PREVENTION AND EARLY INTERVENTION

AGENDA

- Welcome & Introductions, Goals for meeting
  - Frank Warren, SLOBHD
  - Nestor Veloz-Passalacqua, SLOBHD
- PEI Review
- PEI Programs
- PEI State Vision
  - SB 1004
- PEI Budget
- PEI Presentation
  - LGBTQ+ Needs Assessment
- Conclusion

PEI

- Regulations promulgated in October 2015
- PEI is 19% of the county's MHSA allocation
- At least 50% of county's PEI expenditures are delivered to children and youth
  - Our County is well above the 50% (RER has the percentage)
- Counties report to the State their PEI Program and Evaluation Report by June 30th for the previous FY
  - We report to the State in December of every year
- Demographics and Referral and Screening tools have been put in place

PEI Programs

WORK PLAN I

- Prevention Program
  - Positive Development
  - Family Education, Training, and Support
  - Middle School Comprehensive Program
  - In-Home Parent Educator
  - Cuesta College Successful Launch

PEI Programs

WORK PLAN II

- Early Intervention Program
  - Community Based Therapeutic Services
  - Integrated Community Wellness Advocates

WORK PLAN III

- Outreach for Increasing Recognition of Early Signs of Mental Illness
  - Perinatal Mood Anxiety Disorder (PMAD)

PEI Programs

WORK PLAN IV

- Access and Linkage to Treatment Program
  - Older Adults Mental Health Initiative

WORK PLAN V

- Stigma and Discrimination Reduction Program
  - Social Marketing Strategy – Community Outreach & Engagement
  - College Wellness Program

PEI Programs

WORK PLAN VI

- Improve Timely Access to Services for Underserved Populations Program
  - Veterans Outreach Program

WORK PLAN VII

- Suicide Prevention Program
  - Suicide Prevention Coordinator

PEI State Information

- SB 1004
  - Creates a more focused approach for PEI

  - On or before January 1, 2020 the OAC shall establish priorities for the use of PEI funds. These priorities include:

    - **Childhood trauma prevention and early intervention**
    - **Early psychosis and mood detection**
    - **Youth outreach and engagement targeting secondary schools**
    - **Older adults**

PEI Budget

- FY 19-20
  - $150k of additional funding available for new or expansion of current programs.
- FY 19-20 Cuesta College Successful Launch savings
  - $102k

- **Total Estimate FY 19-20:**
  - **$196,000**

- TMHA – Integrated Community Wellness
- CFS – Family Education, Training, and Support
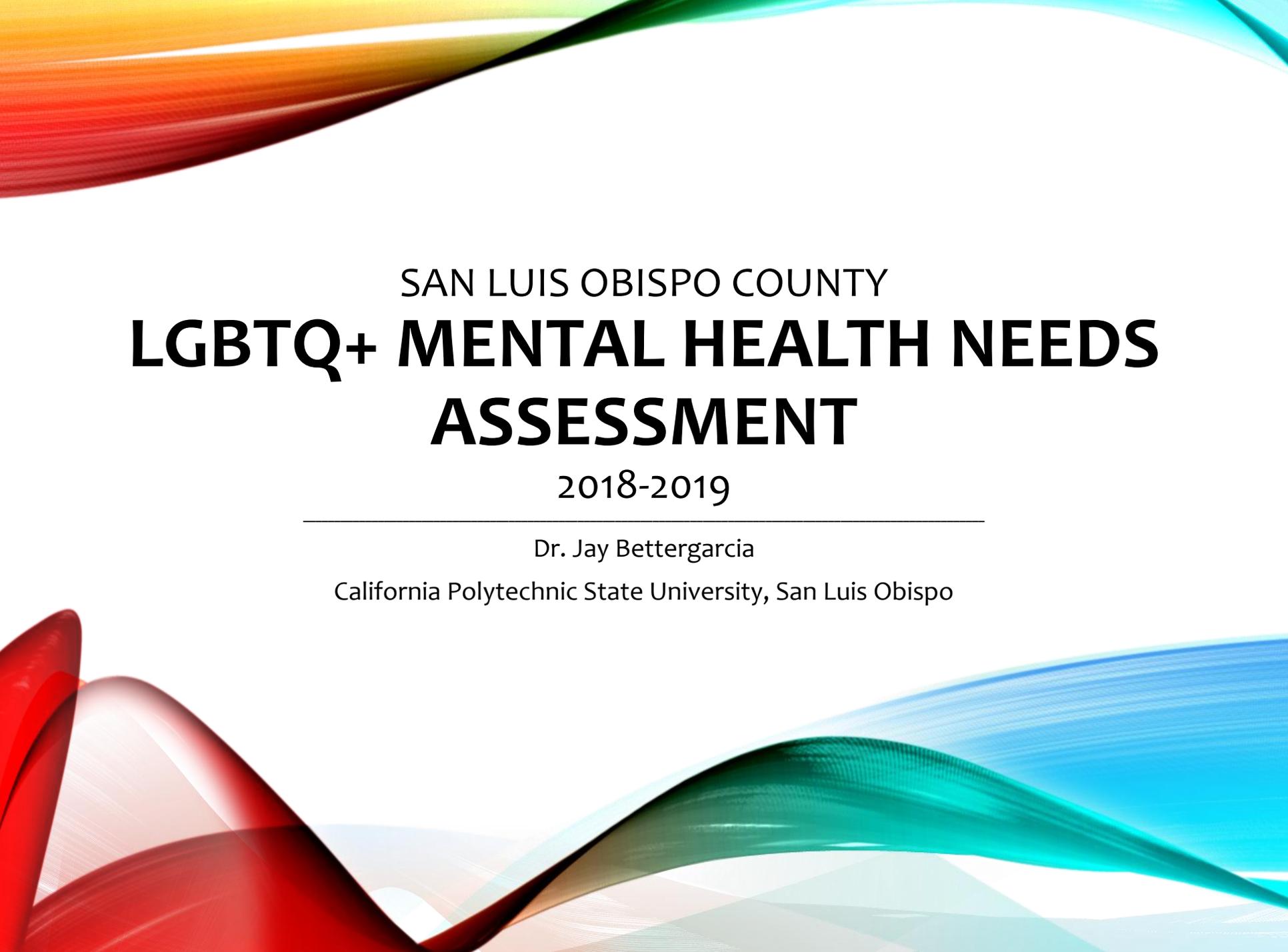
SAN LUIS OBISPO COUNTY

