

TNT Community Conversation 1/30/2024

Community Engagement/ Commentary

- Claudia gives overview of expectations of community
 - Reads questions to community, gives thinking time
- Alex Perez
 - One of the new police district counselors
 - He has heard from Washington park community in 2nd district that they have had mental health crises and they are afraid to call police
 - Cares team is available at only select time and place, could that be expanded to other parts of the city?
 - This working group should think of a model that covers all of Chicago. Specifically, they should look at deploying model that covers the entire city
 - His district is majority black, the cultural challenges with accessing mental health are barriers to access.
 - When deploying the new program think about using the groups already out there, such as community groups
 - Target Micro influences, tap into the community that is already there especially for the 18-24 age group struggling the most. This could be a way to communicate with this age group.
- Elizabeth Corcorand
 - She is from the 1st ward
 - She thinks there should have a text for care option, as no one answers phones
 - Young people value 18-24 privacy, anonymity is very important.
- Esmeralda Gonzalez
 - Community organizer on south west side
 - According to 2022 measuring safety report, dv context report form of abuse
 - Emotional abuse highest amount of abuse for gender based violence
 - There have been cuts in services for domestic violence services
 - What percentage of mental health clinics will have DV services, due to lack of funding?
 - Non police response systems are in need, who need to intervene for survivors
 - People do not believe police are the right tool to meet their needs
 - Collaborate with gender based violence orgs for future tnt?
- Curtiz Harris
 - 2nd ward ARP
 - A member of Advantage ___ power (Note taker did not get org name)
 - Currently resides at Access Living

- Has had interactions with emergency and EMTs and police, they have taken him to the hospital
- This intruded on the ability for people in crises, and further stigmatizes mental illness.
- If he wants help, he has to go to River Room, as opposed to going to the hospital or psychiatric ward, where his rights are taken away.
- Conclusion, need Medicare for all, single payer model, not just people who have mental needs but also people with mental health needs
- Mishel T
 - The program should focus on youth black and brown youth on the south west side
 - Clinical and non-police behavioral service, we need to think about students who are eager for support but have parents who are stigmatize mental health services. These students don't want to reach out for support
 - Intentionality that will be put forth
 - Target youth in low invested backgrounds, making safe ways that they can get support that doesn't get back to their guardians. This could be other options that will not go back to the parents
 - Could the program use school social workers? She thinks that school social workers are already overworked. Could there be electronic, or video messaging?
- Donna Carpenter
 - Praise to the heavenly father
 - Live in the Englewood area
 - Co-chair of property campaign
 - Co chair of Power Africa Illinois (Note taker not sure this is the correct name)
 - Has an experience with a child that has mental health issues
 - 2000-something her son had a mental health crisis which came out of nowhere. She didn't know what to do
 - She got involved with Kofi, they helped her and her son
 - He is doing better but she hates he is on medication
 - She hopes that the program comes forward, and that it comes to Englewood
 - Mental health is real, she has it in control since she knows how to deal with it
 - Before there were no resources
 - She believes that there are some good and some bad police, and some don't know how to deal with these situations, especially when it is hands on
 - Providers have to be trained on mental health; she learned that you cannot yell at her son
 - She wants to be at the table to voice her opinion and make sure it happens
- Mitchel bueno
 - Has a personal experience with mental health crisis has been the lack of trans inclusivity in mental health
 - The only hospital where he has gotten mental health aid that includes trans is Howard Brown, which is very far north and has other issues
 - Has been trying to get a psychiatrist for 4 years, gets put on a waitlist

