Measure A Funded BHRS Programs

Background
San Mateo County Measure A funds Prevention and Early Intervention Services for Youth at Risk of Abuse, Trauma, and Mental Illness. The initiative is led by the Children and Youth System of Care (CYSOC) committee consisting of BHRS, HSA, Probation and the County Office of Education. CYSOC’s recommendations for prevention included funding the Parent Project to provide intensive parent training and support for addressing emotional health and other problems that come up for parents of adolescents and the Youth Mental Health First Aid to assist school personnel in early identification and intervention. Both these programs have been up and running since fiscal year 2013-14. Following is an update on these Measure A-funded programs including outcomes achieved to date, challenges and goals for the next two years.

The Parent Project®

The Parent Project® was created specifically for anyone who cares for a child or adolescent displaying challenging behavior(s). The goal is to decrease unhealthy or dangerous behavior(s) in children and strengthen the relationships within families in a culturally informed manner. It is a free, 12-week course that is offered in English and Spanish. The classes meet for three hours each week. Parents/caregivers learn parenting skills and get information about resources and other support available in their communities. Parents/caregivers learn and practice skills such as:

- appropriate ways to discipline
- preventing or stopping alcohol, drug and tobacco use
- improving communication skills
- improving grades and school attendance

Progress-to-date:
San Mateo County (SMC) Behavioral Health and Recovery Services’ (BHRS) Office of Diversity and Equity (ODE) began offering the Parent Project® courses in 2010. Between 2010 and September 2013, ODE graduated 11 courses with a graduation rate of 61% (~153 graduates). In September 2013, the ODE Parent Project® course was approved for Measure A funding and began partnering with the San Mateo County Office of Education (SMCOE) to provide Parent Project courses in schools. With support from Measure A, ODE has hosted 18 courses and graduated 339 parents with a graduation rate of 77%.
Our program has seen a continued gain in momentum with each round of courses. We initially focused on the basic organization and structure of the program to ensure fidelity and consistency. Additionally, we created outreach materials, and spent much time outreaching and informing the community and schools about this program. The Director of Safe and Supportive Schools from the SMCOE and designated school liaisons at each school have played a critical role in not only connecting with schools, but then be able to connect with parents and families once we got there.

In an effort to increase ongoing parent engagement, we created a closed Facebook group only for Parent Project graduates. This is a great way to disseminate information to graduates as well as help keep them connected to each other for continued support. As we move forward, we are looking to maintain the momentum of the program and identify additional schools that are interested in and have a need for this program. We hope to continue making a positive impact on our schools and communities by supporting healthy family relationships.

**Project Outcomes:**
Since September 2013, we have had 439 parents attend at least 1 Parent Project class. Of those 439 parents, 339 graduated giving us a graduation rate of 77%.

1000+ children live in the households of participants who have attended the BHRS Parent Project®.

ODE has created pretest, posttest administered to each parent participant at the end of the 12-week course and 6 month follow up surveys as a way to quantify program outcomes and implementation effectiveness, which results reveal significant increases in parenting skills, family relationships and positive child outcomes. The following are some highlights:

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Posttest (% increase)</th>
<th>6 month follow up (% increase)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Satisfaction with parent/child relationship</td>
<td>93%</td>
<td>100%</td>
</tr>
<tr>
<td>Satisfaction with parenting skills</td>
<td>96%</td>
<td>95%</td>
</tr>
<tr>
<td>Patient with child</td>
<td>93%</td>
<td>97%</td>
</tr>
<tr>
<td>Spend time with child</td>
<td>89%</td>
<td>88%</td>
</tr>
<tr>
<td>Feel supported as a parent</td>
<td>95%</td>
<td>97%</td>
</tr>
<tr>
<td>Involved in child’s life</td>
<td>96%</td>
<td>95%</td>
</tr>
<tr>
<td>Child attends school frequently</td>
<td>77%</td>
<td>87%</td>
</tr>
<tr>
<td>Child suspended less or not at all</td>
<td>93%*</td>
<td>95%</td>
</tr>
<tr>
<td>Child expelled less or not at all</td>
<td>100%**</td>
<td>97%</td>
</tr>
</tbody>
</table>

*of the parents (21%) who reported having a child suspended prior to participation in the Parent Project
**of the parents (5%) who reported having a child expelled prior to participation in the Parent Project

In addition,
- 95% of participants said some or all of their specific parenting needs were met by the program
- 98% of participants said that the BHRS Parent Project® changed the way they parent
- 99% of participants found the free food to be somewhat to very useful
- 97% of participants found the free childcare to be somewhat to very useful
- 100% of participants found the free materials and supplies to be somewhat to very useful
**Challenges**

1. **Consistent & Qualified Childcare:** We have contracted with Childcare Careers to provide childcare services; however, they have been able to meet less than 50% of our requests for childcare.

