



# CA START SAN ANDREAS: START SERVICES & CRISIS SUPPORT FOR YOUR KIDS

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# THE BREAKDOWN

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Part 1:

What START is

Part 2:

Prevention through  
positive psychology

Part 3:

Real-time  
behavioral support

Part 4:

Preventing future  
crises

# WHAT DOES START DO?

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Systemic Therapeutic Assessment Resources  
Treatment  
for individuals diagnosed with IDD + mental health  
diagnoses

Supports the development of  
individualized crisis prevention and  
intervention plans

Strengthens connections and  
collaboration among "system  
members"

Provides psychoeducation via  
community trainings, individualized  
trainings among "system members,"  
and case consultations with the START  
Medical Director

# BIO-PSYCHO-SOCIAL APPROACH

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Interconnection between biology, psychology and social-environmental factors

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Takes into account how those factors may contribute to a person experiencing a crisis

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Provides a whole person understanding of their history and life experiences

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Provides context to explain why a trigger is a trigger for that person

# POSITIVE PSYCHOLOGY

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- Enhancing well-being and functioning through a **strengths-based approach**
  - Increasing positive feelings, cognitions, or behaviors
- Research on positive psychology and a strengths-based approach revealed that **some strengths serve as "buffers"** for mental illness and related concerns:
  - Courage, future-mindedness, optimism, hope, faith, work ethic, honesty, & perseverance...and for serious medical conditions:
  - Improved cardiovascular health, increased vitality, improved immune system, longevity
- Some of the basic practices of positive psychology:
  - Practice gratitude, focus on what is going well and expand on that, & prioritize positive experiences and engagement
  - Reframing is an effective way to embody each of those practices!

# REFRAMING: WHY?

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- Reframing helps to **decrease negative feelings**
  - Negative thoughts lead to negative feelings/emotions
- Reframing helps you **seek out strengths** instead of focusing on deficits
  - This can help you to engage with the person in a way that highlights their strengths, which in turn increases the chances they will engage in more positive behaviors, have more positive interactions
- Reframing increases your ability to **feel hope** and to persevere
  - These are two of the primary strengths associated with positive psychology

# REFRAMING: HOW?

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- Stop negative thoughts, especially intrusive thoughts
  - Replace those thoughts with **positive thoughts**, memories, distractions
- Put things into perspective
  - **Focus on the bigger picture** – how much of your life will you allow to be impacted by this negative experience? What positives have you experienced?
- Allow mistakes
  - **Forgive** yourself for your own
  - Forgive others for theirs

# REFRAMING: HOW?

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Do not engage in all-or-nothing thinking

- Find comfort in the unknown/hold space for the "gray area" in life

Assume positive intention

- Imagine the best intention – envision what you would like to see

Consider reasons for a negative experience that *do not have to do with you*

- It is *much* easier to reframe when the experience is not/does not feel personal



# VIA CHARACTER STRENGTHS

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## VIA Classification of Character Strengths



# OVER- AND UNDER-USE OF STRENGTHS

	Strength	Opposite	Absence	Excess
<b>Wisdom and Knowledge</b>	creativity	triteness	conformity	eccentricity
	curiosity	boredom	disinterest	nosiness
	judgment	gullibility	ineffectiveness	cynicism
	love of learning	orthodoxy	complacency	"know-it-all"-ism
	perspective	foolishness	shallowness	ivory tower
<b>Courage</b>	bravery	cowardice	fright	foolhardiness
	persistence	helplessness	laziness	obsessiveness
	authenticity	deceit	phoniness	righteousness
	vitality	lifelessness	restraint	hyperactivity
<b>Love</b>	intimacy	loneliness	isolation/autism	emotional promiscuity
	kindness	cruelty	indifference	intrusiveness
	social intelligence	self-deception	obtuseness	psychobabbling
<b>Justice</b>	citizenship	narcissism	selfishness	chauvinism
	fairness	prejudice	partisanship	detachment
	leadership	sabotage	compliance	despotism
<b>Temperance</b>	forgiveness	vengefulness	mercilessness	permissiveness
	humility	arrogance	footless self-esteem	self-deprecation
	prudence	recklessness	sensation-seeking	prudishness
	self-regulation	impulsivity	self-indulgence	inhibition
<b>Transcendence</b>	awe	criticism	oblivion	snobbery
	gratitude	entitlement	rudeness	ingratiation
	hope	despair	present orientation	Pollyannaism
	humor	dourness	humorlessness	buffoonery
	spirituality	alienation	anomie	fanaticism

