

STATE OF THE COMMUNITY ANNUAL REPORT

2020-2021

—
Resilience and Strength during Challenging Times:
Highlights, Success Stories, and Accomplishments



United Parents

United Parents provides resources to empower, strengthen and support parents who have children with mental health, emotional, and behavioral disorders.



Parents & Caregivers for Wellness

A collaborative project to strengthen the voice of parents and caregivers and improve services and supports for families.

Dear Parents, Caregivers, Partners, Supporters and Friends:



Lori Litel

The story of strength and resilience through challenging times is the central theme of this year's Parents & Caregivers for Wellness (PC4W) State of the Community Annual Report. In the following pages, this story is told through the authentic voice of families and communities coming together to show what HOPE looks like.

Parents and Caregivers are paving the road to hope by persevering through unprecedented challenges by problem-solving, learning new skills, wearing new “hats”, demonstrating emotional intelligence, playing new roles within their family and community, and sharing themselves with uncommon generosity. All of this is taking place in the context of prolonged and unexpected change.

The art depicted throughout this report are originals created from the heart by PC4W parents and caregivers. Through their eyes, it shows what the “new normal” of living through a global pandemic looks like. These creations depict the view from inside a family's home and also the view from the community that surrounds and connects families looking in:

- Children look out windows at friends they are unable to play with or hug;
- Parents and caregivers working from home AND becoming their child's teacher;
- Skipped or “drive-by” birthday parties, graduations, quinceañeras, baby showers, family and community celebrations;
- Speaking with grandparents and other loved ones only on the phone, through Zoom, or through a window;
- Wearing a facial covering and supporting family members who receive their vaccine;
- Receiving food, virtual devices, and other concrete support at the family doorstep, delivered by courageous workers;
- Watching the world change, grow, and embrace Black Lives Matter movement and reaffirm an unwavering commitment to racial equity;
- Painfully realizing that people of color are disproportionately affected by COVID-19; and
- Bearing the loss of life that many families endured.

The “New Normal” is ... hope wins! May the stories shared in this report inspire hope in you.

Although it has been my honor to lead United Parents since 2014, I am retiring to spend more time with my family. You are in capable and caring hands with Melissa Hannah as UP's new Executive Director. I join each of you in holding and finding hope for a bright future!

Warm Regards,

Lori Litel

Appreciation

United Parents (UP), the lead organization for Parents & Caregivers for Wellness has been serving families who have a child with mental health concerns for over 31 years. UP was the first statewide parent-led provider in California and has built on the legacy of innovation in meeting family's needs since that time. Leading through a global pandemic and its aftermath required insight, courage, flexibility, and the ability to model resilience and engage key partners to do the same.

The following key partners teamed up with United Parents this past year and have been strong partners since 2017:

- California Alliance of Caregivers (CAC)
- California Mental Health Advocates for Children and Youth (CMHACY)
- East Bay Children's Law Offices (EBCLO)

Please see **Appendix A** for a description of this year's Collaborative Partners and listing of key statewide supporters who bring passion and authenticity to the work they do. Each one played a significant role in pivoting to meet the needs of parents and caregivers in new and creative ways during unprecedented times.

We also wish to thank the Mental Health Services Oversight and Accountability Commission (MHSOAC) who responded with compassion for families as well as with respect and flexibility to enable UP/PC4W to work through the chaos to help families see the silver linings that were possible. Your support and trust in UP/PC4W's work provided the confidence to inspire hope in the families who need it most.

We thank you... our parents and caregivers thank you!





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Executive Summary

Parents and Caregivers have been and continue to be at the center of United Parents' mission. Everything we have done in the past, are doing now, and plan to do in the near term can be mapped to the importance of lifting the authentic voice of parents and caregivers, linking them to vital resources and supports, and leveraging policy and resources to increase wellness. As the entire globe was rocked by the ravages of a global pandemic, parents and caregivers persevered through profound loss and found hope for their children, families and communities. This report is dedicated to them; their art and stories give life and meaning to the path forward. Please find some of these parent and caregiver stories on pages 14 - 16 and reflect on their art that can be found throughout the report.

This past year, parents and caregivers faced the same behavioral health issues that impacted them in recent years, only at significantly higher levels due to the pandemic.

These include:

- (1) the availability of high-quality mental health services and supports by trauma-informed clinicians;
- (2) support in accessing care; and
- (3) non-discriminating, affordable services close to home.

These challenges were compounded by the stress of trauma, loss and grieving, and also by the need to take on new roles, such as supporting their child's learning when schools were closed and all instruction was virtual.

Because Parents & Caregivers for Wellness (PC4W) has established local community partnerships already in place

at the onset of the pandemic, and because of their diligence in seeking understanding of priority needs of families, they were able to pivot during times of change. **PC4W was able to achieve and exceed its scope of work for 2021.** Although most activities were conducted virtually, rather than in person, they were delivered at a high level that addressed expressed needs.

- 5 Regional Events (advocacy, focus groups, presentations) served 409 parents and caregivers
- 7 Statewide Webinars engaged 657 parents and caregivers in topics relevant to their immediate needs
- Statewide Advocacy Day at the Capital welcomed 72 parents and caregivers and advocates
- 38,814 CalHOPE/FEMA direct contacts made with residents across the state
- Presentation given at the Annual CMHACY Conference

Taken together, the results for parents and caregivers included:

1. Benefits to parents, caregivers, and children/youth in their care

- a. Parents and caregivers are becoming more trauma-informed in their parenting practices
- b. Increased family functioning through meeting the COVID challenge together
- c. Parents and caregivers successfully took on new roles such as educator, play partner, art director, etc.
- d. Family members gained direct experience in speaking up and providing input, including to state senators/assembly members and their staffers
- e. Parents and caregivers feel heard and valued, and are helping each other by telling their stories

2. Changing landscape of child, family and community wellness

- a. HOPE (Health Outcomes through Positive Experiences) has entered the vernacular
- b. Increased reciprocity within families and communities
- c. Innovative applications of the Protective Factors, especially in light of racism being recognized as an adverse childhood experience with lasting traumatic impact

3. Reach and impact on state and local systems

- a. Parents and caregivers continue to emerge as strong advocates, leaders, and co-designers of services and supports
- b. State and local systems are addressing power differentials and sharing responsibility

Looking forward, Parents and Caregivers for Wellness will continue to be a catalyst for well-being. Lori Litel, who led the organization for over six years, laid a strong foundation for growth and success. Melissa Hannah, United Parents' new Executive Director is committed to building on these achievements, bringing compassion, excellence, and innovation to the work.



Parents and Caregivers for Wellness 2020-2021 Report

What Hope Looks Like

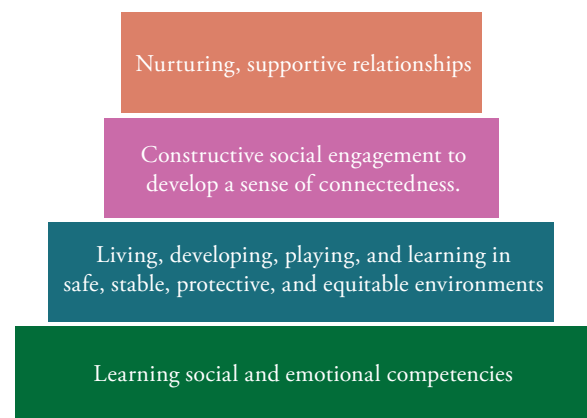
Hope continues to rise in families and communities despite the profound loss and challenge brought on by COVID-19 that has impacted families and communities in California and worldwide: loss of loved ones, loss of personal and cultural celebrations, loss of work and livelihood, loss of educational opportunities, and other losses so deep they are difficult to name. Through it all the one thing that has not been lost to us collectively or individually is hope.

Hope fuels us to find strength and goodness in places where it is not immediately obvious. It is hope that inspires parent and caregiver resilience—the ability to cope with and overcome adversity in all its forms. Hope allows us to see the “silver lining” that propels us into a new day.

Building Blocks of Hope

The four building blocks of hope are discussed in a recent Knowledge to Action Brief¹ developed by San Diego State University’s Social Policy Institute. Specifically, positive experiences that generate and reflect resilience within children, families and communities should be encouraged. Most recent findings indicate that positive experiences in childhood may reduce the risk for depression and/or poor mental health later in life. Healthy Outcomes from Positive Experiences (HOPE) offers a framework with a perspective on mitigating the adverse impacts to promote better health outcomes.² The HOPE framework is based on examination of several evidence-based programs and promising initiatives designed to improve the lives of children and their families.

4 Building Blocks of HOPE



¹ <https://sdsusocialpolicyinstitute.org/wp-content/uploads/2021/01/HOPE-K2A-Final.Nov2020.pdf>

² Bethell, C., Jones, J., Gombojav, N., Linkenbach, J., & Sege, R. (2019). Positive Childhood Experiences and Adult Mental and Relational Health in a Statewide Sample: Associations Across Adverse Childhood Experiences Levels. *JAMA Pediatrics*. doi:doi:10.1001/jamapediatrics.2019.3007



Tips on Parenting During a Pandemic

Parents and Caregivers for Wellness (PC4W) supported families throughout the global pandemic by providing specific tips on how to help one's child, such as this set of tips offered by the American Academy of Pediatrics³:

- 1. Address children's fears** by answering questions about the pandemic simply and honestly; recognize your child's feelings and model how to manage feelings; keep in touch with loved ones as best you can (FaceTime, letters, visit only when safe to do so); and look to a future where things will be better.
- 2. Maintain healthy routines** because they create a sense of order to the day that offers reassurance in a very uncertain time.
- 3. Use positive discipline** as younger children often do not have the words to describe their feelings. They are more likely to act out their stress, anxiety or fear through their behavior (which can, in turn, upset parents, particularly if they are already stressed). Older children and teens may be extra irritable as they miss out on normal events they looked forward to and activities they enjoy with their friends.

³ <https://healthychildren.org/English/health-issues/conditions/COVID-19/Pages/Parenting-in-a-Pandemic.aspx>

Protective Factors During and After COVID

The need for basic protective factors became more obvious than ever. PC4W reflects the following in conversations, training, and advocacy:

Family Protective Factor	What it Means for PC4W Families During and After COVID
Parental Resilience: A parent or caregiver's ability to see "silver linings" and to find hope by navigating not only the ups and downs of daily life, but unexpected and prolonged challenges, such as experienced during the global pandemic.	Despite the challenges, parents and caregivers learn new roles, reach out for support and take care to apply self-compassion and self-care.
Knowledge of Parenting and Child Development: In addition to understanding the stages of child development, also learning how trauma (individual and global) impacts their child. Practicing parenting strategies that require new skills to support a child's education and overall development.	Parents and caregivers closely observe their child and seek support to understand unique adaptive challenges, such as body-image changes, and those brought on by isolation and loneliness. <i>"We can be really hard on ourselves, but we need to trust ourselves. No one is going to love your child more than you"</i> <i>-Parent/Caregiver</i>
Social and Emotional Competence: A child's ability to communicate clearly, recognize and regulate emotions, and establish and maintain relationships even during a prolonged period of change.	Emotional intelligence is modeled even in times of crisis by parents and caregivers who teach their children to problem-solve, delay gratification, and communicate their feelings and needs.
Social Connections: Positive relationships that provide a family emotional support, information, and spiritual support. These connections can be made in new ways using technology when necessary. <i>"You are only as strong as your community. When you find your community, be vulnerable and share"</i> <i>-Parent/Caregiver</i>	Parents and caregivers gain support through connecting with others even when virtual connections are the only option. They spend additional time to help compensate for the loss of time with friends. <i>"We are no longer alone, and are together in community"</i> <i>-Parent/Caregiver</i>
Concrete Support in Times of Need: Access to support and services that address a family's basic needs, such as food, healthcare, virtual devices and technology, and housing.	Parents and caregivers find ways to meet their children's basic needs, which may require learning new resources and ways to tap in to and access them.

