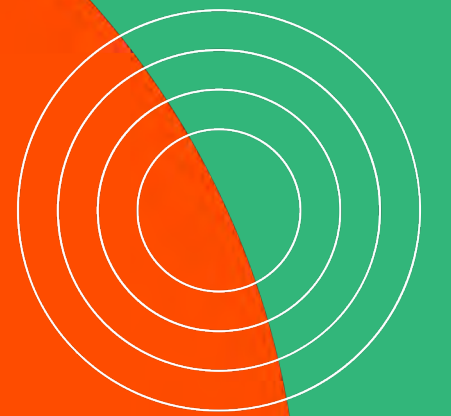


National Network to Eliminate Disparities in Behavioral Health Diversity Inclusion Project Showcase



SAMHSA
Substance Abuse and Mental Health
Services Administration



Welcome & Introductions

DR. MARY ROARY
DIRECTOR, SAMHSA OFFICE OF
BEHAVIORAL HEALTH EQUITY (OBHE)

Thank you for joining us for this
important opportunity!



Overview of DIPS

TAYLOR BRYAN TURNER
ASSISTANT REGIONAL ADMINISTRATOR,
SAMHSA REGION 1

This event is modeled from HHS Region 1's
Behavioral Health Matters Diversity Inclusion Project
Showcase event that occurred in February 2021.

Opening Remarks

DR. MIRIAM DELPHIN-RITTMON
ASSISTANT SECRETARY FOR MENTAL
HEALTH AND SUBSTANCE USE, SAMHSA



NNED CBO Showcases

WE'LL OPEN BREAKOUT ROOMS SHORTLY!

CBOs will share their work, learn who's in the room with them, have time for Q&A, and explore opportunities for connection.





In the Breakout Rooms

Who's in the Room

Showcases From CBOs

Questions & Answers

Opportunities for Connection



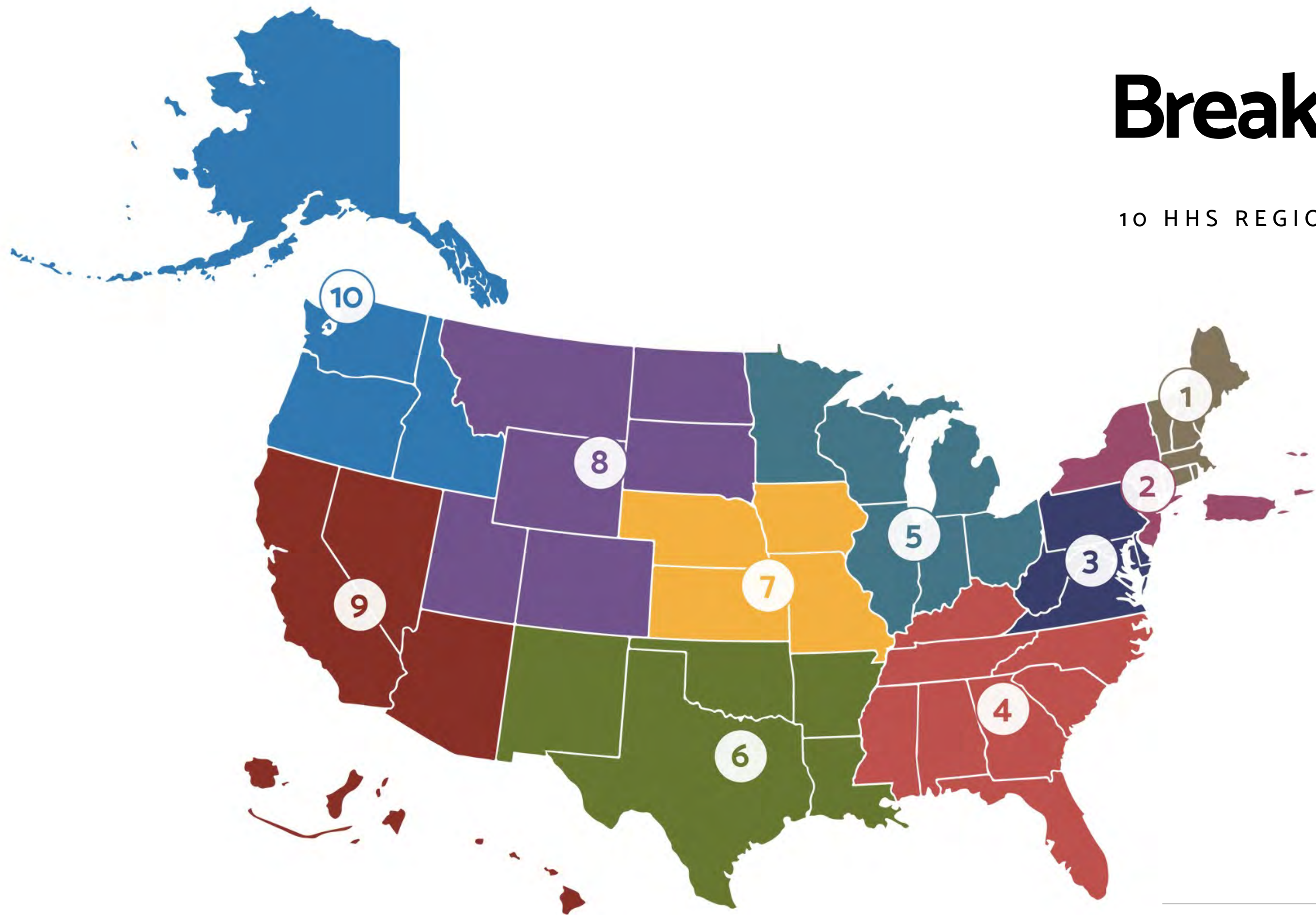
PLEASE KEEP YOURSELF MUTED WHEN NOT SPEAKING



WE ENCOURAGE YOU TO USE THE CHAT TO CONNECT
WITH EACH OTHER THROUGHOUT TODAY'S EVENT!

Breakout Rooms

10 HHS REGIONS



Breakout Rooms

ROOM 1 | NORTHEAST

REGION 1

- Asian Women for Health
- Latino Community Services, Inc.
- Urban Community Alliance

REGION 2

- Comunilife
- DBGM, Inc.
- Project Safety Net NY

REGION 3

- Asian Volunteer Clinic
- SpiritWorks Foundation
- Take Flight Inc.

Breakout Rooms

ROOM 2 | SOUTH

REGION 4

- Gateway Community Services
- Nashville Metropolitan Board of Parks and Recreation
- Ser Familia, Inc.
- Universal Institute for Successful Aging of Carolinas

REGION 6

- Center for Resilience
- Family Service of El Paso

Breakout Rooms

ROOM 3 | CENTRAL

REGION 5

- Bhutanese Community of Central Ohio
- Centro Multicultural La Familia

REGION 7

- Center for Holistic Development
- Santee Sioux Nation Society of Care

REGION 8

- Pacific Island Knowledge 2 Action Resources
- Latino Behavioral Health Services

Breakout Rooms

ROOM 4 | WEST

REGION 9

- African Communities Public Health Coalition
- Asian Americans for Community Involvement
- Community Youth Center of San Francisco
- Ka Hale Pomaikai
- Self-Help for the Elderly
- The Cambodian Family

REGION 10

- ASHA International
- Muckleshoot Family and Youth Services

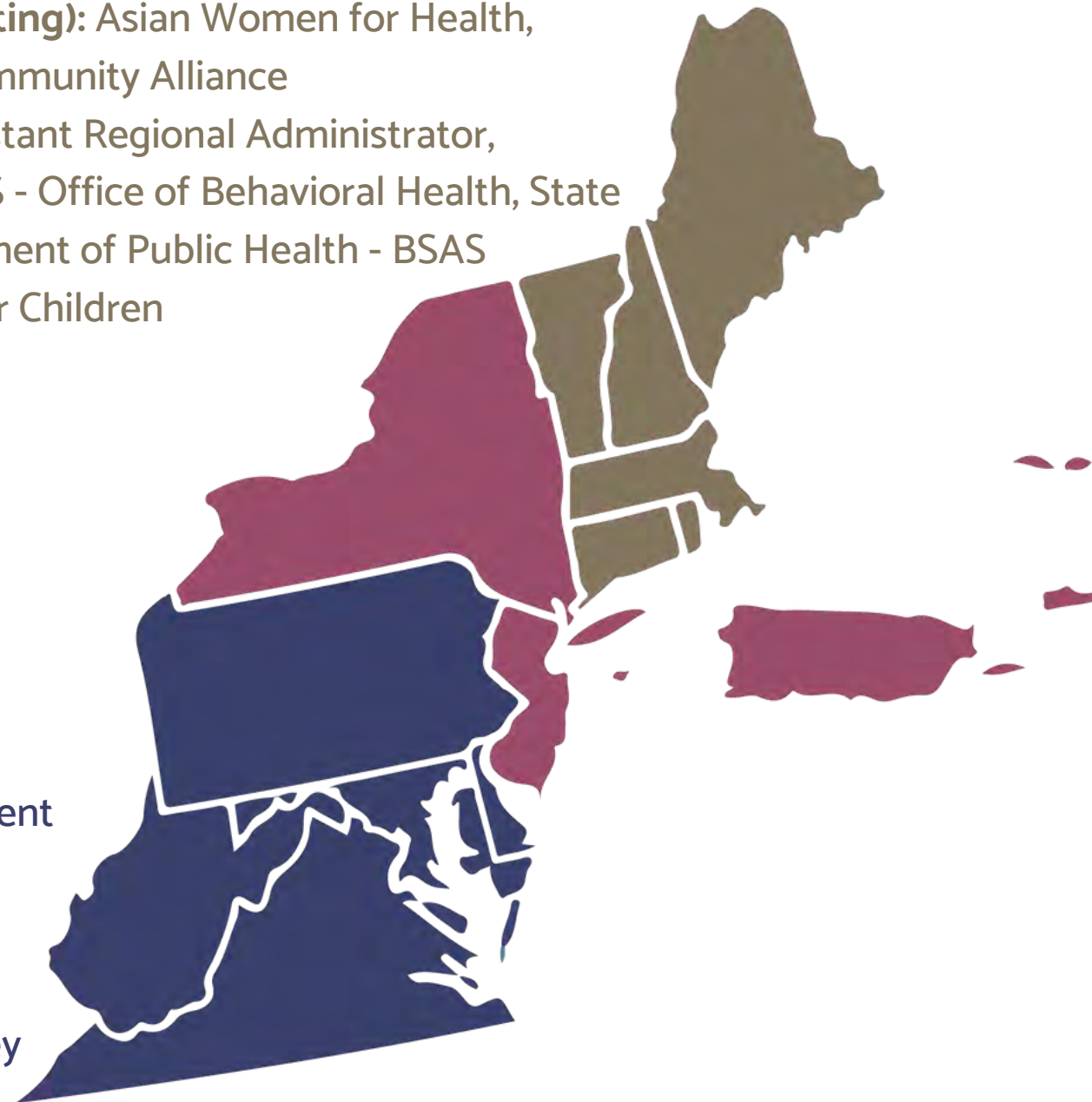
Breakout Room 1

REGION 1

- **Community-Based Organizations (presenting):** Asian Women for Health, Latino Community Services, Inc., Urban Community Alliance
- **State/Regional Leadership:** SAMHSA Assistant Regional Administrator, SAMHSA Public Health Fellow, Maine DHHS - Office of Behavioral Health, State of New Hampshire, Massachusetts Department of Public Health - BSAS
- **Additional Partners:** AFCAMP Advocacy for Children

REGION 3

- **Community-Based Organizations (presenting):** Pan-Asian Volunteer Clinic, SpiritWorks Foundation, Take Flight Inc.
- **State/Regional Leadership:** SAMHSA Regional Administrator and Assistant Regional Administrator, Maryland Department of Health/Behavioral Health, New England MHTTC, Virginia Department of Behavioral Health & Developmental Services
- **Philanthropist:** The Greater Kanawha Valley Foundation
- **Additional Partners:** Children & Families First, Qualified Ventures



REGION 2

- **Community-Based Organizations (presenting):** Comunilife, DBGM, Inc., Project Safety Net NY
- **State/Regional/Local Leadership:** HHS Public Health Strategist, NYS Office of Mental Health, Friends of Recovery New York, County of Burlington
- **Philanthropists:** Health Foundation for Western & Central NY, YWCA NNJ, Skoll Foundation, Somerset County
- **Additional Partners:** Advance Housing Inc., ASun Star, Carepoint Health Hoboken University Medical Center, Catholic Charities Orange, Center for Family Services, Community Hope, DRCVI, Elev8 Center, Elmcour Youth & Adult Activities, Inc., Family Based Services Association of NJ, Icahn School of Medicine at Mount Sinai, Integrity House, Integrity, Inc., Legacy Treatment Services, Maryville Addiction Treatment Center, National Hispanic and Latino MHTTC, New Jersey Association of Mental Health & Addiction Agencies, New Life Medical Addiction Services, NYS Care Management Coalition, Onondaga National Health Center, Rwjbarnabas Health Institute for Prevention and Recovery, Strong Recovery, Team Management 2000, Inc., The Center for Rapid Recovery, the Lennard Clinic, UCC, Vibrant Emotional Health, WellCare Health Plans, Wellspring Center for Prevention, Wynona's House Child Advocacy Center, YWCA NNJ, YWCA Union County

Asian Women for Health

Somerville, MA

Executive Director: Chien-Chi Huang

HHS REGION 1



asian women for health

EDUCATE. ADVOCATE. RECIPROCATE.



AWFH is a peer-led, community-based network dedicated to advancing Asian women's health and well-being through education, advocacy, and support, since November 2012.

