



EMQ FamiliesFirst

Addiction
Prevention
Services-
Santa Clara
and
Alameda

2015

Annual Report

Table of Contents

Mission Statement..... 2

Eligibility and Referral Process 4

Executive Summary..... 5

SECTION I: DESCRIPTIVE DATA (Santa Clara County – Indicated Services)..... 6

 Sex 6

 Ethnicity..... 7

 Age..... 7

 Reason for Discharge.....8

SECTION II: DESCRIPTIVE DATA (Alameda County - All Services).....9

 Sex 9

 Ethnicity..... 9

 Age10

Section III: APS Program Outcomes..... 10

 Satisfaction Outcomes 17

SECTION IV: STAFF INFORMATION 18

SECTION V: SUCCESS STORIES20

Mission Statement

We do whatever it takes to help children, strengthen families, build community, and advocate for systems change to ensure that our families thrive.

Addiction Prevention Services Vision:

Our vision is that children and families in our community will experience hope, health, and happiness including those with complex co-occurring needs.

Program Description:

Our Program specifically targets and provides prevention, intervention, and treatment services. The prevention approach has been proven to reduce the likelihood of developing alcohol, drug and other high risk behaviors. The intervention and treatment services support and stabilize children and families who have complex co-occurring needs.

APS Continuum of Care Provides Services in the School, Agency, and Community:

APS offers programs and services at three distinct levels of need.

1. Prevention: Universal Prevention, Selective Prevention, and Indicated prevention intervention.
2. Intervention: Risk assessments, family case management, and individual and group counseling.
3. Treatment: Intensive individual, family, and/or group therapy.

Services:

School-Based Prevention and Intervention Services

APS provides services at 25 schools in Santa Clara and Alameda County. These custom designed services address the barriers to learning and target high risk behaviors. This service builds on the school and students strengths and is solution oriented. It is designed to meet the needs of the student, school, and community.

School-Based Services include:

- Intake Assessment: Evaluate the co-occurring needs and strengths of students to determine which APS service is appropriate and/or refer to other service providers.
- Classroom Presentations: Single or a series can be offered with such subjects as drugs and alcohol, teen depression, healthy relationships, bullying and anger management.
- Targeted Intervention Groups: 8-10 week groups for up to eight students identified as needing support, education and tools to address such high risk behaviors as substance abuse, teenage pregnancy, abusive relationships, self-mutilation, and unhealthy coping skills.

- **Individual Counseling:** This service is for students who need one on one support to address behaviors which may be interfering with their academic, social, or emotional functioning.
- **Teacher Education:** Training for teachers and school staff to help identify students' behavior and trends in the community that may be interfering with attendance, academics and social or emotional functioning of students. APS focuses on prevention, intervention, and community based referrals and resources.
- **Parent and Caregiver Services:** Single presentation or a series can be offered for parents and caregivers addressing what parents can do to keep their youth safe and performing well in school. Topics can include drug and alcohol prevention, gang prevention, bullying, suicide prevention and mental health issues.
- **School Assemblies:** Services for one grade level, girls, boys or the entire school. Topics include healthy choices, depression, bullying, gang prevention, sexual harassment and what to do after graduation and more.
- **Family Case Management:** Provide caring supportive and resourceful partnership to families with members involved in high risk behaviors. This service is designed to stabilize and reduce risk factors within the family.
- **School District Support:** APS staff attends Student Attendance Review Board (SARB). This service offers Addiction Prevention Services to students and families impacted by drugs or alcohol in an effort to reduce excessive truant behavior.

Community Based Prevention Services

The Addiction Prevention Team participates actively within the community to strengthen and develop prevention strategies, enhance anti-drug norms and pro-social behavior, as well as change community standards and policies. We currently participate in several partnerships in both the schools and the greater community.

Community-Based Services Include:

- **Community/neighborhood educational resource fair events and workshops for educators, professionals and community members:** Topics include Gang Prevention/Intervention, Drug and Alcohol Awareness, Teen Depression and Suicide Prevention, Bullying, and Current Trends such as Prescription Drug Use and Self Mutilation.
- **Collaboration with community partners:** Done with the goal of connecting, coordinating, and leveraging prevention/intervention resources and community based organizations that are a part of the Mayor's Gang Prevention Task Force, Police Department, Faith Communities, Schools, Department of Drug and Alcohol Services, and other Community Stakeholders in Santa Clara County.

Children and Family Intervention and Treatment Services

Addiction Prevention offers family-focused and strength-based programs in our community and at our agency sites. These programs are designed to meet the specific needs of children and families impacted by co-occurring and complex needs.

Celebrating Families! and Celebrando Familias! Groups:

This evidence based, cognitive behavioral, support group model is designed for when one or both parents have a serious problem with alcohol or other drugs and there is a high risk for domestic violence, child abuse or neglect. This is a 16 session cycle and is designed for the entire family from birth to adulthood. The program targets the entire family and inspires hope, health, and change for families. The average enrollment per group cycle is 30 family members.

Integrated Behavioral Health Services (Coming Soon FY 2015/2016):

The Integrated BH services support and treat those with complex co-occurring needs. Services for each individual may include a combination of individual, group, and family therapy. A combination of evidence based models and practices will be utilized including cognitive behavioral therapy (CBT), motivational interviewing, trauma informed practices, and more. This service is for MediCal customers up to the age of 21 years old.

High Risk Adolescent Program (HiRap) Group (Coming Back Soon FY 2015/2016): HiRap is a 10-week 90 minute group program for high risk youth ages 13-21 who have both mental health and substance abuse treatment needs. Groups are formed and developed based on ages of participants. Evidence based models used include Seeking Safety, Adolescent Community Reinforcement Approach (ACRA), and Celebrating Families.

Eligibility and Referral Process

Students and Families are referred to Santa Clara County School Based Addiction Prevention Services through student self referral, parents, caregivers, school administrators and teachers, and students friends. No insurance is required and they receive services at no cost.

School Based Services in Santa Clara County

Service Level	#Served
*Universal	4,880
*Selective	170
*Indicated	195

*Universal Services include: Classroom presentations, teacher and parent education, and school assemblies.

*Selective Services include: Target intervention groups

*Indicated Services include: Individual Counseling and Family Case Management

Students and Families are referred to Alameda AOD Prevention School Based Services through student self referral, parents, caregivers, school administrators and teachers, and students friends. No insurance is required and they receive services at no cost.

School Based Services in Alameda County

Service Level	#Served
*Universal	3,766

*Selective	677
*Indicated	244

*Universal Services include: Classroom presentations, teacher and parent education, and school assemblies.

*Selective Services include: ID/ Referral Assessments and Target intervention groups

*Indicated Services include: Individual Counseling and Family Case Management

Celebrating Families! and Celebrando Familias participants in Santa Clara County (SCC) are referred by DFCS Social Workers and have an active case with DFCS. Celebrating Families! and Celebrando Familias participants in Alameda County are self referred.

Celebrating Family Services

Location	#Served
SCC	163
Alameda	65

For additional information, please contact:

Toni Welch Torres (408) 876-4271

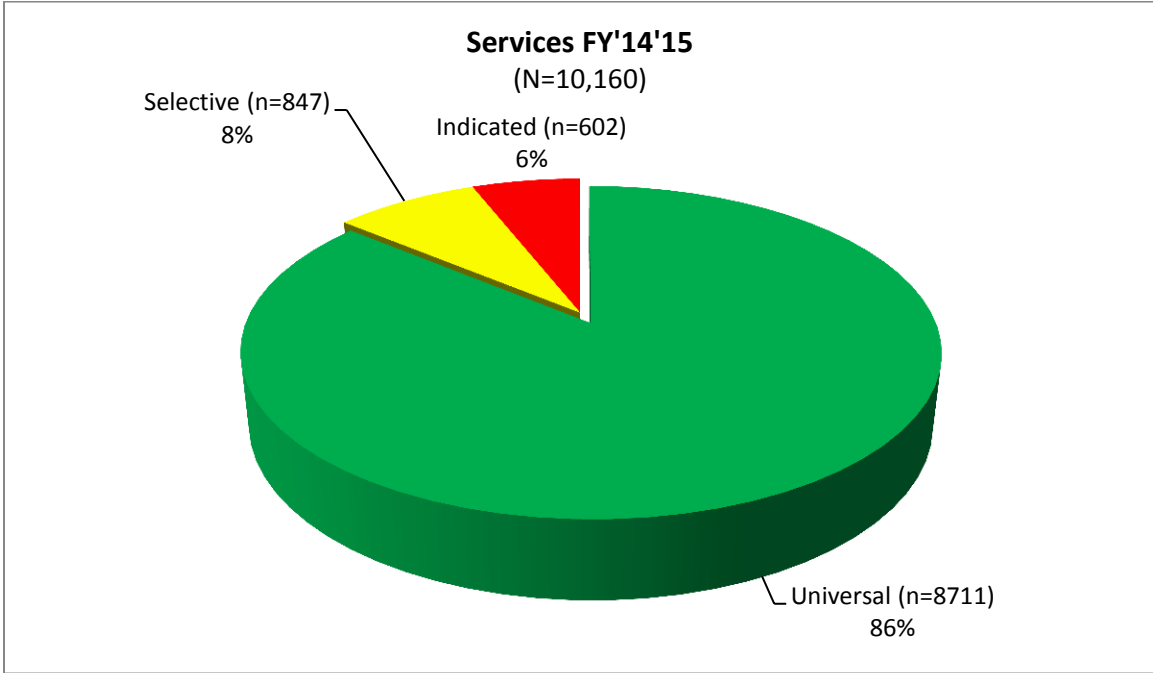
Executive Summary

This document provides an overall summary of treatment results from FY15. The full report presents detailed information on demographic information, treatment progress, and functional status of the children and adolescents served by **Addiction Prevention Services (APS)**. The outcomes of service delivery include improvements in functioning from intake to discharge, and documentation on whether children and adolescents are in home, in school, and out of trouble at discharge from services. In addition, satisfaction ratings by consumers are included.

