



Cultural and Linguistic Competency Committee Teleconference Meeting Summary
Date: Tuesday, August 23, 2022 | Time: 3:00 p.m. – 4:30 p.m.

MHSOAC
700 S Flower Street, Suite 1000
Los Angeles, CA 90017

Additional public locations included 800 W. 6th St., Suite 750, Los Angeles, CA 90017; 3854 W. 54th Street, Los Angeles, CA 90043; 3731 Stocker St., Suite 211; Los Angeles, CA 90405; 237 East Hueneme Road, Port Hueneme, CA 93041; 1616 Capitol Avenue, Sacramento, CA 95814; 1970 San Juan Road, Sacramento, CA 95833

****DRAFT****

Committee Members:

Staff:

Other Attendees:

Mayra Alvarez, Chair Senait Admassu* Luis Garcia* Etsegenet Teodros* Yia Xiong* Richard Zaldivar*	Donna Jones Amariani Martinez Tom Orrock Lester Robancho Nai Saechao	Marcy Adelman Dannie Casena Stacie Hiramoto Mandy Taylor
------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------	-------------------------------------------------------------------

*Participation by phone

Committee members absent: Estrella Amaro-Jappesen, Claire Buckley, Veronica Chavez, Eugene Durrah, Jim Gilmer, Nahla Kayali, Jonathan Lee, Lee Lo, Gladys Mitchell, Vice Chair, Yolanda Randles, Corinita Reyes

Welcome, Announcements, and General Public Comment

Commissioner Mayra Alvarez, Committee Chair, called the meeting to order at approximately 3:00 p.m., welcomed everyone, and reviewed the meeting agenda.

Amariani Martinez, MHSOAC staff, reviewed the meeting protocols, called the roll, and stated a quorum was not achieved.

General Public Comment

No members of the public addressed the Committee.

Agenda Item 1: Action – Approval of Meeting Minutes

Chair Alvarez tabled this agenda item to the next meeting due to the lack of a quorum.

Agenda Item 2: Presentation – Equity in Action: LGBTQ HHS Network (Invited)

Presenters:

- Dannie Casena, Network Director, California LGBTQ HHS Network
- Mandy Taylor, Behavioral Health Equity Manager, California LGBTQ HHS Network

Chair Alvarez stated the Committee will hear a presentation on the LGBTQ Health and Human Services (HHS) Network's current strategies to address the mental health and wellness needs of the LGBTQ community. She asked the presenters to give their presentation.

Dannie Casena, Director, California LGBTQ HHS Network, provided an overview, with a slide presentation, of the mission, vision, and current strategies of the LGBTQ HHS Network for bringing equity into the mental health system.

Mandy Taylor continued the slide presentation and discussed the work and advocacy being done within LGBTQ communities while addressing the inequities experienced in accessing behavioral and mental health services. She reviewed the resources, partners, and task forces of the #Out4MentalHealth Project, which is funded by the Commission and is in its fifth year. The California LGBTQ HHS Network will be hosting a virtual convening on August 29th and 30th. Registration is free.

Dannie Casena stated the California LGBTQ HHS Network #Out4MentalHealth Project is part of an administrative state advocacy group. It is important to be represented at various tables in doing research to identify health disparities experienced by the community. Research study themes are mental health barriers and mental health distress, which often leads to self-harm. It is important to bring a mental health care lens to the table and to ensure that it is equitable to the LGBTQ community as equity measures are identified. Sexual orientation and gender identity (SOGI) data collection has not yet taken place but it can now start to be collected and measured going forward for future analysis.

Discussion

Committee Member Garcia agreed that data collection is important to better understand how to provide services for unserved and underserved populations. UCLA studies nine or ten years ago found that the LGBTQ population is at high risk to consider or attempt suicide, especially LGBTQ youth, and that this population tends to stay in treatment for only seven to nine sessions. Also, UCLA found that many providers not only do not have knowledge and experience, but also lack the cultural and linguist component in order to effectively serve these populations across the state. He asked if the California LGBTQ HHS Network had new data on these issues.

Mandy Taylor stated the #Out4MentalHealth research findings agree. Findings show the more intersections an individual has, the more challenges to access to care. She suggested reviewing the #Out4MentalHealth reports because they contain a lot of data specifically around access to care and suicidality.