Women's Health



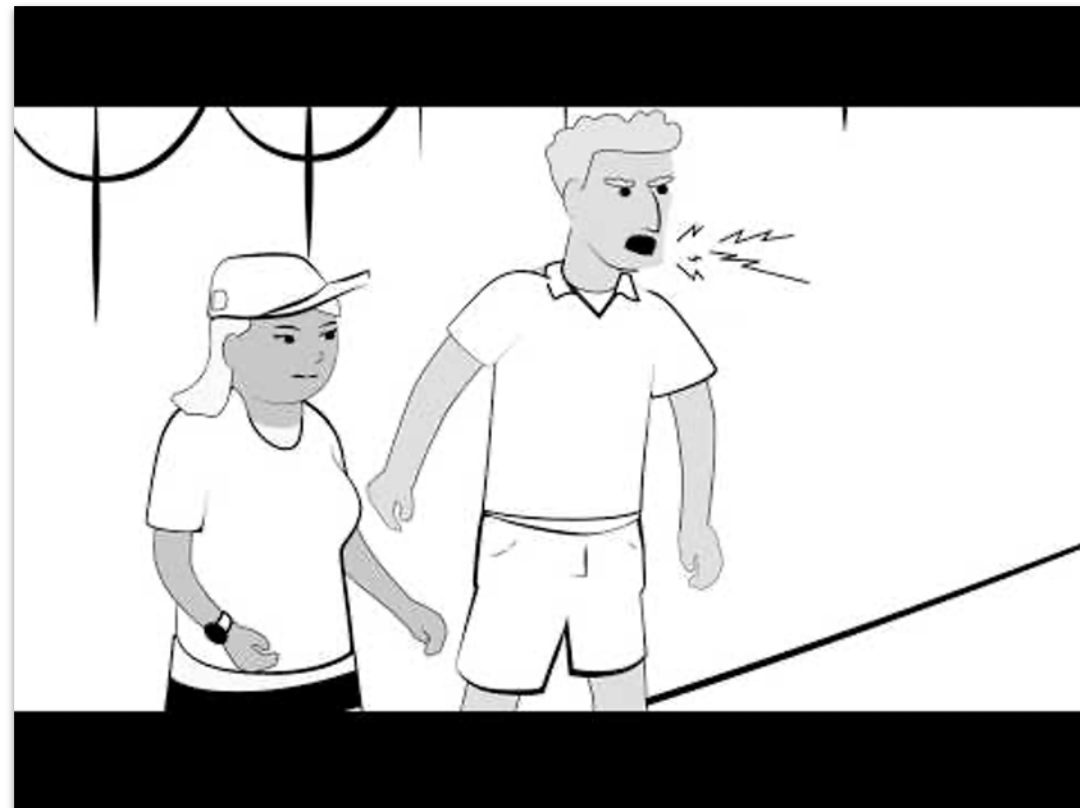
Achieving Whole Health



Together Empowering Asian Minds



Anti-racism PSA and mental health resources on our website



Asian American Mental Health Forum



Major Successes



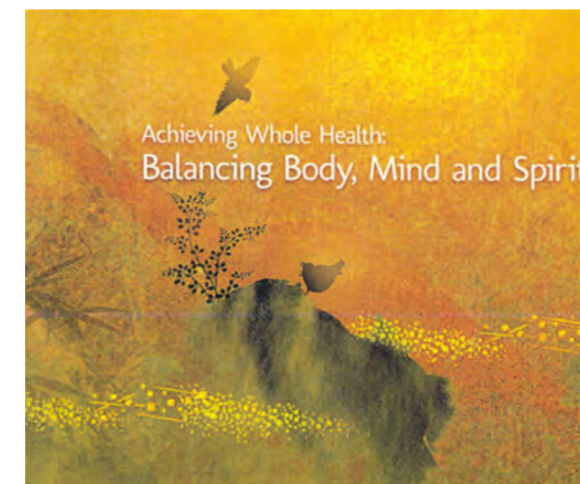
Monthly Webinars to disseminate health info



Monthly virtual social event to break social isolation



Expanded Achieving Whole Health to 2 new cohorts



Major Challenges/ Barriers

- **Few culturally competent healthcare providers**
- **Need gender-specific and culturally responsive care**
- **Digital divide**



Look Ahead

- Need to create a pipeline of leaders with lived experience
- Build capacity and partnerships
- Innovative ways to raise awareness & sustain efforts

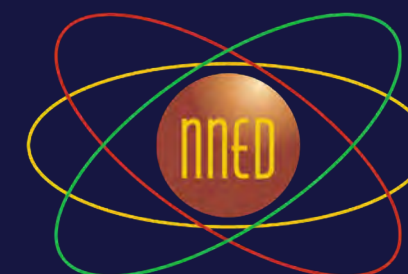


Asian Women for Health

Info@asianwomenforhealth.org

Tel: 617-767-1071

www.asianwomenforhealth.org



SAMHSA
Substance Abuse and Mental Health
Services Administration



New York, New York

A suicide prevention program
for at-risk Latina teens in the
Bronx, Brooklyn, Manhattan,
and Queens


HHS REGION 2

WE ARE
Bilingual, Bicultural, and created By Latinas, for Latinas

WE WORK
To reduce the risk of suicide, improve daily quality of life, and expand future opportunities for at-risk Latina teens growing up in NYC

WE SERVE
Girls ages 12 to 17 (and their families)

WE OFFER
A path to becoming a Wise Latina woman


SURVIVE **THRIVE** **STRIVE** **WISE LATINA**



Mission Statement

Comunilife's mission is to provide vulnerable communities with housing and culturally sensitive supportive services.

Vision Statement

Comunilife believes that no one should be without the housing and supports they need to lead a healthy, meaningful life.

LIP Services

Latina teens ages 12- 17

Holistic Case

Management

Teen guided goal planning, support services, safety planning, advocacy

Youth Development

Groups

- Leaders of Tomorrow
- Words for the Soul
- Funday Yumday

Expressive Arts

Therapy

Creative Arts and Music Therapy

Groups and Individual Sessions

-help teens develop coping skills, understand personal stressors and develop ways to express themselves through creative arts. They provide an indirect means of expressing painful feelings in a powerful but constructive way.

Academic Support

Daily professional tutoring, high school, Regents and SAT/ACT prep. School advocacy

Family Engagement

Comprehensive support to parents and families of teens; Weekly Parent Support Groups, ESL class, and Creative Arts Groups for Family

Health & Wellness

Healthy cooking and activities to support health and wellness of our teens; Community Town Hall events to support Mental Health Care & Trainings to Community Partners

Major Successes



Success: Building Awareness & Dismantling MH Stigma

Since 2008, LIP has grown from 1 Program Site to 4; and has provided training and awareness campaigns to the Latino community and beyond



Success: Phase 1 results of Program Research

Since 2013, Comunilife has partnered with the NYS Psychiatric Institute/Columbia University's NYS Center of Excellence for Cultural Competence to evaluate LIP's results with the goal of having LIP designated as a community-defined evidence-based program. The researchers have completed Phase 1 of the study- The research shows thus far, that for every month a teen attended LIP, her level of depression and suicidal ideation decreased.



Success: During COVID; LIP Adapted to the Emerging Needs

Community informed programming-- meeting the growing needs of participants & caregivers

Major Challenges/ Barriers



Challenge: Increased Family Stress during COVID-19 Pandemic

LIP families, particularly our undocumented families, faced unprecedented levels of stress due to job loss, housing and food insecurity, loss and grief, social isolation, etc



Challenge: Increased mental health needs of teens and unprecedented need for psychiatric hospitalizations

LIP saw 20 psychiatric admissions during the pandemic for suicide ideation and suicidal gestures.



Barrier: Long wait lists for Community MH clinics and PHP

Long delays in securing needed services/therapy which resulted in new referrals not being able to join LIP

Look Ahead

- **Future Initiative: Enhanced Family and Parent Engagement Activities**
Secured funding to support a Program and Family Engagement Coordinator to continue our enhanced family services- holistic case management, parent support groups, ESL classes, and more
- **Future Initiative: Develop a more formal Youth Ambassador (alumna) Program**
Youth development and Civic Engagement programing for alumna and older LIP participants to become spokespersons for LIP and to raise awareness around Latina Adolescent mental health needs.



Julie Laurence, LMSW

Senior Assistant Vice President, Life is Precious™

jlaurence@comunilife.org

917-938-5405

www.comunilifelip.org



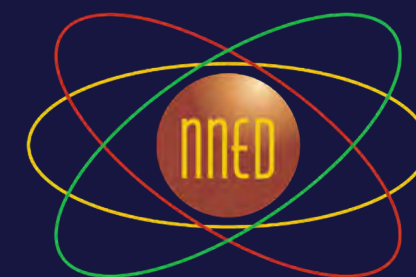
www.comunilife.org



@Comunilife

@comunilifeinc

Rosa M. Gil, DSW, President and CEO



SAMHSA
Substance Abuse and Mental Health
Services Administration

Take Flight Inc.

Silver Spring, MD

REGION 3





Mission Statement

Our mission is to impact lives and ascend communities through health & wellness.



Services

Service Population

Service

Physical Exercise Program

Service

Career Development

Service

Mentoring

Service

Financial Literacy

Service

Workshops/Trainings

Service

Theraphy/Counseling

Major Successes

- **Success**
11 years of quality programs and services
- **Success**
Increase in properly trained staff
- **Success**
Program growth throughout the county

Major Challenges/ Barriers



Challenge/Barrier

Funding to create expansion



Challenge/Barrier

Additional space for programs



Challenge/Barrier

Marketing and Exposure

Look Ahead



Future Initiative/Growth

Add licensed staff to grow therapy and counseling services



Future Initiative/Growth

Rent a building or location regularly to have consistent programming outside of school partnerships



Future Initiative/Growth

Increase funding and grant applications

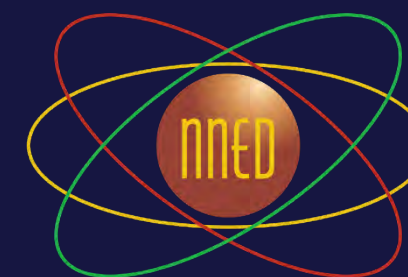
Take Flight Inc.

Health and Wellness programs and services

info@takeflightinc.org

240-839-1848

www.takeflightinc.org



SAMHSA
Substance Abuse and Mental Health
Services Administration



Urban Community Alliance, Inc.

Presented by Rosetta Washington, Senior Operations Manager

Region 1





Mission & Vision

Vision: Every family is supported, self-sufficient and thriving.

Mission: Our mission is to strengthen communities of color through advocacy, programming, and partnerships.

We help families manifest better futures by forging paths to healthy relationships, promoting physical & social-emotional well-being, and building positive connections within their communities.

The Urban Community Alliance has three central objectives:

- **Support self-reliance** through helping individuals realize their personal strengths and agency.
- **Nurture healthy families** by integrating avenues of support within families through developing a sense of community.
- **Bolster civic engagement** by offering resources and support to enable self-advocacy.



Formerly NHFA/VETTS

Our Programs and Services

Veterans Empowering Teens Through Support, (V.E.T.T.S.™)-



Veterans Empowering Teens Through Support, (V.E.T.T.S.™) - V.E.T.T.S.™ matches honorably discharged veterans with at-risk youth.

Highlights:

- Funded from CSSD
- Trained VETS2Youth Curriculum
- VETTS Youth Summit

Accomplished:

- Served 31 unduplicated youth mentees
- Met all contract obligations
- Over 27,600 hours of mentoring support
- Veteran leadership sustained

Juvenile Review Board (JRB)



Juvenile Review Board (JRB) - JRB diverts juvenile offenders from the juvenile justice system and engages youth having attendance and behavioral challenges in school and the community.

Accomplished:

- Served 114 unduplicated youth in New Haven/Hamden
- Served 75 unduplicated youth in Hamden
- Facilitated 100+ volunteer accountability panels
- Met all contract requirements in both New Haven/Hamden

Male Involvement



Male Involvement (MIN) - UCA's MI program utilizes an extensive network of existing resources coupled with comprehensive case management, mentoring and emotional support to meet the needs of men who want to have healthy relationships with their children.

Highlights:

- Funded primarily through DSS

Accomplished:

- Served 52 fathers
- Met all contract requirements and outcomes
- Revised MIN Network Meetings

Intensive Family Preservation (IFP)



Intensive Family Preservation (IFP) - The IFP program is designed to support families that are involved with Department of Children and Families, (DCF) and are at risk of being separated.

Highlights:

- Funded primarily through Yale Child Study Center

Accomplished:

- Served 29 Families exceeding requirement of 24
- Met all contract requirements and outcomes

- Albertus Magnus College
- City of Hamden - Youth Services
- City of New Haven/Hamden Police Dept
- Community Foundation of Greater New Haven
- Court Support/ Magistrates
- Court Support Services Division
- Department of Children and Families
- Department of Social Services
- Elm Cities Communities
- Fordham University
- Gateway Community College
- Graustein Foundation
- Hamden Public Schools
- New Haven Job Corps
- Nellie Mae Foundation
- New Haven Healthy Start
- Juvenile Superior Court - New Haven, CT
- New Haven Public Schools
- Pfizer, Inc.
- Quinnipiac University
- Southern Connecticut State University
- Yale Child Study Center
- Yale University



State & Local Community Partners and Collaborators



Thank You!

Thank you for your interest and consideration. We look forward to the opportunity to partner with you in the future. For additional information please visit our website at:

www.urbancommunityalliance.org

or Contact

Executive Director: Shirley Ellis- West

Shirley.west@ucainc.org

(203) 676-4147

PROJECT SAFETY NET NY

Patchogue, NY | Region 2 | 631-385-2451

HHS REGION 3

CCACC Health Center
Chinese Culture and Community
Service, Inc. (CCACC)

Gaithersburg, Maryland





CCACC Health Center provides a medical home for your health care needs. We collaborate with experienced primary care providers, specialists, mental health and other healthcare professionals to provide one-stop services to ensure the best care and experience for patients and their families.

Services

Target Population:

Underserved population who face barriers to access health care and other social services

Primary Care

- Acute visit
- Chronic Disease management
 - Prevention service
 - Health education

Mental Health 360

- Health education (in person and virtual)
- Direct MH services (MD, Psy D, LCSW-C)
- Health/Psychosocial Workgroups
 - PEARLs Program

Rehabilitation

- Physical Therapy
- Occupational Therapy
- Neurological /Cognitive Assessment

Community Health

- S.T.O.P. B Program
 - No Pain Initiative
- Integrated Chronic Care Management

Social Service

- Benefit Enrollment Assistance
- Medicare/Medicaid Application
 - Social Security programs
 - United Us

COVID-19 Service

- COVID Vaccination
- COVID Testing (PCR and Testing)
 - Information Hotline
 - Outreach Efforts

Major Successes

- Integrated Primary Care with Mental Health
 - One stop services
 - Remove stigma
- Integrated Care for Chronic Disease Management
 - Health Coaching
 - Peer support
 - Patient centered care
- Sustainability
 - Grants support vs. fee for service
 - Professional Volunteers
 - Community Partnership

Major Challenges/ Barriers

- Stigma on mental/behavioral health service
 - Shame
 - Painful to change
 - Tend to seek medication vs. behavioral change
- Lack of Resources
 - Culturally competent providers
 - Coordinator Care
 - Referral networks
- Lack of Funding
 - Lack of funding support
 - Billing issues relate to behavioral health

Look Ahead

- **Integrated Mental Health in Medical Care setting**
 - Universal screening
 - Address psychological issues in patient care
 - Additional support and coaching
- **In-Person/Telehealth Services**
 - Virtual Psychosocial groups
 - One on one counseling
 - PEARLs program (lay professional connection)
- **Village Initiative**
 - Provide support and resources for family with children with disabilities or family with demented patients



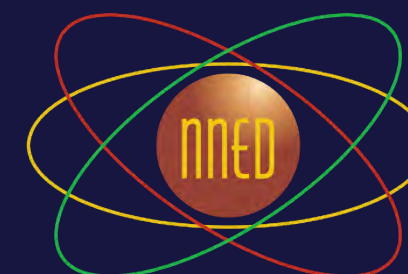
CCACC Health Center

Chinese Culture and Community Service Center, Inc. (CCACC)

Email: kate.lu@ccacc-dc.org

Phone Number : 301-720-8200 ext. 8314

Website: www.ccacchealth.org



SAMHSA
Substance Abuse and Mental Health
Services Administration

DEBFORM

Raising Awareness, Changing and Saving Lives

HHS REGION
Region 2
New York, NY

DBGM's MISSION

DBGM is dedicated to recognizing and articulating the mental health issues of LGBT people of the Black diaspora, through the collective strengths and wisdom of professionals and supporters; to address the issues affecting these communities.

DBGM's Vision

DBGM hopes that by its work, through the medium of the documentary, community discussion fora, and a book (when it is published), to raise awareness of depression as it affects Black gay men. While looking at how they are affected, working to change perceptions, reactions and responses at the grassroots level: the family, church, school, and community; that a Black gay man need not hide or live his life in shame, or be made to feel ashamed, but be proud of who he is and his place in the human family. And, for those Black gay men who have lived and still struggle with depression, to know that they are not alone.