Descriptive Data

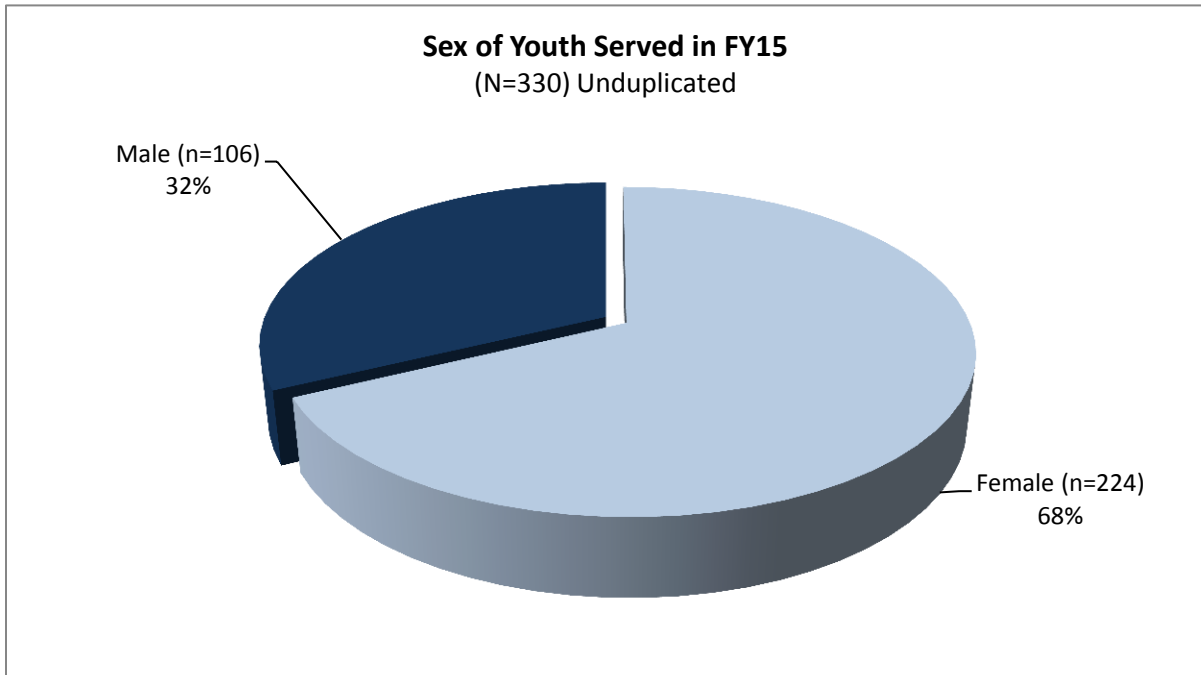
- Over 10,000 children, adolescents, caregivers, and school personal were served through EMQFF APS Department from July 1, 2013 through June 30, 2014 in Santa Clara and Alameda Counties.
- The children, adolescents, and caregivers served in APS were 56% female and 44% male.
- The children and adolescents served in APS were ethnically diverse. Roughly 37% of the children and adolescents were Latino American, 19% Caucasian, 7% African American, 25% Asian, 3% Native Hawaiian, 2%Native American, 5% multiracial, and 2% other (including mostly Afghan and Asian Indian).
- The majorities of young people served in APS were in grades 6 through 12 and ranged from 11 to 18 years of age. Our Celebrating Family participants age range from 0 through adulthood.
- Youth and families receiving prevention and intervention services in APS are not assigned a clinical diagnosis although they present with a range of co-occurring and complex issues.
- School Based Services are rendered only during the months schools are in session. The length of services varied for each youth. Celebrating Families services run for 16 weeks per cycle.

Universal, Selective, and Indicated Services in Santa Clara and Alameda Counties



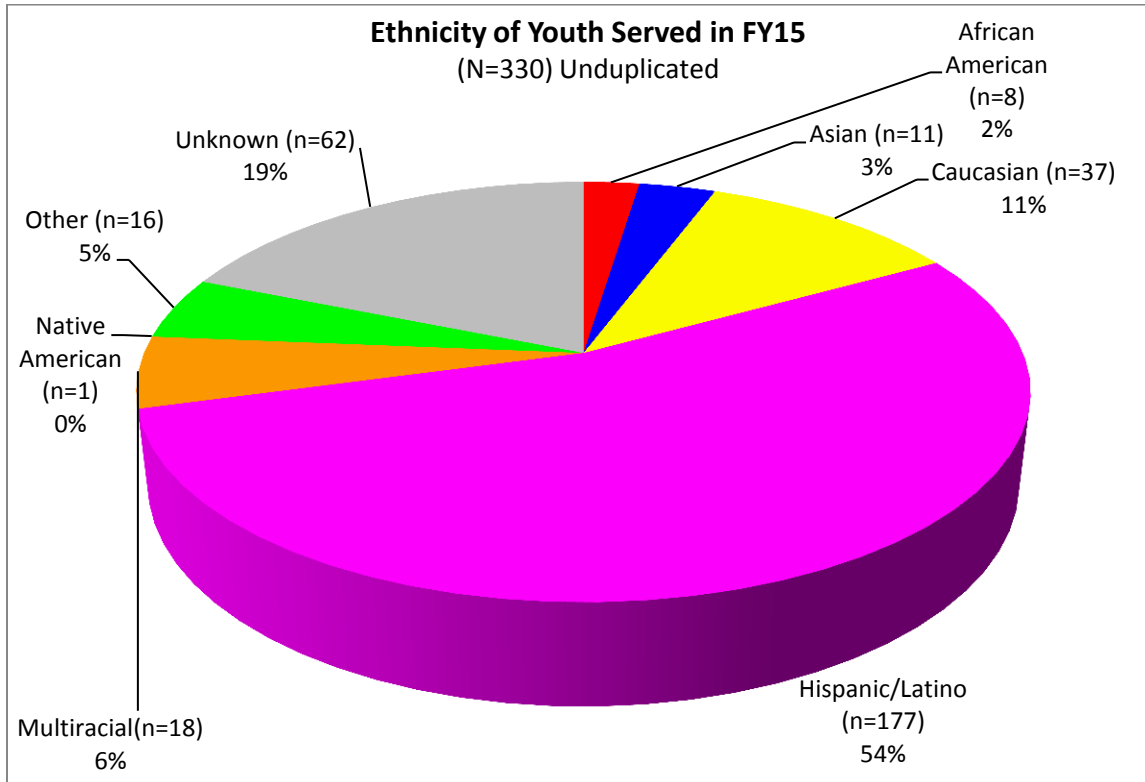
SECTION I: DESCRIPTIVE DATA (Santa Clara County – Indicated Services)

