MHSA Prevention and Early Intervention
Who We Serve
FY 2019-2020
<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Summary</td>
<td>3</td>
</tr>
<tr>
<td>Prevention and Early Intervention Services Demographic Overview</td>
<td>4</td>
</tr>
<tr>
<td>Prevention and Early Intervention Outreach Demographic Overview</td>
<td>5</td>
</tr>
<tr>
<td>Mental Health Awareness and Stigma Reduction</td>
<td>6</td>
</tr>
<tr>
<td>Suicide Prevention Training and Statewide PEI Projects</td>
<td>11</td>
</tr>
<tr>
<td>Parent Education and Family Support</td>
<td>15</td>
</tr>
<tr>
<td>Early Intervention for Families in Schools</td>
<td>18</td>
</tr>
<tr>
<td>Transition Age Youth (TAY) Project</td>
<td>19</td>
</tr>
<tr>
<td>First Onset for Older Adults</td>
<td>23</td>
</tr>
<tr>
<td>Trauma-Exposed Services for All Ages</td>
<td>26</td>
</tr>
<tr>
<td>Underserved Cultural Populations</td>
<td>27</td>
</tr>
<tr>
<td>Mental Health Awareness and Stigma Reduction</td>
<td></td>
</tr>
<tr>
<td>---------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>• Community Mental Health Promoter Program</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Parent Education and Family Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Participants were served by Mobile PEI, Triple P, and Strengthening Families Program</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Early Intervention for Families in Schools</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Participants were served by Peace 4 Kids</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Transition Age Youth Project</th>
</tr>
</thead>
<tbody>
<tr>
<td>• TAY outreached to by Peer to Peer</td>
</tr>
<tr>
<td>• TAY participated in Stress and Your Mood &amp; CAST</td>
</tr>
<tr>
<td>• Teen Suicide Awareness Prevention Program</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>First Onset for Older Adults</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Older adults served by CBT for Late Life Depressions, Care Pathways, Healthy IDEAS, Office on Aging, PEARLS</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Trauma-Exposed Services for All Ages</th>
</tr>
</thead>
<tbody>
<tr>
<td>• CBITS for children</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Underserved Cultural Populations</th>
</tr>
</thead>
<tbody>
<tr>
<td>• BRAAF</td>
</tr>
<tr>
<td>• Mamás y Bebés,</td>
</tr>
<tr>
<td>• Keeping Intergenerational Ties in Ethnic Families (KITE)</td>
</tr>
</tbody>
</table>

Riverside County Residents were engaged by Prevention and Early Intervention Outreach and Service Programs
Prevention and Early Intervention Services Demographic Overview

A total of 2,311 individuals and families participated in Prevention or Early Intervention (PEI) services in FY2019-2020. An additional 4,072 middle school and high school age youth and 1,232 school staff, parents and community members participated in suicide prevention training on school sites. This resulted in a total of 7,615 served, and does not include outreach. The following details the demographics of the 2,311 participants.

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>PEI Participants (n=2,311)</th>
<th>County Census (n=2,443,454)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caucasian</td>
<td>16.36%</td>
<td>36%</td>
</tr>
<tr>
<td>Hispanic/Latinx</td>
<td>46.39%</td>
<td>47%</td>
</tr>
<tr>
<td>Black/African American</td>
<td>10.30%</td>
<td>7%</td>
</tr>
<tr>
<td>Asian/Pacific Islander</td>
<td>5.67%</td>
<td>7%</td>
</tr>
<tr>
<td>Native American</td>
<td>0.82%</td>
<td>0.6%</td>
</tr>
<tr>
<td>Multi-Racial</td>
<td>6.27%</td>
<td>2%</td>
</tr>
<tr>
<td>Other/Unknown</td>
<td>13.76%</td>
<td>0%</td>
</tr>
</tbody>
</table>

Hispanic/Latinx (46.39%) comprised the largest proportion of the PEI participants served. Hispanic/Latinx PEI participation reflects the underserved priority populations intended to be reached by the PEI programs, and is also representative of the county population.

The majority of PEI participants were children (42%). The second largest age group served by PEI programs were adults (39%). Older adults represented 13% of the population served by PEI programs. PEI also focuses on Transition Age Youth (TAY), and 17% of the 2,311 participants were aged 16 to 25 years (not shown in the graph). Many of the 5,304 school age youth were TAY.

More than half (61%) of PEI participants were female, 25% were male, 0.6% were transgender, and gender was unknown for 13%.
In total 71,680 individuals were reached by PEI from a variety of Outreach activities including, Depression screening at Community Health Centers, specific outreach to TAY youth and Older Adults and outreach activities provided under Mental Health Stigma and Awareness presentations, and Suicide Prevention trainings.