LGBTQ+ MENTAL HEALTH NEEDS ASSESSMENT

2018-2019

_____

Dr. Jay Bettergarcia

California Polytechnic State University, San Luis Obispo

OVERVIEW

Queer Community Action, Research, Education & Support

• Goals of QCARES to use research to facilitate policy, action, and change

• Needs assessment report is not the result (not the output)

• Report is the starting point for next steps (this is the input)

METHOD

- Mixed-method LGBTQ+ mental health needs assessment study included an online survey and six focus groups held across San Luis Obispo County.

- Participants included:
  - LGBTQ+ youth (14-17 years old) and adults (18+ years old)
  - San Luis Obispo County residents (some from Santa Maria)

- Data collection occurred between Spring of 2018 and Spring of 2019.

DATA COLLECTION

Quantitative Survey (n = 438)
- Demographics
- Experiences
- Access, barriers, & service needs
- Psychological distress
- Alcohol and substance use
- Suicidality
- Community connectedness
- Minority stress and discrimination
- Internalized stigma

Qualitative Focus Groups (n = 34)
The six focus groups included:
- Lesbian women
- Gay men
- Bisexual, pansexual, queer, and asexual adults
- Transgender and nonbinary adults
- LGBTQ+ Adults
- LGBTQ+ Youth (14-17 years old)

