



Mental Health Services Act 2019 Community Input Process

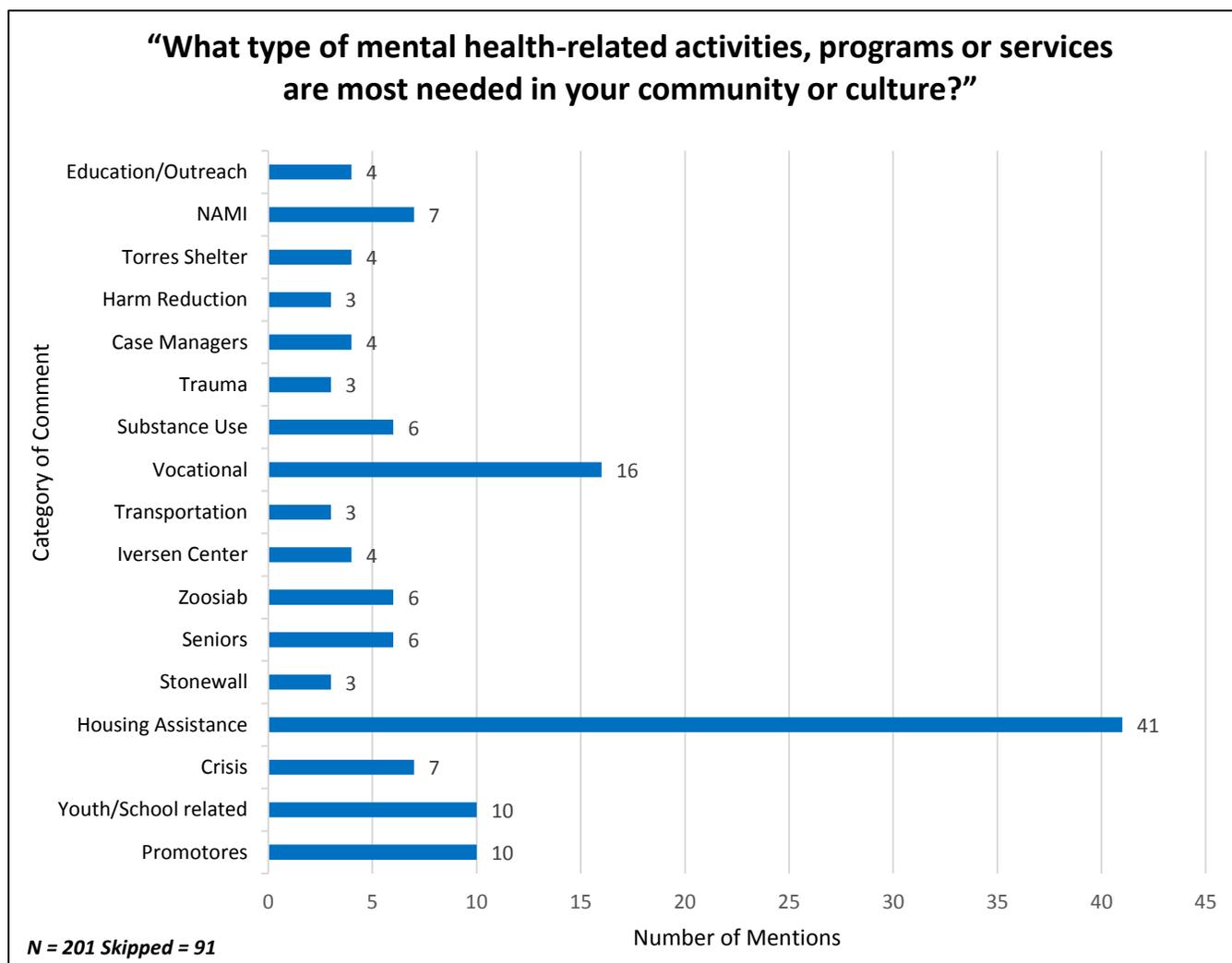
This survey was offered to all stakeholders of Butte County Behavioral Health during the annual Mental Health Services Act (MHSA) Community Input Process. This survey was open from January 16th to March 1st of 2019. There were **201 surveys taken**. The results of this survey will be utilized by administration and leadership when considering where to allocate MHSA resources.

Findings

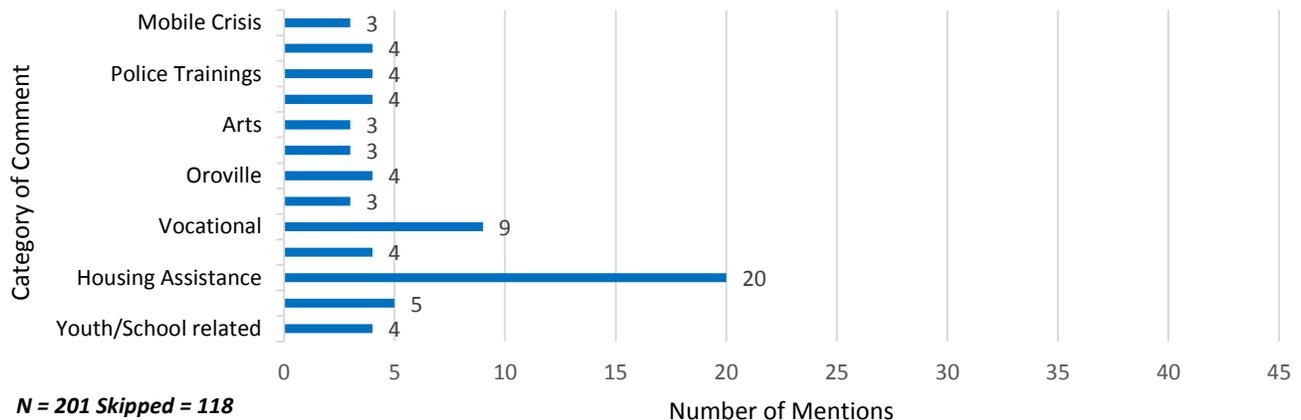
The following section aids to highlight the key areas of input from the community. The second section contains all of the outcomes of all questions asked, grouped by type of program. Lastly are the demographics of all respondents.

PHRASES MOST MENTIONED IN COMMENTS

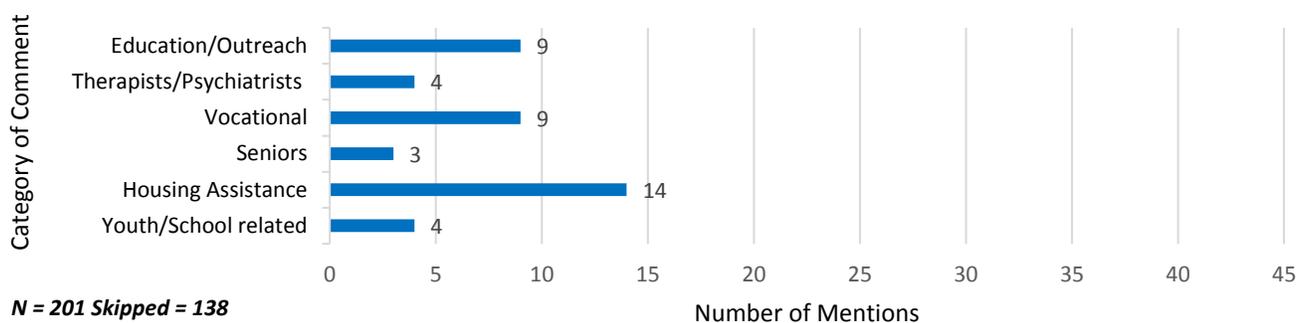
There were three open-ended questions asked to respondents about programs needed and/or offered in their community. Below are the common phrases or subjects that are mentioned most by respondents.



“Please list any suggestions for activities, programs or services that would enhance consumers' wellness and recovery and better meet the needs of your community:”



“Is there anything else you would like to say about mental health needs, programs, or services related to your community?”



Note: There could be multiple mentions in one comment, some did not fall into the above categories. For a comprehensive view of all comments, please see page 7.

