



# Mental Health Matters Day

CALIFORNIA STRONG!

..... **May 23, 2018** .....

9:30 am to 2:00 pm

East Side, Capitol Building • Sacramento, CA



**Celebrating  
Mental Health Month!**

# Welcome, and Happy Mental Health Month!

We believe passionately in the power of coming together to celebrate mental health month to better the lives of those with mental health challenges. Speaking up about mental health is an essential part of battling stigma, and our voices are amplified when we speak up together. By hosting Mental Health Matters Day, we continue to strengthen our community and the movement towards ending stigma.

## Schedule

9:30 a.m.	Exhibits open	11:55 a.m.	Symphony of Rhythm Drumming Presentation
9:45 a.m.	Welcome		
10:30 a.m.	Paul Gilmartin, Emcee	12:45 p.m.	Keynote Speaker: Darryl "DMC" McDaniels from the legendary hip hop group, Run DMC
10:45 a.m.	Becky Fein, Program Director, Send Silence Packing Presentation		
10:55 a.m.	Nadia Ghaffari, Founder of TeenzTalk & Senior at Los Altos High School	1:30 p.m.	John Gill, COO, Beats Rhymes and Life, Hip Hop Therapy Presentation and Performance
11:25 a.m.	Intermission – Lunch served	2:00 p.m.	Closing Comments



Use our hashtag  
on social media

**#MHMD2018**

# Speakers

Keynote speaker:

**Darryl “DMC” McDaniels** from Run DMC will be sharing his story of lived experience of mental health challenges.



**Becky Fein** is the Program Director of Send Silence Packing, a nationally recognized traveling exhibition of donated backpacks representing college students lost to suicide each year.

**Nadia Ghaffari**, Founder of TeenzTalk & Senior at Los Altos High School will present Empowering Youth Voice: Peer Support & Fostering Youth-Led Initiatives Around Mental Health.

Nadia Ghaffari is a senior at Los Altos High School with a passion for youth mental health advocacy. She started the nonprofit TeenzTalk after her own experience with aiding in the prevention of her close friend’s suicide; TeenzTalk focuses on education, open conversation, and youth empowerment to fight the stigma around mental health.

Remarks by:

**Zima Creason**, President and CEO, Mental Health America of California

**The Honorable Senator Jim Beall**, 15th District

**Paul Gilmartin**, event emcee and former host of TBS’ *Dinner & A Movie*, hosts *The Mental Illness Happy Hour*, a podcast consisting of interviews with artists, friends,

listeners and the occasional mental health professional about all the battles in our heads; from medically diagnosed conditions, past traumas and sexual dysfunction to everyday compulsive, negative thinking. The podcast has over 600,000 downloads per month, a 5/5 iTunes rating where it frequently occupies the top spot in Self-Help, was chosen by Esquire as one of the best podcasts of 2016, and was featured in the 2013 PBS Documentary, *A New State of Mind*.



**Symphony of Rhythm Drumming presentation, Drum Café West Coast** - In this harmony-rhythm interactive session, participants play boom whackers (tuned color percussion tubes). Participants can hear how their individual voices contribute to a greater whole. When all are working together in harmony, the power is palpable.

**John Gill**, COO, **Beats Rhymes and Life** (BRL), will be delivering a Hip Hop Therapy presentation and performance. BRL cultivates dynamic, culturally responsive services that inspire youth to recognize their own capacity for healing and self-expression, through community engagement and the therapeutic power of Hip Hop.

# Exhibits

**Mental Illness:**  
It's not always what you think.

**The Wall of Hope** is a traveling display that is part of the “Mental Illness: It’s not always what you think” project. At community events throughout Sacramento County, the project encourages individuals to add a message of hope and understanding about mental illness to the walls. Join the project in breaking down the barriers and stigma associated with mental illness by supporting individuals and families with your words of encouragement and solidarity.