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DEMOGRAPHICS: AGE

Age in Years
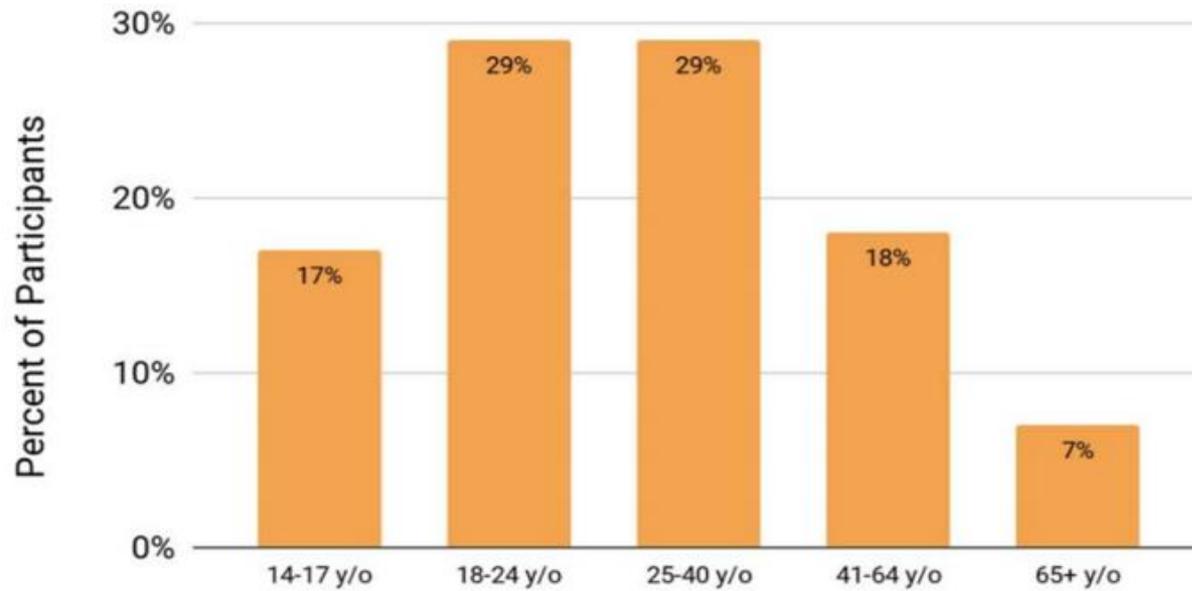
Note: n = 299

DEMOGRAPHICS: GENDER IDENTITY

Gender Identity
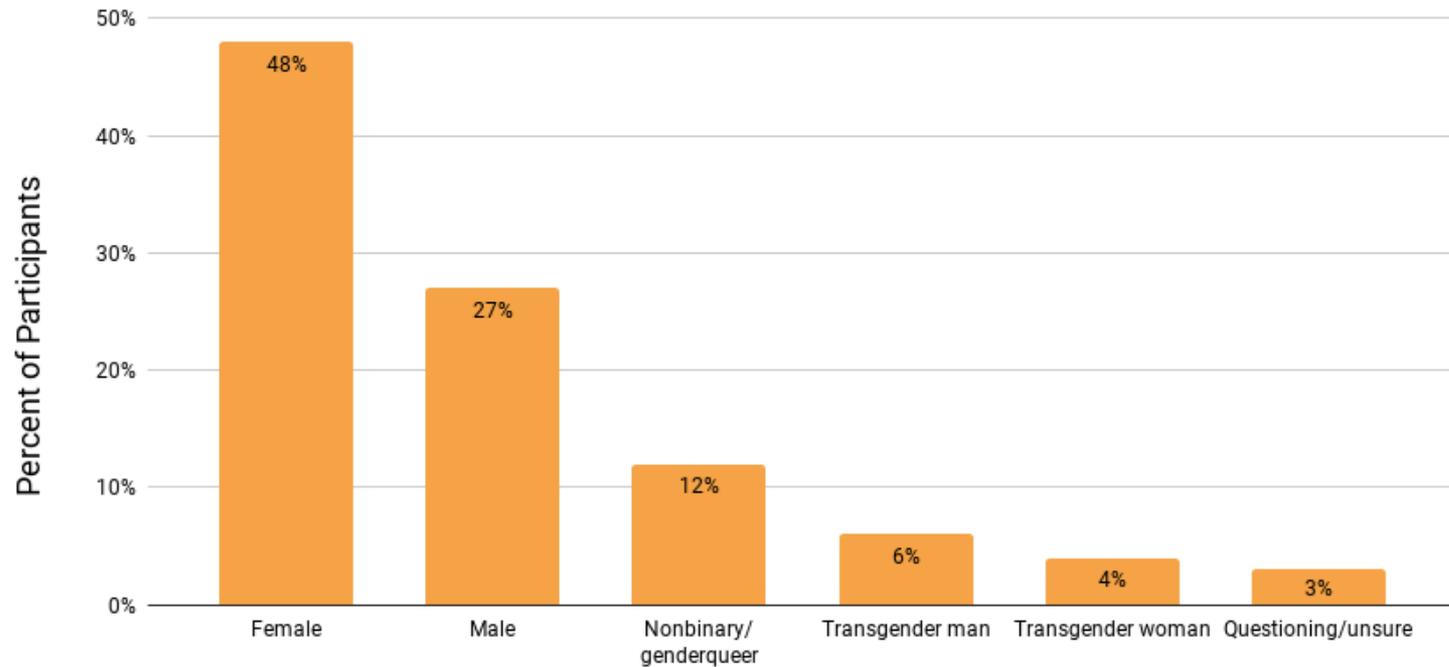
Note: *n* = 436

Sexual Orientation
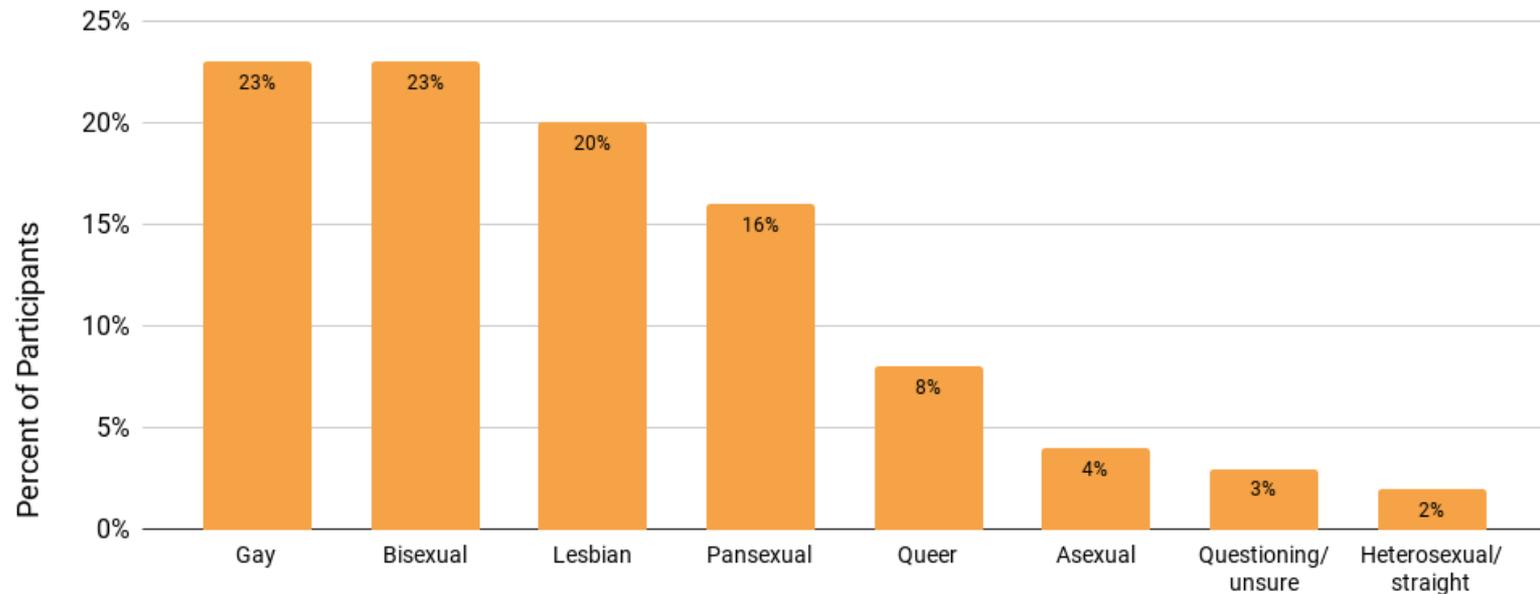
Note: *n* = 437

RACE & ETHNICITY

20%
selected more than one
option

Table 1a: Racial and Ethnic Identity Demographics

Racial Identity (select all that apply)	Approximate %
Middle Eastern/North African	2% ($n = 5$)
African American/African/Black	2% ($n = 6$)
A racial/ethnic identity not listed above (other)	2% ($n = 7$)
Native Hawaiian/Pacific Islander	2% ($n = 8$)
Native American/Alaska Native	6% ($n = 21$)
Asian	8% ($n = 26$)
Hispanic/Latinx (Latino)	19% ($n = 63$)
White/Caucasian	85% ($n = 276$)