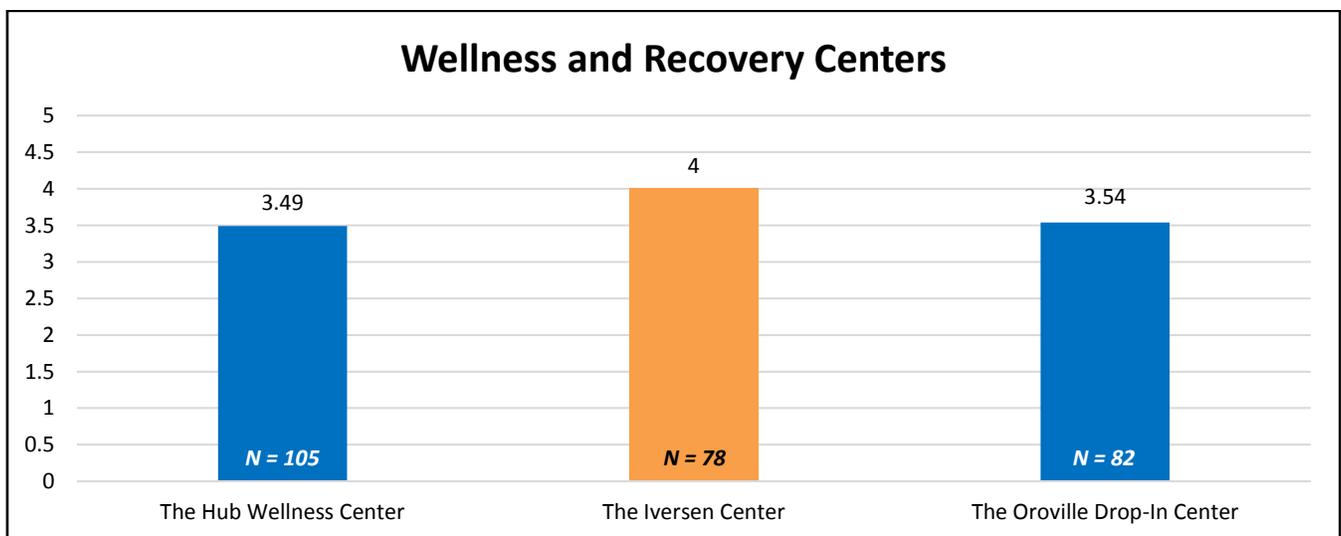
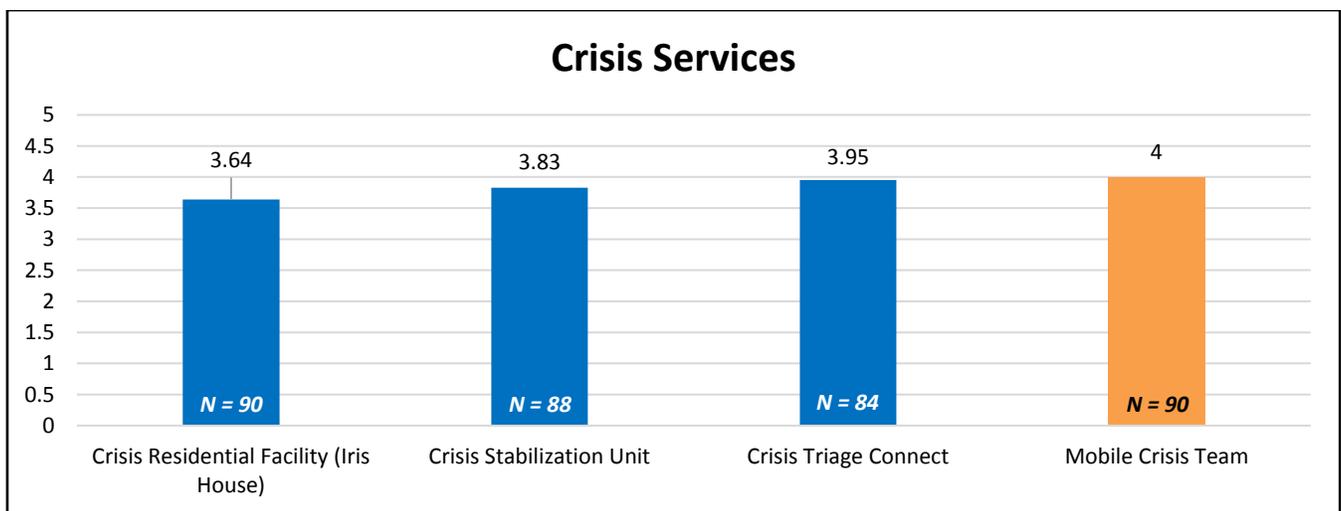
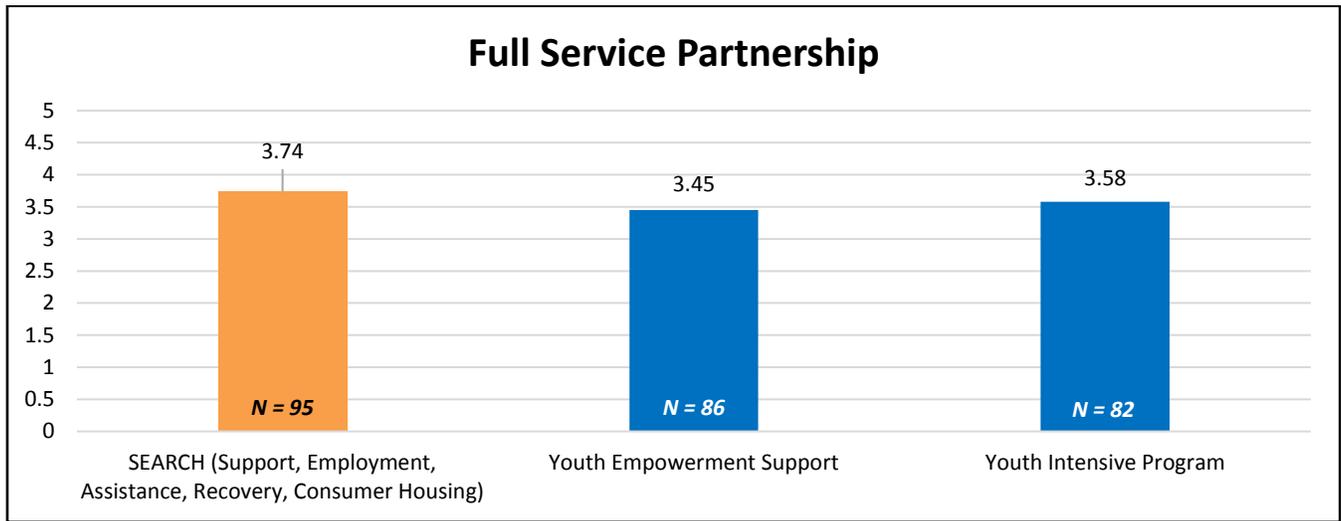
TOP MENTIONS EXPANDED

1. *Housing Assistance:*
 - a. Housing development for adults, elderly and families with mental illness.
 - b. Outreach to homeless that don't seek services.
2. *Vocational:*
 - a. Increased availability of hours to work.
 - b. More diverse opportunities for employment.
 - c. Increased trainings on technical tasks (e.g. computer software).
3. *Youth/School related:*
 - a. Increased funding allocated to prevention services for youth.
 - b. Increased outreach at schools to students.
 - c. Outreach and communication to teachers about services and trainings.
4. *Education/Outreach:*
 - a. Informing general public of programs available.
 - b. Presentations to large groups such as workplaces.

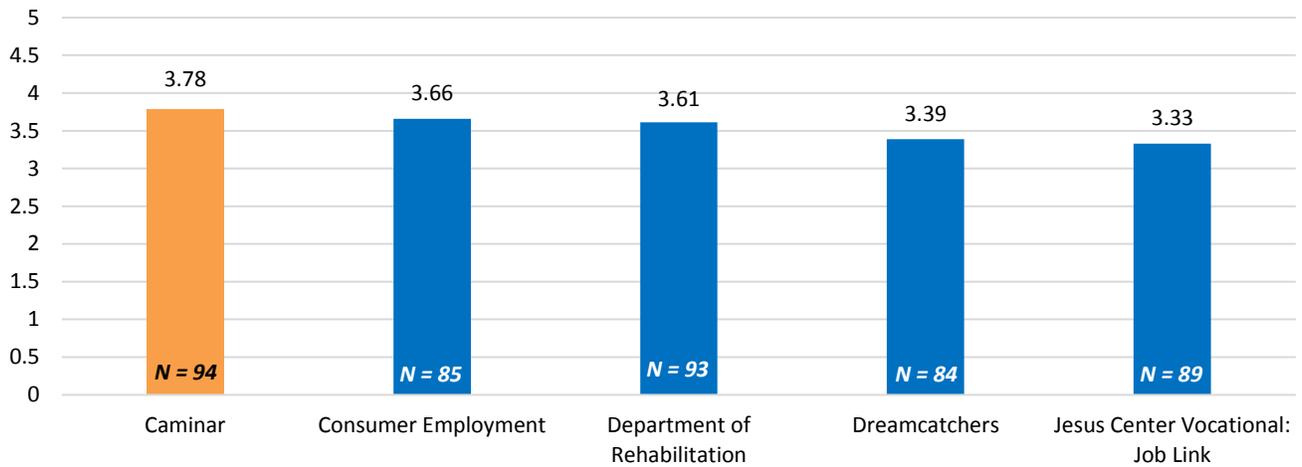
Outcomes

 = Voted Highest within Service Category

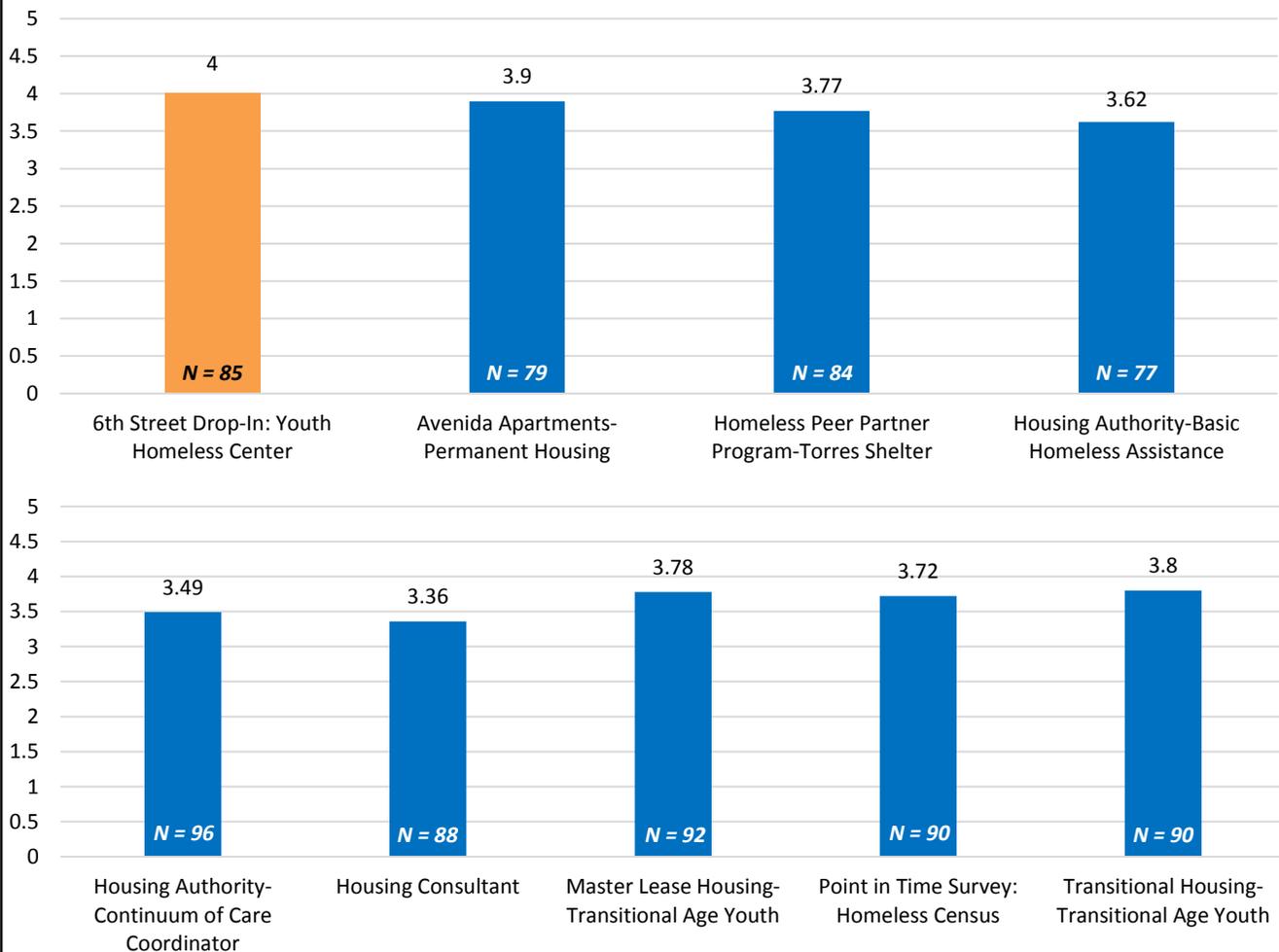
Respondents ranked the following programs on a scale of 0-5, with 5 being the most effective. The below outcomes show the average responses of each program with the amount of respondents.



