

BEHEALTH.TODAY

County of Fresno Department of Behavioral Health

Final Report Social Policy Institute San Diego State University August 12, 2021



TAY HELPING TAY

Creating New Ideas to Innovate Behavioral Health

The Fresno County Department of Behavioral Health (DBH), in partnership with its richly diverse community, is dedicated to providing quality, culturally responsive behavioral health services to promote wellness, recovery, and resiliency for children, youth, individuals and families in the community. With Transition Aged Youth (TAY) in mind, DBH invited the San Diego State University Social Policy Institute to bring Human Centered Design to the county.

TAY BACKGROUND

Transition Aged Youth (TAY), 16 - 25 years old, are developmentally moving into young adulthood and facing a range of opportunities and challenges that position them to move beyond dependency to independence in some areas, and interdependence with peers, family, and the community. Positive behavioral health is vital to quality of life and the achievement of age-appropriate developmental milestones.

For some youth, the transition to adulthood presents exciting opportunities, while for others it brings a number of challenges in meeting their basic needs. Youth in transition may not be able to connect well with others, find employment that covers a minimum income and offers health benefits, find safe, affordable housing, etc. For youth leaving foster care or juvenile detention facilities, youth who have run away from home or dropped out of school, or youth with disabilities, the challenges can be even greater. Further, starting in 2020 with the onset of the global coronavirus pandemic, all youth began to face unprecedented challenges in the areas of loneliness and isolation, digital access, body image related to changes in movement patterns, academic challenges in a virtual environment, etc. Many of these issues are exacerbated by behavioral health challenges, and yet positive behavioral health can help buffer risk and create opportunities to thrive.

DESIGN FOR BEHAVIORAL HEALTH INNOVATION

BeHealth.Today, based on Human-Centered Design, also known as Design Thinking (HCDT), is a complete process from education to workshops to presenting a proposal that facilitates positive behavioral health for TAY. Design Thinking has become popularized by academic institutions like Stanford's D School, and innovation experts, like IDEO, to generate innovative solutions to improve current situations, including those impacting TAY.

Developed by SDSU Social Policy Institute and The Idea Guy™, BeHealth.Today™ provides the opportunity for participants to generate new approaches in the design and delivery of behavioral health services and supports. The project was to create meaningful community engagement of

Transition Age Youth (TAY) 16 - 25 years old. The approach was a "by TAY for TAY" to develop Innovation projects to improve opportunities for TAY wellbeing in Fresno County.

The BeHealth.Today approach is composed of cohorts of community participants coming together to learn about human-centered design, work through skills necessary to generate a good idea, and develop their proposals on innovating behavioral health. The process is complete when participants present their ideas in a formal presentation to an expert panel and their peers.



Such community-generated ideas create a bank for potential Innovation projects. Innovation projects are funded through a special component of the Mental Health Services Act (MHSA). Projects are submitted by the County to the MHSA Oversight and Accountability Commission for approval. The MHSA statute requires that Innovation projects have novel approaches to behavioral health issues, be time-limited and designed to answer research questions related to innovating and improving mental health.

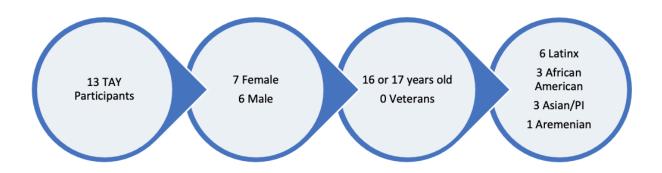
OUTREACH AND RECRUITMENT

The Design Team (SPI and The Idea Guy™) began with a list of potential ambassadors/partners identified by the Fresno Department of Behavioral Health (DBH) of key local stakeholders who already had existing relationships with diverse TAY populations. Then the Design Team actively recruited leaders through virtual presentations, flyers, and direct outreach in order to engage and register TAY participants. The Design Team believed this strategy of cultivating champions and engaging influencers would be most effective to inform, involve and inspire individuals to participate in the human centered design thinking process. Please see Appendix A for a listing of TAY allies, champions, and influencers.