**Send Silence Packing®** is an emotionally powerful exhibit featuring backpacks and personal stories from those who have lost a loved one to suicide. The exhibit is presented by Active Minds. Visitors are invited to walk among the *Send Silence Packing* backpacks to see the photographs and read the stories attached to them.

# Important Areas of Focus in California Policy and Advocacy

The following is a brief overview of the policy and advocacy efforts shared by the many partners that joined together to bring you Mental Health Matters Day 2018.

## Supportive Housing

Studies show that a large number of adults who are homeless also have a serious mental illness. California's lack of affordable housing and supportive housing programs that provide needed services along with housing is a challenge that the mental health community is prepared to address. A safe, stable place to live is essential to ensure effective treatment and recovery outcomes. We advocate for additional affordable housing development and housing-based supports for individuals living with mental illness and for families with children who experience mental illness and emotional disturbances. We encourage affordable housing developers and advocates to form partnerships with the mental health community to address California's housing shortage as the high costs make it difficult for many to find stable housing. All deserve equal access to housing.



## Peer Certification



Peer Certification creates a practice that is distinguished from other disciplines within the behavioral health workforce that provides services from the perspective of recovery through shared experience. Peer Support is a relationship of mutual learning founded on

the key principles of hope, equality, respect, personal responsibility and self-determination. The services provided are evidence-based, nontraditional, therapeutic interactions between people who have a shared lived experience of a behavioral health challenge or the shared experience as a parent/family member of a person with a behavioral health challenge. Peer support specialists reduce hospitalizations and hospital stays, improve client functioning, increase client satisfaction, reduce family concerns, alleviate depression and other symptoms, and enhance self-advocacy.

## Protecting and Supporting Mental Wellness in Immigrant and Undocumented Communities

We advocate for policies and services that support mental wellness in immigrant and undocumented communities. We recognize that the current political climate has created extreme fear, terror and trauma in some of California's communities, all of which impede mental wellness. We support policies such as the establishment of sanctuary cities and the refusal to participate in federal immigration raids. Not only do we support policies that promote mental wellness, but we also promote access to community defined mental health services and supports for this unique population.

## Intervention Diversion from the Criminal Justice System Including Bail Reform

The criminal justice system is often the worst place for individuals with mental illness, yet they comprise 64% of people in jail and 56% of people in prison nationwide. We advocate for reforms to prevent entry into the criminal justice system and to divert out as early as possible, including training law enforcement on crisis intervention, minimizing pretrial detention through bail and pretrial reform, implementing alternative custody programs and behavioral health courts, and reforming sentencing laws and practices.

To take action and get involved in policy activities, sign up for MHAC's email distribution list at [mhac.org/get-involved](https://mhac.org/get-involved) or email [info@mhac.org](mailto:info@mhac.org).



## Access to Treatment



An individual with mental illness should have timely access to all available treatments that are effective in treating their mental illness. Support is key to treatment and recovery; therefore, efforts must be made to identify supportive friends and family members to

integrate into a collaborative system of care. An individual with mental illness should have the right to engage their preferred provider or change providers as meets their needs. Ultimately treatments should be client centered to efficiently meet the needs of the individual.

## Stigma Reduction: Mental Health Awareness, Education and Training

Approximately 1 in 5 adults in the United States experiences a mental illness in a given year, and 1 in 25 experiences a serious mental illness that significantly interferes with or limits one or more major life activities. However, only 41% of the adults with a mental health condition and 63% of the adults with a serious mental illness received mental health services in the last year. We believe that state and local governments should continue and increase funding for stigma and discrimination reduction programs. By increasing awareness of mental illness and decreasing stigma, we take the most important step towards increasing access to treatment. We also believe more training and educational opportunities are needed to properly train first responders and all professionals to better support individuals living with mental health conditions. With adequate training, education and awareness community systems can be more equipped and informed to properly support individuals throughout the Continuum of Care.