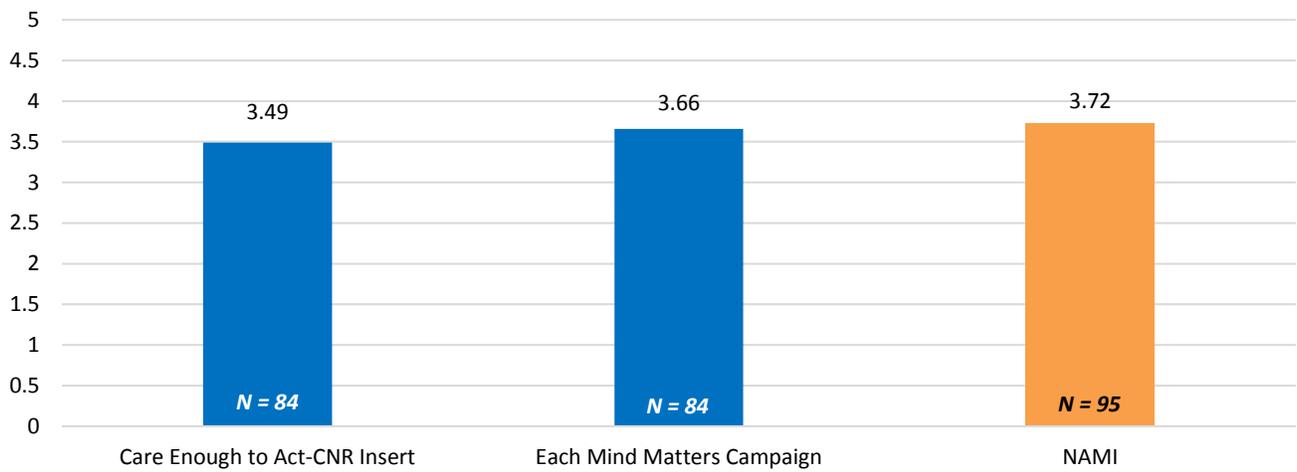
Vocational and Job Training



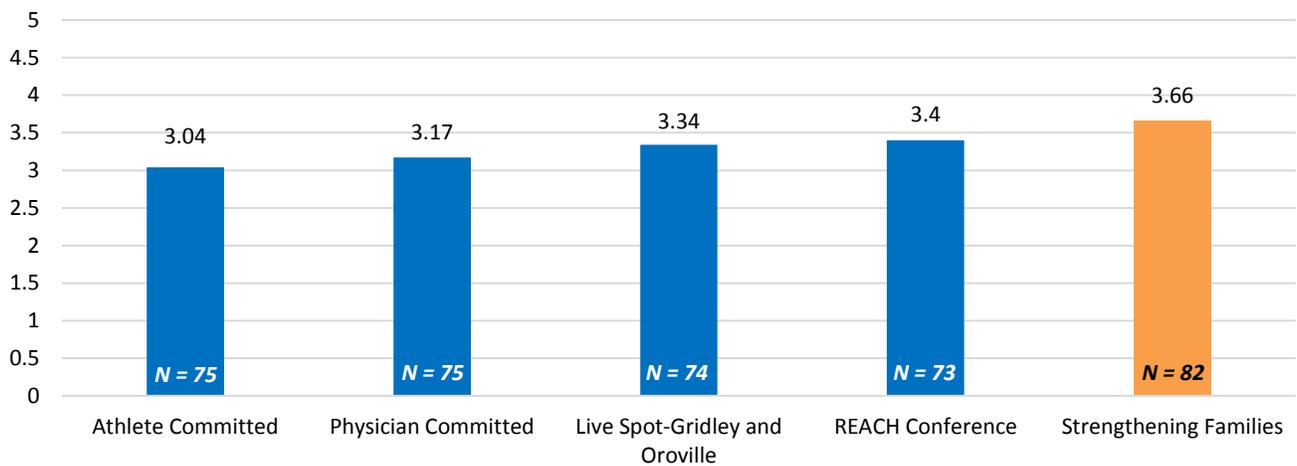
Homeless Support



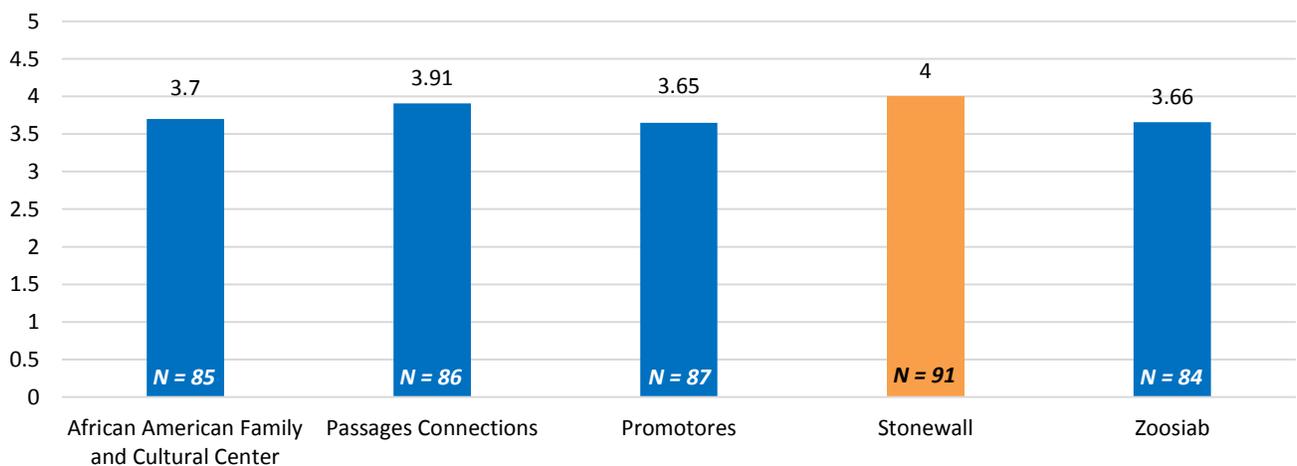
Community Education

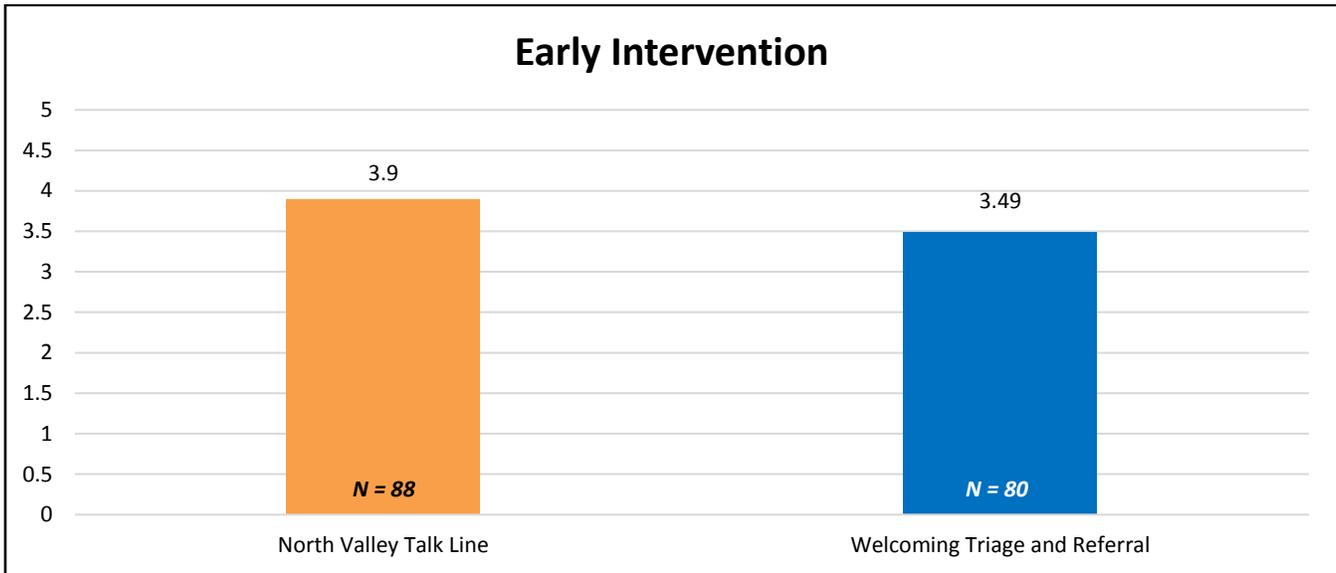


Prevention Unit

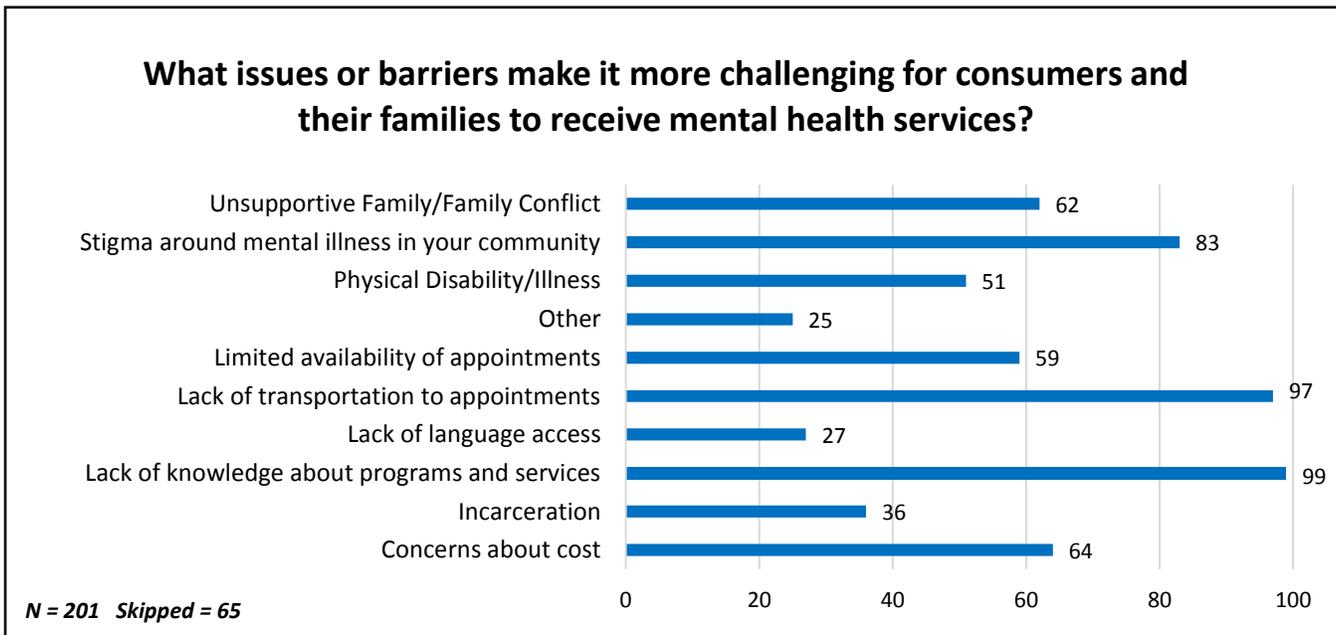


Cultural Outreach Programs





BARRIERS TO SERVICE



Note: Respondents could select more than one option.

Input from "Other" Option

limited counselors available (finding a "fit")
Complexity and multiplicity of programs, leaving people confused about where to even start to seek services.
I am suggesting free buses that frequent pick up points 2 or 3 times a day in each town. For appointments, drop in centers and healing rooms as well as crisis houses.
Substance use/abuse
Some people work and some people may not be comfortable sharing personal family stuff.
Difficulty communicating with clients with no phone, inconsistent access to charging or difficulty using Obama phones, especially when homeless. Need more harm reduction shelters and other services.
substance abuse and stigma
No appointments available after 5pm- this might be a barrier to families or individuals.

more availability than anything-housing, treatment
A consumer may not be able to get away from family responsibilities to avail themselves of help from services (baby care, child or elder care)
The for profit system imposing uncaring distrust
lack of affordable housing
Everyone needs medical insurance and Medical needs to pay at least as much as Medicare. Really, we need Improved Medicare for All!
drug use, unorganized, issues associated with homelessness
housing
Homeless
Poor insight into mental health needs which leads to lack of follow through with treatment, increase crisis interactions, legal troubles, and burning bridges with family/ support system.
Lack of housing
Lack of housing
Most Political Statesmen are biased against the poor.
Mobile Crisis team is off duty at 5 or 6pm and those that have an episode don't benefit from these services.
housing insecurity
Lack of housing
Homelessness
Lack of sufficient mobile outreach. Waiting time to get seen.

COMMUNITY INPUT MEETINGS

“What type of mental health-related activities, programs or services are most needed in your community or culture?”

Affordable Housing with support services
There needs to be more crisis houses like the Iris house. Butte county would greatly benefit from maybe 7 or 8 short term crisis houses with follow up. PHF is too expensive to replicate. Free support group for depression and anxiety with a well-trained facilitator
Crisis and in-patient services or camp and homeless and youth. Therapy - out-patient and in-patient addressing issues as they affect resiliency. These services in environment of Native American support services.
I think any activities outside such as gathering healing plants, planting, hiking etc. is always good for mental health.
Drop in for homeless--due to campfire
Those that assist individuals/ Families w/ mild to moderate cave w/ lack of insurance/\$
I've worked with the homeless community just feel they need advocacy for their mental health. I feel like stonewall should be a part of this

community when it comes to advocacy in every community dealing with mental health
Crisis triage connect/ crisis stabilization unit
Those that focus on older adult population and the homeless mentally ill population. Both have experienced population growth in the past 5-10 years as well as funding for services are either non-existent or very limited.
Older Adult counseling. Housing for mentally ill older adults.
I think that a mental hospital would be beneficial because there are folks who I believe would benefit from that and there aren't enough of them, especially in this area.
The Simplicity Village to alleviate the housing crisis we face, because housing security is a first step in helping many individuals who suffer from mental illness.
Housing first, and supported housing.
Substance abuse, dual-diagnosis support
Housing associated mental health services
Affordable housing is desperately needed along with programs, activities and services.
Permanent and transitional housing with services.

Programs and projects that build housing security which intervenes in the cycle of mental illness that escalates as a result of chronic homelessness.
More help with addiction issues. Making mental health a priority like physical health. More awareness. More education.
Housing with support; emergency outreach; homeless respite housing after hospital stays for injuries, surgery, infection, etc. Property, storage + showers for homeless mentally ill people.
We need medical providers who can taper people off of the medications that are not working. Also, we need micro-tapering resources for clients on benzos, as safe withdrawal can take 3+ years.
Early youth and toddler mental health evaluation and programs. Parent education on early childhood development and how it is affected by ACEs.
ACEs and Support
Services for people who don't know if they're suffering from mental illness and want/need to talk with someone about their symptoms to determine if they need services.

