



Let's Talk About Mental Health

February 18, 2015



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Fatherhood Clearinghouse

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National Responsible Fatherhood Clearinghouse

- DHHS/ACF Office of Family Assistance funded national resource to support fathers and families.
- Resources are available for dads, fatherhood programs, researchers, and policy makers.
- Visit the NRFC: www.fatherhood.gov
 - www.fatherhood.gov/toolkit for *Responsible Fatherhood Toolkit*.
 - www.fatherhood.gov/webinars for archives of all our webinars.
- Contact any of our staff: info@fatherhood.gov
- Encourage fathers or practitioners to contact our national call center toll-free at **1-877-4DAD411 (877-432-3411)**.
- Engage with us via social media:
Facebook: [Fatherhoodgov](https://www.facebook.com/Fatherhoodgov) Twitter: [@Fatherhoodgov](https://twitter.com/Fatherhoodgov)



Today's Conversation*

- Importance of mental health.
 - Emotional, psychological, social well-being determines how we handle stress, relate to others, make choices.
- 1 in 5 adult Americans will experience a mental health problem this year, but only 38% likely to get treatment.
 - Problems include depression, schizophrenia, bipolar disorder, obsessive compulsive disorder (OCD), panic disorder, posttraumatic stress disorder (PTSD), borderline personality disorder, etc.
 - Can disrupt your thinking, feeling, mood, ability to relate to others, daily functioning.
- "Promotion and prevention requires people and communities to think and act differently by addressing mental health issues before they become mental illnesses."



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* Notes from the Substance Abuse and Mental Health Services Administration (SAMHSA)



How can fatherhood programs help?

- Understand types of mental health issues fathers may experience.
- Use assessment tools to help identify issues.
 - Recognize possible symptoms.
- Engage fathers in reflective conversations designed to:
 - Break down misperceptions and stigma.
 - Encourage prevention, resilience, and recovery.
- Develop referral networks of culturally competent providers.
- Recognize limits of what fatherhood programs can do without clinically qualified staff.





Resources and acknowledgments

- SAMHSA - *Community Conversations About Mental Health*
- MentalHealth.gov
- Mental Health America
- National Alliance on Mental Illness (NAMI)
- National Institute of Mental Health (NIMH) - *Men and Depression.*
- National Center for Post Traumatic Stress Disorder
- PSAs and video
- Denise Marzullo - Mental Health America of Northeast Florida
 - recommended PSAs and websites.
- Harold Wells - Jewish Family and Children Services, Sarasota, FL
 - work with Grief and Forgiveness.
- Katrina Johnson - Horizon Outreach, Houston, TX
 - PTSD help for veterans.
- Kenneth Braswell, Fathers Incorporated, and Dr. Sidney Hankerson, Columbia University
 - video: "Mental Health and Black Men."





Let's Talk About Mental Health

Center for Urban Families (CFUF) and University of Baltimore
February 18, 2015



Joe Jones
President/CEO, CFUF
jjones@cfuf.org



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Tiffaney Parkman, Ph.D.
School of Health and Human
Services
University of Baltimore





Center for Urban Families (CFUF)

- **MISSION:** To strengthen urban communities by helping fathers and families achieve stability and economic success.

