

Summary

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

February 24, 2022
10:05 am – 11:00 am
Behavioral Health & Recovery Services Facility
Teleconference via Zoom

Present:

Sharon Jones, Derric Brown, Jose Chavez-Diaz, Daniel Garibay, Fernando Granados, Sam Hill, Melyssa Hintz, Naila Hubbard, Adam Lane, Conor Maloney, Cindy Mattox, Maria Ocegueda, Jesse Ornelas, Maria Orozco, Rocio Ortega, Nancy Reding, Sandra Sandoval, Michelle Smith, Ker Thao, Cari Urquiza, Belle Vallador, Janet Zamudio

Presentation and Discussion:

All Members

I. Check-in/Conocimiento

II. Approval of Minutes

The approval of minutes for January 27, 2022 was motioned/seconded (Fernand Granados /Sandra Sandoval) and carried.

III. Guiding Definition

Sharon reviewed the most recent guiding definition developed by this committee, and requested feedback.

IV. Strategic Recommendations

Sharon stated that this committee also developed some strategic recommendations and reviewed them. She noted that this would be shared with the group after the meeting, along with the guiding definition. Sharon listed and briefly reviewed each of the recommendations. She asked the group, what are some strategies to meet these recommendations.

Reducing Inequities:

Sharon asked everyone about some ways to reduce inequities.

Nancy Reding thinks just for the fact that Sharon is asking that question promotes the reduction of historically and futuristic type of inequities. Sharon agreed and said that unless you ask the question, no one will answer or even think about it.

Derric Brown, Veteran's Affairs, added that just having a diverse group of individuals in the room, he thinks each one of them represents a part of our population that may be underserved in some ways. Having that diversity of thoughts and taking a step back in accessing and doing a gap analysis to make sure that all of those groups. A lot of the times you can get tunnel vision just focusing on the group they are most passionate about serving but then it's very interesting the overlap that we have with certain populations. You have veterans, and then there might also be a part of the LGBTQ community, as well as the elderly. Having all of those people in the room and making sure that we are representing all of those groups first before building programing, he thinks is important. He thinks it's always important to take a step back and make sure everyone is represented. Sharon added that when everyone is represented, we have the best meaningful conversations – it opens up the lens so that we can understand what we are dealing with and where we need to be trying to go to. Sharon mentioned that we know inequities exist, and that there's a difference between equality and equity; we want to move toward equity.

Fernando Granados said that one of the things he heard in the other report was how the families appreciated when someone spoke in their language. Having individuals that can provide services in the different languages that represent their communities is a way of reduction. Sharon said that is a very noted point. It also fosters understanding because language is very important. Words have different meanings the way you say them, including the tone.

Adam Lane, LGBTQ+ Collaborative, thinks that appropriate data collection and just accruing information to learn about people there and what they are going through. We have all been very surprised before to see statistics, graphs and charts which really just goes to show you the problems or disparities are more than he could have ever expected. In particular, he thinks a good example is the Annual Homeless Point in Time Count. It's coming up for Stanislaus County and Adam was surprised to find out that they don't actually ask for any information on sexual orientation. They do ask a question about gender such as if they identify as male, female, other, prefer not to respond, and transgender. He shared that it really got him thinking because in Merced, when they have done the

Homeless Point in Time Count, they have asked for that information because it is relevant to understanding a person's state as far as being unsheltered, their mental health, and their intersectionality at play. Adam thought it was very interesting that Stanislaus County doesn't do that yet, and it got him thinking how there's not going to be any resources or consideration, particularly with people who are LGBTQ+, if we are not even asking that question. He gave kudos to Merced for asking that question during their Homeless Point in Time now. Adam mentioned about having data collection, the facts recorded, and knowing what is asked. Sharon explained about wearing the community hat. We know we have our special passions and we want to help everyone breathe a little easier. Data and demographics are very important because it tells a story. Many people dislike data and Sharon shared about her experience. If it is collected right and the right questions are asked, it really paints a good picture. It also helps with developing policies and for advocacy.