“Please list any suggestions for activities, programs or services that would enhance consumers' wellness and recovery and better meet the needs of your community:”

IN SCHOOLS and go to home! Build trust in communities and get to know families to help those who most need. They don't try to get services.
detox, dual sober living programs, elderly support and medical needs
Pairing mentally ill individuals with peers in the community to increase social support. Individuals with severe MH can get victimized by criminals/ drug addicts and they need healthy supports to help improve long term outcome of managing MH symptoms.
More support for housing such as housing now simplicity village.
More very low income supportive housing
Affordable Housing with support services
gardening
Support Simplicity Village
A downtown center where those homeless individuals who need their medications could check in and be helped to get their meds, help and support.

Focus on working with older adults in a setting of their choice ie: if unable to get out in the community go to them. Work on education programs services for the community at large in order to encourage awareness of issues.
Training for staff in how to interact with mentally ill older adults.
Multimedia Arts Lessons for our larger North State Community and a Caring Social Media Network.
More homeless mentally ill housing but it has to have case management support.
Housing First
Great programs, so many can benefit from.
Again, establishing the Simplicity Village is critical to the wellness and recovery of many people.
Housing first model of service delivery and recovery.
Emphasize housing in association with mental health services - examples such as Housing Now and Simplicity Village offered by CHAT as well as new programs
Find funding and resources for expanded hours for mobile team that works with Chico PD.
More low-income housing.
Simplicity village - takes at risk individuals into community with stability, positive interaction & support services close to home.
Short term free housing with walk-in availability - low barrier - like in Marysville, but with more activities.
A detox center and something like Soteria House. Pharmaceuticals are not magical healing tools. Sometimes they make things much worse.
Community garden for youth and sensory integration for all beneficiaries.

“Is there anything else you would like to say about mental health needs, programs, or services related to your community?”

Better training to staff coming into the field. Specialized wraparound program to help transitional age youth who have a serious diagnosis- schizophrenia/ bipolar w/ psychotic features and a psych hospitalization to get the support they need to gain insight into their illness.
As far as the mental health crises being an issue, the homeless community needs these services including myself.

Chico needs a detox center as well as a short term residential mental rehab. Horizon services in the bay area offers these services.
Please continue and get the word out to a bigger population. Maybe taking it to the workplace as presentations to those employees.
Doing great; but now? What happens to us if its due to.
More coordination with police on mental health training and or utilization of mental health team during a police intervention.
More accessibility
The homeless population in Chico has a big issue with mental health, and they need more help. It's difficult to not have the proper training and resources at many agencies, like the Torres shelter, to help this population with their mental illness. This can be a big step in helping the homeless population.
In a healthy community those with mental health needs would be well-supported, understood, cared for with loving attention.
I believe that the County Behavioral Health Services funding should extend into the needs of the community by partnering with CHAT towards building Simplicity Village. Providing housing is a must to support all the members of this community.
Connections has helped our clients immensely. Most of our clients were traumatized children who have grown up and become older adults.
Addressing the urgent housing insecurity of many individuals is essential. The situation is even more critical after the Camp fire.
Mental health is so very important and must be approached as a multi-faceted issue associated with housing, food, physical wellness
Chico has a wonderfully engaged, compassionate & proactive populous and we have wonderful resources through & funded through BH (via MHSA) here. Education about services availability is a challenge and lack of trust that resources are spent wisely interferes with forward momentum with innovation ideas.
People with mental illness need someone to come to them when they are outside, since they often are afraid to come in for services.
For someone dedicated to their recovery, we have multiple free services to help.
Unfortunately, most of the services are located in Oroville and Chico, so those who live in smaller

towns may struggle. Also, child care can be an issue.
I believe we have a good start but need more community outreach and better branding of services.

