

Wellness Matters

Your Wellness ♦ Your Way ♦ Your Community

An E-Journal of San Mateo County Behavioral Health and Recovery Services

May 2015

BHRS Stands Up To Stigma, Working Towards A Stigma-Free San Mateo

By Kimberly Westrick, Workforce Training and Development Specialist, BHRS

May is Mental Health Month



Enjoy stories of hope and recovery; pledge to “Be The One” and help reduce stigma in San Mateo County or attend a community event!

Stigma plays a regrettable role in perpetuating behavioral health conditions in the United States. According to the National Council for Behavioral Health, nine out of ten people with a mental health conditions are treatable with a combination of medication, therapy and support, yet negative views and labels about mental health conditions are one of the top reasons people don't seek help. As many as one out of ten people who need treatment don't seek help out of fear of how they will be treated, reports the National Institute for Drug Abuse. The Office of Diversity and Equity is working hard to reduce the effects of stigma.

With the help of grant fund-

ing from CalMHSA Each Mind Matters, The Lived Experience Academy (LEA) and Speakers' Bureau has been working ardently to undo the effects of stigma by increasing trainings, speaking engagements, and anti-stigma education in San Mateo County over the past five months. These anti-stigma programs have touched individuals who identify as clients and consumers, their families, BHRS and contract agency staff, and community members.

In February, we hosted a 3-session LEA Refresher Course to support LEA graduates in brushing up on their public speaking skills. In March, we held a 5-session Lived Experience Academy, followed by a

3-day Digital Storytelling Workshop in April for those who identify as behavioral health clients/consumers or family members of clients/consumers. Participants discussed issues of stigma, developed public speaking skills, and shared their personal stories of recovery from mental health and substance use conditions. Graduates asserted that LEA empowered them to apply what they learned in the following ways:

“Believe in MY story and in myself! I am not the stigma!!”

“This has been so powerful for me, I am excited to be a speaker and look forward to my position in the community

(Continued on page 12)

Be The One—San Mateo County Launches Stigma Free Campaign

The Office of Diversity and Equity (ODE) and BHRS are excited to announce that our “Be The One” campaign launched on May 4 at our Mental Health Awareness Month Kick-Off Event. The “Be The One” campaign is our county-wide effort to reduce stigma toward behavioral health conditions. ODE has been promoting the campaign against stigma through Stigma Free San Mateo and is now embarking on new efforts to encourage individuals to do

their part in ending the negative attitudes and beliefs toward people who have a mental health or substance use condition.

Community members are encouraged to commit to identifying an action that they will do to fight against stigma. Photos will be posted online and in social media with participants holding their message “I will be the one to...”

Please join this campaign, submit your photo or personal pledge and help stand up to



*“I will be the one to Live Outloud!”
- Pamela Ward*

stigma (see links below)! 🐾

- Katy Davis and Jei Africa

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Be The One
San Mateo County

- To see other pledge photos or to submit your own: www.smcbhersblog.org/BeTheOne. Participate and enter to win a \$25 Starbucks gift card! Visit the website for details.
- For more information about stigma, check out www.smchealth.org/stigma.
- Learn more about mental health conditions; attend a community event: www.smchealth.org/mentalhealthmonth.

Mental Health Month Events



May 7

5:30 - 8:00 pm

Family Awareness Night: Wellness through Connection & Expression

One East Palo Alto
Community Center
2400 Ralmar Ave
East Palo Alto

May 11

11:15 am - 1:30 pm

The Waiting Period

A play written by Brain
Copland on his battle
with depression.

Skyline College
3300 College Dr.,
Building 1, San Bruno

May 11:

6-8 pm

Breaking the Silence -

*A Digital Stories Screening
Premiere-presented by the
Pacific Islander Initiative*
San Mateo County Health
System, Room 100
225 37th Avenue
San Mateo

May 12

5:15-7:00 pm

Lived Experience

Academy Panel

SSF Council Chambers
33 Arroyo Drive, South SF

May 21

5:30-7:30 pm

Lived Experience

Academy Panel

Half Moon Bay Rec Center
110 Higgins Canyon Road,
Half Moon Bay

May 30

8:30 am

NAMI Walk

Lindley Meadow, Golden
Gate, San Francisco

For more info or a flyer,
visit [www.smchealth.org/
mentalhealthmonth](http://www.smchealth.org/mentalhealthmonth).

From the Director's Desk - Stephen Kaplan, Director, BHRS

Mental Health Awareness Month – Work Yet To Be Done

Until individuals living with a mental illness live in a society where they do not face stigma and discrimination due to their mental illness, we will continue our social justice efforts including events like Mental Health Awareness Month.

Stigma is when someone views another in a negative way because of a distinguishing characteristic or personal trait that's thought to be, or actually is, a disadvantage (a negative stereotype). Unfortunately, negative attitudes and beliefs toward people who have a mental health condition are far too common.

Stigma can lead to discrimination. Discrimination may be obvious and direct, such as someone making a negative remark about your mental illness or treatment. Or it may be unintentional or subtle, such as someone avoiding a person assuming they are unstable, violent or dangerous due to a mental health condition. Stigma can also be self-inflicted.

