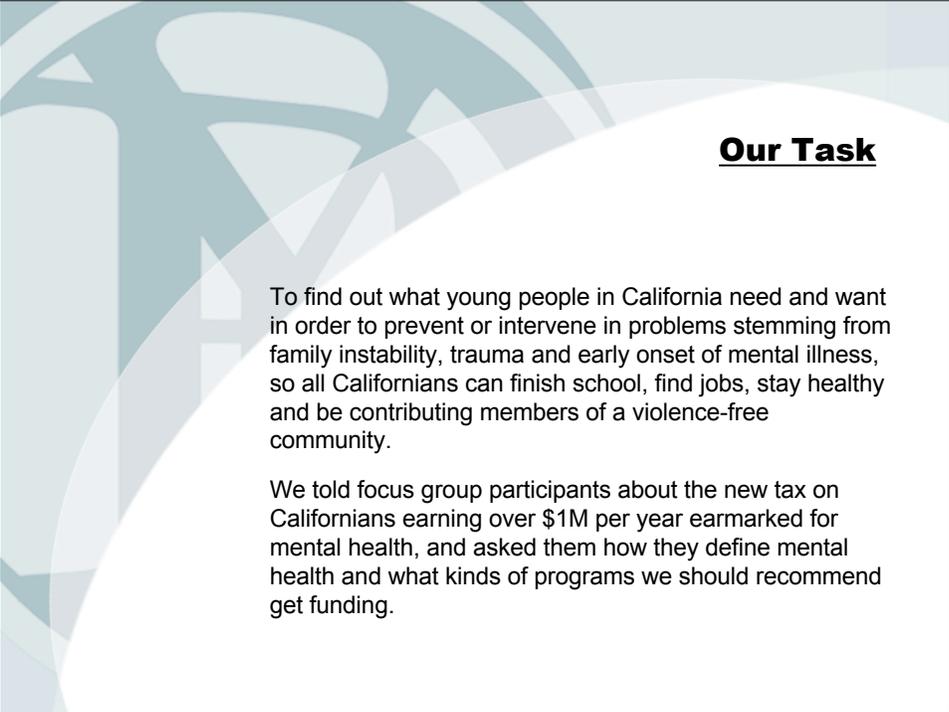


Mental Health Services Act
Recommendations By and For Young People in
California

A Collaboration between the
California Department of Mental Health &
California Council on Youth Relations



Our Task

To find out what young people in California need and want in order to prevent or intervene in problems stemming from family instability, trauma and early onset of mental illness, so all Californians can finish school, find jobs, stay healthy and be contributing members of a violence-free community.

We told focus group participants about the new tax on Californians earning over \$1M per year earmarked for mental health, and asked them how they define mental health and what kinds of programs we should recommend get funding.

Who We Talked To

110 youth in Sacramento, San Diego, Los Angeles, Fresno, Oakland, San Francisco and Daly City

•39% Male	•Juvenile/criminal justice experience: 50%
•56% Female	•60% have had a family member incarcerated
•5% Transgender	•63% in Foster Care
•African American: 27%	•Have a child: 15%
•Asian/API: 15%	•47% have taken Psychotropic medication
•White: 11%	•85% have had therapy
•Latino/a: 32%	•77% have drug/alcohol issues in family
•Multiracial: 4%	
•No Answer/Other: 10%	

Our Approach

Geographic Diversity
System Experience Diversity
Partner with local community based organizations
Stipends: We value young people's time
Dinner!
Listening and Confidentiality
DMH/Prevention and Early Intervention Goals
DVD Recommendations
Guiding Questions

DVD RECOMMENDATIONS: PREVENTION

#1 Long-term Relationships with Adults: Young people value long-term relationships with adults who are available on a consistent basis. Knowing an adult won't give up or go away opens the door for communication.

#2 Make Meds Make Sense: Young people should be given clear explanations of what their prescribed medication will do, including side effects, and how they will feel when they stop taking it.

#3 Confidentiality: Make it clear up front what information will be held confidential and what cannot be held confidential so the young person can make a safe decision on what to share.

#4 Culturally positive environments: Young people are often asked to learn, and to heal, in institutional environments. Allow young people to design and affect their environments – from choosing to meet their therapist at a donut shop to choosing pictures for the walls – will open them to positive adult relationships.

#5 Youth Voice: Young people should be considered experts on what they've experienced and what they need.

DVD RECOMMENDATIONS: INTERVENTION

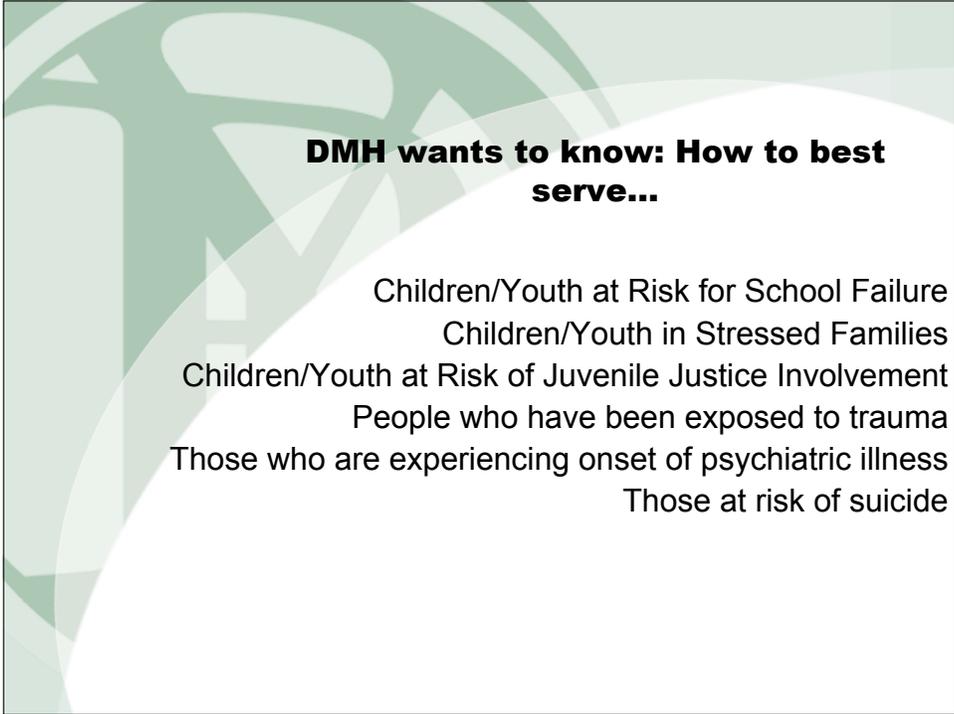
#1 Cultivate Personal Interests: Using mental health funds and time to help a young person access music, art, sports, dance or other activities can build self-esteem that has a life of its own beyond therapy.

#2 Fix the Situation, Not Just the Kid: Many young people need help finding jobs, apartments, or help with school. Adults who find practical solutions can gain the young person's trust in the healing process.

#3 Good Information: Young people make great decisions when they have accurate information they trust.

#4 Avoid Labels and Stigma: Labels, like depressed, and even the words "therapy" and "mental health" carry a stigma that turns young people off.

#5 Role models: Young people often respond positively to peers and adult mentors who have "been there" and can both relate to their struggles as well as model successful life changes.



DMH wants to know: How to best serve...

Children/Youth at Risk for School Failure
Children/Youth in Stressed Families
Children/Youth at Risk of Juvenile Justice Involvement
People who have been exposed to trauma
Those who are experiencing onset of psychiatric illness
Those at risk of suicide



**Our Approach:
Guiding
Questions**

- What could have prevented you from ending up in the system? What do you wish had been there for you?
- Who in your opinion is missed, isn't getting served at all?
- What has pushed you away from services or brought you back?
- What might take away the stigma from mental health services?
- What challenges have you faced in seeking or receiving mental health services/support/guidance?
- Do you talk about well being in your family, with your friends?

What Young People are Struggling with in California

In November 2006, New America Media conducted a cell phone poll of 600 California youth ages 16-22. When asked, "What is the greatest challenge facing your generation?" the top three answers were **Family Breakdown (24%)**, **Violence (22%)** and **Poverty (17%)**.

I ran away because whenever my mom got a new boyfriend I couldn't watch TV in the living room.

I have problems getting a long with other people. Trust issues.

You have to constantly watch your back in my hood.

When you miss school because someone in your hood was killed, teachers ask why you missed school but they don't care.

The adults you know have a lot to do with how you turn out.

What Young People are Struggling with in California

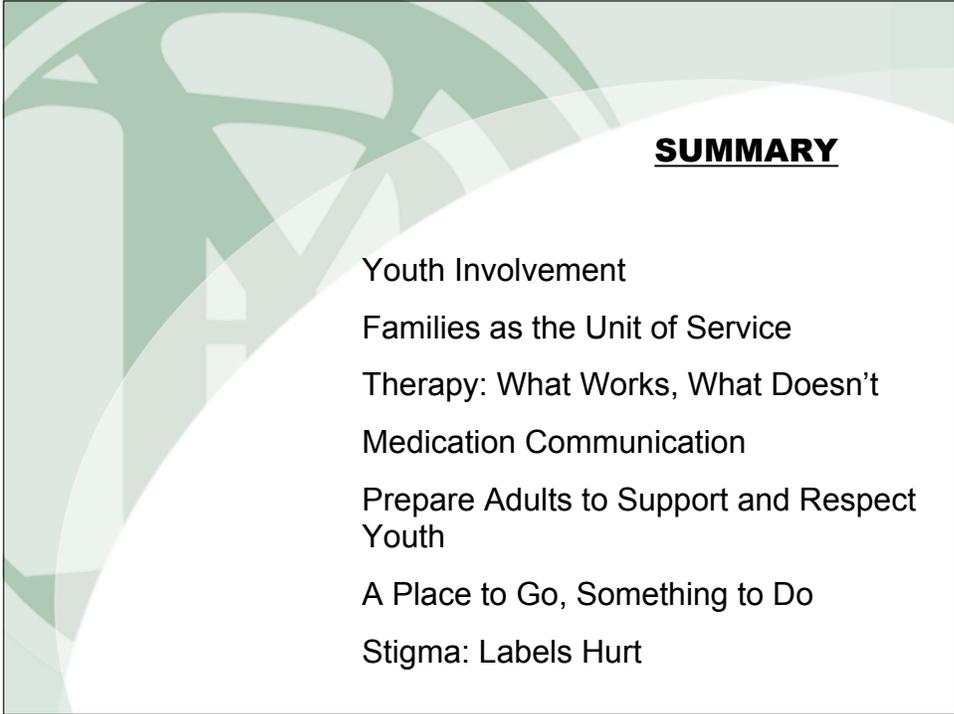
When asked to identify their main source of stress, the top three responses were **school (33%)** and **money (22%)** and **personal relationships (12%)** yet 96% also said, "If I work hard, I can achieve my goals."

