

# Summary

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

January 27, 2022  
10:05 am – 11:00 am  
Behavioral Health & Recovery Services Facility  
Teleconference via Zoom

### Present:

Sharon Jones, Sabrina Abong, John Aguirre, Fernando Granados, Melyssa Hintz, Conor Maloney, Cindy Mattox, Ismael Muñoz, Maria Orozco, Rocio Ortega, Nancy Ortiz, Nancy Reding, Stefani Rosas Soto, Jeff Sabean, Sandra Sandoval, Cari Urquiza, Belle Vallador, Pangcha Vang, Griselda Vasquez, Janet Zamudio

### Presentation and Discussion:

*All Members*

#### I. Check-in/Conocimiento

#### II. Approval of Minutes

The approval of minutes for October 21, 2021 was motioned/seconded (Nancy Reding /Fernando Granados) and carried.

#### III. Cultural Competence Plan Update

Sharon Jones reported that in the Fall of 2021, the Cultural Competence Plan was submitted to the state. She explained that this particular year, they only wanted to see the changes highlighted in red – called “red lining.” A copy will be sent out after this meeting for review. Sharon reviewed some of the key practices that they had identified in the cultural competence plan from many discussions they’ve had at this committee.

##### ***A commitment to life-long learning:***

For those that were on the last meeting, it is important because when we look at the data for LGBTQ+ and the fact that their data declined, along with other populations, and important areas where individuals are not answering questions that lead to the data, it can really inform about a lot of things. Sharon is really excited about John Aguirre agreeing to do a training for staff – she will be following up on that.

##### ***Reflective listening:***

In order for us to have powerful work, powerful advocacy, and move forward, there has to be some reflective listening.

##### ***Engaging in continuous self-evaluation and examining our intentions:***

We have to take a look at ourselves and whatever we are moving towards for the greater good and impact of all people. This is a really deep committee because when you talk about cultural competence or cultural humility, it is huge and there’s a bridge to contemporary things that are happening as well as historical things that have happened. When we look at self-examining ourselves, it starts right with us. Sharon thinks this is a very powerful committee.

##### ***Becoming comfortable with not knowing:***

Sometimes, we just don’t have enough knowledge and we need to get an expert, someone who knows more about the topic to either provide training, some type of workshop, or just to provide feedback.

##### ***Understanding each person is the unique intersection of different cultural factors:***

What you see externally might not be all to that person and so if you just stop there you are going to miss a whole lot.

##### ***Encouraging social justice informed responses:***

Sometimes it has to get to the point of social justice; it is always there but sometimes it has to get ramped up a little.

##### ***Recognizing and identifying privilege and power dynamics:***

There is always some type of power dynamics - being able to recognize that, knowing how it impacts our underserved community, and have cultural factors.

Sharon explained that these are some of the key things covered in the plan. The plan will be sent out to everyone. It can be discussed further in the next meeting, but it is very important.

#### **IV. Community Outreach and Engagement**

Sharon said we are talking a lot about the pandemic and the needs of the community. She would like to have a discussion at the relevance of this time. The group was asked to share strategies they are using to engage the community and to bring forth health, behavioral health, or whichever services they are providing.

John Aguirre, LGBTQIA+/2S Collaborative, thinks it's important to stay connected with clients face-to-face and through phone calls. Peer-support doesn't only have to be done through face-to-face. They actually went to people's housing during the middle of the pandemic and stood outside their porch on a chair, and talked to them through their door. The clients wanted that physical presence as it was more to them than a phone call – the phone call wasn't personal enough. The collaborative also had support groups in the park because they wanted to be in an open space with 6 feet apart and they are flexible about that. This is a really tough time for those with semi-mental wellness or issues and need that extra support. Sharon likes how they are being innovative and adaptive to help move the health of that person forward.

Fernando Granados, Sierra Vista Child & Family Services, shared about their drive-by events on school sites. Students would come to the common areas and get information with social distancing. They had to get innovative with the way they delivered what they would normally do in person. They used telehealth, Zoom, virtual groups, as well as drive-by events. Sharon asked about event attendance and if there was an impact. Fernando said yes, they actually had more individuals participate – at some events they had to open it up to more than just the students. Sharon is noted that sometimes they think there is not much to do with COVID, but she has heard 2 great examples of continuous engagement.

Rocio Ortega, Public Health COPE, shared that their COPE program was one of the first to transform their classes to virtual platforms. They continue to promote them on social media and offer multiple stress classes – 20 classes a month in both Spanish and English. They also went virtual with their chronic self-management program which they are currently offering as a 6-week series class. They have looked for groups that are already formed and working together, and were able to offer and facilitate these classes to them. Public Health COPE continues to bring their classes virtually every month. They actually facilitated their youth classes at the high school level. Sharon thinks this is a nice conversation because we know that continuous engagement is needed for our community and these are perfect examples. Sharon would like to see this committee start to develop a list of best practices or engagement that are working in Merced County.

