MULTICULTURAL SYMPOSIUM REPORT

CONFERENCE HELD AUGUST 20, 2015
NEWPORT BEACH MARRIOTT
NEWPORT BEACH, CALIFORNIA
WELCOME LETTER

NAMI California is dedicated to continuously improve our ability to serve individuals living with serious mental illness and their families across the state, and to finding solutions to cultural, linguistic, and other barriers that prevent individuals and families from accessing services. In order to best serve our growing membership and reach communities that have limited access to resources, we have created the Multicultural Symposium as an annual event to help give voice to diverse and underserved communities, address community challenges while optimizing their unique strengths, and eliminate mental health care disparities.

NAMI California and our Board of Directors launched our second Multicultural Symposium in 2015 as part of our ongoing strategy to foster an open dialogue in order to serve the ever-changing needs of communities throughout California. The 2015 Multicultural Symposium brought together community leaders from across our state to discuss problems and find solutions to increase resources, ensure access, and promote culturally appropriate programs in diverse communities.

I thank all of our supporters, and would like to express our gratitude to everyone who has contributed to the tremendous success and evolution of our efforts and vision. I am proud to say that we heard from a wide range of cultural and professional experts who discussed the challenges faced by the unserved and underserved cultural communities as well as various methods to provide better care.

This report will provide an in-depth look at the Multicultural Symposium, including highlights from panelists and presenters, as well as feedback gathered from diverse communities in the breakout sessions. We know there is still more work to be done, and we hope you’ll continue to stay engaged in this initiative as we strive to reduce mental health disparities for individuals and their families in the wonderful multicultural communities we serve.

Sincerely,

Jessica Cruz, MPA/HS
Executive Director
NAMI California
2015 MULTICULTURAL SYMPOSIUM COMMITTEE & SPEAKERS

2015 MULTICULTURAL SYMPOSIUM COMMITTEE MEMBERS

Halsey Simmons, MFT
Mental Health Director
Solano County Mental Health

Leticia De La Cruz-Salas, LCSW
Mental Health Clinical Supervisor
Solano County Health & Social Services

Roanne DeGuia, LMFT
Mental Health Clinician/Filipino Outreach Coordinator
Solano County Health & Social Service Behavioral Health Division

NAMI AFFILIATE BEST PRACTICES PANEL

Kimberly Knifong
Office of Health Equity
Community Development and Engagement Unit

Chris A. Roup
Executive Director
NAMI Fresno

Denise Lancaster-Young
Alpha Kappa Alpha (AKA)
Fresno Chapter

Brenda Scott
Executive Director
NAMI Mt. San Jacinto

Jazmin Rubio
San Jacinto School Board Member
St. Anthony Catholic Church, Volunteer

KEYNOTE SPEAKER

Dr. William R. Beardslee, MD
Director, Baer Prevention Initiatives and Chairman Emeritus
Department of Psychiatry, Boston Children’s Hospital
Gardner/Monks Professor of Child Psychiatry Harvard Medical School

OPENING SPEAKER

Congresswoman Grace Napolitano
Representing the 32nd District of California

SOLANO COUNTY PANEL

Sandra Poole, MPA
Deputy Director
California Black Health Network

Sally Tran
Consumer

Dr. Hendry Ton, M.D., M.S.
Associate Professor
UC Davis Health System
Department of Psychiatry and Behavioral Science
ABOUT NAMI CALIFORNIA

NAMI California is a grass roots organization of families and individuals whose lives have been affected by serious mental illness. We advocate for lives of quality and respect, without discrimination and stigma, for all our constituents. We provide leadership in advocacy, legislation, policy development, education and support throughout California, and are dedicated to the strengthening of local grass roots organizations. We provide updated information and support to local Affiliates and are here to help organize new Affiliates.

NAMI California oversees 62 local Affiliates and represents 19,000 people to the California Legislature and Governor on mental health issues. Our work in the community encompasses educating families, professionals, and the public about the recent explosion of scientific evidence that shows serious mental illnesses are neurobiological brain disorders; providing a strong, coherent system that offers a continuum of care for the persistent, long-term needs of people living with mental illness; advocating for increased research to uncover causes and new, effective treatments; and striving to eradicate stigma.