The Behavioral Risk Factor Surveillance System (BRFSS) surveyed attitudes and beliefs about mental illness in a 2007 study. They found that the overwhelming majority of adults – 78 percent of adults

with mental illness and 89 percent without – believed that treatment is an effective method to help people lead healthy and normal lives. While 57 percent of all adults surveyed felt that individuals are compassionate and sympathetic to those with mental illness, however, only 25 percent of adults with mental illness believed that to be true.

Negative perception of people experiencing mental illness is widespread. Despite the fact that the success rate for treatment of mental illness is as high as 80 percent in certain disorders, many people will avoid seeking help for fear of being labeled as "crazy." They worry about the negative impact that seeking treatment and receiving a diagnosis will have upon their ability to find work, housing, and social acceptance. It should be noted that stigma can be experienced in almost every aspect of life, including school, professional environments, family, coworkers, and even individuals working in the health care system. There is also evidence to suggest that ethnic and minority individuals experience mental health stigma at greater rates than others.

Particularly over the past ten years considerable resources at the national, state and local



Stephen Kaplan

levels have been dedicated to ameliorating stigma and its related by products. I believe small incremental progress has been made. As evidenced in this, and other Wellness Matters, issues we have courageous individuals living with a mental illness (and substance use) recounting their lived experiences. And every time this happens, a crack in the wall of stigma takes place.

So we must continue our efforts individually and collectively on behalf of those living with a mental illness to support them in their recovery and finding their rightful place in our community; for their families so they know they are supported and not alone; for our staff and providers to continue their vital role in helping our consumers and families; and for our community to build understanding and tolerance so that all can find the quality of life they seek and deserve. ☺

2015 Tony Hoffman Award Recipients

The Tony Hoffman Award recognizes individuals, professionals, businesses, or media representatives who have made an extraordinary difference in the lives of people with mental illness and the San Mateo County community. Recognition is given for public education or advocacy to promote mental health awareness and needs or

to address stigma; services to persons with mental illness; creation of new and innovative programs or community support activities; recognition of fundraising for mental health activities or long-term financial support to mental health programs; working for new mental health legislation; compassionate treatment of

persons with mental illness. Congratulations to this year's recipients:

- Allen Valcov
- Gay Echeverria
- Sharon Roth
- Cameron Quanbeck
- Inspired at Work
- San Mateo Police Department

Mental Health Services Act Update – Doris Estremera, Manager of Strategic Operations

The MHSA Steering Committee met at the end of March for an interactive meeting where members and participants provided their valued recommendation in two areas:

1) Support of the proposal for BHRS to request release of unencumbered Housing Program funds for supportive housing services. Assembly Bill No. 1929 requires the California Housing Finance Agency, with the concurrence of the State Department of Health Care Services (DHCS), release unencumbered MHSA Housing Program funds upon the written request of the respective county. Funds are to be used to provide housing assistance to MHSA target populations. BHRS recommends the release of \$1,064,619 in San Mateo County unencumbered funds. The additional flexibility in providing housing assistance to consumers and clients will allow BHRS to best leverage and fully utilize the funds through partnering with other housing efforts in San Mateo County. The MHSA Steering Committee vote was unanimous in support of this proposal. For more information on the MHSA Housing Program and housing developments funded to-date in San Mateo County, visit www.smchealth.org/bhrs/mhsahousing

2) Recommend Innovation Projects for further funding consideration. The MHSA Innovation Component allows counties to use funds for innovative projects, defined as novel, creative, ingenious approaches developed within communities and lead to learning for the mental health system, rather than focus on a service or addressing an unmet need. The Steering Committee made recommenda-

tions on which projects to move forward for further exploration, listed below in the order of votes received:

- The Health Ambassador Program
- Neurosequential Model of Therapeutics (NMT) for adults
- Housing advocacy services
- LGBTQ Behavioral Health Center
- Technology Innovations to support youth treatment and crisis
- Technology Innovations for engaging isolated and hard-to-reach adults

Prevention and Early Intervention (PEI) Programs Evaluation

Gibson & Associates, an independent consulting firm, was contracted to conduct an evaluation of eight MHSA PEI programs, Year 1 findings are now available and include both process and program impact outcomes. Some process highlights include:

- All PEI programs now have a consistent evaluation plan currently being implemented
- The evaluation plan has been incorporated into the RFP and will be incorporated into the new contracts
- All PEI MHSA reporting will now include impact and satisfaction data, along with the usual service dosage, demographics and success and challenges
- PEI Outreach programs will be evaluated separately and plans incorporated into the new RFP

The programs were evaluated for efficiency, effectiveness/impact, satisfaction with services and responsiveness to target community. Impact outcomes for each program vary and are available on our website

www.smchealth.org/bhrs/mhsa



I found that the word “stigma” means a mark of disgrace, and that it is also the root of the word “stigmata”, which in Christian tradition indicates the marks corresponding to those left on Jesus’ body by the Crucifixion, impressed by Divine favor on the bodies of some saints.

In this age of personal branding, stigma could be seen as a brand that reflects unfavorable light on the bearer.

I chose this photo because it is exactly what stigma is not. Here are two friends—despite obvious differences—hearts overflowing with love and acceptance of each other, beaming like divine lamps. This within a cityscape of one of the world’s most diverse and tolerant cities. In my work with behavioral health clients, and in all of life, I pray... “Let my personal brand be that of the Divine Lamp, throwing a light of recognition, acceptance and appreciation onto all.”