## Prevention and Early Intervention

Half of all chronic mental illness begins by the age of 14, and three quarters by the age of 24. Early diagnosis and early initiation of treatment is therefore medically effective and critical to recovery. We believe that school-based programs are essential to the prevention and early intervention of mental illness. School based supports should be available, with appropriate privacy and anti-discrimination protections for



students and families. We support every county in the implementation of Prevention and Early Intervention (PEI) programs to engage and intervene with individuals who are developing early signs and symptoms of mental illness. Many programs targeting underserved communities should be PEI programs. Programs should be available to all individuals of all ages and should include partnerships with families and community-based organizations.

## Peer Respite

Alternatives to institutional care are community-based, trauma- informed, person-centered programs that focus on crisis prevention and crisis support in settings that are staffed and operated by people with lived experience of the mental health system. We seek to enable each mental health consumer with support when they need it, not wait until a crisis grows and ends with involuntary treatment. Self-determination and receiving treatment in the least restrictive environment are important and essential components of an effective, efficient and ethical system of care.

## Substance Use Disorder

A large number of those impacted by substance use disorders also report having a mental health challenge. A substance use disorder is a chronic, relapsing health condition of the brain. The misuse of alcohol and drugs impacts the health and well-being of individuals and can put lives at risk. Stigma, lack of access to substance use disorder treatment due to high demand for treatment combined with low capacity due to limited funding and lack of and/or limited insurance coverage continue to represent the major barriers to addressing substance use disorders in our communities. The good news is that treatment works, and each dollar spent on treatment can save up to \$11 in un-incurred societal costs. Through the provision of evidence-based therapies, individuals can build and maintain recovery after treatment.

## Importance of Meaningful Stakeholder Process

A stakeholder is a person or group of people who are directly impacted by mental health or a person who represents others' interests relative to mental health. A meaningful stakeholder process outreaches to all communities to educate, engage and partner with stakeholders while honoring the Recovery Philosophy and its values of: Hope, Empowerment, Self-determination, Freedom of Choice, Knowledge of Rights, Self-Confidence, Self-Advocacy, Responsibility, Developing Peer & Other Support Systems, and

Resiliency. A proper stakeholder process also focuses on the specific needs of stakeholders including linguistic, socioeconomic, educational, spiritual and ethnic experiences of consumers and their support systems. A meaningful stakeholder process allows consumers to bring their personal perspective and wisdom derived from their experiences to the decision-making process and to have their voice incorporated into the outcomes that result from the stakeholder process.

## The Role of Parents and Families

Parents and family members, including relative caregivers, of minor children and youth with mental health challenges have the right to be included in every step of their child's treatment. Parents and family members have unique insight to their children's/youth's mental health and overall well-being. Family advocacy should be included in the process of developing treatment plans for minor children and adult children when there is consent. Parents should have access to education about their child's mental illness, peer-peer support, and awareness of the array of treatment options. Further, parents should not be shamed or blamed for their child's actions and attitudes. It is not a matter of 'good' or 'bad' parenting.

## Military and Veterans; Suicide Prevention and Awareness

Active duty service members and veterans die by suicide at much higher rates than the civilian population. Although veterans constituted just 8.5% of the US population, they accounted for 18% of all deaths by suicide amount US adults in 2014. We must promote awareness of this epidemic and encourage service members and veterans to seek help when they are experiencing mental health challenges. We also must educate policy makers and other decision makers about this important topic so that appropriate services and supports are funded and available to meet the need and to save lives. Central to this effort is to reduce the stigma associated with mental illness that impedes military and veterans from seeking mental health services and support. There also needs to be increased research to improve identification and treatment of the mental health disorders. For instance, more needs to be learned about the behavioral after-effects of mild traumatic brain injuries (TBI), which often mimic post-traumatic stress disorder (PTSD). Because of this lack of knowledge, many service members from the recent conflicts were released from service with Less Than



Honorable Discharges instead of receiving the services and support that they needed. Leaving the service with these "bad paper discharges" prevents a veteran from receiving the health care they would otherwise be entitled to and it has been shown that this may sink them into an abyss of unemployment, homelessness, drug or alcohol abuse, and at times, suicide.