MULTICULTURAL SYMPOSIUM

The following sections will provide more information from the speakers mentioned above and an in-depth discussion of the events throughout the Multicultural Symposium. We are proud to announce our inspiring lineup of speakers, who have all made significant changes in their communities and throughout the state of California. Their expertise, experience and passion for effecting positive change provide outstanding examples of what we can all achieve together as a global community.

FROM THE SYMPOSIUM:

“I thought each session was extremely helpful.”

– Conference Attendee
MORNING SESSION

OPENING SPEAKER

NAMI California was honored to welcome Congresswoman Grace Napolitano as the opening speaker to kick off the Multicultural Symposium. Her passion and involvement with mental health issues began while serving on the Norwalk City Council, and continued while she served as Assembly Member of the California State Assembly while Congress began shutting down mental health facilities in the mid-1980s.

Approximately 15 years ago, out of concern for the direction of mental health, Congresswoman Napolitano began a small volunteer-based Mental Health Consortium to discuss important issues and address policy matters. The consortium has grown to 50-70 individuals, and includes members of varying backgrounds, specialties and professions. The consortium focuses on the mental health matters of all and specific subgroups such as seniors, veterans, and children. The consortium is credited for their advocacy work, which resulted in amendments to the Affordable Care Act on the use of linguistically appropriate language.

In 2001, Napolitano secured funding assistance from SAMHSA to launch a mental health program for Latino youth. The program aimed to reduce suicides among school-age Latinos, who had the highest rate of suicide for children ages 9-11 years. Onsite clinicians were placed at one high school and three middle schools to offer support to students, parents and teachers. Today, this program is now in 26 schools with the support and assistance of Los Angeles County.

Today, Congresswoman Napolitano is actively reaching out to celebrities and leaders in the professional sports industry for their support and partnership in addressing the mental health needs of their communities. She continues to advocate on the congressional level for funding to support youth programs.

Congresswoman
Grace Napolitano
Representing the 32nd District of California
MORNING SESSION

KEYNOTE SPEAKER

Dr. Beardslee is outstanding as our Keynote Speaker. His presentation, “Looking Backward and Looking Forward: Reflections on the Second NAMI California Multicultural Symposium,” highlighted family-inclusive approaches to achieving wellness for parents and other family and community members.

Dr. Beardslee’s presentation focused on the preventive power of the Family Talk. The Family Talk is an organized, inclusive family conversation as a means of opening communication among family members, mental health intervention, healing, and therapy. The Family Talk can be a crucial means of checking in with every family member and ensuring that those who need extra help and support are taking the steps to maintain mental health and wellness.

The Family Talk Strategy

Dr. Beardslee discussed proactive strategies in developing family understanding of depression and enhancing child and family resiliency, which tend to be dependent on family unity and good parenting as well as community level support and quality mental health care. Open dialogue and communication among family members is of the utmost importance in preventive care starting from early childhood.

Dr. Beardslee emphasized the importance of mental health awareness on four levels:

1. Individual
2. Family
3. Caregivers/Caregiving Organizations
4. The Larger Community

Dr. Beardslee’s approach achieves successful preventive interventions through treating parents, providing help with parenting, and using a multi-generational method to achieve family unity and resilience. Regular family meetings using the Family Talk approach promotes family communication as the catalyst for wellness, unity and resilience.

The goal of resiliency in youth includes the child’s intense involvement in age-appropriate developmental challenges (such as school, work, community, religion and/or culture), establishing deep and meaningful relationships with family, peers and adults outside the family, and instilling self-understanding and mindfulness. In parents, the same goal of resiliency may look like a strong commitment to parenting, openness to self-reflection, and a commitment to family connections and a growth of shared understanding.