This project was supported by San Mateo County’s Spirituality Initiative, Behavioral Health and Recovery Services, Office of Diversity and Equity, and funded by the Mental Health Services Act.



Spirituality photovoice project. See story, page 10.

Having Hopes and Dreams—For the First Time in My Life

I first noticed feelings of sadness as a child. Even at the age of five feeling so overwhelmed with sorrow and hopelessness that I did not think I would live to see adulthood.

As far back as elementary school I would talk openly about wanting to die and how I would kill myself. It never occurred to me that there was anything unusual about this. I thought every child felt and thought like me. In intermediate school I began to experiment with self harming. This continued into my mid 30s.

I was very isolated in high school. Although people did try to reach out and befriend me, my sadness and suicide ideation were so intense that I saw no point in connecting with other people. I would often think, "I'm not going to be alive tomorrow, I'm going to kill myself tonight, so why bother reaching out to others?"

I struggled for many years after high school. I could not sustain housing. I could not sustain relationships. I could not sustain employment. I would get a job, start it with great enthusiasm, then have a break and lose the job within days, weeks or months. I even went through the shelter system twice.

I remember those dark days all too well. At times I felt like I was in a glass bubble that I could not break out of. Other times it was like a cloud would settle in that I could not navigate through. Then there were times where I felt completely disconnected from reality, as if I was in a dream like state and couldn't determine if what was going on around me was fact or fiction. Other times I had a sensation of continuous falling and never hitting the ground. Those were the days when I

could not function.

Finally my suicide ideation grew to the point where I began to seriously consider taking my life. Thankfully a dear friend intervened and convinced me to get help. I was hospitalized and diagnosed with major clinical depression. I refused to accept the diagnosis and the medication prescribed. At the time, I believed "only crazy people have mental illnesses." I didn't believe that I had a mental illness and thought it was a sign of weakness. I believed all I had to do was change my thoughts and I wouldn't be sad.

I struggled for several more years before deciding to seek treatment again. Even after I began taking medications and undergoing therapy, I still struggled for years. I even tried to end my life three times. It was during my third and final suicide attempt that I had a breakthrough for the first time and thought to myself, "Why am I doing this? This is stupid." As I sat there and thought about my life I realized that I needed to make a change. Nothing I was doing was working. Thankfully, Dialectic Behavior Therapy came along and taught me a whole new way of thinking and be-

having. I learned some incredible coping skills that I still utilize to this day.

Today my life is the complete opposite of what it was. Though I still have my dark days, I am able to function. I work full time as the Program Coordinator at the nonprofit, Heart and Soul, Inc. in San Mateo County. I went from not being able to get myself to work every day to running two centers and supervising five people. I'm able to sustain housing and relationships.

For the first time in my life I have hopes and dreams. I dream about the day when mental illnesses are viewed in the same light as any other health condition. I dream about continuing my advocacy work and educating more people about mental illness. I dream about finishing my degree, owning a home and someday being married. I dream about my future wife and I traveling the world together, working side by side and hand in hand as we continue to raise awareness about mental illness. These aren't just dreams for me. I truly believe that these can all become my reality. ☺

- Christopher Jump

Mental Health and Substance Abuse Recovery Commission

Wednesday, June 3rd

3:00 – 5:00 pm
Silicon Valley Community Foundation
1300 El Camino Real
San Mateo

Commission meetings are open to the public and are generally held the first Wednesday of the month. For location or more information, call 650.573.2544 or visit: www.smchealth.org/MHSARC



San Mateo County's SMART van. See story next page.

Getting to the Right Place at the Right Time - County's SMART Program

John D has been hearing voices and talking with himself. He is wandering the streets and appears to be disoriented. Concerned bystanders call 911. Law enforcement officers are dispatched to the scene. In the past, John would probably be transported to a psychiatric emergency department on a hold for up to three days—a "5150." Now, with the San Mateo County Assessment and Referral Team (SMART), the law enforcement officer notifies the dispatch center that he needs a "code 2," or non-acute, response for a patient with a behavioral problem. The SMART Paramedic responds to evaluate John. After it is determined that he doesn't have a medical concern and is not a danger to himself or others, the SMART paramedic can transport John to Psychiatric Emergency, his clinic or clinician's office voluntarily.

Why SMART?

The San Mateo County Assessment and Referral Team (SMART) was developed as a joint partnership between the San Mateo County EMS Agency, the Health System, Behavioral Health and Recovery Services, Aging and Adult Services and community stakeholders such as law enforcement agencies, schools and hospitals to serve as an alternative to the placement of an involuntary hold and transportation to one of our two psychiatric emergency departments. The SMART units are staffed with experienced paramedics who have additional education in the assessment of behavioral health clients and knowledge of options for destination and treatment based on the client's needs. The SMART paramedics respond with police officers on

less serious behavioral health calls that are identified and dispatched by Public Safety Communications. Two SMART units work over-lapping shifts to provide coverage from 7 AM through 10 PM. The paramedics respond in a van as opposed to a traditional ambulance. In addition to the SMART paramedics, the team includes a BHRS clinician who can be reached by phone when needed.

Who are the SMART medics?

