<u>US-Mexico Border</u> <u>Mental Health</u>

Gaurav Mishra, MD.



LEARNING OBJECTIVES

- [1] The attendees will understand the factors that make Imperial County's population especially vulnerable and how to identify these patients.
- [2] The session will provide an overview of the services available to youth and families in the county.
- [3] The speaker will provide some case discussions to illustrate the experience of working as a Child psychiatrist in this county.

Financial Disclosure:

- Work for Imperial County, CA.
- No other financial disclosures.

LOCATION





IMPERIAL COUNTY



BACKGROUND

- The Imperial County of California is located 120 miles east of San Diego on the US Mexico border.
- The county population is 182000 and nearly 81 % Latino.
- 23 % live below the poverty line.
- 13% of population above the age of 25years has a high-school diploma.
- Immigration: First and second generation and newly arrived migrant families and individuals.
- 1990 US Census- 29% of Imperial County families are foreign born.
- The ratio of Imperial County to California per-capita incomes was 0.68 in 1994; that is, on average, Imperial County residents' incomes were 68 percent of the state average. This ratio was 0.62 in 1998.

IMMIGRATION

- Imperial is major port of entry for large legal commuter farm workers.
- Site of most intense border patrol enforcement in CA.
- Studies have shown that migration around the border is related to stressors that could lead to higher incidence of anxiety disorders among Hispanic youth compared to other ethnic groups.
- In 2001 UC Berkeley report of mental health in CA counties: Imperial County residents had low rates of seeing a mental health specialist in the last year, discussing mental health issues with any health care provider in the last year, low rates of being insured, low county budget, low availability of providers psychiatrists, psychologists, LCSWs.

A Population at Risk

The Hispanic youth show greater risk for psychosocial stressors such as:

- separation from one or both parents,
- exposure to violence- gangs, drug mafia,
- exploitation and abuse during immigration,
- fear of deportation of self / parents,
- lack of medical insurance,
- change of school and new set of peers,
- adjusting to a new language, often not having instruction in Spanish,
- Teasing and bullying,
- the role of sudden migration; unpreparedness of children and them not having a say in the move.

SERVICE PROVIDERS

- Imperial County: major mental health care provider for the county.
- Other providers: few private practise doctors, FQHC and hospital ER.
- Before 2011 < 2 psychiatrist / 100000. Now about 14 for 200000.
- Binational Health Council / Consejos Binacionales de Salud [COBINA]:
 Imperial Valley-Mexicali region combined governmental and non-governmental leadership.
- Department of Social Services.
- Desarrollo Integral De La Familia, Mexico [DIF Nacional]: Counterpart of Dept of Social Services in USA.



- Main mental health services provider for Imperial County.
- Services include:
- Assessment Center
- Prevention & Early Intervention [PEI]
- Childrens services
- Youth and Young Adult [YAYA] services
- Adult services
- Conservatorship coordination
- Juvenile Hall services
- Jail services
- Services at the Quechan Indian Reservation on CA-AZ border region.

Prevention & Early Intervention [PEI]

- Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) to prevent the development of serious mental illness for children and adolescents who have experienced a traumatic experience.
- Traumatic life: child sexual or physical abuse; loss of a loved one; domestic, school, or community violence; exposure to disasters, terrorist attacks, or war trauma.
- Issues addressed: poor self-esteem, difficulty trusting others, mood instability, and self-injurious behavior, including substance use.
- Children and parents learn new skills to help process thoughts and feelings related to traumatic life events; manage and resolve distressing thoughts, feelings, and behaviors related traumatic life events; and enhance safety, growth, parenting skills, and family communication.

CHILDREN'S SERVICES

SERVICES

- Basic psychiatric follow up.
- Case management services.
- Therapeutic services: CBT, TFCBT, Coping cat.
- Engage with families without insurance: pro-bono or a payment plan.
- Psychiatric care: Coordinate care with cross border psychiatrist.
- Guide through school system of USA.
- Provide local financial, housing and food bank referrals.
- Provide bilingual therapist and few doctors who can speak Spanish and have interpreter services available.

Therapy Services

- TFCBT; CBT; Coping Cat.
- The Incredible Years parenting program for school age children,
 6-12 years, focused on strengthening parenting competencies and
 fostering parent-child interactions and attachments.
- **Functional Family Therapy (FFT)** is a family-based prevention and intervention program in a variety of multiethnic, multicultural contexts.
- **First Steps to Success (FSS):** Early intervention program designed to help children in classroom and parent training.
- Aggression Replacement Therapy (ART): includes social skills training, anger control, moral reasoning.

