

SCHOOL LINKED SERVICES (SLS) INITIATIVE and YOUTH SUBSTANCE USE TREATMENT SERVICES (Y-SOC)

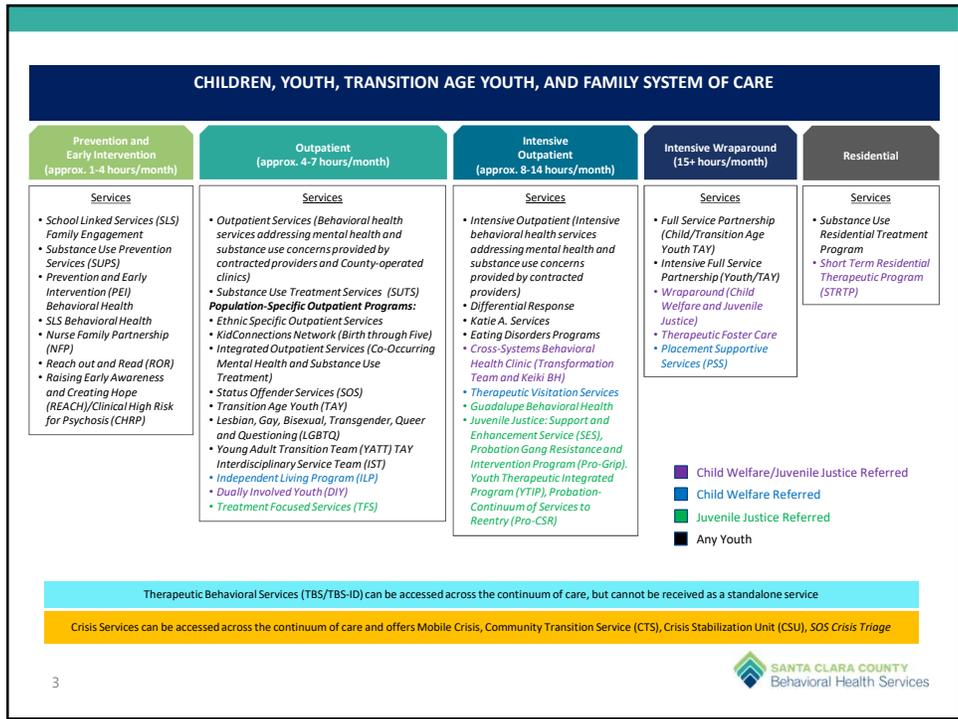
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OCTOBER 24, 2020

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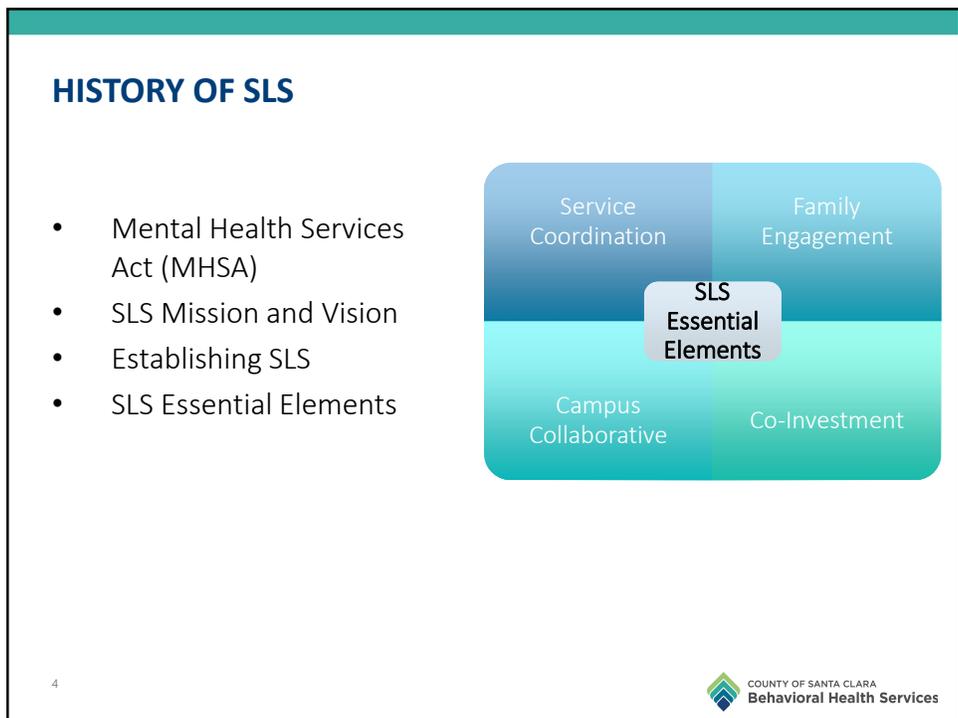
AGENDA