By focusing on the family unit as a means of addressing mental health disparities in multicultural communities, the Family Talk is an evidence-based method of preventive intervention for families who may be at risk for severe mental illness, and a formidable step toward making mental health awareness and treatment universally available and accessible.

Dr. William R. Beardslee, MD
Director, Baer Prevention Initiatives
and Chairman Emeritus Department of Psychiatry, Boston Children’s Hospital
Gardner/Monks Professor of Child Psychiatry Harvard Medical School
MORNING SESSION

SOLANO COUNTY PANEL – INNOVATIVE APPROACH TO TRANSFORMING CARE AT THE COUNTY LEVEL

Titled “Mental Health Interdisciplinary Collaboration and Cultural Transformation,” the Solano County Panel members explained the innovative methods and strategies their county is implementing to address mental health disparities within their community. The panel was moderated by Sandra Poole, MPA, Deputy Director of the California Black Health Network.

The panel consisted of a diverse group of passionate individuals with a shared interest in transforming mental health care within Solano County, including:

- Sally Tran, Consumer
- Leticia De La Cruz Salas, LCSW, Mental Health Services Administrator, Solano County Health & Social Services Behavioral Health Division
- Roanne DeGuia, LMFT, Mental Health Clinician/Filipino Outreach Coordinator, Solano County Health & Social Services Behavioral Health Division
- Halsey Simmons, MFT, Health and Social Services Deputy Director and Behavioral Health Director, Solano County Health & Social Services Behavioral Health Division
- Dr. Hendry Ton, MD, MS, Associate Professor, UC Davis Health System Department of Psychiatry and Behavioral Sciences

Sally Tran, who grew up in Solano County, shared her challenges battling several mental health conditions as a person from a low income area, who is a member of the queer community and from a minority group where she lives, as well as the challenges in accessing services for diverse communities.

Leticia shared her personal story as a family member and her desire to help shape mental health services in Solano County. Her leadership with Solano County’s Latino Workgroup led to proposals for effective and efficient services for the Latino community.

Roanne, the only Tagalog speaking staff with Solano County, talked about the mental health disparities in the Filipino community. Through her professional experience with immigrant Filipino families, Roanne became familiar with the various outcomes of the migration process. She has observed migrants who have successfully connected with their social networks and adjusted well to their new environments. Still, others endured the loss of social status and connection with families and friends, which can lead to isolation, depression and cultural shock.

FROM THE SYMPOSIUM:

“The Solano Panel meant a lot to see the involvement of much younger people.”
– Conference Attendee
Halsey provided an overview of Solano County’s rebuilding and restoration process after their county services were cut drastically during the Great Recession. Their model is unique in that it implements cultural competency training, awareness building, work groups for underserved communities, and the implementation of the Mental Health Interdisciplinary Collaboration and Cultural Transformation Model. Solano County used their opportunity to revisit the mental health services planning and process to dedicate their innovative project funds toward the model in collaboration with the UC Davis Center for Reducing Health Disparities.

Dr. Hendry Ton shared the model developed by the Solano panel. This collaborative model’s goals are to improve culturally and linguistically appropriate mental health services for consumers from three underserved communities (Latino, Filipino American, and LGBTQ); establish collaborative partnerships between Solano County communities, the behavioral health system, and community-based organizations; increase workforce diversity in staff and leadership positions; and develop organizational policies and support systems to ensure and sustain cultural and linguistic competency.

The audience was given the opportunity to ask the panel questions. Below are a few highlighted questions and a brief summary of their responses.

**Question #1: Quantitatively, what difference have your efforts made?**

The transformation model hopes to achieve positive outcomes from their efforts within the next five years, as it has just begun. The model anticipates measuring consumer satisfaction, cost effectiveness of services, reduction in mental illness, increase and sustained collaboration as well as measuring learning from the program activities. Additionally, they would like to measure qualitative information on best practices that the community has identified.