The largest group of those reached by PEI Outreach were Caucasian (58%). Race/ethnicity was unknown for 16% of Outreach participants because the programs did not have the opportunity to collect demographic information at outreach events.

The largest age group reached were adults 18-59 (63%), 13% were children 0-17. TAY were also outreached to and accounted for 20% of the people in outreach efforts. Peer to Peer Speaker’s Bureau mostly targets TAY and that is reflected in the ages in the graph above. The unknown amount is due to programs not having the opportunity to collect demographic information at outreach events.

Females made up the largest group of those reached in PEI Outreach efforts (55%), 35% were male, and 10% were of unknown gender. The unknown amount is largely due to the programs not having the opportunity to collect demographic information at outreach events.
Mental Health Awareness and Stigma Reduction

The goals of this PEI project area is to increase community outreach and awareness about mental health information/resources, and to reduce stigma. These activities are designed to outreach to underserved populations, increase awareness of mental health topics, and to reduce stigma and discrimination. **In total, at least 71,680 people received a form of outreach. Many more were exposed to various media campaigns and/or trainings.** Community Mental Health Promoters Program began newly implemented services to underserved communities in 19/20 fiscal year which included Black/African American, Native America, Asian/Pacific Islander.

**Ruhs-BH Cultural Competency Program** – Regional outreach liaisons partner with Community Cultural Consultants to engage underserved communities and bring outreach and awareness to Riverside County underserved populations.

**Dare To Be Aware Conference** – Full day mental health awareness conference for middle and high school students with the goal of increasing awareness and reducing stigma related to mental illness.

- **723 youth and educators attended**
- Youth from 26 schools throughout Riverside County attended a variety of workshops on mental health topics at the conference.

**Peer Navigation** – Peer navigators assists the public with a real person who is in their own behavioral health recovery – they have ‘been there’ and have had the same questions, fears, and judgments. They assist the public in navigating the behavioral health system and connect them to resources based upon their individual need.

- **403 Served at Peer Navigation Center**
- The Peer Navigators: Listen, inform about choices, help figure out where the local resources are, helps decide which resources are best, points out good places to start, answers questions about mental health recovery, helps people see the hope.
**Mental Health Awareness and Stigma Reduction-Community Mental Health Promotion Programs (CMHPP)**

**Black/African American CMHPP** – RUHS partnered with African American Health Coalition, and trained culturally competent community health promotors to give 1 hour MH presentations, conduct outreach, and have one-on-one consultations in a non-stigmatizing community setting.

**Presentations**

- 232 individuals (new)
- Topics included Depression, General Mental Health, Suicide Prevention, Trauma.
- 85 presentations provided (Desert, Mid, West), averaging about 70 min each; reached 232 individuals; majority aged 26-59 (63%).
- Satisfaction survey showed that as a result of the presentation, consumers felt confident in seeking help and resources, that they could share the information with family and friends, that they got a better understanding of mental health issues.

**23 individual consultations**

- In depth one-on-one assistance upon outreach or after presentations to help an individual or family with specific needs and provides referrals for to help meet those needs.
- Resulted in a total of 37 referrals including referrals to PEI programs, Outpatient Mental Health Services, Support Groups, and Social Services.

**Outreach**

- Reached over 3,000 people
- Outreach activities totaled to over 690 hours and reached over 3,000 people (estimated).
- Outreach activities included phone calls, attending community meetings, and distributing flyers and email.
- Marketed the program, encouraged attendance at the 1 hour presentations.
Native American CMHPP – RUHS partnered with Riverside/San Bernardino Indian Health Inc, and trained culturally competent community health promoters to give 1 hour MH presentations, conduct outreach, and have one-on-one consultations in a non-stigmatizing community setting.

<table>
<thead>
<tr>
<th>Presentations</th>
<th>213 individuals (new)</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Topics included Anxiety, Bullying, Depression, Mental Health Vs. Mental Illness, Wellness.</td>
<td></td>
</tr>
<tr>
<td>• 16 presentations provided (Desert, West), averaging about 70 min each; reached 213 individuals; provided to middle school and high school age students as well as adults in the tribal community centers.</td>
<td></td>
</tr>
<tr>
<td>• Satisfaction survey showed that as a result of the presentation, consumers felt confident in seeking help and resources, neutral in ability to talk about MH with family/friends.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>9 served by individual consultations</th>
</tr>
</thead>
<tbody>
<tr>
<td>• 12 consultations served 9 people in the West and Desert region.</td>
</tr>
<tr>
<td>• 26 referrals were made including referrals to PEI services, Support Groups/Talking Circles, Housing Services, Outpatient MH services.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Outreach</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reached over 6,100 people</td>
</tr>
<tr>
<td>• 700 hours of outreach activities in the Desert, Mid-County and West regions reached over 6,100 people.</td>
</tr>
<tr>
<td>• Majority of outreach was tabling (and handing out flyers, material etc).</td>
</tr>
</tbody>
</table>
**Mental Health Awareness and Stigma Reduction-Community Mental Health Promotion Programs (CMHPP)**

**Promotores Hispanic/Latino**

*CMHPP* RUHS partnered with Vision y Compromiso, and trained culturally competent community health promotors to give 1 hour MH presentations, conduct outreach, and have one-on-one consultations in a non-stigmatizing community setting.

