

Summary

Merced County Behavioral Health and Recovery Services Cultural Humility, Health Equity & Social Justice Committee

July 27, 2023

10:05 am – 11:00 am

Behavioral Health & Recovery Services Facility
Conference Center Room C219

Present:

Sharon Jones, Cindy Mattox, Nicole Duarte, Fernando Granados, Ursula Vasquez, Alondra Cisneros, Mai Ker Vue, Belle Vallador, Janette Rodriguez, May-Ci Xiong, PIA Moua, Natasha Ambriz, Khi Moua, Janette Rodriguez, Laura Ruell, Cristina Vang,

Presentation and Discussion:

All Members

I. Check-in/Conocimiento

II. Approval of Minutes

The approval of minutes for June 22, 2023, was motioned/seconded (Fernando Granados / Khi Moua) and carried out. With the correction of hosting the Elder Abuse MOU/CCR meeting today at 3 pm, anyone is welcome to attend the meeting at Healthy House as noted by Belle for correction.

III. Updating Cultural Competence Guidelines

Cultural competence plans guidelines are part of the California Code of Regulations, each County has to have a Cultural Competence Plan, the last time the regulations were approved was in 2010, we have been updating the plan according to the 2010 regulations, with the new regulations the cultural Competence plan will be called the Behavioral Health Equity Plan (BHEP). The BHEP plan new regulations are in the process of being revised in collaboration with stakeholders. The new Behavioral template will be issued in the fall of 2023 and the new submission requirement will be due in the Fall of 2024. For now, we follow the 2010 guidelines.

IV. Review and Identify Current Disparities and Challenges in Merced County

What are the true iniquities in Merced County? What is the top list in Merced County in disparities? One disparity is housing, we do not have a housing infrastructure and it is at the top of the list.

There are a lot of obstacles to be able to get a house or apartment. Access to the housing programs we do have is disparity to the people in Merced County

By attending meetings and telling the community of services that are offered and communicating with agencies when referring a person. Transportation is a disparity in Merced County. Knowing what is available when transferring from one agency to the other agency for people.

Making sure there is enough bilingual staffing that understands the culture needs to be able to help with the correct services in the community. Disparities are also the way services are delivered.

The one program that is in its early stage is the transformational equity re-start program, refer to as the Re-Start current Innovation project is set up to be culturally responsive, a non-western way of engaging with individuals. We should do an informational exchange day for the community of resources available in the community. Having an informational resource online so the community could access it.

We need to explain things better so the community can understand, in layman's terms. While doing focus groups, we are getting plenty of feedback about not being treated nicely, they are treated badly so that turns them away from the services. So, we must make sure that whoever we hire is competent and has empathy toward the people.

The Many Hands campaign is a campaign to help the Hmong people of Merced County to feel empowered to be Hmong, proud of their culture, and to feel inclusive. We are starting a live show inviting the community members to share about the Hmong community. The Idea behind the live show is to help encourage the Hmong community to be more self-sufficient. And bring all the

community and organizations together to see what services the Hmong community can benefit from. It is Facebook live, where we will be showcasing Hmong culture, and our first one will be today at 4 pm on our Many Hands Facebook page featuring Tim Long. Is a pageant winner and he teaches about Hmong traditional values.

For Providers it's the language component, we do not have the Hmong Mental Health terminology.

The State provides a Guideline for the use of interpreters, and how to interpret, we have connecting or bridging worlds which is 48 hrs. training.

We have to be the purpose, be proactive, come together, and build that safety for others that do not have a voice.

V. Identify Priorities for the Next Three Years

What are the recommendations/priorities? Culture Competent specific training, the live shows, Knowledge is knowledge, but wisdom is doing how to interface and making this better and interact with people.

Resource fair, comprehensive how-to guide.

We have a billboard but having a kiosk would be great. We must be more innovative in training. Communication from top leadership. Not fine to use racial slurs or talk down to a person because you think they are less than you.

It is very important to follow up with the training to see if they are using what they have learned.

If we ever going to do training, we should include all the Health Care Providers if possible.

The National Night Out is for all the organizations to come together and give out resources.

Look like we must go back and learn etiquette on how to engage community groups, so we must have more training, follow-ups, and emergent training.

Focus Groups, it's always nice to listen to everyone's input and conversations. That is how we discover new things and strategies. Brainstorm with people out in the fields and agencies and collaborate with each other.

Hopefully, we will get the grant to have a Multicultural conference here for BHRS for Behavioral Health Providers. The Grant is specific on addressing health disparities, looking into bringing on a keynote speaker having multiple workshops, Culture workshops, focusing on South Asian, Latinx, and possibly a third group Native indigenous. We will be building a committee to come up with ideas and education. One-day conference so I would like to have a rotation of attendees so they can get information from every single workshop and possibly extend it to a two-day conference. We will be sending an email in mid-September about the Committee if any would like to be part of it.

On Facebook like where there is English interpretation? It is going to be a mix of English and Hmong.

This is the second time I'm hearing from a Mental Health Provider about self-determination our department has self-determination, and I'm assuming that our self-determination is different that yours, can you elaborate on what your self-determination is? While working with clients we become the people they go to access it like fostering a dependent. The BHRS is only open outside of crisis from 8 am to 5 pm so people are going to have how to fish and not just us bringing fish to them. Self-determination empowers people to help themselves.

VI. Community Stakeholder Participation

We will continue with these topics at the next meeting.

VII. Measurement of Goals and Progress

VIII. Behavioral Health Equity-Focused Interventions

IX. Next Steps

X. Adjourn

11:00 am

The next meeting is August 8, 2023.