“If by what I’m doing, one Black gay man could be prevented from killing himself, then my job is done; his healing begins.”



Services

Service Population: Predominantly, Black gay men

You Are Not Alone (2012)
www.yana-thefilm.com

A documentary, with re-enactments, in which Black gay men share about their struggles with the factors contributing to their mental health destabilization, leading to and including suicidal ideation and attempts.

Breaking Silences (2016)

A one-day CBO collaborative gathering to raise and discuss HIV, Immigration and Mental Health impacting LGBTQ+ people of color of Caribbean descent.

I Am Working On Healing (2013)

Two Groups:
Sons – for Gay men of color struggling with acceptance, depression, and suicidal ideations;
HER (Helping Everywoman Restore) – for women of color who lost sons to HIV and or suicide

IMM- In My Mind (2014 – present)
www.inmymindconference.com

From 2014 to present, In My Mind LGBTQ+ People of Color Mental Health Conference, focuses on issues impacting communities' mental health; 2021, the seventh, on "Youth Mental Wellness – Resilience In Uncertainty".

Virtual Fora (2020-2021)

NYCDOHMH 2018, awarded in 2020, Microgrant for HIV prevention through mental health was transformed from intended in-person gatherings to nine online fora, raising and discussing HIV, COVID-19, and mental health impacting LGBTQ_ people of color communities

Presentations and Webinars

- 2020 – e.g., NAMI NYS – Expanding Mental Wellness in LGBTQ+ Communities
- 2021 – e.g., Webinar 5, in a series, on "Racism, a Public Mental Health Crisis"

Major Successes:

- ❖ You Are Not Alone
- ❖ IMM (2014 – present)
- ❖ Presentations/Fora



You Are Not Alone

Documentary (2012) viewed more than 40K times, screened at national and international festivals, and across the country, each followed by discussions with community partners on the issues raised in the film.



In My Mind Conference (2014 to present)

Focusing on issues and factors impacting LGBTQ+ People of Color mental health, this gathering is **unique** in the nation and world, attracting clinicians, academicians, advocates, activists, and consumers to raise, discuss, learn and work on removing mental health shame and stigma.



Presentations/Virtual Fora

Mental health discussions in communities of color, are intended to work on reducing shame and stigma surrounding mental health. DBGM expanded its focus beyond Black gay men to include communities of color, looking at the “**Whole Person**” mental health perspective.



Watch the documentary:
https://youtu.be/Ak_UEEJNfj0

In My Mind LGBTQ+ People of Color Mental Health Conference

“Youth Mental Wellness – Resilience In Uncertainty”

October 7 and 8, 2021

VIRTUAL | FREE

Conference features:

- Youth Speakers, including Native American 2Spirit, and Ancestral Invocations by Native American 2Spirit Youth
- **“We Remember Our Own”** – a memorial for LGBTQ+ Black and people of color who died between October 2020 and October 2021
- Performances by Students from the Juilliard
- **“Decolonizing Your Plate”** – panel discussion by the James Beard Foundation
- 3 Breakout Sessions, with 6 Concurrent Presentations in each Session
- LCSWs and LMSWs can receive up to 3 CEUs by attending three CEU eligible presentations
- 3 Specialty Breakouts (Guided Meditation and Yoga, Drumming, Exercise)
- Virtual Artists' Gallery/Exhibition Hall (<https://tinyurl.com/ArtistsIMM21>)
- Virtual Sponsors/Community Partners/Vendors Hall
- Performance/Entertainment Segment at Conference's close – **NEXT YEAR!**

Register:
www.inmymindconference.com



Featuring

- 3 Breakout Sessions with 6 Concurrent Presentations in each session on issues and concerns impacting LGBTQ+ youth of color.
- Max 3 CEUs LCSW, LMSW

Presents
**2021 In My Mind LGBTQ+
People of Color Mental Health Conference
“Youth Mental Wellness -
Resilience In Uncertainty”**

Oct 7 & 8

Virtual | FREE

Register: www.inmymindconference.com

- Virtual Artists' Gallery
- Specialty Breakout Rooms
- LIVE - Performance/Entertainment Segment

Opening and Closing Invocations



Marcy Angeles
Nednhi Chiricahua Apache



Tony Enos
Echota-Cherokee Nation

Speakers



Osborne Association
Leo Tate



Christopher Sangovannie Troche



Cesar Piña



Noah Sanatkar



NYS AIDS Institute

Dieon Pendleton

Sponsors



Major Challenges/ Barriers:

- ❖ Mental Health Distrust
- ❖ Culturally Sensitive Clinicians
- ❖ Insufficient funding and CBOs



Entrenched Distrust in Mental Health

In people of color communities, and tied with sexual orientation and gender identity, mental health distrust persists as a significant barrier.



Culturally Sensitive Clinicians

Even among Black and people of color therapists, there still exists a Western European psychoanalytic paradigm that does not adequately or appropriately address Black and people of color mental health, and with persistent homophobia, presents significant barriers to accessing and adhering to care for LGBTQ+ communities.



Insufficient funding and CBOs

Disproportionately, mental health agencies nationwide are owned and operated by White people. There is a dearth in Black and people of color CBOs providing mental health services and care and these have limited to no access to funding to assist in their work.

The Future:

- ❖ “Whole Person” Approach
- ❖ Culturally Sensitive Clinicians
- ❖ Community-based Services

- **Increasing “Whole Person” mental health approach**
To continue mental health awareness, promoting the “Whole Person” type of mental health approach; DBGGM recognizes that mental health isn’t the same for Black and people of color, and plans to bring more mental health first aid type fora/workshops to its key and expanded communities.
- **Develop relations with culturally sensitive clinicians**
Through partnerships with education institutions, participation in the State OMH, and relationships with clinicians - to encourage more culturally sensitive and appropriate mental health treatment paradigms, including LGBTQ+ communities’ needs.
- **Community-based service**
Taking examples from other community-based organizations, DBGGM plans to, with access to funding, expand and embark on providing mental health services directly to predominantly Black and people of color communities and develop a cadre of clinicians to provide care in these neighborhoods.



Raising Awareness, Changing and Saving Lives

Antoine B. Craigwell

DBGM, Inc.

antoineb@dbgml.org

Websites:

- dbgml.org;
- yana-thefilm.com;
- inmymindconference.com

Region 3

U.S. Department of Health and Human Services

SpiritWorks Foundation

Williamsburg, Virginia





Mission Statement

Together we are working to break the intergenerational cycle of addiction in families by educating, equipping, empowering, and celebrating individuals, families, faith leaders and communities on their journey from addiction to recovery.



Our Services



SpiritWorks Recovery

We build resilience in children and inspire youth to live drug free lives while supporting, educating, and empowering adults who live in recovery.

Provisions for the Journey

We offer vital provisions for the journey from a life of brokenness to a life of healing and wholeness. These provisions are made available through a website, resources, and referrals.

SpiritWorks Institute

We are creating a knowledge base to guide individuals, families, allies, communities, and others who are working to build or rebuild thriving communities that have been sickened by addiction.

Serenity Shawls

These shawls provide a hug from God and a hug from SpiritWorks Foundation to those who are experiencing loneliness and isolation, reminding them that they are never alone.

Spirituality in Recovery

For those who want God to be part of their recovery we offer programming that includes retreats, individual and group guidance and direction, recovery worships, and recovery Bible studies.

Parents and Families

We provide emotional and social support while applying effective and accessible evidence-based tools needed for change to parents, families, and the loved ones of those struggling with substance use.

Major Successes



Recovery Ally Training

We offer *training* for faith leaders, allies, professionals, and community members to improve health equity, decrease stigma, grow intervention skills, and *be part of the solution*.



Recovery Inside the Walls

We deliver recovery life skills, coping skills, education, and recovery management to *women and men who are incarcerated* due to their alcohol and drug use.



Parents & Family Support

We focus on *helping parents and family members* who are dealing with their loved ones' addiction enabling them to develop their own strategies and tools for healing and wholeness

Major Challenges / Barriers



- **Recovery Supported Housing**

The need exists for *long-term secure housing* to serve as a haven from the social, psychological, physical, emotional, spiritual, and economic burdens that drive women and men to desperate means in order to survive.
- **Respite**

Respite is needed to address the dangers associated with post-release from the hospital, jail, treatment, and recovery residences. A safe place is needed during the transition into treatment or recovery supported services.
- **Workforce Development**

Opportunities for individuals in recovery to *work* towards economic self-sufficiency in a recovery supported environment are desperately needed.

Looking Ahead ...



Invitation to Change

Addressing the need for help by developing a community of informed parents, clergy, peers, and others who can offer *effective understanding and help* to those seeking recovery.



Community of St Monica's

Providing *sanctuary* and support along with educational opportunities for women with a significant history of trauma and substance related problems who are seeking reunification with their children.



Lifelines – Respite Program

Addressing the *most dangerous time* in the life of a person with addiction ... the 72 hours after release from treatment, jail, or hospitals.

The Rev. Jan M. Brown, MSc, RCP, CPRS

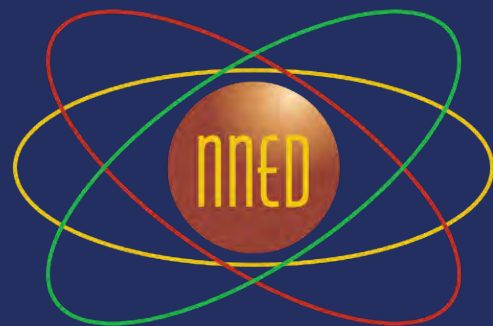
Founding / Executive Director
SpiritWorks Foundation
jan@spiritworksfoundation.org
757-903-0000

www.spiritworksfoundation.org

www.provisionsforthejourney.org

www.spiritworks.institute

www.serenityshawls.org



SAMHSA

Substance Abuse and Mental Health
Services Administration





Latino Community Services, Inc.

Region 1



Keeping Involvement through Knowledge and Insight

Population of Focus:

Project KIKI targets Young Latino and Black men who have sex with men and Transgender who have received a primary diagnosis of substance use disorder (SUD) or co-occurring substance use and mental disorder (COD). Men who have sex with men (MSM) ages 30 and older with SUD and/or COD will also be served but the Young MSM population is the primary focus.

Young MSM of color are at extremely high risk of HIV. The Centers for Disease Control found that if “current HIV diagnoses rates persist, about 1 in 2 Black men who have sex with men (MSM) and 1 in 4 Latino MSM in the United States will be diagnosed with HIV during their lifetime.” (CDC, 2016)

Screening Tools

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MENTAL HEALTH

Date completed: ____/____/____

K6+

Provider: _____
Provider ID: _____

Please use gummed label if available

Patient or Client Identifier:	
Surname: _____	
Other names: _____	
Date of Birth: _____	Sex: _____
____/____/____	Male <input type="checkbox"/> Female <input type="checkbox"/>
Address: _____	

The following questions ask about how you have been feeling during the past 30 days. For each question, please circle the number that best describes how often you had this feeling.

Q1. During the past 30 days, about how often did you feel ...	All of the time	Most of the time	Some of the time	A little of the time	None of the time
a. ...nervous?	1	2	3	4	5
b. ...hopeless?	1	2	3	4	5
c. ...restless or fidgety?	1	2	3	4	5
d. ...so depressed that nothing could cheer you up?	1	2	3	4	5
e. ...that everything was an effort?	1	2	3	4	5
f. ...worthless?	1	2	3	4	5

K6+ SELF-REPORT MEASURE (1 of 2)

Please turn over the page to continue

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Q2. The last six questions asked about feelings that might have occurred during the past 30 days. Taking them altogether, did these feelings occur More often in the past 30 days than is usual for you, about the same as usual, or less often than usual? (If you never have any of these feelings, circle response option “4.”)

More often than usual			About the same as usual	Less often than usual		
A lot	Some	A little		A little	Some	A lot
1	2	3	4	5	6	7

The next few questions are about how these feelings may have affected you in the past 30 days. You need not answer these questions if you answered “None of the time” to all of the six questions about your feelings.

Q3. During the past 30 days, how many days out of 30 were you totally unable to work or carry out your normal activities because of these feelings?

_____ (Number of days)

Q4. Not counting the days you reported in response to Q3, how many days in the past 30 were you able to do only half or less of what you would normally have been able to do, because of these feelings?

_____ (Number of days)

Q5. During the past 30 days, how many times did you see a doctor or other health professional about these feelings?

_____ (Number of times)

	All of the time	Most of the time	Some of the time	A little of the time	None of the time
Q6. During the past 30 days, how often have physical health problems been the main cause of these feelings?	1	2	3	4	5

K6+ SELF-REPORT MEASURE (1 of 2)

Thank you for completing this questionnaire.

Screening Tools cont.

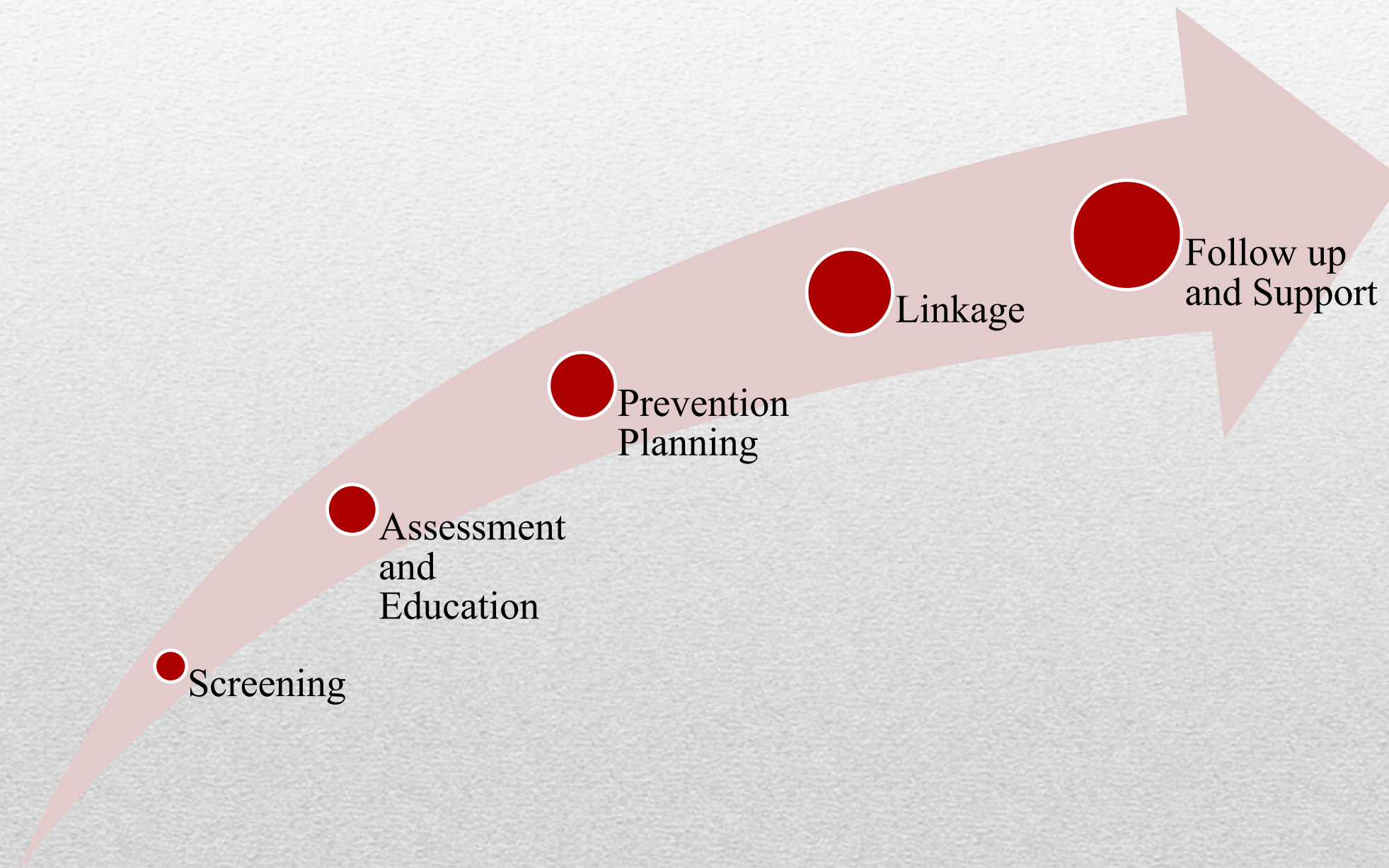
The CAGE Adapted to Include Drugs (CAGE-AID) Questionnaire is an adaptation of the CAGE for the purpose of conjointly screening for alcohol and drug problems. The CAGE-AIDS focuses on lifetime use. When thinking about drug use, include illegal drug use and the use of prescription drug use other than prescribed.

