

WESTSIDE



COMMUNITY  
SERVICES

## AGENCY FACT SHEET

**Mission:** Westside’s mission is to provide high-quality, family-centered, culturally competent behavioral health and human services.

**Clients:** The agency serves over 3,500 individuals throughout San Francisco who live on the margins of society, including African Americans and other people of color, those who are low-income, uninsured, homeless, or suffer from severe and chronic mental illness or AIDS.

Many of our clients live in neighborhoods plagued by violence and addiction; are new to "the system," or have had negative experiences in the past; have difficulty finding and/or keeping a job; are at risk for homelessness or have experienced racism and other forms of discrimination.

All of the families we serve are considered low- or moderate-income, with the majority living below the poverty line.

White (not of Hispanic origin).....	39%
African American.....	34%
Latino/Hispanic .....	15%
Asian or Pacific Islander .....	6%
Mixed/Other.....	6%

**History:** In **1967**, a group of San Francisco community activists and health care providers joined together to secure federal funding made available by President Kennedy’s Community Mental Health Act. The federal funds were designated to provide for the unserved and underserved, a disproportionate number of whom were (and are) people of color. Westside’s mission specifically identified its role as aiding this target population, particularly African Americans, the majority population in the Western Addition. The agency grew in size throughout the **1970’s**, expanding its children’s services to include adolescents. As the AIDS epidemic appeared in the **1980’s**, Westside established its first AIDS case management program, which was later expanded to include home-based health care. During the **1990’s**, the agency placed new focus on the integration of mental health and substance abuse services, and a new emphasis on providing programs that engage members of the client’s family and community in the healing process. Today, Westside complements its community health services with innovative youth leadership, violence prevention, and a culturally tailored therapy program for African American youth, adults and families in San Francisco.

**Funding:** Westside has an annual operating budget of \$12 million, and approximately 97% of the agency’s support comes from county, state and federal grants. Additional funds from foundations, corporations and individuals have enabled Westside to support our Crisis Clinic, Teen Core center, and youth prevention efforts.



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WESTSIDE COMMUNITY SERVICES serves individuals and families who are marginalized by society, including African Americans and other minority populations, the homeless, the uninsured, and those who have severe and/or chronic mental illness. A majority of the individuals and families we serve are living below the poverty line, and each year over 3,500 individuals are enrolled in our free and low-cost services.

The neighborhoods we serve are some of the poorest regions of San Francisco, and the individuals and families who live in them struggle every day **with isolation, mental and physical illness, domestic violence, street violence, and drug and alcohol addiction**. These are complex and interrelated issues.

Westside Community Services offers a wide variety of programs that are designed to improve the health and safety of San Francisco communities by:

- providing affordable community alternatives to treatment in hospitals and institutions
- halting the intergenerational cycles of violence, addiction and mental illness
- providing education and helping clients develop life and coping skills
- stopping the spread of HIV and other sexually transmitted diseases
- integrating individuals into larger community systems and resources
- improving the quality of life for persons living with severe mental and/or physical illness

**ADULTS** - Westside Community Services' *Crisis Clinic, Outpatient Clinic, and Assertive Community Treatment* programs provide individual and group counseling, case management and medication assistance to individuals who struggle with severe mental illness, with the goals of preventing hospitalization and integrating individuals into the workforce and their community.

Our *Methadone Maintenance* program helps individuals to move toward sobriety, reduce harm caused by their use of drugs and alcohol, and achieve their education, employment and housing goals.

And our *Center of Excellence, AIDS Case Management and Home Health Care* and *Counseling, Testing and Linkages* programs seek to prevent the spread of HIV, connect patients with the medical, social and home care services they need to maintain their health and well-being.

**ADOLESCENTS** -To prevent adolescents from engaging in these high-risk activities, Our *Teen Core* and *Substance Abuse Prevention* programs build self-esteem, provide psycho-education and life skills training, and engage youth in activities that build their leadership skills and resilience.

