

Summary of the Community Engagement Efforts to Support the Development of the Immigrant/Refugee Stakeholder RFP

Consistent with prior stakeholder contracting projects, staff facilitated a number of public engagement efforts to learn more about immigrant and refugee communities and to collect feedback from individuals as well as those working with and on behalf on these populations.

A survey was administered to learn more about the types of county and community based organizations located across the state that are serving immigrant and refugee communities in California. Public listening sessions were conducted in San Diego, Los Angeles, Sacramento and Oakland to hear from individuals within the community about their experiences to better understand their needs that could be addressed through training, outreach and advocacy efforts.

Staff also received additional feedback submitted via email or by telephone primarily by those who were not able to attend an in-person listening session.

Information Survey

Over 50 surveys were received from agencies serving individuals and families across the state. Surveys asked respondents to provide their input regarding what services they provide, the most pressing needs of the populations they serve, how they measure outcomes, the current barriers to delivering effective services, and how organizations would utilize additional funding. In addition they were asked about service gaps, outreach and collaboration efforts among organizations, and training efforts.

Unmet Need

Respondents identified a number of unmet needs of the immigrant and refugee communities including:

- Screening and assessment of mental health condition
- Substance use disorder services
- Culturally sensitive prevention and early intervention services with efforts focused on stigma and discrimination reduction
- Systems navigation and personal advocacy for victims of human trafficking, domestic violence, housing, and mental health services
- Development of educational resources and outreach materials to specific audiences
- Quality immigration legal services

Outcomes and Measures

Several respondents identified specific outcomes they work toward and how they measure progress of their members. Some individual level outcomes included decreased symptoms of trauma, increase in overall wellbeing, and reduction of homelessness. System level outcomes included increasing access to culturally and linguistically appropriate services, engagement of adults and older adults in available resources, and increasing the availability of interpreters and building the capacity of grassroots organizations.

Structural Barriers

Survey respondents identified structural barriers to the delivery of effective services and supports for the immigrant and refugee populations which they serve. They included:

- Stigma and discrimination
- Fear of state and county systems
- Paperwork requirements and waitlists
- Lack of qualified matches among providers and interpreters
- Transportation and childcare needs
- Siloed services
- Lack of acceptance of alternative practices such as art, meditation, cultural or faith practices, or support groups
- Expense when individuals are without health care

Potential Opportunities

Respondents were asked what immigrants and refugee service organizations would do with additional funding.

- Health navigation to increase awareness of and access to available mental health services, transportation, interpreters, child care services, housing and employment
- Diversity, cultural competence, and cultural humility training to service providers
- Provide flexible and accessible services at community centers, neighborhood clinics, and churches
- Conduct more outreach to schools and community centers to educate the immigrant and refugee population in normalizing mental health issues
- Improve screening and assessment

Community Listening Sessions

More than 200 individuals attended these sessions and provided feedback about barriers to accessing services and supports. Through these open discussion forums, participants identified a number of individual and systemic challenges to accessing and receiving care including:

Cultural/Social barriers

Consistent across each listening session were challenges related to seeking and receiving services. Attendees shared a number of concerns related to cultural and social structures including:

- Lack of awareness of available services and supports, how to access services and supports, how to navigate systems, and an individual's rights when seeking or receiving services.
- Difference in language, definition, and cultural understanding of mental health including presentation of signs and symptoms, conflicting definition of causes of and treatment for mental health, and how to communicate about mental health
- Understanding treatment options or ability to access alternative healing sources rooted in cultural practice. Individuals are more likely to reach out to informal support networks (family, friends, faith community) thus delaying treatment, resulting in escalation or crisis
- The stigma associated with mental health remains a significant barrier to accessing services. Individuals who may be seeking or receiving services feel that they are bringing shame to the family, exposing private family matters, or causing the family to be looked down upon in their community

Structural barriers

Many individuals discussed the lengthy and often complicated process for receiving services as a result of:

- Lack of access to appropriate and culturally and linguistically competent services in native languages and dialects, lack of access to quality interpreters, and shortage of diverse and inclusive staff and providers
- Lack of access to culturally sensitive services and supports, provider bias and discrimination, and communication related to cultural nuances. This includes heavy reliance on the western medical model that does not account for the role of religion, spirituality, or cultural values and practices.
- Lack of insurance and/or eligibility for mental health services
- Cost of obtaining private services
- Long wait times, rigid clinic hours, rushed and impersonal assessments, emphasis on receiving only billable services, limited number of available sessions
- Lack of transportation and/or childcare supports
- Lack of coordination with social or supportive services including medical/dental, legal, housing, and employment supports

Barriers related to fear and distrust

Participants discussed challenges related to fear and distrust of county, state and provider systems including:

- Fear of personal safety related to immigration and documentation status
- Fear of disclosing information in exchange for services
- Involvement of child welfare; removal of children from the home as a result of receiving mental health services
- Detainment or incarceration
- Inability to trust that systems of care will help them

Resource limitations

Participants also shared frustration with limitations to providing the necessary services and supports in their communities. Common challenges included:

- Limited number of staff to meet the need in the community
- Concern that funding opportunities were not available to local, community based organizations; many awarded state and county programs rely on the support of community based organizations to serve the immigrant and refugee communities but do not compensate providers accordingly
- A need for increased capacity and awareness of community partners to support linkage to a broad range of additional comprehensive supports including housing, food, school/education resources, medical and dental care, criminal justice navigation, legal and immigration services, job training, and language acquisition
- Support for strengthening and expanding community-based organizations to increase capacity to serve as information and assistance hubs, conduct assessments and screening for individuals in safe community spaces, and provide warm handoffs and referral supports