“For those who attended a recent community planning meeting, do you have any ideas for us about how to improve the community input process?”

Continue to push for more county, state and federal support for work MHSA is already doing
Thank you for doing this
Good presentation on January 24. Would have welcomed description of proposed projects as well as one covered.
Spend more time describing the competing programs.
Maybe a bigger location and more publicity.
I am heartened by the increasing community involvement and collaboration. I've heard people not understand that they are stakeholders or how important these meetings are, but outreach seems to have improved.
Go to schools; not just the district office or the BCOE, but to actual schools where teachers interact with 100s of kids every single day. Teachers know their kids and their families and who needs help and who has tried to get help and who has NOT tried and most often why they have not tried. PLEASE GO TO SCHOOLS! WE NEED HELP!!
Perhaps advertise more widely with flyers. Also put more emphasis on helping to treat addiction and prevention of homelessness as a benefit of MHSA
More advertisement on social media or places that consumers might see.
I hope to receive emails to involve myself in the Steering Committee meetings.
& Surveys, Surveys, Surveys sent out to All our Peers ... So our numbers are shown
They did excellent work.
It was done well, nice job.
Use full names of agencies and programs, not initials eg BCMH.

FOCUS GROUP COMMENTS

“What program(s) have you benefited from and why?”

Promotores:

Promotores is and has been a very interesting and useful program for my children. They have learned about respect, courage and about harassment and other learning assets. I am very excited about what they learn every time, about the projects they do and learn and they like to attend this program, because they have lived together and, most importantly, they feel confident to be able to cope with Promotores. Thank you.

Promotores because it helped me to excel as person

Promotores - The adult group is great for talking about parenting questions and learning about resources. The kids program is great for kids. keeping them active and creative. And learning about lots of things. Bullying was a great conversation.

Promotores - This program has brought/provided useful tools to our opportunity students at Chapman school.

It has help me with information and documentation I needed and support through fire.

I see the need for Promotores and how its building awareness in the community and building trust to access.

Women's Group on Tuesdays and Kids/youth group on Wednesdays helps kida work together as a group and overcome different things they may be going through. Good peer talk is great and women's group to get a better understanding of what is normal and how to deal with daily life and struggles. Helps with mental and physical health as well. Norma is very welcoming and very easy to talk to. She is amazing.

My daughter attends at La Vista Verde, she loves it. Lorena is a great person with kids.

Kids group with Norma! (Promotores) This program has helped my children do activities that helped them discover a little bit of everything: art, games, communication skills.

Stonewall:

Stonewall. Fund Pride. Funding for more outreach to houseless and housing insecure folks. Leadership here is going to wreck this place, STAFF is great. FUND THIS PLACE ITS so IMPORTANT. Paid positions.

At Stonewall Alliance, trans group needs a licensed therapist to facilitate groups. Teach about confidentiality and hold staff and volunteers accountable. We need money for a staff member to be paid. Senior citizens social group/ eat meals together.

Stonewall training in the community, pride, coming out for art, simple presence of Stonewall holding LGBTQI+(Queer) community in visibility and positive light in wider community.

Zoosiab:

Zoosiab has helped me reduce my stress and isolation. I am able to learn new life skills to improve my life style and get along with my family. My mental health got better and isolation has been decrease due to increase in socialization with peers during recreational group. My well-being has improved participating in program vs being home.

The program has helped me in many ways. It has helped me with my mental and physical health. It's easy for me to communicate the staff of Zoosiab staff to help me meet my needs. Interpretation, language and navigation has helped reduce my level of stress to access services.

I have benefited from Zoosiab: Hmong Cultural Center. I find myself surrounded with great peers and I find happiness when I am here during the recreational group days.

Program Manager overseeing Zoosiab. Always a pleasure to serve our Hmong elders in the community. To be able to support them in anyway is a great reward.

Training and knowledge in the workforce. Iversen center, Hmong Cultural Center

Zoosiab program has help reduce elders isolation and stress. Participants in Zoosiab program are grateful to have this program running to bring Hmong elders in the community to come together to socialize and access services that I never knew of in the community.

Crisis Services:

Housing facilities
Transportation and translation at doctor visits
homeless support, including vocational rehabilitation to help people find something to provide them with purpose; early intervention crisis support; culturally-specific substance use intervention and recovery help
better mentors and role models.
Additional trainings for staff for specialized treatment (EMDR, DBT)
housing housing housing
Housing and job related services
Trauma counseling & psychiatric medication. Housing for mental health, run away kids, transitional age psychosis early intervention, post incarceration, substance abuse recovery-harm reduction. Ongoing therapy/support. Mental health case management
We need mental health care for our homeless, including drug and alcohol counseling being provided on the streets and in the shelters. More case managers, lots more case managers who know how to work with the homeless.
Housing First, with coordinated support services

-free bus passes for residents of above camp/shelter -needle exchange and/or clean needle distribution
-More housing options. -Better family interventions when a youth experiences a crisis.
Housing
The Hope Center in Oroville, CA has been an amazing resource for me personally. As they are the reason I was able to obtain the amazing services here at Torres Shelter. Other than these two entities I'm not real familiar with most of those other agencies but welcome the opportunity to learn more about them.
Affordable Housing, Permanent Supportive Housing
Iversen Center, Crisis Unit
The torres shelter has given me an opportunity to get off the streets and separate myself from the garbage in it. I feel I have benefited from it greatly.
Torres Shelter, Stability
Policy changes, housing, meaningful work

AAFCC:

AAFCC, when I moved to Orville I learned a lot about services from the staff.
Services in Oroville
The African American family cultural center has personally helped family members with programs and even personally when I struggled financially to help with Christmas gifts for my two young children (ages 1&5). I would like to see more of a collaboration within the community to implement similar programs and services.
I've mostly been enlightened on these programs not that I've had to use them. I can surely see how most if not all can be of great need and truly helpful.

NAMI:

NAMI - it has help to educate me and empower me in my journey to recovery. Now I share what I have learned with those younger than I and it is AMAZING.. for me and them.. this needs to continue for sure.
NAMI
NAMI was my life raft when my daughter was undiagnosed. It gave me the information I need to get her diagnosed, the communication skills to relate to her better, and the courage to become a Family 2 Family instructor. Families who are lost and scared get the information they desperately need. The support group offers a confidential environment to discuss the conflicts they are dealing with.
Increase funding for NAMI - see proposal.
Nami - peer-to-peer - I was trained to teach classes in peer-to-peer classes and gave me the confidence to continue and follow through with other programs like connections classes.
Increase of funding to NAMI to provide more money for office staffing (now provided by volunteers) More funds for advocating for

Torres Shelter:

A bridge for seniors who refuse mental health services.
-housing first programs including apt. communities
-Outreach Swkrs for housing/homeless who don't seek services
-low barrier camp/shelter AWAY from town

mentally ill and more funding for NAMI to assist and add CIT.

-Nami peer-to-peer class has been invaluable teaching experience - providing employment and --MH improvement as I co-lead the class. Seeing the transformation of many/most students in inspirational!

Supported Employment/Vocational:

-Caminar - Helping me get a job by helping me construct resume, performing mock interviews and providing interview clothes.
-DOR - has helped me choose a career, sent me back to college and paid for it. They also referred me to caminar in assisting me with a part time job.
-Dreamcatchers - helped me get back in the workforce and prepared me for caminar. Very supportive job coach and great placement.
-Jesus Center - Gave me work experience to get me a job in detail food handling and customer service.

Caminar, Dreamcatchers, DOR, Consumer Employment. I was able to build my self-esteem back up and learn how to be a part of a workforce again. I was also given clothes, eye glasses and things I need for my new job. I was given help with my resume and interview skills.

With all of these programs, I went from being jobless and homeless to having a permanent job, a place to live and doing a DUI class. I'd never had a chance to get my life turned around without these programs, thank you.

I've benefited from Caminar and 6th Street Drop-in: youth homeless center. I work at sensible cyclery through caminar and really enjoy it. The Drop-in center helped me a great deal when I was homeless 2 years ago.

I, have benefited from 6th street center, youth for change, caminar consumer employment, and 6th street transitional housing. I moved to Chico and was homeless dealing with addiction recovery and depression. 6th street provided consulting and support and got me housing-- also a job as a consumer employee with sensible cyclery. I graduated both programs and got hired on permanently with caminar is a vocational coordinator. I have ran the program for 2 years and have seen how much our services help people. These programs have turned my life around and continue to do the same for our consumers.

The behavioral health services, especially for psychiatrists and - help with calfresh; medical application, counseling, work rehabilitation - caminar, dream catchers, sensible cyclery- Because I have a challenge in getting away from primary companionship of my 94 years of age, parent. "mom" - (A WWII Veteran) "Women's Army Corps"

Consumer employment/ department of rehab/ caminar. These programs offer support and build character and confidence in a controlled environment to needed for a job. You are given a small sample of what work is like. Baby steps

Peer Advocacy employment for esteem for a shared and stronger understanding of Peers housing first

Community case management for the mentally ill homeless. Case management needs to be in the Jesus Center, Torres Shelter, Hope Center, Safe Space and the other places where homeless mentally ill can be found because they may not want to come in to the clinics.

