

Summary

Merced County Behavioral Health and Recovery Services Cultural Competency Committee

May 21, 2020
10:05 am – 11:00 am
Behavioral Health & Recovery Services
301 East 13th Street, Merced

Present:

Alyssa Castro, Christina Celis, Vong Chang, Jose Chavez-Diaz, Caitlin Haygood, Heydi Herrera, Sharon Jones, Adam Lane, Cindy Mattox, Marilyn Mochel, Maria Orozco, Nancy Reding, Steve Roussos, Anna Santos, Ralph Silva Rodriguez, Tria Vang, Griselda Vazquez, Janet Zamudio

Presentation and Discussion:

All Members

I. Check-in/Conocimiento

The group completed self-introductions, stating names and agencies. Sharon asked that those whose name was not called during role to email Maria Orozco to confirm their attendance.

II. Approval of Minutes

The approval of minutes for April 16, 2020, was motioned/seconded (Nancy Reding/Fernando Granados) and carried.

III. Discussion and Development of Cultural Competence Committee Guiding Definition

Sharon Jones asked that everyone on the line contribute what they feel should be included in a guiding definition of “cultural competence” that will be used to guide cultural competency, humility, and responsiveness within the department. Alyssa Castro from YLI noted that upon completing a workshop she noticed that a demographics form did not include an option to select “Hmong” and “Asian” were not listed. Alyssa emphasized that it is important to reevaluate which demographics are required to be collected with the MHSA dollars. Sharon said that the demographics collected are determined by the state and that the option to select “Hmong” should be listed. Sharon asked that Alyssa send a copy of the form to her so the issue can be looked into further. Nancy Reding emphasized that it is very important to breakdown groups within groups, as “Asian” is very non-specific. Sharon agreed and stated that cultural competency goes hand in hand with the core value of inclusion.

Marilyn Mochel stated that the lifelong learning process and self-reflection are not often in cultural competence definitions, but should be considered when creating a definition.

Steve Roussos asked if the committee was working to define cultural competence from an organizational or individual standpoint. Sharon Jones said the purpose is to develop a definition from an organizational standpoint to guide the work within the public mental health system and contract providers. Steve suggested making sure that we include something that refers to organization’s rules or ways of practicing. Steve also suggested that the language of the definition should be something that consumers understand without difficulty and noted that the county’s standards of what is readable and understandable might be different from the state’s standards.

Christina Celis from Merced County Department of Public Health shared her definition of cultural competence: “Communicate, understand, and respect cultural differences and practices across cultural communities.” Nancy suggested adding “learn from” to Christina’s definition.

Vong Chang from Turning Point said that when creating a definition, using very terminology that is easily interpreted by stakeholders should be an overall guiding point.

Steve Roussos asked how the concept of rank would fit into the definition. Marilyn Mochel elaborated on the concept of rank. Marilyn said that “rank” refers to a power difference between people, in any kind of group there is usually a hierarchy of individuals who have more power or influence. Marilyn said that the purpose behind a definition is to promote the ability to work effectively with others as individuals, as an organization, with people who have different cultural beliefs, behaviors, and needs. It is that process of realizing that whoever you are interacting with has some similarities and some differences and cultural competence/responsiveness/humility effects a person’s ability to effectively work with, interact with, have a relationship with people who have different beliefs and behaviors.

Steve Roussos said that it is important When talking about being culturally competent and working with individual people, said we should ask if the definition is inclusive of working with different groups of people and asked how the definition can incorporate the culture of a group, not only an individual.

IV. Discussion on Cultural Humility

Sharon Jones shared the dimensions of cultural humility. Sharon stated that cultural humility is about lifelong learning, critical self-reflection, and looks at culture from the understanding that culture is first and foremost an expression of self and that the process of learning about each individual’s culture is a lifelong endeavor. No two individuals are the same, even though they may identify with the same culture. Each individual is complicated. We are multidimensional human beings. Our identity is rooted in our history – we know that many individuals come from a different historical context. “I get to say who I am” – often times, we are defining the person with a diagnosis – cultural humility is really helping the individual to define who they are. Recognizing and challenging the power imbalances and building respectful partnerships. Working to establish and maintain respect. Respect is important and essential to ensure healthy and productive relationships. Institutional Accountability: Organizations need to model the principles of cultural humility.