- **Presentations**
  - 1,855 individuals (new)
  - Topics included Depression, General Mental Health, Suicide Prevention, Trauma.
  - Presentations were provided in the Western and Desert regions of Riverside. All presentations were provided in Spanish.
  - Satisfaction survey showed that as a result of the presentation, consumers felt confident in seeking help and resources, that they could share the information with family and friends, that they got a better understanding of mental health issues.

- **46 individual consultations**
  - The program completed 46 individual consultations in which 26 individual consultations were provided in the Western region and 20 in the Desert region.
  - 34 out of 46 consultations occurred as a result of community presentations (74%).
  - 40 referrals were made to PEI services, social service agencies and NAMI support groups.

- **Outreach**
  - Reached over 25,000 people
  - There were a total of 790 recorded outreach activities. In the Western region there were 410 (52%) and in the Desert 380 (48%).
  - Countywide, outreach activities totaled to over 746 hours.
Asian-American/Pacific-Islander CMHPP – RUHS partnered with Asian Pacific Counseling and Treatment Centers, a division of Special Service for Groups, Inc. (SSG), and trained culturally competent community health promoters to give 1 hour MH presentations, conduct outreach, and have one-on-one consultations in a non-stigmatizing community setting.

Presentations
241 individuals (new)
- Topics included Anxiety, Depression, Stress, General Mental Health, Trauma, and Substance Abuse
- 52 presentations provided (Mid-County, West), averaging about 87min each; reached 241 individuals; provided to mostly adults in churches, community centers and over zoom.

11 served by individual consultations
- 12 consultations served 6 people in the Western region and 5 in the Mid-County region.
- All referrals were made to Outpatient MH services

Outreach
Reached over 9,500 people
- 160 hours of outreach activities in the Mid-County and West regions reached over 9500 people
- Majority of outreach was social media, emails and community meetings
Mental Health Awareness and Stigma Reduction

It’s Up to Us - Media Campaign designed to empower Riverside County residents to talk openly about mental illness, recognize the signs and symptoms of mental illness, recognize the warning signs for suicide, seek help for themselves or others, utilize local resources, and support community members experiencing mental illness.

Narrowcasting

224 Venues
215 Display points

- Narrowcasting as a media strategy placing targeted messages in community venues within neighborhoods to reach specific audiences at libraries, senior centers, WIC offices, doctor offices, etc. Placement is in strategic places such as waiting areas and restrooms. In these strategic settings, individuals from the intended priority populations are temporarily “captive” and especially open to sensitive information such as mental illness and suicide prevention.
- Venues have multiple display points with posters, and brochures adapted form the statewide Know the Signs campaign. A total of 23,081 brochures were distributed.

Media Mix

TV, Cable, Digital, Radio, Signage

EBlasts, Online Videos, Digital Displays

- Media directed audiences to Up2Riverside.org for information, local resources, and the HELPline.
- The website had a total of 416,393 page views and had 220,861 new users.
- Cable spots totaled 71,697 and radio totaled 2,024 from July-Dec2019
- Ads were also on streaming radio platforms with a total of 9,514 clicks landing on Up to Us website.
- Radio spots totaled 4,458.
**Contact for Change** – Community presentations by trained peer supports with lived experience. Presentations are designed to reduce stigma regarding mental illness and to increase community awareness within target populations regarding mental health information and resources.

- 618 participants attended a Speakers’ Bureau presentation. Speakers Bureau involves presenters with lived experience of mental health challenges sharing their personal story of recovery.
- 40% of attendees were Hispanic/Latino, 40% Caucasian, 7% Black/African American.
- Pre to post measures showed decreases in stigmatizing attitudes and increases in positive attitudes towards recovery and empowerment.

**Speakers’ Bureau**

- 618 Attended

**265 people attended 11 Educator Awareness Program**

- Involves presenters with lived experience of mental health challenges sharing their personal story of recovery.
- Target audience: educational faculty and administration. Pre to post measures showed decreases in stigmatizing attitudes and increases in recovery beliefs.

**HELPLine (951) 686-HELP Toll Free 24/7** – A crisis suicide prevention hotline which provides referrals and resource information. In FY19/20, 4,539 calls were received by Helpline.