2. **Collection of Longitudinal Data:** 6-month data has posed a challenge. At this time we only have the capability to send paper copies of the data and are seeing a low return rate. Sending these forms can be time intensive and use a lot of materials (e.g. paper, postage). Additionally, we know that some of our parents are unable to read, and therefore are unable to understand the questionnaire. Lastly as parents move and/or their phone numbers change, many times we lose our abilities to reach them.

3. **School Liaison Variability:** Some of the schools that have asked to host the BHRS Parent Project® don’t have the capacity to provide a dedicated school liaison to assist with recruiting parents and attend at minimum the first and last course. This is challenging because we don’t have the initial connection with parents to enroll them, and if there are logistical challenges during the class there is no school person available immediately to help (e.g. locked doors, locked bathrooms, etc.).

4. **Director of Safe and Supportive Schools Vacancy:** Having this position vacant with the San Mateo County Office of Education (SMCOE) has been challenging because this role played a vital part in connecting our program with schools with the highest need.

5. **Addition of Stop Bullying Course for Youth:** We were able to secure additional funding during the spring to provide a “Stop Bullying” course for youth whose parents are enrolled in The Parent Project. We asked the schools to outreach to kids who they thought would benefit from this course and help secure a room for this presentation. We were only able to have the course at 3 out of 4 schools, and 2 of those had low attendance. Although all schools reported enthusiasm for the course, it appears that the school liaisons didn’t have the time or resources to adequately support the program.

**Next Steps and Objectives for 2015-2017**

1. **Childcare:** We have been able to increase our individual childcare contracts from 2 contracts to 3 contracts. Our goal is to have 6 individual contractors so that we can gain reliable and consistent childcare for our courses.

2. **Parent Support Groups:** To address the parents request for additional support, we created a closed Facebook for parents to get support from each other. Since its creation in May 2015, fifty parents have joined (~15% of graduated parents). This has allowed us to distribute information and resources, as well as give the parents an opportunity to stay connected and support each other. We will continue to find innovative and relevant ways to keep parents up to date with information and connected with each other.
3. **Longitudinal Data Completion:** We will utilize different methods to improve data collection and response rate including Facebook as a reminder for the first time, and email. We would like to see an option for data to be completed online through something like a Google Survey or Survey Monkey so that parents are able to complete the post survey online and send it electronically. We will also continue providing a stipend for all survey’s completed –as this has increased response rate.

4. **School Liaison Variability:** With what we’ve learned from our experience with varying levels of participation and dedication from liaisons, we will work to ensure that schools who host the BHRS Parent Project® have a liaison that is able to help as needed to ensure a successful course.

5. **Stop Bullying Component for Youth:** If the funding continues for this program we will work to solidify the curriculum based on the evaluations, help the schools fine-tune their outreach and ensure that the course is provided at each school.

6. **Data Collection and Results:** We have been able to begin collaborating with a graduate student to analyze our data and work towards publishing our data results. We have been able to modify our data collection slightly in order to strengthen our results. The goal is to maintain our outcomes and look into analyzing more variables as our pre-test currently has 46 questions, and our post-test has 69 questions. Additionally, we plan to increase the data collection on our guest speakers.

7. **Reaching High Risk Schools:** We will utilize data from kidsdata.org to identify high risk areas for suspension, expulsion, and truancy and work with the SMCOE and our partners to target both those identified schools, and schools identified as high risk by the SMCOE.

8. **Continued Learning:** All of our Parent Project graduates are automatically eligible to become BHRS Health Ambassador’s, so we will work to increase collaboration with other course coordinators to continue parent learning (e.g. MHFA, YMHFA, SFSM, etc.)

9. **Additional School Supports:** During our courses we have had the opportunity to discuss needs with school administrators. This has allowed SMC to assist schools in increasing supports for families and students that administrators have identified (e.g. BHRS unit chiefs presenting Same Day Assistance to their Community Service Area, assisting in organizing gang presentation to all students at a school, presentations on addiction treatment programs in the area).
Youth Mental Health First Aid (YMHFA)

Youth Mental Health First Aid USA is an 8 hour public education program which introduces participants to the unique risk factors and warning signs of mental health problems in adolescents, builds understanding of the importance of early intervention, and teaches individuals how to help an adolescent in crisis or experiencing a mental health challenge. Mental Health First Aid uses role-playing and simulations to demonstrate how to assess a mental health crisis; select interventions and provide initial help; and connect young people to professional, peer, social, and self-help care.