Sex



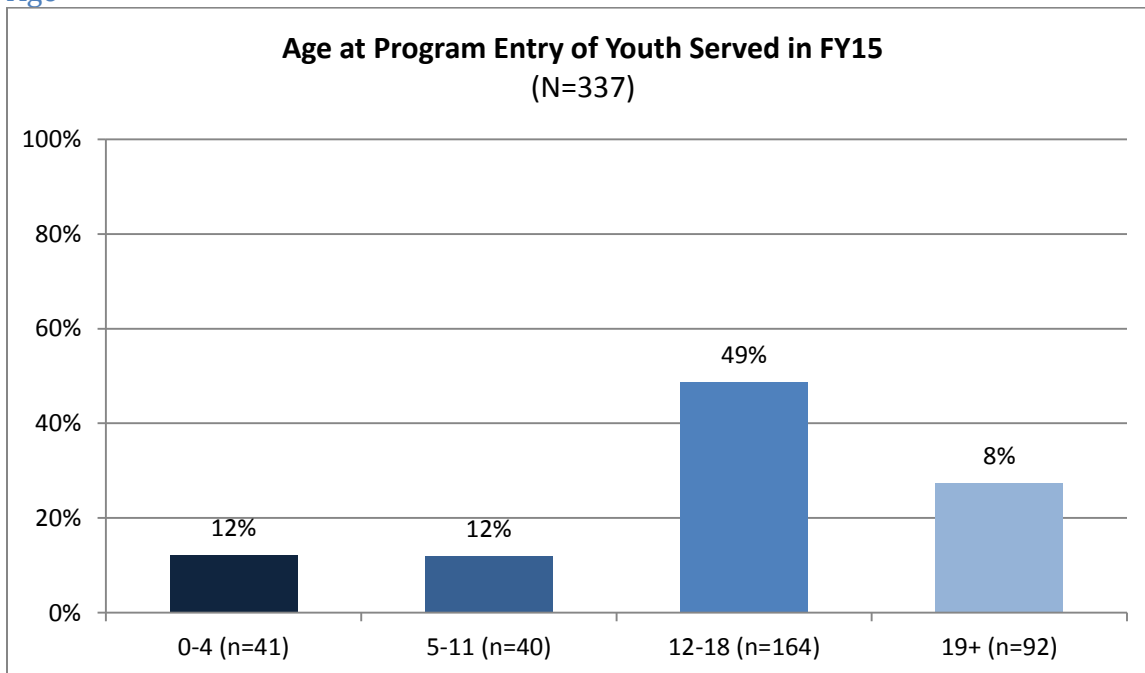
Source: TIER Master client 07/24/2015

Ethnicity



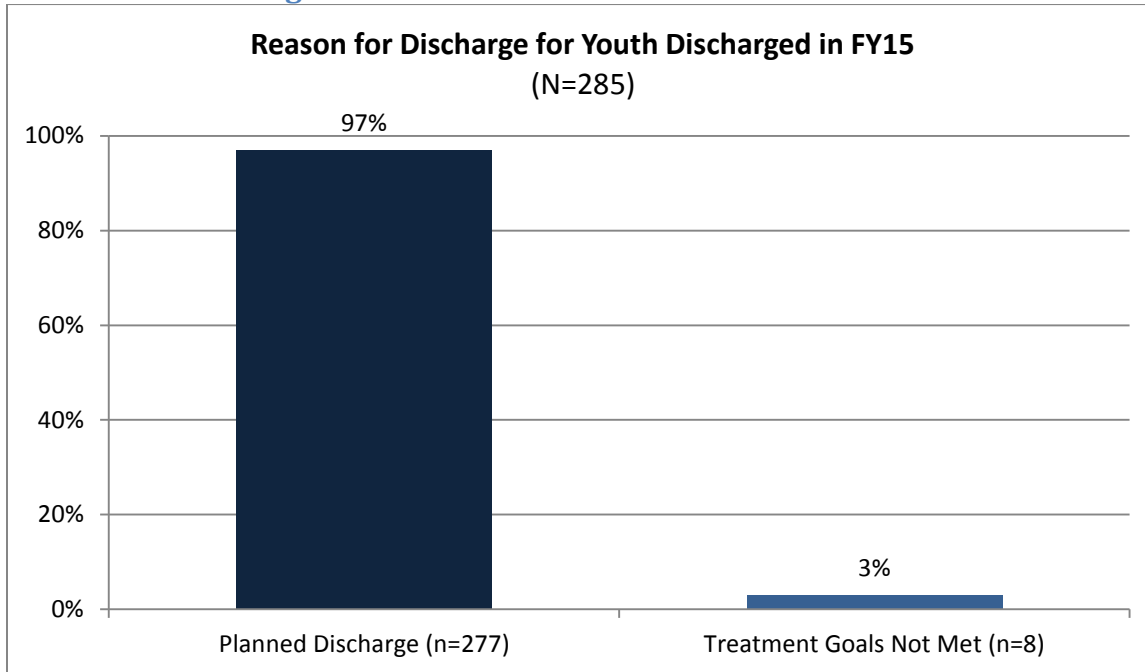
Source: TIER Masterclient 7/24/2015.

Age



Source: TIER Master client 7/24/2015.

Reason for Discharge

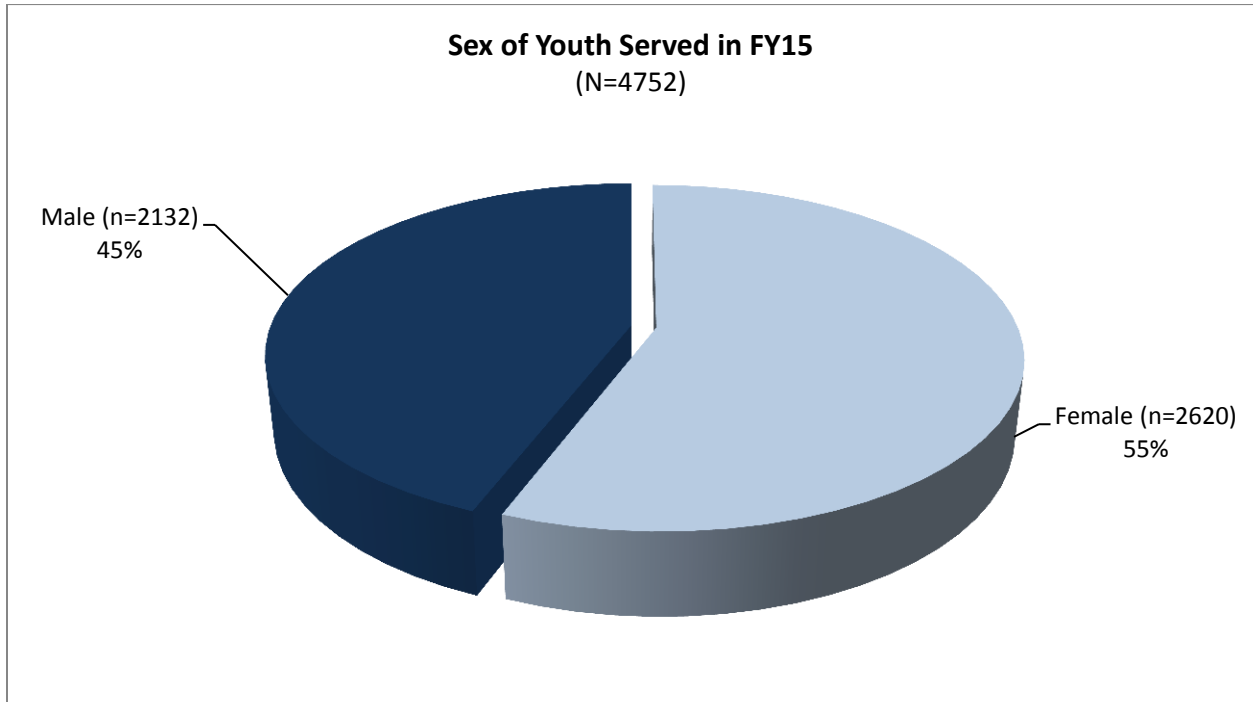


Source:

TIER Master client 7/24/2015.; Note: (1) Two youth had missing data.