It would be a lot less people on the streets if there were more jobs for youth.

I gave up. I ain't getting nowhere. I don't know. Seems like I try everyday and get stuck in the same situation.

School, family, work, money, everything, relationships.

It is hard to trust anyone because most people would give up on me instantly.



SUMMARY

Youth Involvement

Families as the Unit of Service

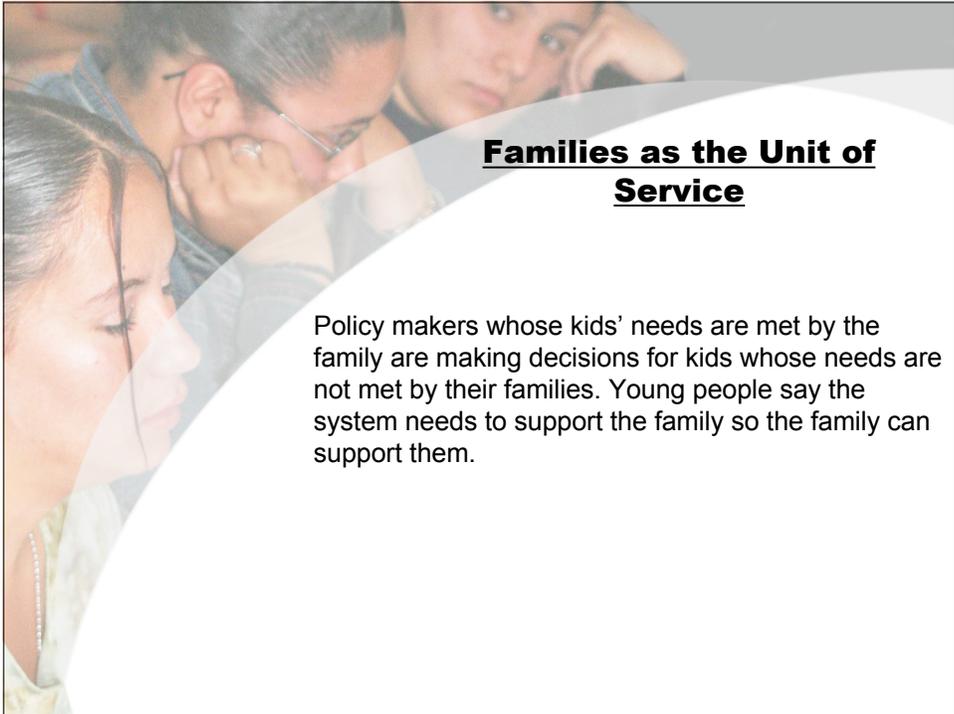
Therapy: What Works, What Doesn't

Medication Communication

Prepare Adults to Support and Respect Youth

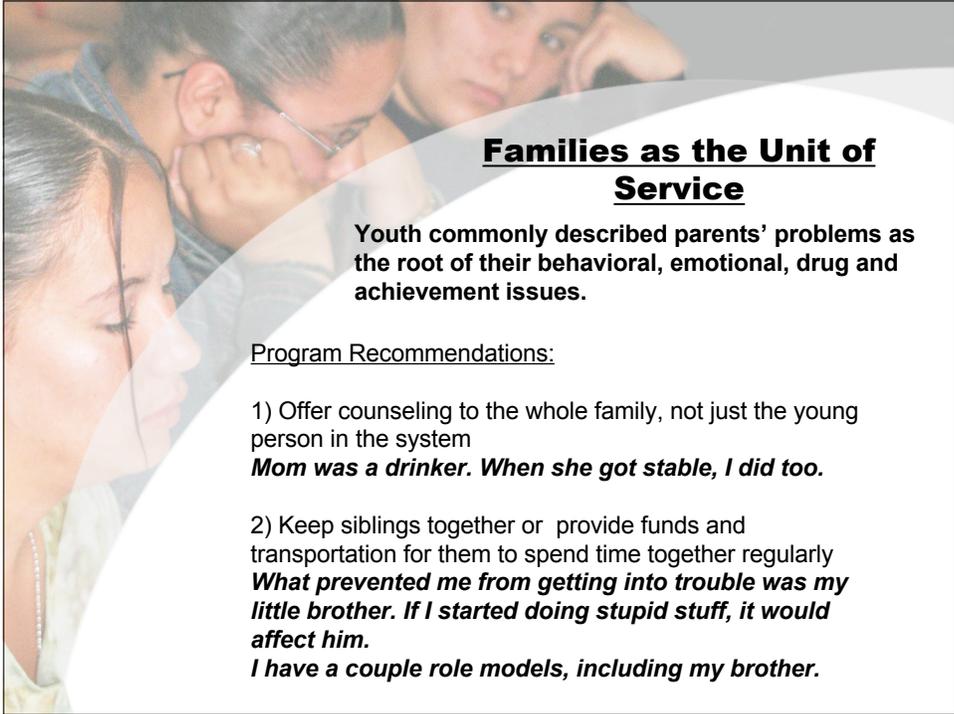
A Place to Go, Something to Do

Stigma: Labels Hurt



Families as the Unit of Service

Policy makers whose kids' needs are met by the family are making decisions for kids whose needs are not met by their families. Young people say the system needs to support the family so the family can support them.

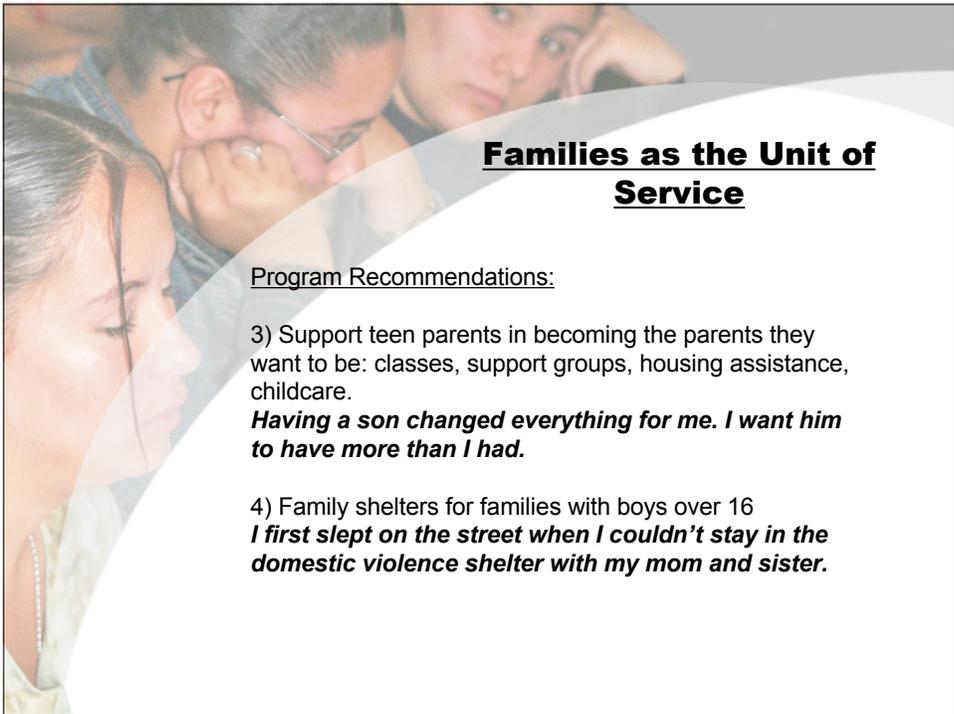


Families as the Unit of Service

Youth commonly described parents' problems as the root of their behavioral, emotional, drug and achievement issues.

Program Recommendations:

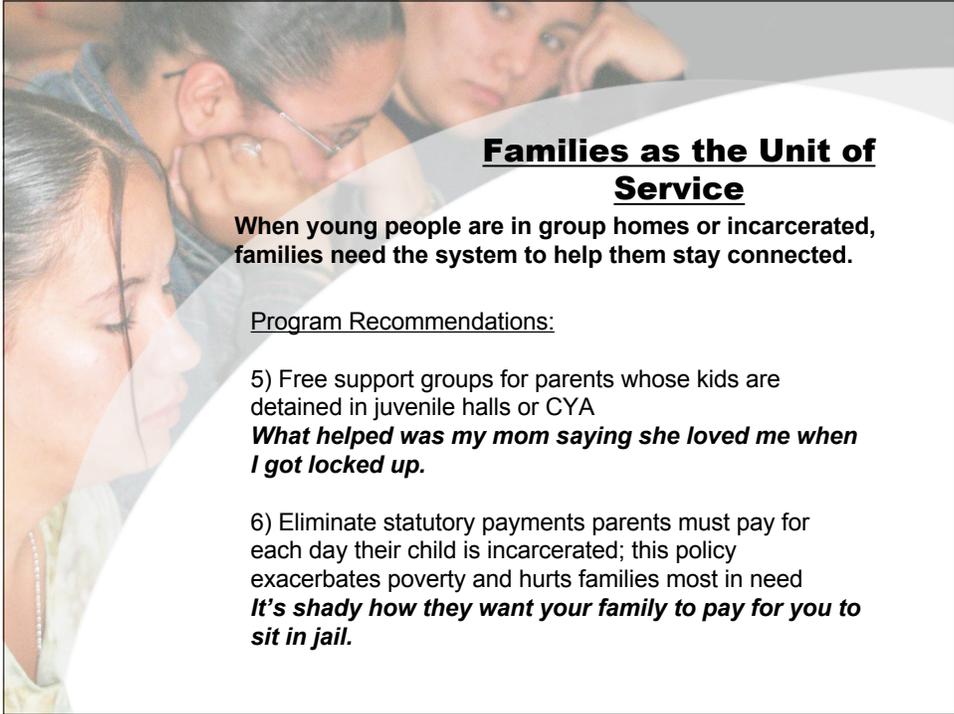
- 1) Offer counseling to the whole family, not just the young person in the system
Mom was a drinker. When she got stable, I did too.
- 2) Keep siblings together or provide funds and transportation for them to spend time together regularly
What prevented me from getting into trouble was my little brother. If I started doing stupid stuff, it would affect him.
I have a couple role models, including my brother.



