

COUNTY SNAPSHOT – HUMBOLDT COUNTY

CONTACTS

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Primary/Behavioral Health Care Integration:

N/A

Student Mental Health Contact:

N/A

OVERVIEW

Method of Data Collection Utilized: In-Person Interview November 8, 2011

Humboldt County is located on the Northern California coast, 200 miles north of San Francisco. Its primary population centers are Eureka, the county seat, and the smaller college town of Arcata, home to Humboldt State University. Both cities are located adjacent to Humboldt Bay, California's second largest natural bay. Humboldt County has eight Indian reservations within its borders including the Hoopa Valley Indian Reservation, which is the largest in the state of California.¹

The 2010 U.S. Census reported a population of 134,623. The racial makeup is 81.7% White, 1.1% African American, 5.7% American Indian or Alaska Native, 2.2% Asian, 0.3% Native Hawaiian or other Pacific Islander, 5.3% reporting two or more races, 9.8% Hispanic or Latino origin, and 76.8% White persons not Hispanic.²

Humboldt County residents tend to be either very community oriented or very isolated. Some have moved there in search of isolation, making it extremely difficult to reach people in need of mental health services.

Humboldt County Health and Human Services is an integrated branch that handles mental health, public health and public/social services. Behavioral health issues (e.g., drugs, alcohol, etc.) are handled by this branch as well. Suicide Prevention Programming efforts are coordinated primarily through the Public Health Branch, Health Education Division, as is Stigma and Discrimination Programming. The transition age youth (TAY) component of PEI is coordinated through the Social Services and Mental Health branches. There are roughly 2.70 FTE's (less than 3 full-time positions) spread out between 4 employees

¹ Wikipedia: http://en.wikipedia.org/wiki/Humboldt_County,_California

² U.S. Census Bureau: <http://quickfacts.census.gov/qfd/states/06/06023.html>

in the Public Health PEI programs. (Humboldt County has provided extensive documentation of their marketing and outreach efforts included in the Appendix HC1.)

Strengths: Passion for the subject matter, strong youth participation, advocacy for LGBTQ and Hispanic communities, targeting diverse populations, successful community group efforts. The state university and the local community college are also positive symbols in the county and are open to collaboration.

Challenges: The need to build system capacity and readiness to effectively respond to the probable increase in need for services due to increased community awareness through QPR gatekeeper training; how to balance suicide prevention messages with the need to build capacity; isolation within certain ethnic groups and demographics; reaching survivors of suicide; high alcohol abuse; high accessibility to drugs (illegal and prescription); high gun ownership; resistance to mental illness discussions; strong distrust of government (particularly in the Native American communities); language (particularly Spanish) and physical barriers (such as far distances between towns, harsh elements, lack of racial and cultural diversity in the workforce where the workforce does not necessarily match the community, particularly within the Latino community)

Government Advocacy: No active advocacy initiatives; supportive political environment

Centralized Website(s): www.co.humboldt.ca.us/hhs/

Resource Directory: <http://co.humboldt.ca.us/hhs/mhb/>

Social Media Presence: NO—There are county guidelines against it, but there is a Humboldt County Transition Age Youth Collaboration (HCTAYC) Facebook page.

CURRENT PEI MARKETING CAMPAIGNS

Student Mental Health Initiative: NO

Stigma & Discrimination Reduction: YES **Start Date:** 2009 **End Date:** Ongoing

Target Audience: Universal: general public ages 15 and over

Targeted may include: transition age youth, adults and older adults at risk for experiencing mental health challenges, including unserved and underserved communities; adults and older adults at risk for experiencing stigma and/or discrimination; service providers and other key groups who have power over people who experience mental health challenges

Selective: People experiencing mental health challenges, including experiences of stigma and discrimination and their family members

Marketing Strategy: Buses, newspapers, events, community outreach, hosted poster design contest for use on messaging items (e.g., hoodies, totes; see Appendix HC1 for additional details)

Suicide Prevention: YES **Start Date:** 2009 **End Date:** Ongoing

Target Audience: DHHS workforce, community providers and general public

Marketing Strategy: Newspaper articles, announcements, press releases, PSAs, flyers, brochures, local resource cards, radio interviews, media insert, resource flyers for specific groups/populations, interactive message boards at outreach events, quilting activities at survivor and suicide-prevention events

Other County Activities and Programs:

	Walks/Run	Events	Speaker's Bureau	Media Praise/Protest	Outreach	Trainings (e.g., ASIST or QPR)	Specific Events during Suicide or MH Awareness Week/Month	Other
Suicide Prevention	X	X	X	X	X	X	X	X
Stigma Reduction	X	X	X	X	X	X	X	X

CURRENT PEI OUTREACH EFFORTS

Suicide Prevention: QPR and ASIST training to enhance intervention skills; county works closely with mental health services on issues related to suicide prevention

Stigma Reduction: In 2009 Humboldt County introduced a contest for community members to create a design for a stigma reduction campaign. This contest, now hosted annually, is designed to promote education and awareness and to speak to resiliency and wellness. The winning concept for 2010 was “Everyone has an issue; treat us ALL with respect.” Due to limited funding these designs cannot be guaranteed to have the same level of placement or coverage from year to year, however, the routine sight of branded marketing content (e.g., hoodies, totes, etc.) within the local community suggests that this contest has and continues to have an impact in reaching the target audience. See attached Appendix HC1 for additional information.

In addition to the poster contest, Humboldt County also hosts an art show featuring other poster design entries as well as quilts and other artwork created at the local drop-in center for prevention and early intervention (PEI) mental health. One quilt, featuring a stigma reduction design, was subsequently entered into an art show at the 2011 County Fair and won a prize.

There are multiple initiatives targeting TAY.

See attached Appendix HC1 for additional information.

COUNTY CRISIS NUMBERS AND RESOURCES

Suicide Crisis Hotline: NO

Mental Health Crisis Hotline: Humboldt County Mental Health Crisis Line 707.445.7715
Youth Service Bureau (YSB) 24-hour crisis line 707.444.2273

Other Resources: NONE

DIGITAL STORIES

Humboldt County is preparing to host a local digital stories workshop in the near future. Videos will have SP and SDR components. In addition, the Transition Age Youth Collaboration (<http://humboldtyouth.org/>) has created 30 digital stories by local youth through the Center for Digital Storytelling in Berkeley, CA. The SDR Program has collaborated by utilizing these digital stories in trainings, especially those targeting youth or youth-serving organizations.

HEALTHCARE PROVIDERS

Healthcare providers are difficult to reach. Using a peer approach seems to be most effective. Office managers may be another important link to developing protocols, procedures and supports for patients identified as at risk for suicide. Building infrastructure is essential especially around working across systems and disciplines. This would help facilitate referrals and follow-up. Potential contacts include: Maternal, Child, and Adolescent Health (MCAH); LED program; in-home support services; The Office Managers Club; United Indian Health Services; St. Joseph Health System–Humboldt County (SJHS-HC); Humboldt Independent Practice Association (IPA); mental health professionals; North Coast Clinics Network.

ADDITIONAL INFORMATION

See attached Appendix HC1 for additional information.

SPECIFIC COUNTY NEEDS

Humboldt County is especially interested in the following. 1) Developing messages that encourage help-seeking behaviors, reduce stigma around mental health and support individual and community strengths. 2) Developing a coordinated community response to suicide prevention on multiple levels using universal and specific population-based approaches. 3) Developing sustainability through engaging the broader community to participate in SP & SDR. 4) Continued development of a speaker’s bureau, including empowerment training resources for consumers and broad dissemination of its messages. At present, concerns range from a lack of trained/qualified speakers to the lack of a “vetted” content base of approved topics with specific messaging techniques. Humboldt County would also like training to enhance its evaluation techniques and has requested a toolkit with additional outreach materials.

Additional Language Needs: Spanish, Hmong

Desired Outreach Materials:

TV Spots	Radio Spots	Printed Materials	Print Ads ^a	Billboard Ads	Bus Ads	Outreach Materials	Social Media	Website	Trainings	“How to” Manuals ^b
X	X	X	X	X	X	X		X	X	X

^a E.g., magazines.

^b E.g., how to reach out to the media, how to start a speaker’s bureau, etc.

Additional information: Specific needs include public relations and social media training, as well as “safe messaging” training to avoid inadvertent sensationalizing.

Toolkits and templates covering institutional policies would be of great help, as well as “how to” manuals on addressing topics such as restriction of lethal means and how to create cards for use by first responders both for assessing risk and for survivors of suicide that list common responses, next steps and supports.

Humboldt County takes the lifespan approach and, thus, desires resources for both individual groups (narrowcasting) and for the community as a whole.