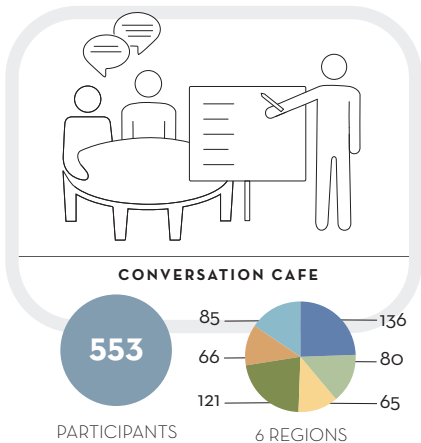
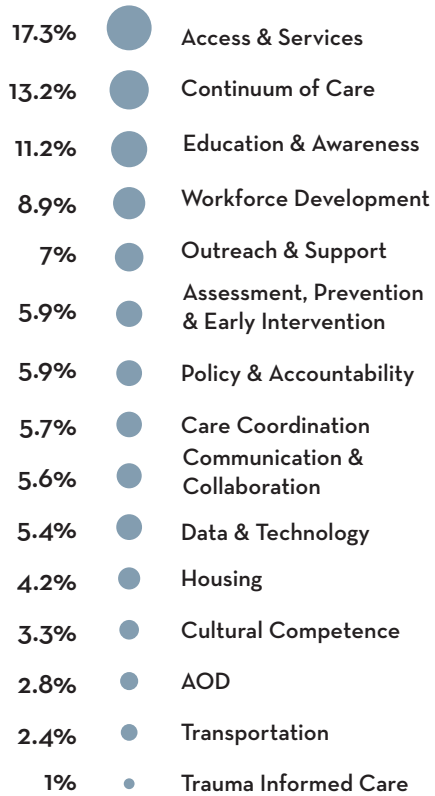
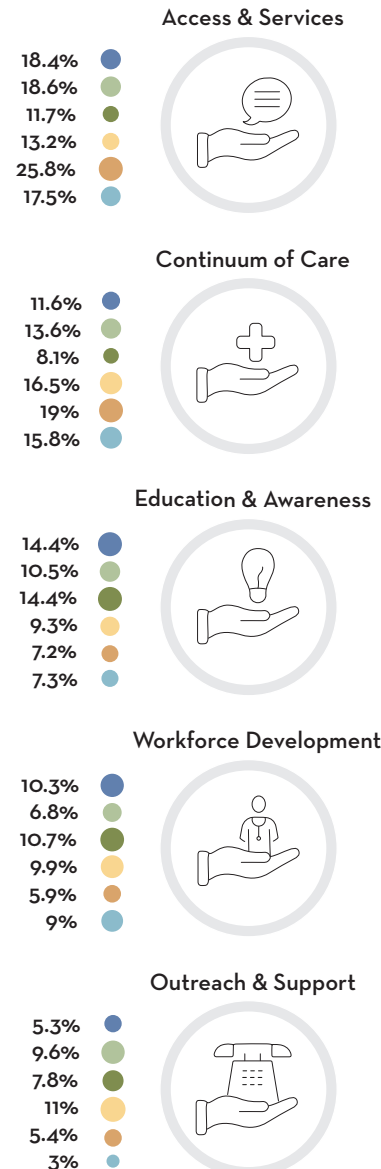