Families as the Unit of Service

Program Recommendations:

- 3) Support teen parents in becoming the parents they want to be: classes, support groups, housing assistance, childcare.
Having a son changed everything for me. I want him to have more than I had.
- 4) Family shelters for families with boys over 16
I first slept on the street when I couldn't stay in the domestic violence shelter with my mom and sister.



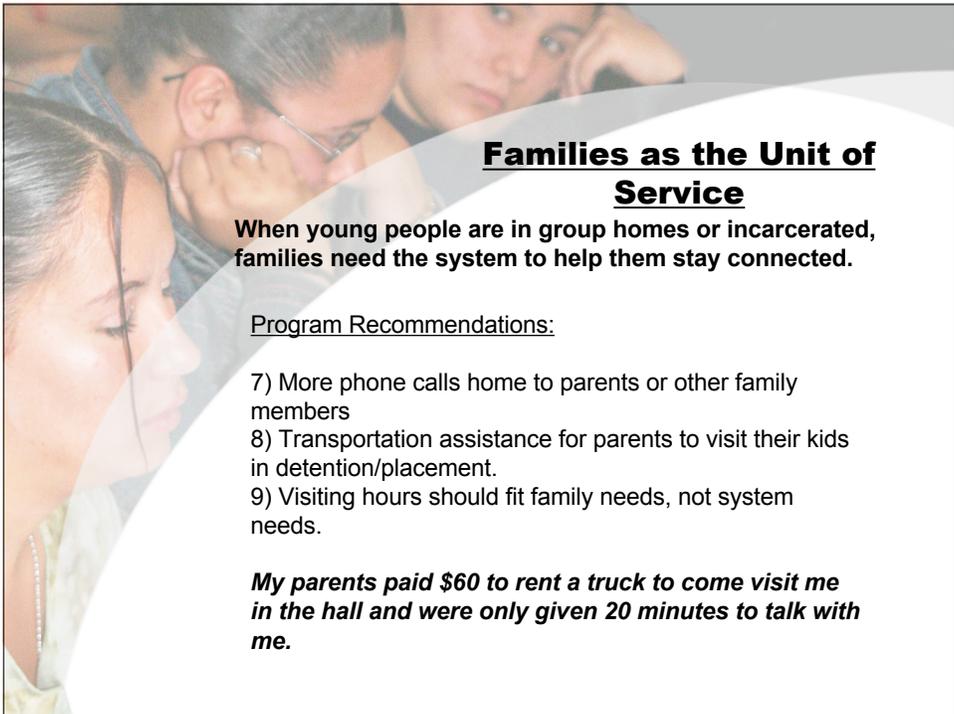
Families as the Unit of Service

When young people are in group homes or incarcerated, families need the system to help them stay connected.

Program Recommendations:

5) Free support groups for parents whose kids are detained in juvenile halls or CYA
What helped was my mom saying she loved me when I got locked up.

6) Eliminate statutory payments parents must pay for each day their child is incarcerated; this policy exacerbates poverty and hurts families most in need
It's shady how they want your family to pay for you to sit in jail.



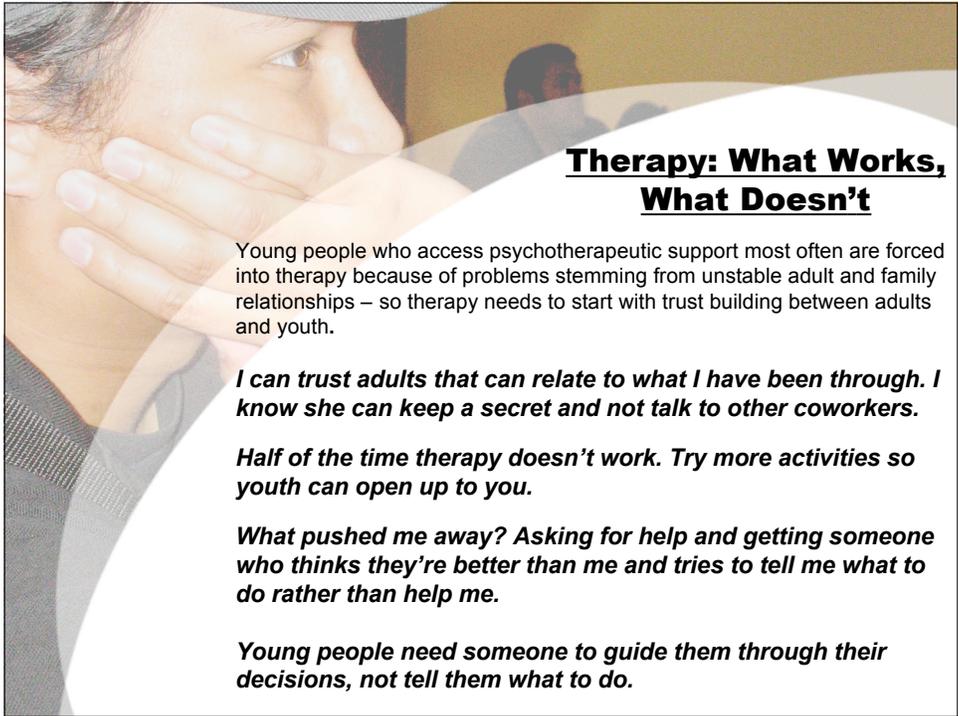
Families as the Unit of Service

When young people are in group homes or incarcerated, families need the system to help them stay connected.

Program Recommendations:

7) More phone calls home to parents or other family members
8) Transportation assistance for parents to visit their kids in detention/placement.
9) Visiting hours should fit family needs, not system needs.

My parents paid \$60 to rent a truck to come visit me in the hall and were only given 20 minutes to talk with me.



Therapy: What Works, What Doesn't

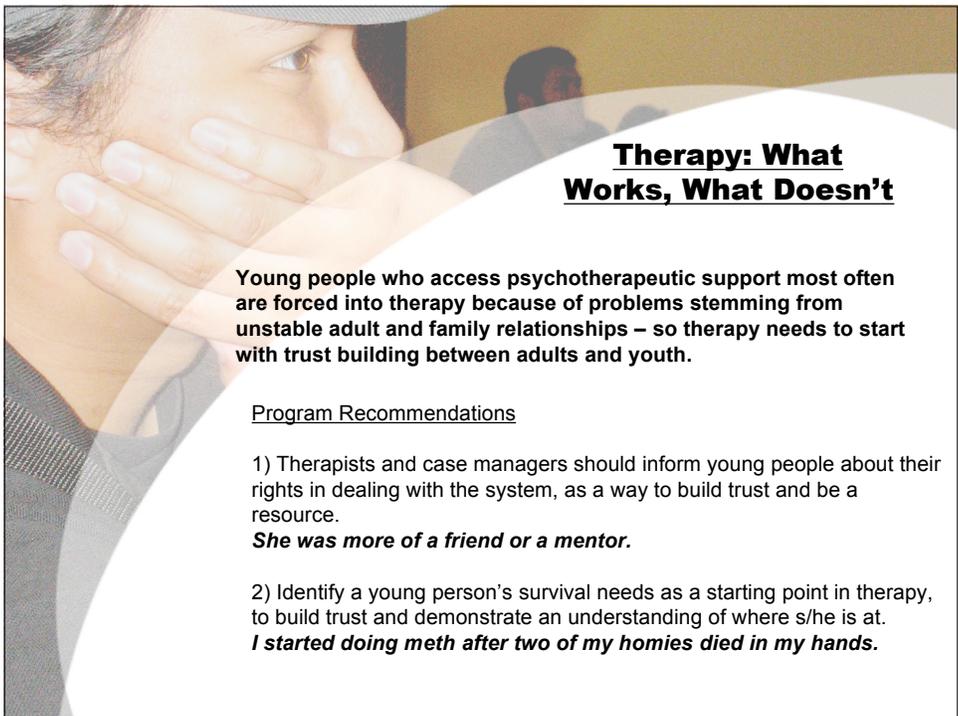
Young people who access psychotherapeutic support most often are forced into therapy because of problems stemming from unstable adult and family relationships – so therapy needs to start with trust building between adults and youth.

I can trust adults that can relate to what I have been through. I know she can keep a secret and not talk to other coworkers.

Half of the time therapy doesn't work. Try more activities so youth can open up to you.

What pushed me away? Asking for help and getting someone who thinks they're better than me and tries to tell me what to do rather than help me.

Young people need someone to guide them through their decisions, not tell them what to do.

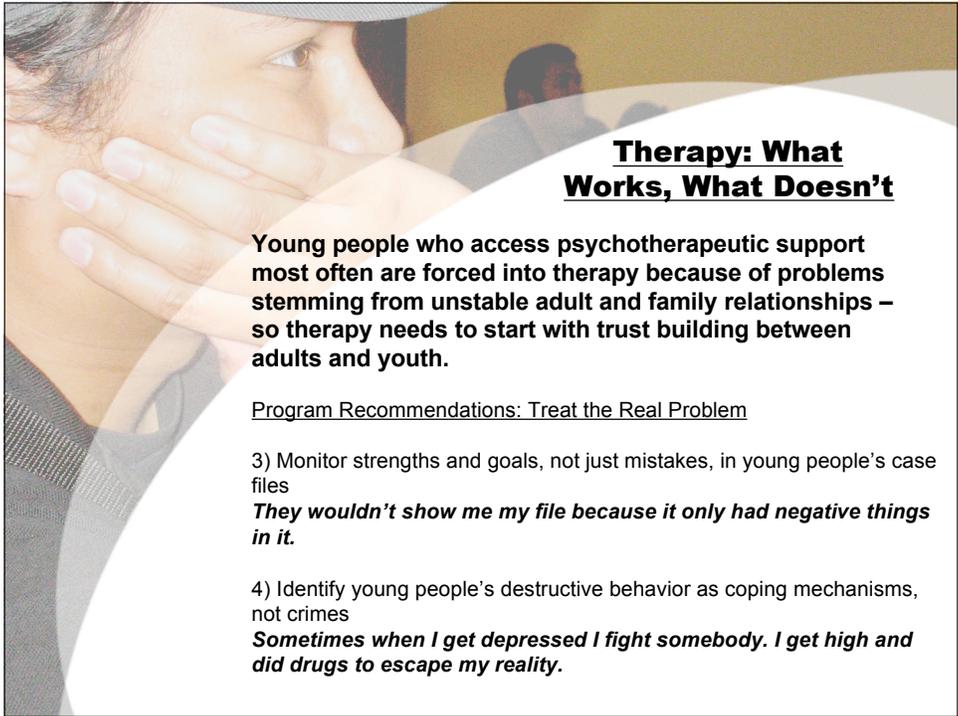


Therapy: What Works, What Doesn't

Young people who access psychotherapeutic support most often are forced into therapy because of problems stemming from unstable adult and family relationships – so therapy needs to start with trust building between adults and youth.