**Question #2: Do you see any opportunities for policy or system change at the state level that could improve county efforts to serve communities of color and underserved populations?**

The Cultural Competency, Equity, & Social Justice Committee (CCESJC), which is part of the California Behavioral Health Directors Association (CBHDA), along with community representatives, identifies and analyzes policy issues, and bringing these issues to the directors’ board. Regarding policy or system change, CCESJC has the potential to keep the board of directors on task, in terms of their own efforts and their volitional trajectory. CCESJC as a committee is a symbolic and actual commitment in time and resources to finding ways to make sure the mental health delivery system addresses the needs of the community. Solano County is doing a great job thanks to people involved, such as those from CCESJC, but there is always room for improvement.

**Question #3: Do you think it is important to collect disaggregated data in terms of race/ethnicity in order to better serve those communities?**

Yes, it is very important. Solano County leaders need to know their constituents and be able to engage them effectively and better understand their strengths and needs. Race/ethnicity, sexual orientation, and gender identity data, amongst others, are the foundation for high quality, rational and responsible service.
MORNING SESSION

NAMI AFFILIATE RECOGNITION
AWARDS FOR MULTICULTURAL OUTREACH

NAMI California recognized NAMI Alameda County South with the Multicultural Outreach Excellence Award for their outstanding achievements in multicultural efforts. Presented by NAMI California Board Members Diane Van Maren and Amanda Lipp to NAMI Alameda County South President Joe Rose, the award gives recognition to their accomplishments in improving access to services for consumers and their loved ones throughout Southern Alameda County. Multicultural programs include Asian community programs in Mandarin (Family-to-Family and Semi-Monthly NAMI Education meetings), NAMI Support Groups in Mandarin and Cantonese, and African American community programs (Sharing Hope).

FROM THE SYMPOSIUM:

“Joe Rose has been the driving force to improve access and services to consumer and their loved ones in the Southern Alameda County. Through his passion and drive to improved access to services and to help other, Joe founded NAMI Alameda County South”

– Caregiver
AFTERNOON SESSION

BEST PRACTICE IN ENGAGING MULTICULTURAL COMMUNITIES PANEL

NAMI California was honored to welcome Kimberly Knifong from the Office of Health Equity, Community Development and Engagement Unit, as our moderator for the Best Practices in Engaging Multicultural Communities Panel. Kimberly works as a Health Program Specialist with the California Reducing Disparities Project. She has led Phase 1 of the project, which works to ensure that communities’ voices are accurately represented in CRDP population reports, which will be utilized in developing strategic plans to reduce mental health disparities. Kimberly introduced panelists:

- Chris Roup, Executive Director of NAMI Fresno
- Denise Lancaster-Young, representing the Alpha Kappa Alpha Fresno Chapter
- Brenda Scott, Executive Director of NAMI Mt. San Jacinto
- Jazmin Rubio, San Jacinto School Board Member and Volunteer at St. Anthony Catholic Church

To bring mental health awareness to underserved communities in Fresno, Chris discussed how she began reaching out to diverse communities in her area by going to cultural events and telling her story. However, it wasn’t an overnight process. Reaching out required patience, a willingness to connect with others, and the ability to make people feel comfortable sharing their experiences and views in their own language and cultural perspective. Emphasizing the importance of breaking down barriers in the African American community as part of her journey to promote mental health awareness, Denise also shared her outreach strategies, including a partnership with NAMI Fresno, cultural events, and focusing on the church, which is a huge influence in her community.

Brenda and Jazmin examined their own partnership in the Mt. San Jacinto area. Brenda noted that hosting and attending cultural events in the community was a great way to meet people, but that listening to people in the community and understanding what they want is the best way to forge lasting connections. Jazmin suggested that speaking to the audience on the same level may be much more effective than using strictly professional language, and she emphasized face-to-face interaction and continual promotion of the organization, event, or class to hold the audience’s attention.
The audience was given the opportunity to ask the panel questions. Below are a few highlighted questions and a brief summary of their responses.

**Question #1: What are some of the lessons you've learned through this partnership that you've had?**

Don’t be afraid to ask for help from your community. Also, be persistent and committed. Develop trust; people need to believe that you care, and they need to know you’re not giving up on your collective goals. People also need to know that you’re listening to them - not dictating the situation. Dedicate yourself in giving love to others; always act with kindness and compassion.