Recent research shows that when resilience and strength-based practices directly address trauma resulting from adverse experiences, it provides the best chance to help a child or family to deal with these challenges.

The best news is that anyone, parent, caregiver, partner, neighbor, or co-worker, can help build hope, strength, and resilience!

The Authentic Voice of Parents & Caregivers

During COVID-19 it was easy for parents and caregivers to wonder whether they were noticed, cared for, or even had a voice that could be heard. In truth the authentic voice of parents and caregivers throughout California was heard more loudly than ever. You told your story to each other as you asked for and received support. You knocked on the door of an isolated older adult in your community and brought a warm meal and an even warmer smile. You called your child's school and used your voice to assert your child's rights to educational assistance, even during a pandemic. You sang and danced in your home and your neighbors heard your voice and felt inspired. You used your voice to instill hope.

Who are Parents and Caregivers?

In California there are close to 40 million people, nearly half (48.5%) of whom are Caucasian, 32% are Hispanic/Latino, 10.9% are Asian/Pacific Islander, 5.1% Black/African American, .9% Native American, and 4% other or multi-racial. Nearly one-quarter of the population are under the age of 18 and California's children represent 8% of the total number of children in the United States. Over 40% of Californians speak a language other than English at home. The 2019 median household income was \$71,228; however, over 14% of the population lives below the poverty line.⁴ When housing costs are considered, referred to as the Supplemental Poverty Measure, California's poverty rate rises to 19%, the highest in the United States.⁵

A significant subset of California's population are parents and caregivers of a child with mental health concerns. One in 13 children in the state has a serious emotional disturbance that could interfere with daily life at home, learning, or getting along with others.⁶ More than 10 percent of California children under five years of age have a disability or special need that could be a co-occurring factor. We now know that Adverse Childhood Experiences (ACEs), which include racism and significant disruption, are stressful or traumatic events that may have a lasting impact on children's health and well-being. ACEs affect every community in California. Before COVID, in some counties, over 75% of residents had at least one ACE. Even in counties with the lowest prevalence of ACEs, 1 out of every 2 residents, or 50%, had one or more adverse experiences in childhood.⁷

In summary, vulnerable children and youth with mental health needs, trauma histories, learning difficulties, and developmental delays reside in every part of the state, every cultural group, and every socio-economic level. The parents and caregivers who support these children and youth are as diverse as the children themselves. Communities of color were significantly disproportionately impacted by COVID. They had the same needs during COVID as before, but their needs were greatly exacerbated, often due to loss of employment and isolation⁸.

Although the MHSOAC defines parents and caregivers of children and youth to include biological parents, foster parents, and grandparents, United Parents and the Parents & Caregivers for Wellness collaborative (PC4W) partners have expanded that definition. "Parents and Caregivers" include biological parents, grandparents, siblings, other extended family members (related and non-related kin), foster and adoptive parents, parenting youth involved in the mental health system, and other permanent natural supports to youth. Each of these types of caregivers has unique experiences and needs which are described in **Appendix B**. The combination of partners in the collaborative represents all members of this broadened definition of caregivers.

⁴ Census Fast Facts. Retrieved from <https://www.census.gov/quickfacts/fact/table/sandiegocountycalifornia/POP010210#viewtop> on May 24, 2019.

⁵ California Housing Partnership Corporation. (2018). San Diego County's Housing Emergency and Proposed Solutions. (2018). Retrieved from <https://1p08d91kd0c03rlxhmhtydpr-wpengine.netdna-ssl.com/wp-content/uploads/2018/05/San-Diego-2018-HNR.pdf>

⁶ California Health Care Almanac <https://www.chcf.org/wp-content/uploads/2018/03/MentalHealthCalifornia2018.pdf>

⁷ <https://centerforyouthwellness.org/wp-content/themes/cyw/build/img/building-a-movement/hidden-crisis.pdf>

⁸ Centers for Disease Control and Prevention (December 2020) <https://www.cdc.gov/coronavirus/2019-ncov/community/health-equity/racial-ethnic-disparities/index.html>



Experiences of Parents & Caregivers: Current and Historical Trends

The mental or behavioral health needs of one child affects every member of the family. When a child has intensive difficulties, the needs of other children can be minimized or overlooked, especially when all children were at home without outlets at school or outdoors. Parents and caregivers who have a child with mental health or behavioral health needs frequently defer their own needs and in addition face stigma, social isolation, and frustration that appropriate resources for their child and family are not readily available. Accessing appropriate resources at all often requires that parents and caregivers navigate complex service system requirements, including issues around cost and coverage through insurance, extensive waitlists and wait times. During COVID, many of the resources needed were only offered virtually, or not at all.

Behavioral Health Issues Impacting Parents & Caregivers

Over the past four years, PC4W has consistently amplified through outreach to state and local policy makers what parents and caregivers most frequently say about what is needed to meet the mental health needs of their children:

1. Availability of high-quality mental health programs staffed by clinicians who are trauma-informed and experienced in addressing the issues presented by their child.
2. Concrete support for gaining access to care, including respite care, peer navigators, parent partners and support groups.
3. Non-discriminating services that are close to home and affordable with insurance regardless of whether a parent or child has Medi-Cal or private insurance.

Parents and Caregivers – Stories of Resilience

Parents and caregivers are the experts on what their child needs, and what they themselves need to support the child(ren) in their care. United Parents recognizes that the best way to understand what is needed for children to thrive in strong, secure families is to ask parents and caregivers directly.

Prior to the outbreak of COVID-19, PC4W made use of regional Family Voice Surveys, Key Informant Interviews, and Focus Groups with Parents and Caregivers. Gathering information in this way prior to each learning event provided crisp insight regarding immediate, priority needs. Training events and materials were developed and presented accordingly.

Parents and caregivers tell their stories, because as one parent said, “We definitely want to empower other caregivers and parents to reach out and not be afraid. I think fear is the biggest lie of all, the fear of no one is going to understand”.

During COVID-19, PC4W relied on the relationships with California parents, caregivers and partners that had been cultivated over the years. Whenever possible, they conducted virtual focus groups within a region. On the strength of this strong, trusting relationship with parent and caregiver allies and champions, United Parents was able to quickly gain a pulse on the most pressing needs. Their accuracy in hearing parent and caregiver voice was validated by the turnout to and feedback following each event.

The highest priority issues that emerged were related to their child’s educational needs, both their children’s and family’s mental health, and the lack of access to quality child care. In terms of struggling with virtual education and behavioral health, challenges ranged from balancing school and work, meeting their child’s special educational needs, and accessing needed behavioral health services. More specifically, families struggled with remote learning when they had multiple children in different grade levels in the home, sharing the same, possibly unreliable internet connection, no easy access to school meals, and older siblings who had to sacrifice their own learning to take care of their younger siblings while parents and caregivers worked essential jobs. Access to quality child care was an issue even before COVID, but was exacerbated when child care was only made available to essential workers.

As the pandemic is waning, child care is once again more readily available, but concerns around child care providers being trauma-informed remain. Without trauma training, child care providers are likely to expel a child who is “acting out”, rather than responding in a manner that helps the child to regulate their behavior and emotions. In turning the corner of the COVID-19 pandemic, students face increased fear and trauma after more than a year away from in-person learning. Mental Health America recently launched their annual Back to School toolkit, which aims to help students, parents, and school personnel recognize how feeling unsafe can impact mental health and school performance, and what can be done to help young people who are struggling with their mental health.

Mental Health America’s toolkit “Facing Fears, Supporting Students” can be downloaded at <https://mhanational.org/back-school>

Priority Issues as Defined by Parent and Caregiver Partners:

“Annette”

When her adopted son was 15 ½ years old, Annette was finally able to admit to herself that her son was “struggling with mental health disorders.” She asked herself, “How did we miss the warning signs?” and “Why did no one else see it?”

She and her husband were ‘foster to adopt’ parents of twin infants—her son and daughter. Her son had night terrors, entered preschool with an IEP, and was not able to be toilet trained until age 8. Annette often cried because she was not able to console her child. She said, “I knew in my heart something was wrong” yet, “...we wanted him to know that he belonged.”

As she was seeking help when her 15-year-old son’s behavior became completely unmanageable, someone asked her, “If you could have any one thing, what would it be?” She asked for a Family Advocate—and got one! Annette and her husband told the Advocate, “Nothing was working, we just didn’t give up...”

Her advice to all parents and caregivers is simple: “You’re only as strong as your community. Be kind to yourself and find people who can help. When you do, speak up. Be vulnerable and share what is really going on.”

Speaking of a family advocate, a parent in discussion said:

“I would just remember her telling us all the things we could’ve done differently, and I was like ‘I wish I would have had you at the beginning’”



Our Parent Artists

Mirian, Santa Clara County: The Norm

“I am a foster parent to a beautiful young bright youth who has struggled with her mental health and has had even more of a challenge with the pandemic during this past year. I wanted her to feel that art is another way to express and to also model the expression through art. I was excited to share my art and make sure we remind each other of the struggles with all the changes of staying safe yet also making sure we see how flexible, also adaptable, we can be. I hope my artwork shows the pandemic in a light of not taking away the moments with families or birthdays and births just a different way to connect and to motivate each other by still being safe.

The pandemic has made my youth see how important it is to keep contact with others and how much socializing is so important than just using a phone only. I feel that my daughter has enjoyed having conversations with friends when she can do it safely and see the importance of sharing her emotions with others. I have always used art as a self-care also to release any stress and to be mindful of what I am feeling to help me cope with any hard days. I hope my art can bring some smiles to others as well as some comfort to know we will get through the days during the pandemic together. I am here to be part of making us all more aware of mental health and how it's important to work daily to take the stigma away, so we accept the help that many struggle with. To make it more acceptable to reach out and find the needs to help those with mental health with different outlets like love of art.”



Our Parent Artists

Ana, Los Angeles County: The Puzzling Life

“The pandemic over the past year has been difficult for everyone, including all children. The house drawn with the variety of colors represents the Puzzling Life where events take place, both positive and negative ones. With the power of love, faith, and togetherness of friends and family, we can draw strength from each other as we move forward during these uncertain times.”





Our Parent Artists

Crystal, Los Angeles County: The World in Slow Motion & COVID Crazy

“COVID Crazy – I was inspired by COVID, forced to manage my time and money closely. I also had to think of new ways to teach my children, one of which was ADHD. But the bright side was family time at the park flying kites. The world in slow motion was created because COVID made me slow down, see what’s important, and it caused growth.”



Overview.

United Parents and Parents & Caregivers for Wellness (PC4W)

Who We Are

United Parents is a grassroots community-based nonprofit founded in 1990 on the basic principle of “parents helping parents.” With a deep understanding of the unique challenges of families raising children with emotional, behavioral or mental disorders, United Parents identifies and bridges gaps in traditional services by bringing local resources together to work with families to reach positive, long-term outcomes in the home and community.

United Parents is an advocate for families to be recognized as full partners in the treatment and care of their children, knowing that it is key to recovery and resiliency. With a proven track record in **providing resources to empower, strengthen, and support parents and caregivers** who have children with mental health, emotional, and behavioral disorders, United Parents was selected by MHOAC to in 2017 to become the lead organization for parents and caregivers, and continues to support and validate the work

Parents & Caregivers for Wellness raises awareness of the very real and immediate mental health needs of children/youth and those who care for them. Through outreach and engagement, PC4W increases knowledge of and access to appropriate quality mental health services for children and youth. This happens by activating partners, supporters, and policy makers to improve mental health services for children and youth regionally and statewide.