Simplicity Village

Caminar, dreamcatchers, DOR, Community action agency, PGE assist, Housing Authority, Section 8

I have benefited from many services listed here. I greatly benefited from my time at dreamcatchers. The support received helped me get past my trauma of domestic violence and gave me confidence and made me feel worthy and capable-- I thank them. It was through an internship through BCBH that I met dreamcatchers. BCBH has also been crucial for helping me get past my mental health issues that were greatly enhanced by domestic violence which led to homelessness. BCBH led me to my internship with dreamcatchers, iversen center (which is excellent!), a survey through for homelessness which led to subsidized housing through HACB. Before HACB, CHAT let me have a room in transition housing, they were excellent and very supportive. I was at Torres and they had very poor placement for housing employment. I was at Iris House and they helped me but not with resources after. [staff name] is terrible and should be fired. BCBH has kept me alive and referred me to every positive resource, thank you!

Iversen Center:

Reduce homelessness.
More education on how different disorders and medications effect youth and adults. Also, the difference between behavioral disorders and mental health disorders, and when medication is appropriate.
Harm Reduction Model Programs
24 Mobile Crisis, more therapy services for low income
supportive housing
DOR was helpful because they helped me make a really professional resume., They helped me get nice interview clothes and good work shoes. They made it really hard to fail. Dreamcatchers is helpful because when I'm at my job at the Restore, I'm left to do my job at my pace. Both places have connected me to resources for housing and other help like a p.o. box, etc.
Iversen center helps me a lot. Diverse minds is a wonderful program!
Do not know enough about these programs to comment
I've great time, ELN, social groups helps with my wellness and recovery.
More resources for the homeless!
elderly and medically challenged
supported housing, affordable housing, education to partners that serve individuals with mental health symptoms, detox and support for alcohol and drug tx, mandated MH treatment for high utilizers of crisis services.
Housing for people with mental, emotional problems
Outreach for homeless

“What input or suggestions would you make about a program?”

Promotores:

My suggestion: it would be about the program of promotores, maybe it would be 2 days a week and the parents could help in some way, like how to live together with our children.
A program about bullying and how to support the program as parents. For the woman who does not have to attack another to get them to notice

Any activities that involve crafts like painting, beading, maybe something that involves meditation, therapy involving animals.
Promotores is a good group to learn and receive community resources.
I would like MHSA to continue to build on housing for homeless population. Also broader help with rebuilding for people of Camp Fire victims. I would also like presentation forms in Spanish.
There is a big need for transportation and supporting in Dr. visits.
So far I believe everything works. The children might want group more often - maybe 2 times a week.
Teach these kids more outdoor activities like mini field trips.
I would like there to be activities for my 4 year old. My 11 year old would like a camping trip or something similar this summer. Thank you!

Stonewall:

Programs geared toward cultural wellness/balance.
They need more resources in like transportation to get to these places that are in Butte County.
Having a therapist on site to help w/ the LGBTQI+ community.
When you organize with cops, take into account the way they will interact with a certain demographic, or the folks you're trying to help.
Licensed therapist, on site "onsite counseling"
Expanded mental health services to queer community, including professional counselor on site. Cultural competency trainings by Stonewall staff to other MHSA agencies
Housing support groups

Zoosiab:

As a client, I want to continue on supporting the Zoosiab program. I will participate when needed and help in any way I can for the program.
Increase funding to provide more recreational groups and field trips to reduce isolation and stress from staying home alone all day. Community meetings and feedbacks to help implement program plans and goals.
Continue collaborating and funding of Zoosiab program would help to continue providing services for the Hmong community. Many elders

suffer from isolation and mental stress due to a lack of socialization.

Crisis Services:

case management & training for family members who have loved ones struggling with mental health problems

There is still a lot of stigma around homelessness and mental health issues - people not in those dire circumstances often think people in those circumstances are self-made or self-perpetuated, lazy, or just not trying hard enough. I would like to the gap between consumers and other community members lessened somehow. It's happening slowly, but I think it still needs attention

again better more relatable leaders.

More supported housing and/or crisis residential services.

Need mental health services for homeless people in the street, more housing

Job and educational opportunities, stable housing

Provide transportation, clinical case management,

The care has to be provided where the people are. In the community, not in the clinics. It needs to be at night and on weekends

AAFCC:

Need more services in Oroville

The community of Oroville lack many of the services that are needed. Please more services in Oroville

I would like to see more interactions between the community and police. More programs in Oroville to assist with the homeless and drug problem.

Mental Health stigma reduction program for the target population.

NAMI:

More access and knowledge of it to those 16-25 transitionally group.

1 - A lot of people are falling between the cracks. There are programs but not for some that are the wrong age or in denial of mental health help.
2 - More training on how to treat, speak, help or refer individuals with mental health issues, not

only physicians but all nurses, lab techs, hospital and clinic employees.

Need more funding so that they can train more instructors and trainers.

I would encourage others to consider joining the peer-to-peer classes.

have extended hours for mobile crisis unit. Need more referrals to NAMI from BCBH. Increased funding for NAMI specifically for training leaders to facilitate programs needed in Oroville.

Supported Employment/Vocational:

The programs I use are great. They have really helped me get my life together.

Dreamcatchers and my job coach helped save my life. It gave me my confidence back to be able to work again. I only wish I could have worked more hours during the week.

I would like to have more hours at sensible cyclery.

Sensible cyclery could use more funding for parts and supply we are constantly dealing with a shortage of parts, tubes, tires, seats etc. We can set up booths on Thursday and sell parts etc. to accommodate funding.

To have a workshop class on basic computer and cell phone use as relating to job application and at work (looking up recipes online for a kitchen worker for instance.)

More variety of Job types. More hours available for those who don't have SSI.

I love training I received through BCBH leading me to Dreamcatchers, they led me to dor and Caminar which has given me confidence to better myself to be self-sufficient. It would help me if there was committed transportation to appointments (caminar provides when possible) since I have arthritis severely.

I think I would benefit form more work hours. I like that my work day don't change, I just wish it were more hours.

Torres Shelter:

Mobile crisis team needs to be 24 hours a day and seven days a week.

More services, groups and support for those on the lower end of the spectrum.

To have BCDBH staff trained as facilitators of DBT services.

Less police, more mental health professionals housing, goal oriented transitional programs

Art program for art therapy! Van used for counselors to go out in the community to help with counseling in the community.

Simplicity village, tiny housing for the homeless.

youth 12-step meetings (Possibly at boys & Girls club)

youth Community dances and concerts low/no cost

strengthening families should include parents with desire to strengthen their families even if other family member refuse to go. Thus allowing the family to begin healing.

Coordination between Prevention and youth that experience a crisis or are on the CSU. Have Prevention Peers come over and meet with/hang out with youth on the CSU and talk about the programs offered at their High Schools, etc.

Iverson Center:

Iverson

I would suggest just more public knowledge of all the awesome services offered.

Detox facilities needed, sobering centers needed

Continue Funding

“Is there anything else you would like to say about mental health needs, programs, or services related to your community?”

Promotores:

I would like to have more programs, for young people and children: lessons on learning and in the community as projects more activities and nutrition programs according to their ages. Specialized in our language (Spanish) if possible and thanks for the programs that are very helpful.

More information on how to detect when there is a problem, be it depression or another problem.

Teach kids not to be bullies.

The cultural outreach programs is very helpful to me. I am able to find happiness when I attend the group sessions.

To be able to keep the funding strong for the whole community.

Having focus groups or community meetings would help to bring the community together and learn more on the different plans that MHSA provides.

many people in the community don't know about the activities and services offered; many people outside of the folks eligible for services have no idea what it's all about, more community outreach and education is needed, something that people don't have to show up to would be great - the County's social media presence seems to be helping, though

Stonewall:

A need for non-traditional substance abuse programs that are pan-community.

Having a therapist on site to help w/ the LGBTQI+ community. Having other non-profits educated about cultural competence. Having a director for Stonewall

Great idea to have annual meetings, maybe make it 6 month / 12 month mental health committee meeting.

Thank you for opportunity to give input.

Crisis Services:

Yes. Between the PHF and Isis House we could use about 1000 more beds in Butte County. If we opened an Isis type Crisis House for every 4000 people or so in Butte County, it would be preventative, it would save lives and it would gradually spread knowledge about addiction and mental illness. The current ratio of facilities to the population is so inadequate. No wonder the Sheriff, Police and general population is up to their elbows in homelessness and petty crime.

We have more clients every year, need more funding and larger facilities to manage case loads so clients can come weekly or bi-weekly.

I would love to see more help for family members who have someone with mental illness. It's very stressful for family members who don't know how to handle the family member with a mental illness.

Program awareness before Camp Fire and I had no clue of this program.

A lot of consumers need professional counseling access but due to cost and lack of insurance due to legal status they cannot get it. Can we work on a program that can fund this?

I think it may be beneficial to meet with clients more one on one, maybe once a month for comfort.

AAFCC:

More housing
Need more programs in Oroville
More bullhorns within the community to inform families that there is help.
need more AOD barrier transitional housing
I think its absolutely amazing what you guys are aiming to do. And would love to see more services made and expanded for youth . I believe there is such severe trauma to so many youth these days that a very high concentration should be put on them to prevent continued and future trauma. To break the cycles of it continuing for their children.

NAMI:

Fund with more \$ to NAMI, so their members can get trained and gain more knowledge to be able to be trainers of the NAMI educational presentation such as Break the Silence and In Our Own Voice. Increase funding to pay stipends for trainers to be able to work and get trained to train other people. \$ for gas for volunteers to help.
We need MORE -> information. therapy, support.
NAMI provided training in Sacramento to teach/lead peer-to-peer groups where consumers talk about what they go through with peers, structured and well put together.
Need more MD's and NP's specializing in mental illness in this community. Need more primary care MD's/NP's/PA's to screen for mental illness and provide referrals and resources especially for 18-26 yrs.
There are not enough psychiatrists in this town to be seen in person.