**Question #2: LGBTQ individuals are a part of all communities. What strategies, if any, are you using to engage your LGBTQ members?**

We believe in reaching out and asking the LGBTQ community what their needs are, and how they would like the information and services we provide brought to them. We don’t want to assume we know which resources the LGBTQ community needs. There’s much taboo surrounding gender identity and sexual orientation in various cultures; just bringing up the subject in discussions during general presentations, support groups, and classes really opens up communication among community members to connect and understand one another.

**Question #3: What are the most common cultural barriers or stigmas in the Latino community to asking for help with mental health problems?**

There’s a certain stigma to mental illness in many cultures — many people in the Latino community try to overcome mental illness without help from others. Part of the reason why there is stigma surrounding mental illness in the Latino community may be the wording that’s being used. Finding the right words may exclude clinical terms, because it’s so definitive to use textbook terms. Certain cultures shy away from coming out and saying, “I have depression,” or, “I have bipolar disorder,” because it’s frowned upon and considered ‘airing your dirty laundry’. Because of this stigma, outreach into younger communities is so important. The younger generation can turn it around and educate their parents, grandparents, and families.

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FROM THE SYMPOSIUM:

“Hearing stories from people of color/minority groups impacted my mental health.”

— Conference Attendee
**BREAKOUT SESSIONS**

The breakout sessions were unique and intimate strategy-planning discussions for each community addressing strengths and challenges and identifying outreach solutions for better serving each of the five featured communities: Latino, Asian/Pacific Islander, African American, Native American, and LGBTQ.

These sessions were an opportunity to gather participants’ input and best practices on the following three questions:

1. **What would a meaningful partnership look like to achieve wellness in your community?**
2. **What are the strengths that the culture brings to mental illness (i.e. traditions, alternative medicine, providers, practitioner, therapist, etc.)?**
3. **What are 3-5 outcomes/solutions that would make a difference?**

Each breakout community’s most frequent points of discussion were captured by the session Moderators. Below you will find an overview of the day’s discussions, while full breakout session notes can be found in the appendix.

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**NATIVE AMERICAN COMMUNITY**

*Facilitator: Janet King, MSW, Project Director, Community Wellness Department, Native American Health Center*

The Native American Community breakout session, facilitated by Janet King, provided an open platform to discuss strengths and strategies to achieve the community’s goals. Education and outreach were emphasized as important avenues to achieve the outcomes most valued by the Native American community, while best utilizing the community’s cultural strengths. These strengths and values include: alternative medical treatments; strong cultural identity, heritage, and community unification; a strong sense of leadership within the community; acknowledgement of historical and generational traumas; validation and respect for community traditions and member roles (i.e.: gender, Two-Spirit, children, Elders); promoting diversity as a valuable cultural asset; sharing stories on a cultural level; and remaining mindful of others and one’s environment.

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**FROM THE SYMPOSIUM:**

“It was helpful to communicate with individuals on a smaller level. It seemed many more comments were made in the smaller, personal group.”

– Conference Attendee
BREAKOUT SESSIONS

AFRICAN AMERICAN COMMUNITY

Facilitator: Sandra Poole, MPA, Deputy Director of California Black Health Network

Participants in the African American Community breakout session, facilitated by Sandra Poole, analyzed strengths, goals and collective values. Community members agreed that positive change which would effectively eliminate stigma within the community includes better representation and diversity within the workforce, and empowerment to the community in decision-making, instead of decisions coming solely from county and government officials. Means of achieving valued outcomes discussed included harnessing community strengths, such as the strength and cultural support of the church, and creating more platforms for African American community members to celebrate and recognize business leaders, pastors, and other community leaders who really reach and speak to community members.