Participating in PC4W’s trainings and advocacy provides many benefits to parents and caregivers, including:

1. **Parents and caregivers become more trauma-informed.** Increasingly, parents are requesting referrals for their child’s treatment to someone who understands trauma work.
2. **A Holistic approach is best:** Research indicates as does our widespread work in the past 4 years, that parents and caregivers may need attention/services and supports as much as the children do. Parents and caregivers, as well as the children in their care, benefit most when systems and providers recognize that they must strengthen both child and family well-being.
3. **Peer to Peer support** (Parent or Family Partners) There is a growing recognition that peer partners with lived experience of having a child with their own special or mental health needs can provide tremendous support and resources to parents that feel overwhelmed and need to strengthen their parenting skills.



Goals

United Parents and Parents & Caregivers for Wellness continue to effectively support the goals set forth by the California's Mental Health Services Act (MHSA or Proposition 63). Prop 63 encourages the transformation of its mental health system by supporting the need for and development of a partnership between state and local level planning and program implementation. The intention behind the MHSA is to change not only the way people access mental health services and participate in policy planning, but to change public perception and stigma associated with mental illness.

Through Parents & Caregivers for Wellness, MHSA funding supports the goals of:

- System transformation
- Engagement and participation of Parents and Caregivers of Children and Youth
- Engagement of system partners and decision makers
- Family driven, culturally competent, and collaborative training and education to parents and caregivers, as well as those who provide services and supports to them

PC4W continues to grow as a statewide group and make significant inroads towards system transformation. Every event, every focus group, every training or presentation helps to demonstrate a better understanding of local ongoing and unmet needs and how to use that insight to ensure a holistic approach to working with families. PC4W continues to increase engagement and participation of parents and caregivers of children with mental health needs by engaging them locally in a family-friendly, supportive, and trauma-informed way.

What We Do

PC4W's main goal is to raise awareness of the mental health needs and challenges of children and youth and those who care for them. Through outreach, training, and engagement, PC4W aims to increase knowledge of and access to appropriate quality mental health services for children and youth. Additionally, PC4W works to activate partners, supporters, and policy makers across the state to improve mental health care for children and youth. During this past year, all activities (with the exception of the regional event in Butte County) continued to be provided virtually in accordance with California's safety guidelines and protocol.

Activities Included

1. Community Engagement and Outreach

- To inform, engage, and empower parents and caregivers of children and youth with mental health needs to effectively influence policies and programs at both the state and local level,
- To encourage access and linkage to community services and supports, and promote wellness and resiliency.
- To develop and provide fact sheets, infographics, newsletters, reports, and other tools to inform parents and caregivers about mental health policies, programs and supports.
- To promote communication tools to guide state and local decision makers in expanding budgets to increase the service array and system capacity of mental health services to children and youth with mental health needs.

2. Training and Education

- To develop and provide activities for parents and caregivers as well as for local and state decision makers, and providers.
- To ensure focus on skills development, increasing knowledge and awareness, and understanding of the strengths and needs of children/youth with mental health challenges, and the needs and strengths of their parents and caregivers.
- To identify local topics as well as local advocacy strategies for engaging with elected and appointed officials, leveraging boards and commissions, and collaborating with local decision makers specific to each region.

3. Local and statewide advocacy

- PC4W actively educates and collaboratively engages parent advocates/partners and policy/decision makers on the issues and gaps in services expressed by parents and caregivers in each of the five County Behavioral Health Directors Association of California (CBHDA) Regions.
- Coordinate and facilitate a statewide Annual Advocacy Day at the Capital

4. Connecting families to local resources and services

- PC4W empowers, strengthens, and supports parents/caregivers to be their child's best advocate by linking them to resources and community agencies able to meet the needs of families experiencing difficulty accessing essential services. During the COVID-19 pandemic PC4W and all its partners leveraged resources to provide calls, support and tangible resources to parents they had come into contact with who were experiencing extreme stress, hopelessness, and isolation.

5. Supplemental Events

- PC4W continues to be responsive to requests from parents. Generally, at each PC4W regional training there is at least one parent or provider who asks if a training can be provided in their home county to a specific group of parents and caregivers and/or providers who work with them. As capacity allows, PC4W prioritizes and responds to these requests from the field.

6. Flexibility in times of crisis

- To meet the continued needs of parents and caregivers, PC4W was able to quickly pivot its activities and services to a virtual platform during COVID-19 shelter-in-place restrictions and continued with virtual service delivery throughout the year, understanding that while families needed to be safe, they also had increased needs for support due to the COVID-19 pandemic. This allowed for continuity of support at a time when it was desperately needed.

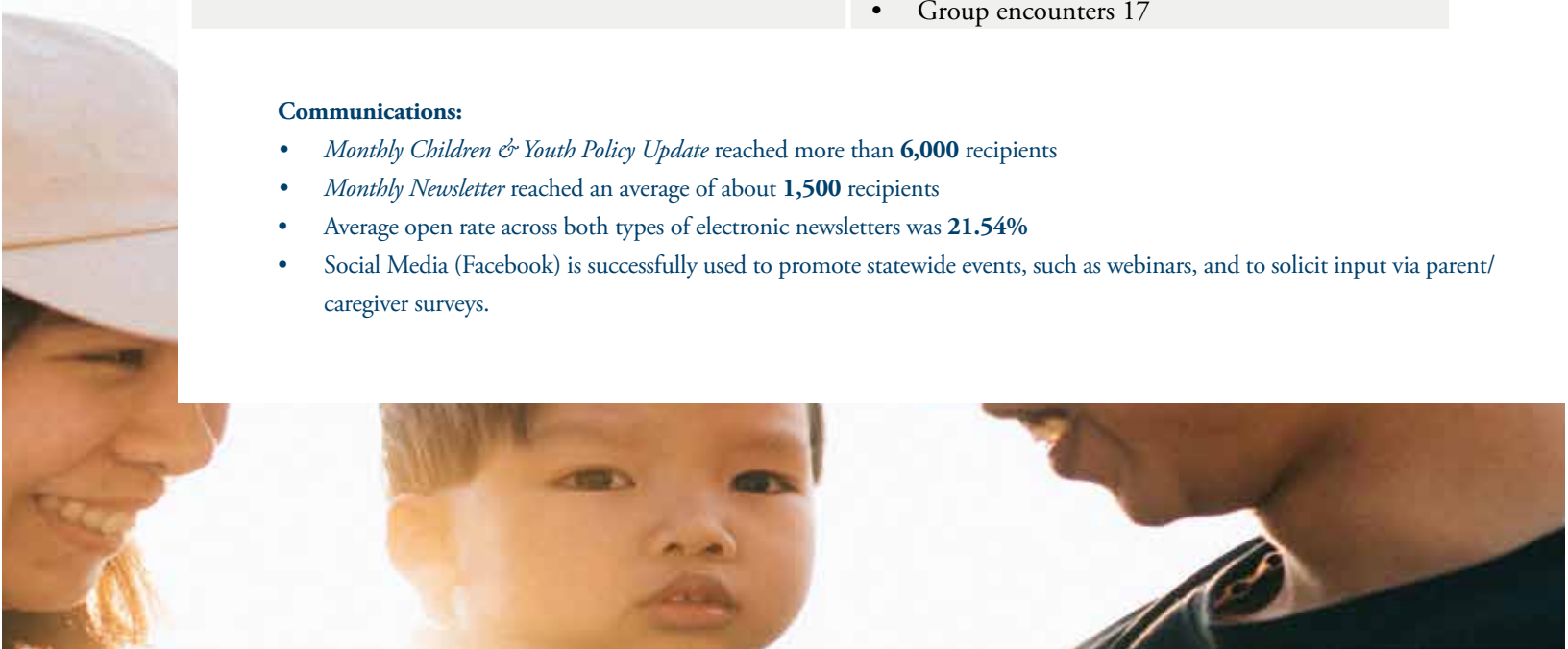


2020-2021 Highlights & Accomplishments At-A-Glance

Type of Activity	Location	# of Participants
Regional Events (Advocacy Meetings, Focus Groups, Presentations)	Los Angeles	65
	Southern/San Luis Obispo	76
	Bay Area/Santa Clara	148
	Central/Inyo	88
	Superior/Butte	29
Trainings		
Talk, Saves Lives (Suicide Prevention Webinar)	Statewide Webinars	94
Feeling Safe, Being Safe: Disaster Preparation Training		43
Creating a World Without Bullying		77
Trauma-Informed Parent Coaching, part 1		139
Trauma-Informed Parent Coaching, part 2		125
Trauma-Informed Parent Coaching, part 3		114
Body Image Problems and Eating Disorders in Young		65
United Parents Presents: Parents and Caregivers for Wellness Day at the Capitol (Annual Advocacy Day)	Statewide	72
Conference Presentation at CMHACY	Statewide	50
CalHOPE/FEMA	<ul style="list-style-type: none"> We have had direct contact with 38,814 parents/caregivers throughout the state. Individual crisis services (encounters over 15min) = 460 Group encounters 17 	

Communications:

- *Monthly Children & Youth Policy Update* reached more than **6,000** recipients
- *Monthly Newsletter* reached an average of about **1,500** recipients
- Average open rate across both types of electronic newsletters was **21.54%**
- Social Media (Facebook) is successfully used to promote statewide events, such as webinars, and to solicit input via parent/caregiver surveys.



Regional Event #1 – Los Angeles

Engagement	Trainings & Presentations
<ul style="list-style-type: none"> • Extensive outreach was conducted through multiple communications channels, using websites, newsletters and social media (Facebook) of both United Parents/PC4W and partner organizations • Three (3) focus groups were held in LA County (via zoom) 	<ul style="list-style-type: none"> • “Building Your Family’s Crisis Toolkit”, presented by: Dayna Freier, MAOL, Program Director, California Alliance of Caregivers • “Supporting Distance Learning”, presented by: Jennifer Rexroad, Executive Director, California Alliance of Caregivers • “Advocacy: How to Be Your Child’s Advocate – and Feel Confident in Doing So”, presented by Pam Hawkins, Policy Analyst, United Parents • “Strengthening Professional Boundaries”
Advocacy & Partnerships	
<ul style="list-style-type: none"> • United Parents organized the event with assistance from PC4W partners • All parents/caregivers were invited to attend Annual Advocacy Day in Spring 2021 • PC4W met with key LA partners: <ul style="list-style-type: none"> • To exchange contact information for <ul style="list-style-type: none"> • Parent partners representing each Service Planning Area • Managers who are co-located within the Department of Child and Family Services (DCFS) offices and oversee Mental Health Programs for the child welfare involved children and youth, and those who oversee adult and non-child welfare Mental Health Programs. • Discussed SB 803 and request an LA County point of contact to be invited to PC4W’s monthly workgroup. • Discussed needs expressed by parents/caregivers (shared via infographic) using survey data. 	
Impact	
<ul style="list-style-type: none"> ✓ Beyond the regional engagement and trainings in the Los Angeles region, the LA County parents/caregivers were provided beneficial resources and were connected to future events & trainings as well as advocacy events. ✓ Participants who attended the event were later emailed a useful document provided by Anabel Rodriguez (LCSW, Deputy Director Child Welfare Division, LAC Department of Mental Health) of parent partner advocates representing each Service Planning Area (SPA) in Los Angeles County. ✓ Anabel wanted to be added to our Policy Newsletter email list. We gave her information on agencies in the area that have been helpful in connecting families to resources and services such as Fostering Unity. 	