**CHILDREN** - Children's brains are still developing rapidly during their first years of life. Their emotional, physical and intellectual environment has a profound impact on how their brain is organized, and how that child will function in school and later in life. Westside's *CalKIDS* and *SED Partnership* programs provide comprehensive, integrated early childhood development services to young children and their families, to ensure that they are physically and mentally healthy, and ready to enter kindergarten. And our *CalWORKS* program also provides mental health and substance abuse services to parents enrolled in this welfare-to-work program, to ensure that they are creating the best possible environment for their young children.





## CLIENT DEMOGRAPHICS

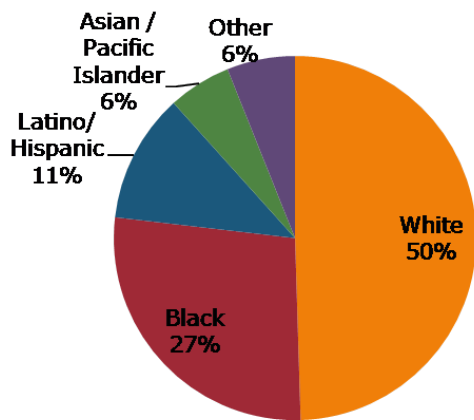
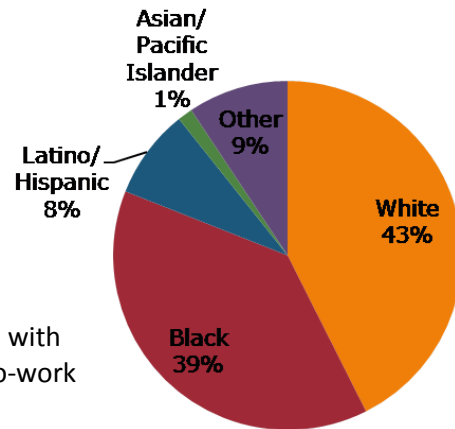
In **2008-2009** Westside programs provided culturally competent behavioral health services and support to over 3,500 children, youth and adults throughout San Francisco.

### Children, Youth & Family Division

- Ajani Outpatient Services
- CalWORKS
- Substance Abuse Prevention (SAP)
- Teen Core

Total number of individuals served: 1,197

Most families served are living in public housing, are involved with the foster care or juvenile justice systems, are on a welfare-to-work program, or are on public assistance.



### Community Behavioral Services Division (Adult)

- Adult Outpatient Services
- Assertive Community Treatment (ACT)
- Crisis Clinic
- Methadone Maintenance and Detoxification

Total number of individuals served: 2,983

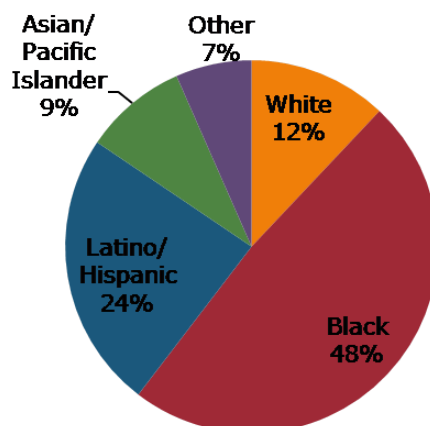
A large percent of the adults served by these programs are unemployed; homeless; dually diagnosed with mental health and substance abuse issues; and/or have severe and chronic mental health condition that has required emergency psychiatric services.

### HIV/AIDS Services

- AIDS Case Management and Home Care
- Southeast Partnership for Health/Center of Excellence

Total number of individuals served: 289

All of the clients we serve are uninsured adults who have disabling HIV or AIDS, and 93% of our clients are male.





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## HALLMARKS OF OUR PROGRAMS

***Fiscal Responsibility*** – Westside outpatient programs are far more cost-effective than alternative treatment programs. An average of \$250 a day is spent to provide treatment for each Westside participant, compared to approximately \$1,400 a day for treatment at psychiatric facilities and associated medical facilities.