Committee Member Garcia stated penetration rates are good but it is also important to track utilization of services including families.

Dannie Casena stated the State of the Community Report has rich data dating back to the 2018 report. New research findings at UCLA, USC, UCSB, and UC Merced concur with the findings in the State of the Community Report on lack of access to services, lack of language and cultural competency, and barriers due to intersecting identities.

Committee Member Zaldivar stated The Wall Las Memorias recently completed the first round of programs with the Los Angeles County Department of Mental Health, providing LGBTQ prevention services to the TAY population. Findings include the need to look at not only addressing the LGBTQ TAY individual, but providing support to family in addition to providing support to community, especially for communities of color and particularly for the Latino community. It is important to bring in people of color to conduct that research because of cultural differences. It is also important to promote local programs, wraparound programs, and family centers to address disparities.

Committee Member Admassu stated, within the immigrant community, mainly those of African descent, the stereotype is still there where individuals cannot even speak about sexual orientation. Some SOGI terms are offensive to different cultures when those terms are translated. The other issue is mental health service providers are not trained in the needs of various cultures. Clinical service providers should partner with local community-based organizations that are experienced in working with communities and can provide training.

Committee Member Teodros stated the presentation materials included data for mental health consumers and health care disparities. She asked if that includes individuals who are in locked facilities.

Mandy Taylor stated the assumption that that information is not being collected as part of the research studies, although progress has been made in collecting SOGI data in state facilities.

Chair Alvarez stated the CLCC has discussed the need for a more expansive definition of mental health services and supports. The presenters stated gender-affirming care is mental health care. Having access to services that affirm gender identity is important. She stated the CLCC is interested in identifying opportunities to bring greater collaboration, advocacy, and educational efforts for bringing an expanded definition to the Commission for consideration.

Chair Alvarez stated intersectionality issues are important. Intersection with immigration and immigrant communities and recognizing the more information immigrant communities have about their rights, policy changes, and updates where there might be opportunity to inform the LGBTQ immigrant community is important, given the changes in the budget. This is a message for all communities, not just the immigrant community. It is important to consider ways in which information can be shared with each other and that the CLCC can be seen as a partner and a resource and that the California LGBTQ HHS Network can be seen as a partner too.

Public Comment

Marcy Adelman, Ph.D., LGBTQI Longevity Consultant and Policy Advisor at Dr. Marcy Adelman, stated the presentation was specifically about Black and indigenous people of color (BIPOC) transgender youth. The speaker asked about programs and strategies for the older adult population. The speaker stated they will send information to staff to share with Committee members.

Mandy Taylor stated no #Out4MentalHealth Programs are focused on elders or youth, although many of them have both. She stated there is more data on youth and college students since data is collected in the education system, although the older adult population also has a higher need. Elders are at risk particularly around isolation or being of an age where they never came out or they had to go back into the closet as they aged. The State Department of Aging has a great report, which includes steps to support the mental health of elders and is inclusive of the LGBTQ community.

Stacie Hiramoto, Executive Director, Racial and Ethnic Mental Health Disparities Coalition, thanked the chair for inviting #Out4MentalHealth to present today. The information provided was helpful. One of the California Reducing Disparities Project's (CRDP's) Implementation Pilot Projects (IPPs) is an LGBTQ program that serves older adults.

Agenda Item 3: Presentation – Transition Age Youth (TAY) Advocacy Procurement Planning

Presenters:

- Tom Orrock, Chief, Community Engagement and Grants
- Lester Robancho, Health Program Specialist

Chair Alvarez stated the Committee will hear a presentation on the TAY Advocacy Request for Proposal planning, will hear feedback received from TAY Listening Sessions, and will provide input on strategies to engage TAY from underserved communities including BIPOC TAY in preparation for the next round of funding. She asked staff to give their presentation.

Tom Orrock, Chief, Community Engagement and Grants, provided an overview, with a slide presentation, of the background, advocacy contracts, and TAY Request for Applications (RFA) goals.

