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Leveraging a Public-Public Partnership in Los Angeles County to Address COVID-19 for Children, Youth, and Families in Under-Resourced Communities

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Abstract

There is growing concern about the mental health and social impact of COVID-19 on under-resourced children, youth, and families given widespread social disruption, school closures, economic impact, and loss of lives. In this commentary we describe how an existing Public-Public Partnership between a large county mental health department and a state university responded to COVID-19. This partnership, originally designed to address workforce needs, rapidly pivoted to support providers through a trauma and resilience-informed approach to mitigate adverse mental health effects among youth and families in Los Angeles County.

Although the psychological effects of the impact of COVID-19 on youth and families are not yet fully known, social disruption and traumatic events—including school closures, unemployment, housing instability, family separation, and loss of lives—pose a significant risk to mental health (Galea, Merchant, & Lurie, 2020; Lee, 2020; Pfefferbaum & North, 2020). The pandemic is disproportionately impacting under-resourced communities of color (Rios & Rangarajan, 2020) and other minority status groups who already experience social

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disinvestment, racism, homo/transphobia, and other types of discrimination related to worsened health (Alegria, Vallas, & Pumariega, 2010; Yancy, 2020). In Los Angeles County (LAC), although efforts to “flatten the curve” are promising, there is growing worry about the economic, mental health, and social impact of COVID-19 on under-resourced youth and families. Nineteen percent of LAC residents lived at or below the poverty level before COVID-19 (U.S. Census Bureau, 2019), and less than half of LAC residents were employed during the pandemic (Cosgrove, 2020, USC Center for Economic and Social Research, 2020). LAC data show that individuals from lower-income communities are three times more likely to die from COVID-19 than those in higher-income communities, with disproportionately higher death rates among African American, Latinx, and Asian-Pacific Islander communities (Los Angeles County Public Health, 2020; Wigglesworth, 2020).

On March 11, 2020, LAC reported its first death from COVID-19. On March 16, the Los Angeles Unified School District (LAUSD) closed schools, and within a week, the Los Angeles mayor and the California governor issued stay-at-home orders (“COVID-19 pandemic in California,” 2020). LAC, which has some of the largest social service systems in the U.S., experienced unprecedented disruptions. Reports suggested that 15,000 students within the LAUSD lost online contact with their classrooms, likely disrupting many students’ sole resource for linking to health and mental health services, access to activities, and meals (Kohli & Blume, 2020). Physical distancing requirements curtailed face-to-face services and developed a need to redefine service delivery among the LAC Department of Mental Health (DMH) and its network of community mental health clinics providing critical services to youth and families.

Here, we describe how an existing Public-Public Partnership between a large county mental health department and a state university (Lester, 2019), designed to address workforce needs across systems of care through a trauma and resilience-informed approach, pivoted to support providers and mitigate adverse mental health effects among youth and families during the pandemic.

A New Vision for Prevention Resources and Services for Under-Resourced Communities

As health officials worked to prevent the spread of COVID-19, resources were rapidly mobilized to address the mental health and social needs of youth and families. The DMH-UCLA Prevention Center of Excellence (PCOE), an existing public partnership between the LAC Department of Mental Health (DMH) and the University of California, Los Angeles (UCLA), helped facilitate this effort. This collaborative partnership, established in 2018, evolved from the DMH’s vision under the leadership of Jonathan Sherin to redesign the county’s prevention approach to support wellbeing using a population health framework. Central to this goal was the development of systems’ capabilities to support strengthening youth and family resilience in the face of stress and trauma. Through a community-partnered approach equally valuing community and academic expertise, the PCOE enhances the capacity of county systems within naturally occurring settings (e.g., libraries, child welfare, juvenile justice, and schools) to partner with youth and families in a strength-based and

culturally responsive way (Jones & Wells, 2007). These efforts align workforce training and development across systems, including training, coaching, and consultation on topics like professional wellbeing, implicit bias, and trauma and resilience informed care.