#### **V. Community Workshops**

Sharon stated that from the Ongoing Planning Council, we already know that we have to develop some workshops to further understand and have that life-long learning, support, and collect data for our LGBTQ+ brothers and sisters, as well as those who identify as LGBTQ, allies, practitioners, etc, so that we can have a life-long learning understanding.

Conor Maloney, Turning Point, said that one of the things he has not seen an abundance of in terms of community and workshops is caregiver support. A lot of the services that they focus on at Turning Point are mental health providers with mental health support for those who need it, but there isn't always a lot of support available for those who are looking after them within their immediate families. That can carry its unique set of challenges and stress as well.

Nancy Reding shared that they used to do this a long time ago: they used to do a workshop about how families and family members can tap into resources and know where to find them. There used to be a resource binder that evolved into electronic format. If there is one, Nancy has not seen it. She said that we have to educate the community of resources and how to use them. This includes looking for food or a doctor for a transgender youth – things like that she thinks Merced County really needs to develop again.

Sharon noted that Merced County Office of Education has a wonderful resource book. She thinks different organizations have it but she is not aware of just one area where everyone can have access. Through the ACEs initiative, they are trying to develop a platform similar to what Nancy described, with access to available resources. This might be a way to reinstate what Nancy is speaking about.

Pangcha Vang wonders if there could be a community workshop for families who need resources or COVID-19 relief. Also, a workshop for the undocumented and where they could get resources. A lot of the resources that are available to people aren't available to them.

Sharon said that we are just trying to move forward as a committee to start activating the knowledge that we all have, but also helping. She suggested at least a 2-hour workshop to provide resources so that individuals can breathe a little easier and receive some help.

Nancy mentioned that a way to have some time of accessibility is on Childs Ave on Saturday at the Flea Market – we have to go to the people. She mentioned that a lot of people don't come to us because many agencies do not provide overtime, only 8am – 5pm. The whole concept and thinking have changed. Sharon agreed. Nancy added that people think we don't care enough to go to them. Sharon suggested a welcoming environment, putting it out there that we care, and demonstrating it.

Sharon shared that she does workshops at The Grove and Gateway – they cover a repertory of topics: stress, depression, mindfulness, trauma, emotional intelligence; whatever they request, Sharon tries to develop a workshop on.

Pangcha Vang added in regards to the COVID relief workshop. She thinks COVID brings a different culture to us. It impacted the unserved and underserved communities a lot more. She wanted to stress the importance of a COVID relief workshop because people are losing their homes, jobs, and don't have health care benefits. Having this resource available to these families is so important.

**Belle Vallador stated via chat:** *Since mostly of our homeless clients can't come to our office to pick up their boxes of fresh vegetables and fruits, we deliver it at their doorsteps every Thursday (once a week) This is through our Food to Fox Program.*

Sharon asked the group if anyone was doing any workshops in terms of COVID-19.

Nancy is not sure who might be doing training but she knows Valley Onward, which she is chair of the board in, is doing a lot throughout Merced County. They are getting contracts from Public Health. Nancy thinks they really need to talk to Public Health as far as what they're doing and if we have any ideas of how we can do it better.

John Aguirre added that the Central California Collaborative has received funding from Sierra Health Foundation. They are also still contracted with Merced Pride. He shared that they will be doing a series of tabling and outreach events to promote vaccination, boosters, and labor law when it comes to COVID-19. Throughout the next couple of months, they can reach out to Jennifer at the Pride Center. It will be zip code focused with one of the main zip codes unvaccinated right now is South Merced. There are also a lot of smaller populations and towns that the state provided for being unvaccinated or under vaccinated. That will be a 2-month project.

Nancy Reding thinks it's real important that Jennifer shares some of what has been going on. There has been a change in administration and it has become extremely more positive, open, and receptive. Nancy thinks it's really important to get that information out. One thing that is going on next month is roller skating for LGBTQ youth and allies on February 12<sup>th</sup>. If anyone wants information they can contact Jennifer at Merced Pride Center or Nancy. Nancy noted that she is part of GLSEN and said it is so important that they work together since they are a small community.

John noted that the event is actually hosted by their vaccine promotional funds. Part of it will be sponsored by them. There will be information on vaccination and COVID-19. He also just gave Jennifer a shipment of N-95 masks to distribute to the public, as well as hand sanitizer. They were also distributing COVID-19 test kits but those ran out right away.