The SMART program is comprised of experienced paramedics with a desire to provide additional services to behavioral health clients. Prior to completing the SMART training program, paramedics interested in SMART training participate in a Crisis Intervention Training (CIT) course with law enforcement officers. After successfully interviewing for the SMART program the paramedic completes approximately 120 hours of classroom and clinical training designed to enhance their knowledge and skill in assessing behavioral health clients and identifying potential options for treatment.

What options do the SMART medics have?

When SMART paramedics assess that the client does not have any acute medical needs, they can transport the patient to services that the individual needs. Options open to the SMART paramedic include:

- Voluntary transporting to the facility of their choice or to one of the two psychiatric emergency departments
- Arrange for shelter
- Transport to First Chance for assessment and treatment of drug and alcohol

dependence

- Transporting to a clinic or their behavioral health clinician's appointment
- Arrange for future appointments
- Interact with the SMART Clinician from BHRS to determine how to best meet the client's needs
- Provide referral information for continuing care
- Place a hold when necessary for the patients safety and continued well being

How is the program evaluated?

The SMART paramedic completes an electronic medical record. Data can be pulled from this document to determine the volume of patients served, the destinations used and the number of times clients are being transported without a 5150 hold. Individual records are also reviewed by the SMART Clinician or EMS Clinical Services Manager.

What was the impact of Measure A on the SMART program?

Measure A funds were used to add a second SMART unit and expand the hours of coverage for the SMART paramedics. This valuable option for care was expanded from 12 to 15 hours of service with an overlap of coverage during the busiest hours. We are working toward a more robust connection between the SMART paramedic and BHRS's electronic records. SMART is one component of the integrated expansion of San Mateo County's services to clients with behavioral health needs. ☺

- Jan Ogar, RN,
EMS Clinical Services Manager

BE IN THE KNOW



With the New BHRS Blog:
www.smcbhrrsblog.org

Get the latest news, info on events, trainings and more, and post your comments.

Here's a peek at current news on the blog (not included in Wellness Matters)

- VRS - Financial Empowerment Project Seeking Peer Benefits Counselors.
- Mental Health First Aid training course sees gain in support, funding.
- Wells Fargo Bank donation brightens children's waiting room.
- And More!

Psychiatric Emergency Response Team—Partnership Matters

The Psychiatric Emergency Response Team (PERT), a joint partnership between the San Mateo County Sheriff's Office and the Behavioral Health Recovery Services has logged its first month. PERT members are Sheriff's Detective James Coffman, and Program Specialist Jason M. Albertson, LCSW. Jim has been managing the training and operations of the CIT for several years; Jason is a new-to-San Mateo County BHRS Licensed Clinical Social Worker who has been managing part of the San Francisco Homeless Outreach Team for several years. PERT is a pilot program serving the Sheriff's Office Jurisdiction areas.

PERT goals:

- Follow up on any 5150 initiated by San Mateo County Sheriff's Office, including a home visit if necessary, to ensure individual and community safety.
- Provide consultation to law enforcement in the field and support diversion from acute, involuntary placement to community resources.
- Train law enforcement personnel at the field level in crisis intervention response techniques.
- Provide a layer of case management support to people experiencing mental illness and/or homelessness that come into contact with law enforcement in the Sheriff's jurisdictions.
- Create system-level care opportunities that reduce the risk of violent and tragic outcomes when law enforcement comes into contact with individuals experiencing mental illness/behavioral dysregulation/substance intoxication.
- Provide outreach to individuals with mental illness in the community referred to law enforcement by other entities or persons who cannot engage the individual.
- Strengthen inter-agency collaboration,
- Reduce recidivism among mentally ill offenders.
- Provide support to the Field Crisis Consultation Committee.
- Respond in active and consultative capacity to the Crisis Negotiation Unit's

and Hostage Negotiating Team's call outs.

PERT is available for consultation, home visits, welfare checks and support the client following a treatment plan, including medication support. We are not first responders, but we will initiate a first response if appropriate. Given the presence of the clinical resource on the team, PERT can spend the time required to sensitively de-escalate clients, utilizing a trauma informed care model, locating community resources, and bridging clients to care versus placing clients on a 5150 hold.

To contact PERT please call: Detective James Coffman, at 650-802-4285 or

Program Specialist Jason Albertson, LCSW at 650-802-4294.

Messages are checked daily, M-F.

Do not utilize these numbers as a substitute for a request for emergency response that should be presented to 911. ☞

- Jason Albertson

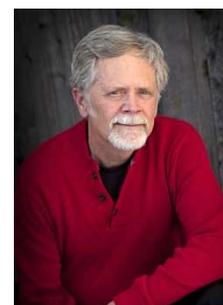
Cordilleras Corner: Redesign Project - Terry Wilcox-Rittgers

We are now in the midst of conducting the small focus survey groups that I mentioned in our February update. Feedback we received from the questionnaires previously completed by key informants of the project, combined with what we already know is being used to inform our focus group discussions. Each step builds upon previous learnings to help us create a clearer vision of our new campus.

We are currently in the "Bridging Phase," which requires us to develop specific details about what we want

our campus to include. This is critical in that the laws governing this type of project state that we cannot use the same firm that we've been working with to complete the project. Therefore, our current architectural firm is designing bridging documents that the eventual building contractor we hire will have to adhere to in completing the new campus. We anticipate having this "Bridging Phase" completed by October 2015.