- Questions
- C: Have you ever felt that you ought to Cut down on your drinking or drug use?
- Yes+1
- No+0
-
- A: Have people Annoyed you by criticizing your drinking or drug use?
- Yes+1
- No+0
-
- G: Have you ever felt bad or Guilty about your drinking or drug use?
- Yes+1
- No+0
-
- E: Have you ever had a drink or used drugs first thing in the morning to steady your nerves or to get rid of a hangover (Eye opener)?
- Yes+1
- No+0
-
- 0 points

Initial Steps:

- 1. Identification:** Finding, engaging, and retaining individuals who will benefit from Project KIKI.
 - 2. Assessment and Education:** Assisting individuals in assessing their HIV risk and understanding how Project KIKI could be an option for prevention.
 - 3. Prevention Planning:** Facilitating informed choice about Project KIKI and planning for prevention methods, including developing specific action steps.
 - 4. Linkage:** Facilitating access to mental health, substance abuse and other additional referrals as needed.
 - 5. Follow-up and Support:** Facilitating ongoing assessment of Project KIKI role in the individual's prevention plan.
-

Case Management





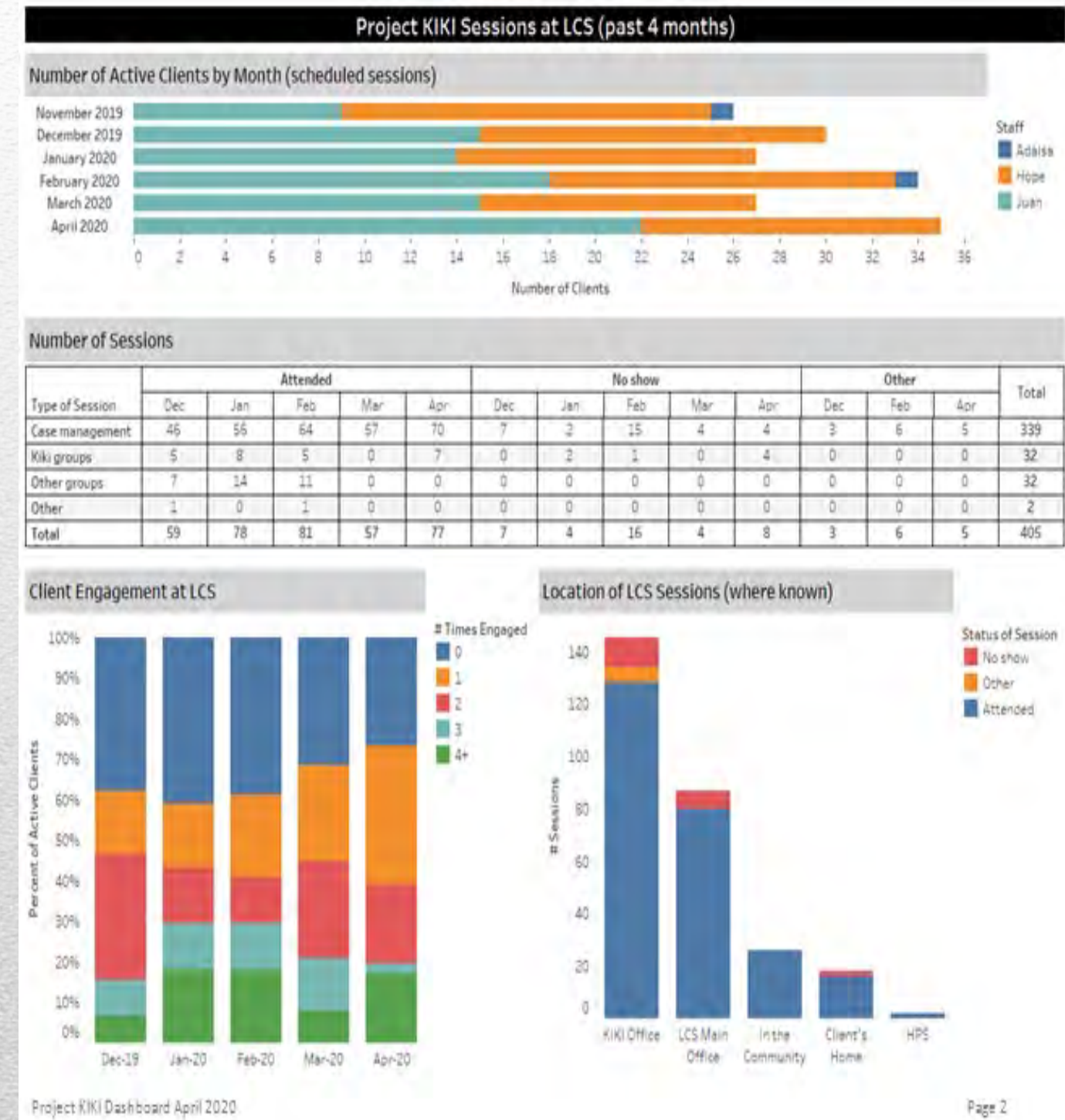
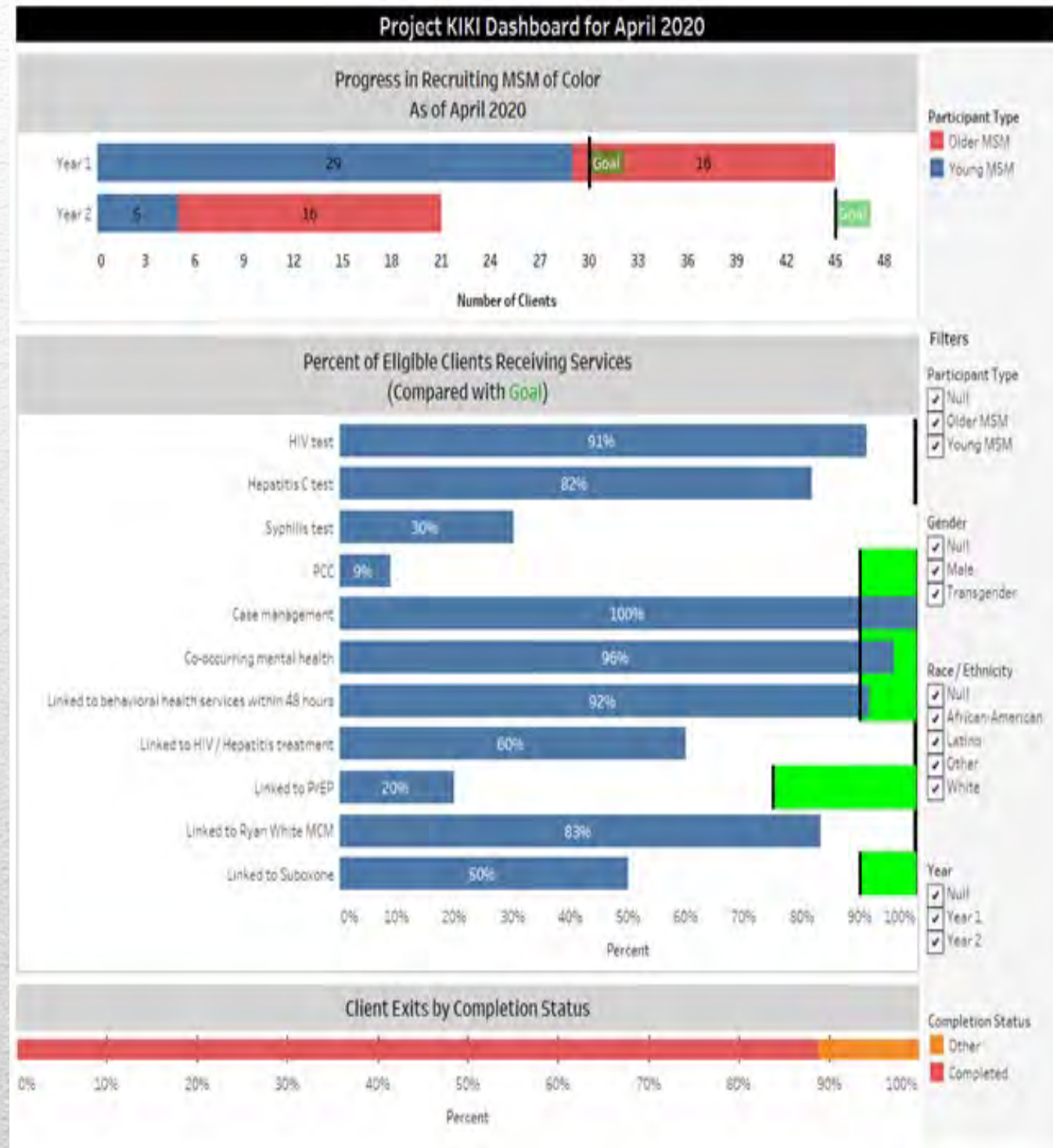
Mental Health/Behavioral Health Treatment: Clients are provided treatment by Hartford Psychological Services consisting of Outpatient Mental Health, Substance Abuse, and Medication Assisted Treatment (MAT) services to program clients including psychotherapy, psychiatric evaluations, and medication monitoring. Program clients are seen within 48 hours of the Case Manager's referral.

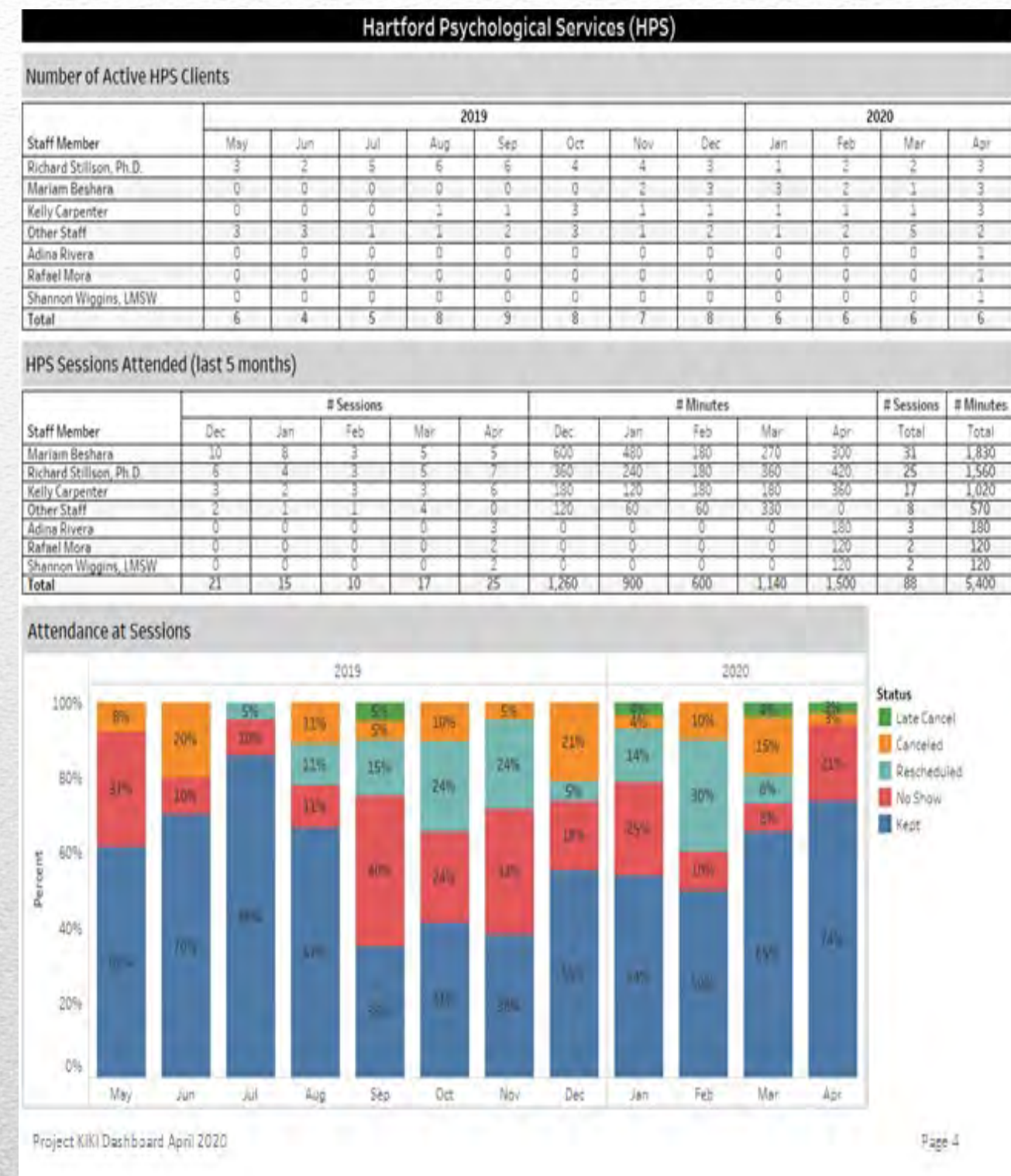
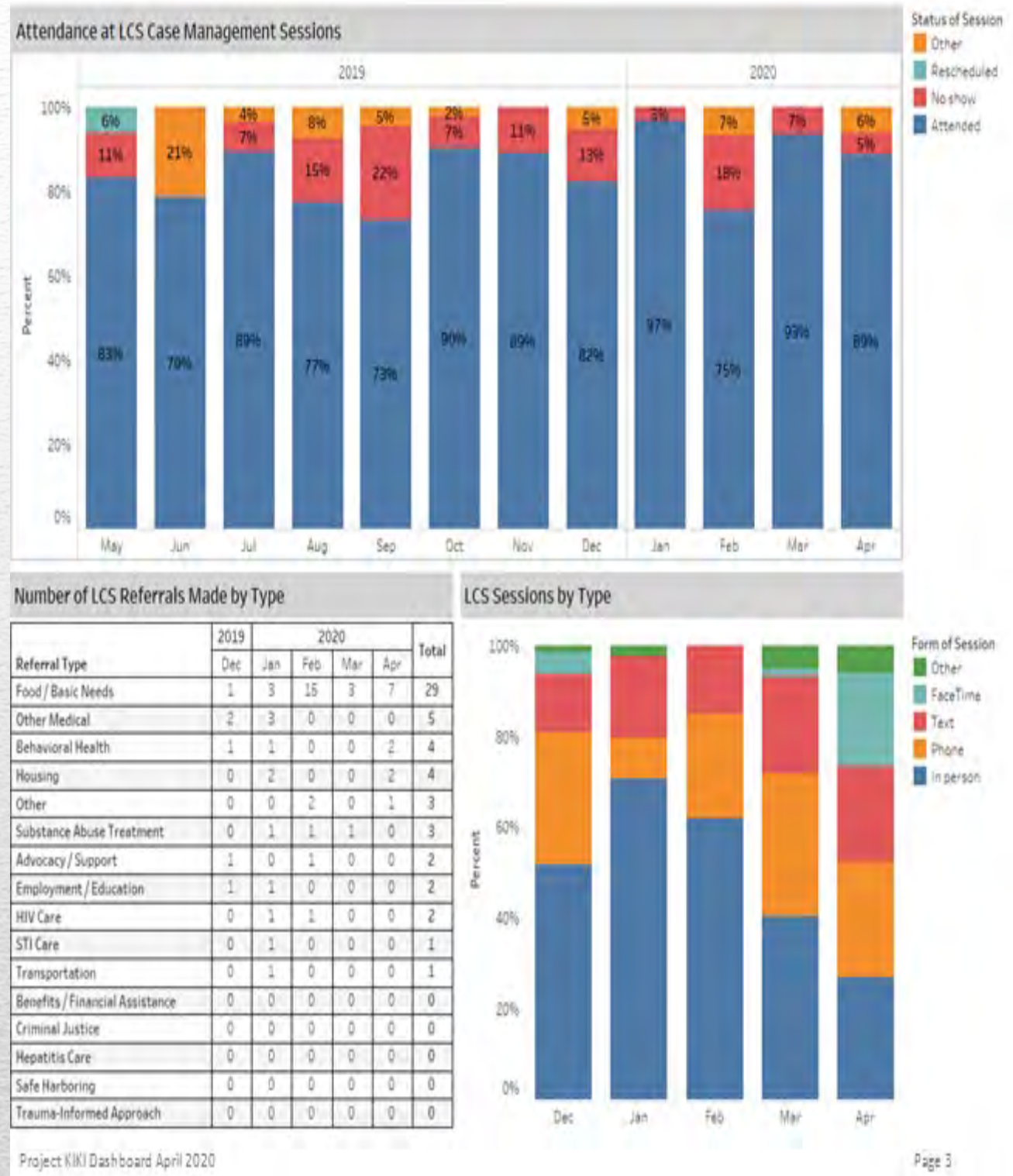