**Network of Care**- Interactive website available to consumers, family and community members, community based organizations and providers which provides easy access to a variety of behavioral health resources. The website had 175,292 visits and 465,487 page views.
Prevention and Early Intervention
Project Areas—Mental Health Awareness and Stigma Reduction

Mental Health Awareness and Stigma Reduction – Suicide Prevention

Integrated Outreach and Screening – Integrates behavioral health and physical health care to allow greater opportunity to identify early signs of mental illness, while also reducing disparity in access of services to the unserved or underserved populations of Riverside County.

<table>
<thead>
<tr>
<th>PHQ-9 Screening</th>
</tr>
</thead>
<tbody>
<tr>
<td>• A total of 124,756 PHQ-2 or PHQ-9 screeners were administered for this year.</td>
</tr>
<tr>
<td>• 9% PHQ-9 screeners were administered as a follow-up to the PHQ-2.</td>
</tr>
</tbody>
</table>

Statewide Activities – PEI funds were committed to support overarching statewide campaigns that focused on Suicide Prevention, Stigma and Discrimination Reduction. These statewide activities leveraged local efforts with additional awareness campaigns, such as Know the Signs, Walk in Our Shoes, AB2246 suicide policy training to local schools, and Directing Change.

<table>
<thead>
<tr>
<th>Each Mind MATTERS (EMM)</th>
</tr>
</thead>
<tbody>
<tr>
<td>• During FY19/20 EMM provided technical assistance to RUHS-BH PEI to create a Countywide strategic plan for suicide prevention. EMM presented at stakeholder meetings and provided technical assistance on the building of the Suicide Prevention Coalition and the County Suicide Strategic Plan, Building Hope and Resiliency.</td>
</tr>
<tr>
<td>• In FY1920, 38 Riverside County agencies, schools and organizations received outreach materials, a training, technical assistance or a presentation about stigma reduction, suicide prevention and/or student mental health through the collective efforts of all programs implemented under the Statewide PEI Project.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Directing Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>173 films Submitted</td>
</tr>
<tr>
<td>562 county youth participated</td>
</tr>
<tr>
<td>• Directing Change offered Riverside County young people the opportunity to participate in the mental health awareness movement by creating 60 second films about suicide prevention and mental health that are used to support awareness, education and advocacy efforts. Directing change videos are used in various suicide prevention, anti-stigma, and discrimination activities in the County through out the year.</td>
</tr>
</tbody>
</table>
RUHS-BH PEI department has expanded MHFA training across the county with the goal of stretching its resources to more community members.

The Mental Health First Aid program is an interactive session which runs 8 hours. It can be conducted as a one-day 9 hour seminar, two-day 4.5 hour seminar, or a four-day 2.5 hour seminar.

The course covers risk/protective factors and warning signs for mental health.

Separate courses are offered for assisting adults and/or youth.

Suicide Prevention Training – RUHS-BH Prevention and Early Intervention staff were trained as trainers to provide two suicide intervention strategies: ASIST and SafeTALK.

Applied Suicide Intervention Skills Training (ASIST)
273 people attended
- RUHS-BH PEI staff provide trainings to community providers, school staff, and community at large.
- This 2-day workshop is for caregivers who want to feel more comfortable, and confident in helping to prevent the immediate risk of suicide.

SafeTALK
1145 people attended
- This 3 hour workshop is a training that prepares anyone over the age of 15 to identify persons with thoughts of suicide and connect them to suicide first aid and resources.

Mental Health First Aid (MHFA)
744 people attended
- RUHS-BH PEI department has expanded MHFA training across the county with the goal of stretching its resources to more community members.
- The Mental Health First Aid program is an interactive session which runs 8 hours. It can be conducted as a one-day 9 hour seminar, two-day 4.5 hour seminar, or a four-day 2.5 hour seminar.
- The course covers risk/protective factors and warning signs for mental health.
- Separate courses are offered for assisting adults and/or youth.

Know the Signs
292 people attended
- Educates participants on how to recognize the warning signs, and have a conversation and find professional help and resources.
- Focused on three key messages: Know the signs. Find the words. Reach out.
- One hour presentation is also available in Spanish.
Triple P – multi-level system of parenting and family support strategies for families with children from birth to age 12. Triple P is designed to prevent social, emotional, behavioral, and developmental problems in children by enhancing their parents’ knowledge, skills, and confidence. Teen Triple P focuses on development, use of positive parenting, decreasing teen conflict behavior.

- 77% of parents were Hispanic/Latinx, 43% primarily spoke Spanish.
- The majority served were female (82%).
- Positive parenting practices increased and inconsistent discipline decreased. Parents’ anxiety and depression decreased. Also, children’s disruptive behaviors declined in frequency.
- “I learned how to take my time to teach my daughter new skills, how to be patient and follow through with logical consequences” - Participant

Triple P enrolled 199 parents
82% completed the program

- 90% of parents served were Hispanic/Latinx
- The majority of parents served were female (86%).
- Positive parenting practices increased, and poor monitoring decreased.
- Conflicts between teens and parents improved and teen youth behavior showed more pro-social behavior and less behavioral difficulties.