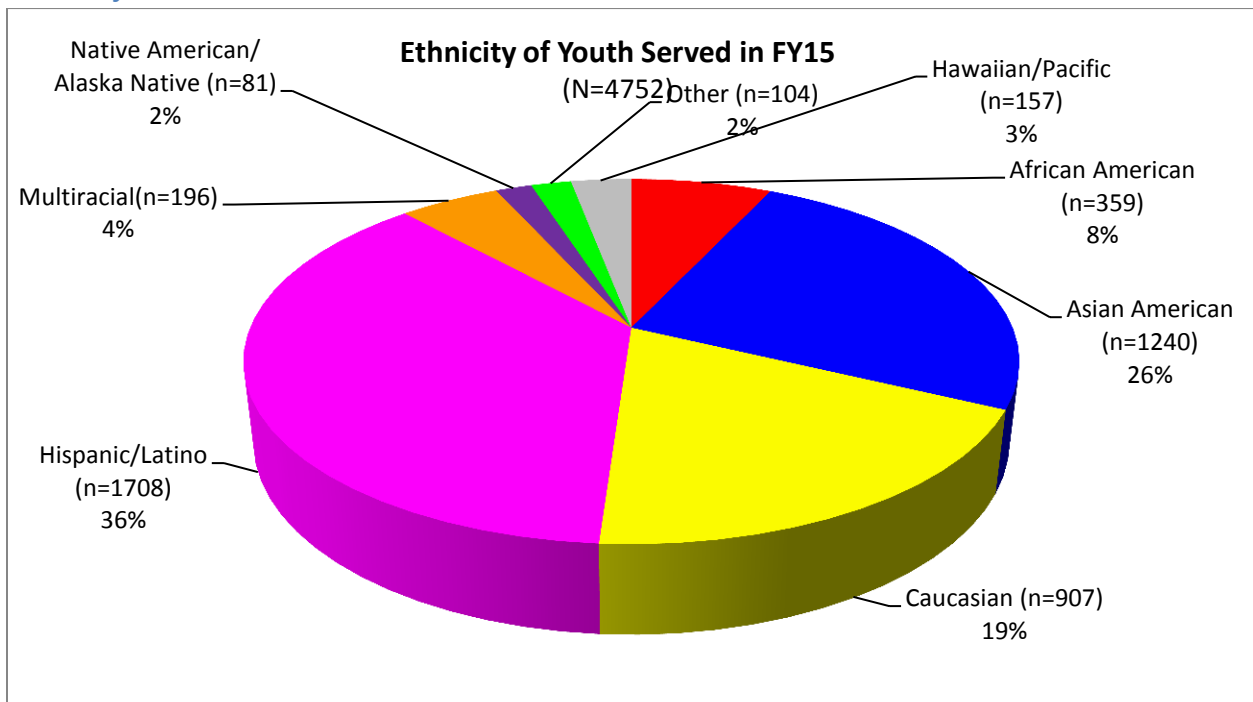
SECTION II: DESCRIPTIVE DATA (Alameda County – All Services)

Sex



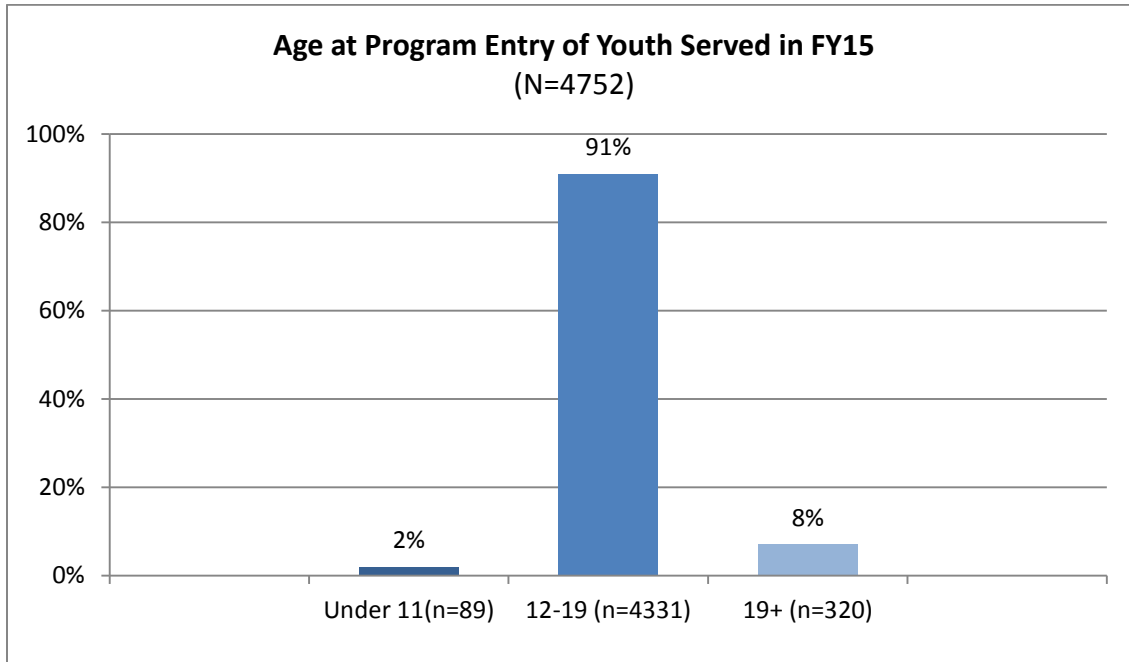
Source: CalOms Prevention Activities Report of Age and Gender Per Service FY'14/'15

Ethnicity



Source: Source: CalOms Prevention Activities Report of Race/Ethnicity Per Service FY'14/'15

Age



Section III: APS Program Outcomes

Alameda Alcohol and Other Drug (AOD) Prevention Services:

During the 2014/2015 school year we were able to serve 4,752 students and caregivers through a variety of services including ID and referral services, individual and group prevention, and parent /family support education.

Objective # 1:

Youth will: 70% of the youth participating in group or classroom presentations on the topic of alcohol will report a perception and knowledge that consuming 5 or more drinks once or twice a week is harmful as measured by an EMQFF outcomes based retro service survey tool.

Outcome # 1:

From the students who received presentations or longer recurring services we received post surveys. Out of the students surveyed 92% responded yes to the question “that consuming 5 or more drinks once or twice a week is harmful.”

Impact:

Many of the students in the groups and individual services expressed not having the perception or knowledge “that consuming 5 or more drinks once or twice a week is harmful” prior to services. Many were surprised and indicated that they were making safer choices as a result and telling their friends to make safer choices as well.

Objective # 2:

Youth will: 50% of the youth participating in classroom presentations on the topic of marijuana will be able to list 3 ways in which marijuana use negatively impacts individuals, families, and community.

Outcome # 2:

From the students who received presentations or longer recurring services we received post surveys from them. Out of the students surveyed 68% were able to list 3 ways in which marijuana use negatively impacts individuals, families, and communities. An additional 12% were able to list 1 or 2 ways. In sum, 80% of the students surveyed were able to list between and 1 and 3 ways marijuana use negatively impacts individuals, families, and communities.

Impact:

Some common impacts marijuana can have or causes listed in the surveys by student included: drop out of school, cancer, family arguments and problems, depression, have no money, go to jail, harmful for your body, addiction, damages the brain, make bad choices, mood swings, homelessness, lower grades, poor health, get into trouble.

Many of the students who were part of recurring services reported abstaining from or decreasing their desire to use marijuana as a result of what they learned through the services provided. Some reported that the negatives impacts of marijuana outweighed their original perceived benefits.

Objective # 3:

Celebrating Families! Program: 80% of the parent participants will be able to list three ways to positively interact with family members as reported on the Celebrating Families Retro Parent Skills and Satisfaction Survey.

Outcome # 3:

100% of the parents who attended the 12 week CF group were able to list three ways to positively interact with family members as reported on the Celebrating Families Retro Parent Skills and Satisfaction Survey.

Impact:

100% of the parents who attended the 12 week CF group program marked mostly agree and strongly agree to the statement "I feel this program promoted and improved relationships in my family and the community."

Some of the many positive comments from participating parents regarding the CF program: "The program helped me learn how to communicate in a more effective way with children", "I learned more about family meals and the importance of quality time with each other", "I realize the importance of spending more time with my family", "The program helped me understand drugs and alcohol and their consequences and how to talk to my children about them", "I learned to have better listening skills with my children". One father wrote, "I learned to listen to my kids and their emotions instead of stopping them thinking I know what's best" and "I learned to give my wife and kids the respect they deserve!"

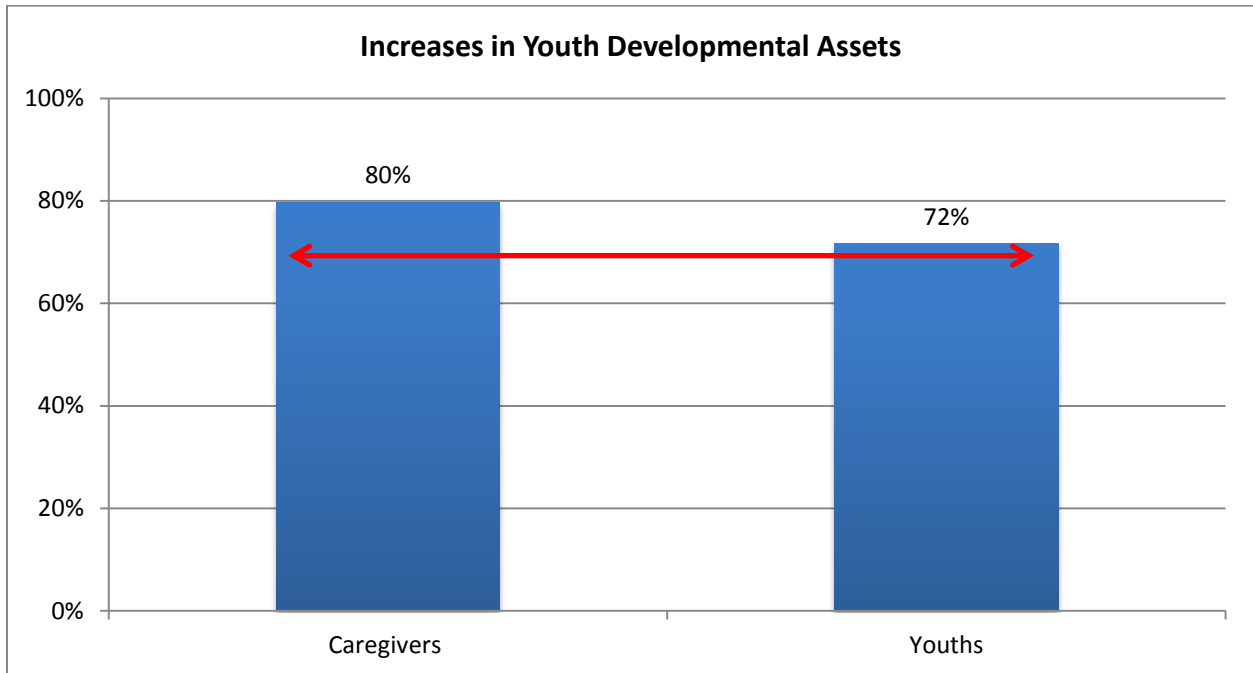
Campbell Union High School Program / Funded by El Camino Hospital:

Objective #1:

70% of caregivers and youth will report increased youth developmental assets.

Outcome #1:

Both caregivers (80%) and youth (72%) reported increased youth developmental assets, including: the youth's ability to get help if they or one of their friends is depressed or suicidal has increased, youth's understanding of who they are and what they can do, youth's ability to communicate is better, youth's success at school or job/training is better, youth's have more respect for others who are different from them, they are better able to connect with adults, their ability to learn new things is better, they are better able to work with others, and their knowledge increased about drugs and alcohol.



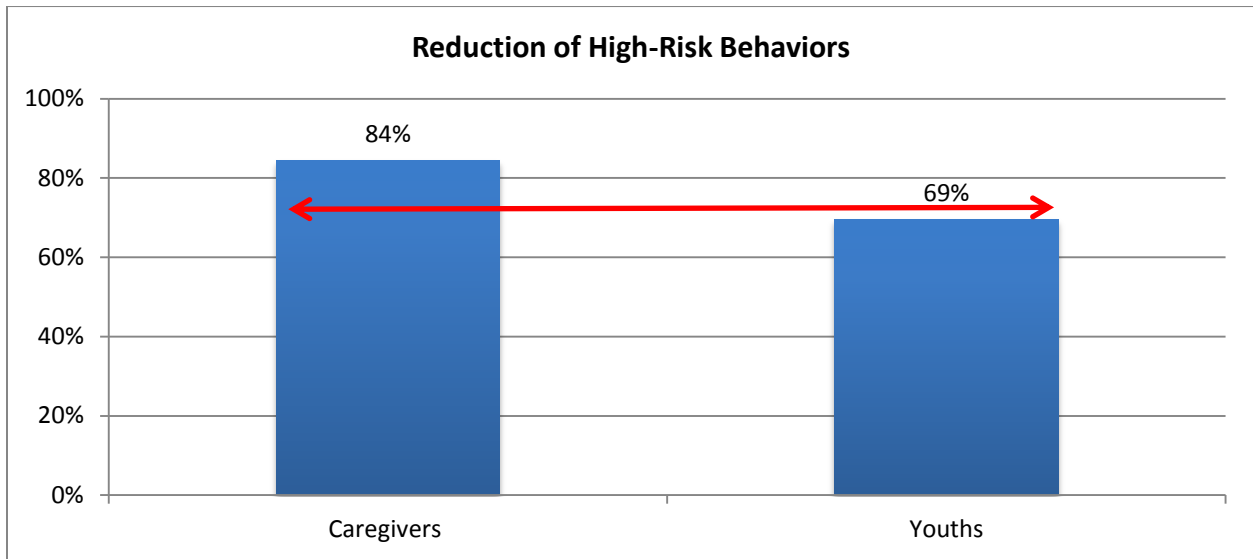
Source: BEST Youth Development survey 8/24/2015 and BEST Parent Satisfaction survey 8/24/2015.

Objective #2:

70% of caregivers and youths will report reduced high-risk behaviors for youths.

Outcome #2:

Caregivers (84%) and youths (69%) both reported reduced high-risk behaviors for youths, including: better ability to cope with stress, identify anger and express it in a non-violent way, feel prepared to succeed in the community, participate in positive activities, reduced drug and alcohol use, and increased their ability to stay safe.



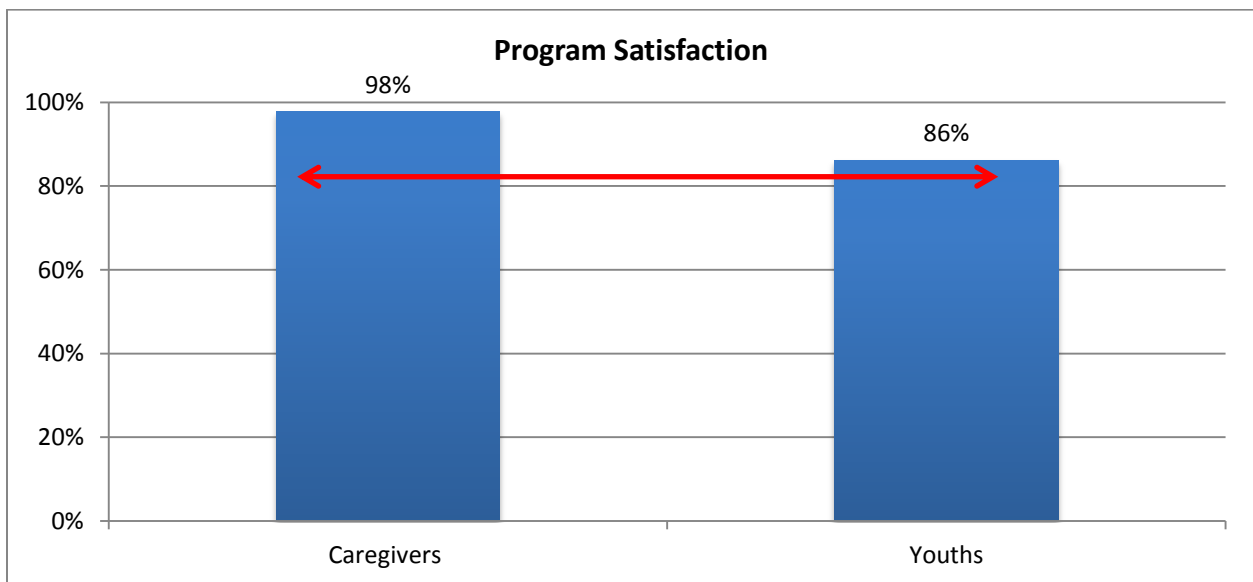
Source: BEST Youth Development survey 8/24/2015 and BEST Parent Satisfaction survey 8/24/2015.

Objective #3:

80% of caregivers and youths will be satisfied with the services they received.

Outcome #3:

Both caregivers (98%) and youths (86%) were satisfied with the services they received.



Source: BEST Youth Development survey 8/24/2015 and BEST Parent Satisfaction survey 8/24/2015.

Agency Based Celebrating Families Program:

Celebrating Families Objectives:

- To break the cycles of chemical dependency and violence/abuse in families by increasing participant knowledge and use of healthy living skills.
- Participants will develop better communication skills and learn how to appropriately express their feelings.
- Participants will be able to demonstrate anger management skills.
- Participants will be able to use problem solving and decision making skills. They will also develop coping skills to deal with stressful situations.
- Participants will increase their knowledge of the impact of alcohol, prescriptions, and illegal drugs on children, individuals, and families.
- Group leaders will work to decrease participants use of alcohol and other drugs and to reduce relapse by teaching all members of the family about the disease of chemical dependency and its impact on families.
- Group leaders will positively influence family reunification by integrating recovery into daily family life and by teaching healthy parenting skills.
- Group leaders will provide a safe and nurturing place for children and parents to talk and to explore their feelings and choices
- Group leaders will facilitate trust through a process of bonding with consistent role models and assist participants in developing their self-awareness and self-worth.