# PROBLEM BEHAVIOR VS OVER/UNDER-USE OF STRENGTHS

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when someone overuses their strength of **bravery/courage**, they may present as "giving little thought to danger"

*Example: running into the street while cars are near*

when someone overuses their strength of **perseverance/courage**, they may present as "obsessive"

*Example: asking for a desired item repeatedly, leading to agitation*

underuses their strength of **curiosity/wisdom and knowledge**, they may present as

*Example: it is difficult to find ways to engage this person; lack of engagement typically leads to agitation*

when someone underuses their strength of **prudence/temperance**, they may present as "sensational cooking"

*Examples: running, jumping, hitting, turning the lights on and off, even yelling!*

# WHAT IS A CRISIS?

According to NAMI: "A mental health crisis is any situation in which a **person's behavior** puts them at risk of hurting themselves or others and/or prevents them from being able to **care for themselves** or function effectively in the community"

## Prevalence of Mental Illness in the United States

- ◆ **1 in 5 adults—43.8 million or 18.5%**—experiences mental illness in a given year
- ◆ Among the **20.2 million adults** who experienced a substance use condition, **50.5% (10.2 million adults)** had a co-occurring mental illness
- ◆ **1 in 5 youth aged 13-18 (21.4%)** experiences a severe mental health condition at some point during their life; for children aged 8-15 that estimate is 13%
- ◆ **46% of homeless adults** staying in shelters have a mental illness and/or substance use disorder
- ◆ **20% of state prisoners** and **21% of local jail prisoners** have a recent history of a mental health condition
- ◆ **70% of youth in juvenile justice systems** have at least one mental health condition
- ◆ **60% of all adults** and almost **50% of all youth ages 8-15** with a mental illness received no mental health services in the previous year
- ◆ **African-Americans and Hispanic-Americans** used mental health services at about half the rate of Caucasian-Americans in the past year and Asian Americans at about 1/3 the rate
- ◆ **50% of adults with mental illness** report experiencing symptoms prior to the age of 14; **75%** prior to the age of 24

Source: National Institute of Mental Health [www.nimh.nih.gov](http://www.nimh.nih.gov)

# TYPES OF CRISIS SUPPORT

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Preventing a crisis in the first place:

- Use of positive psychology
- Engagement in PERMA

Preventing a crisis from occurring *again*:

- Establishing a follow up plan
- Identifying how to follow up in a way that doesn't become a triggering event

Intervening During a Crisis (De-Escalation Strategies):

- When to respond
- How to respond to a crisis

# SAFETY FACTORS DURING A CRISIS

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## *ASSESS FOR:*

- Are there current threats to physical safety?
- Who is present and where are they located?
- How can I increase physical safety in this moment?
  - Remove easily thrown items, create physical space away from the person in crisis, known emergency contact phone numbers

## *ASK YOURSELF:*

- What is needed in this moment to help this person de-escalate?
- What calming activities does this person enjoy?
  - Pick 1-2, do not overwhelm the person with too many options

# "DON'Ts" OF CRISIS RESPONSE

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- Do not sit down or back yourself into a corner or tight space
- Do not turn your back to the individual in crisis
- Do not take a defensive stance if it is not needed
  - *This could be interpreted as aggressive or threatening by the person in crisis*
- Do not over-stimulate the person in crisis
  - *Think about what may be stimulating in the environment*

# "DOs" OF CRISIS RESPONSE

*People typically become aggressive because others are not evacuating their space.  
If someone asks for space (with words or gestures), **provide space** immediately*

## Give yourself room to move

- If aggression is directly towards you, back away slowly and be prepared to put your hands up
- If you need to move away, pivot your body and walk away at an angle to maintain visibility

## Always consider calming activities:

- Fidgets
- Sensory items
- Coping skills to model
- *Anything to change the person's level of stimulation*



# REDUCING THE CHANCES OF OVER-STIMULATION

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## Modify how you behave:

- Lower the volume and slow the pace of your speech
- Use fewer words, reduced demands/instructions
- Give *more* time than usual for the person to process and respond to you/others
- Give the person more physical space than usual

## Modify the environment:

- Turn down/off lights
  - *Consider if there are calming lights you can turn on that they do find to be calming in a crisis situation*
- Turn down/off volume on TV, music, etc.
  - *Consider if there are calming videos that they find to be calming*
- Have anyone else present sit down, decrease movement