Program Recommendations

- 1) Therapists and case managers should inform young people about their rights in dealing with the system, as a way to build trust and be a resource.
She was more of a friend or a mentor.
- 2) Identify a young person's survival needs as a starting point in therapy, to build trust and demonstrate an understanding of where s/he is at.
I started doing meth after two of my homies died in my hands.



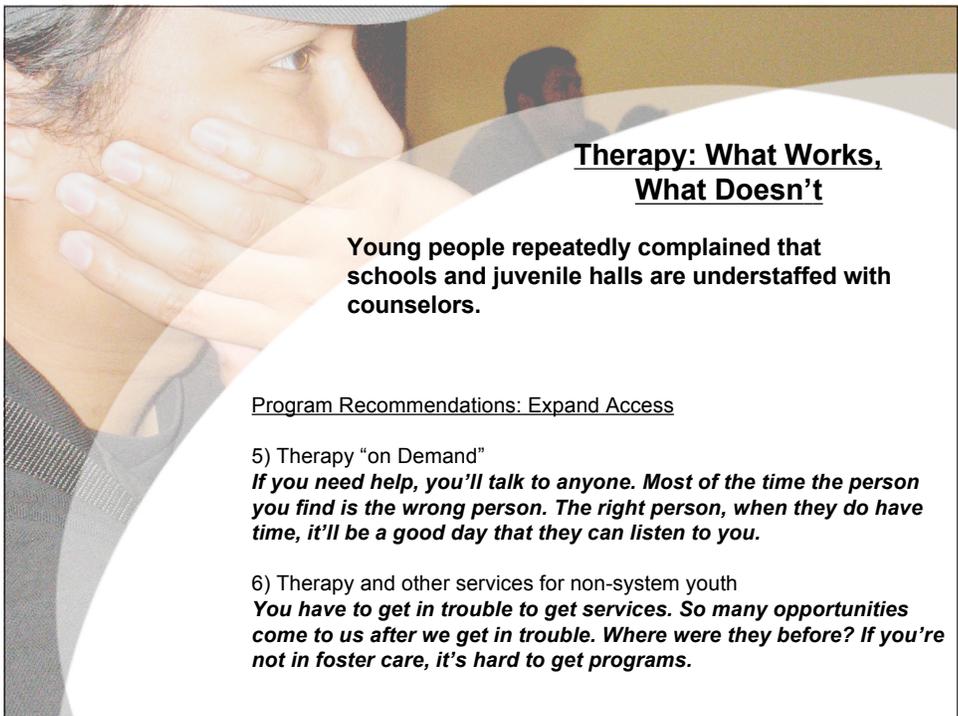
Therapy: What Works, What Doesn't

Young people who access psychotherapeutic support most often are forced into therapy because of problems stemming from unstable adult and family relationships – so therapy needs to start with trust building between adults and youth.

Program Recommendations: Treat the Real Problem

3) Monitor strengths and goals, not just mistakes, in young people's case files
They wouldn't show me my file because it only had negative things in it.

4) Identify young people's destructive behavior as coping mechanisms, not crimes
Sometimes when I get depressed I fight somebody. I get high and did drugs to escape my reality.



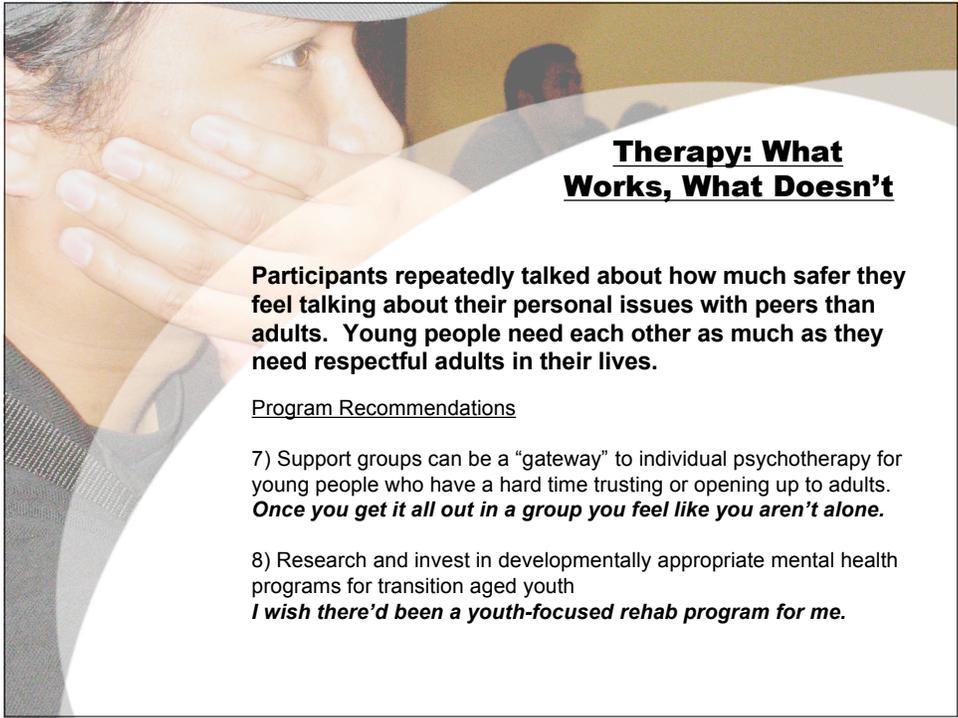
Therapy: What Works, What Doesn't

Young people repeatedly complained that schools and juvenile halls are understaffed with counselors.

Program Recommendations: Expand Access

5) Therapy "on Demand"
If you need help, you'll talk to anyone. Most of the time the person you find is the wrong person. The right person, when they do have time, it'll be a good day that they can listen to you.

6) Therapy and other services for non-system youth
You have to get in trouble to get services. So many opportunities come to us after we get in trouble. Where were they before? If you're not in foster care, it's hard to get programs.



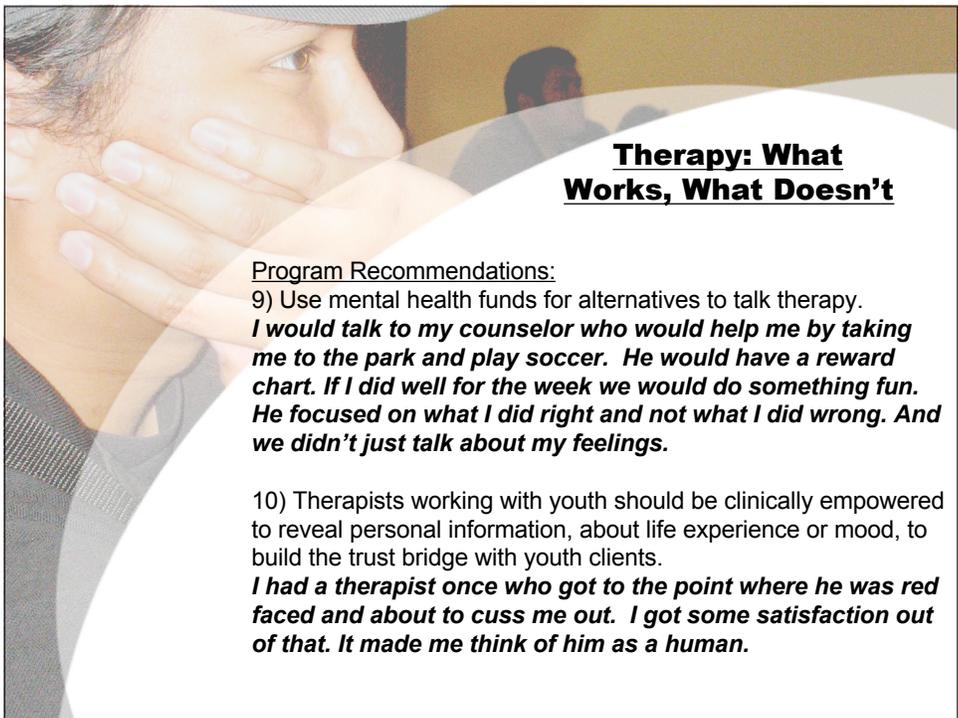
Therapy: What Works, What Doesn't

Participants repeatedly talked about how much safer they feel talking about their personal issues with peers than adults. Young people need each other as much as they need respectful adults in their lives.

Program Recommendations

7) Support groups can be a “gateway” to individual psychotherapy for young people who have a hard time trusting or opening up to adults.
Once you get it all out in a group you feel like you aren't alone.

8) Research and invest in developmentally appropriate mental health programs for transition aged youth
I wish there'd been a youth-focused rehab program for me.



Therapy: What Works, What Doesn't

Program Recommendations:

9) Use mental health funds for alternatives to talk therapy.
I would talk to my counselor who would help me by taking me to the park and play soccer. He would have a reward chart. If I did well for the week we would do something fun. He focused on what I did right and not what I did wrong. And we didn't just talk about my feelings.