In order to achieve diverse participation, the Design Team implemented an integrated marketing and communications platform for outreach, engagement, registration and completion of an initial project proposal. The foundation for communication was the website, which included all the information and functionality. The social media profiles on Facebook, Twitter and Instagram helped interject the program into social conversations. Email marketing reached out to people on lists compiled by the Design Team of potential ambassadors/partners. Links on the website,

social end user email led back to a process for multi-language registration supported by Eventbrite. Please see Appendix B for a snapshot of the marketing and outreach campaign.

The combined targeted recruitment resulted in a diverse representation of High School participants, who were English speaking TAY enrolled at Fresno Unified School District's Bullard and Hoover High Schools. Overall, there were thirteen (13) TAY participants, 7 of whom identified as female and the remainder identified as male. All were aged 16 or 17. Six participants were Latinx, three were African American, three were Asian/Pacific Islander, and one was Armenian. There were no veterans or active-duty military among them. See Appendix A, initials are used for confidentiality of minors.



While this was a robust cohort that in the end produced a remarkable proposal, it was hoped that even when outreach strategies were adapted in response to COVID, there would be additional cohorts participating. Additional analysis of this dynamic is presented in "Lessons Learned."

DESIGN PLANNING AND IMPLEMENTATION BY COLLABORATING PARTNERS

Collaborative Partnership/Learning Community

The Design Team established regular meetings as a working group, and also met (virtually) regularly with DBH to report progress, debrief project stages, and agree on immediate next steps. The Design Team was organized to align and maximize the complementary competencies, resources and networks of the partners with HCDT as well as designing/delivering behavioral health and community based human services. Each team member was committed to the goals and stretched outside the box of their "comfort zones" in developing and implementing the plan. This innovative collaboration helped to demonstrate how diverse participants can use HCDT to achieve a greater good even in the midst of a pandemic.

Adapting HCDT for Fresno TAY in a COVID Environment

The Idea Guy™ contributed a previously developed iteration of Human Centered Design (that remains proprietary) for the project. Its successful experience with diverse, cross-sector,

intergenerational populations heavily influenced the Human Centered Design for this DBH target audience.

Although the initial intention was to conduct activities in real time in Fresno County at venues known by and comfortable for TAY, the HCDT process was able to engage participants in a structured virtual workshop environment. The structured activities and resources in the four-hour workshop allowed participants to deepen, expand and revise initial ideas or issues that they had originally wanted to address. Materials and supplies normally distributed during on-site events were shipped to influencers for distribution to youth in sanitized, individualized packets.

PROJECT LOGISTICS

Platform: The Message and Vehicles for Dissemination

WordPress (a web-based tool), used for initial development of BeHealth. Today, worked well for adapting TAY-specific content that was easy to navigate. All technical requirements for ease of use and updating/managing the site by the Design Team were accomplished. Informal feedback from participants indicated they found the site to be engaging and informative. The social media selected (Facebook, Instagram, Twitter and LinkedIn) were well-suited for TAY target audiences.

In reflection, the Design Team would suggest investing in efforts to engage the intended audiences in advance through targeted social advertising and email marketing so messages would reach the maximum audience and generate interest.

Promotion: Spreading the Word

Key influencers were identified for personal connections with TAY and were open to leveraging their program distribution lists to reach a larger target audience. The key influencers suggested by DBH indicated interest in the needs of the TAY population, the HCD process and strong support for DBH's goals and purpose. Influencers were engaged as prominent and credible messengers for testimonials (see promotional videos by Kylene Hashimoto, Dr. Robert Pimentel and Dr. Tiffany White.