Regional Event #2 - Southern Region/San Luis Obispo

Engagement	Trainings & Presentations
<ul style="list-style-type: none">• Flyers developed and widely distributed to key contacts in San Luis Obispo (SLO) with community behavioral health providers and families they serve; posted on websites, and social media (PC4W's Facebook)• Shared via monthly newsletter• Outreach to establish relationships and new collaboration with local SLO County mental health agencies• Scheduled 3 focus groups with two being conducted	<ul style="list-style-type: none">• CAC partner, Dayna Freier presented "Building Your Family's Crisis Toolkit"• Presentation from Pam Hawkins, Policy Analyst for United Parents called "Advocacy- How to Be Your Child's Advocate – and Feel Confident in Doing So"• Presentation by Kate Messina, PHD, LCSW, RYT from <i>The Wisdom Path Way Reparative Parenting Approach</i> called "Trauma-informed parent coaching"• Hosted a webinar for professionals presented by partner Jessie Slafter from East Bay Children's Law Offices called
Advocacy & Partnerships	
<ul style="list-style-type: none">• SLO decision makers were invited to Advocacy Day at the Capitol• PC4W met with Jill Rietjens, LMFT, Behavioral Health Division Manager/Youth Services San Luis Obispo County Health Agency to discuss the work that PC4W has done across the state for over the past three years. They also discussed how difficult it was to get parents and caregivers to attend the virtual regional event.• United Parents worked with all its main partners that comprise Parents and Caregivers for Wellness (EBCLO; CMHACY; & CA Alliance of Caregivers)	
Impact	
<ul style="list-style-type: none">✓ Many new contacts made and added to master list to receive monthly newsletters and monthly Children's Policy Newsletters✓ Kate Messina's presentation on Trauma-Informed Parenting garnered so much attention that parent partners requested a parent partner specific training. A three-day training specifically for parent partners was developed and scheduled for delivery.	



Regional Event #3 – Central Region/Inyo County

Engagement	Trainings & Presentations
<ul style="list-style-type: none"> Flyers were developed and widely distributed to key contacts in Inyo County with community behavioral health providers and families they serve; posted on websites, and social media (PC4W's Facebook) Shared via monthly newsletter Outreach to establish relationships and new collaboration with local Inyo County mental health agencies Multiple focus groups were held in December for the Inyo County event to be held in January. To address the fact that the term „focus group“ doesn't seem to attract a lot of parents/caregivers, focus groups were renamed to „Let Your Voice Be Heard.“ 	<ul style="list-style-type: none"> CAC partner, Dayna Freier presented “Building Your Family's Crisis Toolkit” Presentation from Pam Hawkins, Policy Analyst for United Parents called: “Advocacy - How to Be Your Child's Advocate and Feel Confident in Doing So” This presentation also provided attendees with key Inyo County behavioral health contacts, county supervisors, senator/assembly member contact information and local parent advocate information. Presentation by Kate Messina, PHD, LCSW, RYT from <i>The Wisdom Path Way Reparative Parenting Approach</i> called “Trauma-informed parent coaching” Hosted a webinar for professionals presented by our partner Jessie Slafter from East Bay Children's Law Offices called “Strengthening Professional Boundaries”
Advocacy & Partnerships	
<ul style="list-style-type: none"> United Parents worked with all its main partners (Parents and Caregivers for Wellness; CMHACY; & CA Alliance of Caregivers) Stayed in contact with Inyo County decision makers to invite them to upcoming Advocacy Day at the Capitol PC4W partners met with Chrystina Pope, Program Chief, Children's System of Care Psychotherapist Inyo County Behavioral Health and Gail Zwier, Ph.D., HHS Deputy Director Behavioral Health Division. <ul style="list-style-type: none"> Needs of parents/caregivers, such as lack of childcare due to COVID, were addressed. Discussed need for trusted connection/liason to the local Native American population to increase provision of MH services for this population. 	
Impact	
<ul style="list-style-type: none"> ✓ Many new contacts were made and added to master list to receive monthly newsletters and monthly Children's Policy Newsletters 	

Regional Event #4 - Bay Area Region/Santa Clara County

Engagement	Trainings & Presentations
<ul style="list-style-type: none"> • The Local Level Entity, California Alliance of Caregivers, developed and distributed flyers to local Santa Clara County Behavioral Health, Community Mental Health providers and other community entities who connect with families • PC4W Partners and CAC met with key contacts to discuss and plan for the event and get feedback on the best practices in outreach in their community. • Pre-event meeting invitees and participants included representatives from Vision y Compromiso; the State Council on Developmental Disabilities; Parents Helping Parents; California START Services San Andreas; and several outreach and mental health specialists connected to the Chinese Community. • Outreach was conducted doing three focus groups in English, Spanish and Vietnamese, two key informant interviews and approximately 60 individual surveys were collected from parents of children with mental health needs. 	<ul style="list-style-type: none"> • Tiffany Loeffler from The Alliance, Defending the Cause of Children and Families provided a dynamic presentation for parents and caregivers called “Understanding & Responding to Childhood Trauma”. • Santa Clara County Community Resources Panel comprised of short presentations from three community agencies (NAMI, Santa Clara; Parents Helping Parents; and The Bill Wilson Center) providing behavioral health services to youth in Santa Clara County • Presentation from Pam Hawkins, Policy Analyst for United Parents called “Advocacy - How to Be Your Child’s Advocate – and Feel Confident in Doing So”. • Hosted a webinar for professionals presented by PC4W partner Jessie Slafter from East Bay Children’s Law Offices called “Strengthening Professional Boundaries”
Advocacy & Partnerships	
<ul style="list-style-type: none"> • United Parents worked with LLE and PC4W partner, CA Alliance of Caregivers, to plan the event. The training topics were chosen based on the community needs reflected in the focus groups, key informant interviews, and survey data. • County Leadership had questions about some of the services that parents were accessing in the county, and how Local Education Agencies were serving students. It was noted that most of the individual surveys were collected from foster and adoptive families who access behavioral health services and support. They asked for the information to be presented to the child welfare agencies and expressed interest in further partnership with Parents & Caregivers for Wellness. There was an interest in using partnerships/social media to disseminate information. • Leadership was interested in promoting future training opportunities and using partnerships and social media to disseminate information. 	
Impact	
<ul style="list-style-type: none"> ✓ A fact sheet was prepared to share a visual representation of the feedback gathered from the individual surveys and this data was shared and discussed with Santa Clara County leadership ✓ Santa Clara County Behavioral Health was embarking on their MHSA FY ‘22 Annual update and suggested PC4W’s data, infographic, and other information would be useful. 	

Regional Event #5 – Superior Region/Butte County

Engagement	Trainings & Presentations
<ul style="list-style-type: none"> Local Level Entity, Capital Adoptive Families Alliance, created and distributed Flyers to key contacts in Butte County with assistance from the well-connected Community Based Organization, Youth 4 Change. Flyers were posted on websites, and social media (PC4W's Facebook) Focus groups were held, key informant interviews were conducted, and surveys were collected. 	<ul style="list-style-type: none"> United Parents, Event Manager, Cindy Claflin presented Self-Care for parents and caregivers. Presentation from Jay Scoffield, Policy Analyst for United Parents called "Advocacy-How to Be Your Child's Advocate – and Feel Confident in Doing So" This presentation also provided attendees with key Butte County behavioral health contacts, county supervisors, senator/assembly member contact information, local mental health resources, and COVID-19 resources Jennifer Rexroad, Executive Director, California Alliance of Caregivers presented "Creating Your Crisis Toolkit" Hosted a webinar for professionals presented by our partner Jessie Slafter from East Bay Children's Law Offices called "Strengthening Professional Boundaries"
Advocacy & Partnerships	
<ul style="list-style-type: none"> United Parents worked with LLE, Capital Adoptive Families Alliance and PC4W partner, CA Alliance of Caregivers, to plan the event. PC4W Partners and LLE, CAFA, connected with local decision makers and presented them with key information from surveys, focus groups and key information interviews Partners discussed follow-up on respite promise by Butte County officials from 5 years ago; respite offered is still through regional services supported by different funding streams but the fires and COVID have limited services and cancelled programs. Discussion focused on challenges for parents and caregivers finding support, especially with mild to moderate needs. Shared what PC4W can do and discussed how Butte County can learn from what is working in order to grow what is already in place. 	
Impact	
<ul style="list-style-type: none"> ✓ Many new contacts made and added to master list to receive monthly newsletters and monthly Children's Policy Newsletters ✓ In 2024 Butte County is changing to Partnership medical services through MediCal. This should open doors for more services and help the mild to moderate cases. ✓ Butte County Behavioral Health looked to PC4W for assistance on how to help more families. 	

FIRST Annual Advocacy Day

Prior to COVID, parents and caregivers let United Parents know that they have little or no access to policy makers or administrators, so that they can inform them of their actual, relevant needs. Parents and Caregivers want to ensure that programs are not geared towards meeting general needs only, but rather are informed by the actual voice of parents regarding their child's specific needs. In this past year, PC4W met this need in part by virtually convening the first Annual Advocacy Day at the Capital. The United Parents team put great effort into planning by engaging many parents, caregivers, and community stakeholders during intensive outreach. Due to the COVID-19 pandemic, Advocacy Day was a virtual event just like all other events during this past year. Part of the planning included hospitality for all participants - nutritious snacks and beverages delivered to their homes ahead of the event by Snack Magic. This generous gesture was symbolic of welcome and nurture.

“I want to be part of this again!”-Anonymous Parent/Caregiver

The United Parents **Legislative and Public Policy Platform** was central at the convening. It provides a broad policy framework to set the agenda for policy issues relating to the behavioral health care needs of children, youth and their families and primary caregivers in California. United Parents' policy positions are based on the core belief that the emotional and behavioral health care needs of children in California must be effectively addressed.

Please review Appendix F for Legislative Information and Activities.

HIGHLIGHTS from the First Annual Advocacy Day

California Senator Scott Wiener welcomed everyone. He is the Chair of the Senate Caucus for Mental Health. Senator Scott Wiener represents San Francisco and northern San Mateo County in the California State Senate. Elected in 2016, Senator Wiener focuses extensively on housing, transportation, civil rights, criminal justice reform, clean energy, and alleviating poverty. He chairs the Senate Housing Committee and is Vice Chair of the California Legislative Jewish Caucus. He is the immediate past Chair of the California Legislative LGBTQ Caucus.



Senator
Scott
Wiener

Start the Day at Peace



Cindy Claflin

Cindy Claflin, Events Manager, United Parents set the tone by inviting everyone to start the day at peace. She introduced the **“butterfly hug”** which is where a person extends their arms to their left and right, and then gently embraces themselves. This is done while setting one’s intention and saying, “May I be happy and healthy, and at ease today,” a peaceful affirmation that demonstrates self-compassion. The butterfly hug is a tool that can be used anytime to take a mindful moment. As one parent said, **“If you don’t do self-care, how are you going to show up and be present?”**

The Keynote Address was presented by **Stephanie Welch**, Deputy Secretary of Behavioral Health, California Department of Health and Human Services. As Deputy Secretary she acts as a lead advisor to the Secretary of CHHS and other state departments on behavioral health policy. In addition, the Deputy Secretary builds bridges across various government sectors and with stakeholders from diverse perspectives.



Stephanie Welch



Adrienne Shilton

Participants were provided with a review of Advocacy Day and Information on Legislative Visits by **Adrienne Shilton**, senior policy advocate for behavioral health at the Alliance of Child and Family Services. As such, Adrienne is the primary staff to the Mental Health Committee and works on public policy issues pertaining to children’s mental health. She has been the government affairs director at the Steinberg Institute since 2017. She is a recognized expert in mental health policy who has devoted her career to improving the well-being of people living with brain illness and substance use disorders. Adrienne became involved in mental health policy as a key staff person in the campaign to pass the 2004 Mental Health Services Act.