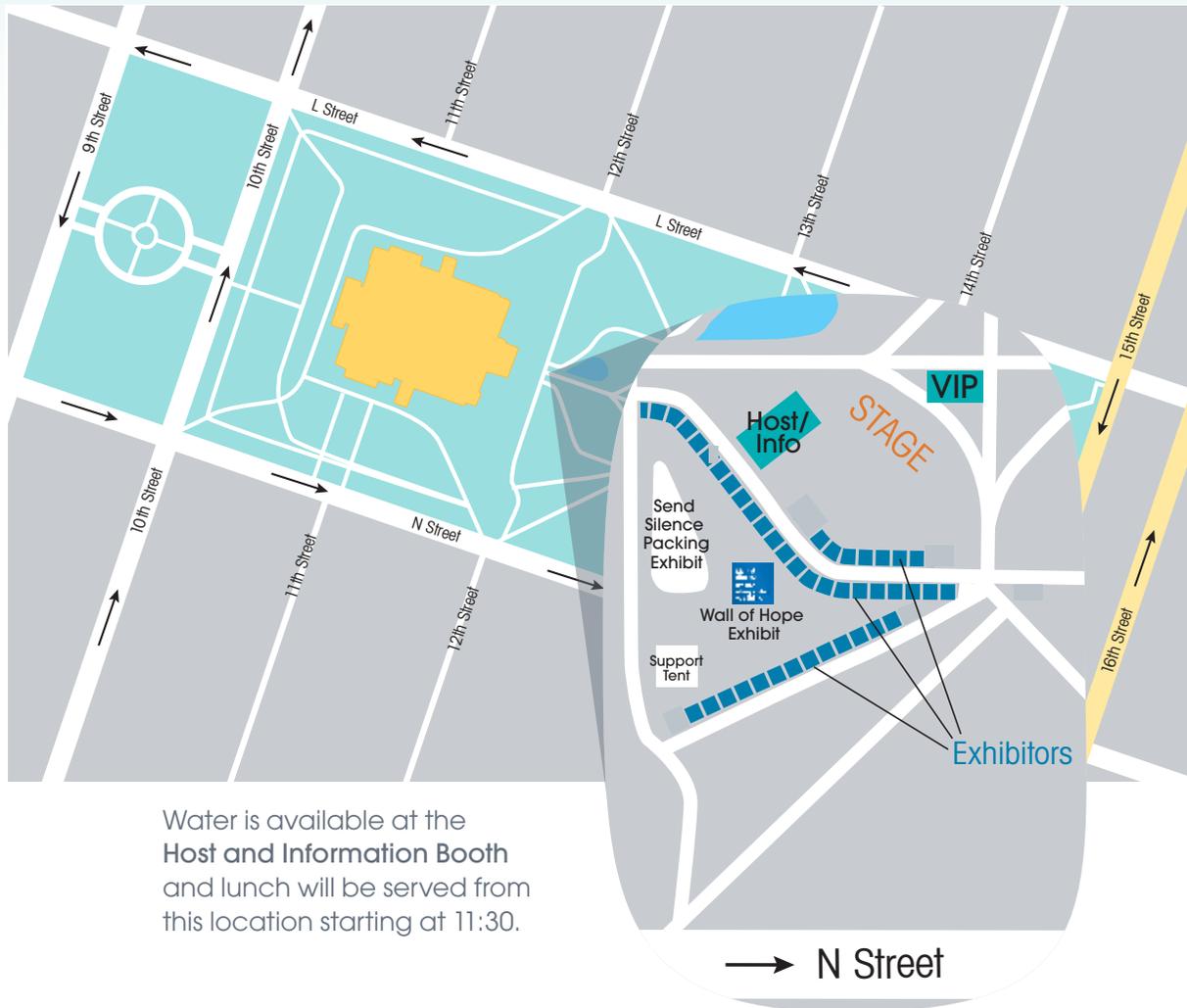
## Cultural Equity

Diverse stakeholder inclusion is essential to shape mental health policy to appropriately serve diverse communities. Stakeholders from California's varied unserved, underserved and inappropriately served racial, ethnic, and cultural populations, including LGBTQ, veteran, and special needs communities across the lifespan must be included in service development and delivery to appropriately address their mental health needs. We advocate for more providers, administrators, and policy makers from these communities and for more community defined practices that better meet the needs of these communities.

## Maternal Mental Health

Maternal mental health (MMH) disorders, such as depression, anxiety, and the more rare but serious postpartum psychosis, affect one in five women, or 20 percent, during pregnancy or the first year following childbirth. Among those living in poverty, up to 50 percent may be affected. Maternal depression is the most common complication of pregnancy in the United States (surpassing gestational diabetes and preeclampsia combined), yet there are no laws requiring that health plans and hospitals with perinatal units adhere to any specified level of optimal care for maternal depression. We advocate screening for maternal mood disorders at least once during pregnancy and once postnatal by OB/GYNs, that health plans create case management programs for patients with maternal mood disorders, and that they consult with reproductive psychiatrists, using telehealth services when available, to coordinate care. We also advocate that hospitals with perinatal units develop quality management programs that will assure training of all clinical staff based on a specified curriculum about maternal mood disorders. Patient education on maternal mental health disorders must also be provided by hospitals, in order to empower new and expectant moms and their families by making them well-informed about the potential complications these disorders may cause and how to seek out care.

# Event Map



## Exhibitors

- ACLU of California
- Alkermes, Inc.