Marilyn Mochel added that cultural humility requires individuals to be aware of their own biases, prejudices, and their own cultural beliefs and behaviors in relation to interacting with others. It requires a lot more personal reflection and understanding. Sharon agreed that cultural humility requires ongoing self-reflection and exploration of implicit bias, ongoing self-assessment, critical self-reflection, and accountability.

V. Moving Towards a Healing Organization

Sharon Jones shared the elements of a healing organization. She said a healing organization takes into consideration the impact of trauma on staff, clients, individuals entering the building and space and does not contribute to any secondary trauma. Sharon said the committee should consider creating a guiding definition that flows right into a healing organization. Sharon said she would bring a handout on what a healing organization looks like to the next cultural competency committee meeting.

Fernando Granados from Sierra Vista asked if Sharon was asking what is being utilized within agencies that would screen for trauma, such as the ACEs measure. Fernando said he envisions a healing organization to be similar to what is currently done within his agency, including ensuring a culturally welcoming environment, but also looking at the environment for possible triggers for individuals who have experienced trauma.

Steve Roussos asked the committee if they had any examples of how one would work around trauma when serving two groups that have traumatized each other and are trying to heal. Sharon shared that Jerry Tello has done a lot of work with individuals on how to create cultural respect and unity when there are cultural differences.

Adam Lane from the Merced LGBTQ+ Alliance shared that bridging the gap between the LGBTQ+ community and the faith based community has been an important goal of the Alliance. Whenever the Alliance holds Pride or another kind of event, they make sure that the United Methodist Church is present and has a visible booth because there are so many opportunities for healing to take place and for stereotypes on both sides to crumble. Adam says that this has been a very healthy collaboration.

Marilyn Mochel shared about the concept of secondhand or vicarious trauma. By listening to stories of trauma survivors, the listener experiences some trauma as well, and their brain starts to exhibit the same sorts of trauma response as the person relaying the traumatic experience. We should look at how to support individuals who are listening to the stories, such as interpreters, but may not have the clinical perspective on how to self-heal.

VI. Program Reports and Updates

Sharon shared that she was on a webinar with the NAACP through public health in regards to the faith communities that want to continue to meet for services amid COVID-19.

Jose from Golden Valley Health Centers continues to serve his priority community by reaching out to the public and letting them know that they are still accepting new patients.

Sharon Jones asked Vong Chang how Turning Point operating during this time in terms of cultural competency. Vong said that they have a very diverse staff population at Turning Point who are often open about their own biases and stigma. They often discuss what that means for everybody and there is a lot of dialogue amongst the staff, if they are still very unsure, staff also has various resources that they can reference. Those discussions are very alive and well. The demographics of the population they serve are also very diverse it does bring a lot of excitement and causes a lot of transformation in how they interpret Cultural sensitivity. They also reference a lot of trainings and handouts and take time to reflect. Vong said he has a binder of training handouts that he references when needed during supervision and with new staff. Vong noted that the PowerPoint provided by Dr. Ebony Williams have been especially helpful for guiding how they can better serve the LGBTQ population.

Tria Vang from Caring Kids said they have been doing Zoom with families and have been checking in on families once a week. The Zoom playgroups have been very successful. Caring Kids was mentioned in the Merced County Times recently. The Caring Kids staff attended the Valley Learning Community Strategies 2.0 meeting to collect information to help the families they work with. They learned about the Family Resource Center grant that allows to give the families they work with \$85 or less for anything they need in the home.

VII. Possibilities and Success Stories

Sharon Jones mentioned that BHRS will be posting billboards in the outlying communities throughout Merced County. Sharon hopes that the billboards will help reduce stigma and send the message that "we are here for you."

Steve Roussos shared that he is hoping that within the next few days that the local schools will decide to leave Chromebooks with students over the summer, which would help families with learning and positively impact the emotional stability in the home.

Adam Lane announced that the LGBTQ+ Alliance will hold four virtual groups Tuesday through Friday. Adam hopes that this will be a success in breaking down barriers for those who lack transportation or who live in communities where there is increased stigma.

Christina Celis from the Merced County Department of Public Health shared a positive comment from a participant in a recent stress management and reduction webinar.

VIII. Next Steps

Sharon Jones will collect what was shared in terms of a cultural competence definition and will send out a draft definition to everyone.

Sharon will also bring information on a healing organization and an article on trauma informed care to share. The next Cultural Competency Committee meeting will take place on June 18, 2020 via teleconference.

IX. Adjourned

Meeting adjourned at 10:50 a.m.