Progress-to-date:
In October 2013, San Mateo County Behavioral Health and Recovery Services (BHRS) Office of Diversity and Equity (ODE) partnered with the San Mateo County Office of Education (SMCOE) to begin offering YMHFA in schools, successfully training 917 individuals during 51 participant trainings countywide.

Several factors have contributed to the program’s documented success and growth including a strong program infrastructure, proactive outreach approach, an effective evaluation plan and capacity building efforts. Initial efforts were focused on program infrastructure development and engaging local schools and school districts. Activities have included creating an online registration system, developing marketing and other outreach materials (i.e. training flyers, brochures, handouts), and targeted outreach. ODE staff has outreached to every school district through phone and/or in-person visits and delivered hard copy flyers and brochures, sent training information via mail and email and attended regular district board meetings to provide presentations.

Additionally, SMCOE’s Director of Safe and Supportive Schools has played a key role in the program’s efficiency, notoriety and outreach efforts, working as a conduit to local school districts. The Director has worked closely with ODE staff to inform schools of this free training opportunity and continually brainstorm ways to engage school administrators and staff. The Director has linked ODE staff to rapport-building opportunities within the school systems. SMCOE oversees the online registration and collaborates with ODE staff to ensure registration efficiency for data collection purposes.

In May 2014, in an effort to expand the program’s instructor capacity, ODE contracted with the National Council for Behavioral Health to host a week-long YMHFA Instructor training. Among the 26 individuals certified to teach YMHFA were local school personnel, youth-serving personnel from a variety of local community-based organizations, community members and BHRS staff. ODE staff recruited, vetted and continuously supports instructors to effectively teach the 8-hour YMHFA certification course.

Lastly, ODE has worked directly with a small number of Superintendents to successfully train a large number of staff within their respective district. One such example is Jefferson Union High School District (JUHSD) where, Superintendent Thomas Minshew, has committed to training all 500 staff within his district. Over the past 18 months, 34% (170) of JUHSD staff have completed the YMHFA training. Mr. Minshew’s support has also led to an ongoing peer-focused YMHFA training for Juniors and Seniors enrolled in the Peer Resource class at Westmoor High School in Daly City with a total of 32 students trained to date.
**Project Outcomes:**
YMHFA has certified ~917 individuals to date. Individuals trained in YMHFA include school administrators, school administrative staff, educators, school health staff, school classified staff, law enforcement, parents, community-based organization staff, support groups, peers and other supportive adults within the school system and surrounding communities. School personnel from 94 schools and 20 school districts have been represented in the training sessions. To date, the YMHFA program has facilitated 51 participant sessions (including 29 school or school district-sponsored trainings) and one train-the-trainer session.

ODE has created application, pretest, posttest and evaluation forms, and 6 month follow up survey to quantify program outcomes and implementation effectiveness. End-of-class posttests and evaluations reveal significant increases in knowledge about mental health pertaining to youth and confidence levels to assist young people experiencing a mental health challenge or who may be in crisis.

Longitudinal data is collected to quantify the impact of YMHFA 6 months post training. Respondents are asked to indicate whether their level of confidence has changed in several areas since taking the training and whether they have used the skills learned. The program has recently incentivized participation of graduated individuals to assist in follow-up data collection via raffles resulting in an increase in respondents over the past several months and based on data collection, more than three quarters (79%) of respondents who report applying skills learned in YMHFA, report that they applied those skills with students. Continuing the support of YMHFA will allow us to show a clearer picture of the impact that YMHFA has on San Mateo County youth.

Following are participants reported increase in confidence in various outcomes including being able to:
- Recognize signs that a young person may be dealing with a mental health challenge or crisis.
- Reach out to a young person who may be dealing with a mental health challenge.
- Assist a young person in seeking professional help.
- Connect a young person with community, peer, and personal supports.
- Be aware of their own view/feelings about mental health problems in young people

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<tr>
<th>Outcome</th>
<th>Posttest (% increase)</th>
<th>6 month follow up (% increase)</th>
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<tbody>
<tr>
<td>Recognize signs</td>
<td>97%</td>
<td>92%</td>
</tr>
<tr>
<td>Reach out</td>
<td>97%</td>
<td>91%</td>
</tr>
<tr>
<td>Assist a young person</td>
<td>98.3%</td>
<td>90%</td>
</tr>
<tr>
<td>Connect a young person</td>
<td>97%</td>
<td>88%</td>
</tr>
<tr>
<td>Awareness of own views/feelings</td>
<td>97%</td>
<td>88%</td>
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Additionally, at 6 month follow up, more than three-quarters (77%) of respondents reported having been in a situation at least once since their participation in the course, in which YMHFA has been relevant. And of these:
- 97% report that they applied YMHFA
- 91% report that they felt they were effective in applying YMHFA

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1 All percentages from 6-month survey results are from data collected in FY 14-15 (N=98)
**Challenges:**

Overall, the unique partnership between SMCOE and ODE has allowed for creative collaboration and out-of-the-box thinking for implementing YMHFA in schools across the county. However, several challenges have been encountered contributing to less training than originally expected. There have been 51 complete 8-hour YMHFA sessions to-date versus 158 originally projected.