Allies and influencers who assisted with outreach had requested "talking points" and video/visuals to support their verbal outreach and to use as a reference for potential participants to refer back to. BeHealth.Today



handouts, brochures, consumer flyers and FAQs were informative, well received and very useful in our approach to outreach and engagement of diverse stakeholders. These materials were also posted on the website to encourage visits for more information and registration for

upcoming events. All printed material was created at 8th grade reading level to ensure comprehension by a wide TAY audience. It is noteworthy that social ads used content from previous events to target stakeholders that meet the key demographics (e.g., TAY, people with lived experience, DBH providers, Community-Based Organizations/Non-profits, advocates, etc.) whenever possible in hopes that TAY sees someone like him/herself which encourages empathy, understanding and raises awareness of behavioral health issues. Please see Appendix C for a full copy of the materials, including fliers, social ads and videos (See "Lessons Learned" for a discussion of the role of incentives for participants and for the potential ambassadors/partners as a social justice issue in promotion, as well as the unique impact of COVID on vulnerable Fresno communities.)

Event Administration/Logistics

Registration was conducted using EventBrite and the process functioned as designed for online registration. While the Design Team had translation services and material available, none were requested for this project.

Originally the first learning event was to be held at the Westside Youth Center but was cancelled due to COVID-related shelter-in-place statewide mandate. For any future events, locations selected should be easy to find and well known in the community, accessible to public transportation, have sufficient parking spaces, at little or no cost whenever possible.

Translation/Accommodations: Despite the diversity in Fresno, there were no requests made for language translation, nor for accommodations due to a disability.

IMPLEMENTATION

BeHealth. Today is a complete process, from education to workshops to a presentation of a proposal for consideration to the Fresno Department of Behavioral Health.

- A **Learning** event to provide an overview of the process and encourage participation.
- A **Workshop** to provide hands-on experience in HCDT and create an initial project proposal for generating new ideas.
- A **Project Development Phase & Coaching** to test the project and implementation plan as well as receive individualized coaching.
- A Presentation to an Expert Panel of the Design Team, key stakeholders and peers for feedback and evaluation.

Learning: A one-hour overview of the BeHealth experience.

This is an important event because it is the top of our marketing/engagement funnel – educating/encouraging people on the value of the project and their participation. The more TAY who attend, the greater number of TAY who are informed and potentially will register for the workshop. A Press Release was issued before the program start date to maximize attention and

"buzz" for the events. Livestreaming the learning event on Facebook would expose more people to the HCDT program and DBHS's goals. The video can also be converted into a social ad on Facebook to inform and engage intended audiences. Livestreaming the learning event on Facebook would expose more people to the HCDT program and DBHS's goals. The video can also be converted into a social ad on Facebook to inform and engage intended audiences.



Workshop: A four-hour event designed to generate new ideas, a project plan and concrete next steps to develop a successful proposal.

The Workshop was developed with a variety of approaches for understanding and experiencing the HCDT process. The workshop required four hours to fully execute. Initially, participants were surprised at the fast pace of the activities (3 - 4 minutes to complete a task), but by the middle of the workshop they readily moved at a faster pace. They see the value of many ideas and the diverse perspectives from the other participants. See Appendix D for the running order of the Workshop.

Development: Group work on participant's project plan, further development of ideas and prototypes, and testing to identify potential impact.

The TAY teams were encouraged to meet with a coach to prepare their projects. This provided an opportunity to assist in the project planning and offer feedback on the prototyping and the diversity of the proposed team. Coaches were available to help the team understand whether they have the right people involved to be successful.

For future HCDT projects, all teams must create an approved project management plan that identifies the sequence of activities. This allows the team to understand the path for successfully completing their proposed project. All teams should meet with their coach to review work on the steps of the process in the project plan with a go / no-go decision at key points. This would assist teams to execute the testing stage and any re-prototyping that's indicated within the allotted time.

Presentation: Delivery of participant's project (formatted to proposal guidelines) for consideration by an expert panel and peers.

The Design Team requested that teams submit all their materials in advance of presentation. Of the two teams that continued after the Work session, one demonstrated their readiness to make a presentation, having completed a narrative (script) and presentation (slides) on the templates that had been provided. The second team informed their Bullard faculty advisor it was proceeding with the project tasks and would make a presentation, but despite numerous requests never arranged consultation with the coach and did not make a presentation.