Note: $n = 324$

Table 1b: Racial and Ethnic Identity – Hispanic or Latinx (Latino)

Hispanic or Latinx (Latino) Identity	Approximate %
Mexican, Mexican-American, or Chicanx (Chicano)	71% ($n = 45$)
South American	13% ($n = 8$)
Other	11% ($n = 7$)
Caribbean	3% ($n = 2$)
Central American	2% ($n = 1$)

Note: $n = 63$

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RESULTS:
ONLINE SURVEY

EXPERIENCES:
BARRIERS TO SEEKING SERVICES

■ Always a barrier ■ Sometimes a barrier

Did not know how to find LGBTQ competent provider — 29% | 39% **68%**

Can't afford services I want or need — 26% | 51%

Cannot find provider I am comfortable with who is also LGBTQ knowledgeable — 26% | 36% **62%**

Wait time too long — 24% | 43%

Concerned my provider would not be supportive of my LGBTQ identity or behavior — 21% | 36% **57%**

Ashamed to seek services — 19% | 36%

Had harmful or traumatic experiences in past with mental health services — 19% | 27%

No LGBTQ knowledgeable mental health services in my neighborhood — 16% | 44% **60%**

0%   20%   40%   60%   80%

Percent of Participants

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EXPERIENCES: ACCESS TO SERVICES

Any experiences with mental health services in SLO County?	Approximate %
Yes	55% (*n* = 238)
No	45% (*n* = 196)

Note: *n* = 434

Reasons Why Participants Have Not Accessed Services in SLO County	Approximate %
Unsure what services are available	48% (*n* = 60)
Uncomfortable seeking services (unspecified reason)	35% (*n* = 44)
Couldn't afford services	29% (*n* = 36)
Uncomfortable seeking services because of LGBTQ+ identity	15% (*n* = 18)
No insurance	10% (*n* = 12)

Note: *n* = 124

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General Experiences with Current or Past Mental Health Providers		
Participants responding *agree* or *strongly agree* to the following statements	**Approximate %**	
	Transgender/ nonbinary	LGBQ+
I assumed that my health care provider was against homosexuality and/ or gender identity noncomformity.	19% (*n* = 13)	14% (*n* = 28)
My mental health care provider made distinct homophobic or transphobic remarks.	9% (*n* = 6)	4% (*n* = 8)
The provider is open minded and nonjudgmental of LGBTQ+ people.	61% (*n* = 42)	67% (*n* = 134)
The provider is aware and educated about LGBTQ+ people.	42% (*n* = 29)	51% (*n* = 102)
I have a choice of having an LGBTQ+ provider.	20% (*n* = 14)	22% (*n* = 43)
The provider does not assume that I'm heterosexual or straight and/ or cisgender.	28% (*n* = 19)	32% (*n* = 63)

Note: Total transgender/nonbinary participants (*n* = 68-72) and total LGBQ+ participants (*n* = 193-206)

What support services are most needed to better serve the LGBTQ+ community?

Legend: High need, Moderate need

- LGBTQ-focused sex education: 75% High need, 17% Moderate need — 92%
- Services for people without insurance: 70% High need, 22% Moderate need — 92%
- Transgender-specific services: 70% High need, 24% Moderate need — 84%
- Low-income services: 70% High need, 22% Moderate need — 92%
- LGBTQ-affirming mental health: 67% High need, 29% Moderate need — 96%
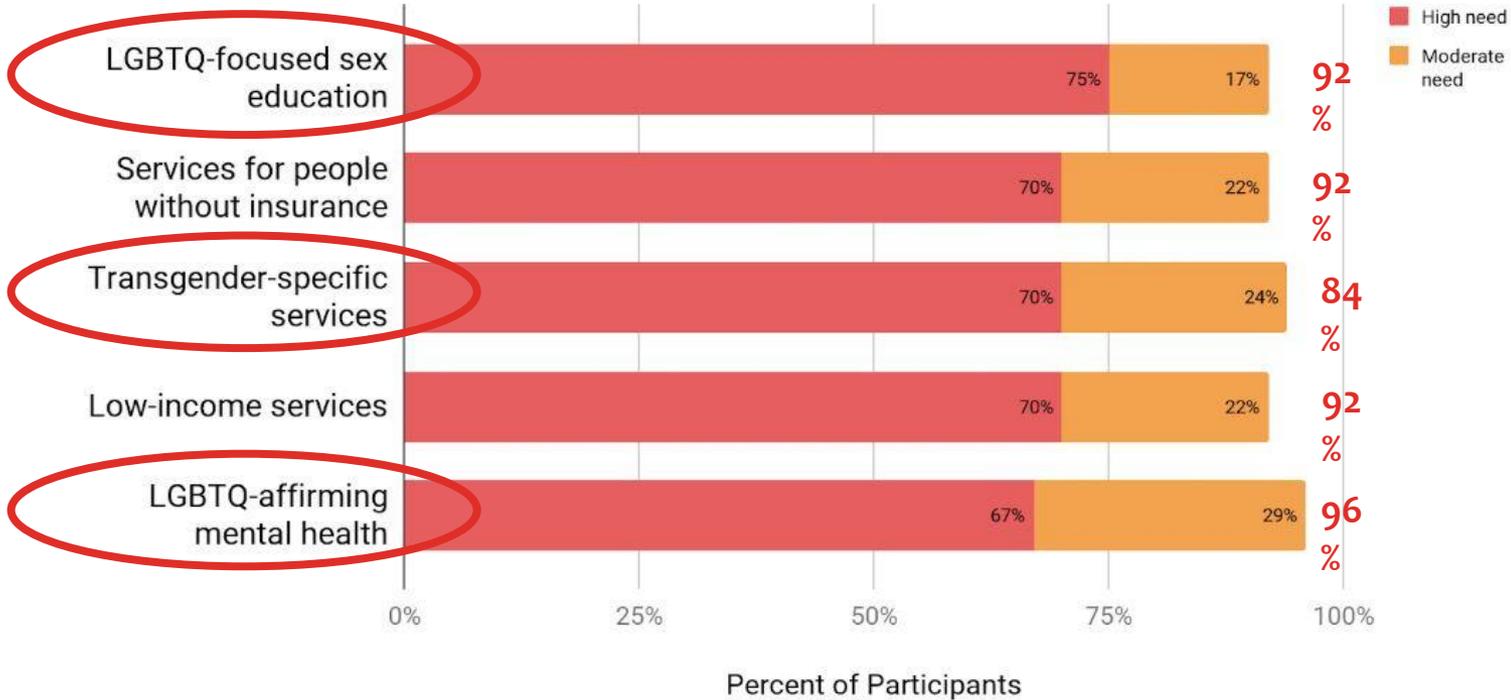
Percent of Participants