Supported Employment/Vocational:

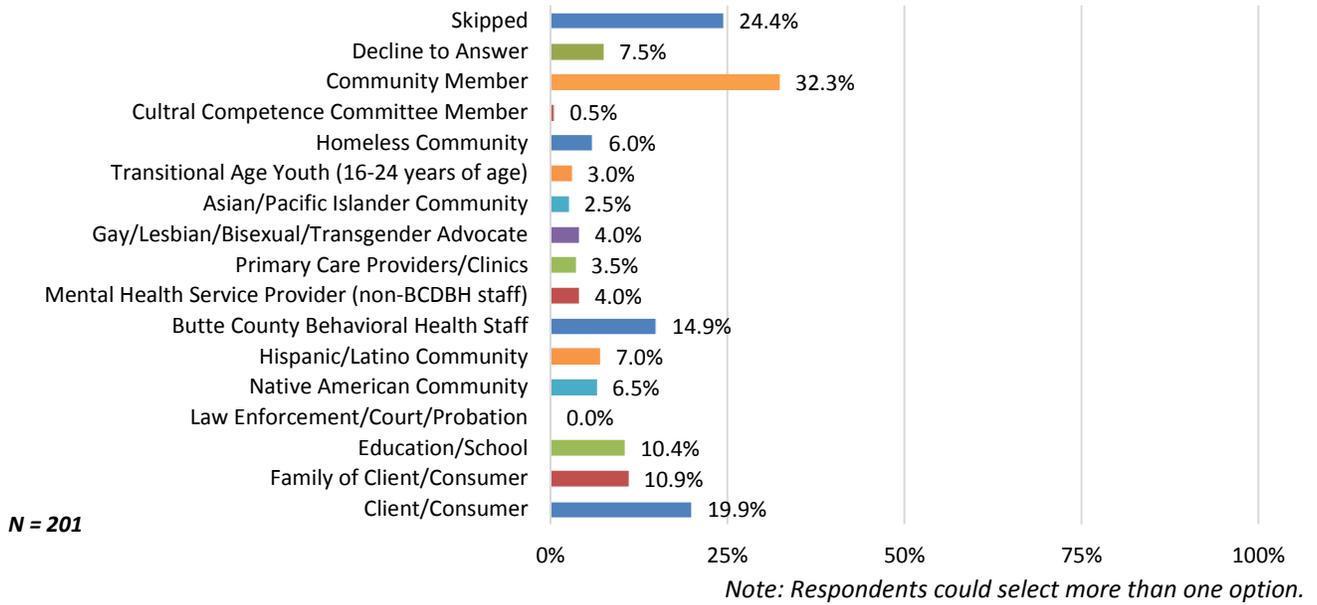
The experience I have had with behavioral health and social services, work rehabilitation has been positive and encouraging and reassuring to me as a person who has been challenged with things to fit into society and communities.
They work hard and need more funding.
I believe simple caring notions should be affirmed for our Peers esteem by helping us in mental caring employment positions within skills we are best at... From Clerical to The Arts to Peer Listening.
We have excellent services here. The greater challenge is to teach and inform the general population on acceptance, tolerance, patience and unconditional love thy neighbor.

Torres Shelter:

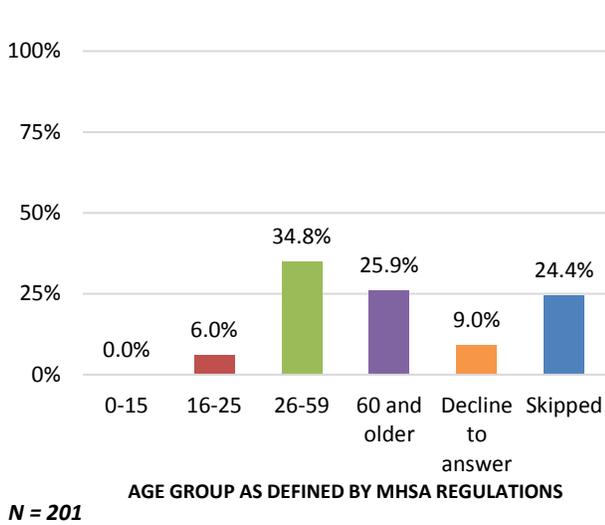
I have been so supportive in this community. I didn't know what to do after I was left homeless and all OP support I have received has given me a second chance at an even better life. Thank you!
We need scholarships for mental health providers to be able to get the education they need and then work in rural areas.
There should be an emphasis on care that is welcoming to all races, ethnic identities and to the LGBT+ community.
Less police, more mental health interventions & services
once we get stable housing for consumers, we can offer more services to keep them engaged
There is a lot of programs/support that I've never even heard of. I think people would benefit from more info. about these programs and to be aware they exist.

Demographics

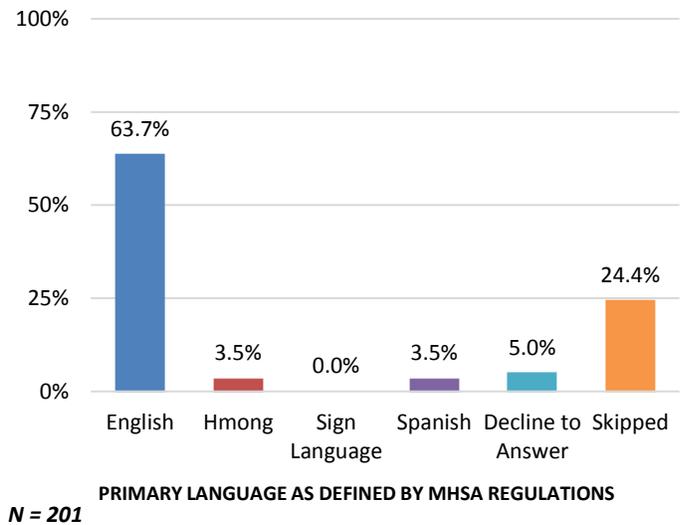
ASSOCIATION(S)