-  Welcome and Introductions
-  Children, Youth, and Family Division
-  School Linked Services Initiative
-  SLS Initiative School Districts
-  Impact of COVID-19 on SLS
-  SUTS
-  Access/Resources
-  Q&A

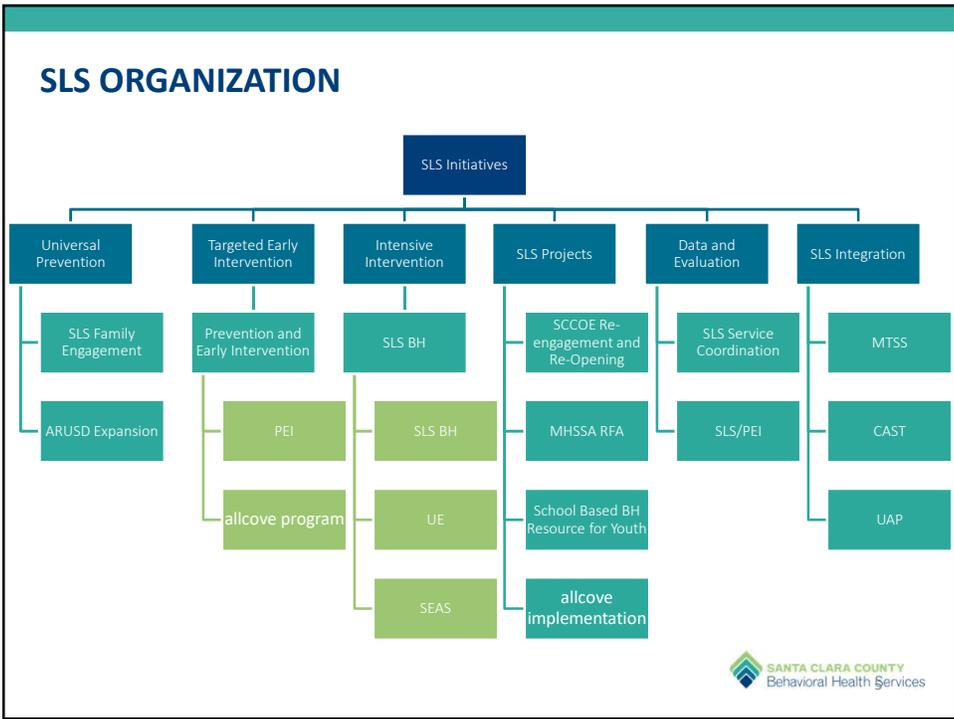
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SLS INITIATIVE

School-based coordinated services to address the needs and wellbeing gaps of families through a community participatory approach.

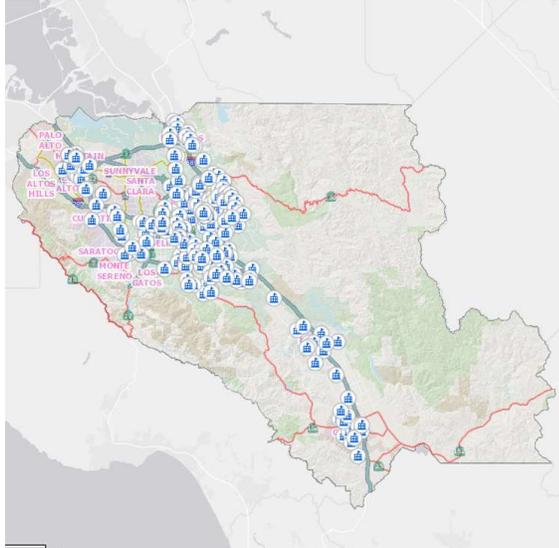
SCHOOLS LINKED SERVICES

Family Engagement	Prevention and Early Intervention (PEI)	SLS Behavioral Health
<ul style="list-style-type: none"> • Referral, Linkage, and Triage • Tier 1 services: Universal Access • Family Engagement One-Time Events • 15 SLS School Districts • 29 SLS Coordinators • Serves 10,000+ students and families annually 	<ul style="list-style-type: none"> • Tier 1 & 2 services: Least intensive • Group and specific population supports and services • Skills streaming • Therapeutic Groups • Parenting Groups: Positive Parenting Program (Triple P) and Strengthening Families • 11 school districts • 8 Community Based Providers • Serves 2000 students annually 	<ul style="list-style-type: none"> • Tier 3 services: Intensive service • Outpatient services at school setting <ul style="list-style-type: none"> • Individual Therapy • Case Management & Linkage • Medication Support • 13 school districts • 7 Community Based Providers • Serves 750 students annually