Maria Ocegueda, Community Initiatives for Collective Impact, thinks that collecting data is so important. Also, using that data and sharing it — who are we sharing it with. Are we sharing it with the people we get the data from? She thinks that is primarily very important. To do that, we also want to share it in a language that they understand; not just speaking about Spanish, Hmong, or any language, but using words that the community will understand. Getting away from using too technical research stargen, because that's not going to mean anything to the people that really need to know that information, especially for policy change, or even just community members themselves that want to know what's going on in their community. Sharon said she calls it the people's language. You really have to get down to the basic level. It doesn't mean that people are intellectual, but people speak a certain way in our community.

Pastor Naila Hubbard thinks that data needs to have a purpose, whether its ultimate goal it's just some policy change. Its purpose has to be defined so that it doesn't just become data that is collected and shared among a small population that has a bigger purpose. Sometimes she thinks that our data doesn't do that – we don't get it to the people who can actually accept policy change. That is one way we can become more equitable and receive or produce more equity in the future. Sharon mentioned that this brings up another thing: who are the gatekeepers to these resources and who has the positional power to move the voice forward and put it into action? We have to identify who those game changers are and also build relationships with those individuals.

Derric Brown agreed and thinks that can be overstated, especially in the climate we are in right now. A lot of times as helpers, we go out of this work and forget the political and power structures that try to work against some of the work we're trying to accomplish. If we don't know who those stakeholders are and what they're doing, sometimes we are working against ourselves. When we are collecting data, there should be a next objective already played out with that data. As an example, he mentioned that if he is going to identify the population, it is his goal to promote connectedness and to improve care transitions. That way, as he is finding these people, he already has a strategy in place to receive them once he has collected the information. If they fill out a survey, but there is no follow up or follow through with that particular individual, then it's almost like doing it for nothing. Derric knows we want to protect people's privacy, but he thinks we can front load some of that when we're capturing data. We have great events sometimes and rooms full of people – how do we build a follow up to those people? When we can connect to them, they are likely to be able to connect to other people in their population. He thinks a lot of times we miss opportunities to connect further. Sharon agreed, and added that once data is collected you want to go back to the people, let them know the findings, and ask how they feel about it or if it is true.

Belle Vallador, Healthy House, shared that one thing that she can see is the strong racial discrimination as a big factor and we can eliminate that. Our role as agencies in our community is to help a very strong collaboration eliminate this and advocating for people who are underserved, especially those who cannot speak English or English is not their first language. Just by interpreting for them, Belle has that experience of interpreting for people who are not able to speak and understand English. Belle just realized how hard it is. They are not open to trusting our system because of that. Health inequities come from the racial discrimination. Very strongly she would say, number one is the mindset of racial discrimination in the community. Sharon knows our Board of Supervisors sent out a proclamation again regarding racism. Sharon will bring it on the agenda for next time so we can look at what their commitment was in terms of against racism. This will be on the next agenda and it will be sent out after this meeting. When we look at inequities and things that might be impacting it, it could even be feeling like you're not welcome or valuable in places. Building a welcoming environment and being authentic is a huge part of eliminating inequities. Also, when you go to a place, there is something that alerts you that it's okay for you to be here. That's why when you go to conferences as soon as you walk in the room, just like Sharon, you might look around to see where that safe place is where you can go. That is why sometimes you'll see cultural groups sitting with each other. It's the same way when you are seeking therapy or some kind of service - you are looking for that safe person, that safe space. Sometimes inequities come because people don't see that safeness that they're looking for.

Being Informed:

Sharon shared that she has been with Merced County for 14 years and one of the number one conversation throughout the years has been about not knowing what is happening or not being informed. She asked how we can be better informed and get the word out