CASE MANAGEMENT

- Outreach to homes for welfare check.
- Link to services: housing, primary care clinics, food banks.
- Parenting strategies- work with families 1:1.
- Explain and coordinate school services, establish school goals,
 participating in IEP meetings, and help educating rights of parents
- Educate about bilingual classes and migrant worker programs.
- Linkage to: intense case management and Therapeutic Behavior services.
- Linkage and coordination: with Autism and ID evaluation.
- Provide information for summer break and holiday activities for poor and underserved families in the region.
- Coordinate care with DSS-SW and foster placements.
- Coordinate with treating therapists and MDs.

Vista Sands Program

- Helps children with behavioral, emotional and social issues and whose capacity to function at home, school, and the community has been impaired
- Children participate daily in highly structured activities that focus on skill acquisition such as social skills, problem solving, self-esteem enhancement, self-management, self-control, as well as educational development.
- Admission is open to qualifying children throughout the Imperial County, between the ages of 7- 12.
- Referral can be made by Behavioral Health and Schools.

CASE #1

- 9 yo hispanic male.
- Referred by the school: depression and aggressive and bullying.
- Living In Mexicali for 1-2 years then moved to USA.
- Multiple traumas: 1] The patient's family was attacked by neighbors, attacked his mother was hospitalized. 2] Mother was assaulted by car repo people and needed emergency surgery. 3] Bullied severely and in the 1st grade was beaten up by 5 boys in the school bathroom.
- PTSD; Depression; poor focus on his work, occasional thoughts of suicide, bedwetting, Anger.
- Helped coordinate Special ed evaluation.
- Prozac, Referral to Vista Sands, TFCBT.

Youth & Young Adult Services (YAYA)

Youth & Young Adult Services (YAYA)

Patients 14 – 25 years old.

Programs:

- Full Service Partnership programs
- Anxiety & Depression Clinics
- Substance Abuse treatment and Prevention Services
- Juvenile Hall services

Full Service Partnership

- Funded by Mental Health Services Act [MHSA].
- Age group served: 12-25 years.
- Criteria: Dual Diagnosis of severe emotional disturbance and substance abuse / dependence, removed or at risk of removal from home, homeless or at risk of homelessness.
- Diagnoses: Psychotic disorders, schizophrenia, bipolar disorder, major depression, suicidal thoughts and actions, oppositional defiant disorder and conduct disorder.
- Case management, Medication management and therapy.

Services in YAYA [FSP]

- Gym membership
- Equine Therapy
- Drum circle
- Linkage to education / GED
- Employment / Vocational training
- Financial Aid services.
- Socialization activities
- Housing and independent Living assistance
- Substance abuse groups
- Physical health linkage

YAYA Anxiety & Depression

- 14-25 yo
- Diagnoses: Depression, Anxiety, PTSD, Substance use disorder

SERVICES:

- Therapy: CBT; CPT; TFCBT; FFT; ART and DTQA
- Medication support
- Case Management
- MHRT
- Crisis Intervention

Substance Abuse Treatment

- Individual & group counselling
- Case management
- Crisis intervention
- HIV / TB intervention and aftercare
- School based substance use groups

JUVENILE HALL SERVICES

- Psychiatry services
- Therapy and groups
- Linkage to outpatient service before release.
- Work with Probation officers and court in determining proper placement.

Transitional Engagement Supportive Services

- 14 or older adolescents who have recently undergone a personal crisis
 needing voluntary or involuntary crisis interventions.
- Support system- food, shelter, benefits assistance, public transport, setting up contact with family / friends, linkage to community resources and healthcare services.

ASSESSMENT CENTER:

- Evaluation by appointment and walk-in first come first serve.
- Pre-screened for urgency of need and then referred to regular clinic follow up or Crisis Referral desk.

Adolescent Habilitative Learning Program [AHLP]

- Combined mental health and educational services.
- Adolescents with behavioral and emotional problems.
- Services intensity is based on need of the student.
- Anger, distress, anxiety, depression.
- School based half day program and family is involved in creating the educational plan.
- Assistance with maximizing learning and functioning.
- Cost covered by Medical or Special education laws.
- Medication management, group and family counselling, case management, academic class work help, Therapeutic group activities, recreational group activities, ART.

Crisis Desk

- 24x7 staff on site.
- Voluntary or involuntary basis by law enforcement referral.
- Evaluation and stabilisation upto 72 hrs onsite
- Initial Crisis Assessment, a Clinician Assessment and Discharge
 Planning, Link the person to outpatient and other supportive services.
- Refer and transport to inpatient hospitalization.
- Conservatorship proceedings.