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SLS INITIATIVE



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SLS School Districts (^Family Engagement, *PEI,+SLS)		
MVWSD*+ ^	ESUHSD*^	MPESD *+^
MVLA *+	Evergreen*	OGSD *+^
ARUSD *+^	FMSD *+^	LBSD *+^
MUSD ^	MHSD *+^	OSD^
FUHUSD^	CUHSD ^	GUSD *+^
CUSD *+^	SJUSD *+^	



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SLS AFFILIATED PROGRAMS AND PROJECTS



Programs/Projects	
MHSSA Project	<ul style="list-style-type: none"> Grant award: 11/1/20-10/30/24 Priorities include: Create Wellness Centers; Increase mental health professionals at school sites; Implement and adapt professional learning
School-Based Behavioral Health Resource for Youth Project	<ul style="list-style-type: none"> Feasibility report and planning to provide behavioral health services for youth at all schools in SCC Project to end in November with report to BOS
allcove	<ul style="list-style-type: none"> Integrated youth center In partnership with Stanford University and Alum Rock Counseling Center Serves youth 12-25 Services include: Behavioral Health, Supported Education and Employment Services, Peer Support, Primary Care
Clinical High Risk for Psychosis (CHR-P) Project/ Raising Early Awareness and Creating Hope (REACH) Program	<ul style="list-style-type: none"> Raise awareness of early warning signs of psychosis and better identify and quickly connect at-risk youth and young adults Serving youth and young adults, ages 10-25, Team based approach includes: therapy, case management, education and employment services, psychiatry, Multi-Family Generational groups
ARUSD Expansion Program	Supporting the academic needs of students utilizing Educational Counseling Interns
Unconditional Education Program SEAS Program	Students are provided with the opportunity to learn in an environment that addresses their educational needs, supports cultural awareness, emphasizes their abilities, and provides them with a path to success.

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COVID-19 IMPACT ON SLS



ACCESS

- SLS Coordinators and School-Based Behavioral Health providers are providing in-person and virtual services
- SLS Coordinators had existing relationships with parents and students which made it easier to check-in with families
- SLS School Districts transition to online referral system
- Drop-in services
- Support for parents and teachers



NEEDS

- Basic needs (food, shelter)
- Implementing distance learning
- **Digital devices**
- Increase in crisis calls prior to school resuming
- Increase in referrals to behavioral health following the start of school
- Parent and teacher support needed
- Creating a routine and an environment at home for distance learning
- Non-screen time activities
- Training on the use of digital devices and virtual platforms



CHALLENGES

- Virtual fatigue
- Scheduling therapy sessions
- Isolation
- Connecting with parents remotely
- Behavioral/Emotional responses to trauma vary by age – Preschool/Young School age, School-Age, Adolescents



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BEHAVIORAL AND EMOTIONAL RESPONSES TO TRAUMA/COVID-19 BY AGE

PRESCHOOL & YOUNG SCHOOL AGE

- Emotional: Helplessness, uncertainty, general fear
- Behavioral: Difficulty separating from their parents, loss of speech and toileting skills, sleep disturbances, repetitive or less imaginative form of play

SCHOOL-AGE CHILDREN

- Emotional: Overwhelmed by feelings of fear or sadness; Anxiousness, Persistent concern over their own safety and safety of others
- Behavioral: Sleep disturbances, difficulty concentrating and learning at school, may complain of headaches and stomach aches; Unusually reckless and aggressive behaviors; Retelling the story

ADOLESCENTS

- Emotional: Feelings of fear, vulnerability, and concern about being “different”, withdrawn; Self-conscious about their emotional response to the event
- Behavioral: Self-destructive behaviors or accent-prone behaviors



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CHALLENGES

Understanding Addiction

Addiction is a chronic relapsing brain disease. Brain imaging shows that addiction severely alters brain areas critical to decision-making, learning and memory, and behavior control, which may help to explain the compulsive and destructive behaviors of addiction.