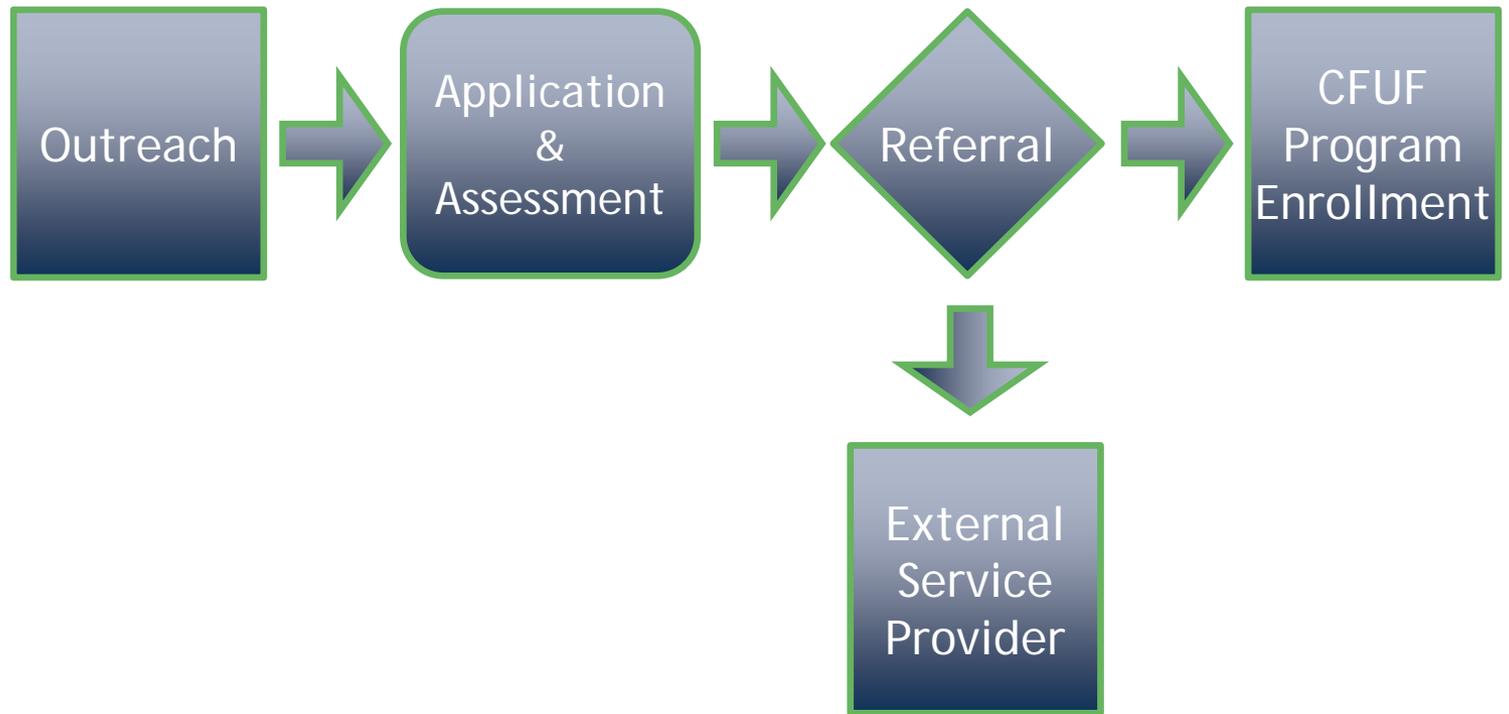
FOCUS AREAS:

- **Economic Success**
 - Workforce Development: Soft skills/Hard Skills
 - *STRIVE Baltimore*
- **Family Stability**
 - *Baltimore Responsible Fatherhood Project (BRFP)*
 - *Couples Advancing Together*
- **Supportive Services**
 - Literacy, Legal, Professional Development
- **Policy Advocacy**
- **Practitioners Leadership Institute**





CFUF Participant flow





Baltimore Responsible Father Project (BRFP)

Core Program Objectives:

- Increasing child support awareness and management.
- Improving acquisition and demonstration of parenting skills.
- Increasing healthy relationships and effective communication.
- Increasing client job readiness and employability.





Challenges faced at CFUF

- How to deal with more serious issues (major depression, chronic stress, PTSD, schizophrenia, etc.).
- Need for mental health screening tools.
- Cultural stigma associated with mental health.
- Lack of relationship with professionals in mental health community.
 - Need to develop these as we have with Child Support Enforcement and Domestic Violence.





Dr. Parkman - Lessons Learned from working with Fathers in Correctional Settings and in the Mental Health System

- Dealing with “Arrested Emotional Development.”
- Types of Mental Health Issues our Fathers are dealing with.



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Staff training and professional development

- Help staff understand their own experiences and capacities.
- Ways to guide conversations in individual and group settings.
- How to help when men disclose issues.
 - Knowing your own limitations as a “helpful provider.”
 - When to refer on or seek support from colleagues.
- Learning from clinicians.



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Incorporating Mental Health Assessments in Programming

- A variety of mental health assessment instruments are used during the member application process:
 - Self-Administered Substance Abuse.
 - Post Traumatic Stress Disorder.
 - Mental Health-Depression.



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Bridging the Mental Health Gap between fathers and Service Providers

- Peer Support Groups and “less clinical interventions.”
- Gatekeeper Assistance.
- Creating community partners who can vet resources before you send clients.
- Finding an Ally.



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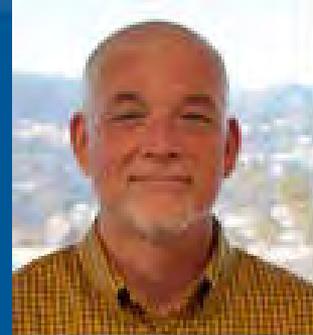
Let's Talk About Mental Health

L.A. Fathers Program, Project NATEEN
Division of Adolescent and Young Adult Medicine
Children's Hospital Los Angeles
February 18, 2015



Frank Blaney, M.A.

Project Coordinator, L.A. Fathers Program
fblaney@chla.usc.edu



Sophie de Figueiredo, Psy.D.

Coordinator of Mental Health Services, Project NATEEN
sdefigueiredo@chla.usc.edu



Bridgid Conn, Ph.D.