Before providing an overview of Senate Bills 14 and 224, Adrienne invited everyone to reflect on:

1. **What brings you to the table today?**
2. **Why is it important to speak up for mental health?**

All participants were grouped into small teams to conduct virtual Legislative Visits with a number of legislators before the final speaker of the day took the stage

Senator Portantino, the Author of SB 14 and SB 224, gave the closing address. Senator Anthony Portantino represents California’s 25th State Senate District and is a leader in his support of public education, mental health, and sensible gun control. His accomplishments include increasing funding for special education and the K-12 Local Control Funding Formula. He has authored legislation that created California’s umbilical cord blood collection program, pushed back school start time for middle and high schools, banned the open carry of handguns on Main Street California, raised the purchase age of firearms to 21, and placed the suicide hotline number on student identification cards. In addition, his efforts have created a science fellowship in the State Capitol and established a unique partnership between the University of California and Historically Black Colleges and Universities.



Senator Anthony Portantino

The senator shared a deeply personal account of the tragic consequence of mental health concerns of a close family member. This was in part the inspiration behind his support of recent legislation to ensure school personnel recognize and respond to student mental health concerns. Finally, he pointed out the need to be gentle with ourselves and others as we reacclimate and return to a new normal following the pandemic.

Participant Report Out

Participants were offered an opportunity to reflect on and share their experience from the day.

They wanted to know:

- What is a Mental Health First Aide, and where can I learn more about it?
- Do we (as parents and caregivers) have any influence on what is to be taught under SB 224?
- Can the teaching be delivered by a person with lived experience?
- How does a bill become law?
- How can I modify and make use of sample support letters?

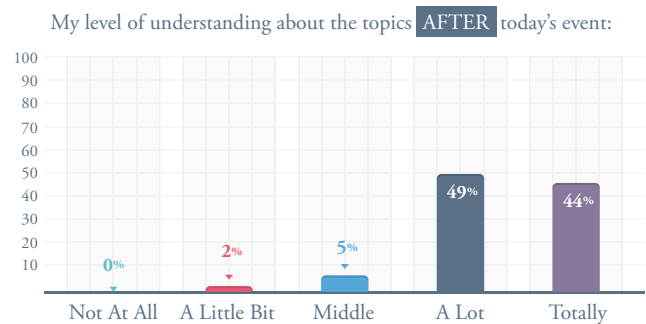
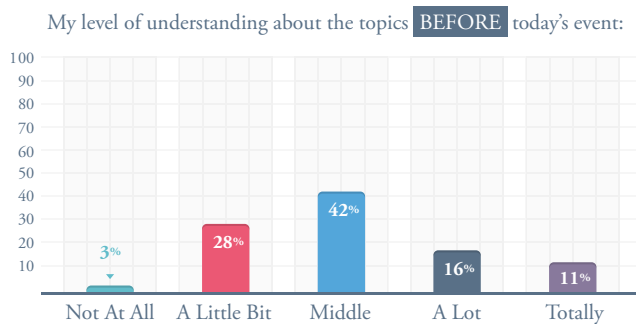
Participant Evaluation Highlights

A total of 72 participants attended and more than half (38) submitted responses to the meeting evaluation request.

- Large majority (more than 90%) found the materials helpful in advocating for children's mental health
- Large majority (almost 90% of respondents) confirmed that they gained tools to advocate for a child in their care

What was the best part of your experience during Advocacy Day?

- Speaking with Senators and their staffers.
- Speaking up and providing input.
- Feeling heard.
- Learning from the different speakers and connecting with others.



“I will continue the fight to improve children’s lives.” -Anonymous Parent/Caregiver

How will you use the information you received today going forward?

Overarching theme is that parents and caregivers were inspired to advocate for children and families. Overwhelming majority stated that they will educate others and use their newly acquired knowledge and understanding to continue to fight for their own children as well as other kids and their families. The importance of mental health was raised, and many participants stated that they will inform others about legislation that will improve mental health and that they intend to continue to learn about it.

“I am looking forward to reaching out by email with personal experiences to encourage these bills forward.” -Anonymous Parent/Caregiver

Looking Ahead

When challenging times are intense and sustained, they bring uncertainty and loss, but also an opportunity to grow hope and resilience. Although it may be difficult, it is not impossible to look beyond the difficulties to see “silver linings.”

Every day United Parents hears from parents and caregivers who share about new and unseen benefits, such as:

- A deeper sense of intimacy and belonging within families for having met the challenge together
- Renewed appreciation for and commitment to valued relationships and time spent together
- Communities coming together to give and receive mutual support
- Parents and caregivers taking on new roles such as educator, play partner, art director, inspiration, and much more
- Digital access, despite steep learning curves, that helps everyone be more connected and in touch with others
- An undeniable sense of having faced the challenge of our lifetime and kept ourselves and our families safe

Our hearts go out to those who lost loved ones. We trust the memories of good times bring comfort and peace.

In parallel fashion, United Parents recently embarked on a leadership transition when Lori Litel, United Parent’s Executive Director for the past 6.5 years, announced her retirement. We know as an organization, we can be strong and resilient, continuing the legacy Lori leaves us with. We wish Lori much joy and happiness in the adventure that awaits her in the years ahead.

As the incoming Executive Director, Melissa Hannah will serve the community with the utmost care and respect for the parents, caregivers, and families we serve. She will carry on the traditions that have brought dignity and hope to so many, while promising to bring new ideas and innovation to challenges that may continue to arise.

Please join us in looking ahead to a brighter future, full of hope.

Appendices

Appendix A.

Collaborative Partners

Appendix B.

Expanding Definition of Parents & Caregivers

Appendix C.

Alphabet Soup (Acronyms)

Appendix D.

Statewide and Local Services and Supports
for Parents and Caregivers

Appendix E.

Advocacy Events

Appendix F.

Children and Youth Policy 2021

Appendix G.

FEMA/CalHOPE



Appendix A

PC4W Collaborative Partners

The following collaborative partners comprise Parents and Caregivers for Wellness:

United Parents

United Parents (UP), the lead organization for Parents and Caregivers for Wellness, is a grassroots nonprofit agency founded in 1990 on the basic principle of “parents helping parents.” Understanding the unique challenges of families raising children with emotional, behavioral or mental disorders, UP identifies and bridges gaps in traditional services by integrating local resources to enhance the long-term outcomes in the home and community. UP advocates for and empowers families to be recognized as full partners in the treatment and care of their children, which is key to recovery and resiliency.

For more information see <https://www.unitedparents.org/>

California Alliance of Caregivers

CAC represents the voices of relative and non-relative caregivers (resource, foster, kinship, and adoptive families) to promote the well-being of children in foster care. CAC was established in 2016 by a group of foster parents and community members committed to prioritizing the interests of children in foster care and providing an active and regular caregiver voice in statewide discussions on child welfare policy and legislation.

For more information see <https://www.cacaregivers.org/>

California Mental Health Advocates for Children and Youth

California Mental Health Advocates for Children and Youth (CMHACY) was launched by the State Department of Mental Health along with a handful of County Children’s Coordinators. This small group met at a state park retreat grounds, known as Asilomar, in the town of Pacific Grove, Monterey County in 1980. This bold group of leaders began to speak out and advocate about the lack of coordination between public child serving agencies that children and youth were “falling between the cracks”, and that youth, parents and caregivers had no voice in the delivery of their own services. This advocacy effort aligned with the initiation of the Children’s System of Care (CSOC) and became the foundation of CMHACY’s annual conference theme. The CMHACY Conference grew dramatically, gaining countless supporters across the state, sustaining itself to this day, averaging as many as 600 attendees and celebrating its 40th anniversary. Each year the conference highlights the best practices, the most cutting-edge programs and current statewide initiatives and policies that are, and/or will affect our children, youth and families. Every conference results in the transfer of learning that is taken back to home communities, enhanced networks and a Call-to Action.

For more information see <http://cmhacy.org/>



Appendix A

PC4W Key Collaborative Partners

East Bay Children's Law Offices (EBCLO)

East Bay Children's Law Office's (EBCLO) mission is to protect and defend the rights of children and youth in the Alameda County, CA juvenile court through vigorous and compassionate legal advocacy in and outside of the court. We provide holistic support to more than 90% of Alameda County's foster youth, ranging in ages from 0–21. Our advocacy, in and out of the court, ensures that our clients' needs are met through the provision of adequate services, promotion of family reunification or permanence, maintenance of family connections, and promotion of educational and mental health stability. EBCLO was founded in 2009 by a group of attorneys and community members when the Alameda County public defender stopped providing legal representation for children in the juvenile dependency court system.

For more information see <https://www.ebclo.org/>

PC4W Key Statewide Partners

The following people have been instrumental in our efforts to provide training and education to parents and caregivers over the past year. United Parents and our PC4W partners appreciate and thanks each one for all that they do. As partners, each contributed to the shared work of supporting families through unprecedented times. Their commitment was instrumental in connecting with parents and caregivers in new ways when our prior methods were not possible..

A

- **Catherine Aspiras**, Behavioral Health Services, Santa Clara County

B

- **Susie Baker**, Program Specialist/Parent Partner for Children's System of Care, Kern County Behavioral Health Resource Services
- **Marylud Baldwin**, Parent Advocate, San Luis Obispo County
- **Jose Betancourt**, Program Manager, Mental Health Advocacy Project, Bay Area Region, Vision y Compromiso
- **Alex Bruun**, LCSW, Program Manager, CCCC and Paradise, Butte County

C

- **Jamie Cabrera**, Staff Assistant, Chair Hilda L. Solis, Supervisor Los Angeles County First District
- **Carolyn Cooper**, parent/grandparent advocate
- **Zelia Faria Costa**, Director CYF System of Care, Santa Clara County
- **Evelyn Cortez**, Parent Partner Advocate, Bayfront Youth and Family Services, LA County
- **Irene Covarrubias**, Director of Counseling Services, Bill Wilson Center

D

- **Dorothy Daniels**, Deputy Director, Fostering Unity

F

- **Kathy Forward**, NAMI Santa Clara County
- **Dayna Freier**, Director of Operations, Fostering UNITY Los Angeles and Sacramento counties
- **Lady Freire**, Program Manager, Vision y Compromiso, Contra Costa County
- **Judy French**, PACER's National Bullying Prevention Center

G

- **Gregory Glazzard**, Probation Division Manager – Juvenile Division, Monterey County Probation
- **Leslie Grace Sulite Xu**, Case Manager, BPSOS Center for Community Advancement
- **David Grady**, Central Coast Regional Manager, State Council on Developmental Disabilities

H

- **Claudia Harty**, CFS Program Manager, Parents Helping Parents
- **Susan L. Holt**, LMFT, Deputy Director, Clinical Operations, Dept. of Behavioral Health, County of Fresno
- **Celeste Hunter**, Certified Grief Recovery Specialist/Advocate, UPAC/Alliance for Community Empowerment (ACE) Program

I

- **Shannon Iacobacci**, Parent Coach, Circle of Hope Consulting Services, FASD Network of Southern California

PC4W Key Statewide Partners

J

- **Maretta Juarez, LCSW**, Deputy Director, Service Delivery System County of Santa Clara Behavioral Health Services Department

K

- **Scott Kennelly, L.C.S.W.**, Director Butte County Behavioral Health
- **Dorian Kittrell**, Director of Behavioral Health Services, Butte County
- **Yael Koenig**, Deputy Director, Behavioral Health Children, Youth and Families, County of San Diego HHSA Behavioral Health
- **Dina Kokkos-Gonzales**, Chief, Mental Health Services, Department of Health Care Services

L

- **Margaret Ledesma**, Mental Health Program Specialist, Santa Clara County
- **Tiffany Loeffler**, Executive Director, The Alliance: Defending the Cause

M

- **Andrea D. Murray, PhD**, Licensed clinical psychologist, Certified trainer/consultant, Academy of Behavioral & Cognitive Therapies, West Coast CBT

N

- **Monica Nepomuceno**, Education Programs Consultant Mental Health Services Programs, California Department of Education
- **Nancy Nguyen**, Behavioral Health Services Department County of Santa Clara Health System

