Macfarlane, Dawn

From:

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Sent:

Friday, January 31, 2020 3:08 AM

To:

Doyle, Elizabeth Macfarlane, Dawn

Cc: Subject:

some notes, since I can't make the Feb. 3 meeting

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Hi Elizabeth,

I just put in writing some thoughts after the last meeting. Hope all comes together well at the Feb. 3 meeting.

Dear fellow members of the Mental Health Subcommittee,

I won't make it back for our final meeting so thought to put a couple of thoughts forward regarding grant criteria setting.

- I think it would make sense to ask each of the grant recipients to find a way to show how their grant has benefited people. They could choose how to do this in whatever way they might choose, for example, a video of a consumer or two talking about the way the grant has benefited them, or through data, or whatever way the grant recipient choses. (I really like, however the idea of their sharing the "voices" of those who have benefited in a personal way.) I suggest this for two reasons, first, that we use this chance to explore what really does and doesn't work. Second, since this is a one year grant any future funding could be encouraged by having this documentation.
- 1. Prioritize the grants which effectively/efficiently meet the specific needs of specific groups who were identified. For example, LGBTQ+ youth & adults; immigrants; those with AOD & Mental Health needs who previously would have been sent to jail or juvenile detention as the only way to be in a secure place.
- I have a concern that although I love the idea of meeting the needs of LGBTQ+ students (along with other students with high MH/AOD needs) at community centers I am not certain that these youth currently use these services or necessarily feel safe there. Perhaps initially it would make more sense, for the purpose of these grants to make available trusted providers who could meet youth at places where the youth currently are obtaining (the few) services, e.g. Briarpatch, meetings of the TransParent Group, etc. This would be with an eye toward deciding whether LGBTQ+ youth might need a designated youth center.

I think the same seems true for providing services for immigrant services. Here as well, the trust factor must be paramount. Accordingly, this must be accompanied by early affordable long term coordination, including for housing, job training and education.

- 3) I believe that training will be a big need as a priority. By providing (maybe even requiring?) training in some areas for those who are currently meeting the needs of our populations we can increase the reach of the grant resources. (For example, law enforcement training).
- 4) The need for 23 hour observation beds as a way out of sending people in mental health/& or AOD crisis to jail is really important. Establishing a humane effective way to set this up is an obvious priority.
- 5) In general efficiency and potential effectiveness should guide the granting. As an example, the low expense fo providing AOD/ mental health support groups for older Trans/Non-binary people argues for doing it.
- 6) Of course, following effective strategies also would be important. For example, those providing testimony listed peer support again and again as a powerful tool.

Liz Lusk