



Mental Health Crisis Response Report November 17, 2022

PSAB Subcommittee: Vice Chair Wang, Members Aiyar & Tang City Staff: Audrey Seymour Ramberg, Parneet Dhindsa



- PSAB Work Plan item
 - Explore existing and alternative responses to persons experiencing mental health crisis
- Crisis Response Program update
 - MCRT
 - TRUST
 - MVPD BSU
- PSAB Subcommittee efforts
 - Reach out to community contacts and gather data
 - Synthesize information into "community profile" of mental health crisis needs
 - Monitor development of the TRUST, MCRT, and BSU programs
 - Develop recommendations to promote awareness of these programs





- Update on status of MCRT and TRUST
- Community Profile
 - Focus on mental health crisis response as alternatives to traditional law enforcement
 - Help inform MCRT and TRUST as new providers in our community
 - Snapshot of useful information
 - Not rigorous study for policy or program development purposes
- Outreach recommendations to the County and TRUST to raise community awareness



Update on New/Expanded Programs

North County MCRT

- Pursuing location in Mountain View for North County MCRT team
- Working to recruit staff
- Has not yet deployed the new team

North County TRUST program

- County selected Momentum for Health as North County TRUST provider
- Staff hired to cover 7 am 5pm shift
- Still recruiting for 24/7 operation
- TRUST call center expected go to live late Nov./early Dec.
- Momentum conducting outreach



Community Profile

- City government overview
 - Policies, partnerships, & projects
- Community overview
 - Geography & demographics
- Mental Health Crisis Needs and Resources
 - Data & themes



City Government Overview

- Community for All Strategic Priority
- Communications and Outreach
- Library and Community Services
- MVPD



Community Overview

- Geography/points of interest
- Strong schools & community-based organizations
- Age
- Race/ethnicity
- Household income
- Housing types



Age of Mountain View Residents

Age Range	% of Population
<5 years	6.5%
5-19	15.4%
20-24	5.2%
25-34	22.6%
35-44	16.8%
45-54	12.1%
55-64	10.2%
65+	11.2%



Race/Ethnicity of Mountain View Residents

Race/Ethnicity	% of Population
White	40.1%
Asian	34.9%
Hispanic or Latino	17.2%
Black or African American	1.4%
American Indian or Alaska Native	0.1%
Native Hawaiian or Other Pacific Islander	0.3%
Two or more races	5.3%
Other race	0.7%



Household Income Distribution

Income Range	# of Households	% of Households
Less than \$14,999	1,808	5.4%
\$15,000 to \$24,999	1,418	4.2%
\$25,000 to \$34,999	1,360	4.0%
\$35,000 to \$49,999	1,916	5.7%
\$50,000 to \$74,999	2,926	8.7%
\$75,000 to \$99,999	2,711	8.0%
\$100,000 to \$149,000	5,840	17.3%
\$150,000 and above	15,777	46.7%



Mountain View Housing Unit Types

Housing Type	% of Units
Single-Family Detached	27.9%
Single-Family Attached	12.7%
Small Multi-Family (2 to 4 units)	8.2%
Medium or Large Multi-Family (5+ units)	42.4%



Mental Health Crisis Data

- MVPD calls related to mental health concerns
- MVPD calls related to drug/alcohol overdose
- Drug overdose deaths
- Suicide deaths



MVPD Calls – Mental Health Concerns

Year	Calls Related to Possible Mental Health Concern
2019	254
2020	319
2021	484



MVPD Calls - Drug/Alcohol Overdose

Year	Calls Related to Drug/Alcohol Overdose
2018	41
2019	56
2020	58
2021	66



Deaths by Drug Overdose & Suicide

• Overdose: 8 per year average 2018-21

• Suicide: 4.6 per year average 2015-19

Local Contacts



- Community Services Agency
- Community Health Awareness Council
- County Behavioral Health Services
- El Camino Hospital
- Project Safety Net
- Reach Potential Movement
- Mountain View Los Altos High School District (Wellness Coordinator, Support Services Specialist, ELAC members)
- Mountain View Community Services Department
- Mountain View Library
- Mountain View Multicultural Engagement Program
- Mountain View Police Department