In January 2020, the PCOE launched the Wellbeing4LA Learning Center (access online at learn.wellbeing4la.org) to support LAC workforce development and wellbeing through online learning and certification, information sharing, and relationship building. This online platform provides self-paced courses, downloadable resources, and moderated learning communities. Resources are created through continuous quality improvement, starting with “listening sessions” with agency leaders and staff and followed by refinement from user data and feedback.

Prevention Resources in the Midst of COVID-19

As a result of pandemic-related shifts in county service operations, the PCOE worked alongside community agencies to rapidly respond to new priorities. We describe multiple dimensions of the PCOE’s pandemic response, including the creation of COVID-19 specific resources and expansion of online learning and services to support service providers.

Response to Changing Community Needs

The challenges of responding to community needs during a pandemic placed additional burdens on the county workforce. The DMH quickly prioritized efforts to promote wellbeing and prevent burnout and moral distress among its workforce, including creating the LAC Employee Wellbeing Line to support employees and their families. Maintained by DMH technical teams and staffed by the UCLA Luskin School, the Wellbeing Line provides LAC health clinicians and first responders psychoeducation, support, wellbeing resources, and mental health referrals.

Creation of Easily Accessible Resources

Across LAC, providers in all sectors suddenly needed strategies to respond to evolving and unpredictable service needs. Following school closures, educators found challenges implementing distance learning for the first time, along with balancing home and work lives. Teachers expressed concerns about under-resourced students facing barriers to accessing virtual learning, heightened student anxiety, and difficulty connecting to students in need, all compounded by a compressed timeline. In response, the PCOE designed a collection of brief episodes for teachers called *Educators Overcoming Under Stress*, a series of videos on topics such as Psychological First Aid for teachers, support for educator wellbeing, approaches to connecting with under-resourced students, and distance learning for under-resourced communities.

In addition to supporting school workforce needs, the PCOE is supporting LAC’s school districts in developing a reintegration plan to help schools serve as centers of support for students and families as the county emerges from this crisis. This effort will build upon the DMH’s school based community access platform, a collaboration with L.A. school districts that connects high-risk students and families to mental health services.

Expansion of the Online Learning System for COVID-19

The Wellbeing4LA Learning Center quickly expanded in response to the pandemic by disseminating publicly available information broadly to service professionals locally and nationally. Individuals can create a free account and access printable tools, guides, mobile applications, courses, articles, websites, and more, including over forty COVID-19 specific resources for individuals, families, and professionals.

Establishment of Cross-Sector, Multidisciplinary Speaker Series for Families and Providers

To address challenges facing under-resourced youth and families across multiple sectors, colleagues at the UCLA Pritzker Center for Strengthening Children and Families launched a COVID-19 series featuring UCLA faculty and community experts to provide information and resources to the public in English and Spanish. Weekly talks include topics on the amplified impacts of COVID –19 on special education, immigrant youth, child abuse, and foster care.

Early Lessons Learned and Recommendations Moving Forward

The PCOE leveraged an existing public partnership to provide resources and trainings to assist cross-sector service providers with meeting the needs of vulnerable youth and families during the pandemic. However, as with other vulnerable communities, COVID-19 amplified existing social and structural inequities among under-resourced minority-status families with pre-existing trauma in LAC (Bibbins-Domingo, 2020; Los Angeles County Public Health, 2020).

Ongoing challenges to protect youth and family wellbeing and address workforce needs following the pandemic include: 1) addressing digital disparities and lack of access to computer technology among families and providers; 2) addressing the need for trauma-informed care and mental health services for youth and families; 3) providing ongoing specialized wellbeing services to frontline providers and their families; 4) addressing the structural determinants of health among highly vulnerable families through employment and eviction protections, housing provisions, health care access, and strengthening the safety net; and 5) ensuring that highly vulnerable youth do not fall through the cracks given disruptions to services that many children in county systems disproportionately rely upon. Despite these challenges, opportunities exist to harness the coordinated efforts of county departments, agencies, community providers, and academic centers to narrow—instead of widen—the equity gap so that children and families can emerge from this pandemic stronger.

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