1. **Limited Professional Development Time Available for School Staff:** With limited professional development time available, many schools and school districts have prioritized other professional development needs (i.e. common core), resulting in fewer anticipated trainings. In attempts to accommodate time restrictions, schools have sent staff in pairs or single staff to “open” county-wide SMCOE-hosted trainings which historically have had the fewest registration rates. Other schools and school districts have requested information about the YMHFA curriculum to share during staff meetings. Typically ODE staff will share this information with school personnel in an effort to gain interest in taking the full course. Presentations like these have been given to different school groups including bus drivers from San Mateo Union High School District and school staff from Cabrillo Unified School District. This results in fewer staff being certified in YMHFA and ultimately, receiving partial presentation of the intended curriculum.

2. **Compensation for School Staff:** Schools and school districts have limited resources to pay staff for attending trainings outside of regular work hours. The YMHFA training calls for participants to attend a minimum of 8-hours in order to be certified and has worked best when taught in a full 8-hour day, 8:00 am to 4:30 pm which conflicts with school personnel typically work schedule of 8:00 am to 3:30 pm. Schools that have been able to compensate staff for the extra time, have successfully hosted trainings on-site with little-to-no push back from staff regarding union agreements. On the other hand, trainings where staff was not compensated for additional time, experienced low completion rates and an inability to train certain staff (i.e. teachers). Similarly, many schools and school districts have been unable to pay for substitutes to allow teachers and paraprofessionals to attend the full-day training.

3. **Leadership Buy-in from Schools:** Gaining leadership buy-in from school administrators is critical to offer YMHFA in schools and reach our intended audience. While reception is generally positive and the course is regarded as much needed, many schools and school districts have been unable to commit to training staff. School and school districts with administrator backing have, by far, trained the largest number of staff (e.g. JUHSD). Additionally, administrator support allows for fewer logistical issues when planning and implementing trainings because communication is streamlined with designated district-level and on-site contacts.
**Next Steps and Objectives for 2015-2017:**

According to the County of San Mateo Adolescent Report 2014-15, nearly 70% of San Mateo County youth respondents reported being nervous, depressed or emotionally stressed in the past month. 38% of female and 23% of male respondents reported having suicidal thoughts. Additionally, San Mateo County youth experience higher rates of hospitalizations for self-injury compared to both state and national rates, 56.2 per 100,000 versus 40.1 and 45.9 per 100,000, respectively (www.kidsdata.org). Both local and national trends tell us that there is a growing need for continued and additional early intervention strategies such as YMHFA for youth.

San Mateo County is home to over 100,000 youth age 5-17. And, although YMHFA in San Mateo County has trained over 900 youth-serving adults, there are still thousands of school staff and other community gatekeepers who interact daily with youth and have not been trained to recognize signs of common behavioral health issues in youth. Many schools are challenged with alarming student-to-school counselor ratios. San Mateo County schools average one school counselor per 827 students and one school psychologist per 1,399 students (www.kidsdata.org). The American School Counselor Association recommends student-to-school counselor ratio of 250:1. Ideally, a reduction in the existing ratio in San Mateo County schools is needed. Training additional school staff and other gatekeepers within the school community will not solve the alarming ratio issue but does create a safety net and help bridge this critical gap.

**SMCOE and ODE have agreed to set a goal of training 15% of school staff** at each school district over the next two years and continue training other supportive individuals within the school community (i.e. parents, peers).

The following strategies are recommended in order to reach these goals and address the challenges identified above.

1. Continue to work with SMCOE to connect with Superintendents and other administrators to **gain their buy-in and support** in order to overcome funding and time challenges.
2. Continue to work with School Wellness Coordinators, school mental health staff and other school-based allies to identify opportunities to **provide on-site trainings**.
3. **Consider mini-grants to districts** to incentivize and compensate teachers and other school personnel attend the full 8-hour training.
4. Continue to **offer “open” or drop-in training sessions** and work with COE to inform schools about these trainings.
5. Continue to provide **trainings for other gatekeepers** within the school community including, peers, parents, after school program staff, law enforcement, and others.

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2 This target of 15% has replaced the original target of 158 trainings which included all public schools in San Mateo (K-12). YMHFA has found to be most relevant with older peers and adults who interact with youth aged 12-24 and is therefore most applicable to middle, high school and community college personnel.