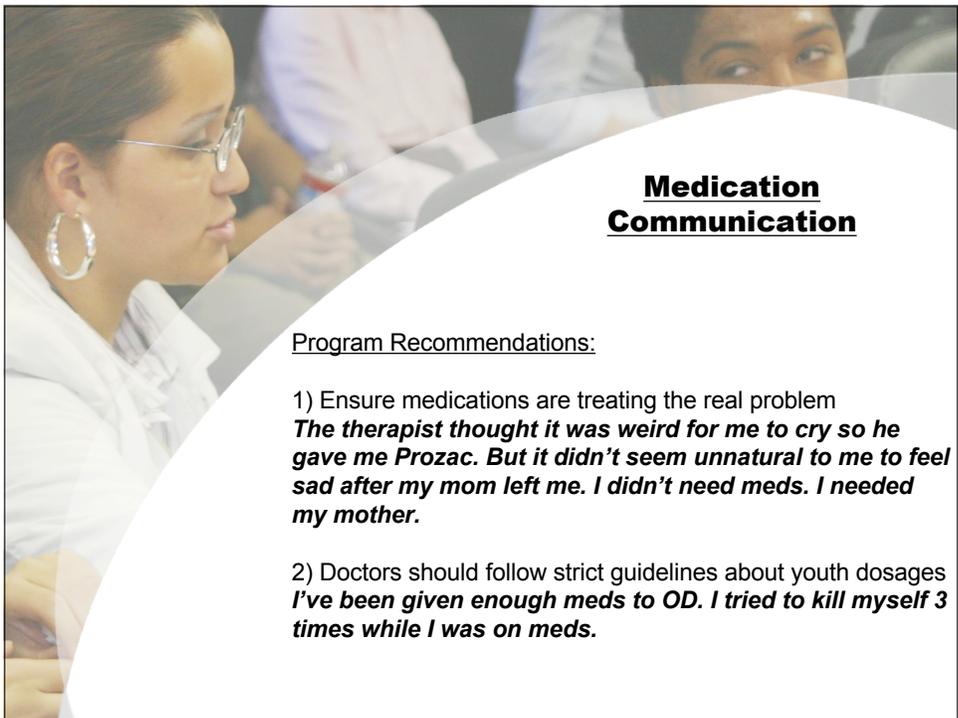
10) Therapists working with youth should be clinically empowered to reveal personal information, about life experience or mood, to build the trust bridge with youth clients.
I had a therapist once who got to the point where he was red faced and about to cuss me out. I got some satisfaction out of that. It made me think of him as a human.



Medication Communication

The overwhelming feedback we got about psychotropic medications is that young people are not getting good communication from doctors about their meds.

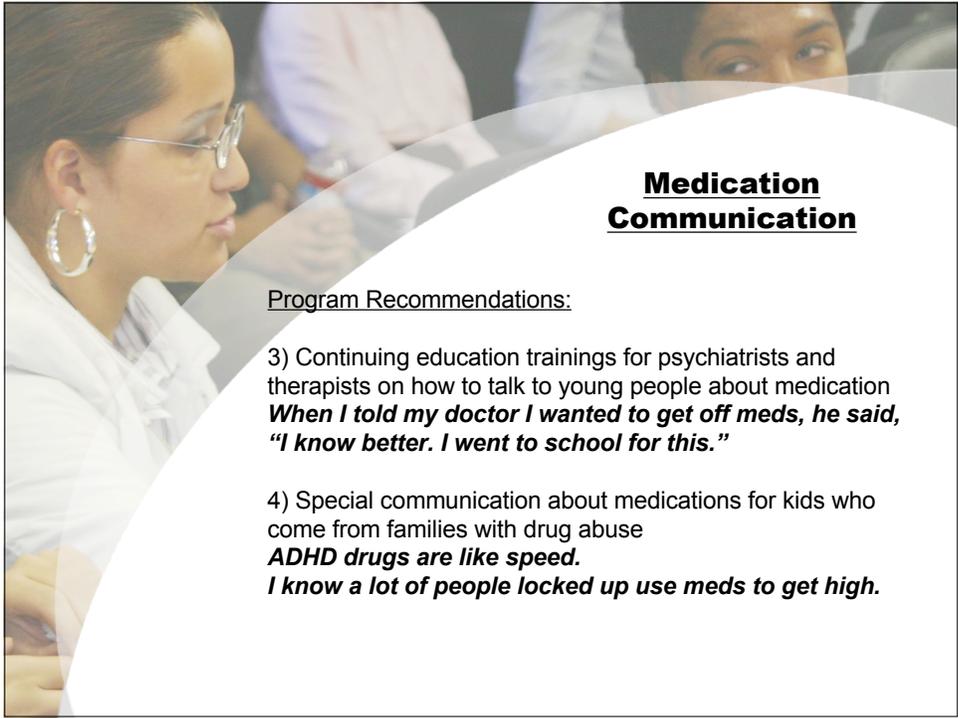
I told my doctor I wanted to get off meds, and she just raised my meds. I told her I didn't want meds at all and she just changed my meds. I told her she was making me mad and she said, "We have pills for that."



Medication Communication

Program Recommendations:

- 1) Ensure medications are treating the real problem
The therapist thought it was weird for me to cry so he gave me Prozac. But it didn't seem unnatural to me to feel sad after my mom left me. I didn't need meds. I needed my mother.
- 2) Doctors should follow strict guidelines about youth dosages
I've been given enough meds to OD. I tried to kill myself 3 times while I was on meds.

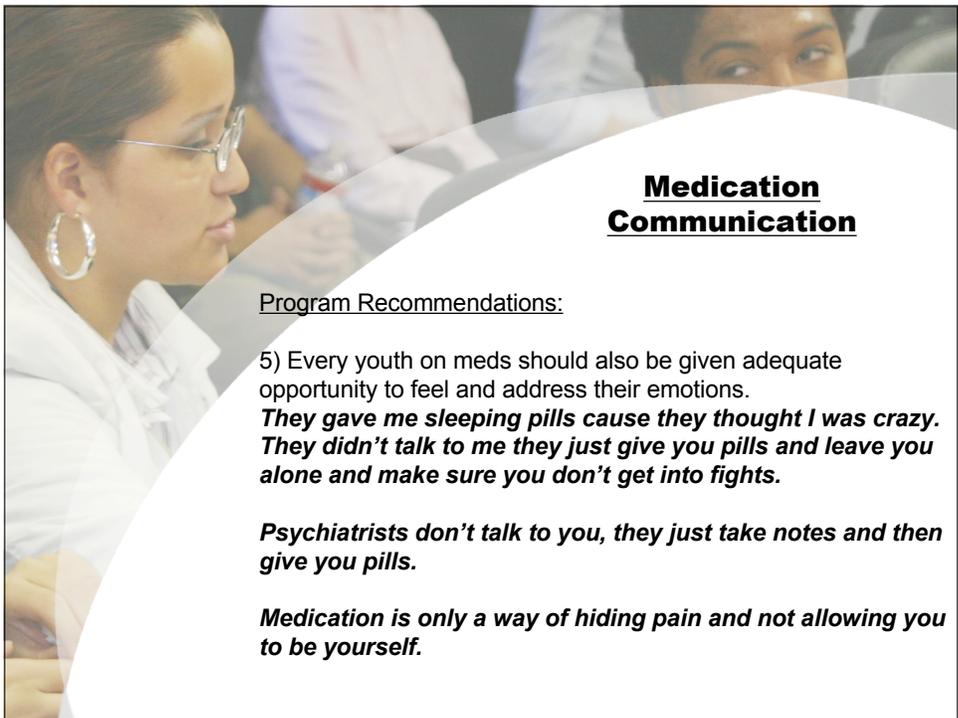


Medication Communication

Program Recommendations:

3) Continuing education trainings for psychiatrists and therapists on how to talk to young people about medication
When I told my doctor I wanted to get off meds, he said, "I know better. I went to school for this."

4) Special communication about medications for kids who come from families with drug abuse
***ADHD drugs are like speed.
I know a lot of people locked up use meds to get high.***



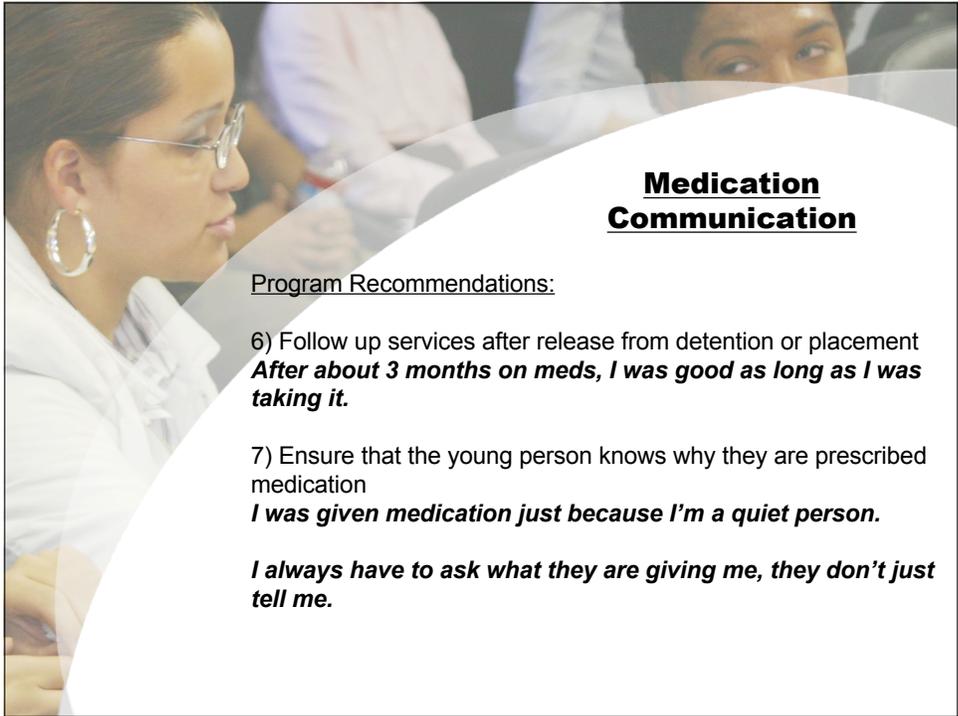
Medication Communication

Program Recommendations:

5) Every youth on meds should also be given adequate opportunity to feel and address their emotions.
They gave me sleeping pills cause they thought I was crazy. They didn't talk to me they just give you pills and leave you alone and make sure you don't get into fights.

Psychiatrists don't talk to you, they just take notes and then give you pills.

Medication is only a way of hiding pain and not allowing you to be yourself.



