Los Angeles County Department of Mental Health API UsCC Subcommittee Meeting Minutes February 26, 2024, 2:00 pm – 4:00 pm

Present: Ann Marie Yamada, Belinda Rabano, Catherine Kaila Manantan, Chanthol Oung, Cynthia Song-Mayeda, Edgar Romo, Francisco Tan, Jasmin, Jenny Garcia, JR Kuo, Jung S Kim, Kelly Wilkerson, Kerry Chhay, Mariko Kahn, Mea Lath, Michelle Freridge, Michelle Wong, Mirtala Parada Ward, Moses Lim, Neel Iyer, Norio Iwahori, Pastor Peter Kim, Payal Sawhney, Richer San, Riku Matsuda, Rocco Cheng, Ruth Wen, Sheetal Ayyatan, Sheila Wu, Sithea San, Soh Yun Park, Sokthea Phay, Tuan D. Nguyen, Yue Hua (Vicky) Xu, Zeel Ahir

Korean Interpreters: Samantha and Sun

DMH Admin: Hyun Kyung Lee, Jennifer Alquijay

Agenda Items	Comments/Discussion/Recommendations/Conclusions
Welcome & Introductions	Subcommittee Members, Housekeeping, Attendance, Co-Chairs
Announcement	A brief announcement was made by Sokthea Phay at the beginning of the meeting regarding the launch of the Mental Health First Aid courses in Khmer, Korean, and Chinese, which are culturally tailored and aim to benefit more communities in addition to the existing curriculum in Spanish.
Review of Meeting Minutes	A few corrections to the January 2024 meeting minutes were suggested by Mariko Kahn and Michelle Wong. The January meeting minutes were approved with recommended corrections. Motion by Tuan D. Nguyen to approve minutes and seconded by Mariko Kahn.
DMH Updates	 Jennifer Alquijay provided the following updates: DMH will provide a data presentation during the March UsCC meeting. The data will be utilized as a tool to help the subcommittee develop their projects for next year. DMH will conduct a MHSA presentation to inform the subcommittee about updates and explain how community's feedback was incorporated into the 3-year MHSA Plan, either in March or April UsCC meeting. Remind everyone to vote on March 5, 2024. DMH will have a vendor recruitment orientation and information sessions to expand our pool of vendors. More information about the information sessions will be shared with the subcommittee later.
Presentation	As a follow-up to the subcommittee's request from the last meeting, Francisco Tan, Ph.D., DMH Emergency Outreach and Triage Division (EOTD), was invited to provide a presentation on DMH Psychiatric Mobile Response Team (PMRT) Services. Some key points discussed in the presentation include: • There are eight (8) PMRT units, one in each Service Area (SA). PMRT teams consist of Licensed Psychologists, LCSWs, LMFTs, RNs, Psych Techs, Medical Case Workers, and Community Health Workers, which is different from a team of law enforcement.

•	PMRT provides non-law enforcement-based mobile crisis response for clients experiencing a psychiatric
	emergency in the community. If a client requires an immediate response for safety, possesses a weapon, or
	exhibits violent and assaultive behavior, it is recommended to contact law enforcement.

- PMRT teams are dispatched through PMRT and the ACCESS Center. They respond and evaluate children and adults for involuntary hospitalizations (5150 for adults, 5585 for children). They collaborate with other mental health professionals, law enforcement, Department of Children and Family Services (DCFS), etc. The PMRT teams provide consultations, follow-up, and linkages.
- When a caller contacts the PMRT team, a caller needs to inform them about the relationship with a client (e.g., family, friend, neighbor) and stay with the client until the team arrives.
- Criteria for involuntary psychiatric hospitalization: PMRT teams evaluate for 1) danger to self; 2) danger to
 others; and 3) grave disability. If a client meets criteria for involuntary hold, the PMRT team will call and
 arrange the facility and transportation. They will also call law enforcement for assistance if needed. If a client
 does not meet criteria for involuntary hold, the PMRT team will complete a safety plan with the client, provide
 referrals, resources, and follow-up services. To request PMRT, you can call ACCESS Help Line at 800-854-7771.

FY 24-25 Capacity Building Project Brainstorming and Proposal Discussions

Normalizing Mental Illness Using Shorts – YouStar Foundation (Soh Yun Park)

Our founding member, Sang Kyun Park, opened his mental illness (bipolar disorder), to the public and transparently shared his life through YouTube Broadcasting videos. Many individuals with mental illness visited the YouTube broadcasting streaming videos and shared their experiences with other non-patient listeners to normalize mental illness such as talking about symptoms, medication side effects, and coping strategies, etc.

Since streaming videos last 2 or 3 hours, we have created 1-2 minute shorts on YouTube Shorts, which were watched by more than 500 viewers. Recently, there has been a preference for shorter videos, with lengths of 1 or 2 minutes. This is a unique and inspiring momentum to spread Shorts with real clients with bipolar disorder, and we can target specific areas, ages, and groups to foster empathy and increase mutual support and comfort. We can make many shorts out of 174 broadcasting streaming videos of our founding member, Late Sang Kyun Park, and it will be powerful to encourage clients to share their mental illness and get support, while also promoting understanding among non-clients, so that they can understand better their neighbors who have mental illness.