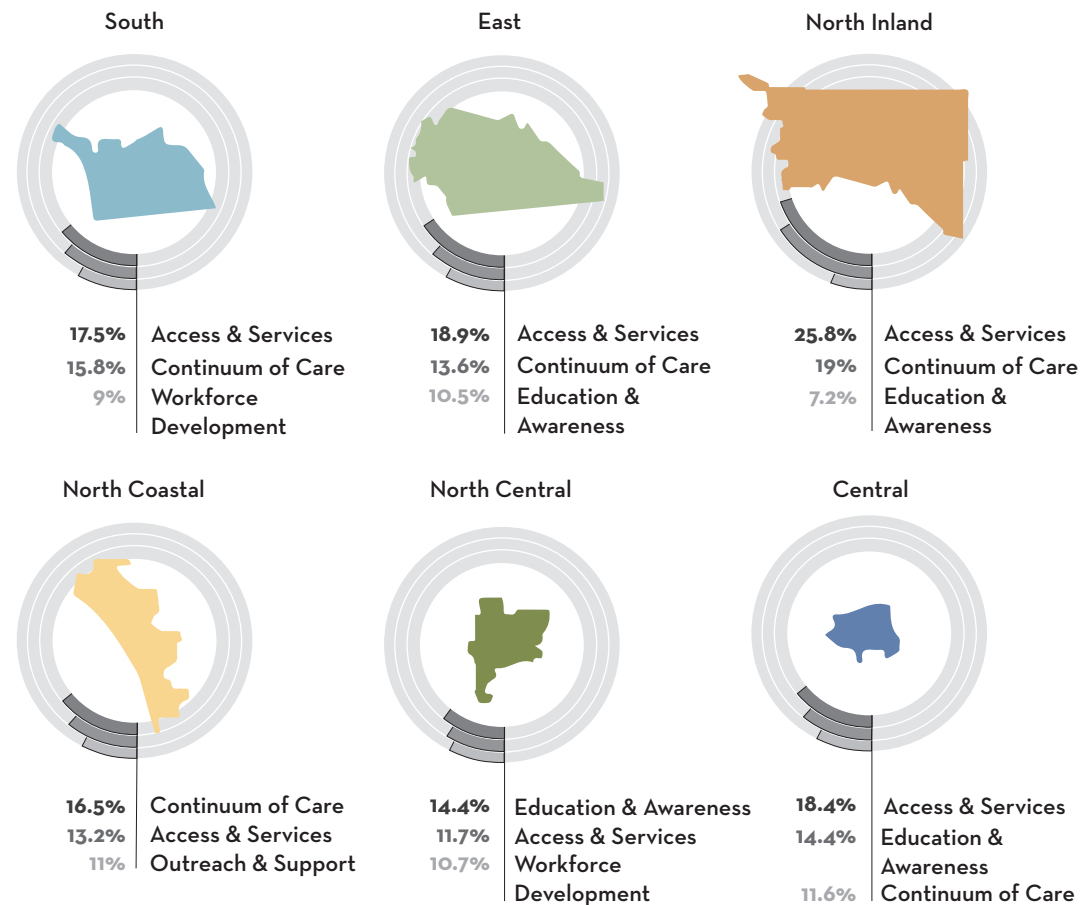
## Countywide Essential Themes



## Essential Themes Across Regions



## Top 3 Essential Themes by Region

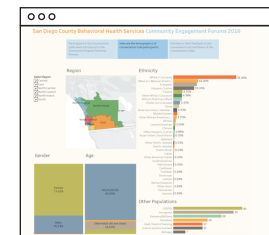


Percentages reflect the number of responses out of the total for each region.

## Community Engagement Forums

The San Diego County division of Behavioral Health Services conducted 12 Community Engagement Forums, which drew 553 total participants throughout the 6 HHSA county regions. Based on the World Cafe method, the forums engaged the community in conversations about how to optimize behavioral health services for the unserved and underserved, children, and those needing care coordination. Key points of these conversations were noted on participants' tabletops, harvested in a graphical recording, and categorized by essential themes.

For more details please visit the BHS Community Engagement Data Story at:



hoffmanclark.org



## ESSENTIAL THEMES

Comments from all twelve Community Engagement Forums were collected both through an overall graphic recording of each forum and from the tabletops of each topic area at every forum. This data was entered into qualitative analysis software, revealing clusters of frequently recurring concepts that formed the basis for the fifteen 'Essential Themes' into which all data was coded. **All of these areas are important, as each was informed by a significant number of comments.** The percentage of comments within each theme shows its proportional relation to others, which helps to identify differences in emphasis across regions and topic areas.

**Access & Services:** Comments envisioning improved access to, and expansion of programs and services, as well as suggestions such as more mobile, in-home, and school-based services.

**AOD:** Specifically comments pertaining to alcohol and drug treatment programs and services, AOD education and awareness, and the integration of AOD and Mental Health services.

**Assessment, Prevention & Early Intervention:** Comments calling for earlier assessment and the development and expansion of preventative education and intervention programs.

**Care Coordination:** Specifically comments pertaining to the coordination of mental and physical health, transitions between inpatient and outpatient care, and re-entry from the justice system.

**Communication & Collaboration:** Comments calling for better communication and collaboration between clinics, providers, schools, parents, the county, law enforcement, and community organizations.

**Continuum of Care:** Comments suggesting better coordination and integration of services and improved case management to close gaps and to help clients navigate the system.

**Cultural Competence:** Comments calling for more cultural awareness, education, training, and language proficiency to help serve diverse populations.

**Data & Technology:** Both comments expressing a need for a centralized, integrated, and accessible database to facilitate communication and coordination, and comments suggesting the use of technologies for education, outreach, and service provision.

**Housing:** Comments envisioning more temporary, transitional, emergency, long-term, and full service housing, and also suggestions for alternative housing solutions.

**Outreach & Support:** Comments calling either for community outreach campaigns and events to meet people where they are, expand awareness, and build trust, or for the development of more peer support groups, programs, and services.

**Policy & Accountability:** Specific to comments about changing requirements, laws, or policies to make access easier, or comments calling for better assessment of programs and providers.

**Education & Awareness:** Comments suggesting better education for teachers, families, students, and communities to increase awareness of behavioral health issues and indicators, to destigmatize these issues, and to teach skills for dealing with them.

**Transportation:** Mostly comments calling for transportation services to help clients access services.

**Trauma Informed Care:** Comments that specifically mention the need for treatment to be sensitive to traumatized clients, or call for education and training in this area.

**Workforce Development:** Comments envisioning an improved and expanded behavioral health workforce and suggesting increased recruitment, salaries, incentives, and training, and reduced caseloads, to facilitate staff retention, better service provision, and improved case management.