P

- **Beth Parsons**, CEO Youth For Change
- **Jennifer Pham**, Division Director Family & Children Services, Santa Clara County
- **Chrystina Pope**, Program Chief, Children's System of Care Psychotherapist, Inyo County Behavioral Health

R

- **Yolanda M Ramirez**, Coordinator of Family Education and Support (WOC), Office of Consumer & Family

Affairs, San Mateo County BHRS

- **Angela Riddle**, LCSW Training and Workforce Development Manager, Ventura County Behavioral Health
- **Jill Rietjen**, LMFT, Behavioral Health Division Manager/Youth Services San Luis Obispo County Health Agency
- **Anabel Rodriguez**, LCSW, Deputy Director Child Welfare Division, LAC Department of Mental Health

S

- **Claudia Saggese**, (WOC) Director, Office of Consumer & Family Affairs, San Mateo County BHRS
- **Stephanie Schonian**, Volunteer/Outreach Manager, NAMI Santa Clara County
- **Jana Sczersputowski**, Content Expert/Trainer, Directing Change
- **Adrienne Shilton**, Senior Policy Advocate, CA Alliance of Child and Family Services
- **Susan Steele**, Resource Parent Advocate, Santa Clara County
- **Chris Stoner-Mertz**, Executive Director, California Alliance of Children & Family Services

T

- **Rachel Talamantez**, Behavioral Health Division Director, Santa Clara County
- **Sherri Terao**, Ed.D., IFECMH Specialist, RPFM, Santa Clara County Behavioral Health Director
- **Nathan Thomas**, CPS Shelter Manager, Santa Clara County

W

- **Wendy Wang**, MPP, Vice President, Public Policy and Advocacy Hathaway Sycamores, Los Angeles County
- **Elise Weinberg**, J.D. Assistant Chief of Staff, Hilda L. Solis, Supervisor Los Angeles County First District
- **Stephanie Welch**, MSW, Deputy Secretary, Behavioral Health, California Health and Human Services Agency
- **Susan Wilson**, Executive Director, Youth Options, Shasta County

Z

- **Jeanette Zollinger**, AFSP Board Co-Chair - Los Angeles & Central Coast Chapter, Out of the Darkness Experience Co-Chair - Ventura County
- **Gail Zwier**, Ph.D.HHS, Deputy Director Behavioral Health Division County of Inyo

A Very Special THANK YOU to:

- Gigi Perry, our fantastic and wonderful Spanish Translator/Interpreter
- Ahmad Bahrami, MBA, Division Manager-Public Behavioral Health, Fresno County Department of Behavioral Health, and the entire Fresno County

Behavioral Health Department who has been instrumental in incorporating the parent voice in all Fresno County Mental Health decisions.

- Anna Paravano, MS, Interior Designer & Trauma-Informed Parent who has helped us help our families understand trauma and connect them to much needed resources.
- Tanya McCullom, Program Specialist, Alameda County Behavioral Health Care Services, Office of Family Empowerment.
- Carmen Diaz, Parent Advocate Countywide Administration, Sr. Community Worker II, LA County Department of Mental Health
- Annette Kapaona, adoptive parent extraordinaire who has been an advocate for parents throughout the State and has shared her story to help other parents navigate the mental health system



Appendix B

Expanding Definition of Parents & Caregivers

Although the MHSOAC defines parents and caregivers of children and youth to include biological parents, foster parents, and grandparents, PC4W's collaborative partners have expanded that definition. "Parents and caregivers" include biological parents, grandparents, siblings, other extended family members (related and non-related kin), foster and adoptive parents, neighbors, mentors, legal representatives, court appointed special advocates, parenting youth involved in the mental health system, and other permanent natural supports to youth. Each of these types of caregivers has unique experiences and needs which will be described below.

Biological Parents: The standard dictionary definition for biological parent is "a parent who has conceived (biological mother) or sired (biological father) rather than adopted a child and whose genes are therefore transmitted to the child."

Kinship Caregivers: Kinship care refers to the care of children by relatives or close family friends. Relatives are often the preferred caregiver for children who cannot live with their birth parents, because it maintains a child's connections with his or her biological family.

Grandparents: Grandparents are kinship caregivers who were the parent or caregiver of a child now in the care of the grandparent. As caregivers, grandparents often face additional challenges when they take their grandchildren into care, such as financial and health concerns, and conflicted relationships with their own children.

Foster (or "Resource") Parents: Foster care is part of the child welfare system and involves a child or youth being taken into care when the parent or caregiver is unable to safely care for and nurture the child. These children and youth are often cared for in private homes of a certified caregiver, referred to as a "foster parent," or in California, as a "resource parent."

Guardianship Parents: Legal guardianship is a court order that says someone who is not the child's parent is in charge of taking care of the child. Guardianship suspends the parental rights of the parents; it does not terminate the parental rights. Guardianship can also be terminated at any time through the court.

Adoptive Parents: An adoptive parent is one who has adopted a child who was not born from him/her/them. At the time of the adoption, the child becomes legally his/her/theirs, just as if the child were born from him/her/them.

Parenting Youth: Every year, there are approximately 750,000 teen pregnancies and 400,000 teen births in the United States, although teen pregnancies have been on a decline, going from 17.4 per 1000 females in 2018 to 16.7 per 1000 females in 2019. However, the US continues to have a substantially higher rate of teen pregnancy compared to other developed nations (CDC, 2021). Furthermore, nearly 3 in 10 girls get pregnant at least once before age 20; with higher rates reported among youth of color. Because they are teens, parents, and often low-income, they need strong support networks and a comprehensive array of resources to help them parent effectively while working toward becoming self-sufficient adults.



Appendix C

“Alphabet Soup” (Common Acronyms)

While it is almost always preferable to state the full name of an organization, or condition affecting children and families, the following acronyms are frequently used:

Key Concepts/Organizations Acronyms

300: (Defined by WIC 300) Victims of child abuse or/and neglect
600: (Defined by WIC 602) Juveniles become wards of the court after committing a crime

AB: Assembly Bill

ADD: Attention Deficit Disorder

ADHD: Attention Deficit Hyperactivity Disorder

ACEs: Adverse Childhood Experiences

ACIN: All County Information Notice

ACL: All County Letter

ADA: Average Daily Attendance

ARC: Approved Relative Caregivers

BD: Bipolar Disorder

BDD: Body Dysmorphic Disorder

BHS: Behavioral Health Services

BPD: Borderline Personality Disorder

CalAIM: California Advancing and Innovating Medi-Cal

CalSWEC: California Social Worker Education Center

CANS: Child and Adolescent Needs and
Strengths (assessment tool)

CASA: Court Appointed Special Advocates

CHIP: Children’s Health Insurance Program (A federal-state partnership that provides health coverage for low-income children and adolescents whose family incomes are too high to qualify for Medicaid.)

CBHDA: California Behavior Health Directors Association

CBT: Cognitive Behavioral Therapy

CF: Compassion Fatigue

CFT: Child and Family Team

CFSP: Collaborative Family Service Plan

CIBHS: California Institute for Behavioral Health Solutions

CIT: Crisis Intervention Team

CCL: Community Care Licensing

CCR: Continuum of Care Reform

CDSS: California Department of Social Services

CFH: Certified Family Home

CFT: Child & Family Team

CMS: Centers for Medicare and Medicaid Services responsible for federal policy development and oversight of Medicaid and CHIP

CPOC: Chief Probation Officers of California

CSAC: California State Association of Counties

CSEC: Commercially Sexual Exploitation of Children

CWDA: County Welfare Directors Association

CWS: Child Welfare Services

CIT: Crisis Intervention Team

CP: Client Plan

CWS: Child Welfare Services

CYC: California Youth Connection

DDS: Department of Developmental Services

DHCS: Department of Health Care Services

DSM IV: Diagnostic and Statistical Manual of Mental Disorders (DSM), 4th Edition

DSM V: Diagnostic and Statistical Manual of Mental Disorders (DSM), 5th Edition

DTI: Day Treatment Intensive

DTS: Danger To Self

DTO: Danger To Others

DV: Domestic Violence

EBPs: Evidence-Based Practices

ED: Emotional Disturbance

EMDR: Eye Movement Desensitization and Reprocessing

EPSDT: Early and Periodic Screening, Diagnosis and Treatment a required federal benefit for eligible children under age 21

FAPE: Free Appropriate Public Education

FASD: Fetal Alcohol Spectrum Disorder

FCARB: Foster Care Audits and Rates Branch

FFA: Foster Family Agency

FFP: Federal Financial Participation

FFS: Fee for Service

FGDM: Family Group Decision Making

FPRRS: Foster Parent Recruitment Retention and Support

FRC: Family Resource Center

FEC: Family Empowerment Center

HBFC: Home Based Family Care

HIPAA: Health Insurance Portability and Accountability Act

HSA: Health Services Agency

IBP: Individual Behavior Plan

ICC: Intensive Care Coordination

ICD 10: 10th revision of the International Statistical Classification of Diseases and Related Health Problems (ICD)

ICPC: Interstate Compact on the Placement of Children

ICWA: Indian Child Welfare Act

IDEA: Individuals with Disabilities Education Act

IEP: Individualized Education Plan/Program

IHBS: Intensive Home Based Services

ILS: Interim Licensing Standards

IN: Information Notice

IPC: Interagency Placement Committee

ITFC: Intensive Treatment Foster Care

ISFC: Intensive Services Foster Care

LEA: Local Education Agency

LEA MC: Local Education Agency

LGBTQIA+ lesbian, gay, bisexual, transgender, queer (or questioning), intersex, and asexual (or allies). + Not just a mathematical symbol anymore, but a denotation of everything on the gender and sexuality spectrum that letters and words can't yet describe.

LCSW: Licensed Clinical Social Worker

LMFT: Licensed Marriage and Family Therapist

LMHC: Licensed Mental Health Counselor

LMHP: Licensed Mental Health Professional

LMSW: Licensed Master Social Worker

LOC: Levels of Care

LPCC: License Professional Clinical Counselor

MCP: Managed Care Plan

MDD: Major Depressive Disorder Medi-Cal

MFT: Marriage and Family Therapist

MHSUD: Mental Health Substance Use Disorder

MOU: Memorandum of Understanding

MHP: Mental Health Plan

MHSA: Mental Health Services Act

MHSOAC: Mental Health Services Oversight and Accountability Commission

MI: Motivational Interviewing

MSW: Master of Social Work

NAMI: National Alliance on Mental Illness

NREFM: Non-Related Extended Family Member

NPI: National Provider Identifier

OCD: Obsessive-Compulsive Disorder

ODD: Oppositional Defiant Disorder

PC4W: Parents and Caregivers for Wellness

PCIT: Parent–Child Interaction Therapy

PCP: Primary Care Physician

PCT: Person-Centered Therapy

PIHP: Prepaid Inpatient Health Plan

POS: Performance Outcome System

PR: Promising Practice

PT: Primary Therapist

PTSD: Post-Traumatic Stress Disorder

QPI: Quality Parenting Initiative

RAD: Reactive Attachment Disorder

RCL: Rate Classification Levels

RBS: Residentially-Based Services

RFA: Resource Family Approval

RTA: Regional Training Academy

SARB: School Attendance Review Board

SAMHSA: Substance Abuse and Mental Health Services
Administration

SAWS: Statewide Automated Welfare System

SB: Senate Bill

SBIT: School-Based Intervention Teams

SD/MC: Short Doyle/Medi-Cal

SELPA: Special Education Local Plan Area

SMHS: Specialty Mental Health Services

SST: Student Study Team

SPD: Schizoid Personality Disorder

STRTP: Short-term Residential Therapeutic Program

SOGIE: Sexual Orientation Gender Identity Expression

SUD: Substance Use Disorder

TAY: Transitional Age Youth

TBI: Traumatic Brain Injury

TDM: Team Decision Making (placement decisions
meeting)