Please share any ideas you have for this campus as many of you know people who lived



Terry Wilcox-Rittgers

and/or worked on the campus or may have had the opportunity to visit the campus. Email me at Twilcox-rittgers@smcgov.org. ☞

Did You Ever Know How To Fly?

I used to be able to fly! All I had to do was think myself up into the air and soar around wherever I wanted. I *know* I used to be able to do this and didn't think that there was anything odd or special about it, until I was taught that humans cannot fly.

Then I decided it must have all been a dream and that I never flew, but to this day there is a voice inside me that keeps telling me "Oh, yes you did!" and it is not that *little* voice everyone talks about, this is a **strong voice** that wants me to remember. It wants me to remember other things too and they are all things that used to *be* before the world of grown ups and rules, and reason, and logic, and limitations chained my soul down; before the *real world* brainwashed me into knowing that "I cannot do that, I was never taught how." Telling me "It is time to grow up

now and grown ups don't ever even think about flying because that would be silly."

I have never ever told anyone about being able to fly for fear of how others would look at me, what others would think of me, of being labeled insane, or being thrown into a padded cell and having the key thrown away.

Now, as I wonder about the fears that took my wings I think about all the other things that those fears took from me, of all the things the *real world* told me I could not do. Fear made me invisible. Fear took the magic away. Fear made me feel worthless, and hopeless, and robbed me of my self-esteem and confidence. It almost took my life. **I know it did!** I remember being a confident, happy, charismatic child brimming with creativity and dreams for my future.

I *will* be that child again. I

have been down the rabbit hole and come back; I have looked at the fears, faced what other people think about me; I have even been thrown into that padded cell; and contrary to what many people believed or said I have not only survived it, I have flourished because of it! I have come through this as a new and much better person. I have regained those things that fear took from me; things that I never thought possible to see or feel in my life again.

The padded cell and the invisibility I felt taking myself away from me were merely a cocoon wrapping me safely until I was ready to emerge into the warmth of the sunlight and spread my wings once again. ☺

- Kathleen Mackin

BHRS Welcomes New Assistant Director

BHRS welcomes Scott Gruendl, the new Assistant Director who will fill Patrick Miles' position—the current Assistant Director at BHRS—upon his retirement on June 30.

Scott joins San Mateo County after working for Glenn County from 1993 through February of this year. His last position was Director of Health and Human Services which included behavioral health, public health, environmental health, child welfare, adult protective services and social services. Scott was the designated behavioral health director and has an extensive experience with policy, administrative, operational and quality improvement responsibilities and requirements for

both mental health and substance use services. "We are very pleased to welcome Scott to our County. He brings a broad and deep understanding of behavioral health issues as well as those of many of the agencies that we partner with" said Steve Kaplan, BHRS Director.

When asked how he felt about coming to San Mateo County, Scott shared. "I never imagined my career would lead me to where I am at today and I sometimes think that I need to pinch myself to make sure the work I am doing at BHRS is real. I come from a rural and conservative area of the state where my effort to create an integrated services model has been a constant battle and with



Scott Gruendl

BHRS, I feel like I have been transported ten years into the future because now I am working in the model that I have been trying to create."

Welcome aboard Scott! ☺

Finding My True Identity

My name is Daniella. I am a woman in transition who is half Tongan and half White. My Father was very abusive verbally and physically toward my mother, my brother and I, and was an alcoholic and a womanizer. At the age of four my uncle began molest me. I was very confused and the only way I knew how to deal with the abuse was to act out and to fight in school. My family didn't know about this until I became an adult. My parents divorced when I was five and at the age of seven, I was molested by my coach, who was the first man that I thought was different. I was wrong. He was a monster. My mother did everything in her power to help me as a troubled child. However, she was a very young mother who didn't finish high school and had limited knowledge in how to help a child who was angry and defiant in school. I experienced alcohol at the age of nine, but didn't get drunk until I was 12. All I knew was alcohol made me forget about the sexual abuse at home and made me feel numb. I only wanted to be normal. Then puberty hit and I noticed I was sexually attracted to my guy

friends. As a child I was interested in what little girls liked. I played with Barbie dolls. When we played house I was the mom. I knew at a very young age I was different and that I was born in the wrong body. At 14, I started to gang bang. I found a home with the home-boys. I knew I could always find what I was missing at home in my homies. They were from broken homes as well. At the age of 14, my cousin raped me as I was belligerently drunk and could not move. The very next morning I vowed I would never again be anyone's victim. I became hard and lost. The only person who was able to reach past the wall I put up was my Big Brother Clint. He had no idea what I was going through at the time. My brother and I are not blood but, we are family. At 16 my grandfather kicked me out of his house and told me to live on the streets of Redwood City. I didn't care - I was selling drugs and I thought I could take care of myself. I was drinking alcohol everyday. At the age of 17, I tried meth for the first time. Was this the answer to all my problems?- I thought it was. I started to have sex with grown

men. A few times I tried to sell myself for money to pay for a hotel room or just to get by. I could not get over the dirty feeling I felt the next day, so it stopped. At 19, I went to prison for five years. I was angry and I hated the world. I was involved with a gang in prison. I have done things I am not proud of, all in the name of the cause. On my 21st birthday, I used a needle to shoot drugs - that was the biggest mistake of my life. The joy and high was intensified to a point that nothing could make me feel. It was all a lie.