Triple P Teen enrolled 125 parents
78% completed the program

In total, 879 were served countywide.
Mobile PEI – Three Riverside County mobile units provide mental health services, Parent Child Interaction Therapy (PCIT), and a variety of prevention interventions to families in the West, Mid-County and Desert regions of Riverside County. The Mobile PEI prevention activities include; pro-social groups, parenting classes, parent consultations, provider consultations, and outreach.

PCIT enrolled 144 Children and 144 Parent/Caregivers

- PCIT served children with an average age of 4 years old, almost two-thirds of the children served were male.
- Majority of families were Hispanic/Latinx at 39%, followed by Multiracial
- Overall, parents reported being more confident in their parenting skills and their ability to manage their child's behavior.
- Parents reported that their relationship with their child improved.
- Behavior measures showed a decrease in child problem behaviors and improvements in the parents’ perception of their behavior as a problem.

Parent and Provider consults to 61 parents and 50 providers

- 61 parents received a total of 69 consultations on behavior in their young child. Consultations were provided across 11 school districts.
- The majority of children that were the focus of a consult were 4.6 years of age.
- 6 provider consults were given to 10 school personnel at 3 school districts for specific children in their classes or for general classroom behavior management.

Nurturing Parenting Group Provided to 21 Parents

- 21 parents received Nurturing Parenting classes, in which parents learn about child development, effective ways to communicate, empathy, enforcing rules and giving praise/encouragement
- All classes were conducted in Spanish, as that was the primary language reported by all parents.
Strengthening Families Program (SFP) – a family skills training intervention designed to increase resilience and reduce risk factors for behavioral, emotional, academic, and social problems in children ages 6 to 11 years old. This program brings together the family for each session.

SFP enrolled 94 families with 135 parents/guardians. 70% of families completed.

- Parents became more involved in their children’s activities after the program, used more positive parenting techniques and decreased their inconsistent discipline.
- Children’s conduct and emotional problems improved.
- Families reported, in some regions, being more cohesive, more expressive, and having less conflict after the program.
**Early Intervention for Families in School**

The goals of this project are to partner with school districts to provide a family based intervention to improve protective factors for children, teach parents effective communication skill, improve family functioning, build social support networks, and decrease children’s risky social behaviors. Also, to empower parents to be the primary prevention advocates in their children’s lives. **In total, 202 people were served countywide in this project area.**

**Peace 4 Kids** – Based on Aggression Replacement Training for middle school students provided on campus during school. The program goals are for students to master social skills, school success, control anger, decrease acting out behaviors, and increase constructive behaviors. A parent component is included in the program as well to create social bonding among families. The program takes place at the Desert Hot Springs Middle Schools for 10 weeks.

**174 individual students enrolled in Peace4Kids.**
- Level 1 - 64% completed
- Level 2 - 63% completed

- 61% were female, 35% were male.
- 63% were Hispanic/Latino.
- Behavioral difficulties decreased and pro-social skills increased.
- “I have learned to use the ‘I-Message’ and have integrity overall with people and have learned how to have patience with people and how to use the MELT.” – Participant

**28 parents attended Family Time**

- “That family time is important to improve communication and connection. -” – Participant
Stress and Your Mood Program—An evidence-based early intervention program to treat depression based on the concepts of Cognitive-Behavioral Therapy. It is provided in settings where the youth feel comfortable i.e.: services targeting LGBTQ youth will be provided at an organization that serves LGBTQ youth and young adults.

282 participants enrolled into Stress and Your Mood program 51.4% completed

- 64.1% of participants were Hispanic/Latinx, 77.0% were female, 85.1% were TAY age.
- Depression symptoms decreased, psychiatric status improved, and overall functioning improved.
- “I learned how to cope with my depression and how to keep from falling into thinking traps. I also learned how to identify stressors that may aggravate my depression.” - Participant

CAST – In Peer-to-Peer programming is the Coping and Support Training (CAST) program facilitated by youth peers. CAST focuses on mood management, drug use control, and school achievement.

170 participants enrolled into the CAST program 42% completed

- Almost three-fourths of the participants were Hispanic/Latinx.
- Participants reported having support and encouragement from group leaders.
- Improved self-esteem, personal control of moods, personal control of school, and decision-making.