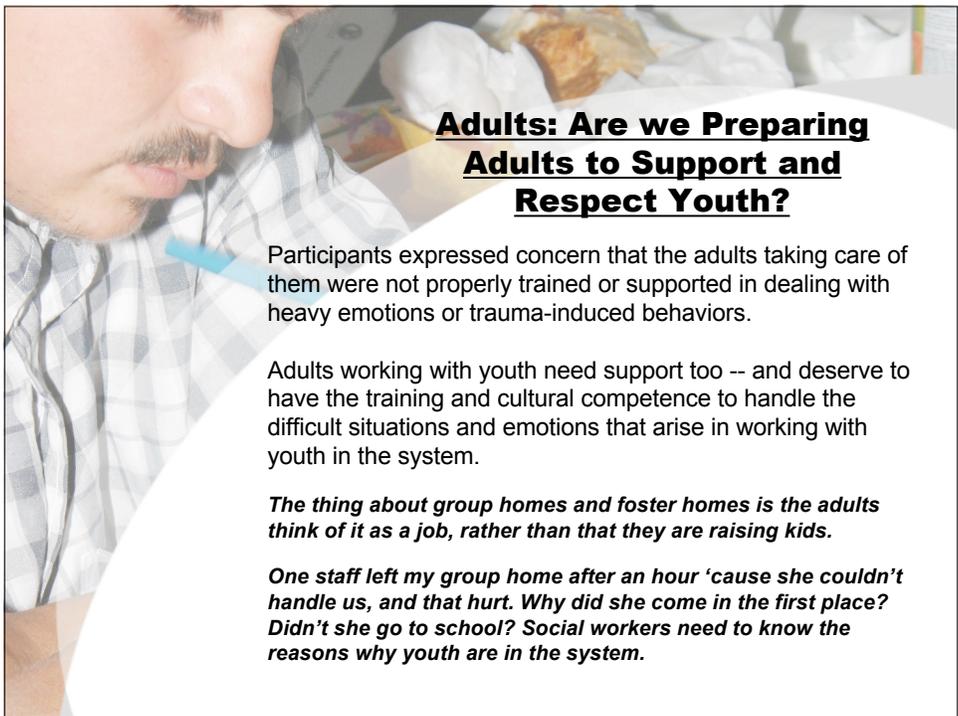
Medication Communication

Program Recommendations:

6) Follow up services after release from detention or placement
After about 3 months on meds, I was good as long as I was taking it.

7) Ensure that the young person knows why they are prescribed medication
I was given medication just because I'm a quiet person.

I always have to ask what they are giving me, they don't just tell me.



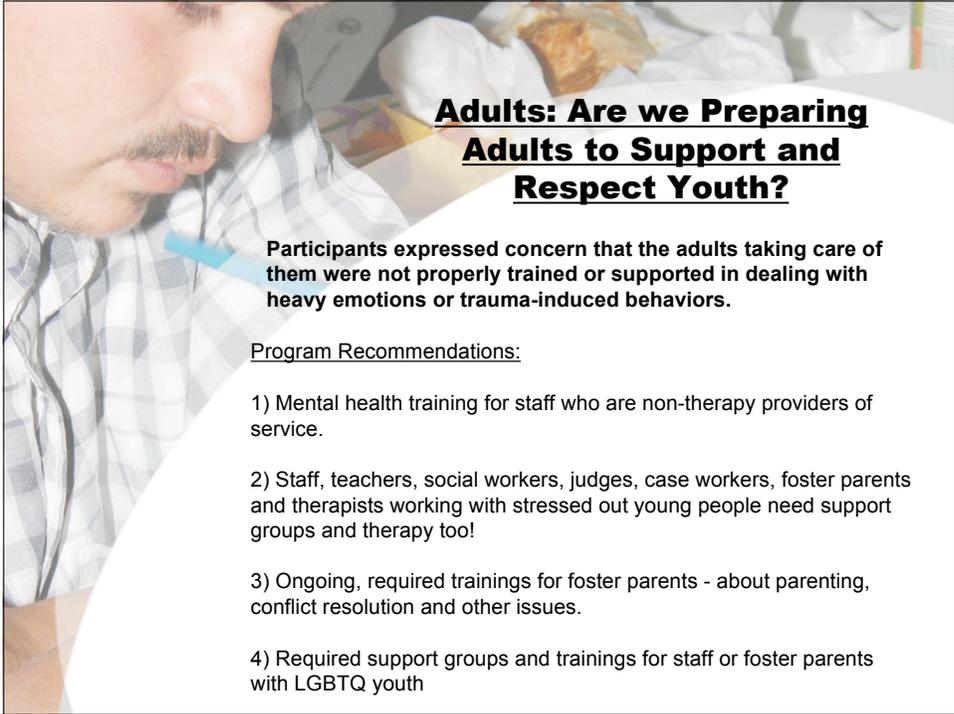
Adults: Are we Preparing Adults to Support and Respect Youth?

Participants expressed concern that the adults taking care of them were not properly trained or supported in dealing with heavy emotions or trauma-induced behaviors.

Adults working with youth need support too -- and deserve to have the training and cultural competence to handle the difficult situations and emotions that arise in working with youth in the system.

The thing about group homes and foster homes is the adults think of it as a job, rather than that they are raising kids.

One staff left my group home after an hour 'cause she couldn't handle us, and that hurt. Why did she come in the first place? Didn't she go to school? Social workers need to know the reasons why youth are in the system.

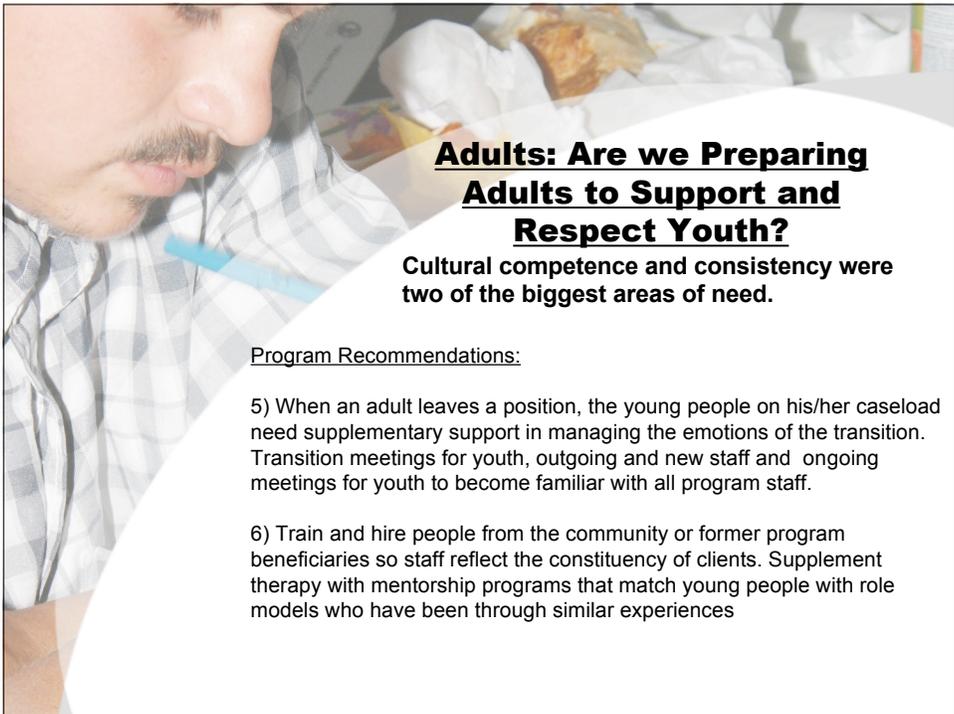


Adults: Are we Preparing Adults to Support and Respect Youth?

Participants expressed concern that the adults taking care of them were not properly trained or supported in dealing with heavy emotions or trauma-induced behaviors.

Program Recommendations:

- 1) Mental health training for staff who are non-therapy providers of service.
- 2) Staff, teachers, social workers, judges, case workers, foster parents and therapists working with stressed out young people need support groups and therapy too!
- 3) Ongoing, required trainings for foster parents - about parenting, conflict resolution and other issues.
- 4) Required support groups and trainings for staff or foster parents with LGBTQ youth

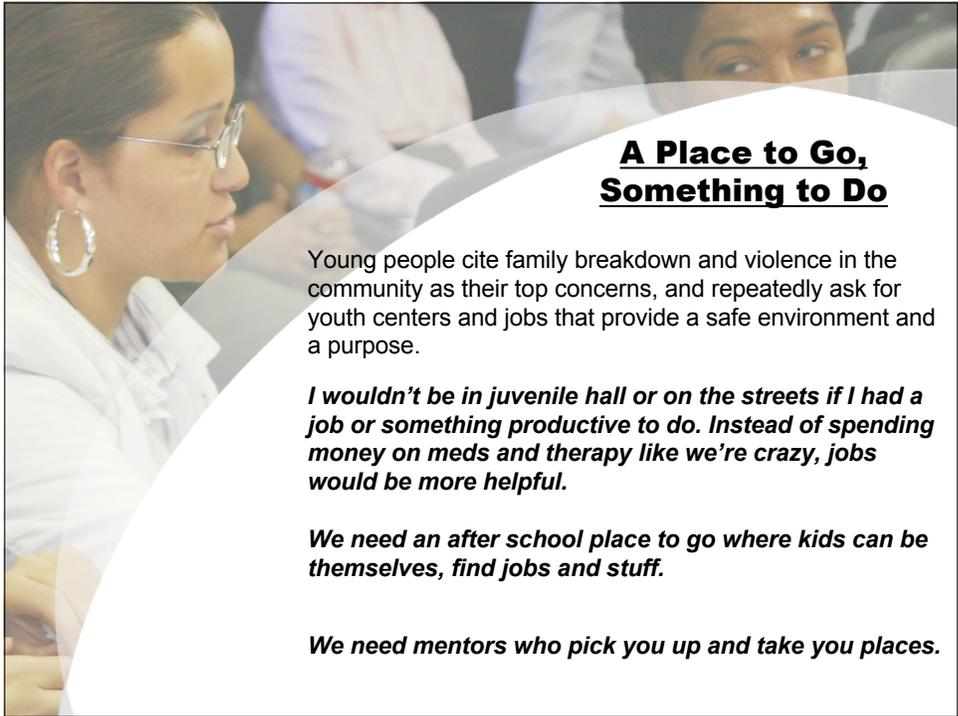


Adults: Are we Preparing Adults to Support and Respect Youth?

Cultural competence and consistency were two of the biggest areas of need.