Naila Hubbard thinks we need a 211 line. Sharon commented that we had one and asked if it went away. Naila said that it's working but needs to be updated and made priority with information that's not outdated. It was a big project and then it just went away. She found it accidentally and said that it is a very good tool that many cities, such as San Diego or san Joaquin, use to make sure the people get all the information that's out there. Naila suggested a revamp. Sharon reiterated that Naila is requesting a revamp and

continuous update so that it's the most pertinent information in a time that it could really help people. Another thing Sharon thinks would help would be the best information and knowing what to expect with requirements for services. Sometimes people go through all these hoops and they get to a place to receive the service and are told they don't qualify because of their insurance type or symptoms not being severe enough. When people are seeking this for the first time and encounter these barriers, if they information would have been upfront, maybe they would have taken another path. Sometimes they get a little bit frustrated and may start sharing with other people about not going to that place. Sharon added that here at BHRS we have billboards, radio announcements, outreach and engagement at parks or common areas – it has to be in different core areas, not just one area all the time. Another part that can get the word out are key messengers in our community. She mentioned that Naila is one of them – she is a faith leader. In a faith community you can get the word out. Sharon encouraged everyone to keep it going to get the word out.

Derric thinks it is a really good strategy doing a landscape analysis, knowing who those strategic partners are that can help get the word out that they know are going to be champions. One of the things he is really learning is how to determine who is a champion – everyone who appears to be a champion, isn't necessarily one. When you find those champions, you accept them properly and have these hubs to get the information out. Once you can find those strategic places within every community and your attachment area, then you are able to gain more region access to people. Sharon agreed that they can all join in and support by sharing information to our listservs so that everyone can get the word out. Depending on that generation you are in, social media is tops. Some people don't even talk anymore they just text. You have to know the venue for the group you are trying to engage. Some young people are not doing conversations on the phone; they are doing a Tik-Tok, Snapchat, etc. We have to know the best communication form and style.

Fernando suggested being more physically present in the different communities. A lot of times we reach out to communities in crisis, but we don't have a follow-up or continue with that visibility within that community so people are present and being more consistent in being present with the different communities that we provide services to. Sharon agreed that the community expects us to show up. When we show up they expect us to keep showing up, not just a one-time thing or for a critical incident. She knows that's something we can all do better because it's all hands on deck when there's a critical incident. As soon as the incident is over, some times people never go back to the community or engage the community. That is going back to what Derric said – closing that loop and keeping the feedback flowing. What it comes down to is building relationships. Often times communities do not respect us because there's no relationship. It's just people who come to the community during times when you are hurting to try to help out and after that, no relationships. That is actually one of the complaints that Sharon has heard through the years, so just being mindful of how we engage.

Derric Brown thinks that's a really good point. He thinks that with the systems we all work, it's not impossible for us to maintain a level of connection, but it's improbable. He doesn't think that it's sustainable. Derric thinks that even the guidance from SAMSHA where they talk about where they meet people. When talking about meeting people where they are, our agencies have limitations that we can't overcome. He thinks the strategy needs to be building for the agency itself to build solid partnerships with community members who are already connected. If those relationships are solidified, then that will ensure that the community still gets the needs met, but yet because those individuals are connected to the larger agencies, then both parties are connected and then that becomes a more positive feedback. The challenge is finding those community partners that are boots on the ground, consistent, present, and they create sustainability within those groups and those hubs in supporting them. We end up reaching more people that way, and seems to be more efficient. Sharon said that Derric was kind of speaking to the promotor model and peer-to-peer model – building up these networks and community members to have a stronger voice in the community, such as Naila who can go back to her congregation and faith communities to inform of any messages that people need to know. A strong community peer-network is one of the best things. It's kind of like that village approach. There was always someone in the village who knew the most pertinent information. When there is someone who knows the pulse of the community is how the community stays informed.

Conor Maloney, Turning Point, agreed that it is a good point. Especially when working in a community mental health setting and depending on the size and capacity of what you're able to do the services you're providing, you get into a lot of barriers that are almost there by design. Especially when you're looking at level of care and acuity, if you have other things that factor in such as homelessness and other systems of care, it creates a lot of minimum layers. He thinks Derric made a good point with bringing everyone in, but it can be complicated to do that, and forming those partnerships and communication where you're trying to find a more integrated model or whole system of care. Conor thinks it does require to build that up. He thinks maybe the Veteran's Affairs had their own things with that as well. He shared that his brother worked for the VA and expects things that maybe Derric has experienced. Especially with a community of mental health as well, you are really dependent on those services with COVID going on and folks being on the lower end of social economics spectrum. A lot of the support is not there as sufficient or at least the consistent level.