I eventually came out of the closet in 1997, and found my true identity. I was loved and treated as a woman by my first love. Oh was I naïve - I once believed I could only be loved and treated as a woman in prison. I would get out and go right back to prison for years. In the last 21 years only three of those years were spent out of prison.

It was because Choices, Shirley Lamar and Mrs. Fein that I got the help I needed. They introduced me to therapy. I am still in therapy. I see my therapist once a week. I cannot say enough about how much she helps me. I am finally happy and I have a loving man in my life that loves me for who I am. He only expects from me what I am capable of. He is encouraging and he gives me a kick mentally when I need it. My life has not been easy but now I am happy because I can live my life as a woman and be me for the first time in my life. I am now 40 years old. I hope my story can help someone. I have come to learn that if I don't love myself, then no can love me. Today I can say I love myself. ☺



As a child I rode my bike to the Palace of Fine Arts for freedom from the world, a place to be alone but not lonely. Now the large columns still invite me to walk through and enter to that quiet place of freedom for the soul. The Palace of Fine Arts is a building which was saved 100 years ago while the rest of the 1915 World Fair buildings were destroyed. A reminder to me of my faith in Jesus, and that I am saved. This knowledge gives me hope each day, especially when things seem to appear too large to go through. I am grateful for this project which provided me the opportunity to express my faith and begin to break the stigma around spirituality. ~ Melinda

This project was supported by San Mateo County's Spirituality Initiative, Behavioral Health and Recovery Services, Office of Diversity and Equity, and funded by the Mental Health Services Act.



Wellness Corner

I've known George for close to 12 years and have seen a transformation in him. He has always been a consumer leader in San Mateo County participating consistently as the chair person on the Heart and Soul Board and as a regular attendee at the monthly commission meeting. George has a heart of gold and is always willing to share his experience, strength and hope with another person with lived experience. Please enjoy the journey of wellness by George Culores.

- Linford Gayle, Co-Chair
Total Wellness Consumer
Advisory Committee

Of George – Life in Wellness

Sometimes ago I weighed 248 pounds, was a heavy two-pack-per-day smoker, had a poor diet and got very little exercises! My teeth yellow, my gum badly damaged and my mouth looked really bad from all the smoking!

I have changed since then... I now scour the nutrition label for cholesterol, sugar, fat & trans-fat, potassium, etc. I watch my portions and eat sensibly daily. I have lost 99 pounds and am feeling great!

It wasn't until I was over a friend's house where there was a full-length mirror on the closet door. I saw myself at 248 pounds and exclaimed "This has to go!" I was not able to see myself and my entire figure all these times from the small mirror I had in my bathroom. I started putting myself on a diet and changed my diet from time to time until I ate only one steak per day and drank diet soda, coffee or tea – a high protein diet with no carbohydrates. While changing my diet, I also took the suggestion from my primary care physician to use the nicotine patch for six weeks and quit smoking. I denied myself of any permission to smoke at all. And, I

did it!

Now at 68 years old, I feel much younger myself! Not smoking has been the best thing for me as I no longer have that "smoker-cough." Other healthy practices include eliminating cholesterol from my diet and joining a gym to maintain what I have accomplished. With better health, I was able to complete the Peer Counseling Program at College of San Mateo with flying colors. I also advocate and promote behavioral health services as I truly believe in the value of treatment for my recovery. With therapy, medicine, and daily self-care, I have a winning combination. I am now ready and engage in the process of getting and keeping a job to reach my next milestone in my life! ☺

- George Steven Culores, Total
Wellness Consumer Advisory
Committee Member

East Palo Alto Family Awareness Night

On May 7, the East Palo Alto Behavioral Advisory Group (EPABHAG), convened by One East Palo Alto, will host the 8th Annual Family Awareness Night (FAN).

This year's event represents EPABHAG's and One East Palo Alto's own local celebration of May as National Mental Health Awareness Month, an official, nation-wide recognition period for which President Barack Obama has issued a proclamation calling on "...citizens, government agencies, organizations, health care providers, and research institutions to raise mental health awareness and continue helping Americans live longer, healthier lives"

(Presidential Proclamation – National Mental Health Awareness Month, 2014, retrieved from link below)

The evening will feature a discussion of mental health as a very important component of good quality of life. Although the discussion will initially touch on general mental health considerations its central focus will be on exploring wellness and how we connect with, express and sustain it for ourselves, our families and our community in holistic ways, i.e., mentally, physically, spiritually and culturally. FAN activities are designed to achieve the following objectives: identifying and sharing how different individuals, fam-

ilies and cultures view wellness; recognizing various factors that influence the relationship between wellness and behavioral health as well as identifying roadblocks to wellness. Finally, the evening's discussion will address access to quality behavioral health services and resources in EPA that promote wellness as well as highlight what is currently being done by EPABHAG members in partnership with San Mateo County Behavioral Health & Recovery Services to eliminate longstanding disparities. ☺

- Amina Burrell, Kava Tuluva &
Dr. Faye McNair-Knox

Family Assertive Support Team

Are you concerned about an adult family member who may be showing signs or symptoms of serious emotional distress and don't know what to do?

**Call FAST:
(650) 368-3178**

**We Make a Difference
AND We Come to You!**

Spanish and Mandarin speaking capacity are available. Other languages are available upon request.

Free service made possible by the voter-approved Mental Health Services Act (Prop. 63).