Program Recommendations:

- 5) When an adult leaves a position, the young people on his/her caseload need supplementary support in managing the emotions of the transition. Transition meetings for youth, outgoing and new staff and ongoing meetings for youth to become familiar with all program staff.
- 6) Train and hire people from the community or former program beneficiaries so staff reflect the constituency of clients. Supplement therapy with mentorship programs that match young people with role models who have been through similar experiences



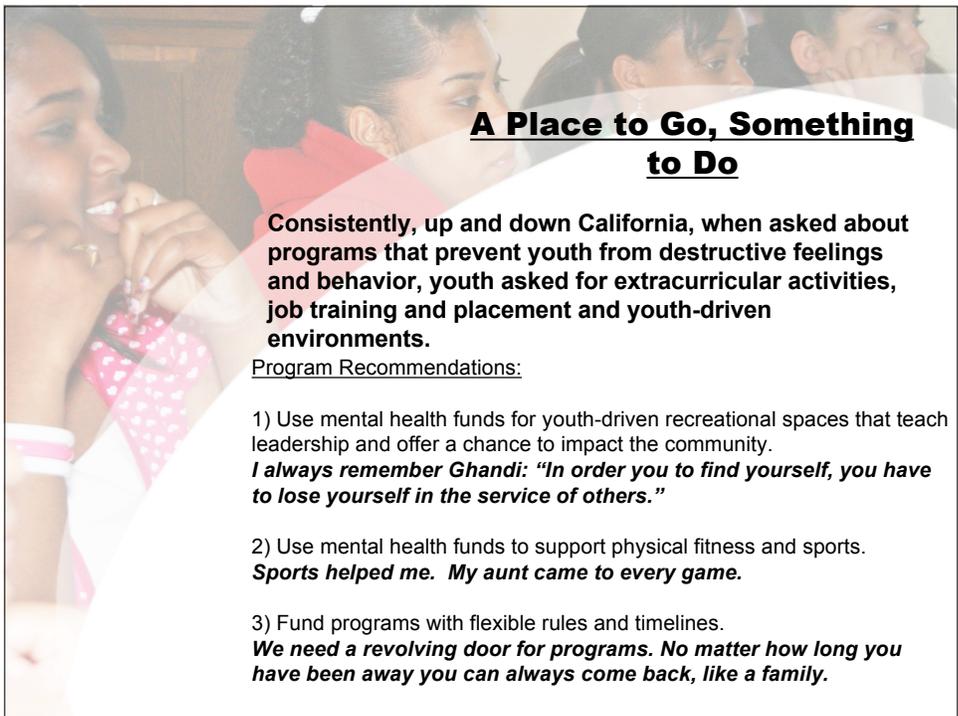
A Place to Go, Something to Do

Young people cite family breakdown and violence in the community as their top concerns, and repeatedly ask for youth centers and jobs that provide a safe environment and a purpose.

I wouldn't be in juvenile hall or on the streets if I had a job or something productive to do. Instead of spending money on meds and therapy like we're crazy, jobs would be more helpful.

We need an after school place to go where kids can be themselves, find jobs and stuff.

We need mentors who pick you up and take you places.

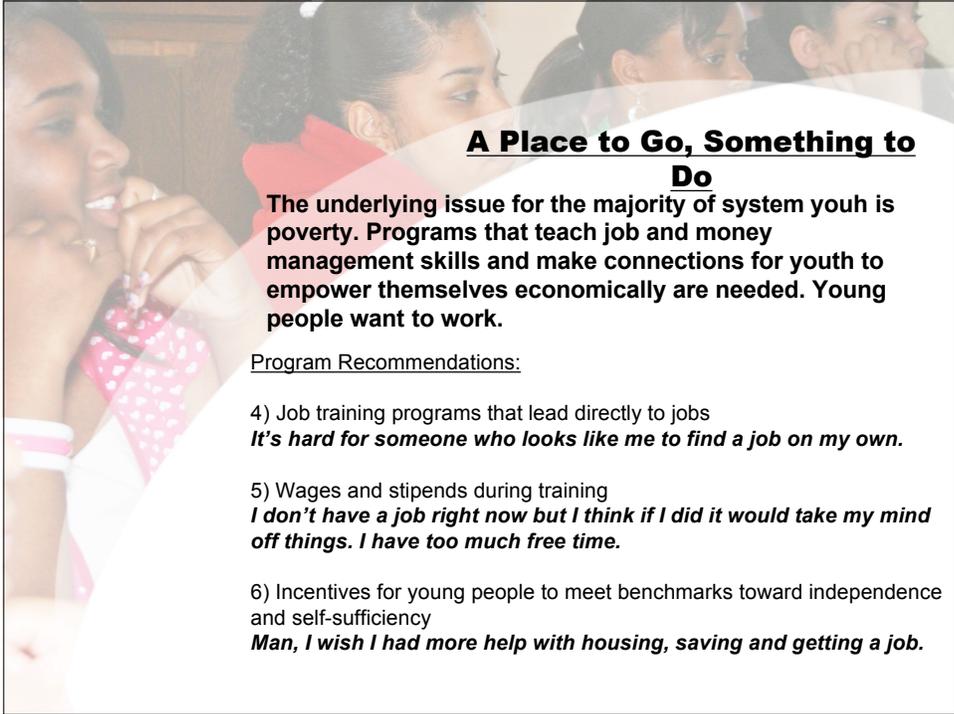


A Place to Go, Something to Do

Consistently, up and down California, when asked about programs that prevent youth from destructive feelings and behavior, youth asked for extracurricular activities, job training and placement and youth-driven environments.

Program Recommendations:

- 1) Use mental health funds for youth-driven recreational spaces that teach leadership and offer a chance to impact the community.
I always remember Ghandi: "In order you to find yourself, you have to lose yourself in the service of others."
- 2) Use mental health funds to support physical fitness and sports.
Sports helped me. My aunt came to every game.
- 3) Fund programs with flexible rules and timelines.
We need a revolving door for programs. No matter how long you have been away you can always come back, like a family.



A Place to Go, Something to Do

The underlying issue for the majority of system youth is poverty. Programs that teach job and money management skills and make connections for youth to empower themselves economically are needed. Young people want to work.

Program Recommendations:

4) Job training programs that lead directly to jobs
It's hard for someone who looks like me to find a job on my own.

5) Wages and stipends during training
I don't have a job right now but I think if I did it would take my mind off things. I have too much free time.

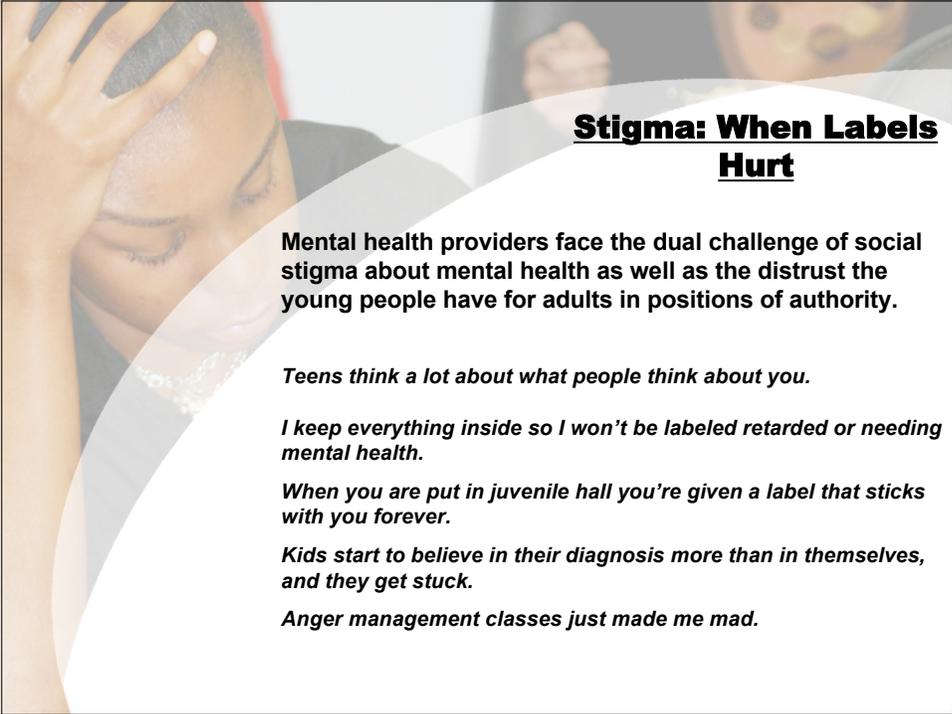
6) Incentives for young people to meet benchmarks toward independence and self-sufficiency
Man, I wish I had more help with housing, saving and getting a job.



What Programs Do You Want?

- Football Teams
- Writing Skills
- How to communicate
- Learn boundaries
- Job Services
- Help me discover my talents
- Motivational Speakers (Young!)
- Better teachers
- Tutoring
- Support Groups
- Boxing Leagues
- Travel, so you can see other people are like you
- Learn about other cultures
- Massage therapy
- Drama classes
- More and better therapists
- Field trips
- Put gyms everywhere
- Parenting Classes
- Childcare Support

“Keep people busy, period.”



Stigma: When Labels Hurt

Mental health providers face the dual challenge of social stigma about mental health as well as the distrust the young people have for adults in positions of authority.

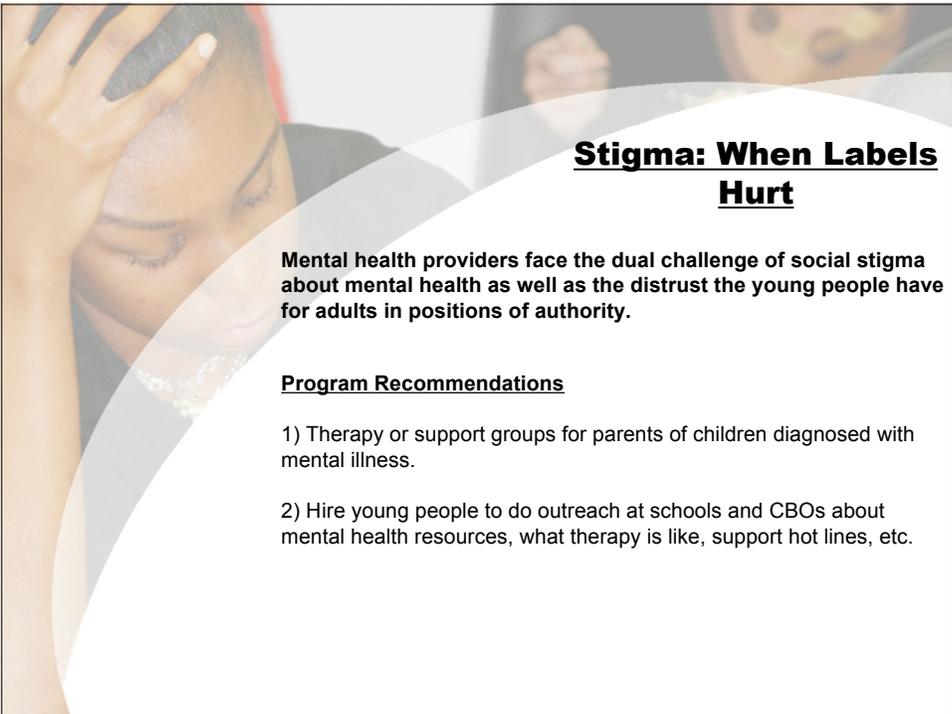
Teens think a lot about what people think about you.