# LEAD WITH PATIENCE

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- Consider how the person knows that you are calm and safe
  - *How can you express those cues for them during a crisis situation?*
- Model use of coping skills/de-escalation techniques:
  - ✓ Take visible deep breaths
  - ✓ Engage in sensory activities
    - Squeezing own hands, giving self a tight hug, tap your fingers and/or toes, hold squishy items, etc.
  - ✓ Don't ask the person in crisis to join you while they are still elevated
    - *Do not create unnecessary conflict/requests by asking them to join you, but continue to model for them so they are reminded of their options*
    - *This also normalizes the use of coping skills, helps them feel like it's ok to try*

# CHECK IN WITH YOURSELF

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Consider your own experience and needs:

- What is your emotional state? Are you expressing an elevated mood?
  - *Consider cues the person in crisis might pick up on and be sensitive to*
- What do you need to feel safe and calm?
- Who can you reach out to for increased support during a crisis?
- How can you reconnect with the person after the crisis is over?
  - Do you need time and space to yourself?
    - *If so, how can you do so while ensuring continued safety?*
  - Are you able to engage in an enjoyable activity with the person once they are calm?
    - *If so, have a list of enjoyable activities you can suggest*

# WHEN TO CALL FOR MORE CRISIS SUPPORT

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## *HOSPITAL*

To assess for any medical support needs:

- If there is significant self-injury
- If the person was put in a physical restraint or had any other form of physical contact during a crisis

Consider the *ESSENTIAL* information to share:

- Diagnoses, current medication list, conservatorship status
- Any specific calming techniques the person in crisis typically enjoys

## *POLICE*

- If the person in crisis leaves a controlled environment and goes into an unsafe/uncontrolled environment (e.g., mall, street, etc.)
- If person in crisis is out of your line of sight
- Consider what to say, what to share about the person/situation, and what to request in terms of their support
  - Example: do not use sirens or lights when approaching the location of the crisis

# FOLLOW UP PLANNING

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- Consider how you will know when the environment/situation has stabilized
- Consider factors that will increase chances of ongoing safety and stability
- Consider factors that may have contributed to the crisis event
  - *Biological factors*
  - *Psychological factors*
  - *Social factors*

# USING A STRENGTHS-BASED APPROACH, PREVENTATIVELY

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## EMBODY CHARACTER STRENGTH:

- be an active role model for character strengths

## EDUCATE ON STRENGTHS:

- talk about strengths; offer to explore use of character strengths in the work you do; do not dismiss the existence of "weakness" or under-use of strengths

## ENERGIZE:

- uplift others and fuel them out of patterns that haven't been serving them - always assume that change is possible

## EMPOWER:

- focus on character strengths to help people move from what's wrong to what's strong --- help them use what's strong to overcome what's wrong

## FACE ADVERSITY

- acknowledge problems and struggles - explore them, but do not get lost in them or allow the positives to be ignored (it's not an either-or situation)

## CONNECT

- help the person become more connected with others, with the world, and particularly with themselves

## CULTIVATE SEEDS

- build awareness, explore, and help people grow toward positive action

# ADD A LITTLE PERMA

Prioritize identifying ways that you can ensure the person is **engaged** and is able to access **relationships** that are meaningful to them

Know the gaps and the strong points for the person's sources of PERMA

Consider the person's character strengths

**P**



POSITIVE  
EMOTIONS

**E**



ENGAGEMENT

**R**



RELATIONSHIPS

**M**



MEANING

**A**



ACCOMPLISHMENT

# HOW TO EXPLORE SOURCES OF PERMA

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Positive emotions: Going beyond meeting basic survival needs and exploring sources of hope and inspiration



Engagement: Being "in flow"; immersed in activities/tasks to the point you lose track of time



Relationships: Authentic, deep connections with others (mutual)



Meaning: Contributing to the community; having a sense of purpose



Accomplishments: Developing strengths and skills, practically and emotionally



# WHAT OUTCOMES CAN WE EXPECT WITH THE START MODEL?

Increased support for  
caregivers and providers =  
decreased burn-out +  
increased capacity

Reduced severity of crisis  
situations and decreased use  
of emergency services

Stabilization and the ability  
to remain in the home  
following crisis incidents

Increased awareness around  
mental health symptoms  
and appropriate treatments,  
supporting steady decreases  
in those symptoms and  
related behaviors



# QUESTIONS, FEEDBACK, AND COMMUNICATION

Thank you for your time and attention

Questions and comments can be directed to:

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