COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH AMERICAN INDIAN/ALASKA NATIVE UREP SUBCOMMITTEE

MINUTES – Tuesday, March 22, 2016 Location: United American Indian Involvement Los Angeles, California

ATTENDEES: Angela Trenado, Bernice Mascher, Carrie Johnson, Kelly Wilkerson, Melanie Cain, Michelle Enfield, Mirtala Parada Ward, Raul Garcia, Sunnie Whipple, Treva Blackwell

WELCOME/BLESSING/INTRODUCTIONS

11/17/2015 Meeting Minutes review and approval

Capacity Building Projects

- AI/AN Media Campaign FY 2014/2015 Update
 - o Mirtala Parada Ward updated the subcommittee on the status of the AI/AN Media Campaign for FY 2014-15
 - Commercial aired from 12/7/15-1/3/16 on Channel 7 and KNX 1070-did really well
 - Final Summary Report outcomes were shared with the subcommittee using Nielsen Ratings
 - Channel 7 (ABC)-29.1% of adults over the age of 18 in LA County were reached
 - KNX 1070-14.4% of adults over the age of 18 in LA County were reached
 - Recommendations-secure additional money for air time
 - Mirtala shared that DMH has gone through 3 audits/systems reviews- reported on Capacity Building Projects-auditors were very impressed by the media work being done by the UsCC subcommittees-highlight of the audit
 - Mirtala explained the solicitation process for future projects
 - Questions:
 - What is KNX 1070? A news radio station.

AI/AN Ongoing Advertising for Media Campaign FY 2015/2016 – Update

- o Mirtala and Kelly updated the subcommittee on the status of the ongoing advertising for the media campaign for FY 2015-16
 - Kelly explained the process that was utilized to obtain reference quotes
 - CBS offered the highest number of spots (150x radio, over 90x television), as well as pre-roll, and the digital campaign (social media and CBS website)
 - Statement of Work is 95% completed and should go out for solicitation within a few weeks
- Questions:
 - What audience are you trying to reach? Adults.
 - Will the commercials be aired at night for people who have trouble sleeping? The commercial will air during primetime news, as well as overnight (bonus spots-free).

- When will this be happening? **Ideally in May for Mental Health Month.**
- Will it be possible to get information for when it will be airing? After solicitation is completed, then we will send out an email to the group which will include the schedule. Procurement has been working with us on this.
- Does procurement know how much the auditors were impressed? They do. We are the only County that is doing commercials and media work.
- Is it on YouTube? Yes, it is on the DMH YouTube channel (LACDMH PIO), as well as the DMH website and the County Channel.
- What about City of West Hollywood Public Channel? This is a good idea. We will look into this.
- Question about the Access Center from last meeting-what happens after the calls start coming in? We have not received the Access reports yet, it usually takes two months. We will share the reports with the subcommittee once received. One challenge with Access is the identifying questions they ask are related to language, not ethnicity. Mirtala recommended to Access that they ask callers, "how did you get this number?" or "how did you hear about us?"
- Does the YouTube channel have comments enabled? We think they do not, but will check into it and follow-up.
- Can we go through the process with the Access Center? You can-when the State does the Systems Review Audit, they do 20 random calls to the Access Center-they give feedback and results.
- How did it get to the KNX radio? We paid for it. The subcommittee voted for that. Can we reach out to other stations like KPFK or NPR? We can-it would be worth it to look into. We will follow-up.

AI/AN Clinical Mental Health Training FY 2015/2016 – Update

- Kelly sent out an email of possible learning objectives-feedback received from two members so far-any additional feedback should be given no later than Wednesday, 3/30. SOW to be submitted to ISD by the end of the month
- o Training will be in all Service Areas (twice in 1, 7, 8 as there is a higher percentage of AI/AN community members)
- o Total of 11 trainings with 30 to 40 participants at each
- Two facilitators-one mental health professional and one community member with lived experience to talk about the spiritual component of services and some of the cultural aspects of treatment that are important when treating the AI/AN community
- Questions:
 - Are all the topics going to be taught? It is a 12-hour training (6-hours each day), so we are looking at 6 modules so far-interested in further feedback from the subcommittee on this.
 - When is this going to start happening? As soon as we get the solicitation and award it, we can implement it. We are thinking that it will take 8 months because they are going to write the curriculum for the 12-hours, they have to identify the different locations countywide, recruit the clinicians to attend the training, we have to approve the training modules/curriculum, and they have to be able to provide CEUs.
 - Will they have to outreach to the different areas? Yes, the consultant will do flyers and other outreach.
 - Will each agency develop the curriculum? **The consultant will, along with the community member with lived experience.**
 - Recommendation from subcommittee member that the terms be defined. The terms will be defined as part of the deliverables of the SOW.
 - Do just the trainings have to be done in 8 months or does everything have to be done in that time? Everything. So it would probably be 2/week? Does the group think that is not enough time or unrealistic? Do you think 11 trainings is too much? Our

