

Innovation Work Plan Narrative

Date: December 16, 2011

County: Merced County

Work Plan #: 2

Work Plan Name: Strengthening Families-Juvenile Behavioral Health Court

**Purpose of Proposed Innovation Project (check all that apply)**

- INCREASE ACCESS TO UNDERSERVED GROUPS  
 INCREASE THE QUALITY OF SERVICES, INCLUDING BETTER OUTCOMES  
 PROMOTE INTERAGENCY COLLABORATION  
 INCREASE ACCESS TO SERVICES

Briefly explain the reason for selecting the above purpose(s).

"Significant adversity early in life can damage the architecture of the developing brain and increase the likelihood of significant mental health problems that may emerge either early or years later." This is a finding in Harvard's Center of the Developing Child working paper, "Mental Health Problems in Early Childhood Can Impair Learning and Behavior for Life." The report continues....

"Life circumstances associated with family stress, such as persistence of poverty, threatening neighborhoods, and very poor child care conditions, elevate the risk of serious mental health problems and undermine healthy functioning in the early years. Early childhood adversity of this kind also increases the risk of adult health and mental health problems because of its enduring effects on the body and brain development. Young children who experience recurrent abuse or chronic neglect, regularly witness domestic violence, or live in homes permeated by parental mental health or substance abuse problems are particularly vulnerable....

All of these situations are stressful for children. Persistent activation of biological stress response systems leads to abnormal levels of stress hormones that have the capacity to damage brain architecture if they do not normalize. In the absence of buffering protection of supportive relationships, these hormone levels can remain out of balance. Known as toxic stress, this condition literally interferes with developing brain circuits, and poses a serious threat to young children, not only because it undermines their emotional well-being, but also because it can impair a wider range of developmental outcomes including early learning, exploration and curiosity, school readiness, and later school achievement."

The Juvenile Behavioral Health Court will promote interagency collaboration and increase the quality of services, including better outcomes for juveniles who suffer from a serious mental health illness. The Behavioral Health Court will include collaboration between the Judge of the Superior Court-Juvenile Division, Merced County District Attorney, Merced County Public Defender, Merced County Probation, Merced County

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Mental Health, Child Protective Services and School Liaison.

The Juvenile Behavioral Health Court will focus on the quality, the effectiveness and cultural responsiveness of the services by collaborating with a team who understands and utilizes the strength of the individual's culture when providing services to juveniles and their families. The collaborative team will include an expert trainer to promote culturally responsive best practices for care and will be linked to the Strengthening Families Project in the community. The Juvenile Behavioral Health Court will challenge the conventional paradigm of separate and distinct micro-services (Mental Health, Probation, Child Protective Services, and Education etc.) and macro services (Community Organizing, Social Justice, Public Mobilization, and Public Education efforts) by building community capacity through a collaboration fusing mutual learning and a shared vision.

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**Project Description**

Describe the Innovation, the issue it addresses and the expected outcome, i.e. how the Innovation project may create positive change. Include a statement of how the Innovation project supports and is consistent with the General Standards identified in the MHSAs and Title 9, CCR, section 3320. (suggested length – one page)

According to the National Center for Youth Law website between 50 and 90 percent of youth in juvenile detention facilities in California suffer from some form of mental illness. The website also noted a congressional study which concluded that about 2,000 youth are incarcerated every day simply because community mental health services are unavailable. In 2007, 16 youth were murdered each day in this country. And for every person who gets shot and dies, another 4 get shot and survive. In 2009, homicide was the leading cause of death among African-American youth; the second leading cause of death among Chicano/Latinos; and the third leading cause of death among Natives. For youth between the ages of 15-24, the homicide death rate is more than 19 times higher for young Black men than young white men. (Center for Disease Control and Prevention 2006; 2009). California public schools produce 1 drop-out for every 3 graduates. Compared to high school graduates, research shows that over a lifetime dropouts have increased dependence on public assistance, lower earnings, poorer health, and higher rates of unemployment, mortality, criminal behavior, and incarceration (***California Dropout Research Project***).

