



## Purpose of Presentation

- Policy paper by Dr. Deborah Lee and Dr. Saul Feldman, which documented effective PEI approaches for children, youth, and their families: adopted by MHOSAC in 2006
- Update adds section on mental health risk factors, consequences, and interventions to prevent bullying and reflects MHSA changes to PEI



## PEI Child-Family Paper Research Summary

- Half of all lifetime cases of mental health disorders start by age 14, three-fourths start by age 24.
- Children and youth have lower service utilization, worse quality of care, and more serious consequences from untreated mental illness compared to other age groups
- Intervening early is a powerful strategy with potential to make a visible and lasting difference



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## PEI Child-Family Paper Research Summary

### PROMISING PEI AREA FOR CHILDREN AND YOUTH

Reducing Stigma and Discrimination	School-Based Services
Parent Education and Family Support	Partnerships with Primary Medical Care
Foster Children and Youth	Wraparound Programs
Prodromal and Early Onset Psychosis	Diversion from Juvenile Justice System
Parents and Infants and their Pre-School Children	Preventing Suicide
Parents with Unaddressed Depression and Other Mental Disorders	Youth Development
Home-Based Services	<b>BULLYING</b>

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## Bullying: A Mental Health Priority

### Shared Risk Factors: Bullying and for Being Bullied

- Anxiety
- Depression
- ADHD
- Physical or Sexual Abuse

### Risk Factors for Bullying

- Conduct Disorder
- Oppositional Defiant Disorder
- Homes with Domestic Violence

### Risk Factors for Being Bullied

- Disabilities, including Mental Disorders
- Over-weight
- Poverty
- Lower Self-Esteem
- Interpersonal Difficulties, Social Inexperience



## Bullying: A Mental Health Priority

### Mental Health Consequences of Being Bullied: Long- and Short-term

- \*Depression
- \*Suicidality
- \*+Substance Abuse
- \*Reactive Aggression
- +Anxiety
- Post-traumatic Stress Disorder
- Dissociative symptoms
- Personality disorders
- Eating disorders
- Psychosomatic and physical health problems
- Sleep disorders
- Physical injury
- +Academic problems



\*Also a consequence of being a bully  
 +Also a consequence of being a bystander to bullying

## Bullying: A Mental Health Priority

### Most Serious Consequences from Bullying Associated with Bias and for Bully/Victims

#### Bully-Victims

- Depression, suicidal ideation and attempts, agoraphobia, panic disorder

#### LGBTQ Children and Youth

- Very high incidence of being bullied
- Elevated risk of suicide
- Grave difficulty functioning at school

#### Individuals with Disabilities

- High incidence of being bullied
- More severe forms of bullying

#### African American and Latino Youth

- Negative academic consequences



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## Bullying: A Mental Health Priority

### Interventions to Prevent Bullying

- Ecological: Climate and Culture
- School-Based; Whole School
- Social and Emotional Learning
- Power of Peers
- Community and family Involvement
- Addresses bias, racism, homophobia
- Includes focus on cyber-bullying
- Focus on protective as well as risk factors



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## Examples of Counties Addressing Bullying with MHSA Funds



\*Alpine  
Berkeley  
Butte  
El Dorado  
Fresno  
Humboldt  
Imperial  
\*Los Angeles

Merced  
Napa  
Orange  
Riverside  
\*Sacramento  
Santa Cruz  
Trinity  
\*Tuolumne  
Ventura

\*County has a program with primary focus on preventing bullying

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## MHSA Prevention Goals

Suicide  
Incarcerations  
School failure or drop out  
Unemployment  
Prolonged suffering  
Homelessness  
Removal of children from their homes



As a consequence of untreated mental illness

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## Acknowledgment

- **Dr. Saul Feldman:** One of the first 16 MHSOAC Commissioners and co-author of the original PEI Child-Family Paper. He believes passionately in the promise of the MHSA's prevention and early intervention component as a historic investment to prevent mental illness from becoming severe and disabling and to realize the potential of prompt identification and effective response.



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## MHSOAC Motion

The MHSOAC accepts the revised the PEI paper, now titled *Children, Youth, and Families: MHSOAC Prevention and Early Intervention Action Plan Priorities for the First Three Years*

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