Spirituality 102 Training: Bridging Spirituality in Clinical Care

On February 3, the Spirituality Initiative, with the support of BHRS Office of Diversity and Equity, held its second 3-hour training - Spirituality 102: *“Bridging Spirituality in Clinical Care—Emphasizing Clinical Interventions.”* This training was offered to almost 50 attendees, including staff, family members, students, consumers and community partners. Presenters were Maria Lorente-Foresti, Veronica Ochoa, Bill Kruse and Chase Montara.

Following an opening meditation video on gratitude, William and Maria gave a brief review of the BHRS Spirituality Policy. The 2009 San Mateo County survey was highlighted, which confirmed empirical findings about the importance of integrating spirituality into mental health services and that this is an important aspect of wellness and recovery

(<http://smchealth.org/BHRS/ODE/Spirituality>). Bill provided information about the history of spirituality and psychiatry, outlining the changes over time in the integration of spirituality in mental health care, leading to our current increase in educating providers on how to bring spirituality into care in a culturally humble and responsible manner.

Digital stories with spiritual themes from those with lived experience were shown and very well-received, prior to break out groups discussing real life scenarios where spirituality came into clinical sessions. Participants were also invited to complete the *Spirituality Matters* assessment cards and reflect on their own assessment. Veronica Ochoa presented on her experience documenting spiritual interventions for billing purposes,

as well as various methods for conducting a spiritual assessment. Chase Montara presented on available resources on spirituality for clinicians.

It is very encouraging to have the opportunity to conduct spirituality trainings, an opportunity made possible by the work of Jei Africa and the Office of Diversity and Equity. Spirituality can be an important tool for recovery in the lives of those struggling with health challenges. The work of San Mateo County BHRS in this area has been recognized throughout the state and is an important force in making these tools available to our communities and also in training clinicians to be able to competently bring spirituality into the care of those who believe it is helpful. Visit www.smchealth.org/HEI for more info. ☺

- Spirituality Initiative

Photovoice Focuses on the Stigma Around Spirituality

Throughout history, storytelling has been a common way of communicating. Stories can transmit wisdom, open hearts and break down barriers. In doing so, storytelling can be healing for both the listener and the storyteller. In the *Photovoice* workshops, participants share their unique stories through photography and narrative.

The Spirituality Initiative hosted a *Photovoice* workshop in February. The topic explored was *“Stigma around Spirituality.”* Many people, both consumers and staff alike, may feel a certain discomfort when they consider sharing their personal, spiritual beliefs. As with all stigma, the stigma around spirituality can impact our journey toward our authentic selves. In this

workshop, we brought voice to these concerns in hopes of opening the door to healthy discussions around why our beliefs matter.

Participants discussed what it feels like to be accepted and/or rejected for their spiritual beliefs. They were given cameras and tasked with capturing photos that illustrated those feelings. Next, they wrote out a 150-word narrative to accompany their photos resulting in five completed exhibits. In the process, participants gained confidence in discussing spiritual beliefs in the context of their recovery. Ultimately, one of the goals for this project will be to display these and previous exhibits in order to facilitate a continued dialogue with providers, consumers, family members and

community about the importance of spirituality in wellness and recovery. Sample posters can be seen on page 3 & 8.

A thank you goes out to those who participated in and made this workshop possible, including Jei Africa and Kathy Reyes, from the Office of Diversity and Equity, as well as the workshop facilitators Jairo Wilches, Chase Montara and Melinda Parker.

For more information about *Photovoice*, contact Kathy Reyes, ekreyes@smcgov.org. For more information about the Spirituality Initiative, contact Chase Montara, cmontara@inbox.com. ☺

- Spirituality Initiative

Trainings

- **May 15**
Hearing Voices: Understanding the Voice-Hearing Experience (an experiential workshop).
- **May 20 & June 24**
Harm Reduction Coaching Sessions for Supervisors and Lead Staff (2 session series)
- **May 21**
Working Effectively with Interpreters in a Behavioral Health Setting
- **May 26**
Psychiatric Grand rounds Telepsychiatry, the New Frontier in Mental Health: How Technology is bringing psychiatrist to people in underserved areas
- **June 5**

Reflective Supervision Training

- **June 17**
Law and Ethics Training
- Visit the new training calendar for details (see link below).

Employee News

Congratulations

- **Jei Africa**, recipient of the California Psychological Association 2015 Distinguished Humanitarian Award, which honors an individual whose efforts have directly and significantly improved the quality of life for a broad range and large number of people.
- **Matt Boyle**, new BHRS Analyst II for AOD.

- **Sherri Burwell**, on her retirement after 20 years of service.
- **Aristo Coelho**, on his retirement
- **Cynthia Chatterjee**, Medication Assisted Treatment team, who was among the highest scorers on the ABAM certification exam.
- **Mary Taylor Fullerton**, now a supervisor for AOD.
- **Maggie Tapia**, selected as permanent Patient Services Supervisor at South County.

Employee Service Awards

10 Years

- **Elvira Gomez**, MIS
- **Walter Huguet**, Youth Services Center
- **Louvenia Jackson**, Canyon Oaks Youth

New Training Calendar: www.smcbhhsblog.org/bhrs-calendar-staff-and-provider-trainings/



Employee Spotlight



Toni DeMarco
Clinical Service Manager,
Youth Division

Hometown:
Joshua Tree, CA

Years at BHRS/SMC:
17 Years

What do you do?
Oversee youth teams working with the Juvenile Court System, work closely with Child & Family Services and Probation departments, and a number of

community organizations connected to those teams. I am a member of the Trauma Learning Collaborative; Site Coordinator for the SMC Neurosequential Model of Therapeutics Project; ASIST program trainer; and development of the Phoenix Garden Project.