TFC: Therapeutic Foster Care

THP: Transitional Housing program

TOP: Treatment Outcome Package (Assessment Tool)

WIC: Welfare & Institutions Code

YEP: Youth Engagement Project



Appendix D

Statewide and Local Services and Supports for Parents and Caregivers

Superior Region			
Agency Name	City/County	Contact Info	Services Provided
Pathways to Hope for Children	Redding/Shasta County	(530) 241-5816 https://www.shastapcc.org/	Parent Partner Program, Youth evelopment, Family Resource Center, Child Abuse Prevention, Family Support
Sierra Community House	Truckee/ Nevada County	(530) 546-0952 https://sierracomunityhouse.org/	Hunger relief, legal aid, immigration assistance, and family-strengthening programs, as well as direct services to victims of intimate partner/domestic violence, sexual, and child abuse. *COVID-19 Resources
Hmong Cultural Center of Butte County	Oroville/Butte County	(530) 534-7474 https://www.hmongculturalcenter.net/index.html	Youth programs, family planning services, promotores, warm-line designed to provide peer support for any Hmong community members, resources for families of children ages 0-5, Mental health services for Hmong elders 50+
Rowell Family Empowerment	Redding/ Shasta County	Ph. (530) 226-5129 https://rfenc.org/Home/	Trainings, Parent consultation services, respite, autism programs, support
Plumas Rural Services Family Empowerment Center	Plumas, Sierra, Lassen, Modoc Counties	Plumas and Sierra Counties (530) 283-2735 ext 880 Modoc and Lassen Counties (530) 708-2557 https://www.plumasruralservices.org/fec/	Information, training, support and advocacy to parents and guardians of children and young adults with ANY disability in Lassen, Modoc, Plumas and Sierra Counties.
Youth for Change	Paradise/Yuba-Sutter, Butte County	Main Butte County Line: 530-877-1965 Main Sutter-Yuba Line: 530-418-1001 http://www.youth4change.org/	Family Team Decision Making meetings, therapeutic services to youth and families who are referred by Sutter Yuba Behavioral Health, foster care services, full-service partnerships, 24 hours services to homeless and runaway youth and caregivers in Butte County, support services to youth who are in need of intensive services, parenting resources, outdoor programs, etc.

Central Region:

Agency Name	City/County	Contact Info	Services Provided
TTurning Point Community Programs	Yolo County	(530) 666-8630 https://www.tpcp.org/program-cat/yolo-county/	outpatient programs designed for youth with Medi-Cal up to age 21 with serious emotional problems, wraparound
Exceptional Parents Unlimited (EPU)	Fresno/ Fresno County	(559) 229-2000 https://epuchildren.org/	PParent-to-parent support, advocacy training and information. Provides resources to 13 counties
Sacramento Children's Home	Sacramento/ Sacramento County	(916) 452-3981 https://www.kidshome.org/	Crisis Nursery Program provides free emergency childcare for children age 0-5; Family Resource Centers; Residential Treatment Program provides intensive care for abused or neglected males age 6-18 and much more. Early Childhood Education/Head Start, home visitation, dental and medical health, mental health, nutrition, education, family services, and support.
KidzKount	Auburn/Placer County	(530) 885-5437 https://www.kidzcommunity.org/	Early Childhood Education/Head Start, home visitation, dental and medical health, mental health, nutrition, education, family services, and support.
Warmline Family Resource Center	Sacramento	(916) 455-9500 English; (916) 922-1490 Spanish http://www.warmlinefrc.org/	Free support, training and consultation for families. Parent Training and Information Center serving 28 counties *COVID-19 Resources
Sierra Native Alliance	Auburn/Placer County	(530) 888-8767 https://www.sierranativealliance.org/	Youth programs, cultural education, recovery programs, family wellness
Bay Region			
Agency Name	City/County	Contact Info	Services Provided
Special Parents Information Network (SPIN)	Santa Cruz, San Benito Counties	(831) 722-2800 http://www.spininc.org/	Parent meeting spaces, Resource library with Internet access, parent support and training regarding education for IEP process for parents of children ages 3-22, parent mentor program, support groups and networking events
Parents Helping Parents, Inc.	San Jose, Gilroy/ Santa Clara County	(408) 727-5775 https://www.php.com/	Individual Transition Plan and Student Study Team trainings, bilingual/ cultural outreach, peer counseling, and telephone support
Children's Network of Solano County	Fairfield/ Solano County	(707) 421-7229 https://www.childnet.org/	EEducation, advocacy, coordination of community services and community-based collaborative
Cope Family Center	Napa/ Napa County	(707) 252-1123 https://www.copefamilycenter.org/	Parent education, support, resources, family resource center, advocacy and civic engagement, bilingual services

Agency Name	City/County	Contact Info	Services Provided
Matrix Parent Network	San Rafael/Marin County	(415) 884-3535; https://www.matrixparents.org/	Parent Advisors, Parent to Parent “mentor” program, Individualized Education Plan (IEP) Assistance Bilingual Services
Vision y Compromiso	El Cerrito/Contra Costa County	(213) 613-0630 http://visionycompromiso.org/	Promotores, Bilingual and bicultural communication, Self-empowerment, Educational programs, Health advocacy outreach, Public policies developed specifically for Latino families and communities, Workforce development *COVID-19 Resources
Southern Region			
Agency Name	City/County	Contact Info	Services Provided
Ventura County Behavioral Health	Oxnard/Ventura County	(866) 998-2243 https://vcbh.org/en/	Services to meet the mental health and substance abuse treatment needs of Ventura County residents Bilingual Services
Transitions – Mental Health Association	San Luis Obispo	(805) 540-6500 https://www.t-mha.org/	Housing, family support, work programs, clinical services, homeless services, etc. *COVID 19 Resources
H.E.A.R.T.S. Connection FRC/FEC	Bakersfield/Kern County	(661) 328.9055 receptionist x282 http://www.heartsfrc.org/	Parent Programs, Educational Advocacy/IEP Assistance, Autism services, Bilingual Services
Exceptional Family Resource Center	San Diego/Imperial Counties	(619) 594-7394 http://efrconline.org/	Provide emotional support, information, resources, referrals, and training. IEP Assistance
Union of Pan Asian Communities	San Diego/San Diego	(619) 232-6454 https://www.upacsd.com/#	Adult and older mental health, children and adolescent mental health, addiction and recovery, community engagement and business development
San Diego Center for Children	San Diego/San Diego	(858) 277-9550 https://www.centerforchildren.org/	Prevention, assessment, outpatient therapy, school-based therapies, education, wraparound, foster care, residential
Boat People SOS, Inc.	Westminster/Orange County	714-897-2214 https://www.bpsos.org/bpsos-california	Outreach to Southeast Asian communities in need of mental health education and services, educational workshops, peer support groups

Los Angeles Region

Agency Name	City/County	Contact Info	Services Provided
Westside Family Resource and Empowerment Center	Culver City/Los Angeles County	(310) 258-4063 http://wfrec.org/	Support, information and access to services for families, professionals and teachers, support for families whose children do NOT qualify for Regional Center services, but do have IEPs, support non-English speaking families in under-served areas.
African Communities Public Health Coalition	Los Angeles County	(213) 909- 0985 https://africancoalition.org/	Assessment, Client care/treatment plan, Medication support, Crisis intervention, Individual/group therapy/ counseling, Linkage
Fostering Unity	Los Angeles County	(213) 269-0026 https://fosteringunity.org/	Provides Caregivers and community service partners with a unique service delivery model offering real-time caregiver support, enhanced education, and resource navigation
Bayfront Youth and Family Services	Long Beach, Paramount/LA	(562) 595-8111 https://bayfrontyfs.org/therapeutic-behavioral-care/	Therapeutic & Behavioral Care; Trauma-Informed Care; Clinical & Therapeutic Services; Wraparound Approach Services; Parent Training and Education
Fiesta Educativa	LA County	(323) 221-6696 https://fiestaeducativa.org/	Parent to Parent IEP Assistance, Parent Support Groups, The Autism Parent Education Program (APEP), Advocacy for persons with special needs, parent training
Children's Institute	Los Angeles	(213) 260-7600 https://www.childrensinsitute.org/	Behavioral Health & Wellness, Early Childhood Education, strengthening families, healthy homes, project fatherhood, training, resources and advocacy to increase community resilience and reduce trauma.



COVID-19 Resources (General)

- United Ways of California: <https://www.unitedwaysca.org/covid-19-resources>
- First 5 Association of California: <http://first5association.org/covid-19-information-and-resources/>
- Uplift Family Services: <https://upliftfs.org/get-involved/coronavirus-resources/>

Appendix E

Advocacy Events

1. **State level informational meetings regarding policy and legislation** that can cover behavioral health, child welfare and juvenile justice policies and legislation related to children and youth. These meetings give United Parents and PC4W the opportunity to have a presence at the state level policy and legislation arena:

- MHSOAC Meetings
- MHSOAC Subcommittee/
- Specialty Subject Meetings
- Child Welfare Policy Roundtable
- MHSA Partners Forum
- Mental Health Irregulars Meetings
- California Behavioral Health Planning Council Meetings
- California Coalition for Mental Health

2. **State level meetings that are specific to a state department** usually cover what the respective state departments are doing related to policy changes for behavioral health, child welfare, and juvenile justice. These policy changes are an important place for United Parents and PC4W to have a presence. The state departments give stakeholders a chance to offer comments on the policies being discussed, so a good place to offer the perspective of parents/caregivers to changes in public policy.

- DHCS Stakeholder Meetings
- CCR Stakeholder Advisory Meetings
- California Advancing and Innovating Medi-Cal (CalAIM) Meetings
- CalAIM Foster Care Committee Meetings
- Child Welfare Council Meetings
- Child Welfare Council Behavioral Health Committee Meetings

3. **The California Mental Health Advocates for Children and Youth (CMHACY) Conference** United Parents partners with the CMHACY Board of Directors and plans a parent/caregiver track for the conference each year. The CMHACY conference has been a partner to parents/caregivers for the last 25 years, and the conference is a place where parents/caregivers and providers and administrators of public behavioral health and education can converse on an equal level.

- CMHACY Board Meetings

4. **Forums for parents/caregivers** United Parents offers opportunities for parents to both learn about state level public policy and legislation and offer input on state level public policy and legislation issues.

- United Parents Advocacy Day at the Capital
- State Senate/Assembly Hearings
- Child and Family Policy Update Newsletter
- Medi-Cal (CalAIM) Meetings

Appendix F

Children and Youth Policy 2021



Introduction

The following are United Parents' positions on common treatment options as well as bills that we are following. For more information on how to get involved with supporting and understanding legislation, please sign up for our mailing list on our PC4W website here: <https://parentsaregivers4wellness.org/newletter-english/>

United Parents Policy Positions:

Family Treatment Interventions

- Family therapy is a form of treatment that addresses mental health challenges and their treatment in terms of the interactions among family members.
- Families are seen as an integrated, interconnected unit in which psychological functioning is influenced by every family member.
- Family treatment interventions work for a range of problems and research shows it is more effective than individual therapy for children.

Effective Treatment Options

- *Evidence-based Practices* (EBPs) are systematic clinical intervention programs that are integrative in nature (practice, research, theory) and use systematic clinical protocols or “clinical maps” to guide practice. Typically, EBPs are manual driven (yet flexible), use continuous assessment procedures, and focus on model adherence and treatment fidelity.
- In addition, EBPs should be clinically and culturally responsive and individualized to the unique needs of the child and family. EBPs should guide practice with a high expectation of successfully targeting specific problems.