Percent of participants who felt _____ most of the time or all the time in the past 30 days		
Participants responding *most of the time* or *all of the time* to the following statements	Approximate %	
	Transgender/ nonbinary	LGBQ+
Nervous?	59% ($n = 53$)	38% ($n = 128$)
Hopeless?	23% ($n = 21$)	15% ($n = 51$)
Restless or fidgety?	48% ($n = 43$)	35% ($n = 120$)
So depressed that nothing could cheer you up?	24% ($n = 22$)	14% ($n = 47$)
That everything was an effort?	53% ($n = 47$)	30% ($n = 101$)
Worthless?	30% ($n = 27$)	17% ($n = 60$)

Note: Total transgender/nonbinary participants ($n = 89$-90) and total LGBQ+ participants ($n = 340$-343)

SEVERITY OF DISTRESS
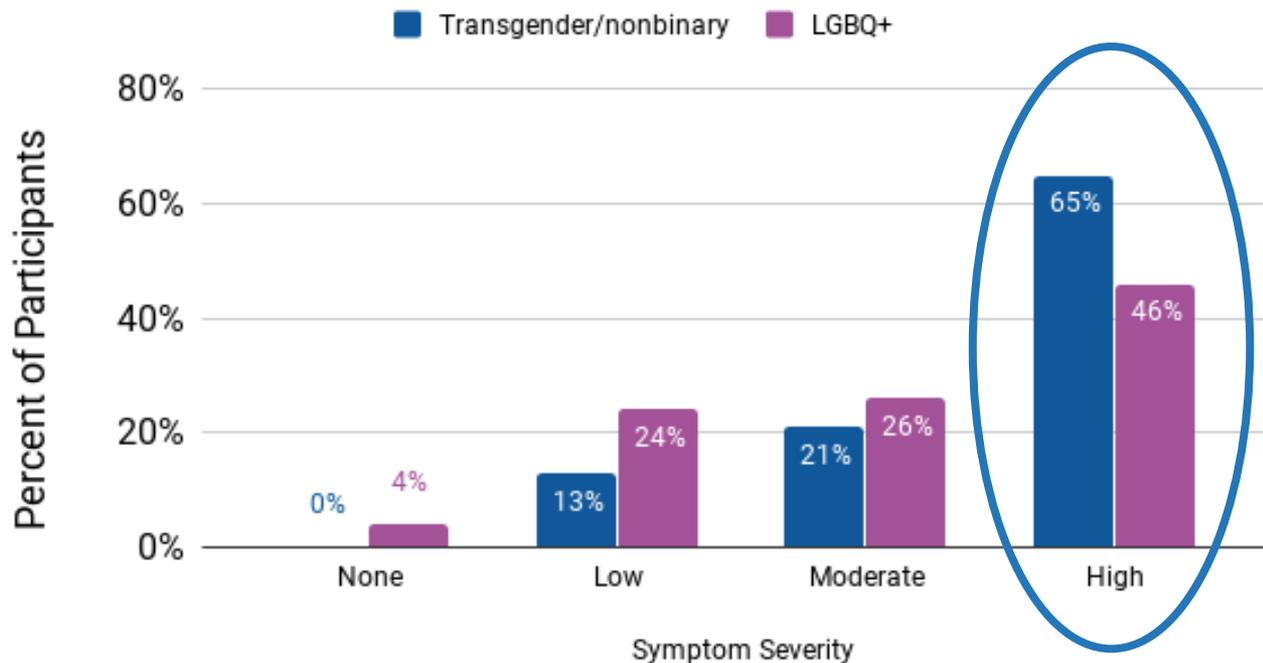
Note: Total transgender/nonbinary participants (n = 89) and total LGBQ+ participants (n = 329)

CAUSED BY LGBTQ+ IDENTITY

During the past 30 days how often has your gender identity or sexual orientation been the cause of these feelings?		
Response options	**Approximate %**	
	Transgender/ nonbinary	LGBQ+
Not at all	26% (n = 23)	44% (n = 146)
Several days	53% (n = 48)	46% (n = 151)
More than half the days	11% (n = 10)	7% (n = 23)
Nearly every day	10% (n = 9)	4% (n = 12)

Note: Total transgender/nonbinary participants (n = 90) and total LGBQ+ participants (n = 332)