Dr. Richard Stillson is the facilitator, who teaches program clients sustainable life skills including but not limited to: self-awareness, interpersonal skills, conflict resolution, resilience, effective communication, the importance of confidentiality, anger management, dealing with conflicts among friends. Cohorts are held in bi-weekly.

Cohort

Evaluation







Latino Community Services, Inc.

221 Main Street, 3rd FL (Main Office)
Hartford, CT 06106
Phone: 860-296-6400
Fax: 860-728-3782

Satellite Office (Project KIKI)

629 Albany Avenue
Hartford, CT 06102
Phone: 860-595-3840
Fax: 595-3844

Project KIKI Staff

Case Manager/Recovery Support Specialist: Hope Lumpkin
Case Manager/Recovery Support Specialist: Erik Delgado
Project Coordinator: Adaisa Jusino-Ramos
Project Director: Tawana Guadarrama

Project KIKI Subcontractors

Behavioral Health: Hartford Psychological Services, LLC
Clinical Supervisor: Mary-K O'Sullivan
Evaluator: Cross Sector Consulting, LLP

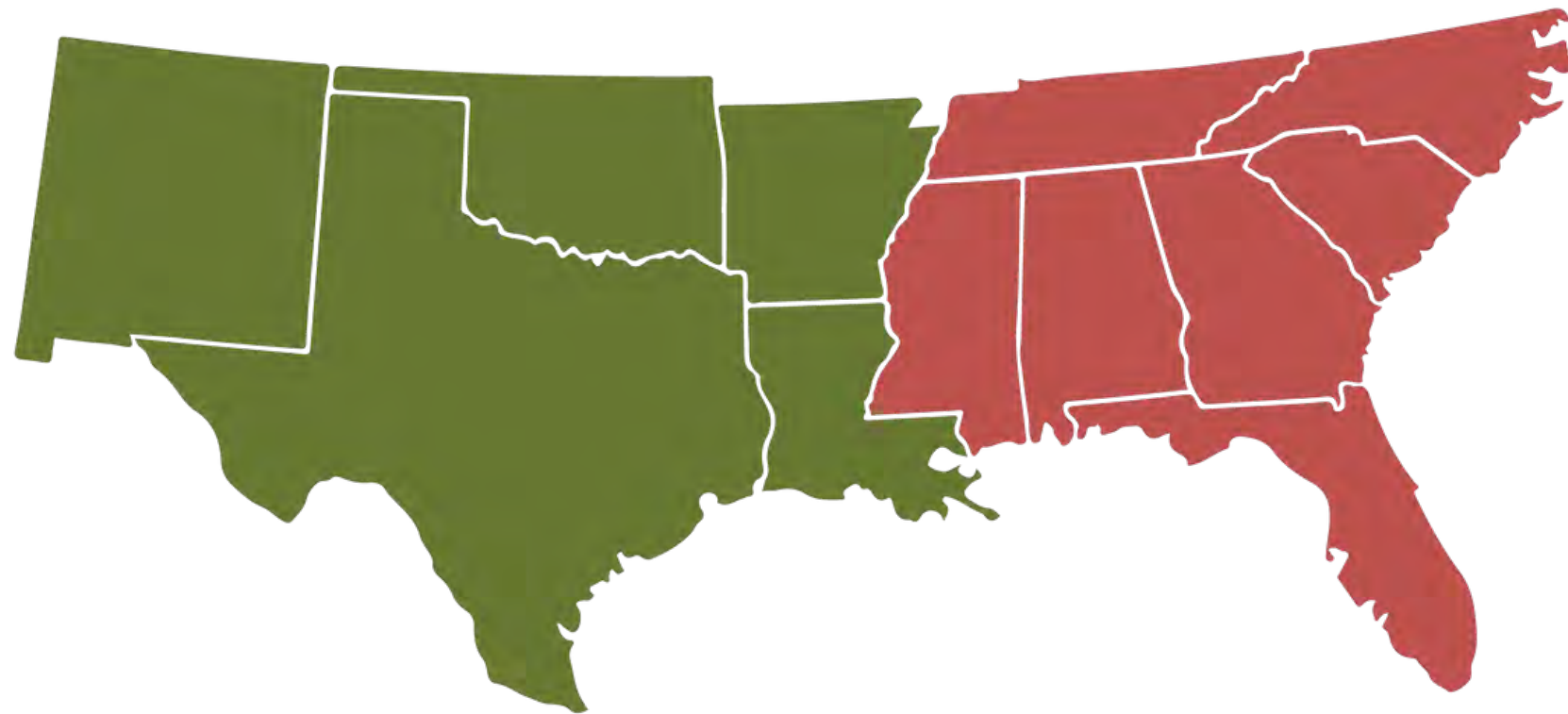




Breakout Room 2

REGION 4

- **Community-Based Organizations:** Gateway Community Services, Nashville Metropolitan Board of Parks and Recreation, Ser Familia, Inc., Universal Institute for Successful Aging of Carolinas
- **Regional/State/Local Leadership:** Kentucky Department of Behavioral Health, North Carolina Department of Health and Human Services, South Carolina Department of Mental Health, South Carolina Department of Alcohol and Other Drug Abuse Services
- **Additional Partners:** Professional Nonprofit Solutions



REGION 6

- **Community-Based Organizations:** Center for Resilience, Family Service of El Paso
- **Regional/State/Local Leadership:** SAMHSA Assistant Regional Administrator, State of New Mexico Behavioral Health Services, Texas Health and Human Services, Indian Health Service Oklahoma City Area, Louisiana Department of Health/Office of Behavioral Health, Oklahoma Department of Mental Health & Substance Abuse Services, South Southwest ATTC
- **Additional Partners:** University of North Texas at Dallas, University of Texas Austin Steve Hicks School of Social Work

Region 4

Gateway – Steps to Recovery

Jacksonville, FL





Mission Statement

To deliver effective treatment and recovery services based on proven steps to help people suffering from alcoholism, drug addiction and related mental health issues



Services

Gateway's service population includes residents of Jacksonville and surrounding areas suffering from substance use, mental health, and co-occurring disorders

Motivational Interviewing

Following a SAMHSA led training in March 2020, Gateway began offering Motivational Interviewing in outpatient programs which has shown to be extremely effective in program retention, patient/staff rapport, and program discharge outcomes

Project Saves Lives

A hospital bridge pilot program utilizing peers with lived experience to connect overdose survivors in Emergency Departments to treatment and recovery services through Gateway and community partners

Medication Assisted Treatment

In 2015, Gateway began providing MAT services to treat alcohol and opioid use disorders. In 2017, it constructed and opened a new outpatient clinic that has provided MAT services to over 2,500 individuals since

Integrated Behavioral and Primary Care

As of February 2021, Gateway now provides comprehensive substance use treatment combined with mental health and primary care for a holistic treatment model that takes on a non-four walls approach to reach underserved and resource-limited individuals

Major Successes



Leading Efforts in the Opioid Epidemic

Gateway is the largest nonprofit provider in Northeast providing Medication Assisted Treatment. MAT is in high demand as opioids continue to claim the lives of so many suffering from Opioid Use Disorder



Frontier of Integrated Behavioral Health Care

Gateway is one of eleven nonprofits in Florida to receive a Certified Community Behavioral Health Center (CCBHC) Expansion grant designed to overcome barriers to treatment by utilizing an open access and non-four walls design

Major Challenges/ Barriers



COVID-19

Gateway transitioned from providing only in-person outpatient services to telehealth services in a matter of weeks when the pandemic began in March 2020. Since then, capacity for our detox and residential programs have had to operate at 50% to comply with CDC guidelines



Funding and Resources

Over the last year, due in large part to COVID, state and city dollars for residential, detox and outpatient programs have decreased leaving a gap in funding and resources for vital programs. Many foundations have turned their focus away from substance use towards mental health while the opioid epidemic continues

Look Ahead

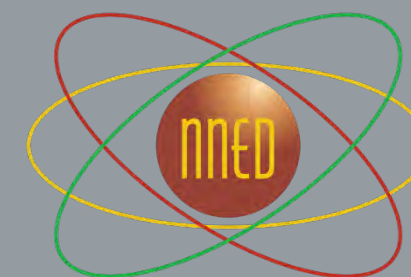
- **Work Towards Enhanced Florida Medicaid Payment Program for Behavioral Health**
Gateway, along with the other CCBHC grantees in Florida, are working on a strategic plan to urge Florida to join the many states offering an enhanced Medicaid payment program for integrated behavioral health services, allowing for an increase in capacity for providers to address the growing number of individuals needing treatment
- **Capital Campaign for New Detox Facility**
Gateway is launching its second Capital Campaign to renovate a property behind its main facility to be a new detox unit. This will increase the current detox census by 50% with an expected number of 45-50 beds

Candace Hodgkins, PhD, LMHC

Gateway-Steps to Recovery

Chodgkins@gwjax.com

www.gatewaycommunity.com



SAMHSA
Substance Abuse and Mental Health
Services Administration



HHS Region 6

PLAAY at CfR Team

Kirshla Hingle, BA

- PLAAY at CfR Lead Trainer
- CfR Lead PLAAY Facilitator
- Graduate Counseling Student



Monica Stevens, PhD

- PLAAY at CfR Principal Investigator
- Assistant Professor of Psychiatry



Brendan Turner, LMSW

- PLAAY at CfR Program Coordinator
- Certified Master Level PLAAY Trainer
- Racial Literacy Trainer
 - The Lion's Story



Liz Marcell Williams, Ed.D.

- Chief Executive Officer, CfR
- Champion of PLAAY at CfR



Mission Statements



The Center for Resilience is an innovative partnership among educators, clinicians, and medical practitioners and provides clinically sound, academically effective, and culturally sustaining services to ensure the emotional well-being and academic readiness of children with behavioral health disabilities in the Greater New Orleans region. Currently, the Center offers separate settings for children in grades K-12 with moderate to significant, diagnosed behavioral health disabilities whose needs cannot be met in a traditional school.

We work with students to build the skills necessary to be successful in a less restrictive school setting so they can one day transition back to their home schools. Ultimately, we aim to make sure all children with behavioral health needs have access to the appropriate services and placements.

The Mission of PLAAY at CfR is:

- To maximize opportunities for the youth and families of New Orleans to experience the PLAAY program, a culturally competent group therapy intervention which focuses upon preventative and healing responses to the racial trauma and stressful events that individuals and communities endure.
- To contribute research to the existing base of evidence creating possibilities for the PLAAY program to expand throughout the southeast region of the United States.

Our Core Programs

Relationships-Based Day Treatment

A relationship-based day program providing a blend of therapeutic, medical, and academic service for students with emotional health and trauma-related needs who cannot currently be served in traditional academic settings.

Prism

A specialized, highly structured, supportive, and neurodivergence-empowering setting providing Applied Behavioral Analysis (ABA) and children with autism spectrum and related disorders who also experience significant behavioral challenges.

PLAAY

A cutting-edge intervention program tailored for African American youth which utilizes sports-based conflicts to help students develop stress reduction and face-to-face conflict mitigation strategies. We also provide youth-facing professionals with Racial Literacy and PLAAY facilitation.

Major Successes of CfR



Reduced need for restrictive placements

Children enrolled at CfR experience:

- decreased frequency of **acute** psychiatric hospitalization (60%)
- decreased **long-term** psychiatric hospitalization (34%)
- avoidance of and/or diversion from suspension, expulsion, and juvenile justice (quantitative data pending)
- successful return to sending or recommended placements (89%)

Stakeholders approve!

- 88% of partner schools rate themselves as satisfied or very satisfied
- 88% of parents rate themselves as satisfied or very satisfied

Major Successes of PLAAY

CfR is designated as the HUB in the Southeast for the implementation and dissemination of PLAAY by Dr. Howard Stevenson!!