***Cultural Competency*** – Issues of behavioral problems, child abuse, drug addiction, mental health, and poverty are handled differently within different cultures and communities. Westside’s program staff are uniquely able to communicate with African American and other minority populations of San Francisco, and provide treatment options that are in alignment with the value systems and norms of these distinct populations.

***Integrated, Holistic Services*** – Many studies have shown that treatment is most effective when it incorporates the various systems in which an individual operates. In other words, treating a young person for an addiction to alcohol is far more effective if mental health issues are addressed at the same time, and if his parents, teachers and other members of the community participate. At Westside, we understand that taking a family-based, “wraparound” approach is the most reliable way to see positive and lasting results in our clients.

***Strength-Based Approach*** – Westside staff operate with the belief that our clients already have many of the strengths they need for their own empowerment and recovery. Rather than focus exclusively on “problems,” we find ways to identify skills and qualities that our clients already possess – and use them as a foundation for building confidence, learning new coping and problem-solving skills, and being empowered to face their challenges on their own.



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**Westside Community Services  
Board of Directors**

*FY 2009-2010*

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LEADERSHIP

### CHIEF EXECUTIVE OFFICER

Bob Rybicki, MA

Bob is a seasoned executive with over twenty-five years of experience leading social service organizations. He has a reputation for restoring financial stability during organizational change, and expanding program offerings to meet community needs.

Prior to joining Westside, Bob was the CEO of **Youth and Family Enrichment Services**, a \$10 million agency that provides substance abuse treatment, mental health counseling, domestic violence interventions, and youth development initiatives. Under his leadership the organization became the largest provider of children and family services in San Mateo County.

As CEO of **Shanti**, a San Francisco nonprofit agency that serves people with terminal diseases, he expanded the agency's scope, tripled its budget to \$5.2 million, and developed the Shanti National Training Institute. Bob has also served as assistant commissioner of the **Chicago Department of Public Health**, where he supervised a staff of 100 and managed a \$5 million administrative budget. Originally from Chicago, Rybicki is a graduate of Loyola University and earned master's degrees from the University of Illinois and St. Mary of the Lake Seminary.

### DIRECTOR OF FINANCE

J. Mark Jenkins, CPA

J. Mark has over twenty years of experience providing accounting and strategic planning services to charitable organizations. Prior to joining Westside, J. Mark was the VP of Finance for **Envision Schools**, a high-growth nonprofit charter school management organization, where he built the organization's first in-house finance and accounting structures. Before that he was the Director of Finance for the **San Francisco Ballet Association**, and the Chief Financial Officer for the **San Francisco Ballet Endowment Foundation**.

J. Mark served over 150 charitable organizations as an Audit Senior Manager for **Deloitte & Touche**, and today continues to facilitate nonprofit educational programs for the American Institute of CPA's (AICPA.) He is also the President of the Board of Directors of **LEVYDance**, a San Francisco dance company. J. Mark graduated Summa Cum Laude with a BS in Business Administration from the University of Central Florida, and is a member of both the California Society of CPA's and the AICPA.

## **DIRECTOR OF CHILD, YOUTH & FAMILY SERVICES**

Shona Baum, LCSW

Shona has been providing direct services to Bay Area parents and children for over ten years. She joined Westside in 2001 as a Supervisor for the agency's CalWORKS Counseling Services program, and was promoted to direct all of the agency's child, youth and family programs in 2005. Prior to joining Westside, Shona was the Family Services Director for **Urban Services YMCA**, where she designed and implemented an innovative program called, "Padres e Hijos Unidos" (Parent and Child Unite), and she has also worked with **Mission Neighborhood Center**, **Alternative Family Services**, **Larkin Street Youth Center**, **Salvation Army Center for Social Services**, and **Hamilton Family Shelter**. Shona has a passion for finding creative ways to provide mental health to underserved populations, by removing barriers related to income, language and cultural issues. In addition to being a California Health Care Foundation (CHCF) Health Care Leadership Fellow, she also presented "Collaborating with African American and Latino Families" at the Northern California Psychiatric Society 47<sup>th</sup> Annual Meeting in 2006, and received the San Francisco Mayor's Office on Disability Award in 2004 on behalf of Westside for workplace accommodation for disabled staff. Shona has a BA in Liberal Arts from San Francisco State University, and a Masters in Social Welfare from University of California, Berkeley.