Prevention and Early Intervention
Project Areas—Transition Age Youth

Transition Age Youth (TAY) Project

The goals of this project are to provide outreach, stigma reduction, and suicide prevention activities for TAY at highest risk of self harm. Targeted outreach occurs to identify and provide services for LGBTQ TAY, TAY in or transitioning out of the foster care system, runaway TAY, and TAY transitioning into college. Reducing symptoms of depression and improving overall functioning with an evidence-based Early Intervention program for depression. Connecting to at-risk youth providing outreach and awareness about depression and suicide. In total, 12,431 were served by evidence-based practices and through outreach events.
Speaker’s Bureau — Peer led presentations are utilized to educate and outreach to at-risk TAY, caregivers, educators, and TAY service providers on the unique issues that at-risk TAY experience as they relate to mental health and interpersonal issues, with the aim of reducing stigmatizing attitudes.

- 57% of audience members were TAY with an average age of 15 years old. 54% reported being Hispanic/Latinx.
- Participants’ attitudes regarding recovery from mental health conditions improved after the presentation.
- Participants reported they had a greater willingness to seek mental health services if needed after the presentation.

177 presentations were given to 2,043 individuals attended.

Peer-to-Peer Outreach Events (Cup of Happy) – Designed to educate the public about mental health, depression, and suicide, while also working to reduce stigma towards mental illness among TAY individuals who are considered to be at high-risk. The program outreaches to Gay/Straight Alliances, social services agencies, and the community at large, in order to organize and facilitate small and large TAY group presentations and discussions to local community-based locations, school districts, and college campuses.

- 45% of participants reported being Hispanic/Latinx, 48% were female, 37% were male and 1% were transgender.
- Event topics included Stigma Reduction, Coping Skills, Psycho-Education, Program Marketing, and LGBTQI Support.
- “It made me understand what the early signs of mental health are and what I need to do to reach help.” - Participant

231 events were held to 3,827 participants attended.
The Peer Mentorship Program - utilized to encourage and monitor progress with individualized goal setting in a one-on-one manner on high school and college campuses.

32 TAY Youth enrolled in Mentoring

- Most of the mentees were female (47%), 41% were 17 years old, and 41% identified as Hispanic/Latinx.
- Half of the mentees attended 9-16 (53%) sessions, and just over a third attended 17-32 (38%) sessions.
- Ratings on achieving goals showed 74% had increases in goals for Coping/Mood, while 84% improved relationships and supports.
- “I have been getting more sleep, my grades are going up. I feel comfortable talking about my problems to my family. It helped me think more positively in life.” – Mentee

Directing Change Workshops – Presentations focused on understanding mental health awareness and suicide prevention and developing a story in a digital PSA (public service announcement) format to promote that understanding.

266 individuals attended Directing Change workshops

- 74% of the participants were TAY, 73% were Hispanic/Latinx, and 44% were female.
- Participants reported improvements in comfort of sharing their stories.
- “It reminded me that there is help out there & being hopeful is one of the best things you can do to more forward..” – Participant
Teen Suicide Awareness and Prevention program (TSAPP) - Through strong relationships with school districts TSAPP partners with school districts to establish a suicide prevention club on campus. The primary goal is to prevent teen suicide by providing training and resources to students, teachers, counselors, parents and community members. Youth on school campuses are trained in suicide prevention. Suicide prevention trainings (safeTALK, ASIST, Mental Health First Aid) are also provided to parents and school personnel as well as community members.

- 4,072 Youth from 96 school sites participated in Suicide Prevention trainings. These trained youth then disseminated suicide awareness information at their schools through a variety of suicide prevention activities. By coordinating these on-campus activities the trained youth impacted approximately 65,912 youth across many school districts in Riverside County.
- Evaluations from youth showed that 89% of youth believed TSAPP positively impacted the community, and 69% reported they were able to use the information to help a peer or friend in need.
- 237 School personnel and community members participated in safeTALK and ASIST suicide prevention training.
- 113 Community members received Mental Health First Aid Training.
- 882 parents and community members participated in workshops led by TSAPP.

5,304 Youth, school staff, parents and community members received suicide awareness and prevention training or suicide awareness and prevention activities.
First Onset for Older Adults

The goals of this project are to reduce first on-set of depression and to reduce the impact of depression in the older adult population. Although this project focuses on the first on-set in older adults, older adults will also benefit from a variety of other PEI programs including: trauma related services, mental health awareness and stigma reducing activities, parent education, and support programs.

A total of 415 unduplicated older adults and adults transitioning to older adulthood received services from evidenced-based practices (CBT for Late-Life Depression, Care Pathways, Healthy IDEAS and Office on Aging), and 3,372 were outreached to by the Office on Aging.

Cognitive-Behavioral Therapy (CBT) For Late Life Depression – An early intervention service that reduces suicidal risk and depression. CBT for Late Life Depression is an active, directive, time-limited, and structured problem solving program.