DISTRESS: SUICIDALITY BY AGE

Legend: Ages 14-17, Ages 18-24, Ages 25-40, Ages 41-64, Ages 65+

52% of youth

92% of youth

50% of youth

29% of youth

35% of youth
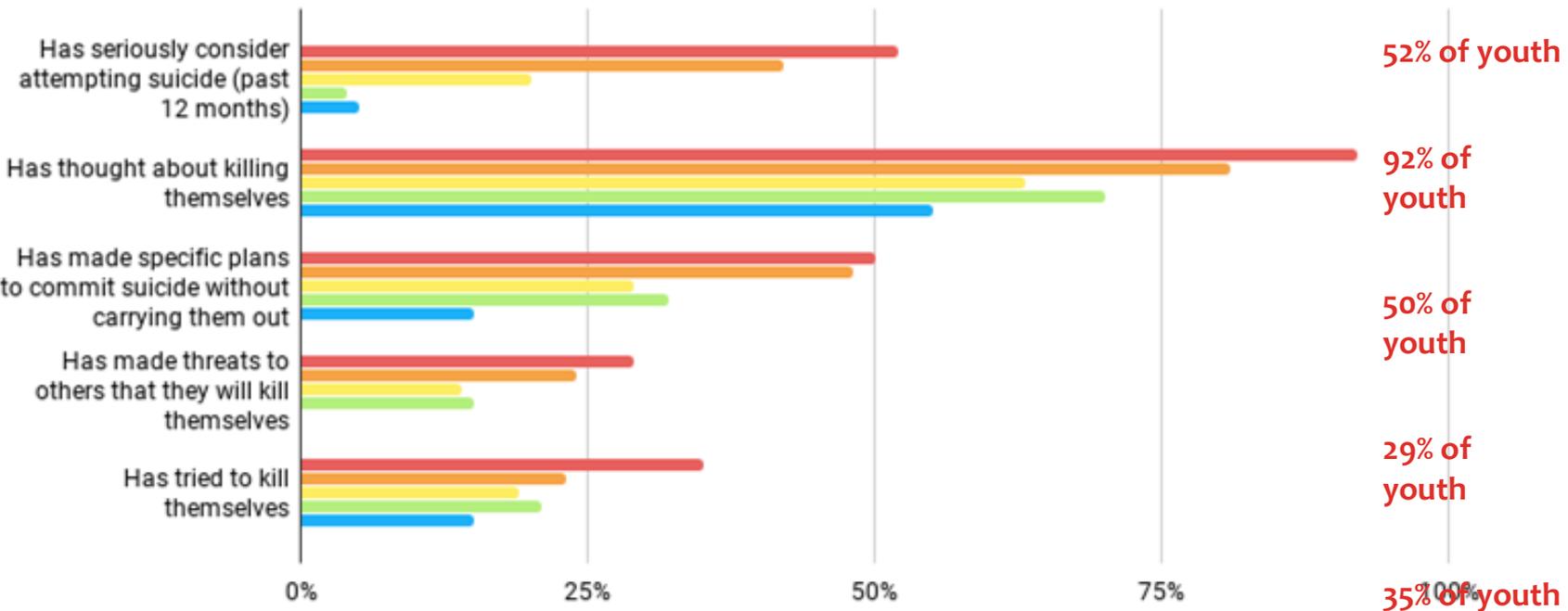
Percent of Participants

Note: *n* = 296-297

General Community Connectedness		
	Approximate %	
Participants responding *somewhat agree* or *strongly agree* to the following statements *In my community...*	Transgender/ nonbinary	LGBQ+
There are people I can ask for help when I need it.	59% (*n* = 51)	74% (*n* = 243)
Most people try to make this a good place to live.	59% (*n* = 51)	69% (*n* = 228)
People trust each other.	35% (*n* = 30)	46% (*n* = 153)
Most LGBTQ people feel safe.	29% (*n* = 25)	29% (*n* = 94)
In general, people from my town work to solve our problems.	22% (*n* = 19)	40% (*n* = 130)
In general, I have found that people pull together to help each other.	45% (*n* = 39)	58% (*n* = 192)
When someone moves here, people make them feel welcome regardless of their identities.	26% (*n* = 23)	35% (*n* = 114)
You can meet others of different sexual orientations/gender minorities.	59% (*n* = 51)	56% (*n* = 183)

Note: Total transgender/nonbinary participants (*n* = 86-87) and total LGBQ+ participants (*n* = 327-330)

Gender Expression		
Participants responding *somewhat applicable* to me or *applies to me a lot* to the following statements	**Approximate %**	
	Transgender/ nonbinary	LGBQ+
Feeling invisible in the LGBT community because of your gender expression.	48% (*n* = 42)	22% (*n* = 71)
Being harassed in public because of your gender expression.	32% (*n* = 28)	16% (*n* = 51)
Feeling like you don't fit into the LGBT community because of your gender expression.	36% (*n* = 31)	16% (*n* = 52)
Being misunderstood by people because of your gender expression.	78% (*n* = 68)	36% (*n* = 116)

Discrimination/Harassment		
Participants responding *somewhat applicable* to me or *applies to me a lot* to the following statements	**Approximate %**	
	Transgender/ nonbinary	LGBQ+
Being called names such as "fag" or "dyke."	31% (*n* = 27)	25% (*n* = 80)
People staring at you when you are out in public because you are LGBT.	49% (*n* = 43)	32% (*n* = 104)
Being verbally harassed by strangers because you are LGBT.	24% (*n* = 21)	17% (*n* = 56)
Being verbally harassed by people you know because you are LGBT.	31% (*n* = 27)	14% (*n* = 45)
People laughing at you or making jokes at your expense because you are LGBT.	35% (*n* = 30)	19% (*n* = 60)

Note: Total transgender/nonbinary participants (*n* = 84-87) and total LGBQ+ participants (*n* = 313-335)

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VIGILANCE & VICARIOUS TRAUMA