Both the Design Team and audience members not affiliated with the presenting team evaluated the proposed project. The audience members did not have previous experience with judging HCDT projects but were able to do so with a brief introduction to the respective rating elements. The audience ratings differed from the Design Team ratings. This was not unexpected and allowed additional insights into the desirability and community interest in a particular project.

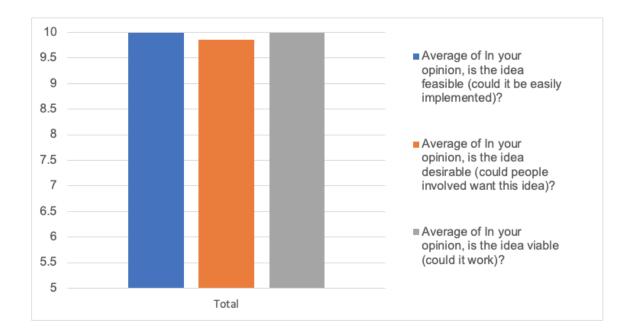
Results

Several promising project ideas emerged, but were presented in the Workshop only:

- 1. How might we help teenagers and adults understand suicide in order to talk about it and help suicidal people.
- 2. How might we help children and youth communicate more about the issue and provide sources to help them in order to improve children's mental health.
- 3. How might we help society identify behavioral disorders/problems in order to help spread awareness and point those in need in the direction of help.
- 4. How might we help the youth learn to manage adverse experiences to create better experiences with a positive mindset.
- 5. How might we help teens in high school easily access the correct treatment and recovery needed based on their needs to comfortably face and overcome their problems.

Proposal ideas developed into presentations

One project idea continued through development and presentation. The fifth idea, "How might we help teens in high school easily access the correct treatment and recovery needed based on their needs to comfortably face and overcome their problems" was ranked on metrics the Design Team deemed essential for success. See below for definitions and resulting rankings.



- Desirable the idea makes sense and is wanted by the consumers it is intended to serve
- Feasible the idea is doable; it could be implemented
- Viable the idea is fundable through potentially available resources

The full presentation may be viewed here on YouTube here: https://youtu.be/tku0Rd -Qy0.

NOTE: The BeHealth.Today team process and website assures that the community will continue to be a collaborative partner for the current, and future ideas, developed to be considered by Fresno DBH, MHS OAC, private funders and/or social entrepreneurs. Updates are regularly posted on the BeHealth.Today website at https://behealth.today.

For more information about MHSA and Innovation projects, visit http://mhsoac.gov.

BIG IDEAS/NEXT STEPS

Suggested Project to go Forward

Team 5 presented the ePoint Resource Locator with a review of the project plan and a live demonstration of the website available at https://epoint.today. Their presentation highlighted the project plan, the tasks completed as well as the expanded focus of the project as they gathered feedback during their outreach and prototyping. The team developed the ePoint Resource Locator website to help the Bullard community identify options for student social emotional support, access community-based resources and treatment programs to impact mental health and wellbeing. The team surveyed key stakeholders of students, parents, teachers and

counselors, developed a 10-item scorecard to rate local programs on location, access, quality, cost and availability for youth behavioral health needs/issues. The team also developed short videos explaining the rating for the programs to better inform their target audience youth and their families. In their conclusion, the team highlighted suggestions to further improve the website's functionality to be even more user friendly.

According to the feedback during the presentation as well as from the community stakeholders surveyed, there is a clear community need for Fresno TAY to have more information and access to meet behavioral health issues. Therefore, the team made a commitment to maintain the website during the summer months before they leave for college and hope it will be continued by other students in the Fall. The team successfully created an innovative behavioral health project by TAY for TAY. Given the quality of the project, the presentation evaluations and the closing comments by Fresno Unified staff and NAMI Fresno Executive Director, the BeHealth team encourages the Fresno DBH to consider funding this innovative TAY project.

