## Meeting Summary

### Participants:
- Linda Bessire
- Matt Cervantes
- Shirley Darling
- Andria Dickerson
- Suzi Dotson
- Ann Fazil
- Jaime Fanner
- Kaying Hang
- Ben Hudson
- Diane Lampe
- Deb Marois
- Martha McClellan-Morehouse
- Cheryl Raney
- Pamela Robinson
- Tatiana Shevchenko
- Branden Sweeney
- Jeff vonKaenel
- Lee Jay Vue

### Discussion/Agenda Item | Action/Agreements
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**Welcome, Project Support Update & Introductions** |  
- Introductions – County Superintendent Dave Gordon addressed the group and congratulated each of the action teams on work plan and progress to date.
- Reminders:
  - Please RSVP to emails from Pamela Robinson when meeting reminders are sent
  - Council summaries are sent electronically – please self-print/insert in binder if desired
- Update:
  - Information shared about the *Each Mind Matters Community Engagement* funding opportunities. Partners were encouraged to apply.
  - Project shared that the Network’s leadership team would be meeting to discuss options for increased communication and information sharing among Network members (e.g. Facebook, group listserv).
  - Announced the Network’s new hashtag, #SacYouthMatter

**Cultural Competence in Mental Health: Identifying Local Resources and Needs** |  
- Project staff shared a matrix, *Who’s in the Room* outlining the many talents/skills Network members possess. The summary demonstrated the wide-array of community participation, outreach efforts, and who’s involved in this process. The resource is helpful for connecting members with one another around talents/skills/services. The document may also prove helpful in informing the work of the Council related to Strategy 8
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<thead>
<tr>
<th>Discussion/Agenda Item</th>
<th>Action/Agreements</th>
</tr>
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<tbody>
<tr>
<td><strong>Cultural Competence in Mental Health: Identifying Local Resources and Needs (continued)</strong></td>
<td>• Members participated in a small group activity to brainstorm questions about culturally competent MH resources and supports offered by member organizations and needs observed around cultural competence and mental health in Sacramento County. Members then engaged in large group discussion, see following pages for discussion summary.</td>
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| **Action Team Reports and Follow-Up** | • Introduced process by which Action Teams will report to the Council  
✓ 5 minute report from each Action Team – “Triple A” Actions, Asks, Any Cultural Competency Considerations  
✓ Council members to listen for “intersections/overlaps” – where might there be opportunities for greater coordination and leverage among Action Teams  
**The Action Team Reports and Follow-Up** summary document will be provided at a later date. |
Agenda item: Cultural Competence in Mental Health: Identifying Local Resources and Needs

Strategy 8: Ensure all services meet standards for cultural and language competencies.

Action Step: Research models of strong culturally competent community mental health and consider their application locally.

Session Goal: Begin to identify resources and needs related to cultural competency and behavioral/mental health programs and services.

Discussion Summary

Discussion/comments

- Other culturally competent service providers not in room today (e.g., La Familia, APCC)
- Most agencies have bilingual staff
- Agencies have broader scope than just mental health
- Cultural competency needs to go beyond individual staff (e.g., counselors vs. front desk staff)

Questions

- How to share strategies; get the word out broadly?
- How do we learn which words to use and/or avoid to be sensitive culturally?
- Are there unrealistic expectations that a single agency can meet the needs of all cultures?
- How to shift focus beyond clinicians?

Strategies for Increasing Cultural Competence in Mental Health Services

- Offer a specific timeframe when youth can access services e.g., “Guest House” approach
- Elders/peers are a valuable resource
- Use of art/creative forms such as Spoken Word to help people understand MH issues in a positive way
- Sensitivity/building relationship before “labeling”/diagnosing; language/words matter
- Find pockets of where individuals are trying to fill needs – help bring them together; need a mechanism to support their work – connect them
- Options beyond talk therapy are needed, art therapy for example
- Needs are tied to socioeconomic status and layers of oppression from other identities; need to look at root causes of MH issues
- Shift to valuing knowledge that is passed on through peer networks – lived experiences

Insight: “Youth culture” as the primary lens through which the Sac CCSN might focus cultural competency efforts

Recommended Next Steps

- Type and share ideas within Network
- Connect ideas in Action Teams
- Brainstorm ideas for how to address needs
- Share with other organizations
- Share with MHSA OAC Cultural Competence Subcommittee – Ann Fazil is willing to do this
Council Brainstorm

Asset Mapping: What culturally competent mental health resources and supports do you use or offer? (Please include agency name)

San Juan USD
- School counselors, social workers, psychologists
- White House Counseling Center – therapy
- Special Education services
- Parent Resource Centers
- Family and Community Engagement

Christian Partnerships, Inc.
- *Kitchen Table Talks* – uses a Trauma Informed Care approach; supports for African American women who have experienced trauma

Gender Health Center
- Culturally competent LGBT providers with an emphasis on transgender communities
- 30% Spanish speaking providers
- Mental health services
- Advocacy services
- Healthcare enrollment/navigation
- Health care services

Tubman House
- Resident support group

Wind Youth Services
- Mental health services for TAY and youth experiencing homelessness
- Referrals
- Outreacht to youth
- Shelter for youth ages 14-17
- Counseling – free for youth in need; sliding scale for all others
- Family counseling to help families

Another Choice, Another Chance
- Offers youth counseling sessions at Kinney High School 2 times per week

MAS-SSF (Muslim American Society Social Services Foundation)
- Counseling
- Advocacy
- Translation Services – Farsi, Urdu, Arabic, Afghan Languages
- Faith Connections
- DV, Substance Abuse

Fathers and Families of San Joaquin

On TRACK - Community Alliance for CLAS – Project
- Culturally and Linguistically Appropriate Services/training

Gender Spectrum
- Training for school personnel around gender sensitivity
What needs are you seeing in our county around cultural competence and mental health?

System Improvements
- TAY fall in a gap between adults and children system of care – need more culturally competent services for TAY
- Mandated cultural competency training
- Appropriate assessment tool for various cultures
- ID resources for funding Cultural Competency training

Appropriate Support for People with Mental Health issues
- Easily accessible and tiered multi-levels of support: universal (general population), early interventions, intensive
- More direct, specific strategies and interventions that can be used in schools for school-age students
- Uplift peer advocates so consumers are seeing a reflection of themselves when seeking services
- Access to services tend to be based on socio-economic status; more services needed for less fortunate
- More support for families and people who are at risk of homelessness or who are homeless
- More support for individuals who feel “stuck or beat-down” due to situations out of their control
- Support services for marginalized persons to attain higher education (i.e., single parents, formerly incarcerated, etc.)

Community Engagement
- Advocacy to improve system of cultural competency
- Visibility/outreach
- Door-to-door distribution of information
- More people speaking out positively about mental health in creative and culturally competent ways