Vigilance		
Participants responding *somewhat applicable* to me or *applies to me a lot* to the following statements	**Approximate %**	
	Transgender/ nonbinary	LGBQ+
Watching what you say and do around heterosexual people.	79% (*n* = 67)	62% (*n* = 201)
Pretending that you are heterosexual.	31% (*n* = 26)	35% (*n* = 112)
Hiding your relationship from other people.	31% (*n* = 27)	29% (*n* = 94)
Avoiding talking about your current or past relationships when you are at work.	42% (*n* = 36)	42% (*n* =136)
Hiding part of your life from other people.	64% (*n* = 56)	60% (*n* =195)

Vicarious Trauma		
Participants responding *somewhat applicable* to me or *applies to me a lot* to the following statements	**Approximate %**	
	Transgender/ nonbinary	LGBQ+
Hearing about LGBT people I know being treated unfairly.	84% (*n* = 73)	68% (*n* = 216)
Hearing about LGBT people I don't know being treated unfairly.	89% (*n* = 77)	82% (*n* = 260)
Hearing about hate crimes (e.g. vandalism, physical or sexual assault) that happened to LGBT people you don't know.	89% (*n* = 77)	83% (*n* = 263)
Hearing other people being called names such as "dyke" or "fag".	70% (*n* = 61)	59% (*n* = 186)
Hearing politicians say negative things about LGBT people.	91% (*n* = 79)	88% (*n* = 276)
Hearing someone make jokes about LGBT people.	94% (*n* = 82)	82% (*n* = 260)

Note: Total transgender/nonbinary participants (*n* = 84-87) and total LGBQ+ participants (*n* = 313-335)

Internalized Transphobia	
Participants responding *agree* or *strongly agree* to the following statements	**Approximate %**
I resent my gender identity or expression.	18% (*n* = 14)
My gender identity or expression makes me feel like a freak.	26% (*n* = 21)
When I think of my gender identity or expression, I feel depressed.	26% (*n* = 21)
When I think about my gender identity or expression, I feel unhappy.	26% (*n* = 21)
Because of my gender identity or expression, I feel like an outcast.	55% (*n* = 44)
I often ask myself: Why can't my gender identity or expression just be normal?	43% (*n* = 34)
I feel that my gender identity or expression is embarrassing.	31% (*n* = 25)
I envy people who do not have a gender identity or expression like mine.	40% (*n* = 32)

Note: *n* = 80

Internalized Heterosexism	
Participants responding *agree* or *strongly agree* to the following statements	**Approximate %**
I resent my sexual orientation.	9% (*n* = 28)
My sexual orientation makes me feel like a freak.	9% (*n* = 30)
When I think of my sexual orientation, I feel depressed.	7% (*n* = 23)
When I think about my sexual orientation, I feel unhappy.	10% (*n* = 34)
Because of my sexual orientation, I feel like an outcast.	27% (*n* = 88)
I often ask myself: Why can't my sexual orientation just be normal?	23% (*n* = 75)
I feel that my sexual orientation is embarrassing.	16% (*n* = 51)
I envy people who do not have a sexual orientation like mine.	15% (*n* = 47)

Note: *n* = 325-329

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FOCUS GROUPS

Barriers to Accessing Mental Health Care
Conditional Feelings of Safety
Supportive Space & Community
Negative Experiences with Mental Health Providers
Positive Experiences with Mental Health Providers
Gender Identity Specific Experiences & Perceptions

BARRIERS TO ACCESSING MENTAL HEALTH CARE

➢ Financial Issues
➢ Mental health stigma
➢ Finding and accessing mental health care
➢ Lack of LGBTQ+ affirming providers

"...because there's stigma about mental health and then there's the whole stigma around LGBTQ+, issues, it's like a double whammy..."

"I'd say they're fine as people, but when you take the gay or trans part then, like, they don't know what to do."

"And it's, like, you find these therapists that look really nice online, but again, it's like— they're not lower-income friendly or insurance-friendly or anything like that, so it's really inaccessible."

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CONDITIONAL FEELINGS OF SAFETY

➢ Based on identity and presentation
➢ Based on Location

"Sometimes I'm a little anxious about wearing my skirt somewhere where it seems very cis-expressive... that's a little nerve-wracking."

"You still get crawly creatures up your back when you see some people—you worry about even walking downtown San Luis Obispo after dark, especially at bar closings."

"It's kinda always on my mind, about making sure you know where you are, your whereabouts, who your audience is, if you're paying for gas, going out to lunch, or whatever it may be..."

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SUPPORTIVE SPACE & COMMUNITY

➢ Need and want more supportive formal meetings and spaces
➢ Need and want more supportive informal hango
➢ Role of social support

"...to have a brick and mortar place, you know that might even be government supported, or county supported...where you could go and belong, and not fear for your safety."

"...if there [was] just one place in the town that was like a coffee shop or a clubhouse or some sort of just LGBT central area where you could just go at anytime and...hang out and meet people, you know?"

"Something that I've kind of noticed is a lot of people just want to find community...they want to [find] people who are like them."

NEGATIVE EXPERIENCES WITH MENTAL HEALTH PROVIDERS

➢ Lack of LGBTQ+ competence
➢ Lack of general mental health competence

"I've really struggled, actually, to find someone to open up to and talk to about things that understands...I've had a couple different therapists in the past who have straight up told me 'Well, I don't really know how to help you with your gender thing because I don't understand it.'"

"It's frustrating sometimes because I don't want to be the one to educate you."

"...it was more just finding that I couldn't really get deep into any topics with people because they just weren't getting the basic stuff. So if I was going to talk about depression, I had to talk about it in more of a general way. And sort of keep transition related things out of it, because they just weren't gonna be able to give me any specifics on that..."

