

TRANSITION FORMATION

**Transition Age Youth Services Strategic Plan
Alameda County Behavioral Health Care Services**



From the Director

Dear Alameda County Residents,

It is with great enthusiasm that we present to you this comprehensive Strategic Plan to provide behavioral health services for Transition Age Youth (TAY) in Alameda County. We are especially pleased that it was written in full partnership with youth, their families and service providers and targeted at meeting the unique needs of our young people.

The overall mission at BHCS is to provide strength-based, recovery and resiliency oriented services. These services will be culturally competent, high quality, geographically accessible, integrated alcohol, drug, and behavioral health care for Alameda County residents of all ages, including TAY.

With the introduction of the Mental Health Services Act we now also have the opportunity to provide prevention and early intervention services for TAY so that there is real hope for young people in Alameda County with serious mental illness to recover and achieve their full potential.

The strategies laid out in this report are ambitious and forward thinking. I invite you to join us as we implement them, so that together, we can make a significant difference in the lives of youth and the well being of the entire county of Alameda.

Sincerely,

A handwritten signature in black ink, appearing to read "Marye L. Thomas". The signature is fluid and cursive, written in a professional style.

Marye L. Thomas, MD, Director of Behavioral Health Care Services

Acknowledgements

We would like to thank and acknowledge the partnership between Alameda County Behavioral Health Care- Transition Age Youth (TAY) Services and the strategic planning group for having the passion and commitment to complete this plan.

A very special thanks to Steven Tierney, Ed.D, CAS for his expert facilitation and support throughout the entire process.

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“The most important thing you could ever give to another person is yourself.”

-Anonymous Youth

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Introduction

Dear Friends and Colleagues,

I invite you to read this Transition Age Youth (TAY) Strategic Plan. I believe you will feel pride and excitement. It is a reminder that Alameda County Behavioral Health Care Services (ACBHCS) is a leader in creating and providing services for youth. It is also a blueprint for enhancing and expanding those services over the next three to five years.

Equally important, this document is a living example of how we believe services can be effectively provided. From the very beginning of this process youth, their families and advocates worked as equal partners in its writing. The group met several times over a period of months to articulate a plan for a system of care for TAY with serious mental illness (SMI). They were asked to dream of a world where TAY affected with SMI would receive the support to make the transition from childhood to independent adulthood, and where youth with severe mental illness or emotional disturbance would not become adults with severe chronic debilitating mental illness.

Each participant played an integral role in identifying the key issues, creating possible solutions and helping to prioritize what can reasonably be accomplished in the short and long term. The youth spoke clearly, were listened to and their ideas are here in this collaborative plan. It truly represents the work of a dedicated group of youth, parents, providers and community members.

TAY with severe mental illness (SMI) often “fall between the cracks” of the mental health care system as they age out of children’s services at age 18 and then reappear in the adult system. Even when age-appropriate services are available many TAY and their families are unaware of the resources or how to connect with them. Ineligibility for health insurance, fear of the system and even the youth’s belief of invulnerability often compound the problem.

In response, this strategic plan combines the resources of the Mental Health Services Act (MHSA) with the talents of the community to meet the diverse needs of TAY in Alameda County. Essentially the MHSA, or Proposition 63 passed by voters in 2004, demanded a change in the way mental health services are delivered. Consumers are now invited to be partners in their care. Programs are to be based on Wellness, Recovery and Resiliency and for the first time it seems there is real hope that a person can recover from mental illness and go on to live a happy, productive life.

We are proud that Alameda County Behavioral Health Care Services (ACBHCS) enthusiastically supports this mandate and strategic plan, and moreover that transition age youth have been a priority within the system for the past seven years. The fact that MHSA dollars have already been invested in three new TAY programs is proof that ACBHCS is a leader in building the partnerships necessary to forge this new system of care.

This report represents the hard work, clear thinking and commitment to a system of care that works. It is optimistic and based on goals that can truly be achieved over time with TAY, families, and providers sharing a partnership. It is the beginning. An advisory board will work with ACBHCS to monitor progress, suggest updates and celebrate the successes as they are realized. We hope you will play a role in creating this future. Our young partners are counting on you.

Please join us.

A handwritten signature in black ink, appearing to read "Michelle Burns". The signature is fluid and cursive, with the first name "Michelle" written in a larger, more prominent script than the last name "Burns".

Michelle Burns, NP, MPH

System of Care Director, Transition Age Youth Services
Alameda County Behavioral Healthcare Services



“Providing educational opportunities, life skills training, and career development will enable youth to become emancipated and independent adults.”

-Anonymous Youth

A Closer Look at Transition Age Youth

Transition Age Youth (TAY) with serious mental illness and emotional disturbance, especially foster care youth, are particularly vulnerable to experiencing economic and social hardship upon reaching age 18 as they move from the children's into the adult system of care. Vital support and supervision is taken away from them as they enter the "adult" world although they may be ill equipped for independent living.