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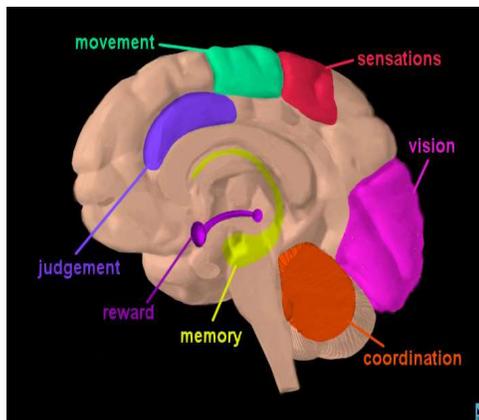
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DRUGS CHANGE THE BRAIN!

**After repeated
use,**

**“deciding”
to use drugs**

**is no longer
voluntary**



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INSIDE THE ADOLESCENT BRAIN

The brain undergoes two major developmental spurts, one in the womb and the second from childhood through the teen years, when the organ matures by 16, and starts in a sequence that moves from the back of the brain to the front.

Nerve Proliferation ...
By age 25, the brain will have 100 billion neurons, the majority in the front of the brain from which thousands of connections form. The rest have been a mess of them 500 million or so ago.

Corpus Callosum
It links the two hemispheres of the brain, connecting the two sides of the brain. It is the brain's highway, allowing information to travel between the two sides of the brain. It is made of white matter and is located in the center of the brain.

Prefrontal Cortex
The part of the brain that is responsible for decision-making, planning, and impulse control. It is the part of the brain that is most affected by drugs and alcohol. It is the part of the brain that is most affected by stress and anxiety.

Basal Ganglia
A group of structures in the brain that are involved in movement, learning, and emotion. It is the part of the brain that is most affected by drugs and alcohol. It is the part of the brain that is most affected by stress and anxiety.

Amygdala
A small, almond-shaped structure in the brain that is involved in emotion, memory, and decision-making. It is the part of the brain that is most affected by drugs and alcohol. It is the part of the brain that is most affected by stress and anxiety.

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WHY YOUTH ARE USING

- To fit in
- To be/feel “cool”
- To feel better: anxiety, depression, to loosen up
- To have something to do
- Use is normalized – friends/family are doing it

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**Commonly
Used Drugs in
the County of
Santa Clara**



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TODAY'S VAPING: PUFFS BARS VS JUULS



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WHAT'S REALLY GOING ON IN THE:



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CIGS IN A POD



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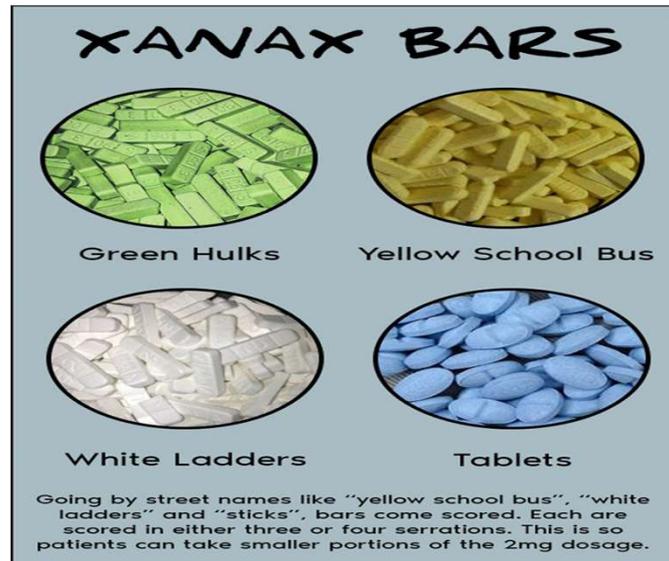
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NICOTINE WITHDRAWAL

- Having cravings for vaping/smoking
- Feeling down or sad
- Having trouble sleeping
- Feeling irritable, angry, on edge, or grouchy
- Having trouble thinking clearly and concentrating
- Feeling restless and jumpy
- Having a slower heart rate

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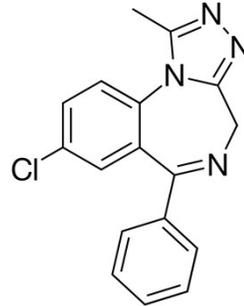


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XANAX

- Xanax bars come in all shapes and colors but most commonly used in Santa Clara are the ones listed below
- Green (Hulk) Strongest (usually 3 mg)
- Yellow (School Bus) Medium (2mg)
- Blue Medium (new on streets, don't trust)
- White: (1 or 2 mg)
- Often Dissolved in Gatorade /Sprite (most common)