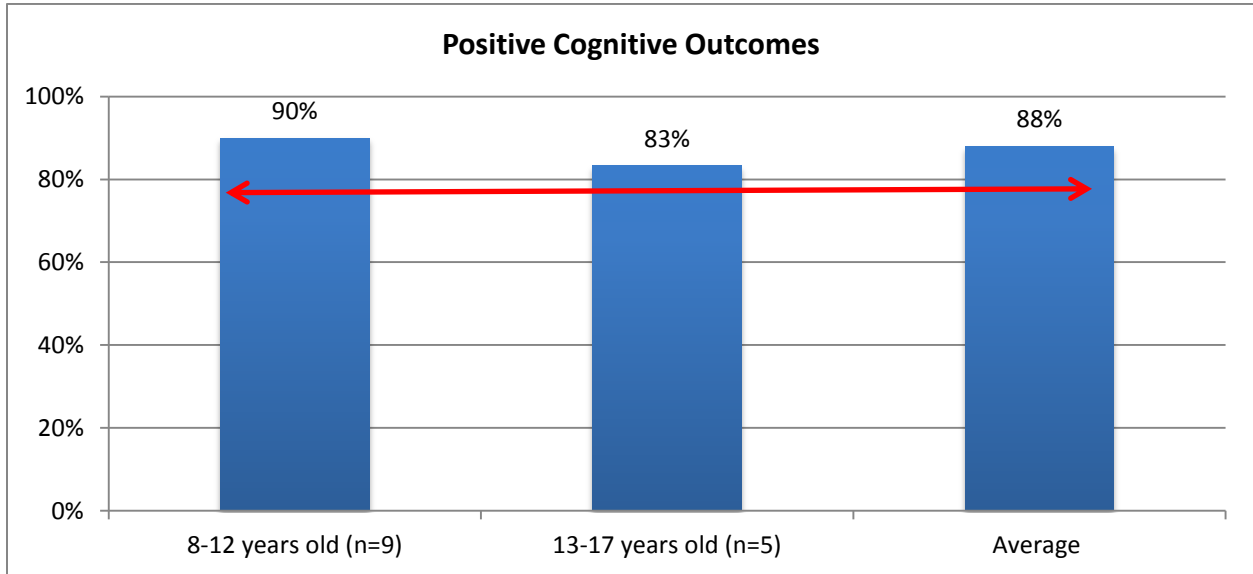
Celebrating Families Outcomes:

Objective #1:

75% of youth will indicate positive cognitive outcomes.

Outcome #1:

88% of youth had positive cognitive outcomes.



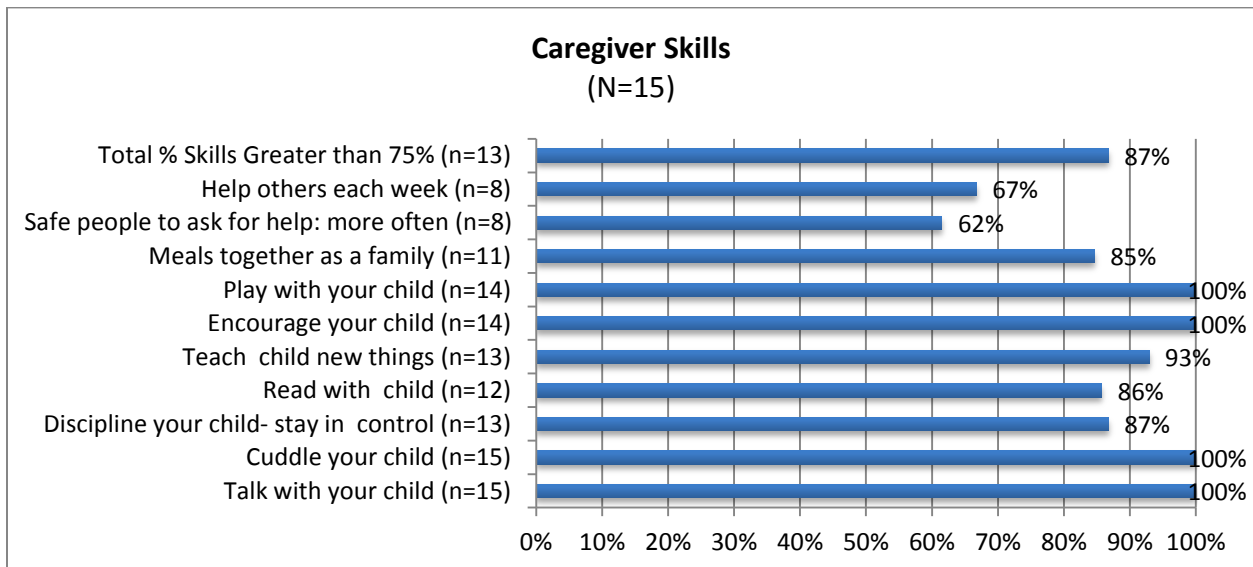
Source: CF! Adolescent Cognitive Outcomes (N=6); CF! Child Cognitive Outcomes (N=10).

Objective #2:

75% of caregivers will indicate increased, or maintain regular use of skills on a weekly basis.

Outcome #2:

87% of caregivers indicated increased, or maintained regular use of skills on a weekly basis.



Source: CF! Caregiver Skills Assessment.

Objective #3:

80% of enrolled families will complete one cycle (16 sessions) of the program.

Outcome #3:

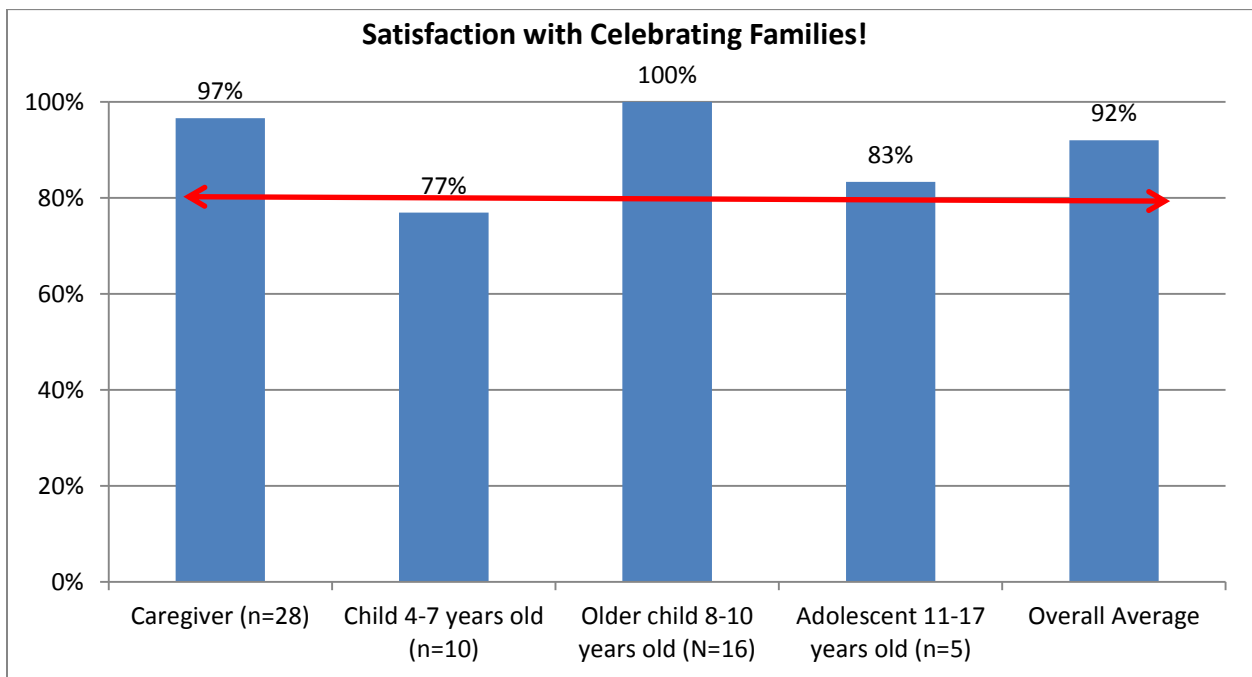
86% of families enrolled in Celebrating Families! did complete the 16 session program.

Objective #4:

80% of youth and caregivers will be satisfied with CF! and will have found the program to be beneficial for their family.

Outcome #4:

92% of youth and caregivers were satisfied with CF! and found the program to be beneficial for their family.