## **VI. Cultural Competence Activities**

Sharon said that one thing they want to promote more is cultural competence activities - what are they doing in terms of trying to move cultural competence forward and trying to have that cultural humility, and of course always serving our community.

Nancy shared about the gay prom happening in May at El Capitan High School. Jopeena Lee is heading that through GLSEN and they would love to have sponsorships.

Sharon commented that through our auditing, one of the things we are often asked to demonstrate is the types of Cultural Competence activities we are having in Merced.

John shared that February 5<sup>th</sup> the Pride Center is having a mixture for LGBT Seniors. They are having a luncheon from 12pm – 5pm. The Collaborative is also sponsoring that and it is part of the BHRS outreach. Nancy added that it is a 40+ group that has been organized.

If they are having a culturally specific activity, Sharon asked that they please send the flyer to Maria Orozco so that we can track what is happening in our community; and not just track but partner with it. Normally United Way does a training for the department – Sharon will be reaching out to them and her MHSA colleagues.

**Ismael Muñoz shared a link via chat:** <https://www.artsmarced.org/pridecenter>

## **VII. Linguistic Competence Interpreter Training Needs**

Sharon Jones is reaching to different people for an interpreter training because our practitioners and clinicians need interpreter training. This is an ongoing thing that we have to provide. If anyone knows of anyone who is providing interpreter training please send Sharon an email.

Sharon asked if there are any other training needs.

Fernando Granados suggested more training on trauma, specifically to the minority groups. They have seen a lot of activities occurring at the borders with the undocumented individuals that are coming in. Overall, we need training in trauma when dealing with different cultural groups – culturally specific implications for trauma.

John Aguirre suggested some kind of workshop for those that are grieving and have lost people or family members to COVID. Many have not had the opportunity to grief because of how everything has been set up. Many did not get to say good bye or have closure.

Nancy thinks that what is happening has happened. We all agree that this has been a lifetime process but we haven't been able to finalize and say good-bye. It is a whole new process and it lingers longer. All the people she has worked with being a grief counselor in the past and being tapped into recently, it is an incredible phenomenon what is going on now – nobody understands it and people are processing it, even though they have experienced it personally. It is an incredible issue right now. Nancy agrees with John and noted that this can be post-traumatic stress and needs attention.

Pangcha added that she thinks they could have a training where an advocate comes and meets with providers and workers to talk about what it is like to be in their own shoes. For example, the disabled could have a disabled advocate come to talk about it and give tips to people providing mental health services, as well as those who are incarcerated, undocumented, or LGBTQ. Mental health is a lot different for these populations. Instead of introducing yourself as a mental health worker, you should also include your pronouns for working with LGBTQ. Documentation is different when working with LGBTQ. Being culturally competent you have to meet with people who are from these communities and listen to their point of view.

John said that it goes back to language. Pronouns are an important part of the language for their community, as well as gender identity – those are parts of the language that they speak in their community. It is also about the words you use – this shows whether you are culturally competent or not. Sharon added that the words we use shape the culture and the positivity, how we shape the world, and how other people feel.

Pangcha mentioned that she learns a lot more when she listens to someone who is disabled to what it is like in their shoes and the discrimination that they face, as well as how can I help them as a mental health worker.

#### **VIII. Criterion 7: Language Capacity**

Language capacity is so that they can deliver services in a culturally responsive manner. They need to have a policy in place for how they are going to do that, and also need to have 24-hour access telephone line that is toll-free so that they can have the language capacity. This is an ongoing process, and one day that they accomplish this is by hiring staff that speak the languages, and the CyraCom system through an iPad, telephone line, or electronic technology. We have to be able to communicate with individuals so that we can have the language capacity. It is very important to understand what words mean because it might be different and you might not want to disrespect or offend. Words do change meaning and we need to meet the needs of those getting services. This is also a part of trauma-informed care because if you call a place and there's someone that you can identify with the language you feel a whole lot better. If not, it could lead to stress and a little bit of panic.

#### **IX. Criterion 8: Adaptation of Services**

Sharon Jones mentioned about focus group and meeting times. Someone may want to attend and they can't because most people need their jobs. Being able to adapt the services so that we can capture the widest and most powerful voice that we can. As Nancy spoke about earlier, change was needed for our LGBTQ+ community and the advocacy kept going forward. It may not have been everything that was stated they wanted or needed but some progress has happened. Sharon noted that one of the young men said there cannot be progress without struggle. She said that we have to be courageous enough to ask.