.... And we're excited about this because:

- **Academic Impact via REC research**
 - Increased school attendance
 - Increased school engagement
 - Reduced disciplinary incidents
- **PLAAY at CfR (Pilot) Qualitative Data**
 - improved social skills (e.g., self-advocacy)
 - increased conflict-resolution capacity
 - increased problem-solving skills
 - larger, more engaged groups
 - positive peer interactions
 - improved verbal emotion expression
 - improved self-regulation



Major Challenges & Barriers for PLAAY in Region 6

- An inadequate continuum of care in the Southeast
especially for underserved communities that are disproportionately made up of individuals of color

- The disconnect between academic institutions/professionals & CBOs
 - Rigidity within EBTs
 - Lack of
 - community member inclusion, voice, & choice
 - acknowledgment of racial stress
 - Historical distrust of academic/medical endeavors

- Beyond funding...real sustainability needs:
 - Support for academic study of culturally-relevant interventions to elevate the work to EBP status
 - Identification and advancement of the future of professionals who contribute to team diversity and local culture

Our North Star



Our Heart

We are dedicated to efforts that reduce racial inequities via our partners, privileges, & lived experiences. We believe that societal inequality will not be extinguished for many years, but we can prepare youth to challenge systems and equip them with the skills to protect themselves from violence, injustice, and internalized racial stress.



Our Mind

We leverage our relationships with academic institutions to scientifically and objectively evaluate the PLAAY program. We acknowledge the need for novel evidence-based approaches that address systemic issues which contribute to unacceptable outcomes for young people.



Our Reality

We are actively and successfully pursuing relationships with our community partners and leaders to eliminate barriers for this simple yet highly effective program. Yet... we need support to expand the work.

Proactive Steps

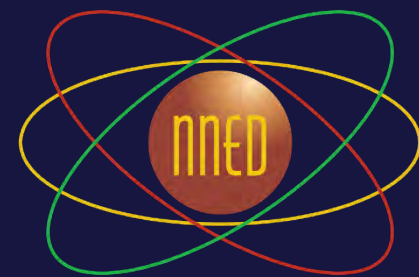
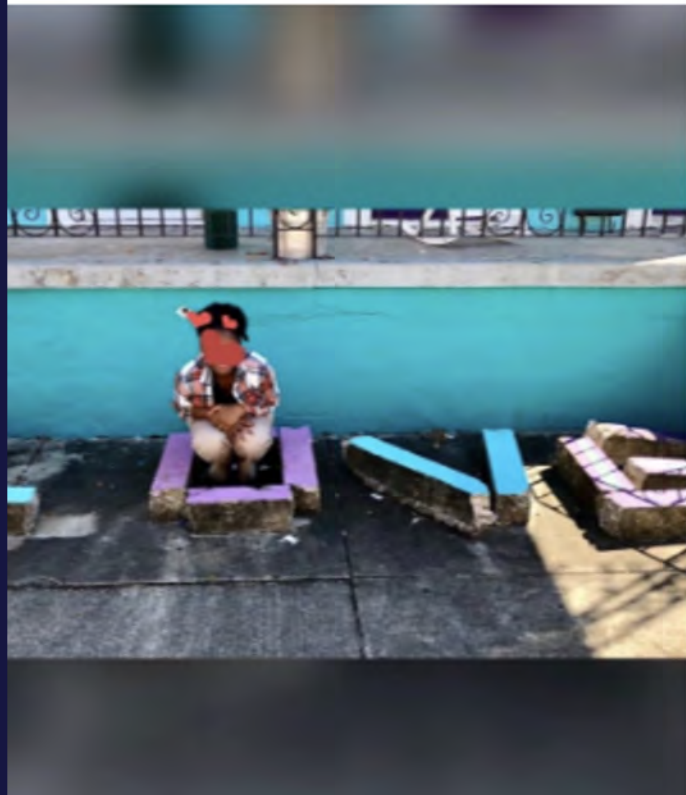
Target audience:
Schools/Recreational & Religious
Centers



Reactive Plan

Target Audience:
Hearing Office/Juv Courts/
DA's Office







Ser Familia

Developing Strong Families™

HHS Region 6

Vision and Mission

Our vision is all Latino families flourishing and contributing to the well being of their communities.

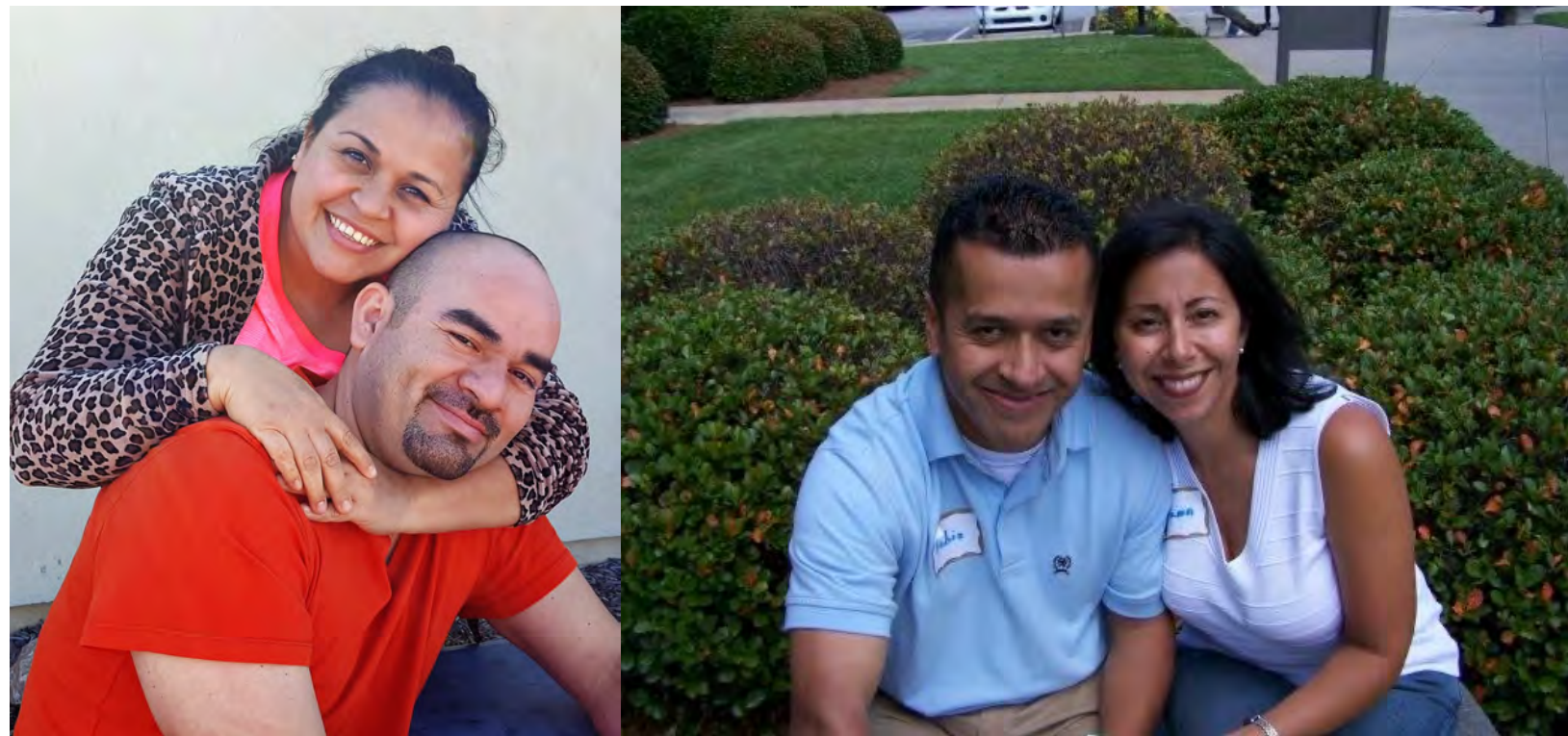
Ser Familia provides preventive family services and equips Latinos with tools, resources, and skills they need to move from crisis to thriving.

Our values are faith, hope, love, family, integrity



Couples Program

Our couples' program teaches communication and conflict-solving skills to couples, to help them recover confidence in each other and regain mutual respect.



Youth Programs

Led by Latino teens, **Renovación Juvenil** fosters socio-emotional learning and leadership skills.

Nuestra Escuelita provides culturally responsive teaching, so students become critical thinkers, multilingual and proud of their heritage, while they prepare to excel in their academic subjects.



Strengthening Families

Strengthening Families reduces problem behaviors, delinquency, and alcohol and drug abuse in children and improves social competencies and school performance.



Parenting

Triple P (Positive Parenting Program) provides parents with the skills to create a home environment in which children can grow emotionally healthy and free of abuse or neglect.



GLADV & Immigration Legal Services

Our Georgia Latin@s Against Domestic Violence program provides assistance for victims of crime including support groups, counseling, emergency assistance and more. It also empowers other victims' services providers by offering educational programs and technical assistance so that they are better equipped to serve Latino victims. The program also advocates for Latinos crime survivors and offers immigration legal services to those who qualify.



Mental Health Counseling

Counseling services improve self-esteem, relationships with others, and dealing with life events. Our therapists take a trauma-informed, client-centered approach taking into account the person as a whole: body, spirit and mind, and use therapeutic interventions tailored to the client's individual needs. We also offer Play Therapy for children.



COVID -19

Crisis

- 53% of our Latino families reported household food insecurity.
- 66% of clients have lost jobs. 39% don't qualify for unemployment and 52% don't qualify for SNAP.
- Increase of 112% in Domestic Violence Cases & 200% increase in cases of Child Sexual Abuse.
- None of the shelters nor mental health boards have consistent mental health services in Spanish in Georgia.
- Less than 150 Spanish-speaking licensed mental health professionals to care for almost 800,000 Latinos

Response

Our regular services plus:

- \$1.2 million in rental and utility assistance; \$300,000+ in groceries vouchers; 500,000+ pounds of food and more.
- COVID-19 testing & vaccination

Future

- Increase Domestic Violence services
- Add clinical staff to support response to an increase of 40% in depression symptoms, 27% in suicide ideation and many more child sexual and physical abuse cases
- Continue to provide emergency financial assistance

Metro Parks and Recreation – Davidson County

Nashville, TN

HHS REGION 4





Mission Statement

It is the mission of Metro Parks and Recreation to sustainably and equitably provide everyone in Nashville with an inviting network of parks and greenways that offer health, wellness and quality of life through recreation, conservation and community.

Services

Service Population

Parks and Greenways

Community Centers
Senior Centers
Nature Centers
Trails /Greenways

Health

Fitness Centers/ Classes
Aquatics Center/Classes
Golf
Sportsplex

Programs

Health and Wellness
Nutrition
Sports and Leisure
Youth and Adult

Cultural Arts

Dance
Theater
Visual Arts
Museums

Outdoor Recreation

Camping
Kayaking
Bike Trails

Events

Celebrate Nashville
5ks
Dog parks

Major Successes



Innovative Relationship Building

Various partnership with federal, local and community organization to meet the needs of our local community. This alliance provides various opportunities for shared knowledge and training



Post Pandemic Quality of Services

Adapted quickly and flexible to the needs of the community and maintain the of services provided to stakeholders.

Major Challenges/ Barriers



Pandemic

Staffing
Staff Wellness



Funding

Availability of alternative funding
resources



Accessibility

Flexibility of service provided

Look Ahead



Program Development

Using data system to support need allocation. Securing funding for growth



Resource/ Partnership Network Growth

Growth of resources
Providing opportunities of growth



Evaluative Process Implementation

Ensuring equitable access to services

Darlene Morrow Barbara Manuel Cassie Deas

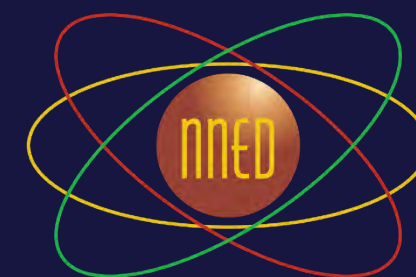
Metro Parks and Recreation – Davidson County

Darlene.Morrow@nashville.gov

Barbara.Manuel@nashville.gov

Cassie.Deas@nashville.gov

[Nashville.gov/Parks& Recreation](http://Nashville.gov/Parks&Recreation)



SAMHSA
Substance Abuse and Mental Health
Services Administration

Family Service of El Paso

El Paso, TX

REGION 6





Mission Statement

We deliver mental health services that improve the life, health, and wellbeing of individuals and families in the El Paso community.



Services

Mental Health Counseling

Age

Provide mental health counseling starting at 4 years of age.

Treatment Modalities

Individual, family, couples

Treatment Interventions

Provide CBT, CPT, TF-CBT, EMDR, PT

Languages

Provide services in English and Spanish

Psychiatric Care

Connect clients to psychiatric services in the community

Training

Provide internship/practicum opportunities for mental health and business administration graduate students

Major Successes



Counseling Sessions

Provide 19,000 counseling sessions annually regardless of people's ability to pay as reflected by 75% of our population (N=3000) falling below the HUD Poverty Guidelines.



Accessible Mental Health Care

Make mental health care accessible to all regardless of age, ethnicity, sexual orientation and acculturation levels, which is reflected in our population size growing from 900 in 2009 to 3000 in 2019.



Training of Student Interns

Train between 16 to 25 graduate level student interns per year in addition to about 20 provisionally licensed therapists.

Major Challenges/ Barriers



Funding

Funding is one of the major historical challenges akin to most non-profit organizations.



Lack of Physical Space

Lack of physical space to provide services comfortably has become a challenge after our service population started gradually increasing in the last 10 years.



Adjusting to Telemedicine

Adjusting to telemedicine has been a recent challenge after the COVID-19 pandemic hit our community.

Look Ahead

- **Continue Providing Telemedicine**
Continue providing telemedicine indefinitely as an integrated part of our mental health care services to the community despite of the COVID-19 pandemic status.
- **Seeking Funding & Providing Resources**
Seek funding for our Navigations Program to continue providing information about community resources to El Paso community members.
- **Seeking Funding for Peer Support**
Seek funding to establish a peer support program that may include the development of support groups for El Paso community.