Postdoctoral Psychology Fellow, Project NATEEN
bconn@chla.usc.edu



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Children's Hospital Los Angeles



Division of Adolescent and Young Adult Medicine



Project NATEEN/ L.A. Fathers



DIVISION OF ADOLESCENT AND YOUNG ADULT MEDICINE





L.A. Fathers Program

- An intensive, strength-based, developmentally and culturally sensitive case management program for 15-25 year-old fathers.
- Enrolled 713 L.A. youth since initial implementation in July 2012.
- Catchment area reflects 2nd highest poverty level in Los Angeles County.
- Typical services provided:
 - Healthy relationships & nonviolent parenting workshops.
 - Advanced/Alumni support group.
 - Incentives for participation.
 - Goal-setting support.
 - Linkage to vocational training.



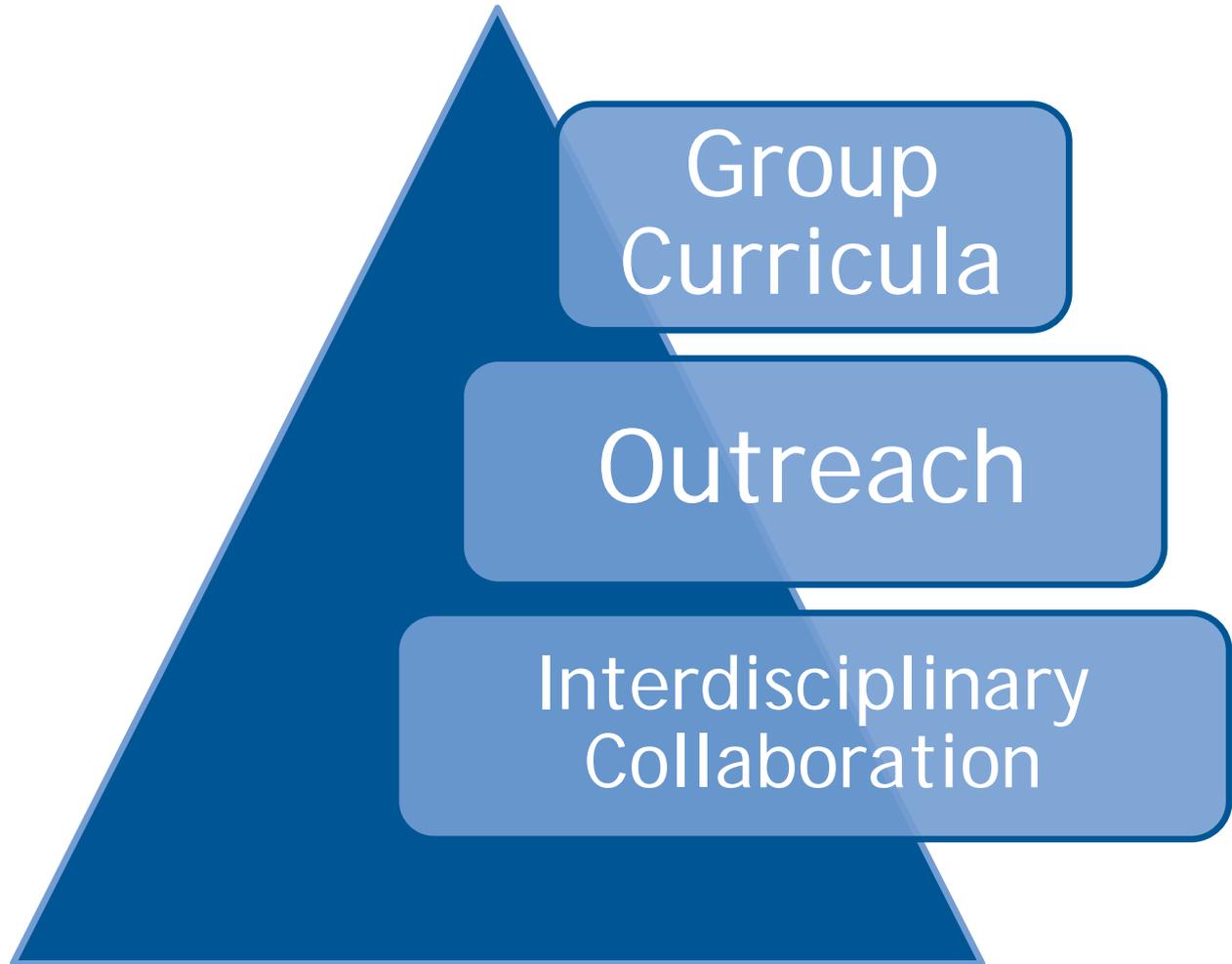
Young Fatherhood in Context

- Socioeconomic and historical community environment
- Immigration status / language barriers
- Generational gang involvement / incarceration
- Lack of opportunity for employment and education
- Multiple adverse experiences / chronic trauma
- Ageism, gender, and “teen parent” stereotyping
- “Shaming” within social support system