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FAKE XANAX BARS



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PERCOCET

- “Perkies”
- Blue M30s
- Last two years
- Mixed with Fentanyl



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FENTANYL “FETY”

- 2 mg Lethal dosage
- Overdose usually involved fentanyl
- 20 Fentanyl Overdose deaths ages ranging from ages 14 to 25
- New on streets in Bay Area. Cheaper drug, less with more of a high

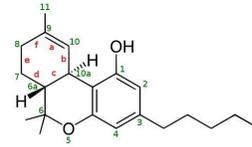


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THC

- Blunts/joints: old school
- Smell
- Average THC level (35% to 40%)
- Wax (trending)
- THC levels high 90%+ Stronger withdrawal- Headaches, insomnia, loss of appetite, irritability



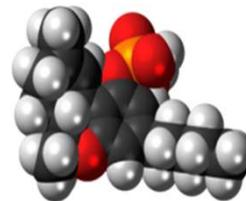
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T.H.C POTENCY THROUGHOUT YEARS

- 1978 Level 1.37%
- 1988 Level 3.59%
- 1998 Level 4.43%
- 2008 Level 8.49%
- 2014 Level 30%
- **2020 Level 99%**

www.ncjrs.gov/pdffiles1/ondcp/mpmp_report_104.pdf



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CANNABIS WITHDRAWAL

- Insomnia
- Hyperactivity/Restlessness
- Decreased appetite
- Increased appetite
- Irritability
- Sweating
- Nausea
- Diarrhea



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MARIJUANA & SCHIZOPHRENIA

How does marijuana use impact schizophrenia?

- In a study of 18,000 patients hospitalized for substance-induced psychosis over 8 years
 - 46% of marijuana users developed schizophrenia
 - 30% of amphetamine users developed schizophrenia
 - 5% of alcohol-induced psychoses developed schizophrenia
- The impact is greater for
 - Earlier age of use
 - Greater quantities- dose dependent
 - Over a longer time period

Niemelä-Pynttari, 2013; Radhakrishnan, Wilkinson and O'Sourz, 2014

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STIMULANT (COCAINE, AMPHETAMINE) OVERDOSE

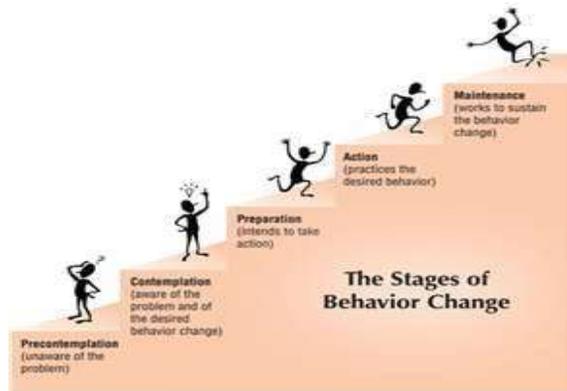
- Heart attack/chest pain
- Coma
- Difficulty/irregular breathing
- Seizures
- Stroke
- Tremors
- Vomiting



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STAGES OF CHANGE



Sources: Grinnley 1997 (73) and Prochaska 1992 (146)

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OUTPATIENT TREATMENT MODALITIES

OUTPATIENT TREATMENT- Up to 6 hours per week

INTENSIVE OUTPATIENT- 6 to 19 hours per week

OUTPATIENT MODALITIES

- Individual, family and collateral counseling
- Group Therapy
 - Seven Challenges
 - Seeking Safety
 - Cognitive Behavioral Therapy
- Crisis Intervention
- Case Management

Psychiatric Services &
Tele-Health Services Available



Co-Occurring Disorders- all SUDs and Low to Moderate Mental Health Disorders

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TREATMENT PHILOSOPHY



- Foundation of Honesty
- Meet Clients Where They Are At
- Therapist As A Catalyst For Change
- Interventions Tailored to Stage of Change
- Abstinence and Harm Reduction

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TREATMENT SERVICES

- ❖ 23 Outpatient Treatment Settings
 - Clinic settings
 - High schools
 - Continuation schools
 - James Ranch

- ❖ Services provided by licensed or licensed-waivered clinicians

- ❖ Residential Services



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OUTPATIENT TREATMENT SERVICES AT SCC SCHOOLS

Provider: Advent Group Ministries and Advent Friendly Inn Clinic		
Fremont High School	Homestead High School	Los Altos High School
Cupertino High School	Alta Vista High School	