Even when support is available TAY with mental health needs may not be aware of their need for mental health services, may not know how to access them, may be sensitive to the stigma of mental health services, or may reject identifying with adult mental health clients because of traumatic experiences with mental health.

The following are just some of the contributing circumstances, by category, that many TAY in Alameda County are likely to experience:

Involvement in the Foster Care System	<ul style="list-style-type: none">• Youth in foster care are more likely to experience mental health problems, homelessness, arrests, school drop-out, and teen pregnancies. ¹• There are approximately 2,500 youth currently in Alameda County child welfare supervised foster care. ¹• The California Department of Social Services estimates that 65 percent of the 219 youth who exit foster care every year need housing assistance. ²
Juvenile Arrests	<ul style="list-style-type: none">• One-in-four of the felony arrests among youth (23%) were for violent offenses like homicide, forcible rape, robbery, assault and kidnapping. ¹• Every child who leaves Juvenile Hall does not leave with a completed educational, prevocational, mental health care, substance abuse, and reentry assessment. ³• Youths transferred to adult criminal court have significantly higher rates of reoffending and a greater likelihood of committing subsequent felonies than youths who remain in the juvenile justice system. They are also more likely to be victimized, physically and sexually. ⁴

<p>Homelessness</p>	<ul style="list-style-type: none"> • More than 350 youth are homeless at any given time and about 990 are homeless over the course of a year. ² • Community-based youth services providers indicate that the actual total number of homeless youth and young adults in Alameda County is closer to 1,500 over the course of a year. ² • The great majority of young people do not seek or choose homelessness; they are pushed into it, either because their parents explicitly “kick them out” of home, or because abuse or family conflict forces them out. ⁵
<p>Drop Out Rate</p>	<ul style="list-style-type: none"> • About 13% of all high school students in Alameda County will drop out before graduating. ¹ • African Americans (26%) and Latinos (18%) have the highest school dropout rates compared to all racial/ethnic groups. ¹ • Research shows that high school dropouts are likely to experience physical and mental health problems. ¹
<p>Community Violence</p>	<ul style="list-style-type: none"> • The contribution of mental disorders to overall violence in the United States is very small. In fact, public fear is out of proportion to the actual risk of violence, which contributes to the stigmatizing of people with severe mental disorders. ⁴ • Many youth who are victims or witnesses of harassment and bullying will suffer from mental health issues like depression, anxiety and post-traumatic stress syndrome (PTSD). ¹ • Youth in Alameda County are experiencing “off the charts” levels of violence and processing deep feelings of grief, anxiety and fear without adult or professional support. ⁷

<p>Mental Health Issues</p>	<ul style="list-style-type: none"> • There is currently very little data about the proportion of youth that experience different types of mental health disorders, how a young person’s risk for mental health issues changes through adolescence and early adulthood or how a young person’s experience of mental health issues differs depending on their cultural background or the community in which they live. ¹ • Youth responding to a survey who had received mental health services – 53 percent – did not find those services helpful. They cited therapists’ inability to understand them or their situation, medication that did not help or was used to control their behavior, and their own unwillingness to communicate with a therapist. ⁵ • Each year approximately 11 Alameda County youth age 15-24 die from suicide and more than 100 are hospitalized for attempting suicide. ¹
<p>Alcohol and Other Drugs (AOD)</p>	<ul style="list-style-type: none"> • Adolescents undergoing major developmental and environmental changes increase their likelihood of using alcohol and other drugs. ¹ • Various surveys have found that as many as 75 percent of homeless youth use marijuana or other drugs, sometimes to self-medicate for the trauma and pain they have experienced. ⁵ • The prevalence of alcohol and tobacco use among runaway youth can be seen as initially rooted in family conflict or breakdown, including situations where youths were exposed to family members who abused alcohol and/or drugs. ⁵