Brief Description of Fresno TAY Experience and Recommendations for Next Steps

As part of our outreach and recruitment, BeHealth worked with several key Fresno stakeholders to help mitigate "being the outsider". Dr Tiffany White and her intern, Graciella Angeles, were initially helpful in connecting us with stakeholders and some possible non-traditional TAY groups that might be included. Kylene Hashimoto provided important background and current information on TAY issues and opportunities in Fresno. Both were enthusiastic supporters of the project and made testimonial videos to get out the word available on this YouTube playlist. Originally planned to be an in-person process, the first cohort was scheduled to be launched in April 2020 at the Westside Youth Center. The Covid 19 lockdown meant postponing this event. When it became apparent that Covid lockdown was indefinite, the BeHealth team in consultation with the DBH staff and local champions decided to present our human centered design model virtually in a zoom platform. The team was confident the sequence of activities could be delivered remotely as long as the participants had access to a computer and secure internet connection. The team believed that not only were TAY at home and spending their time on the internet, but that the human centered design process might be a "welcome change" from COVID restrictions and typical classes.

Over the summer in dialogue with Fresno Unified staff, the BeHealth team decided to wait until the Fall when school was in session to reduce the conflicts and uncertainty of the summer months. Initially key Fresno Unified staff included Darryl Du'chene and Tara Kaitfors, but once it was decided to engage Bullard and Hoover High School students, the Fresno staff team expanded to include: Troy Odell, Michele Mar, Ralph Vasquez and Celia Lopez. The Fresno Unified staff met at least once a month during the Fall of 2020 and bi-weekly during the 2021 to manage program issues and logistics.

The Idea Guy made weekly outreaches to the five teams via email, though only two teams led by V.S. and A.D., responded despite numerous requests through the end of March 2021. The project lead worked with the respective Fresno faculty to encourage and support all five teams.

Unfortunately, Spring Break and the re-opening of the school campus, in early April, made it difficult for the student teams to set meeting times and follow through on their prototyping and testing efforts. As one of the faculty pointed out, for the first time in almost a year, students are able to participate in all the regular outdoor sports teams and there is just too much demand to be with friends enjoying community activities. Further by the end of April, preparing for finals and the end of year High School prom made it even more difficult. The Presentation event was scheduled and rescheduled three times to try to accommodate these conflicts.

LESSONS LEARNED

- 1. Proof of concept was achieved that "BeHealth.Today can be implemented in a virtual platform exclusively, if and when social and health conditions warrant."
- 2. The impact of BeHealth.Today is anticipated to be magnified beyond the current scope of the project. Participating TAY are seeing the opportunity to use design thinking to help them evaluate next steps ahead for them; faculty and staff are using HCDT and bringing it into the classroom; TAY will have a deeper sense of civic engagement and learned leadership skills;
- 3. Maximize outreach by coordinating with a wide variety of agencies focused on youth and issues of interest to youth. Engage partners in thinking through, "How might we better coordinate and align the messaging?"
- 4. Consider a "by region" or "by neighborhood (or school district)" approach to maximize local impact and involvement.
- 5. Think through the age of Transition Age Youth (TAY) who are likely to engage. High school seniors are good candidates because they are looking forward. Tay who are out of school (graduated) are also likely candidates.
- 6. As a matter of social justice and equity, provide meaningful incentives for participation to youth and partner agencies.
- 7. Engage post-TAY youth to ask what they wish they would have had (as TAY) to help them be successful.
- 8. Coaching and accountability to a timeline are essential to the success of the program.
- 9. Flexibility is required to manage external constraints (i.e. the presentation date was changed three times due to unforeseen circumstances.)