I keep everything inside so I won't be labeled retarded or needing mental health.

When you are put in juvenile hall you're given a label that sticks with you forever.

Kids start to believe in their diagnosis more than in themselves, and they get stuck.

Anger management classes just made me mad.

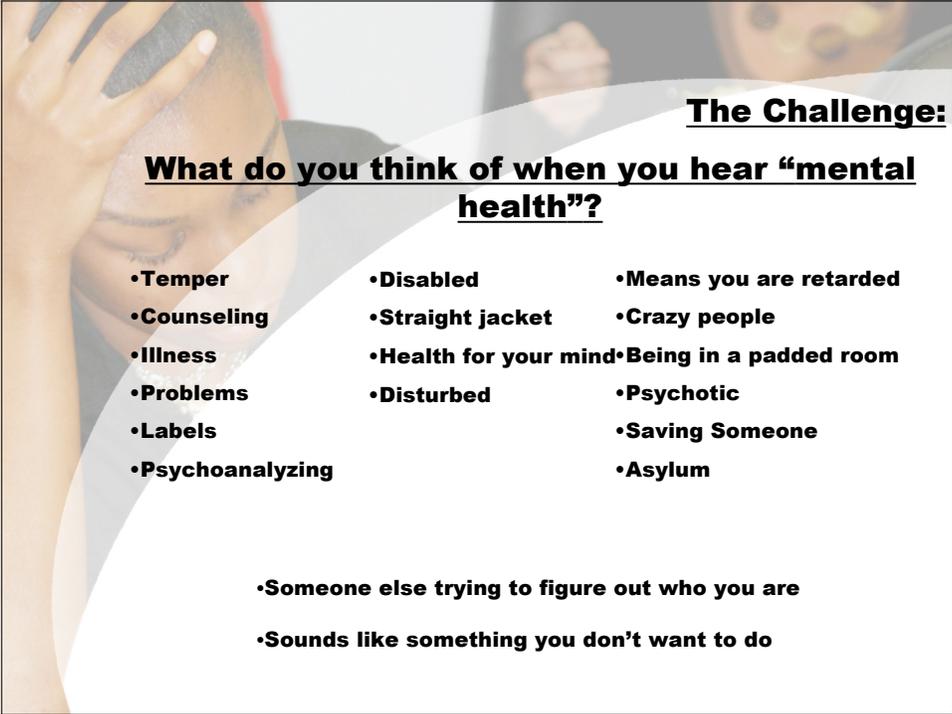


Stigma: When Labels Hurt

Mental health providers face the dual challenge of social stigma about mental health as well as the distrust the young people have for adults in positions of authority.

Program Recommendations

- 1) Therapy or support groups for parents of children diagnosed with mental illness.
- 2) Hire young people to do outreach at schools and CBOs about mental health resources, what therapy is like, support hot lines, etc.

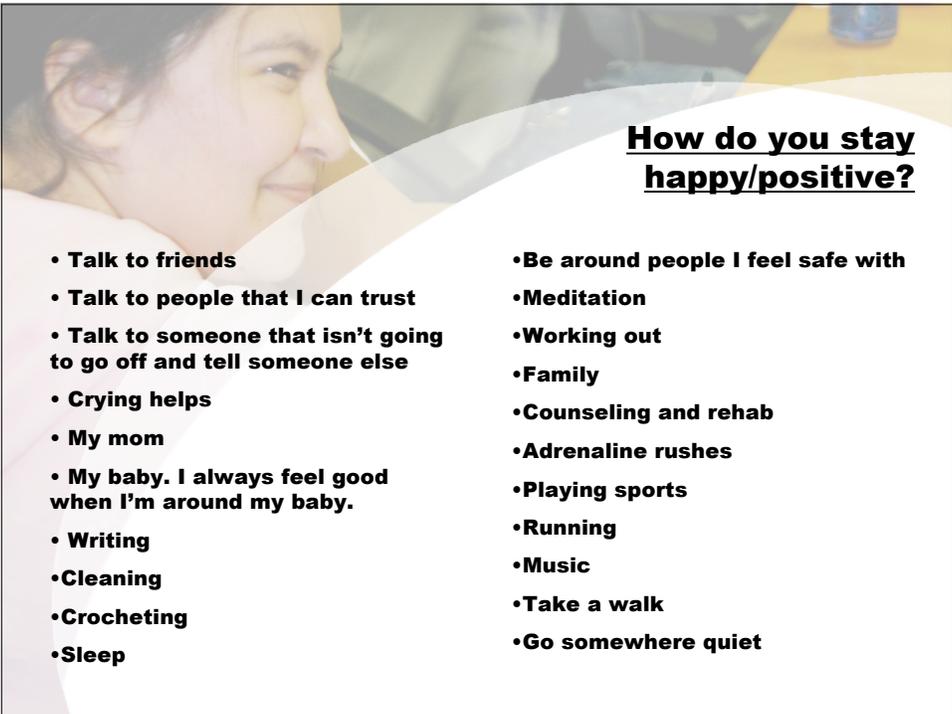


The Challenge:

What do you think of when you hear “mental health”?

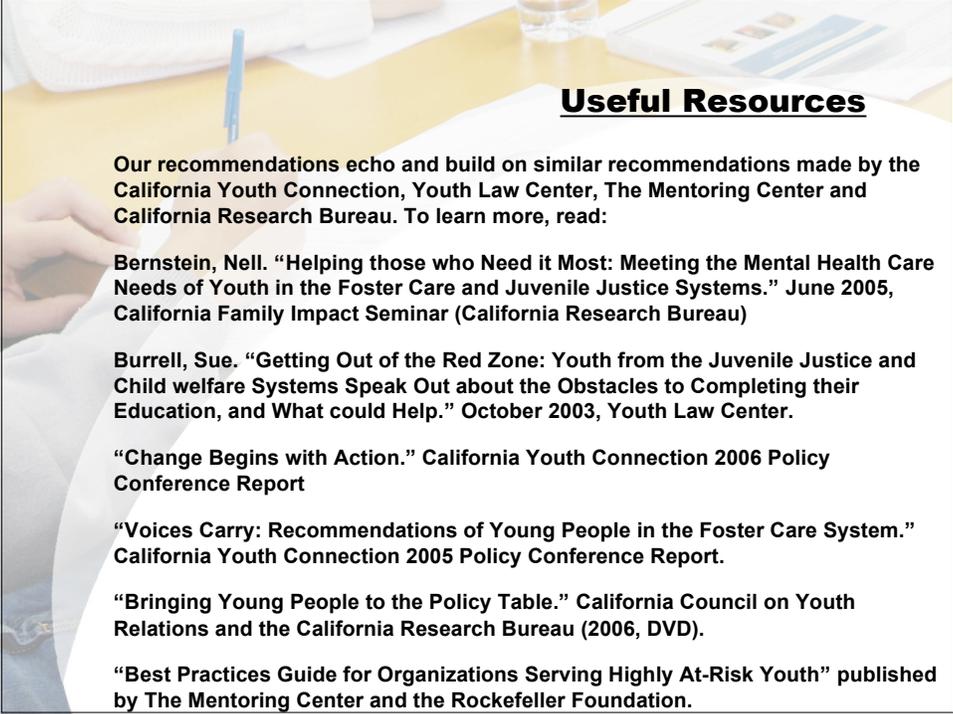
- Temper
- Counseling
- Illness
- Problems
- Labels
- Psychoanalyzing
- Disabled
- Straight jacket
- Health for your mind
- Disturbed
- Means you are retarded
- Crazy people
- Being in a padded room
- Psychotic
- Saving Someone
- Asylum

- Someone else trying to figure out who you are
- Sounds like something you don’t want to do



How do you stay happy/positive?

- Talk to friends
- Talk to people that I can trust
- Talk to someone that isn’t going to go off and tell someone else
- Crying helps
- My mom
- My baby. I always feel good when I’m around my baby.
- Writing
- Cleaning
- Crocheting
- Sleep
- Be around people I feel safe with
- Meditation
- Working out
- Family
- Counseling and rehab
- Adrenaline rushes
- Playing sports
- Running
- Music
- Take a walk
- Go somewhere quiet



Useful Resources

Our recommendations echo and build on similar recommendations made by the California Youth Connection, Youth Law Center, The Mentoring Center and California Research Bureau. To learn more, read:

Bernstein, Nell. "Helping those who Need it Most: Meeting the Mental Health Care Needs of Youth in the Foster Care and Juvenile Justice Systems." June 2005, California Family Impact Seminar (California Research Bureau)

Burrell, Sue. "Getting Out of the Red Zone: Youth from the Juvenile Justice and Child welfare Systems Speak Out about the Obstacles to Completing their Education, and What could Help." October 2003, Youth Law Center.

"Change Begins with Action." California Youth Connection 2006 Policy Conference Report

"Voices Carry: Recommendations of Young People in the Foster Care System." California Youth Connection 2005 Policy Conference Report.

"Bringing Young People to the Policy Table." California Council on Youth Relations and the California Research Bureau (2006, DVD).

"Best Practices Guide for Organizations Serving Highly At-Risk Youth" published by The Mentoring Center and the Rockefeller Foundation.

Youth in Mind (CMHACY Youth Leadership Academy)

El Sol Collective (Sacramento)

Youth Matters (Stockton)

San Diego Youth and Community Services

Mental Health Association of the Central Valley

Children's Hospital of Los Angeles

Dorothy Kirby Center (Los Angeles)

Conscious Youth Media Crew (San Francisco)

The Mentoring Center (Oakland)

Tools for Success (Daly City)

The California Research Bureau (Sacramento)

TaSin Sabir, Mai Der Vang, Daffodil Altan and Julie Johnson for their excellent note taking!

Allegra Harrison and Nell Bernstein for support distilling these final recommendations.

And most of all the California Department of Mental Health

for having faith in the power of youth voice to improve the system.

Thank You



California Council
on Youth Relations

www.youthoutlook.org

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