Nancy stated that unfortunately progress sometimes is struggle and also being an advocate. When we do that we leave that legacy and it's not easy. She said there has been progress and hopefully it will continue to grow. Nancy added that she also thinks it's very important that we be brave enough to ask, and if we are the recipients we need to be kind enough to respond in a respectful way. Ignorance only goes away when we educate – Nancy noted that it took her a couple years to figure that out but that is how we grow.

Fernando thinks that would be a needed training for some of them who maybe are out of that language that is being utilized now; not to utilize it, but to understand it. He shared that he is in the same situation where his clients utilize words he is not familiar with, and he does ask to give him definition or explain what they need by that, but it can get tiresome sometimes in the younger kids having to explain words all the time. This way they will have an idea of some of the language that youth are using, and we won't have the need to interrupt to explain to us. He suggested that maybe this could be in a panel or where the youth are doing the training for staff.

Nancy mentioned that they should also put that together as a new youth dictionary or some sort so that it's there in writing. People that may not be able to attend that training will at least have that as resource.

Fernando suggested even adding LGBTQ to that panel as well because they always use some lingo that the others don't utilize, and how it would be appropriate within that community but not appropriate for others outside of that community to utilize it.

Nancy said that it even goes beyond that as far as understanding and being open to people that are transitioning. She knows of young kids in Kindergarten, 1<sup>st</sup> or 2<sup>nd</sup> grade, that the teacher will not call them they and them. Or if a young boy is feeling that he is a young girl and the name is Sally, to allow that child. Title IV makes it a law to do that. That is what GLSEN is doing on the other side, and she thinks it's important for this group too.

Sharon noted that this criterion is about adapting the services so that they are culturally responsive. She suggested building a list of culturally responsive services in our community as something that this committee can do in addition to the trainings and workshops. Also, identifying the culturally responsive programs or services in this community, and those that are safer culturally groups. There are some historical and contemporary things where cultural groups do not feel safe and may not come forth with their voice.

Nancy suggested maybe different agencies along with different businesses that are open and welcoming to all.

Sharon said that there are glitches in the system where you may think it is and then someone may have an encounter. It would be nice to know the culturally responsive places and services.

#### **X. Substance Use Division Reports**

Sharon Jones shared that SUD recently had an external quality audit or review. They did pretty well and got pretty good accolades for their peer community, having great peer support, and connection. The state gave positive feedback. They have not come back with the official report as of yet, but they talked about how they worked together during the COVID time to keep services going for individuals living with addiction or in need of substance use care.

#### **XI. Client /Consumer Reports**

No reports. Sharon explained that we have a standing agenda item for anyone with lived experience who identifies as a consumer or client to share any concerns. There haven't been any clients join lately, probably due to COVID. Our wellness centers are getting back up to speed and people are starting to attend again. Sharon will reach out so that they could have a consumer report.

#### **XII. Updates**

Nancy noted that COVID has forced us to reexamine how we reach out to people in need.

#### **XIII. Possibilities and Success Stories**

John Aguirre reminded everyone that no matter what culture they are part of, there are LGBTQ people in that culture. They are willing to work with anybody anywhere to help educate them and make sure those individuals are served in a healthy, equitable manner.

Sharon said that with what they see initially, there may be 20 other intersections, so we should not to assume but really get to know the person.

Stefani Rosas Soto, Golden Valley Health Centers, shared that they have vaccine clinics available, including boosters. She will be sharing the information with Maria to send to everyone. Golden Valley has presentations available for organizations or schools about COVID-19 preventative measures as well as the vaccines where the community can ask questions about it. That is available to schedule if any organization is interested. In regards to cultural, a couple of months ago they changed their medical records system. In that new system they have options to change a lot of things via the MyChart app including the name they want to be called and their pronouns so that they have a little bit more inclusivity. Sometimes it is a bit difficult on their end because they have their given name on their insurance which gives some confusion; now they can associate the 2 together and know that it is the same person.

Sharon reminded everyone that they can always contact her or Maria Orozco if they think of anything – workshops or training that can moving cultural humility forward.

**Belle Vallador stated via chat:** *Healthy House through our AFYA Network Program is recruiting African-American Mothers with kids 0-5 to join our Sista CAMP group. Today, we have already 6 members who we are meeting every Friday at 3:00-5:00 pm. Please contact me at 209-724-0102 if you have somebody who will be interested or if you have questions. Thanks.*

**Ismael Muñoz stated via chat:** *My Chart. Perhaps we can train the people bringing in the patients to remind them of the My Chart options. What a cool addition.*

#### **XIV. Next Steps**

The next meeting is scheduled for Thursday, February 24, 2022.

#### **XV. Adjourned**

The meeting adjourned at 10:56am