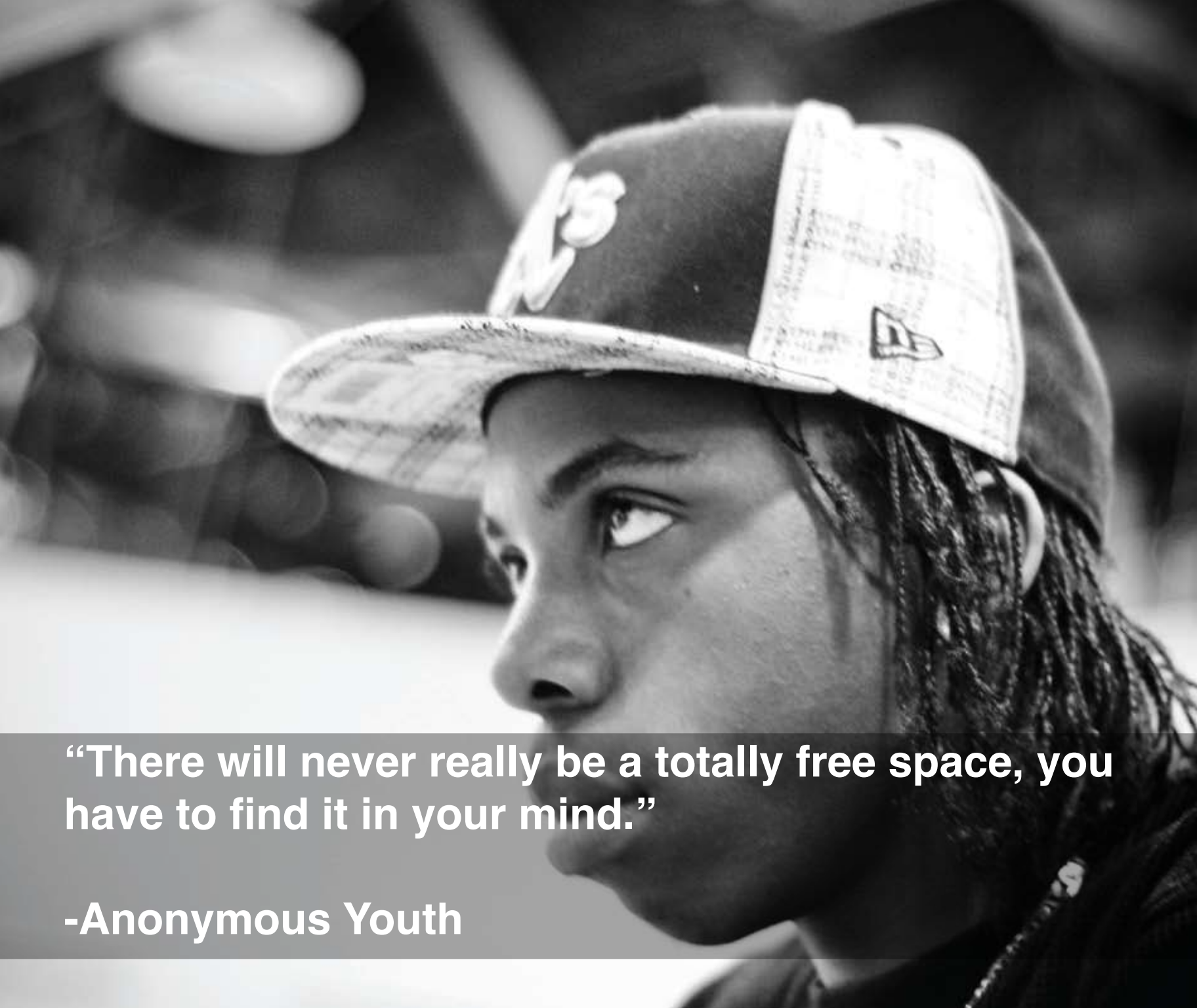
<p>Lack of Health Insurance</p>	<ul style="list-style-type: none"> • In Alameda County, 28% of 18-24 year olds do not have health insurance. Lack of health insurance increases as teens age-out of programs for children. ¹ • Even among those with basic health insurance, many programs do not cover specialized services like mental health. ¹ • Individuals without health insurance are less likely to access health care and preventative services for mental health and substance abuse issues. ¹
<p>Poverty</p>	<ul style="list-style-type: none"> • Poor children suffer from emotional and behavioral problems more frequently than do non-poor children. ⁶ • Poor children are more likely to experience academic problems, drop out of school, be affected by violence and become poor adults. ¹ • Risk factors usually exist in clusters, not in isolation. Children who are abused or neglected tend to be in poor families with single parents living in disadvantaged neighborhoods beset with violence, drug use, and crime. ⁴

At an age when most young adults are benefiting from continuing education, full-time work and close interpersonal relationships, many with serious mental illness (SMI) TAY have not connected to higher education or the labor force and most will lack social support systems. Both from an economic and social perspective, TAY will be “disconnected”. However, a significant number of disconnected youth do find a way of connecting by taking advantage of very good programs that provide youth with support and training.