Addressing Stigma of Mental Health Services (MHS)



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Bridging Gap to Mental Health Services For L.A. Fathers

Staff Support

Internal and external training
Consultation
On-call crisis support
Care for the Caregiver group
Professional development

Assessment

Psychosocial assessment
Ongoing attention to life stressors
Capacity for psychological testing
Early childhood screening

NATEEN
psychologists

Clinical Support

Broad mental health services
Drop In Clinic
Interdisciplinary collaboration
Link to substance use services

Research

Ongoing data collection
Publications/ Dissemination
Program Evaluation & Grants



Trauma-Informed Care (TIC)

- Central in de-stigmatization of mental health services.
- Shifts healthcare approach from “What’s wrong with you?” to “What’s happened to you?” (SAMHSA, 2014).
 - Enhances environment of safety, trust, and collaboration between provider and client.
 - Builds empathy and understanding.
 - Challenges impact of past adverse experiences.
- Training in TIC principles and practices shown to buffer providers’ experience of secondary traumatic stress/compassion fatigue.



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Trauma-Informed Staff Support

Burnout: Emotional exhaustion, depersonalization, and reduced feeling of personal accomplishment; work-related.

Compassion Fatigue: Often used interchangeably with secondary traumatic stress; presence of PTSD symptoms caused by indirect exposure to traumatic material.

Vicarious Trauma: Changes in the inner experience of the therapist resulting from empathic engagement with a traumatized client.

Compassion Satisfaction: Positive feelings derived from competent performance, positive relationships with colleagues and conviction that one's work makes a meaningful contribution



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Best Practices & Recommendations

Programmatic

- Integrate mental health services into program design and budget.
- Institute policies and procedures for supporting client mental health needs and ensure staff training.
- Assess for positive view of MHS utilization during hiring process.
- Examine program culture and attitudes towards MHS.

Clinical

- Utilize trauma-informed practices.
- Build warm, trusting, non-judgmental client relationships.
- Be visible and flexible.
- Remain self-aware (gender, race/ethnicity, etc.).
- Seek out ongoing training, supervision/support.



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Best Practices Are Trauma-Informed

TRAUMA-INFORMED PREVENTION, INTERVENTION, AND TREATMENT PYRAMID



PAY NOW OR PAY LATER

PAY NOW FOR PROGRAMS THAT HAVE BEEN PROVEN TO BUFFER STRESS OR PAY LATER IN RISING HEALTH COSTS.

HIGH QUALITY EARLY CHILDHOOD INVESTMENTS HAVE A LASTING EFFECT: \$10 RETURN ON INVESTMENT FOR EVERY \$1 SPENT. (4)

TREATMENT

Very Costly, High Stigma, Hard to Access
Example: Trauma-Informed Psychotherapy

INTERVENTION

Minimizes Harm, Population Focused
Example: Emergency Department Violence Prevention Intervention

PREVENTION

Proactive, Most Cost Effective, Resilience Building
Example: School Based Mindfulness and Social Emotional Learning

Additional Resources

- Adverse Childhood Experiences Study (ACES)
<http://www.acestudy.org/>
- National Child Traumatic Stress Network www.NCTSN.org
 - NCTSN Learning Center <http://learn.NCTSN.org>
 - *Facts for Policymakers: The Need for an Integrated System of Care for Youth with Traumatic Stress & Substance Use Disorders*
http://www.nctsn.org/sites/default/files/assets/pdfs/policybrief1_traumatic_stress_and_substance_use.pdf
- Trauma & Resilience: An Adolescent Provider Toolkit
<http://www.ahwg.net/resources-for-providers.html>
- Substance Abuse and Mental Health Services Administration.
 - *Trauma-Informed Care in Behavioral Health Services*. Treatment Improvement Protocol (TIP) Series 57. HHS Publication No. (SMA) 13-4801. 2014. <http://store.samhsa.gov/shin/content/SMA14-4816/SMA14-4816.pdf>
- When Dad Has Postpartum Depression
<http://psychcentral.com/blog/archives/2012/04/16/when-dad-has-postpartum-depression/>





Contact:

- NRFC: info@fatherhood.gov
 - comments, questions, suggestions for future webinar topics, information or resources that you recommend.
- Today's presenters:
 - Frank Blaney: fblaney@chla.usc.edu
 - Sophie de Figueiredo: sdefigueiredo@chla.usc.edu
 - Bridgid Conn: bconn@chla.usc.edu
 - Joe Jones: jjones@cfuf.org
 - Tiffaney Parkman: tparkman@ubalt.edu