Best Practices:

Sharon asked about some of the best practices that seem to work and that maybe we need to focus on a little more. Sometimes they're called evidence-based practices. They are extensive and sometimes have not been connected to diverse communities.

Fernando shared that one of the things they have been doing is that they have been giving clients ownership of their own treatment. They tailor it to what their needs are – giving them more ownership of the care they receive. Sharon added that if you give a person

more ownership of their care, that means that you're listening to their voices and what is working for them. Everything might not work for everybody, so they're letting you know what has worked for them in a positive manner.

Belle Vallador shared that they have been helping homeless people in the community for quite a long time. She has been handling their elder abuse grant for so many years and they were able to attend one of the MOUCCR (Communicated Coordinated Response) meetings there in Healthy House every month, even during COVID. With this meeting, they are collaborating with the CCRS, Valley Crisis, District Attorney's Office, Adult Protective Services, AAA (American Automobile Association), Human Services Agency, and Golden Valley Health Centers. Every time that they have a monthly meeting, she asks each one to present to let everybody know who is present in the meeting and what they are doing in their agency. For Belle, it is very important – it is a matter of collaboration with different agencies and helping these homeless people. They want to know, especially in Healthy House, what grants they each have so that when they run out of budget at Healthy House they can be referred to other agencies who have the money to help them with rentals or housing, for example. She thinks collaboration with different agencies is very important; it is one of the foundations in order for them to help. At the same time, even after housing the homeless clients, they always situate that they need to case manage them. At least once a week they connect to them, call them, find out what's going on, or if they have followed through with their appointments. Mental health is always an issue with the homeless people. The case management for her is very important. She said that they don't just leave them in a limbo after housing them. Sharon thinks that's a model in itself because the follow up shows how you receive a grant, pull all these partners together, you're understanding what they have to offer, and then you're working to help that person. You keep following up, keep engaging, and making it work.

Derric added that every county, or different counties have continuums of care for homelessness. It is along the line of what Vasquez mentioned on "reinventing the wheel." Sometimes we may miss opportunities when we look from the lens of just our county; sometimes there's opportunities for cross-county collaborations to ensure that, for example, federal homeless dollars come in to the county the same way they come in to Fresno or Tulare County. There's other opportunities and requests for proposals that are put on the federal registrar, that if you're not part of that continuum of care, you may miss that proposal. If you are connected to that continuum of care and stakeholders, you can potentially know about that funding that might be available homelessness or whatever issue that you might be facing within your communities. Cross-county collaboration seems like a good evidence-based strategy. In terms of collaboration, Derric thinks sometimes we just look toward collaborations within our own counties and our own system. There's other opportunities and places that are receiving additional federal dollars to support the work the community is doing. Sharon noted that he has a very good point. Sometimes people may not hear about it in our county, but if you have a wide enough collaboration, maybe they have to hear from a relative in another community, or they will get the message some other type of way.

Transforming the System:

Sharon asked what is going to be needed to transform our system. She shared that she was doing a cultural competence training yesterday and mentioned about how David Satcher talked about the mental health system is ill-prepared to meet the needs of the people to increase the access to even have positive outcomes. He wrote this report in 2001. He said that the whole system was ill-prepared to meet the needs for diverse communities and racial ethnic groups. He identified the need, the access, positive outcomes, and he went through availability, and discussed whether or not it would be culturally responsive to come in and get the care they need.

Conor thinks what is needed is a workforce that will be sustainable, who have the background, the education, and are committed to doing this in the long-term. Without that, in terms of the human factors and being able to put people into those positions, you could have infrastructure, the money, the funds, and resources, but if you don't have people to fill these positions to train and invest in the long-term, then it's not going to fulfill its mandated obligation - that requires schools, education systems, and other organizations to get people to come into these professions. Sharon thinks he is right on, speaking to some of those barriers. Things could be running smoothly, and we could think that we're making ground and then the key staff member leaves and that position stays open. One thing she has been thinking through the years is about a contingency plan because people are going to move and leave. By having a contingency plan in place when they do leave, this is what they will do to keep going and to be sustainable. Often times we do not have these contingency plans, we just have to work in the moment.