CASE #2 JH

- 17 yo male in JH, hx of mental illness with diagnosis of Bipolar disorder,
 ADHD-CT, Cannabis and Methamphetamine abuse.
- Released from an inpatient substance use rehab in Mexicali after spending 9 months there → Spent 2-3 weeks with MGF → arrested for stealing parts of a car.
- Sad and depressed and has been having suicidal ideations. He is a very high risk for suicide as he has had 2 part suicide attempts while in here at JH. The patient on questioning, repeatedly said "I want to kill myself already." he appears very hopeless and is at high risk of suicide attempt. In and out of psychiatric rx since the age of 4 years.
- Past trauma- loss of brother.
- Substance Use -cannabis and methamphetamine dependence.
- Sent to placement and removed for behavior issues.
- Continue Abilify 5 mg QHS Continue Clonazepam 1 mg BID

CASE #3

- 13 yr old female; recently moved from Mexico and started at 7th grade.
- Lives with bio parents and siblings.
- Stressors- hx of mom incarcerated at age 4yrs for 8mths, recent move, threatened by the landlady to have the pt kidnapped, verbal and physical DV growing up, bullying at new school.
- Sx of depression, self harm thoughts, PTSD.
- Rx-TFCBT, MHRT, Sertraline, Prazosin.
- Marked improvement in sx because pt is being moved to a diff school due to the bullying.
- Pt is on honor roll at the new school, going to concerts, no longer on social media. No more safety concerns.

ADULT SERVICES

Types of Services

- Outpatient services: Anxiety & Depression clinic.
- Adult Alcohol & drug recovery program.
- Adult MHSA-FSP program: for severe mental illness with substance abuse co-occurring; OR who are transitioning back to the community from incarcerations; OR homeless.
- AB-109 Program: for low level nonviolent offenders, in collaboration with probation department.
- Self Management & Recovery Training [SMART] self-help Groups.

Imperial County Resource & Recovery Centers

Resource Center

- Network of consumers
- Connect to community resources
- Educational, employment, interpersonal and independent living skills.
- Daily organized and structured activities geared towards recovery.

Adult MHSA Recovery Center

 Consumer directed recovery activities- treatment services, educational and vocational services.

MHSA- Transitional Engagement Supportive Services [TESS]

- 18 or older adults.
- Discharged from Crisis Center, Acute psychiatric hospitalisation, LPS Conservatorship being terminated by a court.
- Support system- food, shelter, Section 8 application, SSI /
 cash benefits application assistance, public transport, setting
 up contact with family / friends, substance abuse and
 healthcare services. Also linkage to DMV, Immigration
 Services, Probation/Parole linkage.

Lanterman Petris Short Act [LPS] Conservatorship

- County mental health with Psychiatrist and team provide evaluation.
- Court testimonies.
- Support mental health and care coordination services.
- Also provides support after a patient is released from conservatorship.

REFERENCES

- Taylor, E. (2001). Immigration, employment, poverty, and welfare in the Imperial Valley. *Changing Face*, 7.
- Eisenberg, D., Bellows, N., Brown, T. T., & Scheffler, R. M. (2005). Measuring mental health in California's counties: what can we learn. *Berkeley, CA: The Nicholas C. Petris Center on Health Care Markets and Consumer Welfare University of California, Berkeley. Retrieved October*, 12, 2011.
- Potochnick, S.R. and K.M. Perreira, Depression and anxiety among first-generation immigrant Latino youth: key correlates and implications for future research. J Nerv Ment Dis, 2010. 198(7): p. 470-7.
- Mills, S.D., et al., The psychometric properties of the generalized anxiety disorder-7 scale in Hispanic Americans with English or Spanish language preference. Cultur Divers Ethnic Minor Psychol, 2014. 20(3): p. 463-8.
- Wulsin, L., E. Somoza, and J. Heck, The Feasibility of Using the Spanish PHQ-9 to Screen for Depression in Primary Care in Honduras. Prim Care Companion J Clin Psychiatry, 2002. 4(5): p. 191-195.
- Felitti, V.J., et al., Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults. The Adverse Childhood Experiences (ACE) Study. Am J Prev Med, 1998.
 14(4): p. 245-58.
- United States Census Bureau, State and County Quick Facts. Imperial County, California. Available at: http://quickfacts.census.gov/qfd/states/06/06025.html. Accessed August 2015.
- City Data, Imperial County. Available at: http://www.city-data.com/county/Imperial_County- CA.html. Accessed August 2015.
- Camacho A, et al., Latent Profile Analysis of Anxious-Depression among Hispanic/Latinos: Results from the Hispanic Community Health Study/Study of Latinos (HCHS/SOL). Soc Psychiatry Psychiatr Epidemiol, 2015. 50(11): p. 1669-77.
- Centers for Disease Control and Prevention. Adverse Childhood Experiences (ACE) Study. 1998 [cited 2015 December]; Available from: http://www.cdc.gov/violenceprevention/acestudy/index.html.