Virtually everyone that works with TAY believes that the movement from disconnection to connection requires a “transformation”- a mental/emotional decision by the youth that he/she wants to change the situation, no matter how difficult accomplishing that change may be. However, unless opportunities are there at the point of transformation, change may be very difficult. TAY need major, ongoing support in overcoming the sense of inadequacy, in acquiring job skills and education, and in staying connected once change has begun to occur.⁸

Data Sources:

- ¹ *Youth Health and Wellness in Alameda County, 2006*, Alameda County School-based Health Center Coalition and Alameda County Public Health Department
- ² *Alameda Countywide Homeless and Special Needs Housing Plan, 2006*, AIDS Housing of Washington, www.everyonehome.org
- ³ *Comprehensive Study of the Juvenile Justice System, 2004*, Huskey and Associates, Inc.
- ⁴ *Youth Violence: A Report of the Surgeon General*, www.mentalhealth.samhsa.gov
- ⁵ *Voices from the Street: A Survey of Homeless Youth by Their Peers*, Nell Bernstein and Lisa K. Foster
- ⁶ *Effects of Income on Child Outcomes, 1997*, Jeanne Brooks-Gunn and Greg J. Duncan, www.futureofchildren.org
- ⁷ *Final Report of PEI Data, Alameda County Community Meetings and Focus Group Discussions, 2008*, Health and Human Resource Education Center
- ⁸ *Connected by 25: Improving the Life Chances of the Country's Most Vulnerable 14-24 Year Olds*, Michael Wald and Tia Martinez



“There will never really be a totally free space, you have to find it in your mind.”

-Anonymous Youth

Strategic Plan

for TAY System of Care

**Mission and Purpose of
Transtional Age Youth (TAY)
Services**

**Vision, Values, Goals,
Partnerships, Relationships,
Critical Collaborations, and Alliances**

**Strategy for
Community
Improvement,
Involvement,
and Empowerment**

**Strategy To
Enhance
Treatment
Effectiveness**

**Strategy For
Youth
Empowerment**

**Strategy for
Resource
Mobilization and
Sustainability**



“My little sister doesn’t have any friends, if she had some friends she wouldn’t be so angry.”

-Anonymous Youth

Mission And Purpose

Transition Age Youth Services

The Mission of the Alameda County Behavioral Health Care Services Transition Age Youth System of Care to improve the services and outcomes for youth, aged sixteen through twenty-four, who are experiencing serious mental illness, in making successful and seamless transitions towards maximum self-sufficiency and independent living.



Partnerships, Relationships, Critical Collaborations, and Alliances

The Transition Age Youth Initiative is a collaborative effort between Alameda County Behavioral Health Care Services, transition age youth from Alameda County, their families, and youth service providers, including those in vocational rehabilitation, education, foster care, ILSP, juvenile justice, and probation systems.

Values

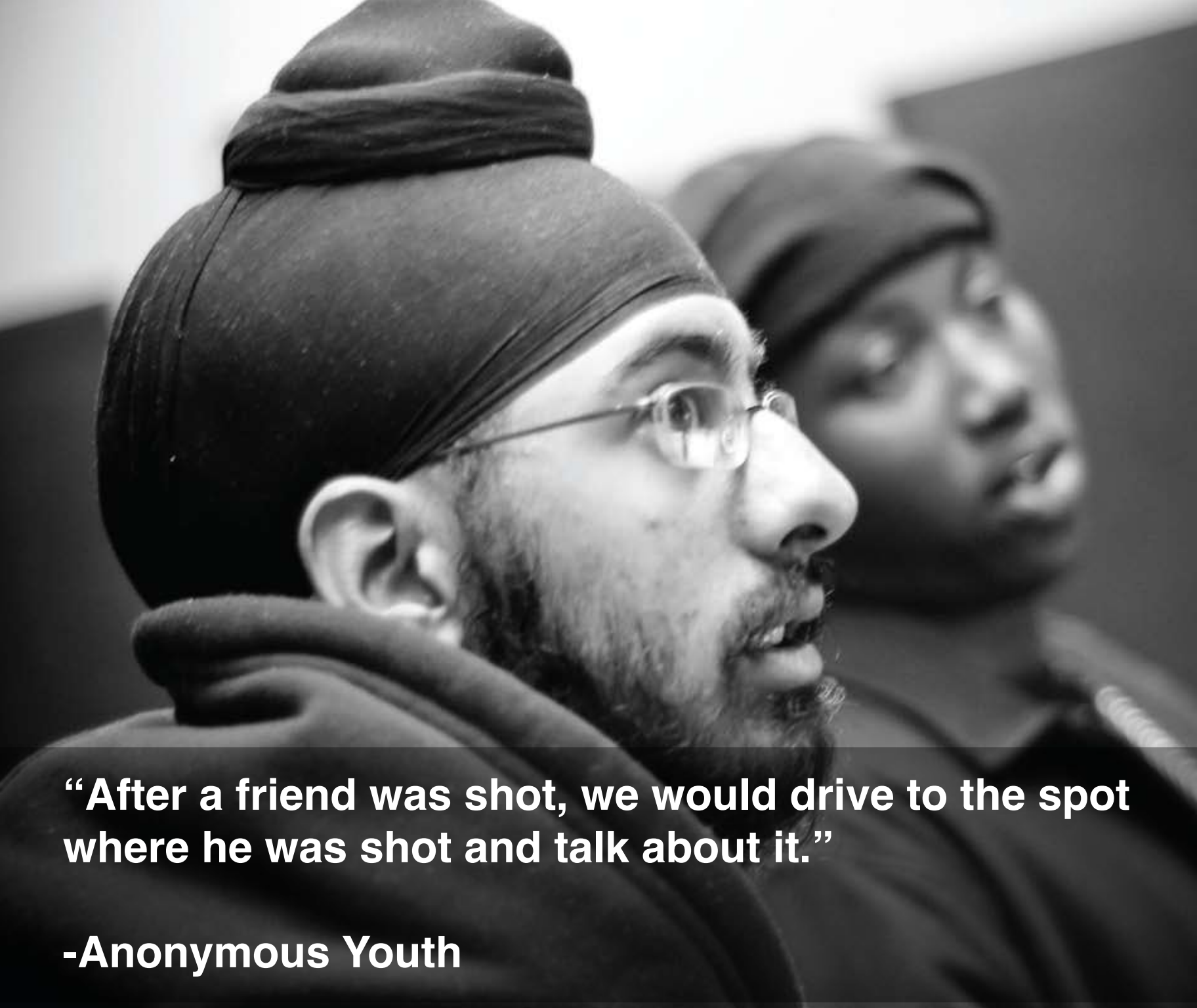
1. Transitional Age Youth are to be included in planning, delivery, evaluation, and improving the system.
2. All services are to be based upon the Wellness, Recovery, and Resiliency model.
3. Honesty: Service providers should not promise services and/or outcomes that cannot be delivered.
4. Engage peers, young people, and professionals who have experienced “the system.”
5. Services are to be respectful of the varied experiences of the participants.
6. Harm reduction: Accept the young person where he or she is and support positive changes from that starting point.
7. Integrity: Establish defined health outcomes, measure them, and inform the participants, families, and community of the results.
8. Services are to be youth-friendly.
9. Make it easy to enter the services and easy to exit.
10. Consistency: All youth in all communities are to have access to the same quality of care.
11. Services will be directed toward Seriously Emotionally Disturbed and Seriously Mentally Ill (SED and SMI) clients.

