struggling in their recovery.

*Peer Wellness Center is funded by San Francisco Mental Health Services Act. For more information contact: [MHSA@sfdph.org](mailto:MHSA@sfdph.org).*