## **DIRECTOR OF ADULT SERVICES**

David Powell, MS, MBA

David has worked in Community Mental Health for over 16 years in a variety of roles. He first joined Westside in 2000 in the agency's AIDS Case Management program, and moved into his current position in 2008. Prior to coming to Westside, David served as the chairperson for the Quality Assurance (QA) committee **for Osceola Mental Health Inc.** in Florida. His interest and expertise in this area led David into the QA realm at Westside, first with our Joint Commission accreditation effort, expanding into a full-time QA Manager position. David earned a BA in Psychology from the University of Central Florida, an MS in Mental Health Counseling from NOVA Southeastern University in Fort Lauderdale, FL, and his MBA from Kaplan University.

## **MEDICAL DIRECTOR**

Angela Angstmann, MD

Angela joined Westside in 2007 as the Medical Director for Adult Services, and her position was soon expanded to include all agency programs. Prior to joining Westside, Angela was the Staff Psychiatrist for the **County of Contra Costa** Intensive Day Treatment and Crisis Programs. After medical school, Angela completed a General Psychiatry Residency at **Northwestern Medical Center** in Chicago, and earned Board Certification by the American Board of Psychiatry and Neurology. She has also worked as a leader in training residents for crisis work at the **Evanston Northwestern Hospital Emergency Department**, and was the Senior Extern to the **Community Hospitals of Indianapolis'** Department of Emergency Medicine.

Angela is passionate about using a strength-based recovery and wellness approach to help clients and their families recover from severe episodes of mental illness and substance abuse, and is a strong advocate for the integration of primary health and mental health care. She graduated Magna Cum Laude with a BS in Chemistry from Butler University, and earned her MD from Indiana University School of Medicine.

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## SUCCESS STORY: AJANI

Five years ago, Betty\* was at the end of her rope. **She loved her grandson Michael\* with all her heart, but he was out of control, and she didn't know how she could cope with his constant arguing and violent outbursts.**

His special education teachers said that despite being medicated for ADHD, he was still tearing papers off the walls and kicking his teacher, and he kept falling out of his chair.

Betty had raised Michael since he was born. Her daughter had been in and out of jail for since she gave birth to him, and was still addicted to alcohol, heroine, and cocaine.



And then the boy's father came back into the picture, saying he had gone through rehab and was ready to be part of his son's life again. Michael was more than Betty could handle by herself, but he refused to talk to his father at all. She was falling apart, just when her grandson needed her most.

**This little boy didn't choose to be born to addicted parents who abandoned him.** Not only did Michael have low self esteem and deep emotional issues – but as a “special ed” kid, he was not socializing or communicating with regular children, and he was far behind his grade level. Without help, this child good chance of growing up to be a drug user or violent criminal, ending up dead or in jail at a young age. Betty desperately wanted a different future for her grandson.

**Betty was able to turn her grandson's life around with the help of Ajani,** a Westside Community Services' program that helps children heal from trauma and learn new coping skills, while strengthening the other members of their family and extended support network.



The boy at first rejected his father, and would argue and contradict everything he said. But the Ajani counselor helped them every step of the way, providing therapy, helping them role-play to prepare for the transition, and connecting Dad with parenting groups. Gradually, Michael's father was able to become more involved with his son's life – taking him for half the week, setting boundaries, meeting with teachers at school, helping with homework, playing

football with him, and taking him to practice and tryouts at school. A couple of months ago Michael ran into Betty's house and dumped a bulky bag of football gear onto the floor. Grinning from ear to ear, he shouted "Grandma! I made the team!"