Vision

In Alameda County, all youth and young adults with severe mental illness or serious behavioral disturbances, their families, mental health professionals, and the community will be engaged in the successful transition of the youth to adulthood.

All youth experiencing serious mental illness, severe emotional and behavioral disabilities will:

- Be prepared to participate in becoming independent and productive members of their community.
- Have the support and resources needed to achieve successful outcomes and stability in independent living.
- Have meaningful opportunities to improve their well-being and their quality of life.
- Be empowered with a sense of purpose and self-determination to achieve their potential.



“After a friend was shot, we would drive to the spot where he was shot and talk about it.”

-Anonymous Youth

Vision (continued)

All families of youth experiencing serious mental illness, severe emotional and behavioral disabilities will:

- Be empowered with the knowledge and opportunities needed to prepare their child for the future.
- Have the supports and resources in their community needed to assist their child.
- Have a supportive and meaningful relationship with their child in making the transition to adulthood.
- Be engaged with their child in developing and implementing their transition goals and services.

All professionals serving youth experiencing serious mental illness, severe emotional and behavioral disabilities will:

- Be valued for what they do with opportunities to learn and develop in their work.
- Have the supports and resources needed to achieve positive transition outcomes for the youth they serve.
- Ensure that youth receive culturally competent and appropriate services to achieve their transition goals.
- Educate families and the community about the needs of transition age youth experiencing serious mental illness.

Goals

Goal 1: Self Determination and Self Sufficiency

All youth experiencing serious mental illness and transitioning to adulthood will obtain the supports, resources, and independent living skills needed to achieve their maximum potential.

Goal 2: Community Support and Connection

All communities in Alameda County will support youth to participate fully as contributing and integrated members of their communities.

Goal 3: Social and Recreational Opportunities and Support

Youth experiencing serious mental illness will have easy access to meaningful social relationships, social activities, and recreational opportunities.

Goal 4: Education and Employment Opportunities

Youth experiencing serious mental illness will have opportunities and support in secondary and post-secondary education, vocational training, and employment development.

Goal 5: Medical and Mental Health Services

Youth experiencing serious mental illness will have access to a full range of culturally competent and convenient medical, dental, and mental health services as they transition to adult health care.

Goal 6: Family Support and Involvement

Families of youth experiencing serious mental illness will be empowered with the knowledge and resources needed to engage and support their children in making the transition to adulthood.