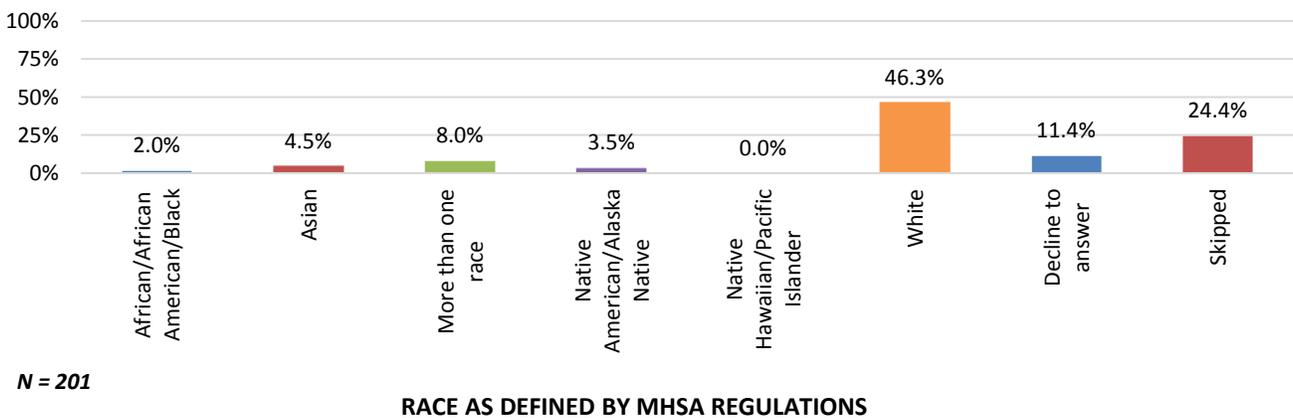
AGE



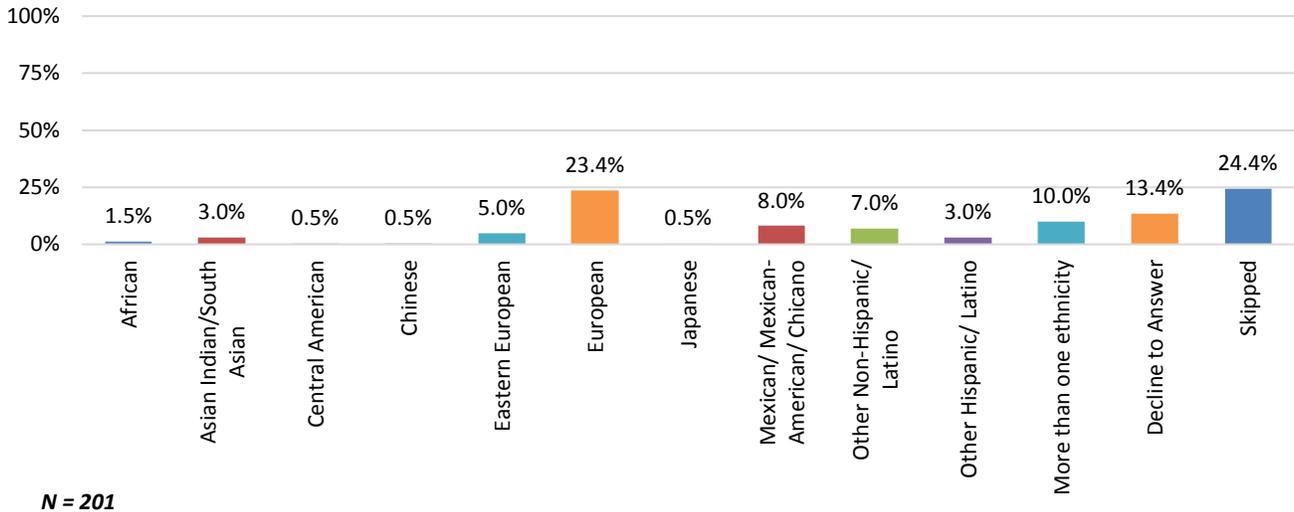
PRIMARY LANGUAGE



RACE

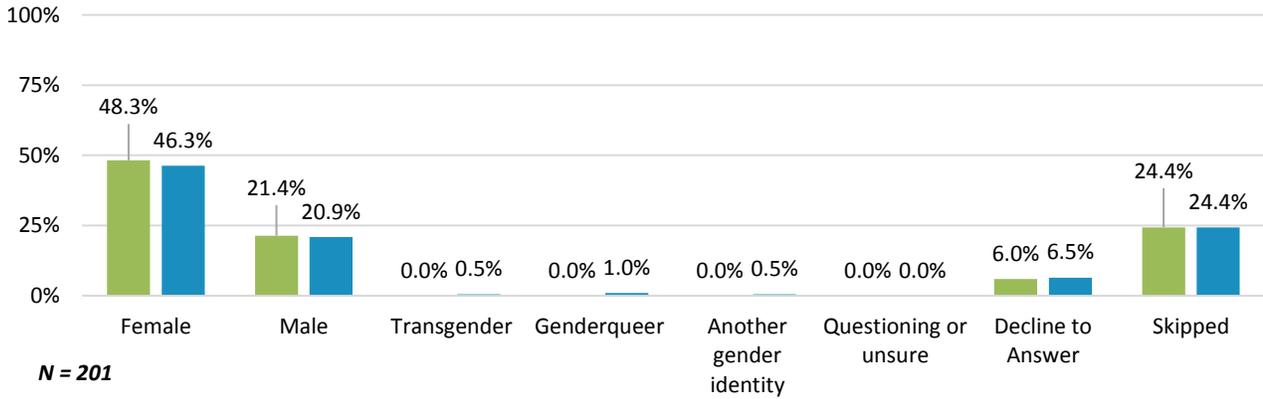


ETHNICITY



ETHNICITY AS DEFINED BY MHPA REGULATIONS

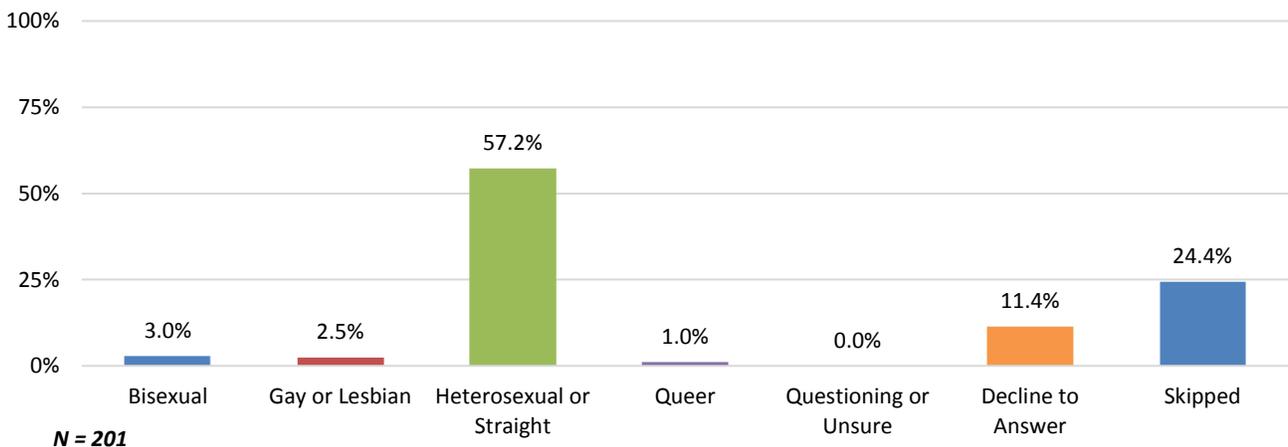
GENDER



GENDER AS DEFINED BY MHPA REGULATIONS

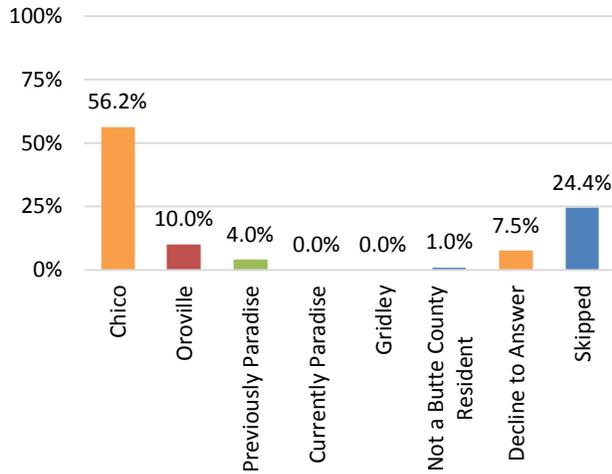
■ Gender (Assigned at Birth) ■ Gender (Current Identity)

SEXUAL ORIENTATION



SEXUAL ORIENTATION AS DEFINED BY MHPA REGULATIONS

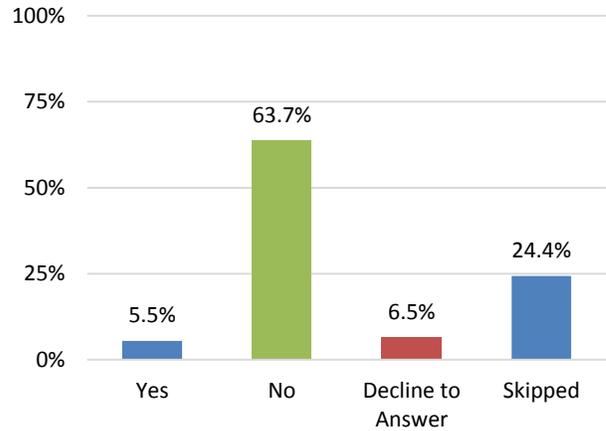
CLOSEST RESIDENT CITY



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CLOSEST RESIDENT CITY

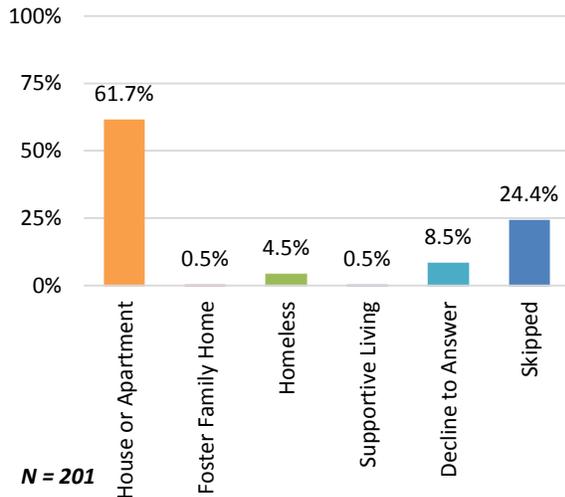
VETERAN STATUS



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VETERAN STATUS

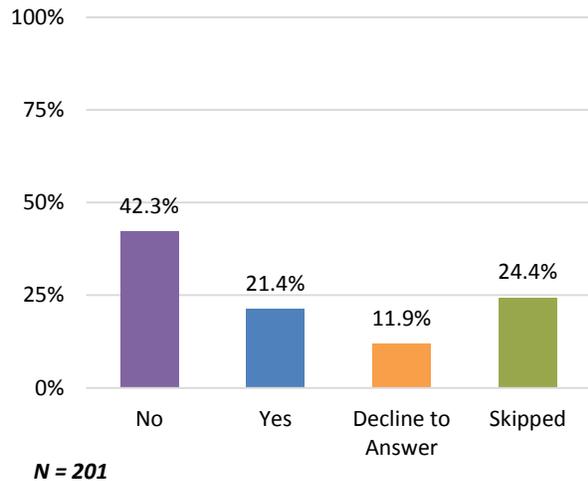
LIVING SITUATION



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LIVING SITUATION

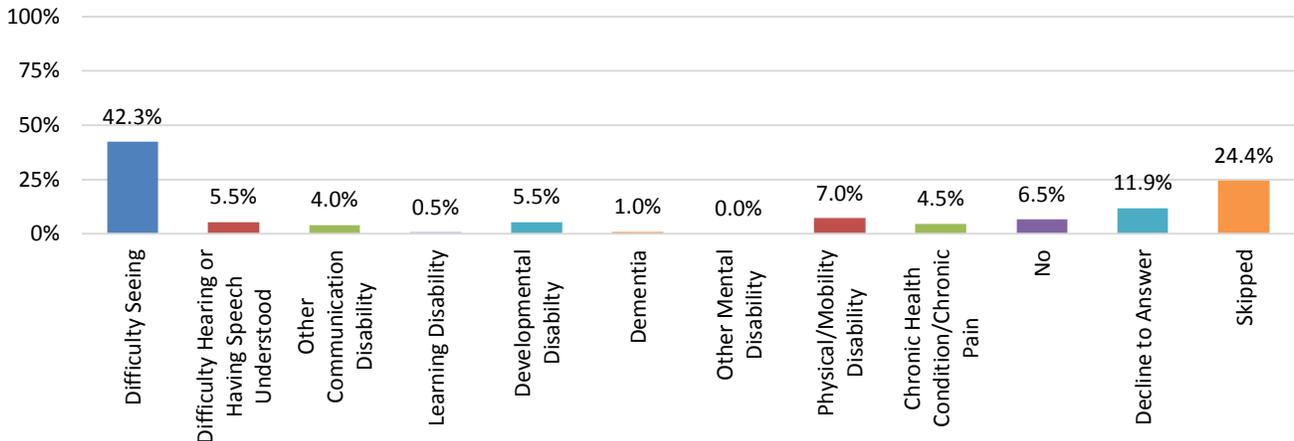
DISABILITY STATUS



N = 201

DISABILITY STATUS

DISABILITY TYPES



N = 201

DISABILITY TYPES AS DEFINED BY MHSA REGULATIONS

Note: Respondents could select more than one option.