thinking behind the timing was that a similar project was done with the LGBTQI2-S USCC subcommittee and they did 6 trainings in 3 months, so we thought 11 trainings in 7 months would be feasible, but if the subcommittee feels it is unrealistic, we can adjust it. Can we just go ahead and find the clinician and person with lived experience and see what they think? Since it has to go through a solicitation process, we have to submit the SOW and then ISD awards the project to whoever bids on it. Then we have to review the deliverables with that person. If at that time they tell us the time does not work, then we can adjust the deliverables. Is the person with the lived experience clumped into the bidding or do they submit separately? No, that person is going to be subcontracted by whoever gets the bid. Would that still be considered 12 CEUs with that person? As long as the primary is licensed, they can write the 12 CEUs. The trainer would probably have to be a psychologist? Can you do psychology CEUs if you are an LCSW? An LCSW can give psychologists CEUs. So why don't we do 8 months? That will be fine. We can adjust them. Will we know the process of how the community member will be chosen? Whoever the contractor is, they will be given that responsibility.

 Recommendation from subcommittee member that food oppression be added to the learning objectives. Will be added as part of historical trauma. Also two-spirit ideology and discrimination.

Mental Health Promoters Presentation (Ana Suarez, District Chief, SA 7)

Ana presented the Mental Health Promoters program, which was developed to train community leaders to educate their community on how to keep themselves healthy. It is based on the Promotores de Salud (Promoters of Health), which has existed in Central America for decades. LACDMH implemented Promotores de Salud programs that targeted the Latino community in Service Area 7 and Service Area 8. The program has been in place for a few years and has grown each year since its initial implementation. During the last Fiscal Year, approximately 1100 presentations were made by 20 Promoters.

Due to the success of this program thus far, the DMH System Leadership Team (SLT) committed to expand this model to other ethnicities within LA County as part of the MHSA 3 year plan and changed the name to the Mental Health Promoters Program (MHPP). Each UsCC subcommittee has been allocated \$100,000 per Fiscal Year to target a specific community on an on-going basis. The funding will only target the community selected by the UsCC subcommittee. The project will be put out to bid through and Request for Services (RFS) process, which requires a submission of proposals, scoring, bidders conference, etc.

The intention at this time is to replicate the Promotores program, but with a cultural bent to fit the community they are working with. It will include outreach and engagement and linkage, but the mental health education is the primary focus. The Promoters will be people from the community with lived experience. For the American Indian/Alaska Native community, they will be AI/AN people. As far as targeting specific language groups within the AI/AN community, this is less necessary as the majority of the AI/AN population speaks English. The Promoters will need to reside in the neighborhood they serve, have knowledge of their community needs and resources, possess experience working with community members and organizations, and have acquired an expertise as health educators in the community.

Discussion regarding which, if any, subgroup the subcommittee would like to focus on (i.e. certain ages, certain Service Areas, certain tribes). Ana

suggested for the subcommittee to ask that the Promoters have some diversification such as various tribes. Ana also informed the members that the Promoters are paid per presentation.

Questions:

- Is there anything that can truly prevent someone from committing suicide? I think some people that are really determined, no matter what you do they are going to do it, but there are also a lot of things you can do to intervene, whether you are a professional or not.
 In that module, what we train is not what a professional can do, but what you can do as a community member.
- Suggestion from subcommittee member-there is a Native American specialist who deals with suicide named Dakota Black.
- If we were to do children and adults, would there have to be 2 separate curriculums? We have not done it to the children, but some
 of the issues were related to children. It has always been given to the parents. The modules were made for the purpose of adults
 understanding.
- What is the definition of someone with "lived experience?" Is it someone who has been through mental health issues and overcome it?
 That is one definition. Or is it just a community member that has lived Native American? Both. You can define it during the focus group.
- Do we have service utilization reports on the different demographics that are receiving mental health services? According to age groups? Mirtala will send the link to the QI report.
- Is the goal right now just to find out what the community wants to focus on? Right now it is an orientation to what we are doing. And also to find people who are interested in being involved in the focus groups.
- Would it be possible to look at Native Americans from the North, South, East, and West? Unfortunately there is not enough money for more than one project. It could be the same project, just different takes. Yes, we can train you on the mental health modules, but then when you do the presentation to your community, you can make sure the cultural understanding of the specific geographical tribes is embedded in the presentation.
- O Discussion regarding the possibility of adding some specifics into the curriculum and tailoring the modules (i.e. family-focused effort, provide some space for children, stress management for children, recruit youth Promoters as well as Elders, etc.)
- o Ana recommended that all subcommittee members get on the Master Agreement List with the County
- o Mirtala to coordinate with Ana and the subcommittee members regarding the focus groups
- The subcommittee voted to have the program for all Native Americans, all ages, countywide

Next Meeting: TBA