Goal 7: Comprehensive Service Network

Youth experiencing serious mental illness and their families will have a coordinated network of comprehensive and culturally competent transition services, and professionals will have the support and resources needed to achieve positive outcomes for the youth they serve.



“Sometimes you don’t have a stable person to talk to...so you go down and down and down.”

-Anonymous Youth

Strategy For Community Involvement And Empowerment

The Strategies for Community Involvement and Empowerment will:

- 1.0 **Create a system of care** for transition-age youth within Alameda County Behavioral Health Care Services that promotes the health and well-being of youth across the county.
 - 1.1 **Increase education** for transition age youth with mental illness and/or severe emotional and behavioral disabilities about treatment and service options available to Alameda County residents.
 - 1.2 **Improve access to services** for youth with mental illness and or severe emotional and behavioral disabilities.
 - 1.2.1 **Expand services in multiple community settings**, understanding that transportation issues are a serious challenge for young people.
 - 1.3 **Tackle the social and cultural factors** affecting transition age youth's decision making about healthy life choices, including access to care and adherence to treatment plans.





- 1.3.1 **Conduct campaigns** to reduce the stigma and discrimination faced by TAY in schools, on the job, and in the communities.
- 1.3.2 **Work with religious leaders** to conduct a campaign to increase compassion and understanding about transition age youth with mental illness and/or severe emotional and behavioral disabilities.
- 1.4 **Re-educate** Alameda County Behavioral Health Care Services for improved responses for transition age youth with mental illness and or severe emotional and behavioral disabilities.
 - 1.4.1 **Develop and offer training** to county employees in health, behavioral health, juvenile justice, probation, vocational rehabilitation and schools to increase their understanding of this population, motivate their active support and increase their skill set in working with TAY.
 - 1.4.2 **Collaborate with community partners** to enhance the safety net across the county to engage youth in services, support their adherence, and encourage their success completion of programs.
- 1.5 **Create and support** an on-going Transition Age Youth Community Advisory process to recommend program innovation, service enhancements, resource mobilization, and health policy initiatives.
 - 1.5.1 **Include youth, families, and providers** on the Community Advisory Panel (CAP).

- 1.5.2 **Provide training** for CAP members to ensure that youth are represented and fully empowered to participate in the process.
- 1.5.3 **Conduct meetings** at times and in locations that are appropriate for youth, young mothers and fathers, their families and care providers.
- 1.6 **Provide for the basic human needs** of transition age youth, acknowledging that treatment access and adherence are difficult without housing, jobs, and connection to community.
 - 1.6.1 **The ability of transition-aged youth to access and succeed** in treatment and supportive services is enhanced when safe, stable housing is available. At every community meeting and focus group, youth reported struggles with finding and keeping housing in Alameda County. The scarcity of available housing options and the prohibitive cost are major barriers to the type of security that promotes participation in mental health services. A variety of housing options, throughout Alameda County must be made available.
 - 1.6.2 **Housing readiness services** should be offered to TAY: housing search, tenant/landlord rights workshops, financial planning, and domestic survival skills are important skills to be taught.
 - 1.6.3 **Create and support** an on-going Transition Age Youth Community Advisory process to recommend program innovation, service enhancements, resource mobilization, and health policy initiatives.





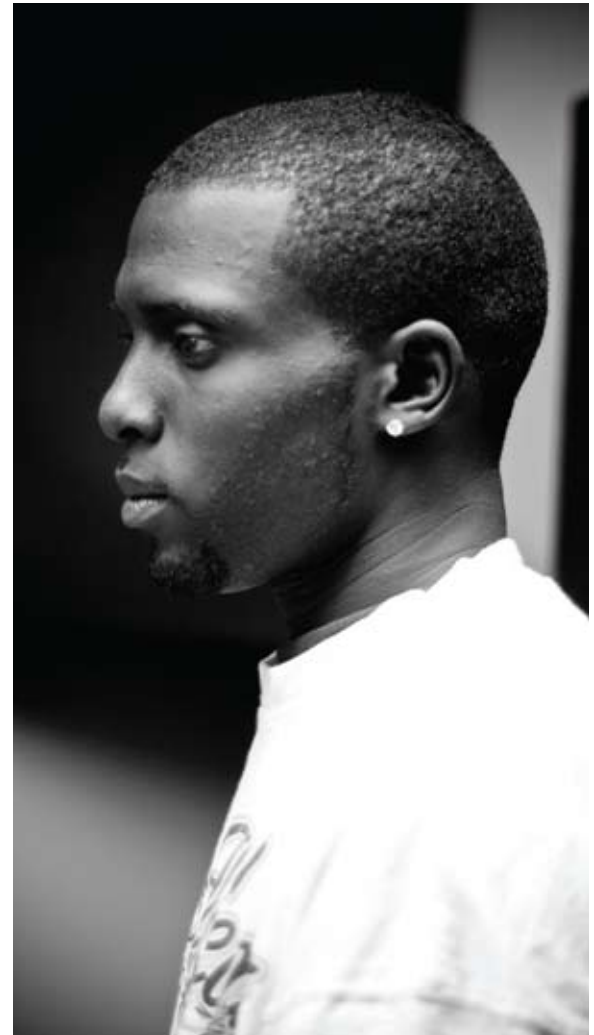
“The top two most important things teens see at their schools are stress and depression.”