Belle agreed and said that it is very crucial and it's happening in the community, after being here for a while with Healthy House. There is a need for us and engagement is very important for her. Once we help people like the homeless, there should be that feeling of engagement. We should be able to know how to go around and maximize our efforts in helping them. As she mentioned previously, case management is one important thing after helping them and the contingency. That's the reason why we try to collaborate, even with the law enforcement team in order for us to really see what can we do outside of just placing them in temporary housing such a motel for 1 or 2 weeks – after that they are homeless again. For those 2 weeks we continue getting them permanent housing like an apartment, but it doesn't stop there. Even if they have section 8 they have to be earning something; they discovered that they need to have their social security and they might not have tried to follow up with their social security for many reasons. One of the reasons is that they don't have a permanent address. She said that they help them to that extent, including social security and even immigration issues to connect them to CCLS. Belle noted that she is talking based on experience and their job doesn't stop there.

Naila thinks that is why we need better communication, even among the stakeholders. In regards to the permanent address, if you go to a church once a month, legally in the state of California, that can be your permanent address. Belle thinks that is one thing we should tell them because they don't know that. Naila thinks we have to be better connected among the stakeholders to share information so that people can participate. Churches have a lot of resources because they have a lot of people who bring information to them, that no one else may get. They might go to a pastor first and share information. Sometimes we don't have an opportunity to share with other stakeholders because sometimes the only time to get involved is when other community stakeholders meet the numbers, as Sharon was explaining earlier. Belle shared that they are now very much involved with 15 churches in our community, under the umbrella of a program from First 5 – they have connected to them for several months already to help mothers with 0-5 kids. Most of them are housed in maternity homes and they don't stop from there as Belle is actively involved in housing them. The question is, what will be their life after maternity and staying in maternity homes, after having their babies delivered? They will be homeless because they can only stay in a maternity home for a period of time. They also help with applying to Section 8 Housing Authority. Belle expressed that it is a huge accomplishment for them, as well as a huge responsibility because it doesn't stop from one problem, it runs into several of problems as you try to include them in your system. Collaboration among agencies in the community is very important. She mentioned that participation in the MOU meetings is still very good along with the outcome. Belle would like to emphasize this among local agencies in the community. We should know what we are doing. Each one should be able to collaborate with each other in helping these people.

Sharon said that kind of information already starts the transformation. There are so many people living unsheltered and unhoused to get them mail if they are working on something. Sharon noticed the passion in Belle's voice and how she is describing things that have worked. Collaboration is working and also bringing it back to the table, talking about it, and refining it better. That is why she uses the word transformation because transactional is about doing things but not really leading to any lasting change. Sharon used Steve Jobs as an example. A part of that is speaking out and being courageous to advocate for people's needs or changes needed.

Fernando Granados thinks it's also important to be able to get the buy end from those in leadership positions within those systems. A lot of times the leadership consists of individuals who have been in the field for many years and are used to doing things a certain way. Sometimes what's going on currently may not be what is needed now – you have to be open to change from where you started to where you are now within those systems. Going back to what Conor mentioned, Sharon said people have to be there and willing to change, open to change, and have some level of awareness and worldview that change is needed. It has to be visionary leadership with visionary people who understand the community, and have that lived experience. That is why Sharon thinks promotores and peer networks work so well because they have lived it or are living it in a certain way. Leadership is strategic, the culture that is developed is strategic, the mindset, and just how you talk about behavioral health or equity. You may not want to cover it at all. Fernando shared about a recent report regarding degrees and providing education or support to the community. Sharon said it is also a cost-effective measure and shared different examples.

V. Culturally and Linguistic Appropriate Services

Agenda Item tabled.

VI. Effective Ways to Engage the Community

Discussed in previous agenda items.

VII. Current Community Needs

Discussed in previous agenda items.

VIII. Substance Use Division Reports

No reports.

IX. Client /Consumer Reports

No reports.

X. Updates

No Updates.

XI. Possibilities and Success Stories

No possibilities or success stories.

XII. Next Steps

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

XIII. Adjourned

The meeting adjourned at 11:00am