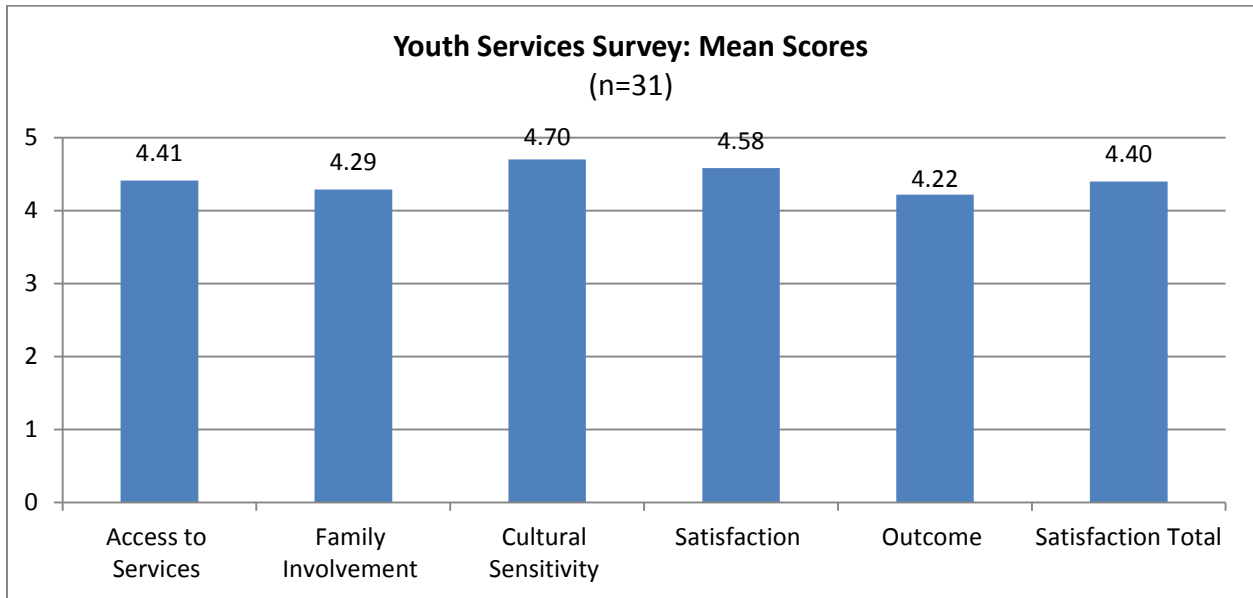
Source: CF! Caregiver Satisfaction (N=29); CF! Adolescent Satisfaction (N=6); CF! Older Child Satisfaction (N=16); CF! Child Satisfaction (N=13)

Satisfaction Outcomes

Youth Services Survey

To measure youth and caregiver satisfaction EMQ FF utilizes the Youth Services Survey for Families (YSS-F), the Youth Services Survey (YSS), and Adult Survey (AS). Satisfaction surveys are administered at the time of program discharge. In addition to discharge timeframe, satisfaction is collected two times per fiscal year, during the POQI State-Wide administration period. The YSS surveys ask caregivers and youth to rate to what extent they disagree or agree with statements on a 5-point Likert-type scale, ranging from “Strongly Disagree” (1) to “Strongly Agree” (5), with a score of 5 indicating the highest level of satisfaction. Our agency goal is for 80% of youth and families are satisfied with services. Satisfaction is defined as an average rating of 4.0 and above.

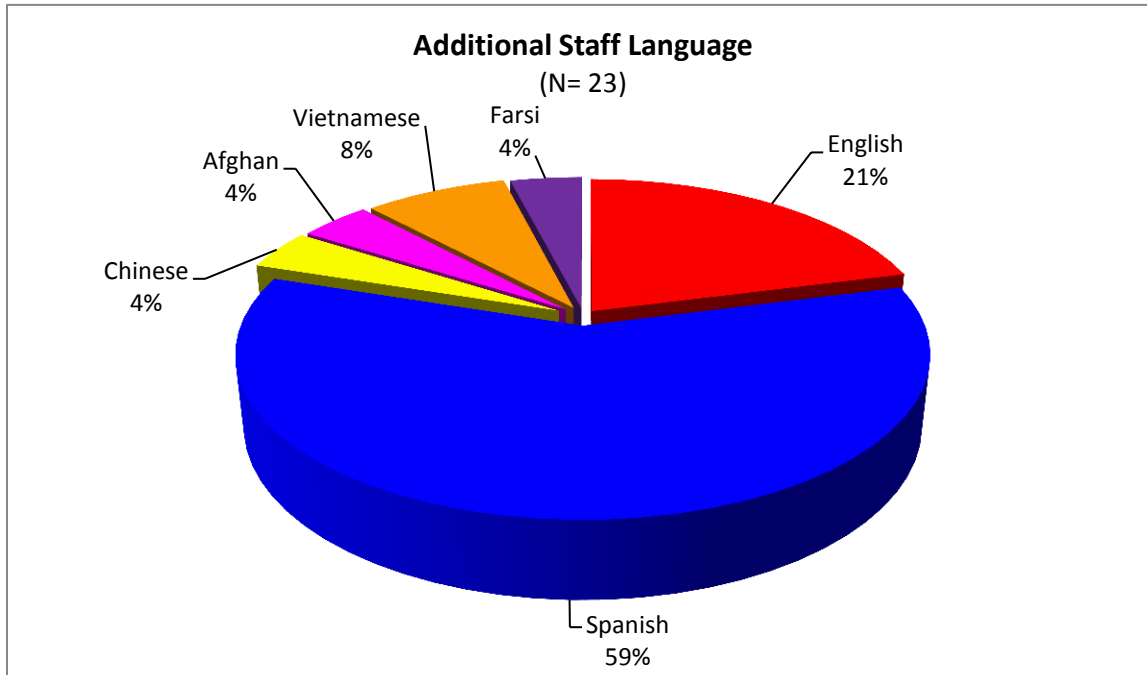
For the YSS-F, there was only one case available for FY15. This family completed their survey on May 2015 and had satisfaction levels greater than 4 on general satisfaction, access to services, cultural sensitivity, family involvement, and functioning.



Source: YSS 6/25/2015.; Note: (1) Satisfaction is defined as an average rating of 4.0 or above.