-Anonymous Youth

Strategy To Enhance Treatment Effectiveness

The Strategies to Enhance Treatment Effectiveness will:

- 2.0 **Increase the early identification** of severe emotional and behavioral disabilities and provide support for appropriate early intervention.
 - 2.1 **Develop programs, resources, and campaigns** to help transition age youth (and their families) identify and take appropriate action on emerging mental health illnesses and/or severe emotional and behavioral disabilities.
 - 2.2 **Enhance the skills of Alameda County staff** throughout Alameda County Behavioral Health Care Services and its contracted providers to respond to mental health and severe emotional and behavioral disabilities with compassion and with effective, appropriate strategies.
 - 2.3 **Develop strong partnerships** throughout the Alameda County Behavioral Health Care Services system, undertake cross training, and participate in inter-agency activities to improve access for transition age youth to services.





2.4 **Create comprehensive service models** that increase meaningful access and adherence capacity by meeting clinical, developmental, and basic human needs: treatment, housing, job training, family support, socialization opportunities, life skills training, and so forth.

2.4.1 **Evaluate Emancipation Village** concept of co-locating services for emancipation foster care youth as an example of a potentially viable service for Alameda County.

3.0 **Deliver services in multiple community settings**, acknowledging that for many youth traveling from one town to another to receive services is more than a transportation challenge. Deficiencies in safety and comfort are serious impediments affecting adherence to program goals.

3.1 **Develop services** at varied hours that respect the school, work and family-related time demands that youth face.

4.0 **Develop and offer training** to county employees in health, behavioral health, juvenile justice, probation, vocational rehabilitation and schools to increase their understanding of this population, motivate their active support and increase their skill set in working with TAY.

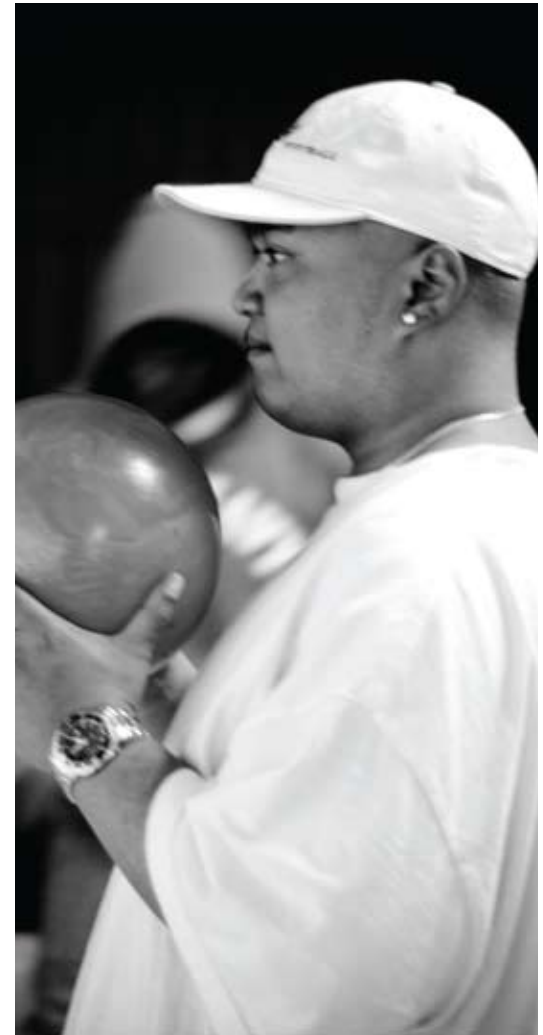
4.1 **Minimize harm** associated with alcohol and/or other drug use among transition age youth.

4.2 **Develop programs, services, and campaigns** to help transition age youth and their families and friends recognize and respond to problematic alcohol and/or drug use.

Strategy For Youth Empowerment

The Strategies for Youth Empowerment will:

- 5.0 **Provide educational opportunities, life skills training, job and career development services** which enable youth to become emancipated and independent adults. Build these services with the joint goal of enhancing the transition age youth's ability to create and sustain connection to a support system of family, appropriate friends, and effective service providers.
 - 5.1 **Provide life skills training** appropriate to the developmental tasks of transition age youth: financial management, housing readiness, and relationship skills.
 - 5.2 **Offer a range of educational and experiential training** that is not diagnosis related but has the capacity to minimize the affect and onset of emotional and behavioral disabilities, for example, yoga, meditation, stress reduction training, and anger management strategies.
 - 5.3 **Have remedial training readily available** for transition age youth who seek further formal education but lack the skills to enter traditional settings and/or who have faced stigma and discrimination in previous school experiences and need strategies for re-entry and educational success.