- He has been to the ER for mental health crisis; however they didn't give follow up with a treatment plan, and were only focused on getting him back to normal
- There was never a follow-up
- It is important that trans people can be included in this conversation since mental health crisis is connected to gender identities, and this is complicated when the people helping cannot support
- Esme Montecitos
 - She is from McKinley Park
 - What matters to you when accessing mental health services?
 - Language access, cultural competency, finding a therapist who can identify or understand what it is like being Hispanic, and growing up in an immigrant household
 - People with immigrant identities have unique experiences, and it has been hard to find when looking for a mental health provider
 - Therapists who are white and don't understand the lived experience as someone who is Hispanic. Need more diverse therapists
 - She is bilingual with English and Spanish, loves being able to speak in whatever language comes out fluently
 - Location or accessibility virtually, she prefers going in and talking directly, but when COVID was going on it was easiest to have virtual accessibility, therapy was easier
 - How do you feel most comfortable?
 - Calling the service directly, not calling 911. Calling 911 does not feel safe, calling a service directly is preferred
- Sharlene Campel
 - Part of Power PAC
 - When you roll this out, the people that you have doing it are fully invested in terms of dealing with us as humans
 - Her daughter before she was diagnosed had a breakdown, got connected
 - The organization sent out a SASS worker, in the middle of the crisis the SASS worker was not prepared
 - So she had a daughter who was being violent and a SASS worker who was just sitting there. The people doing the work need to be fully invested
 - Before the full diagnosis, daughter pulled out the butcher knife and she tried to fight with kids, Sharlene tried to stop it
 - Police came up and says "put down the knife or we will shoot"
 - Sharlene was in between daughter and police, and realized that they would shoot her and her daughter as she was in the middle of the conflict
 - Need people who feel invested, do not just check the box that it is done .
- Sims
 - Member of Power PAC
 - Has experienced mental health issues
 - Went to the hospital when she has a seizure. Sometimes the doctor doesn't know what to do for her.

- When she goes to the hospital for a seizure, they think that she is trying to hurt herself or try to hurt them
- She has been put her in a dark room
 - no one calling her parent at the time, no one called a family member
- Fortunately she has never gone to jail
- Her daughter additionally tried to kill herself
 - There were 10 police around her daughter
 - Sims had to break up the group, telling them that Sims was trying to help her daughter and that her daughter was trying to hurt herself
- She Prays that the people who come together can be trained to help the mental health services, and have more call, and being able to talk to someone for a mental health crisis.
- Dr. Gloria
 - She will respond to 2 questions
 - What matters to you when you think about assessing mental health services and support?
 - She had an experience with her older son when he was a college student
 - He had a mental breakdown, as he was stressed out
 - She called 911, it was the worst experience they ever had
 - The response team came in and roughed him up
 - He was in a paralyzed state
 - When she and her son said slow down and that he was not violent, they started threatening her because she called 911
 - Taken to the hospital and institutionalized
 - She wouldn't leave the hospital because of the police experience; she was afraid for her son
 - In the hospital they were treating him like he was some kind of criminal
 - He had no history of mental health issues
 - Someone in the hospital told her to get her son out of the hospital as he didn't belong there
 - He was not experiencing a mental health crisis
 - He was labeled in ongoing treatment
 - She noticed a change in how people were approaching him because of a label of a mental health crisis
 - Her son was diagnosed with temporary acute psychosis
 - They tried to medicate her son, she had to fight to get him therapy
 - When our children and adults are going into a facility where people are properly diagnosed in, not everyone needs medication. Therapy needs to be the first step before medication.
 - She is hoping that we have people who are in those places who know what they are looking at, how to support, and how to get them the services and the care they need
 - How do we advertise
 - This needs to be advertised everywhere

- She works in city colleges
- One of the big pushes is resources, and advertising, needs to advertise it everywhere
- Advertising should be similar to head start advertising
- They should advertise in private and public institutions, mental health is pivotal to sustainability of people and their lives, in as many places as we can
- Ronald Jackson (speaker spoke away from the mic, notetaker had some difficulty hearing)
 - There are less than 3 mental health clinics in the city border itself now
 - The people working in the city of Chicago know there isn't a psychiatrist on the center of health right now
 - He has been a voice in the past that we need treatment not trauma
 - He thought of that over 12 years ago
 - 2012 Emanuel closed clinics, and he was sent to jail as he didn't want the clinics to close.
 - Mental health was the main focus 12 years ago, so why are we are back here developing mental health
 - We need to do more than talk, time for us to realize that there is a new administration, these people are thinking of developing new mental health clinics
 - Need to know that the ones that are already open 5, they are understaffed, what is needed to get the other 2 to come online?
- Judy King
 - She appreciates the increased transparency, has been an issue in the past
 - For many members of the public, they feel disconnected from the process
 - This meeting today is with the steering committee, not the working group; she feels that she would be hearing from the working group
 - Part of the public process is having people who do the work hear from the public, they need to hear the things that people are saying
 - She wants to see more communication between the working group and the public, we have a diverse public in terms of what can be contributed to the conversation and opinions on what clinical services should be offered. This is a part of the transparency
 - Meetings of working groups should be public, as she says is part of the ordinance