Left to Right: Denise Lancaster-Young and Gigi Crowder

ASIAN/PACIFIC ISLANDER COMMUNITY

Facilitator: Kimberly Knifong, MBA, Office of Health Equity, Community Development and Engagement Unit

Kimberly Knifong hosted the Asian/Pacific Islander Community breakout session, which resulted in some powerful insights about how to best reach out to the community, which goals to strive for, and how to best use the community’s cultural strengths. Education institutions, churches and healthcare organizations and facilities were identified as potential sources of effective outreach. Cultural roots, such as Buddhism, Hmong culture, alternative medicine, and community celebrations like the Obon Festival, are all sources of cultural strength that help promote an environment of interconnectedness that will help this diverse community reach its goals while maintaining cultural and community values. Other ways to best make positive changes were discussed, including developing guidebooks (or toolkits) that would contain resources available for specific communities, as well as providing resources at the county level in a variety of languages.

Dr. Hendry Ton
BREAKOUT SESSIONS

LATINO COMMUNITY

Facilitator: Sergio Aguilar-Gaxiola, MD, PhD, Professor of Clinical Internal Medicine, University of California, Davis School of Medicine

The Latino Community breakout session was hosted by our very own Board President, Dr. Sergio Aguilar-Gaxiola. During the session, attendees expressed their viewpoints on which directions they’d like to see their communities make progress, and how we can all work together to overcome stigma and other barriers. Participants identified the areas they’d most like to see change, and how the change may come about, including: building trust through relationships, respecting others in the community and their culture, and developing programs that are actually in tune with their culture, instead of just translating materials in their language. Using cultural strengths participants identified, such as strong family and community connections, reciprocity, sharing information and skills, and built-in community support systems for care, community members may realize their goals of creating specific classes for subpopulations, including youth; bicultural professionals who can better serve the community; and partner with existing networks, such as churches and popular community radio stations.

LESBIAN, GAY, BI-SEXUAL, TRANSGENDER, AND QUESTIONING (LGBTQ) COMMUNITY

Facilitator: Guy Qvistgaard, NAMI California Board of Directors

In the LGBTQI Community breakout session, facilitated by Guy Qvistgaard, discussion focused on issues participants would like to see addressed to make the most effective, positive changes for their communities, and how best to use their unique voices and strengths to take these steps forward together. Strengths and cultural values, such as diversity, a strong community voice, and resilience and perseverance, will help the LGBTQI community connect with other communities in nonjudgmental, learning environments, communicate their needs as a community at organizational levels, and develop programs that best serve their community. Some specific outcomes the group identified as changes they’d like to see happen in their communities included making specific materials addressed to their community’s needs readily available at social hubs and community centers, educating others to understand accurate information about their culture and needs, and encouraging allies/community members to use observable indicators of respect and acceptance (such as a rainbow on the door of a place of business).
LOOKING FORWARD

As we look to the future, we are excited about the possibilities. We are honored to have taken part in this convening of leaders from around our state. The symposium enjoyed wide representation from various county behavioral health departments, state officials, community and faith based organizations, families and individuals living with mental health challenges, universities, therapists, and cultural community leaders. Participants who attended shared a mutual interest in looking for solutions for better engagement and collaborative opportunities and were open to considering the various ideas expressed.

Through this valuable dialogue, NAMI California was able to gather ideas and suggestions to address some of the barriers individuals living with mental health challenges and their families face, and now, to share them through this report. This dialogue and the many that will follow help us and our partners implement culturally appropriate programs and resources and build capacity within our regions to reach diverse communities.

NAMI California will use these ideas to help strengthen community engagement within the five communities and increase collaboration between NAMI Affiliates and local organization. Additionally, the information will also be used for our upcoming strategic planning session as we continue to work toward our goals of reducing mental health disparities, stigma, and discrimination; increasing education and awareness; and further engaging community leaders and members from diverse backgrounds. We know that it will take time, nevertheless NAMI California is committed to continuing this dialogue through the Multicultural Symposium as well as our many other efforts.

FROM THE SYMPOSIUM:

“Always learning new info. And love the passion and commitment from all.”

– Conference Attendee