APPENDICES

- A. TAY Allies, Champions, Influencers and Participants
- B. TAY Marketing and Outreach Campaign
- C. TAY Outreach Materials
- D. Event Overview / Agenda

Appendix A: TAY Allies and Influencers

Allies, Champions, Influencers

Johnny Garza	jgarza@chusd.org	Director of Student Services- Coalinga-Huron
		Unified School District
Cresencia Cruz	ccruz@faihp.org	Fresno American Indian Health Program
Coreen Campos	ccampos@uwfm.org	United Way of Fresno and Madera
Ashley Rojas	ashley_rojas@fresnobarriosunidos.org	ED Fresno Barrios Unidos
Kylene Hashimoto	kylene@thewildfireeffect.org	Behavioral Health Board TAY Member,
		OAC TAY Workgroup Member
Gleyra Castro	gcastro@fresnocountyca.gov	DBH Children's' Services Supervisor
Emily Vargas	evargas@tpocc.org	Program Manager.
		Turning Point-Rural Mental Health Services
Chris Roup	chris@namifresno.org	ED- NAMI Fresno
Malia Sherman	msherman@mail.fresnostate.edu	Director of Student Mental Health Services-Fresno State
Tiffany White	tiffwhite@fresnocountyca.gov	Adj. Prof. Juvenile Justice Campus-Fresno City College,
		BHS Diversity Officer
Yolanda Randles	yrandles@wfresnofrc.org	ED West Fresno Family Resource Center
Saul Salinas	SaulSalinas@cusd.com	Student Services Clovis Unified
Jason Williams	jasonwilliams@casafresno.org	Fresno CASA
Joanna Litchenberg	joannaz@focusforward.org	Focus Forward
Jennifer Cruz	Jennifer.Cruz@fresnoeoc.org	Fresno EOC LGBTQ Center
Dino Perez	dperezwsy@gmail.com	Westside Youth Center
Martin Macias	mmacias@gpusd.org	Superintendent Golden Plains Unified School District
Jojo Reyes	jojoreyes@mendotaschools.org	Director of Student Services-Mendota Unified
Dr. Janelle Pitt	jepitt@mail.fresnostate.edu	Professor, Fresno State
Dr. Malia Sherman	msherman@mail.fresnostate.edu	Director, Student Mental Health Services Fresno State
Jen Cruz	Jennifer.Cruz@fresnoeoc.org	Fresno EOC LGBTQ Center
Darryl Du'chene	Darryl.Du'chene@fresnounified.org	Project Manager, Dept of Prevention & Intervention
Dr Robert Pimenthel	robert.pimentel@fresnocitycollege.edu	VP Educational Services
Tara Kaitfors	Tara.Kaitfors@fresnounified.org	Coordinator College and Career Readiness
Troy Odell	Troy.Odell@fresnounified.org	Supervisor
Michelle Mar	Michelle.Mar@fresnounified.org	Supervisor
Celia Lopez	Celia.Lopez1@fresnounified.org	Faculty, Bullard HS
Ralph Vasquez	Ralph.Vasquez@fresnounified.org	Faculty, Bullard HS

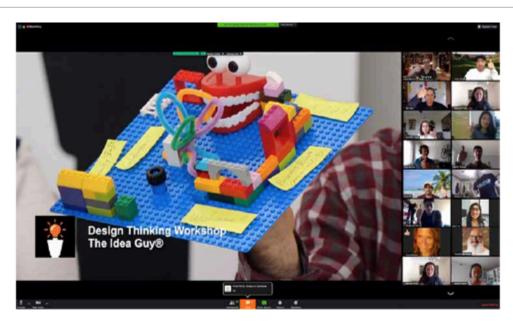
Participants

ID	Name	Gender	Age	Ethnicity/Race
3	C.M.	Female	16	Hispanic/Latino
9	T.P.	Female	17	Native Hawaiian or Other Pacific Islander
5	E.S.	Female	16	Hispanic/Latino
6	N.H.	Female	16	Hispanic/Latino
1	A.G.	Male	17	Hispanic/Latino
4	D.A.	Male	16	African American
10	V.S.	Male	17	Armenian
7	J.N.	Female	17	Asian American
8	R.C.	Male	17	Hispanic/Latino
2	A.D.	Female	17	Hispanic/Latino
11	M.R.	Male	17	African American
12	B.G.	Male	17	African American
13	K.V.	Female	16	Asian Hmong