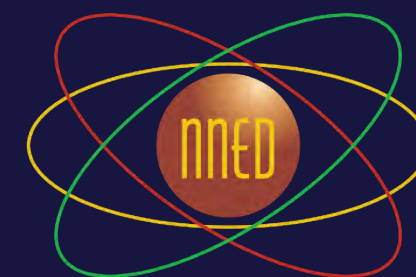
Family Service of El Paso

Family Service of El Paso

Email

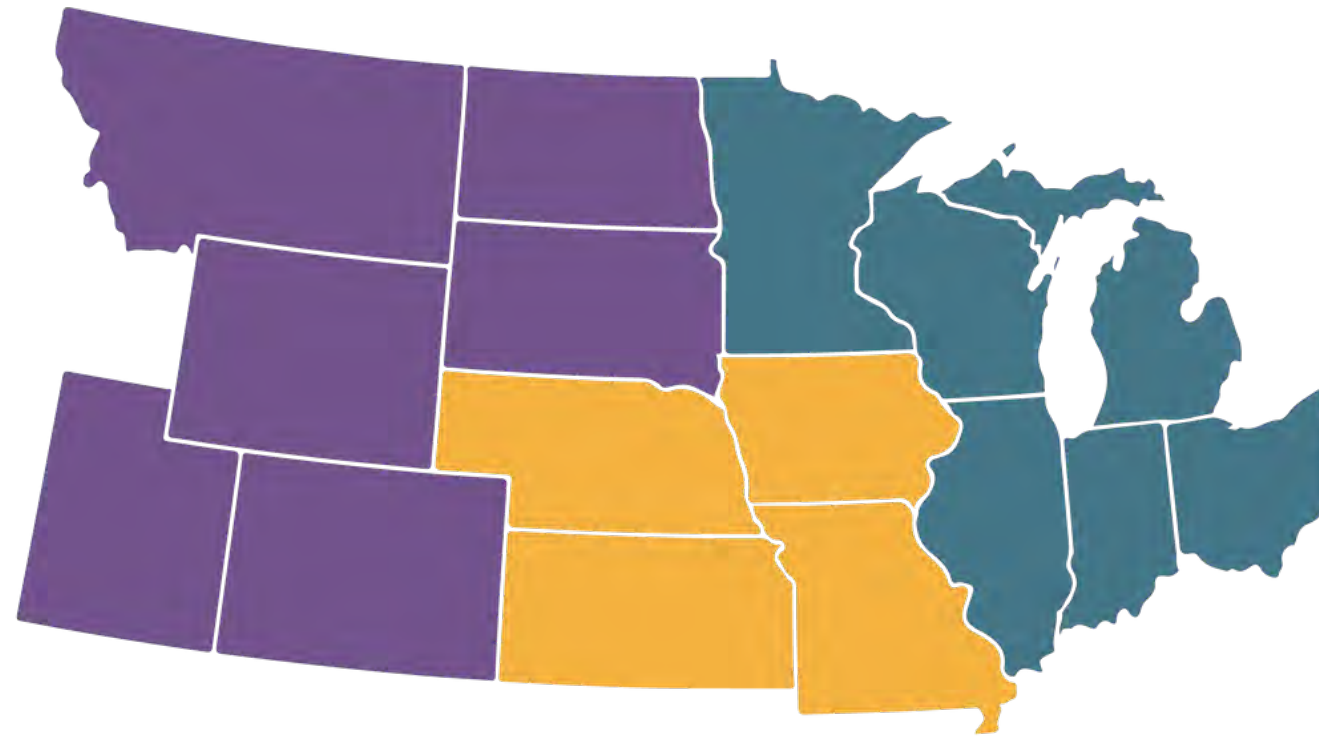
(915) 999-8715

<https://www.familyserviceofelpaso.org/>



SAMHSA
Substance Abuse and Mental Health
Services Administration

Breakout Room 3



REGION 8

- **Community-Based Organizations:** Pacific Island Knowledge 2 Action Resources, Latino Behavioral Health Services
- **Regional/State/Local Leadership:** SAMHSA Regional Administrator and Assistant Regional Administrator, Colorado Department of Human Services Office of Behavioral Health, State of Utah, Utah Division of Substance Abuse and Mental Health
- **Philanthropist:** Caring for Denver Foundation

REGION 5

- **Community-Based Organizations (presenting):** Bhutanese Community of Central Ohio, Centro Multicultural La Familia
- **Regional/State/Local Leadership:** SAMHSA Regional Administrator and Assistant Regional Administrator, Illinois Department of Human Services/Mental Health Division, Michigan Department of Health and Human Services Behavioral Health and Developmental Disabilities, Ohio Department of Mental health and Addiction Services
- **Philanthropists:** Blue Cross Blue Shield Minnesota, Casey Family Programs, Comer Family Foundation, Gateway Foundation, Michigan Health Endowment Fund
- **Additional Partners:** Sisters of Charity Health System, St. Vincent Charity Medical Center

REGION 7

- **Community-Based Organizations:** Center for Holistic Development, Santee Sioux Nation Society of Care
- **Regional/State/Local Leadership:** SAMHSA Regional Administrator and Assistant Regional Administrator, Region 6 Behavioral Healthcare, Nebraska Department of Health and Human Services-Division of Behavioral Health

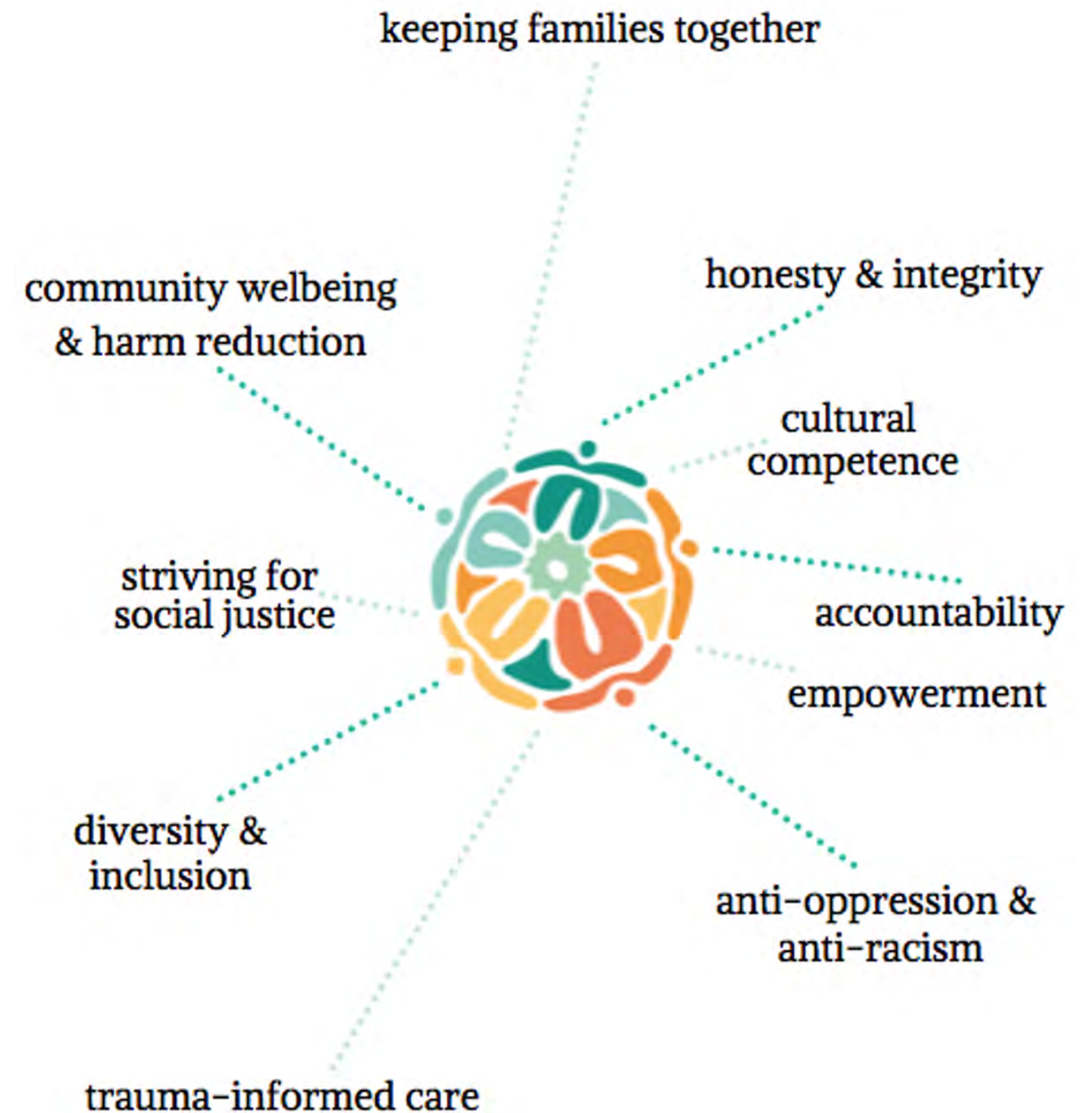


CENTRO MULTICULTURAL
La Familia
Healthy Families. Happy Children.

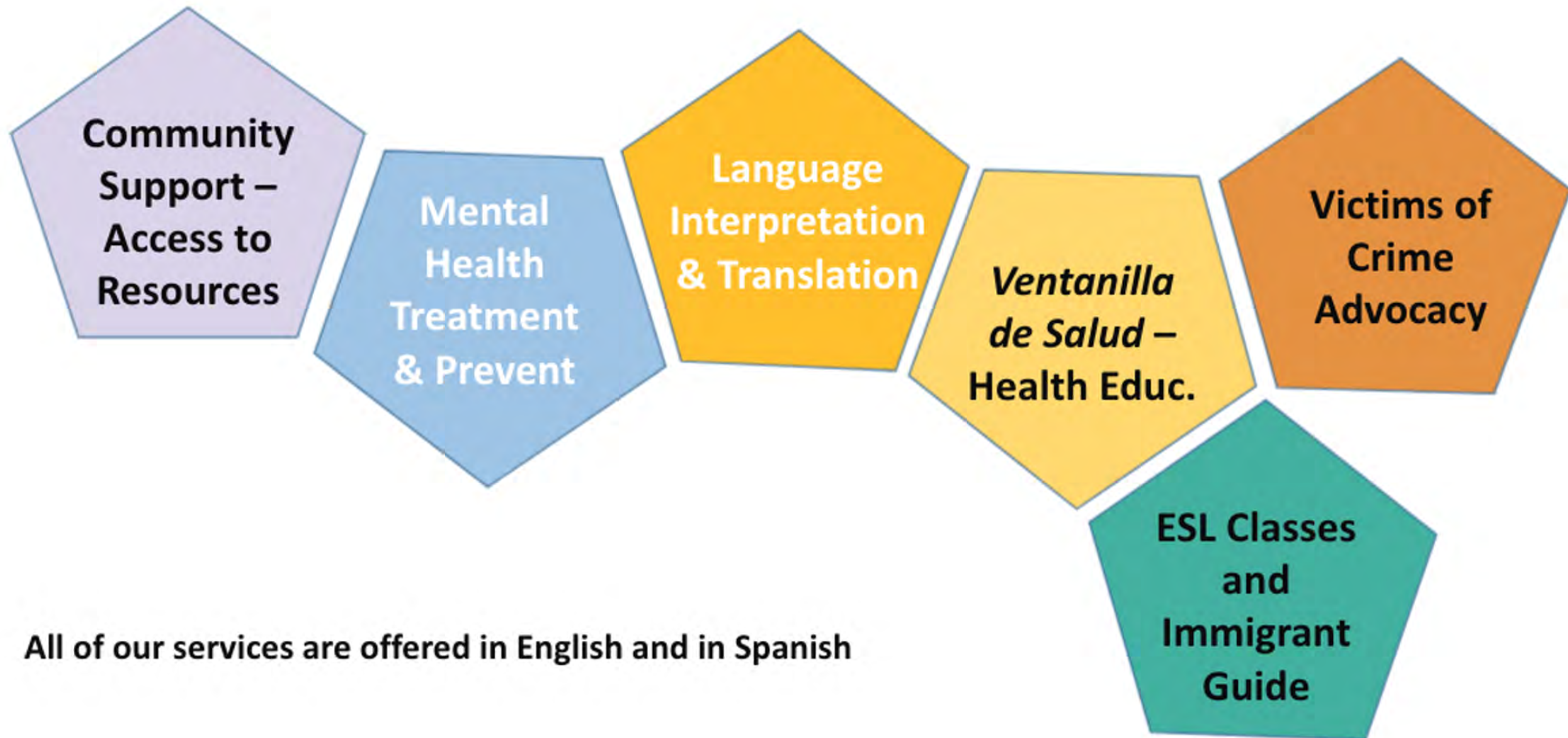
REGION 5

Mission & Values

Centro Multicultural La Familia (CMLF) is a private, non-profit, mission-driven organization that provides comprehensive services to a diverse community based in Pontiac, MI. Our mission is to provide culturally-competent support services to families in a holistic approach in order to improve their quality of life. We are proud to be able to offer culturally and linguistically competent services in the areas of mental health, substance abuse, domestic violence, parenting programs, advocacy and community partnerships throughout Oakland and Macomb counties.



Get to know us: Our Services



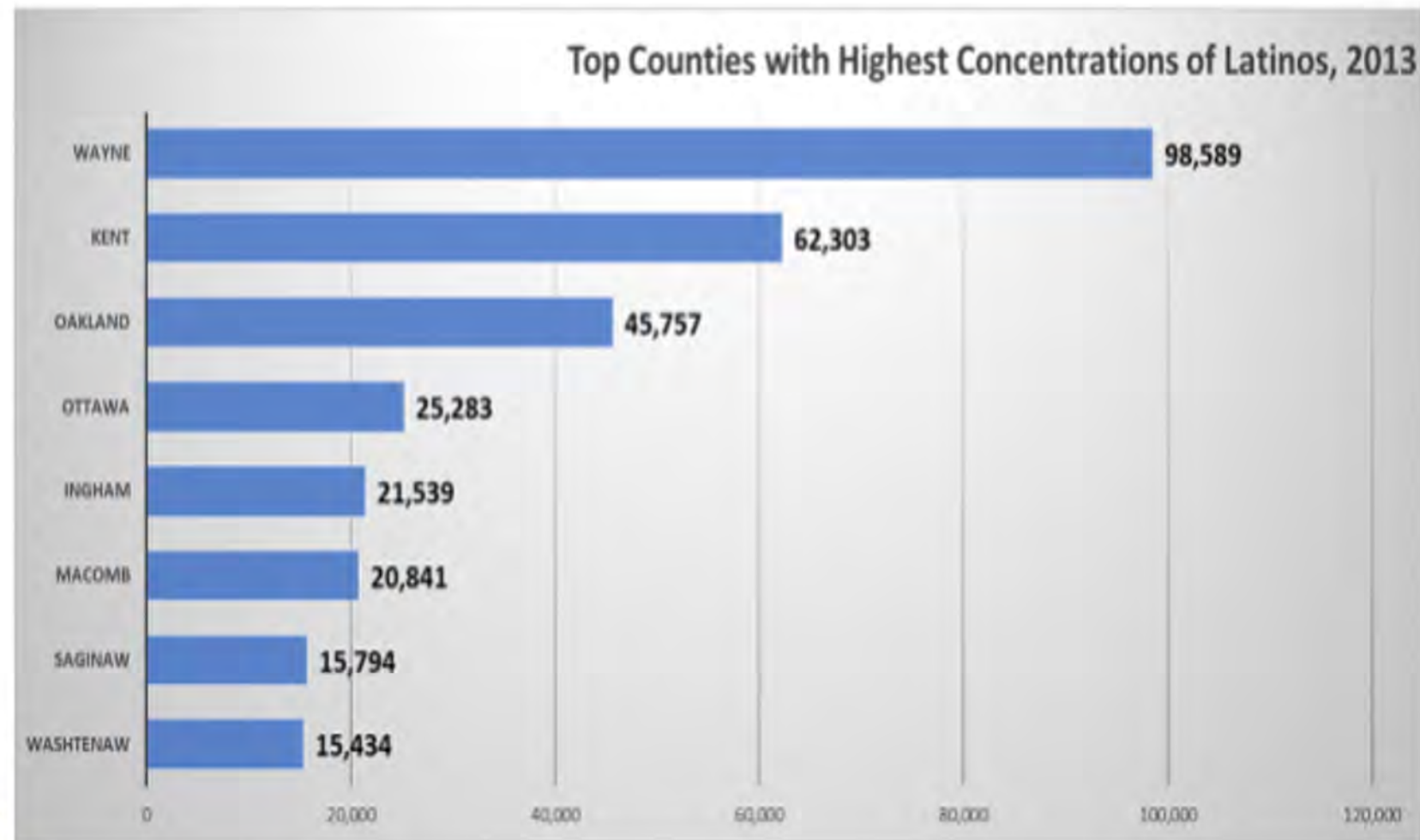
All of our services are offered in English and in Spanish