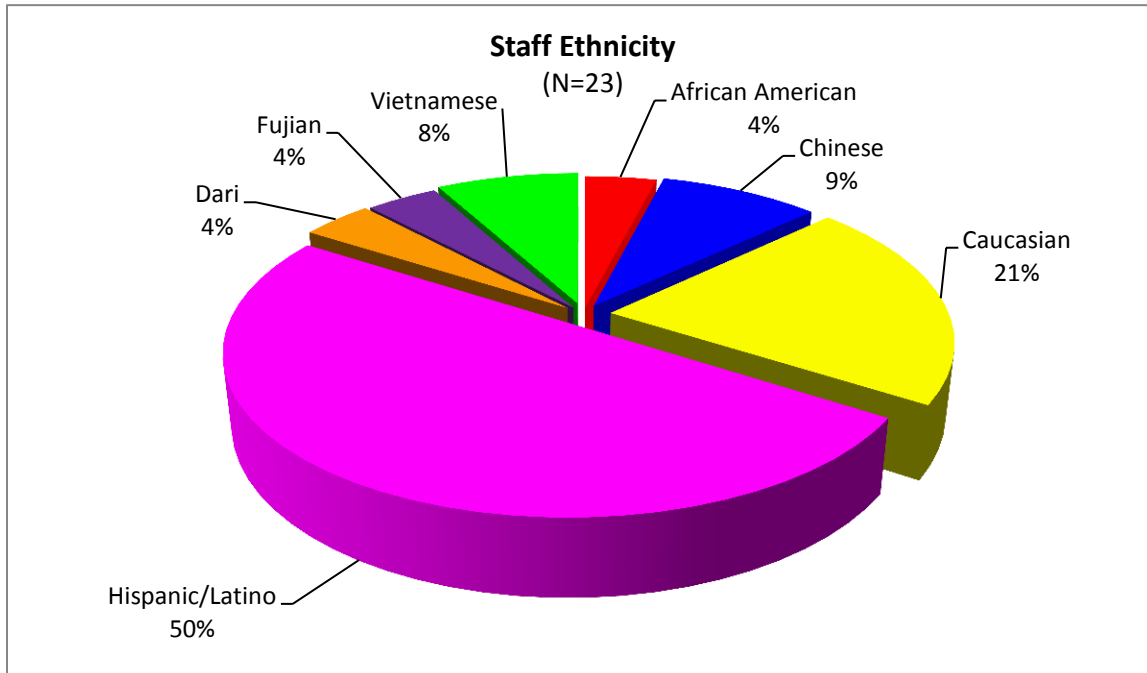
SECTION IV: STAFF INFORMATION

Staff Language: 79% of staff speak additional language



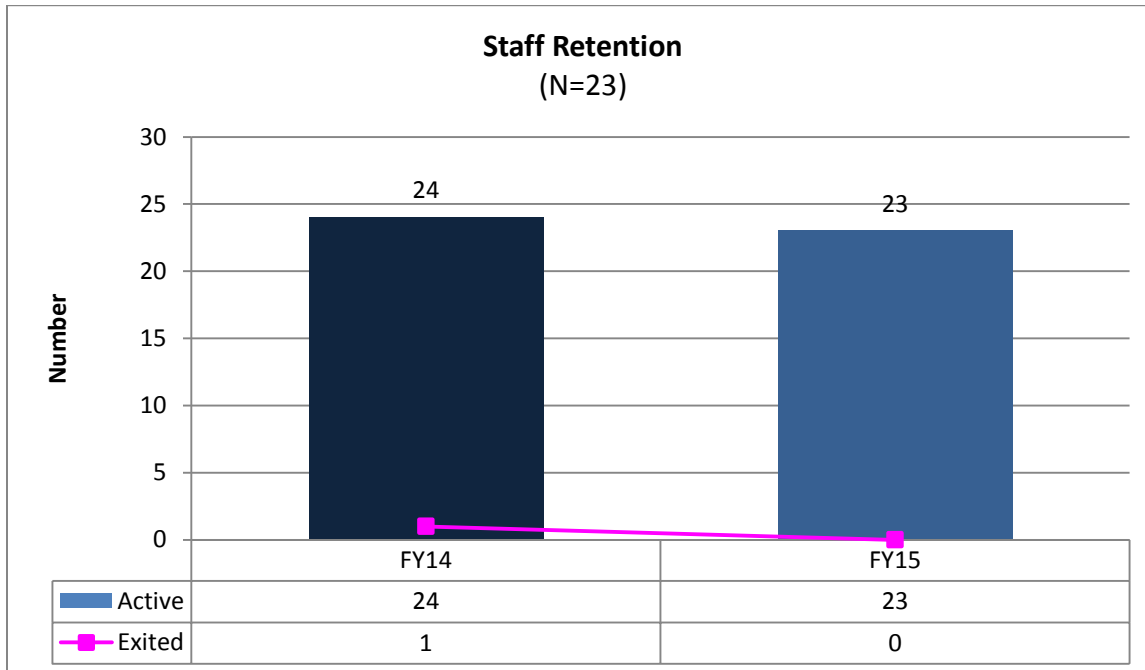
Source: Name 07/27/2015.

Ethnicity



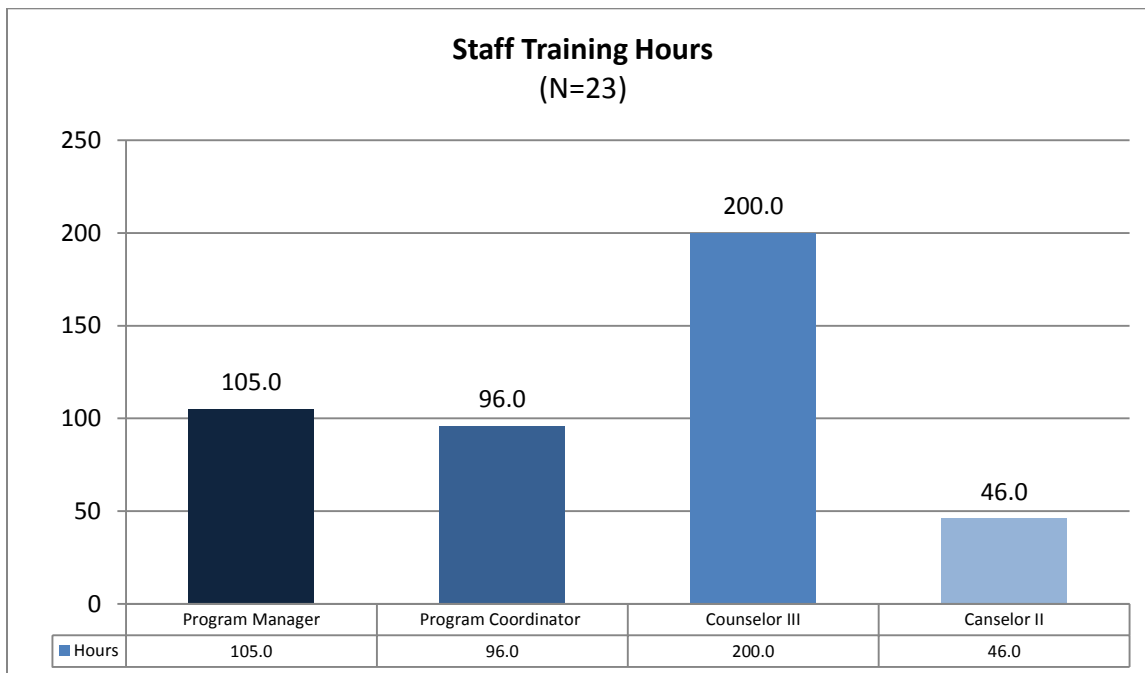
Source: Name 07/27/2015.

Staff Retention



Source: Name 07/27/2015.

Staff Training Hours by Position



Source: Name 07/27/2015.

SECTION V: SUCCESS STORIES

Campbell Union High School / El Camino Success Story

Due to EMQFF services funded by El Camino Hospital, a life was saved. Joe is a sophomore student at one of the five Campbell Union High Schools. When he was younger, he had multiple traumatic experiences as a result of his father, who is now in prison. He had services when younger but those stopped some time ago. This school year, he grew increasingly depressed, his grades were declining, he was constantly arguing with his mother, and his ability to play on the football team, which meant everything to him, was slipping away. He was becoming hopeless. One day, he attended a classroom presentation on Suicide Prevention presented by an Addiction Prevention Services Counselor providing services through the El Camino Hospital grant. Following the presentation, surveys were completed by each student. On the survey, the students were asked if they would like to talk to a counselor about the topic being presented or other needs. Joe checked “yes.” The counselor called him in for a needs assessment following the presentation. Through that assessment, it was determined that he was significantly at risk for attempting suicide and a “5150 hold” was needed. Due to his insurance provider, EMQ Mobile Crisis team advised the APS counselor that if possible and if safe, his mother should take him directly to the Emergency Room to initiate the hold. It was arranged for his mother and sister to pick him up directly from school and take him there. Due to his significant risk for suicide, a 5150 was initiated and turned from a 72 hour hold to a 6 day hold. During that time, he started medication and mental health services. He was connected to intensive outpatient services immediately upon his exit from the hospital. The EMQFF counselor was able to follow up with him two weeks later when he returned to school and he shared that he was already feeling significantly better and no longer wanted to kill himself. He had a new sense of hope for a better life. If Joe had not attended that Suicide Prevention classroom presentation and received a safety assessment that day, the ending of this story may have been very different.

Letter Written by Hispanic Sophomore Female Attending a Campbell HS

“My counselor Maria Perez has helped me to overcome many barriers. Before, I was stuck in the past and looking at the negative side of my life. Even though there is still chaos in my home I am able to look over that and keep doing what I am supposed to. My depression has gotten better and my anxiety problems have decreased. I thank Maria with my life, since that’s what she has saved.”

Comment on Survey by Parent who Attended APS Gang Awareness Presentation in Spanish at a Campbell HS

“Muy bien explicacion clara y la manera en ayudar en prevenir a nuestros hijos de peligro y mantenerlos seguros. Gracias por su tiempo para las familias hispanas.” In summary, this parent was thankful for the clear explanation on ways parents can protect their kids from danger and keep them safe. The parent was also thankful for focusing on Hispanic families.

Alameda AOD Prevention Success Story

Nadia, a sophomore Afghani female, received services through the Alameda AOD Prevention contract for the past year and a half. Due to her ability to receive individual and group services she made great strides in her ability to use healthy coping skills, manage negative issues that arise, and to prevent her from engaging in a variety of unhealthy behaviors.

Nadia worked with an EMQFF prevention counselor to address issues around culture, relationships with friends and family, and anger management. Prior to services she had felt hopeless at times and even took a lot of pills on one occasion when experiencing suicidal ideation. Once receiving services she became a very active participant and practiced what she learned through her work with the counselor. She regularly reported successes after applying coping skills and behaviors learned.

During the last few months of services she shared a fear of losing relationships with family and friends if she stood up to them and expressed her feelings. Due to her culture she thought she would come off as culturally disrespectful while attempting to be assertive. The prevention counselor was also Afghani and from the same ethnic background which allowed her to better understand Nadia's concerns and proceed with cultural sensitivity. They engaged in discussions on ways to be assertive and role played them to provide a distinction between being assertive and respectful vs. being disrespectful and aggressive. After a few weeks of working on this topic she reported to her counselor that she was able to stand up to her uncle who she felt was trying to take control of her choices and direction in life. She reported that she was able to address him with respect and kindness but most importantly she stood up for her feelings and what she needed. She set boundaries with him and he was able to understand and recognize where he was crossing boundaries. He stopped getting involved in her conversations with her parents as well as her choices. She shared that by addressing ways to stand up for herself she felt empowered and it gave her strength. She reported being very happy, very strong, and that it was a huge mark in her life because she had been battling a variety of mixed emotions regarding cultural expectations and the fear of losing relationships for many years. Overall, as a result of the services she received and actively applied to her life she ended the school year with a new sense of hope, happiness, strength, and empowerment.