Appendix B: TAY Marketing and Outreach Campaign

Item	Date	Description
Website	4/20/2020	BeHealth™ Fresno Events Posted
Social Media	4/28/2020	BeHealth LEARN Event
Social Media	5/20/2020	BeHealth™ Fresno Ad Campaign
Video	5/20/2020	BeHealth™ Hello Fresno
Social Media	5/22/2020	BeHealth™ Fresno : Tiffany White
Event	5/27/2020	BeHealth LEARN
Social Media	5/28/2020	BeHealth™ Fresno : Kylene Hashimoto
Video	5/29/2020	BeHealth™ Fresno : Robert Pimentel
Social Media	5/29/2020	BeHealth™ Fresno : Robert Pimentel
Video	5/29/2020	BeHealth™ Fresno : Kylene Hashimoto
Social Media	5/29/2020	BeHealth™ Fresno : Kylene Hashimoto
Video	5/29/2020	BeHealth™ Fresno : Tiffany White
Social Media	5/31/2020	BeHealth™ Fresno : Robert Pimentel
Social Media	6/2/2020	BeHealth™ Fresno Advertisement
Social Media	6/2/2020	BeHealth™ Fresno Advertisement
Event	6/4/2020	BeHealth LEARN
Social Media	6/10/2020	BeHealth™ Fresno Advertisement
Social Media	6/18/2020	BeHealth™ Fresno Advertisement
Social Media	12/8/2020	BeHealth™ Fresno : WORK Advertisement
Event	1/23/2021	BeHealth WORK

Social Media	1/26/2021	BeHealth™ Fresno : WORK Promo
Event	6/6/2021 6/6/2021 6-6-2021	BeHealth PRESENT ePoint Review: Discovery Mood & Anxiety Program ePoint Review: Alpha Behavioral Counseling Center
Website	6/21/2021	BeHealth™ Fresno : ePoint added to Big Ideas



New ideas for the new normal.

@BeHealth.Today helps transition age youth in #Fresno to create new ideas that impact their #health and #wellness.

Growing up is hard, and doing by yourself is evenharder. It's a whole new world with the Coronavirus and the changes that are coming, but don't worry. We're going to help you learn a way to figure it out with you.

In partnership with Fresno County Department of Behavioral Health, and other organizations in the community, BeHealth provides really

great instructors, coaches and mentors that can teach you a step-by-step process for creating new ideas that help you in your future - whatever you choose to do.

ATTEND AN ONLINE WORKSHOP I A fourhour workshop designed to generate new ideas, a project plan and next steps for development.

- · Join with a team, partner or work solo
- · Learn a process for creating new ideas
- Create a new idea to improve your world or one that helps others.



Register for BeHealth™ | WORK

Thursday, June 18th @ 10:00am http://BeHealth.Today/events









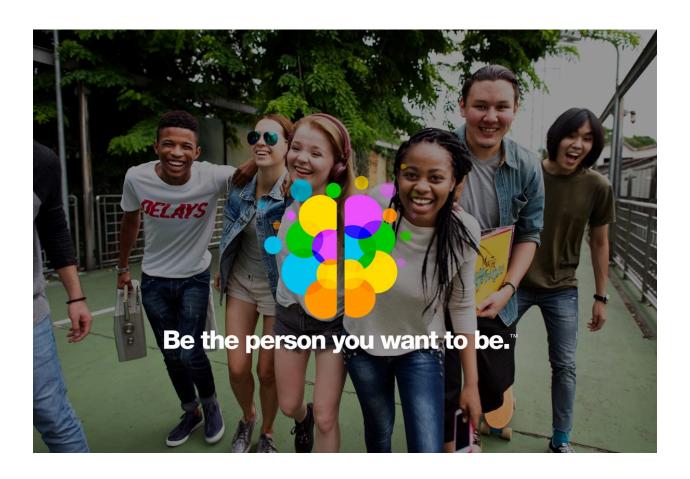












Appendix D: Event Overview / Agenda

- BeHealth™ LEARN Agenda
- BeHealth™ WORK Presentation
- BeHealth™ PRESENT Agenda