Provider: AARS/Healthright 360		
Yerba Buena High School	Andrew Hill High School	Independence High School
Overfelt High School	Evergreen High School	James Lick High School

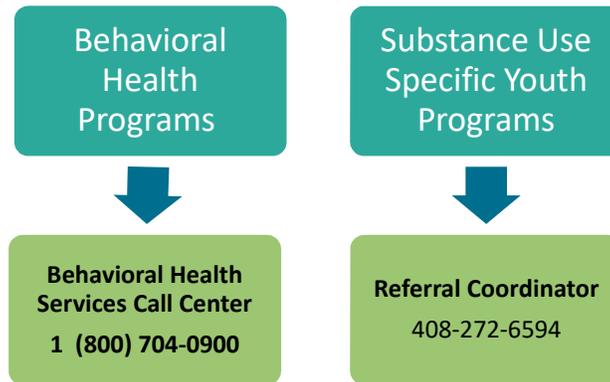
County Substance Use Treatment Services/CFCS Sunnyvale Health Center Clinic		
Gilroy High School	Apollo High School	San Jose Conservation Corp
Mt. Madonna High School	Broadway High School	Lincoln High School
Sunol Community School	Esquela Popular	Foothill Community School
Gateway School		

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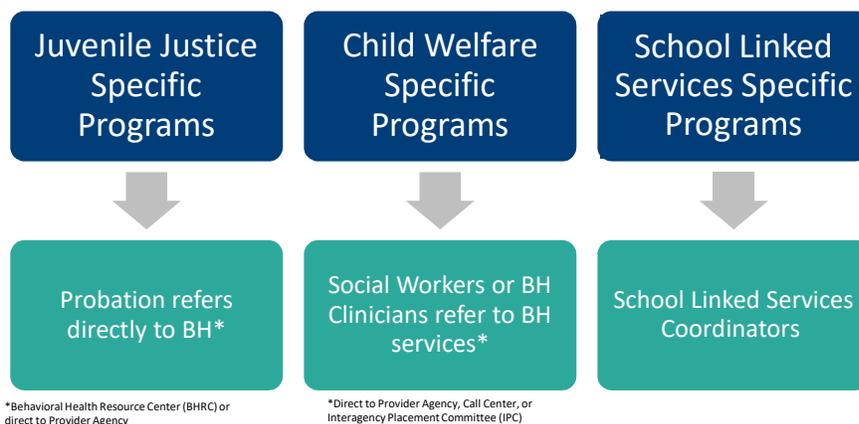
GENERAL BEHAVIORAL HEALTH ACCESS POINTS



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BEHAVIORAL HEALTH ACCESS POINTS – SYSTEM SPECIFIC



*Behavioral Health Resource Center (BHRC) or direct to Provider Agency

*Direct to Provider Agency, Call Center, or Interagency Placement Committee (IPC)

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RESOURCES

Crisis Support Services	
BHSD Suicide and Crisis Line	855-278-4204
Crisis Support via Text	Text RENEW to 741741
Mobile Crisis Response Teams (MCRT)	
MCRT Adults BHSD	800-704-0900
MCRT Children and Youth @ Uplift Family Services	408-379-9085
To Access Behavioral Health Services, Call:	
BHSD Call Center	800-704-0900
BHSD Gateway Call Center for Substance Use Treatment Services	800-488-9919
Youth Substance Use Treatment Services (Mon-Fri 9AM – 6PM)	408-272-6518
Youth Substance Use Treatment Services (Afterhours)	800-488-9919
Other Resources	Website
Behavioral Health Department Children, Youth, and Families	www.sccbhsd.org/CYF
County of Santa Clara Facebook Live	https://www.facebook.com/sccpublichealth
The National Child Traumatic Stress Network	https://www.nctsn.org/what-is-child-trauma/trauma-types/disasters/pandemic-resources

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Comments & Questions

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FOR MORE INFORMATION

- BEHAVIORAL HEALTH SERVICES DEPARTMENT
725 E. Santa Clara St., Suite 301, San Jose, CA 95112
<https://www.sccgov.org/sites/bhd/info/CYF/SLS/Pages/cyf-sls-initiative.aspx>
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- YOUTH SUBSTANCE USE TREATMENT SERVICES
<https://www.sccgov.org/sites/bhd/info/CYF/Pages/youth-suts.aspx>
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