Prevention and Early Intervention Treatment Options

- Prevention and early intervention programs for children with mental health challenges produce positive outcomes for youth and are cost-effective for our communities.
- Data shows that while one in five American children has a mental illness or disorder, many never receive treatment. When these disorders are left untreated, they can lead to tragic and costly consequences, such as substance abuse, school dropout, involvement with law enforcement, and suicide.
- To ensure our children grow up to become healthy, productive adults, communities can implement prevention and early intervention programs to prevent, identify, and effectively treat youth with behavioral health care needs at the earliest stages.

SB 17

SB 17, authored by Richard Pan, targets racism through a public health lens and would state the intent of the Legislature to enact policies to require the department, in collaboration with the Health in All Policies Program, the Office of Health Equity, and other relevant departments, agencies, and stakeholders to address the impacts of historically racist policies and outcomes. Senator Pan has stated that “Extensive research has identified racism as a public health crisis leading to significant health disparities, including infant and maternal mortality, chronic diseases prevalence, life expectancy and now COVID mortality.” The bill would create the Office of Racial Equity (ORE) and the Racial Advisory and Accountability Council (REAAC) which would be tasked with addressing institutional racism. This bill acknowledges the generations of systemically racist policies in the United States and stands to require the state to play a more active role in anti-racist policies and programs. The projected costs for this bill are estimated to be in the high hundreds of thousands or into the millions of dollars range. For more information on SB 17 and/or to support this bill, please contact Adrienne Shilton with the California Alliance of Child and Family Services at ashilton@cacfs.org

AB 226

The mental health system in California leans heavily on last minute, retroactive options for caregivers and their loved ones, instead of preventative, accessible opportunities. The system is full of disconnections, ranging from the use of emergency rooms for child mental healthcare, to adult mental health procedures being applied to youth. Recently, the COVID-19 crisis has worsened these systemic inadequacies, causing the proportion of mental health related visits for children 5-11 and 12-17 to increase by 24% and 31% respectively. This is why United Parents has partnered with California Mental Health Advocates for Children and Youth (CMHACY) to support AB 226, authored by Assemblymember James C. Ramos. This bill aims to create children’s crisis residential services which would fill in the gaps of our current system. These services would ensure that children are able to access mental health support that is specific to their needs. This would streamline patients who do not need to be hospitalized, but instead need preventative care that is proactive in fulfilling their immediate needs. To sign on to support AB 226, please contact Adrienne Shilton from the California Alliance of Child and Family Services at ashilton@cacfs.org and Gavin White from the office of Assemblymember Ramos at gavin.white@asm.ca.gov. Support from parents and caregivers will be critical to move this bill to the Governor’s desk. Estimated costs for this bill are at \$2.1 million from the general fund.

AB 656

AB 656 aims to decrease the disproportionate number of children of color that are represented in the child welfare system by establishing a pilot program that would address these disparities. Assemblymember Wendy Carillo is introducing this blind removal strategy to combat these inequities, which is when a committee of child welfare professionals convenes to decide whether a child should be removed from their home but have the demographic and identifiable information removed by another childcare worker in the system. This strategies’ intent is to remedy the impact of racism, classism, and sexism in the child welfare system rather than deny that racism exists, which is why Assemblymember Carillo has such faith in it. The removal of this information will in effect place the focus on the concrete evidence of the case, rather than dispositions to biases. Please contact Assembly member Carillo’s office for more information or reach out to Pam Hawkins at phawkins@unitedparents.org.

SB 803

This bill, known as the Peer Support Specialist Certification Program of 2020, has taken a long journey before recently being approved by Governor Newsome. The Centers for Medicare and Medicaid Services (CMS) have long encouraged states to utilize peer support services, as states may be reimbursed by Medicaid, and

in 2013, this reimbursement became applied to children and youth delivery systems. SB 803 requires that core-competency training include concepts such as hope, recovery, wellness, cultural competence, self-care, conflict resolution, and safety and crisis planning among others. This bill is highly significant for parent-led organizations throughout the state of California, and will become implemented once the Department of Healthcare Services completes their statewide requirements for peer support specialists. United Parents started an SB 803 Workgroup shortly after this bill was passed, which continues to meet monthly, and has put together a list of questions to ask DHCS about the peer certification requirements. In the meantime, local advocacy at the county level may encourage counties to opt in to these services and raise awareness and support for the upcoming opportunities. To join our workgroup, contact Tanya McCullom at Tanya.McCullom@acgov.org

The following bills have also been supported and/or followed by United Parents. For more information on each bill, please go to Legiscan.com- <https://legiscan.com/>, select California and type in the bill number and click search.

SB 14 and SB 224 (Assemblymember Anthony Portantino) - Pupil health: school employee and pupil training: excused absences: youth mental and behavioral health

SB 21 (Assemblymember Glazer) - Specialized license plates: mental health awareness.

SB 57 (Assemblymember Wiener) - Controlled substances: overdose prevention program.

SB 106 (Assemblymember Umberg) - Mental Health Services Act: homelessness

SB 110 (Assemblymember Wiener) - Recovery Incentives Act.

SB 221 (Assemblymember Wiener) - Health Care Coverage: Timely Mental Health Care

SB 225 (Assemblymember Wiener) - Medical procedures: individuals born with variations in their physical sex characteristics.

SB 228 (Assemblymember Levy) - Public postsecondary education: support services for foster youth: Cooperating Agencies Foster Youth Educational Support Program.

SB 293 (Assemblymember Limon) - Medi-Cal specialty mental health services

SB 681 (Assemblymember Ochoa Bogh) - Child abuse reporting: mandated reports

SB 988 (Assemblymember Bauer-Kahn) - Mental health: mobile crisis supports teams: 988 crisis hotlines

AB 31 (Assemblymember Lackey) - Child abuse

AB 46 (Assemblymember Luz Rivas) - California Youth Empowerment Act.

AB 58 (Assemblymember Salas) - Pupil health: suicide prevention policies and training: school-based health programs: pilot program.

AB 104 (Assemblymember Lorena Gonzalez) Pupil instruction: learning recovery opportunities.

AB 112 (Assemblymember Holden) - Medi-Cal eligibility

AB 126 (Assemblymember Eduardo Garcia) - Special education programs: Family Empowerment Centers on Disability.

AB 226L (Assemblymember Ramos) - Children's crisis psychiatric residential treatment facilities:

AB 260 (Assemblymember Stone) - Guardianships

AB 270 (Assemblymember Ramos) - Core Behavioral Health Crisis Services System:

AB 552 (Assemblymember Quirk-Silva) - Integrated School-Based Behavioral Health Partnership Program:

AB 573 (Assemblymember Carillo) - Youth Mental Health Boards

AB 656 (Assemblymember Carillo) - Child welfare system: racial disparities:

AB 686 (Assemblymember Arambula) - California Community-Based Behavioral Health Outcomes and Accountability Review:

AB 808 (Assemblymember Bauer-Kahan) - Mental health: mobile crisis supports teams: 988 crisis hotlines

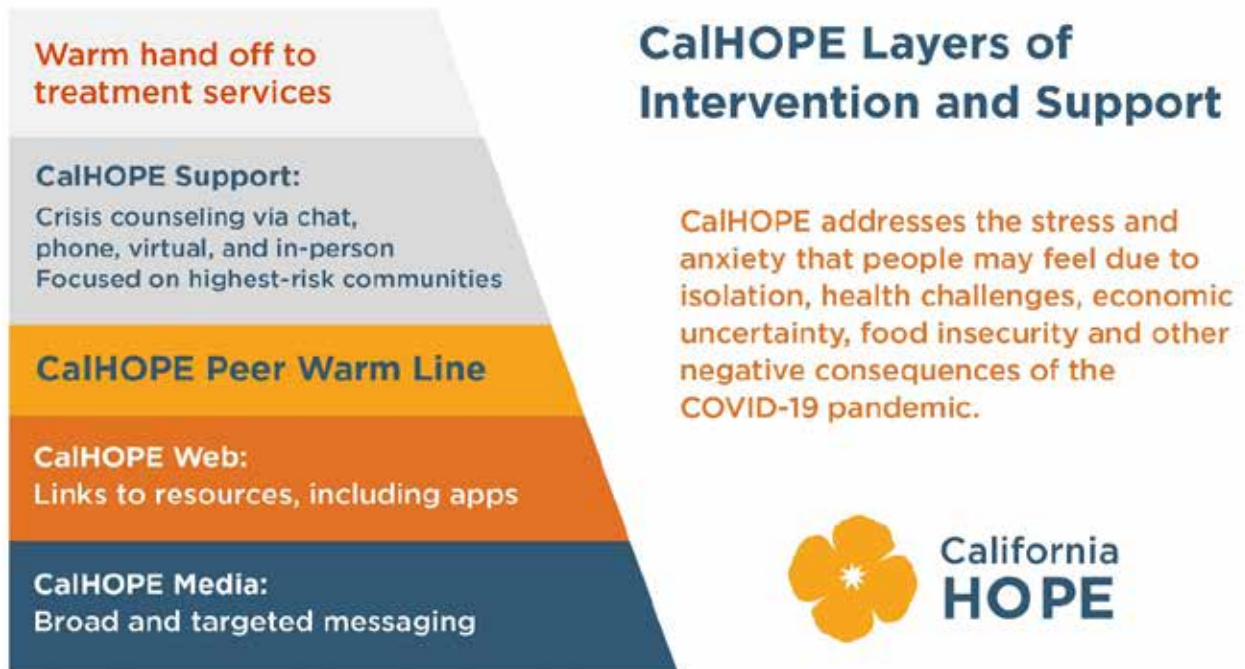
Budget Agreement

On June 28th 2021, the Final Budget Agreement for California was passed and allocated \$4 billion to Children and Youth Behavioral Health with an emphasis on early prevention and intervention. This budget will account for routine screenings and continued support for emerging behavioral health needs. Partially due to the magnification of children's needs as a result of the COVID-19 pandemic, this agreement validates the overwhelming evidence of the issues caused by behavioral health challenges, particularly apparent in low-income communities such as the LGBTQ+ community. Visit our website to learn more about the components of this initiative and about how this financial resource will be utilized.

Appendix G

CALHOPE

Thanks to FEMA funding, this is how United Parents was able to provide support during crisis



- As of August 5th we have 20 highly trained Crisis Counselors (10 English speaking & 10 Spanish speaking) who are taking live chats, phone calls, distributing flyers, visiting local businesses & vaccination sites, emailing schools & government agencies, facilitating support groups and engaging on all social media platforms to 20,845 parents & caregivers in the State of California.
- We are open from 9am to 7pm Monday thru Friday and 9am to 5:30pm on Saturday. Our direct phone line is: 888.384.1120

[CalHOPE Connect](#) offers safe, secure, and culturally sensitive emotional support for all Californian's who may need support relating to COVID-19.

CalHOPE partnered with California Mental Health Services Association which has a statewide experienced workforce comprised of peers, community mental health workers, and other non-licensed personnel. Individuals in need of emotional and/or crisis support can receive "visits" by phone, videoconference, smart device, or computer chat. Depending upon needs and situation, family and/or group support sessions are also available. Individuals also may be connected to county-based services. CalHOPE connect offers culturally sensitive emotional support session for:

- All Californians
- African American/Black
- Asian and Pacific Islanders
- Latino/Latinx
- LGBTQ+ Community
- Parents/Caregivers
- Veterans
- Young Adult

Parents and Caregivers who are in crisis are invited to join our support groups every Tuesday and Thursday on Zoom. Refer to our website for up to date information about the links and meeting times.



HOPE LIVES HERE



Parents & Caregivers that are
in Crisis, give us a call:

(888) 384-1120

or to chat, visit:

[https://calhopeconnect.org/
populations/parents-caregivers](https://calhopeconnect.org/populations/parents-caregivers)

STATE OF THE COMMUNITY ANNUAL REPORT



United Parents / Parents &
Caregivers for Wellness

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www.parentscaregivers4wellness.org



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