YouStar Foundation plans to make 100 shorts and promote them to the youth and the adults who can understand Korean Cultures and languages (with English subtitles included) in the Los Angeles areas. Whenever we find any news articles or videos related to suicide or mental illness, we can link on the articles, so it can be effectively shown to people who read the articles. Also, viewers of the shorts can reach out to us via email or chat messages if they need mental health support, since we will include the information on how to get support.

Laughter is the Best Medicine – 1000 Cranes for Recovery (JR Kuo)

The purpose of Laughter is the Best Medicine is to address, advocate for, normalize, and celebrate Asian American

mental health, immigration history, and gender identities in an innovative, creative, and fun approach. Laughter will achieve this through three special community events featuring stand-up comedy, arts, music, and food. The vision of Laughter is to use laughter, culture, and creativity to normalize and bring awareness to the important issues at the intersection of Asian American immigration heritage, gender identities, and mental health, while also honoring and celebrating our diverse cultures. Laughter is the Best Medicine events will provide information and educate Asian Americans and the broader communities on the importance of immigration and gender identities in relation to our cultural identities, rights, and mental health.

The first goal is to empower a group of three to five Asian Americans who are inspired to become stand-up comedians to find their voice and use it for social change. The second goal is that through the Laughter events and comedy shows, we aim to educate often ambivalent U.S. Asians about the importance of immigration in relation to their mental health. Through dialogue and story-sharing, they will begin to understand the consequences of ignoring anti-immigrant sentiment.

The third goal is to advocate, promote, and normalize different gender identities within Asian American communities. Lastly, for Asian Americans who support immigration, LGBTQ rights, and mental health but hesitate to speak up, Laughter events will inspire them to realize they are not alone, inferior, and have equal rights like anyone else.

Community Resilience 101 - Michelle Wong & Jenny Garcia

Community Resilience 101 is a project aimed at engaging young adults in API communities who are interested in improving mental wellness for themselves and for their community. The program's cornerstone is Traditional Asian Medicine techniques, such as self-acupressure, breathing exercises, somatic, forest bathing, acupuncture, ear seeds, and tai chi, followed by the unique Circle Council dialogue process. Circle Council promotes mindful listening, authentic expression, and compassionate communication. It nurtures respectful communication and a profound sense of belonging, empowering participants to navigate the complexities of interpersonal connections with empathy.

This project fulfills a USCC goal to reduce the stigma of talking about mental health, uplift cultural awareness of Traditional Asian Medicine, and create a multiplier effect as the young adult participants will learn valuable wellness techniques and communication skills they can share with their communities. Plans will include outreach and recruitment of API youth, mostly 18-26 years of age, in the Koreatown and San Gabriel Valley areas. Training and practice of stress regulating techniques, as well as Circle Council will be taught by qualified trainers familiar with these practices. Together, the youth can come up with either videos or written material documenting their transformation as they increase their awareness and skills to identify common stressors, develop their listening skills, and bond as a pilot cohort.

The impact of this project will be equipping participants with a toolbox of culturally relevant techniques to enhance

	mental, emotional and physical wellness. The goal of this project is to leave participants with increased knowledge, a sense of empowerment, and an increased sense of belonging. Council Circles give participants the chance to share and express themselves authentically, be listened to amongst their peers, and listen to others.
Retreat Discussion	Hyun Kyung Lee provided an update on the results of Zip Code survey for the API UsCC Retreat scheduled for May 30, 2024 (9 am-1 pm). She also reported on some follow-ups regarding venue options discussed during the previous meeting, such as CA Endowment Center and DMH HQ Terrace Level room. Sheila Wu informed that the Asian Pacific Counseling and Treatment Centers (APCTC) would not be available for May 30, 2024, due to a scheduled support group meeting. Francisco Tan suggested exploring the St. Anne conference room as a potential alternative venue.
Open Discussion on Non-Agenda Item/Community Announcements	 Subcommittee discussed upcoming meeting dates: March meeting, originally scheduled for March 25, 2024, falls on a County observed holiday (Cesar Chavez Day). The subcommittee has discussed and decided to reschedule the March meeting to Monday, April 1st, 2024 (2:00 pm-4:00 pm). April meeting, initially scheduled for April 22, 2024, has been moved to Monday, April 29, 2024 (2:00 pm-4:00 pm), to have sufficient time between meetings. Rocco Cheng was looking for participants who have lived experiences with mental health conditions and are also bilingual in English and one of Asian languages such as Chinese, Khmer, Korean, Tagalog, or Vietnamese for his Capacity Building Project, API Recovery Talk. A flyer will be distributed to the subcommittee. Sheetal Ayyatan provided information about the Spring Mela event scheduled for March 9, 2024. This event celebrates the spring festivals of South Asia communities, and a flyer will be shared with the subcommittee. Sheila Wu will send an email about a community event to be shared with the subcommittee. Please send any resources to Hyun Kyung Lee via email (https://linkyunglee@dmh.lacounty.gov) to be sent out to the listserv.
Follow-Up Action Items	 Meeting invite emails for April 1 and April 29 meetings Follow-up on retreat venue options Corrections to the January meeting minutes Survey regarding the retreat

Upcoming Meeting: April 1, 2024 (2:00 pm-4:00 pm)

Meeting minutes can be found at: <a href="https://dmh.lacounty.gov/about/mhsa/uscc/asian-pacific-islander-api-uscc/asian-pacif