What do you enjoy most about your job?

Being able to collaborate on so many levels, which impacts services and builds awareness regarding issues, for the youth and their families that we serve. Also being able to teach and train people from so many different departments and agencies, while developing new programs like NMT and the Phoenix Garden Project.

Most rewarding/memorable experience:

I have been very fortunate to have had many memorable experiences in this work. The most satisfying would have to be the implementation of our system's NMT Project and its continued expansion, which included being invited last June to present in Calgary at the NMT Symposium on how we are using NMT in a Public Health System. It has been an amazing process both personally and professionally.

Favorite hobbies/activities:

Gardening, spending time with my grandchildren and family, hanging out with our dogs, and bonfires at sunset in our new backyard with good friends.

"If I weren't in my current role, I'd be..."

A Landscape Designer/Permaculturist. ☺

Q-Tip for Quality - By Holly Severson RN, MSN

Next QIC Meeting:

Wednesday
 May 13, 2015
 10:00 am—Noon
 2000 Alameda de las
 Pulgas, Room 201,
 San Mateo

New Developments in Quality Management

Staffing Announcement:

We are happy to announce that the Quality Management (QM) team has two new staff members! These are Kathy Koeppen, LMFT and Marcy Fraser, RN. In addition, Jeanine Mealey was promoted to QM Manager.

New staff roles and specialties:

- Kathy Koeppen LMFT, Unit Chief, comes to us with a wealth of audit experience, including as a DHCS contracted auditor. She oversees the daily operations of the QM team. She is your go-to person for questions about clinical documentation, outpatient chart re-

view, Medi-Cal site certifications and contractor support.

- Marcy Fraser, RN, Extra-Help Nurse, is the lead QM-Medical Staff liaison and QM-AOD liaison.

We also have three new contractors who are performing Avatar audits in order to help BHRS better document our services and pass muster in future audits. All of these new clinicians bring a wealth of information from years of experience with other private and public behavioral health providers and we feel very fortunate to have found them all!

Credentialing Update:

California has recently made it easier for MFT's and LCSW's to renew their licens-

es and registrations. These clinicians can now go online using the BreEZe system to renew, which psychologists, nurses and doctors have already been able to do. Clinicians whose licenses or registrations lapse are not able to provide billable services that are dependent upon their license/registration, so of course this is a very serious responsibility for each clinician to accomplish on time. We are glad to see this new, streamlined procedure and believe it will help our staff and providers renew their licenses in a more timely way (see links below).

QM always appreciates any feedback or ideas you'd like to share with us. ☺

- MFT's/LCSW's (or any licensed person) learn about and register to renew: www.bbs.ca.gov/licensees/renewal_info.shtml
- Information for doctors, including a BreEZe link: www.mbc.ca.gov/Licensees/License_Renewal/Physicians_and_Surgeons.aspx
- Information for nurses, including a BreEZe link: www.rn.ca.gov/licensees/lic-renewal.shtml
- Information for Psychologists, including a BreEZe link: www.psychology.ca.gov/index.shtml

To subscribe to *Wellness Matters* or to view previous issues, visit: www.smchealth.org/wm (To subscribe, click the red envelope at the top of the page.)

Forward comments, suggestions or contributions for *Wellness Matters* to Diane Tom, Editor: DiTom@smcgov.org



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 San Mateo County Health System

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 Blog: www.smcbhblog.org
www.sanmateo.networkofcare.org/mh

Stand Up To Stigma

(Continued from page 1)

and just my life as a graduate"

*"Help stamp out stigma"
 "I am inspired by others'
 sharing their stories. The more people share, the more others will understand. I want to be a part of helping to stamp out stigma."*

Fourteen participants from around the county graduated the Academy and have joined the Speakers' Bureau. Many will be presenting their Digital Stories and personal experiences at events for May Mental Health Awareness Month, in addition to provider trainings on disability, smoking

cessation, Wellness Recovery Action Planning, harm-reduction, and suicide prevention, among others.

The Lived Experience Academies and Digital Storytelling workshops were supported by the enthusiastic participation of dedicated facilitators. Special thanks to Lee Harrison, Cindy Robbins-Roth, Renee Harris, Jairo Wilches, Holly Severson, Alan Cochran, Kathy Mackin, Katy Davis, Kathy Reyes, Marisol Solis, and Hiba AbuDamous for their hard work and dedication. In addition to the LEA efforts, the Office of Diversity and Equity is combatting stigma in other ways! We sent two LEA graduates to the 7th International Conference, "Together

Against Stigma: Each Mind Matters," provided a multi-session Anti-Stigma workshop to students at Skyline College, increased visibility and professional development of people with lived experience through the Health Ambassador Program, and educated teachers and community through Mental Health First Aid, and Youth Mental Health First Aid.

For more information on the Lived Experience Academy, you can contact Katy Davis at kdavis@smcgov.org or Kim Westrick at c_kwestrick@smcgov.org. ☺