Lester Robancho, Health Program Specialist, continued the slide presentation and discussed the feedback received at the two TAY Listening Sessions held on August 2nd and 4th. He asked three questions on strategies for engaging TAY for feedback as follows:

1. What priorities should we consider for this RFA from an equity perspective?
2. What are the most important characteristics of an organization that advocates on behalf of diverse TAY?
3. How do we ensure that TAY from marginalized backgrounds are reached to determine mental health needs?

Mr. Orrock asked Committee Members to send answers to these questions and other feedback to staff.

Discussion

Committee Member Garcia stated all communities want culturally appropriate services and supports. It is important, prior to any more listening sessions, to engage with counties to learn the capacity for new clients and families.

Committee Members provided input on Question 2 – the most important characteristics of an organization that advocates on behalf of diverse TAY as follows:

Committee Member Zaldivar stated all communities are integrated together and are not segregated. Awardees to the RFA should be diverse and rooted in local communities, ensuring that all the elements of the community are integrative to help build up the capacity of TAY, families, work environments, and faith or spiritual centers so that, when serving TAY, it is also building up the capacity of the community to support that person. Awardees should have the capacity to integrate all elements that make up that prescribed community.

Mr. Orrock stated the Commission has typically contracted with a state-level agency asking them to collaborate and coordinate services with local organizations. The last RFA asked the state-level agency to collaborate with 15 local organizations in the different regions of California. Feedback received was that it would have been better to let the state-level agency determine who to collaborate and connect with as opposed to specifying certain numbers in certain regions.

Committee Member Zaldivar stated it is important for local community organizations that are applying to put together a statewide effort. What ends up happening is the individuals who attend the meeting in Sacramento get funded so there are communities and regions that do not have a voice at the table. It is important to empower local community organizations to formulate a statewide partnership and to roll out a grass roots effort to be able to apply and compete.

Committee Member Garcia agreed and added that open conversations with communities is important for how to be more comprehensive and holistic in all approaches, especially with the huge psychological impact of the COVID-19 pandemic. Integrating all the elements in the community with families, neighbors, work environments, and faith will create protective factors that come from the community. Due to the workforce crisis, staffing is not available to meet the needs of communities for mental health services. It is important to reframe and to think outside the box to innovate the system with prevention components plus integration and other effective elements.

Committee member Garcia stated characteristics for these agencies are someone with integrity, experience, knowledge, and with an open mind to collaborate and to learn from the communities they serve.

Committee Member Zaldivar stated the need to consider the perception that the LGBTQ community only exists in West Hollywood. This is not true. The majority of LGBTQ individuals in Los Angeles are Latinos who live throughout Los Angeles County. It is important to those individuals and neighborhoods to have communities with culturally-appropriate services that speak their language. The same goes for other communities. When the process is decentralized in allowing organizations and local communities to compete, it brings a voice closer to the people of their community.

Committee Member Admassu stated it also needs to be looked at from a practical perspective. The COVID-19 pandemic changed the way things are done. It is impossible for one state organization to touch all communities. It is better to empower community-based organizations with hands-on experience.

Chair Alvarez asked about the deadline to provide feedback to these questions.

Mr. Orrock stated the deadline for feedback is September 2nd. He stated the RFA outline will be presented at the September 22nd Commission meeting. Another opportunity for public comment will be provided at that meeting. A Focus Group will be conducted in Stockton on Friday at the Child Abuse Prevention Council. Feedback received will be incorporated into the RFA outline.

Chair Alvarez stated Committee Members provided feedback today for the need to have demonstrated commitment to building local capacity to engage in statewide advocacy so that it is not just organizations focused in Sacramento, and to building community power in communities across the state, centering the experiences of diverse communities, and making sure that the RFA provides priority to organizations that serve TAY from diverse communities.

Chair Alvarez stated next steps are for staff to send the PowerPoint slides to Committee Members, including the staff questions about strategies for engaging TAY with the date of next Friday, September 2nd, as the deadline, as well as the event the California LGBTQ HHS Network is hosting and the information for the CPEHN convening.

Chair Alvarez agreed that it is important to ensure that this new RFA is centered in equity and that staff will come back to the CLCC to demonstrate where Committee Member feedback was integrated into the RFA.

Adjourn

Chair Alvarez stated the next CLCC meeting date will be held on September 8, 2022. She adjourned the meeting at approximately 4:45 p.m.