Overarching Themes

- Increased levels of anxiety and depression: more referrals and more acute needs
- Needs present before COVID-19 pandemic and exacerbated since
- Increased suicidality among youth
- Mental health needs at younger ages
- Lack of sufficient resources to address magnitude of need



COVID-19 pandemic effects

- Increased levels of emotional distress and feelings of anxiety related to potential impact on job and living situations
- More acute diagnoses, perhaps related to a delay in receiving care
- Need for rebuilding social skills and creating a sense of community and belonging

Anxiety and depression among all age groups

- Consistently living with an activated fight or flight response
- Increasing among children transitioning into middle school and high school



Concerns among high schoolers

- Substance use
- Other crisis, including housing instability and threat of violence
- Need for safety plans for suicidal ideation

Parents

- Feelings of stress from responsibilities of parenting
- Work- or unemployment-related stress
- Possible impacts of parent distress on children/youth feeling of isolation
- Emotional tiredness



- Observations of behavior related to mental health concerns among unsheltered residents
 - Expressions of fears or beliefs perceived as paranoia
 - Verbal and physical aggressions and irate behavior (including racial undertones)
 - Suspicions of possible substance use based on behavior or surrounding paraphernalia
 - Fear and pressure related to uncertainty faces by residents living in vehicles

Lack of special-needs resources

- Increase in children exhibiting characteristics of special needs without formal diagnosis
- Delayed identification or uncertainty of special needs for children who missed early childhood learning in preschool/Kindergarten
- Parents not feeling they have access to sufficient resources
- Challenge among bilingual Spanish-speaking children and monolingual Spanishspeaking parents



Newcomers

- Social anxiety
- Depression due to loss of connection with their country of origin
- Persons in crisis who do not meet level of involuntary hold/do not want assistance
 - Stress of waiting for person in crisis to either meet involuntary hold criteria or make decision to seek assistance

People are willing to obtain help

- Not as afraid to obtain the mental help health they may needed
- More open and willing
- Understand help may be needed and would like to receive care



Themes: Barriers to Accessing Services

- Inability to pay for services
- Inability to obtain services due to financial impact from missing work to receive care
- Increased costs for therapy
- Lack of insurance
- Time to find and participate in services
- Distant location of services
- Increased wait times for appointments



Themes: Barriers to Accessing Services

- Cultural competency and language proficiency among therapists and other licensed providers
- Lack of pediatric psychologists
- General lack of awareness of available resources
- Being unstably housed
- Need for child-care for parents seeking care or experiencing crisis
- Fear of reprisal due to documentation status
- While stigma has decreased over the past years, it continues to be a prominent barrier



Outreach Recommendations to County and TRUST

- Conduct robust outreach and engage in continued collaboration with Mountain View partners
 - Scheduled locations for van
 - Resource fairs
 - High schools and continuation schools (ELAC, etc.)
 - Mental health providers
 - Emergency assistance providers
 - Health care organizations
 - City programs (Library, Community Services, MEP, MVPD, YAC)
- Develop and disseminate information to reach general public through trusted partners and established communication channels
 - Handouts
 - Bulletin boards
 - Websites



Outreach Recommendations to County and TRUST

- Provide de-escalation/mental health first aid trainings for front-line staff
- Provide ongoing input to County Behavioral Health Services and Momentum for Health
 - City CBO network
 - TRUST Community Advisory Board
- Use diverse communication methods, including language and cultural competence
 - Leadership Academy Ambassadors
 - WeChat, What'sApp
 - In-person networks
- Link with Pacific Clinics to identify any opportunities to coordinate with high schools on case management following 5150 placements





- Finalize and format the community profile and outreach recommendations as a stand-alone document
- Share profile and recommendations with Santa Clara County Behavioral Health and Momentum for Health
- Implement outreach recommendations noted above that involve City Departments
- Continue to monitor program development and participate in TRUST CAB
- Gather and provide ongoing community feedback about TRUST to the CAB