- Alliant International University
- American Foundation for Suicide Prevention - Greater Sacramento Area Chapter
- California Association of Mental Health Patients' Rights Advocates
- California Association of Mental Health Peer-Run Organizations
- California Association of Marriage and Family Therapists
- California Association of Social Rehabilitation Agencies
- California Behavioral Health Planning Council
- California Council of Community Behavioral Health Agencies
- California Department of Public Health, Office of Health Equity
- California Department of Veterans Affairs
- California Institute for Behavioral Health Solutions
- California Veterans Benefit Fund
- Council on Criminal Justice & Behavioral Health (CCJBH)
- County Behavioral Health Directors Association of California
- Crestwood Behavioral Health Inc.
- Crossroads Diversified Services
- Disability Rights California
- Each Mind Matters
- Johnson & Johnson Healthcare Systems Inc.
- Kaiser Permanente
- Mental Health America of California | CAYEN | Wellness Works
- Mental Health America of Northern California
- Mental Health Association of San Francisco
- Mental Health Services Oversight and Accountability Commission
- Mental Illness: It's Not Always What You Think | A Sacramento County Program
- NAMI California
- National Association of Social Workers, California Chapter
- National Union of Healthcare Workers
- No Stigma No Barriers (California Youth Connection)
- PEERS (Peers Envisioning and Engaging in Recovery Service)
- Sacramento Native American Health Center
- Send Silence Packing
- Sierra Vista Hospital
- SMUD
- Stars Behavioral Health Group, Capital Star Behavioral Health
- State Council on Developmental Disabilities
- Steinberg Institute
- Telecare
- The Place Within Counseling at Folsom
- Turning Point Community Programs
- UC Davis Behavioral Health Center of Excellence
- Wellness Together

Partners – Organizations that came together to plan the program and advocacy focus for Mental Health Matters Day



Sponsors



Contact: [info@mhac.org](mailto:info@mhac.org)

[www.mentalhealthmattersday.org](http://www.mentalhealthmattersday.org)