

Mental Health Services Act: Prevention & Early Intervention  
Work Group: Ages 26 to 59  
August 22, 2008

Attendees: Emily Marsh, Darrie Ganzhorn, Jim Brown, Norma Paige, Joanne de los Reyes-Hilario, Betsy Clark, Cecile Mills, Rocio Mendoza, Guy Grant, Bill Manov, Carly Galarneau, Alicia Nájera, and Jerry Solomon.

1. Agenda Review.
2. Introductions.
3. **Evening presentations/meetings announced.**
  - Tuesday, August 19th we had a presentation on, "Trauma-Informed Services," by Gabriella Grant (from On Track Program Resources in Sacramento), and Dr. Jerry Solomon will engaged the audience to gather input on desired outcomes for Trauma-Exposed individuals.
  - **Tuesday, August 26th** from 6:30 p.m. to 8:30 p.m. in the large auditorium in the basement of 1080 Emeline Avenue, Santa Cruz. We will have a presentation on the, "Onset of Mental Illness," by Dr. Charles Johnson, followed by a panel presentation from consumers and family members who have experienced mental illness and will share their stories about what interventions worked (and what did not), as well as their perspectives on desired outcomes. Presenters include: Carol Williamson and John Wright. Dr. Jerry Solomon will engage the audience to gather their input on desired outcomes.
  - **Wednesday, September 3rd** from 7:00 p.m. to 8:30 p.m. at the Pajaro Valley Community Health Trust, 85 Nielson Street, Watsonville, CA. Topic: "Stressed Families". Presenter is to be determined.
4. **Speaker: Bill Manov.** Spoke about drug and alcohol services in Santa Cruz County and handed our resource referral directory. The County does provide some assessment, referral and case management, but actually provides very little direct services; the County contracts with community based agencies for direct services. Funding resources include Medi-Cal, Prop 36, and some "discretionary" funds. Funds have decreased over the years; used to pay for 6-8 months of residential treatment, and not the maximum is 2-3 months with a step down to sober living environment plus case management. Have a trained clerical person that can answer referral line (454-4050) from Monday thru Friday from 8 a.m. to 5 p.m. One big issue that Bill sees is that persons that have substance use problems are often dually diagnosed, but do not qualify for County Mental Health because their mental health issue is not a "serious mental illness". Vision is to have a strong mental health dual diagnosis treatment program, with training and consultation to drug & alcohol staff, psychiatric support (to assess and treat), and to provide support for medications.
5. **Onset of Mental Illness.** Group did "sticky dot" exercise. Each person got 6 "sticky dots" and was able to mark the risk factor that they thought was most serious; each person could put up to three dots on one risk factor, put had to put the rest on other factors.
  - **Risk Factors:**
    - a. Genetic predisposition [1]

August 27, 2008

- b. Lack of support/isolation [6]
  - c. Substance abuse/use [14]
  - d. Exposure to crime [3]
  - e. Military exposure [9]
  - f. Discrimination/racism/stigma [2]
  - g. Loss/divorce [0]
  - h. Abuse – physical/sexual/emotional [9]
  - i. Nutrition [3]
  - j. Stress [0]
  - k. Economics [3]
  - l. Family history of suicide and/or mental illness [10]
- 6. Wrap up.** Work groups will wrap up by the end of September. We need to come up with outcomes and proposed programs. We will have MHSA Steering Committee look at proposals, and will be doing focus groups also. Need to have work groups look at resource guide to think about proposed programs.
- 7. Outcomes: First Break.** Group brain stormed possible outcomes, including:
- To provide early identification of serious mental illness
  - To improve global assessment of functioning by early treatment
  - To enhance resilience and protective factors
  - To promote social support, recovery, and academic achievement and/or employment
  - To decrease hospitalizations, involvement with criminal justice, drop outs
  - To decrease loss of housing
  - To promote diversion for greater use of mental health resources/intensity by providing early assessment and intervention
  - 80% of persons who request services receive assistance
- 8. Next Steps.** Think about outcomes. Explore programs to achieve outcomes, and think about measurable outcomes for evaluation.

**Next Meeting:** Friday, September 5, 2008. From 9:30 to 11:30 at Career Center, 18 West Beach Street, Watsonville, CA.