Michael has come a long way from the days he couldn't stay in his chair. Today, Betty sees no limits for her grandson's future. He is now in 6<sup>th</sup> grade, and should be functioning at his grade level by next year. He is almost off his medication completely, no longer gets into fights, and is developing a reputation in his class for his drawing skills.

Michael wants to be a pro football player when he grows up, while his dad hopes he'll be a high-paid web designer. But Betty has even bigger dreams for Michael – she wants him to be the next Barack Obama, and her only fear is that she won't live long enough to see him succeed.

*\* All names have been changed to protect client confidentiality. Photos are not actual clients.*

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## SUCCESS STORY: CRISIS CLINIC

### **“What would she think if she could see me now?”**

Jacob\* had just hung up from a call with his teenage daughter, and while the thought of her seeing him this way made him feel sick, he just didn't have the strength to move.

Jacob had started self-medicating when he was 15 to deal with sexual abuse he experienced as a child. By the time he was in his 20's, he was addicted to heroin and cocaine, and was eventually arrested for theft and burglary.

Prison may have saved his life, since it was there that he learned about addiction and got connected to a methadone program that helped him get clean. After his release, Jacob did a lot of volunteer work, and eventually landed a job as a substance abuse counselor.

**After years of hard work, Jacob had reclaimed his life, with a full-time job helping other people in recovery. With his life back on track, he fell in love, got married, and had a beautiful baby girl.**

But in 2002 it all came crashing down again when Jacob lost his job and was diagnosed with a terminal disease. Unable to handle the pressure, he relapsed with heroin.

His wife left him, moved to Seattle with their daughter and cut off all contact. All of a sudden Jacob had lost his family, his home, and his career. His wife and little girl gone, he felt ashamed and alone, and began using drugs again. He would try to clean himself up, only to relapse again. He slipped into a deep depression.



***“The guilt was so much,” said Jacob, “and I didn't know where I belonged. I had no confidence in myself, and I had nobody to talk to about my shame and guilt. I was in no condition to work or help my family. I finally realized that I had a mental illness and needed help.”***

After receiving medication and mental health therapy through a short-term university study, and then a free community clinic, Jacob had started to lay the groundwork for his highest priority: re-entering his daughter's life. *“Soon I was in stable housing, was drug-free, and started volunteering again, and had started exchanging letters with my daughter.”*

*“But when the funding for the clinic was cut, I was on my own again. I lost my confidence, and the depression sneaked into my life again, bringing with it fear and anxiety. I became extremely lethargic and felt alienated. My letters to my daughter became shorter and shorter, because I didn’t want to lie to her, but I also didn’t want her to feel sorry for me. **As embarrassed as I am to say this, I could not get out of bed. I knew this was not right. I felt trapped.** I knew that therapy and medications could help, but it’s really hard to get services when you can’t pay for them. I didn’t know where to look for help, and I didn’t even have enough money for bus fare. I was at my lowest point, and was convinced that I was going to die of an overdose or end up in prison again. But my biggest failure would be to not be a father to my daughter.”*

Staring at the ceiling, he wondered what his daughter would think if she could see him like this. Would she feel sorry for him? Would she be embarrassed that he was her father?

Was this the best he could accomplish in his life?

Fortunately, Jacob remembered having gone to the Westside Crisis Clinic years ago.

***“They are people you can trust when you’re in trouble. And the help you get from the Crisis Clinic is real – it’s not just an appointment or phone number.”***

At the Crisis Clinic Jacob had his medications refilled and had an intake for a new therapist and psychiatrist through the Westside Outpatient Services program that same day.



***“HOPE. Hope was back in my life. Energy appeared. As soon as I got home I completely cleaned my room to represent the new changes in my life.”***

After many years of no contact at all, he is thrilled that he and his daughter are now talking on the phone and communicating by email 2-3 times a week.

***“Now I have new confidence, and will hopefully return to work. I want my daughter to see me as a whole person, not someone to feel sorry for. I love my family, I love my daughter, and I want to reunite with her. I’m ready to get back to work on myself.”***

*\* Name has been changed to protect client confidentiality. Photos are not actual clients.*