47 participants were served by CBT for Late Life Depression

- The majority of the participants reported their gender as male (96%). Most participants were between the ages of 61 and 69 (66%).
- Depression significantly decreased after program participation.
- “I feel stronger due to the ability to find a program that can address senior issues, home issues and depression”. –Staff

Care Pathways – 12 session support group for caregivers of older adults. Outreach, engagement, and linkage to the support groups target caregivers of individuals receiving prevention and early intervention services, caregivers of seniors with mental illness, and caregivers of seniors with dementia.

183 individuals enrolled in Care Pathways
78% completed

- 64% were 60 years old and above, 52% were Caucasian and 23% were Hispanic/Latinx.
- Feelings of distress in caregivers decreased from the beginning of the program to the end of the program.
- “Every session seemed so short and full of important information. I appreciate the emotional support. The fact that I was told to take care of myself made me very happy. Thank you”. –Participant
### First Onset for Older Adults

#### Mental Health Liaisons to the Office on Aging
Clinical therapists are embedded in two Office on Aging locations (Riverside and La Quinta). They screen for depression and provide the CBT for Late Life Depression program when needed. Staff provide referrals, resources to anyone screened, and case consultations. The clinicians also educate Office on Aging staff and other entities serving older adults about mental health related topics.

- **45** participants received CBT-LLD services from the Office on Aging
- 92% successfully completed
  - Participants were all English-speaking (100%) Caucasians (96%) who identified as ‘LGB’ (91%). Participants ranged between the ages of 59 to 91.
  - Depression significantly decreased, and participants felt better about their emotional well-being after the program.

- **3,372** people attended Outreach Events
  - There were 84 outreach events for a total of 167.28 hours. The majority of the events took place at community meetings and public events.

#### CareLink and Healthy IDEAS
A care management program facilitated by the Office on Aging for older adults with high risk for developing mental health problems. Healthy IDEAS focuses on behavioral activation and social support. It is utilized for those who show symptoms of depression and anxiety.

- **52** clients were identified as at risk for depression and enrolled into Healthy IDEAS.
  - 88% were between the ages of 50 and 89, 62% reported being Caucasian, and 15% were Hispanic/Latinx.
  - Participants’ depression symptoms significantly decreased.
  - Participants’ quality of life improved in the areas of relaxation, health, and how they feel about life in general.
Program to Encourage Active, Rewarding Lives for Seniors - An intervention for people 60 years and older experiencing minor depression dysthymia. The program is designed to reduce symptoms of depression and improve health-related quality of life.

- 58% of participants were Caucasian, ages ranged from 60 years old to 90 years old, the majority of participants were female (80%).
- Depression significantly decreased.
- Anxiety symptoms significantly decreased.
- “I did benefit because I felt more comfortable. I motivated me to keep on going and understand better different things. Things like going out to the store or the gym, all that is good for me and my health. This program helped me for all that.” – Participant Comment

88 participants were served by PEARLS 52% completed
Cognitive Behavioral Intervention for Trauma in Schools – CBITS is a cognitive and behavioral therapy group intervention to reduce children’s symptoms of Post Traumatic Stress Disorder (PTSD) and depression caused by exposure to violence.

- 60% of students were Hispanic/Latino.
- PTSD symptoms decreased significantly.
- Depression symptoms decreased to below clinical levels.
- “I learned that I shouldn’t always jump to conclusions and I should ask myself questions to try and stay positive..” - Participant

201 students, grades 5 through 10, enrolled into CBITS 66% completed

Seeking Safety – A present focused, coping skills program designed to help people with a history of trauma and substance abuse. It can be conducted in group or individual format, for female, male or mixed gender groups, for people with both substance abuse and dependence issues, for people with PTSD, and for individuals with a history of trauma but do not meet criteria for PTSD.

- This program was in the Request for Proposals phase during FY 19/20.
- A contractor was selected to provide Seeking Safety to TAY youth in the next Fiscal Year.
- RUHS-BH PEI Peer Support Specialist staff will be providing Seeking safety to the Adult community in the next Fiscal year.
- “Seeking Safety helped me realize it is okay to express my true feelings. It is okay to live for me! I can say no and feel good about it. I can be kind to myself and I deserve it.” – Previous Participant

Prevention and Early Intervention
Project Areas—First Onset for Older Adults

Trauma-Exposed Services for All Ages

The goal of this project area is to reduce the negative impact of trauma for youth, TAY, adults, and older adults. Providing interventions early on to reduce the psycho-social impact of trauma for adults and children. A total of 201 people (adults and children) who had experienced trauma received services from an evidence-based practice (CBITS).
Building Resiliency in African American Families (Boys Program)

Multiple program components designed to build resiliency in African American families.

Rites of Passage (ROP): Nine-month weekly program with an ethnically enriched curriculum to increase resiliency and empower black male adolescents.