Youth who are involved with the juvenile justice system have substantially higher rates of mental health disorders than children in the general population, and they may have rates of disorder comparable to those among youth being treated in the mental health system. The prevalence of mental disorders among youth in the general population is estimated to be about 22 percent; the prevalence rate for youth in the juvenile justice system is as high as 60 percent. Research indicates that from one-quarter to one-third of incarcerated youth have anxiety or mood disorder diagnoses,

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nearly half of incarcerated girls meet criteria for post-traumatic stress disorder (PTSD), and up to 19 percent of incarcerated youth may be suicidal.

In addition, up to two-thirds of children who have mental illnesses and are involved with the juvenile justice system have co-occurring substance abuse disorders, making their diagnosis and treatment needs more complex. While more research needs to be conducted, we already know that many programs are effective in treating youth who have mental health care needs in the juvenile justice system, reducing recidivism and deterring young people from future juvenile justice involvement.

The vision of the Juvenile Behavioral Health Court is to implement innovative strategies to serve youth in our community who have interactions with the legal system due to mental health issues. In the past, Merced County youth that were placed in the juvenile justice system who were experiencing a mental health issue would be placed on a caseload that was not structured to serve their mental health needs. The overall design of the Juvenile Behavioral Health Project would include a full spectrum of integrated services from prevention and early intervention strategies combined with screening and treatment oriented services.

## **PROPOSED LEARNING MODEL**

### **Mental Health First Aid**

One in four Americans lives with a mental health problem each year. Yet, far too many – up to two-thirds – go without treatment. Just as CPR training helps a layperson without medical training assist an individual following a heart attack, Mental Health First Aid training helps a layperson assist someone experiencing a mental health crisis.

### **Cognitive Behavioral Approaches**

Cognitive-behavioral approaches have been shown to be particularly effective with youth in the juvenile justice system. The cognitive-behavioral approach is based on the theory that thoughts, beliefs and attitudes determine emotion and behavior. That is, the way we perceive or evaluate a situation influences our emotional and behavioral response. Cognitive behavioral therapy is a didactic approach that involves teaching youth about the thought-emotion-behavior link and working with them to modify their thinking patterns in a way that will lead to improved behavior when confronted with challenging situations. The cognitive-behavioral approach is effective for youth in the juvenile justice system because it is highly structured and focuses on the triggers that may lead to disruptive or aggressive behavior. Cognitive-behavioral approaches address poor interpersonal and problem-solving skills by teaching social skills, coping skills, anger management, self-control or social responsibility through individual or group counseling for non-institutionalized offenders, cognitive-behavioral approaches have been found to reduce recidivism by as much as 50 percent.

### **Narrative Therapy**

Narrative therapy consists of understanding the stories or themes that have shaped a person's life. Out of all the experiences a person has lived, what has held the most

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meaning? What choices, intentions, relationships have been most important? Narrative therapy proposes that only those experiences which are part of a larger story will have significant impact on a person's lived experience. Therefore, narrative therapy focuses on building the plot which connects a person's life together.

**El Joven Noble (The Noble Young Man)**

El Joven Noble is a comprehensive indigenous based, youth leadership development program that supports and guides young men through their manhood "rites of passage" process while focusing on the prevention of substance abuse, teen pregnancy, relationship violence, gang violence and school failure.

**Xinachtli**

Xinachtli is a comprehensive indigenous based, youth leadership development program that supports and guides young women through their female "rites of passage" process while focusing on the prevention of substance abuse, teen pregnancy, relationship violence, gang violence and school failure.

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**Contribution to Learning**

Describe how the Innovation project is expected to contribute to learning, including whether it introduces new mental health practices/approaches, changes existing ones, or introduces new applications or practices/approaches that have been successful in non-mental health contexts. (suggested length - one page)

Merced County will further test the benefits of creating a learning model for youth, families and Behavioral Health Team in the stages of development, cognitive behavioral approaches, narrative therapy approaches, Mental Health First Aid, and culturally specific approaches. The program will be an adopted program from the ideal of drug courts, domestic violence courts and community courts. It will contribute to learning because it will test out the benefits of developing a learning model that is inclusive of cultural practices to promote well being and to strengthen families. The following strategies will be utilized:

- Knowledge and preservation of culture and history
- Cultural pride
- Artistic development
- Impact on personal well being
- Community involvement
- Teamwork/Collaboration (Collective energy)

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The program will implement and adhere to the following:

**CORE VALUES**

**Acknowledgement**

**Purpose**

**Values**

**Safety and Security**

**Dignity**

**Respect**

**Values**

**Trust**

The project will address the underlying problems that contribute to criminal behavior and reduce the overrepresentation of people with mental illness in the criminal justice system. The **Behavioral Health Court Project** will focus on youth residing in Merced County from age 12 to 17. The overall goal is to develop a collaborative team who is culturally responsive and trained in identifying the signs and symptoms of mental illness. This collaborative team will be linked to the community partners implementing prevention and early intervention programs and to the Strengthen Families Innovation Project in the community. To build capacity in the community providing education and tools to youth and families on developmental growth and stages of life transition to improve community health and to improve prevention and early intervention in families.

The expert trainer Jerry Tello and the National Compadres Network will play an important role in the contribution to learning by working with the collaborative team and youth and families by developing training that is expected to evolve and develop with ongoing community and family input. The training will improve Merced County Cultural Responsiveness for working with underserved groups, will provide cross cultural learning from the parents perspective, the child's perspective and the communities perspective. The expert trainer will assist the families in understanding the developmental milestones and how they impact healthy growth. They will assist and identify the challenges, the benefits and the contribution to each cultures understanding of life transitions and developmental milestones. The training will also inspire hope and recovery to the community and the people within the community.

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**Timeline**

Outline the timeframe within which the Innovation project will operate, including communicating results and lessons learned. Explain how the proposed timeframe will allow sufficient time for learning and will provide the opportunity to assess the feasibility of replication. (suggested length - one page)

Implementation/Completion Dates: Feb 2012-Feb 2015  
MM/YY – MM/YY

<b><u>Implementation /Completion dates:</u></b>	MM/YY – MM/YY
Develop referral forms, screening/assessment forms, evaluation methodology, participant and staff surveys and measurement tools	<b><u>January 2012</u></b>
Develop expansion contract with expert trainer Jerry Tello (Learning Model)	<b><u>January 2012</u></b>
Begin recruitment for Mental Health Clinician for Behavioral Health Court	<b><u>January 2012</u></b>
Have expert trainer meet with Behavioral Health Court Team	<b><u>January 2012</u></b>
Begin Program Implementation	<b><u>February 2012</u></b>
Review First Round Evaluations and Performance Indicators Make Recommendations and changes	<b><u>February 2013</u></b>
Review Second Round Evaluations and Performance Indicators Make Recommendations and changes	<b><u>February 2014</u></b>
Make Recommendations and changes	<b><u>August 2014</u></b>
Behavioral Health Celebrations	<b><u>December 2014</u></b>
Evaluate and Communicate Final Results and Lessons Learned	<b><u>January 2015</u></b>

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Share results with stakeholders at various meetings	<u><b>February 2015</b></u>
Final Training Component (Expert trainer, Clinicians, Family Members, Staff, Community members etc.	<u><b>February 2015</b></u>

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**Project Measurement**

Describe how the project will be reviewed and assessed and how the County will include the perspectives of stakeholders in the review and assessment.

The project will measure the results of the increased quality of services, including better outcomes and interagency collaboration.

Will juvenile offenders who are mentally ill respond to the interventions of the Behavioral Health Court improving quality of their life?

Is there a positive impact on juveniles receiving preventative interventions through a Behavioral Health Court with a focus on cultural pride teamwork and collaboration?

Outcome measures will focus on the impact of preventative strategies implemented by Behavioral Health Court will focus

- People currently unserved will be served
- People will gain access to other services
- Increased knowledge of developmental milestones
- Increased confidence in parenting
- Decrease parental stress
- Increase perceived social support
- Increase community education and awareness
- Increase community support systems
- Reduce the stigma of mental services

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System Level Outcomes

- Importance of Prevention and Early intervention
- Reducing stigma and discrimination
- To strengthen and improve the collaboration between service providers and community partners.

Personal level Outcomes

- People will have increased developmental milestones tools and information to intervene earlier
- Improve family relationships
- Increase improved community health and safety
- Improve nurturing and bonding in family
- To enhance and inspire hope
- To increase cross cultural knowledge

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**Leveraging Resources (if applicable)**

Provide a list of resources expected to be leveraged, if applicable.

DRAFT