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POSITIVE EXPERIENCES WITH MENTAL HEALTH PROVIDERS

➢ MHP demonstrate curiosity, interest, and humility
➢ LGBTQ+ affirming experiences

"I go to a therapist and she's actually one of the few that I've found that actually is open to me being gay and that becomes a topic of conversation for me to unload."

"The therapist that I have is accepting and completely embracing of all my identities that I have shared, and helps me with working through things..."

"...it was really neat getting to work with [provider] because she totally understood the intersection of faith and spirituality and sexuality."

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GENDER IDENTITY SPECIFIC EXPERIENCES & PERCEPTIONS

"Just my perception, but I think that if you are gay, lesbian, bi, but identify as cisgender, that's definitely more understood, versus trans is such the buzzword now, but I don't feel like there's a lot of understanding of the emotions and decisions and mental health impact of somebody coming out as trans..."

"...having people straight-up tell you to your face that they're not willing to respect your pronouns, to me, immediately makes the whole rest of the encounter, no matter how positive it might attempt to be, [it] just sours it."

"I've had a lot of luck with, in regards to sexuality stuff, but as soon as I bring my gender into it it's, like, completely shut down."

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RECOMMENDATIONS

RECOMMENDATIONS

Organizations and agencies should attempt to identify areas for growth and change to help support LGBTQ+ mental health and wellness

- **Routine process of self-assessment** to understand climate and needs of those they serve & their employees

- Implementation of **policies & practices** that are inclusive of LGBTQ+ individuals to ensure equity and compliance with local, state, and federal law.

- Identified **liaison(s) to ensure oversight** of these policies, practices, and efforts

RECOMMENDATIONS

Trainings to promote LGBTQ+ affirming practices for mental health providers, agencies, and community organizations

- Providers also need to develop an **increased awareness** of their own beliefs and biases about sexual orientations and gender identities, including heterosexist, binary, and cisgender norms.

- Being LGBTQ+ friendly and supportive is important, however, providers and agencies need to have the **knowledge, awareness, and skills** to work with LGBTQ+ people.

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RECOMMENDATIONS

Transgender and nonbinary community members are in need of more affirming mental health support

- Providers rated as **less knowledgeable and affirming**.
- TGNB participants report more **negative mental health outcomes**.
  - Higher psychological distress, depression & anxiety, suicidality, minority stress, internalized stigma & less community connectedness.

- Trainings need to include emphasis on transgender and nonbinary identities

RECOMMENDATIONS

Suicide prevention efforts need to purposefully include LGBTQ+ community members

- **LGBTQ+ specific crisis services** are integral to suicide prevention efforts (Goldbach, Rhoades, Green, Fulginiti, & Marshal, 2019)**.**

- Outreach and crisis services should be **tailored and targeted** toward LGBTQ+ communities.

- Suicidal prevention trainings should include a **specific LGBTQ+ component**.

RECOMMENDATIONS

Increased support services for LGBTQ+ youth are necessary

- An increased focus on **LGBTQ+ youth services** is needed in San Luis Obispo County

- Approximately **52% of LGBTQ+ youth** report having seriously considered attempting suicide.

- **LGBTQ+ affirming support groups and safe spaces** are needed to support connection with peers, particularly at school and in their communities.

RECOMMENDATIONS

LGBTQ+ affirming community spaces are needed to increase feelings of safety and community connectedness

- **Community connectedness serves as a buffer** between perceived stigma, depression, and suicidal behavior (Kaniuka et al., 2019)

- **Funding, resources, and staffing** are needed for local LGBTQ+ organizations and for agencies that disproportionately serve LGBTQ+ individuals. Resources are also needed to **support LGBTQ+ initiatives** across agencies and organizations

- **Support for the LGBTQ+ community should be displayed prominently** and meaningfully in public and private spaces to increase feelings of safety, belonging, and connection.

RECOMMENDATIONS

A database of LGBTQ+ affirming services and providers is needed to reduce barriers to seeking care

- Many participants noted the **difficulty of finding affirming providers** as a barrier to accessing mental health care.

- **Well-organized, searchable, up-to-date directory** is needed to increase access to mental health care.

- Careful **monitoring, vetting, and screening** will be needed to ensure robust database.

THANK YOU !

Community Liaisons
Anne Robin
Barry Johnson
Danielle Friedrich
Doug Heumann
Ellen Sturtz
Erica Andrade
Erika Duran
Frank Warren
Hilary Lawson
James Statler
Jane Lehr
Joe Stewart
John Elfers
Julie Baker
Kayla Wilburn
Meghan Madsen
Michelle Call
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Thank you to the many QCARES alumni who have graduated but contributed extensively

Community Organizations
Access Support Network
Allan Hancock College
Cal Poly Pride Center
Central Coast Coalition for Inclusive Schools
Community Counseling Center
Community Action Partnership of San Luis Obispo
Cuesta College
Gay and Lesbian Alliance
House of Pride & Equality
LGBTQ+ High School Clubs
Peer Advisory and Advocacy Team
The Queer Crowd
Queer SLO
RISE
San Luis Obispo County Behavioral Health
Sierra Vista Regional Medical Center
SLO Bike Kitchen
SLOQueerdos
Transitions-Mental Health Association
Twin Cities Community Hospital
Tranz Central Coast
5 Cities Hope
#Out4MentalHealth Task Force

- Access the full report:

http://www.slocounty.ca.gov/Departments/Health-Agency/Behavioral-Health/Forms-Documents/Mental-Health-Services-Act-(MHSA)/Prevention-and-Early-Intervention-(PEI)/FY-18-19.aspx

PEI

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