5.3.1 **Expand leadership-training opportunities** for transition age youth who can then advocate for themselves and their peers by participating in the Community Advisory Panel and related community and county planning processes.

5.4 TAY who have successfully participated in treatment and support services have unlimited potential which should be encouraged. Programs should be developed to assist TAY in Alameda County enter and succeed in college. These services should include:

Academic advising which helps identify schools and programs offering applicable support services.

Financial aid planning support for TAY.

Support groups to identify common barriers and create solutions.

Peer and professional mentors to help make the college experience successful.

Strategy For Resource Mobilization And Sustainability

The Strategies for Resource Mobilization And Sustainability will:

- 6.0 **Work to ensure** that transition age youth and their families can rely on the Alameda County Behavioral Health Care Services for services that are effective, dependable, youth appropriate, consistent, and sustainable.

- 6.1 **Create communication and marketing strategies** to promote the needs and potential of well-served transition age youth as vital members of the Alameda County community.

- 6.2 **Promote communication and marketing campaigns** demonstrating the cost effectiveness of Alameda County Transition Age Youth services.





- 7.0 **In partnership with transition age youth, their families, and support systems, advocate at the local, state, and federal level** for appropriate funding and resources to increase access to services and treatment, build capacity for adherence, and increase the capacity for successful mental health outcomes for all Alameda County transition age youth.
- 7.1 **Provide accurate and timely information** on new services and expanded service options.
- 7.1.2 **Modernize the communication of services** through new and emerging technologies like internet, “blogging,” and text messaging, which are more appropriate to transition age youth.
- 8.0 **Recognize that transition age youth are members of families** who may or may not include parents, grandparents, guardians, spouses, partners, children, and friends. Provide services that support the strengthening of these family configurations in support of improved mental and emotional health.
- 8.1 **Offer services appropriate for young parents** and include educational skills for being an effective parent, day care services, and periodic respite care for the parent.
- 8.2 **Provide life skills training** for young families.
- 8.3 **Have available relationship and family counseling** for transition age youth engaged in partnerships who are parents.

Transition Age Youth Program Key Performance Measures

The Transition age Youth Program and the Community Advisory Panel will measure how well we are doing in achieving the goals of this Strategic Plan by:

1. Increasing outreach to youth and their families in Alameda County to educate and train them on how to identify mental health and emotional problems within their families and where to go for help within the next 3-5 years by:
 - a. Developing a **TAY speakers bureau** which does outreach to High School Seniors and College Campuses within the county.
 - b. Developing a **youth orientated web-site** which promotes mental health awareness and helping resources.
 - c. Developing **brochures which welcome youth** and their families to seek out more information and help.
 - d. **Resource guide accessible** to youth and families.
2. Increasing numbers of transition age youth with serious mental illness or emotional and behavioral disabilities who access and succeed in Alameda County sponsored programs as measured by:
 - a. **Increasing numbers of agencies** that serve TAY with serious mental illness or emotional and behavioral disabilities, special programs and overall TAY participation in those services to increase by 20% within the next 3-5 years.
3. **Reducing Mortality** among transition age youth in Alameda County. Reduce the death rate among transition age youth with serious mental illness or emotional and behavioral disabilities in Alameda County by 25% within the next 3-5 years.

4. **Decreasing stigma and discrimination** concerning severe mental illness and emotional and behavioral disabilities amongst Alameda County employees, community based youth serving partners, and community leaders by:
 - a. An introduction of a **youth and family speaker's bureau** which does outreach and presentations to increase awareness and acceptance within the next 3 – 5 years.
 - b. An **increase in TAY accessing** programs, satisfaction surveys, and family focus groups.

5. **Develop and implement a comprehensive system of care** that responds early and consistently to the needs of transition age youth as demonstrated by:
 - a. Measuring the increase of programs and enrollments which serve youth.
 - b. Surveying the satisfaction of the participants of those programs annually.



Conclusion

A Beginning...

With the strategies outlined in this report we have the framing to build services to meet the needs of TAY with serious mental illness in Alameda County. It's a beginning- a fresh opportunity to build new TAY programs and services that are based on Wellness, Resilience and Recovery. Moreover, Alameda County is committed to TAY and families to be active partners in the development and building of those services.

Thank you for reading this report and we will be counting on you for your continued support.



For more information or additional copies, please contact:

Transitional Age Youth (TAY) Program

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