Mental Health Services Oversight and Accountability Commission
Cultural and Linguistic Competence Committee

Objectives and Activities 2018

The Mental Health Services Act (MHSA) is aimed at improving the mental health of California communities by transforming the public mental health system through cutting edge programs and services and enhanced infrastructure. One of the critical elements of this transformation is the reduction of disparities for historically marginalized and unserved, underserved and inappropriately served communities. Given this key principle, the Mental Health Services Oversight and Accountability Commission (MHSOAC) has engaged in efforts to support the ongoing commitment to this goal. To help guide these efforts and ensure that the work of the MHSOAC reflects the values of diversity and cultural responsiveness, the Cultural and Linguistic Competence Committee was formed. The CLCC provides input and feedback on the activities of the OAC.

For 2018, the CLCC seeks to continue to provide guidance on MHSOAC key projects and activities. Four major objectives and corresponding activities for the CLCC are outlined below.

Objective One: Identify Data Opportunities

To ensure that projects are responsive to the dynamic and diverse needs of California communities, the MHSOAC must engage in ongoing research to identify specific populations that experience disparities in targeted outcomes. A thorough exploration of disparities considers a range of under-, un-, and inappropriately served groups including ethnic minorities, LGBTQ, veterans, homeless individuals, immigrants and refugees, women, deaf and hard of hearing, individuals with disabilities, and others. Consultation with CLCC may assist in identifying disparity populations that may not be identified in published research. To further ensure that disparate groups are identified and their needs are explored, the CLCC will:

1) Clarify what is meant by "disparity:" Disparity groups may include those who are historically marginalized and/or face inequities in social and economic conditions or racism and discrimination. Alternatively or in addition, these may be groups whose outcomes are less favorable than the overall population average, whose outcomes are significantly less favorable than that of a specific reference group, or who are overrepresented an in a negative outcome group relative to their representation in the population (disproportionality).

2) Identify diverse sources of data: The CLCC will assist the MHSOAC in efforts to provide ongoing monitoring of disparities in mental health by identifying relevant data sources and providing recommendations for culturally responsive research and

evaluation. Some communities are not included in statistics, for example, many large scale studies do not include Native American participants and thus disparities for this population are often not measured or identified. The CLCC may provide recommendations for identifying these groups and exploring mental health needs of these communities. Furthermore, disparities research involves continually updating data to include more current data and to identify the needs of new and emerging communities (such as new immigrant or refugee groups). CLCC will be instrumental in identifying emerging groups that experience inequities in mental health for further research.

3) Provide input on data collection, analysis, and visualization strategies for engaging in ongoing efforts to identify disparities and monitor and evaluate strategies for disparities reduction through MHSA.

Objective Two: Provide Feedback and Guidance on MHSOAC Special Projects

The MHSOAC engages in many activities and policy projects intended to provide a deeper understanding of key issues in mental health for California communities. The CLCC helps to ensure that these projects address the issues of diverse communities through review and input during critical stages of project implementation. For the 2018 year, the CLCC will provide input regarding the Schools and Mental Health Project and the Suicide Prevention Project. The following are the activities and timelines related to this objective:

- Provide support and recommendations on policy projects. In collaboration with project leads, the CLCC will review progress on policy projects and provide feedback and recommendations.

- Identify disparity communities for policy projects and other MHSOAC efforts. The CLCC will brainstorm communities with specific needs in the topic areas raised through MHSOAC work.

- Provide feedback regarding the process of the project and content of reports. Suggestions regarding data collection, interpretation, community engagement, and project recommendations may be provided by the CLCC, in particular regarding high need groups.

Objective Three: Community Engagement

The effective implementation of MHSOAC special projects and stakeholder processes is enhanced through the participation of diverse groups. As community leaders from diverse groups, the CLCC members are in a unique position to assist in outreach and engagement of stakeholders.

- **Assist in conducting outreach to community stakeholders**. Data gathering includes the input of diverse communities, particularly communities most affected by the topic being studied. The CLCC will assist in reaching out to community leaders to inform special projects through participation in data gathering (interviews, stakeholder meetings, community forums, and focus groups).

Objective Four: Develop Priorities in Disparity Reduction Efforts

Increasing evidence points to the role of implicit bias in exacerbating disparities in mental health treatment, access to care, and mental health outcomes. The CLCC will discuss and propose strategies for addressing implicit bias in the public mental health system.

- **Identify points of encounter within the mental health system in which bias may play a role in disparities.** A brainstorming session will identify experiences of bias in mental health and the contexts in which these are most prevalent.

- **Provide recommendations for addressing implicit bias** at specific points of encounter.