Guiding Good Choices (GGC): provides the parents/guardians of ROP children with the knowledge and skills needed to guide their children through early adolescence. Following completion of GGC parent support groups are offered.

Cognitive Behavioral Therapy (CBT): Provides therapy to ROP youth with behavioral health needs.

ROP enrolled 45 youth  69% completed

- Youth reported higher levels of ethnic identity after the program. Resiliency measures also showed significant improvement.
- Family cohesion improved after the program with families reporting greater “connectedness”.
- “It helped me learn about my culture.”-Youth Participant

GGC enrolled 39 parents  85% completed

- Parents became more involved with their children and increased positive parenting.
- “The program has helped me build a better relationship with my son.” -Parent Participant

CBT Therapy enrolled 30 youth

- 30 youth received CBT therapy participating in 6-10 sessions.
- Depression symptoms decreased.
- Liked about CBT: “someone was there so I could talk to.” – Youth Participant
Multiple program components designed to build resiliency in African American families.

**Rites of Passage (ROP):** Nine-month weekly program with an ethnically enriched curriculum to increase resiliency and empower black female adolescents.

**Guiding Good Choices (GGC):** provides the parents/guardians of ROP children with the knowledge and skills needed to guide their children through early adolescence. Following completion of GGC parent support groups are offered.

**Cognitive Behavioral Therapy (CBT):** Provides therapy to ROP youth with behavioral health needs.

- Youth reported higher levels of ethnic identity after the program.
- The girls were able to identify risk factors and list strengths available to them to overcome those risks.
- “It taught me about commitment and what it can do for my future” - ROP Participant

ROP enrolled **18** youth

- **78%** completed

GGC enrolled **17** parents

- **100%** completed

CBT Therapy enrolled **14** youth

- Youth after participating showed improvements in interpersonal relationships.
- A youth shared “I learned how to have self-control.”; another Youth shared
- “I learned how to control my anger.”
Underserved Cultural Populations

Mamás y Bebés (Mothers and Babies) — An evidence-based mood management program for pregnant and post-partum Hispanic/Latina Women. The program utilizes cognitive-behavioral strategies to decrease depression symptoms.

- 78% of the participants were Latina women.
- Depression significantly decreased, and participants felt better about their emotional well-being after the program.
- “This program was extremely helpful. I learned techniques to help me change my mood by finding pleasant activities and using different deep breathing exercises.” – Participant
- “The promotoras were very helpful with their phone calls to help us set up Zoom.” – Participant

60 participants enrolled
70% completed the program

Keeping Intergenerational Ties in Ethnic Families (KITE) – An evidence-based parenting program based on the Strengthening Intergenerational Ties in Immigrant Families (SITIF) curriculum designed for the Asian Americans teaches behavioral parenting skills to improve relationship between generations. It is a culturally-sensitive, community based intervention to strengthen the intergenerational relationship, and promotes immigrant parents’ emotional awareness and empathy for their children’s experiences, cognitive knowledge, understanding of differences between their native and American cultures.

- Newly awarded contractor beginning services in FY19/20.
- 88% of the participants were Female, 72.8% of participants were Chinese
- “Parenting Involvement” and “Positive Parenting” scores increased, Total Relationship scores also increased after the program
- Overall post-survey responses from participants showed satisfaction of 95% or more with KITE program.
- “Through the learning of the course, the communication skill and problem solving with my children are increased. I’m more patient and encourage my children more.” – Participant

94 participants enrolled
78.72% completed the program
Perris Valley Filipino American Association (PVFAA) – An outreach program designed to serve the Filipino American Community.

- The resource center hosted 15 mental health related events or presentations, outreach activities, and referrals to the Filipino American community.
- Of the sign-in sheets collected, there were 100 participants who attended outreach programs.
- Of 66 surveys collected, 83% participants would recommend program to a friend or family member, 78% responded that the presenters were engaging, and 88% responded that the information presented was easy to understand.
- “This presentation helps break stigma and educate everyone on how to help and understand that everyone’s life is important. This was helpful to cultural barriers especially in the Asian community. Thank you.” - Attendee

Filipino American Mental Health Resource Center

Native American Resiliency

Planned Cultural Programs

- Previously, PEI provided parenting classes to the Native American population.
- PEI conducted a community needs assessment by working with the Native American community to determine needs and risk factors, and develop PEI services based on a community feedback.
- In the needs assessment process, focus groups were conducted and surveys were collected.
- A Request for Proposal (RFP) was released and a contract awarded for new services to begin.

Planned Cultural Programs

- Previously, PEI provided parenting classes to the Native American population.
- PEI conducted a community needs assessment by working with the Native American community to determine needs and risk factors, and develop PEI services based on a community feedback.
- In the needs assessment process, focus groups were conducted and surveys were collected.
- A Request for Proposal (RFP) was released and a contract awarded for new services to begin.