OUR SERVICES – Description - ACCESS

MENTAL HEALTH PROGRAM	VICTIMS OF CRIME PROGRAM	HEALTH EDUCATION & PROMOTION
Individual, group and Family Therapy for adults and children including psychiatric evaluations and medication reviews, case management and other holistic approaches to healing	Advocacy-based counseling including emotional support and case management, language interpretation, court accompaniment for victims of several crimes including domestic violence, sexual assault, human trafficking, bullying, child abuse, physical assault, stalking and hate crimes	<ul style="list-style-type: none"> -Providing relevant information and resources to get better informed on issues related to nutrition, healthy lifestyles, management of chronic illnesses and referrals to needed healthcare services -Prescription for Health program which provides nutrition education and vouchers to purchase fresh fruits and vegetables
COMMUNITY SUPPORTS	PARENTING EDUCATION	RADIO STREAMING SERVICES
<ul style="list-style-type: none"> -Assistance with applications for medical insurance -Translations of documents -Referrals for financial assistance -Information and referral to bilingual providers (attorneys, doctors) -Language interpretation at different sites to assist clients communicate with their health providers 	Teaching parenting skills to help parents manage difficult behaviors and guide their children using positive techniques	<ul style="list-style-type: none"> -Interviews and presentations on different topics related to our program offerings -International music and cultural showcase of global traditions and folklore -Promotion of events such as Vaccination Clinics, COVID testing, Health Fairs, Educational Forums, etc

Diversity is Our Strength

Michigan Statistics



Origins of the Latino Population in Michigan

- Mexican - 73.8 %
- Puerto Rican - 9.4 %
- Central American - 5.1 %
- South American - 3.4 %
- Cuban - 2.1 %
- Dominican - 1.2 %
- Other Latino - 5 %

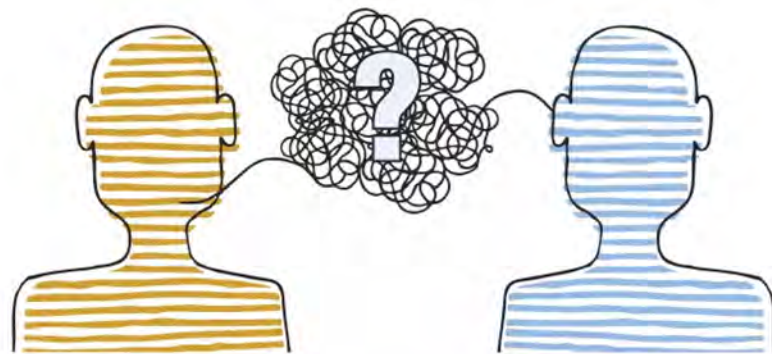
SE Michigan	Mexican	Puerto Rican	Cuban
187,694	133,540	21,420	3,221
Oakland			
43,264	27,827	6,761	734
Wayne			
96,314	73,400	10,480	1,376

Culture and Language are Important!

How to overcome mistrust

TOOLS: Awareness Knowledge Skills

- Provide accurate and appropriate information at all times
- Identify expectations, fears, doubts and frustrations
- Frequently check for understanding
- Create realistic expectations



What do you see as the importance of language access and cultural humility? What are some ways this is done in your workplace?

Get to know us: CMLF Staff

- Today we have 22 employees
- 88% bilingual or multilingual AND bicultural
- 82% of staff from Latin descent (Mexico, US, Chile, Puerto Rico, Peru, Bolivia, Brazil)
- Includes bachelor's, master's and doctoral level professionals
- Passionate about serving the community

Major Successes



Success

Growth of our Victims of Crime funding – it went from \$295,000 to \$746,261 in 3 years which allows us to serve more clients.



Success

Received a donation of a school building with 4 acres of land – we will develop a community center to strengthen BIPOC relationships



Success

Radio streaming program which allows us to outreach to many communities and provide education

Major Challenges/ Barriers



Challenge/Barrier

Developing a capital campaign for the building with limited staffing



Challenge/Barrier

Space limitations to implement group and workshops



Challenge/Barrier

Make up of Board is new members – need more members with fundraising skills

Look Ahead



Future Initiative/Growth

We are revising our mission and vision to become more intentional about social justice and diversity



Future Initiative/Growth

With additional space, we can provide a wider array of services and expand to other cities that have limited services for the Latinx community



Future Initiative/Growth

New funding to implement Exito Educativo – a program to help students wanting to go to higher education

How to Reach Us!

Centro Multicultural La Familia

35 W. Huron St. Suite 100

Pontiac, MI 48342

248-858-7800

Sonia Acosta, PhD

sacosta@centromulticultural.org

248-867-2381 cell



HHS REGION VII

Santee Sioux Nation

Society of Care

NEBRASKA

Alliance●Chadron●Gordon●Lincoln

Macy●Omaha●Santee●Walthill

Winnebago

society of care





Mission Statement

The Society of Care is a leading trauma resource for self-identified Native American youth and their families in Nebraska. We care for our relatives by providing accessible, affordable and culturally sensitive behavioral care. As passionate advocates, we give Native youth a voice, connect them to services, provide wellness education, instill cultural pride and empower them to build resilience. We believe in a brighter future for our relatives and are guided by caring deeply, transforming lives and healing communities.



Services

Working alongside Nebraska self-identified indigenous young people, families, and communities

Evidence Based Therapeutic Counseling

Trauma Focused Cognitive
Behavioral Therapy (TF-CBT)
...and more

Suicide Prevention

Culture Is Prevention
cultural events, talking circles, beading,
sewing

Zero Suicide Academy

Substance Abuse Prevention

Project Venture -- National
Network to End Behavioral Health
Disparities (NNED)

Addressing Social Determinants of Health

Community Response

Youth Empowerment

Foster & Build Resilience
Trauma Warriors
UNITY Councils
Youth MOVE chapter

System Change / Research

Nebraska State Children's Impact
Collective Leadership Board
(System of Care)

Need Assessments

Major Successes



Building Trust

- We live and work alongside those we serve
- Service recipients are “relatives” in recognition of shared experiences



Depth of Engagement

Through skillful consistent service we have become the provider of choice to Nebraska's indigenous population across geographic and tribal lines



Productive Partnerships

Our approach is collaborative, and we are honored to have strong supportive relationships with others with shared goals and interests

Major Challenges/ Barriers



Intergenerational Trauma

Historical trauma impacts the young relatives, families, and communities we serve in a pervasive continual way



Low Socio-Economic Status

The vast majority of those we serve live in poverty, exacerbating their behavioral health concerns



Sustainability

We have grown and thrived with grant funding, but this is time limited

Look Ahead



Nebraska Native Trauma & Research Consortium

Our master plan is to unite our efforts under this banner in a holistic comprehensive way



Enhance Community Capacity

Support young relatives to reach their potential and communities to care for themselves

-- peer support

-- internships



Sustainable

Private support

Ongoing grant funding

Fee for service

Greg Donovan

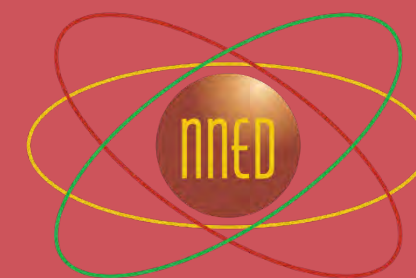
Santee Sioux Nation Society of Care

gdonovan@societyorg

402-580-4837

<https://societyofcare.org/>

society of care



SAMHSA
Substance Abuse and Mental Health
Services Administration

HHS Region 8

PACIFIC ISLAND KNOWLEDGE 2 ACTION RESOURCES



Salt Lake City, Utah

WHAT IS PIK2AR?

PIK2AR is an eco-system of culturally relevant programs, services and events that build people who build families, business and communities from the inside out.



PIK2AR MISSION

To build alliances, bridge communities, and improve the effects of violence, economic impact and strengthen ethnic identity through preserving and perpetuating all Pacific Island arts and humanities.



Services

PIK2AR services the growing population of 60,000 Pacific Islanders in Utah equally mainstream and Hispanic communities.

Cultural Preservation

Pasifika Enriching Arts of Utah is a program of PIK2AR serving as springboard for Pacific Islander Artists of all mediums to showcase their talents, improve in their craft, and connect with other artists. PEAU unites Traditional and Modern forms of Art with an emphasis on cultural and communal art with workshops, art shows, festivals, etc. Under PEAU is PEAU Literary and the Utah Pacific Island Film Series and the Masima Film Festival.

Economic Impact

The Pacific Island Business Alliance is a program comprised of socially responsible and conscious individuals and organizations who, while business oriented, hold the belief that people and profits are of equal importance. PIBA specializes in helping Pacific and minoritized Businesses start, grow and thrive within the community. Under PIBA there exists opportunities for microlending, professional mentorship and Youth Entrepreneurs.

Empowered Living Services

Direct, social services focused, but not exclusive to, our Pacific Island Community. ELS promotes violence prevention and education by offering weekly and bi-weekly support groups for men (K.A.V.A. Talks) and the Women's EmpowHERment group, as well as Community Health Workers and Case Managers who provide no barriers, 24/7 care.. All services are conducted with a culturally relevant lens by Pacific Island staff members.

Major Successes



- **PACIFIC ISLAND BUSINESS ALLIANCE**

The Pacific Island Business Alliance is currently the only Pacific Island centered economic initiative and collective offering resources that has expanded during the pandemic to serve the state of Arizona and will soon be in California

- **CULTURAL RELEVANCE**

Pacific Island Knowledge 2 Action Resources is the only organization of its kind that provides such an expansive array of culturally relevant resources, services, and opportunities in the continental U.S. for Pacific Islanders

- **EXEMPLARY LEADERSHIP**

In 2018 PIK2AR was recognized by the FBI for the Director's Community Leadership Award for outstanding work in violence prevention within the community. In 2021 PIK2AR Executive Director and CEO Susi Felch Malohifo'ou was featured on the Forbes 50 over 50 Impact List due to the impact of her community work

Major Challenges/Barriers



- COVID-19 PANDEMIC

The Pacific Island population in Utah rank #1 in both infections and fatalities for COVID-19. This has made the need for direct services and aid more urgent. While we were able to take majority of our programming online, and even expand our reach, the pandemic presented many obstacles and continues to persist through our communities.

- STRUCTURAL INCONSISTENCY

True collaboration and partnership means sharing the work, the revenue, the power, the control and the visibility. No one knows ethnic communities better than ethnic communities. Let us lead!

- SYSTEMIC PREJUDICE

Due to the ongoing presence of systemic racism and prejudices our communities of color endure, there is a lot of opportunities missed due to either not knowing about them, not being offered these chances, or being purposely excluded.

Looking Ahead



- EMPOWERED LIVING SERVICES

Diversify revenue streams and strengthening sustainability by increasing contracted services like culturally relevant Peer Support and Mental Health services. Create a Train the Trainer program for Pacific Island Violence Education curriculum

- PACIFIC ISLAND BUSINESS ALLIANCE (PIBA)

Focusing on expansion of the Pacific Island Business Alliance (PIBA) and strengthening and broadening the Youth Entrepreneurs program to include a Youth Summer Camp leadership program to support upcoming business leaders

- PASIFIKA ENRICHING ARTS OF UTAH (PEAU)

To establish a multi-purpose, multi-cultural performing arts & film center with a focus on showcasing the arts, both visual and performing, and a space intended for minoritized communities and communal expressions and celebration to strengthens ethnic self identities.

QUESTIONS?

SUSI FELTCH-MALOHIFO'OU
CEO/EXECUTIVE DIRECTOR

PACIFIC ISLAND KNOWLEDGE 2 ACTION RESOURCES

SUSI@PIK2AR.ORG

(801)793-4639

PIK2AR.ORG





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Omaha, Nebraska 68152
P. 402-502-9788
F. 402-502-3450
www.chdomaha.org

Region 7



Doris Moore, MS, NCC, CPC, LIMHP
Founder and CEO



Mission Statement

Since 2001, CHD has served a diverse community by providing holistic behavioral healthcare services and education programs to individuals, families, and groups.

CHD Values

Integrity
Empowerment
Professionalism
Mutual Respect
Holistic Well-being
Honoring Personal Potential
Community Commitment



Holistic Behavioral Health Services

Signature Services and Programs

Outpatient Counseling

Clinical services provided by licensed mental health practitioners to address mental illness and substance abuse issues for all ages .

REAL TALK

An educational program that supports middle school youth with building social and emotional competence. The curriculum engages students to discuss real world issues and teaches strategies for success.

Urban Youth B.O.L.T.

This culturally based intervention is designed to build our leaders today using the principles of Kwanzaa and African American history to realize purpose.

Holistic Family Support

An integrative approach to child welfare services facilitating a creative, rapid, and sustainable positive change in the family unit.

KidSquad

A collaborative, city wide approach to providing childcare staff with tools to encourage social and emotional competence in children with challenging behaviors.

Family Engagement

Education groups using evidence-based techniques to enhance nurturing and parent engagement. Professionals also connect parents to community resources.

Outreach Services

Special programming to meet needs in the African American community to address gaps

GrandFriends

Mentoring program for African American young adults ages 19 – 30. Seasoned mentors are available to assist with life's transitions using a listening ear and nonjudgmental support in problem solving and goal achievement.

Brighter Days

A holistic approach to suicide prevention in the African American community. This effort seeks to create awareness, support, and resources.

Still I Rise

A resource to address domestic and intimate partner violence in the African American community.

Minority Mental Health Conference

An education effort to provide professional behavioral health workshops through the lens of African American professionals and service participants.

Community Kwanzaa Luncheon

A community celebration focused on educating the community on the principles of Kwanzaa and practical application.

Behavioral Health screenings

FREE, confidential and anonymous behavioral health screenings designed to educate and encourage utilization of services when appropriate.

Major Successes



Success

The Center for Holistic Development, Inc. is the only, full service behavioral health organization in Omaha to intentionally address the needs of the African American community for 20 years.



Success

All services are provided using a **S.P.E.C.I.A.L.** holistic approach which works to address these points of wellness: **S**piritual, **P**hysical, **E**conomic, **E**mootional, **C**ultural, **I**ntellectual, **A**ssociations, and **L**ove for self and others.

Major Challenges/ Barriers



Challenge/Barrier

Sustainable Funding for operations and infrastructure



Challenge/Barrier

Lack of qualified and culturally appropriate personnel



Challenge/Barrier

Insurance coverage and stigma

Look Ahead



Future Initiative/Growth

Hire staff to accommodate all programs and services using a holistic approach in addressing stigma and utilization of services



Future Initiative/Growth

Build infrastructure through accreditation and guidelines to become a Certified Community Behavioral Health Clinic.



Future Initiative/Growth

Create access and sustainable options for program participants throughout our full service offerings.

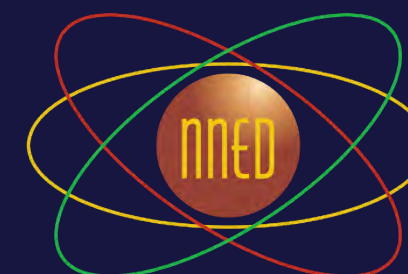
Doris Moore, MS, NCC, CPC, LIMHP

Center for Holistic Development, Inc.

demoore@chdomaha.org

402-502-9788

Website: www.chdomaha.org



SAMHSA
Substance Abuse and Mental Health
Services Administration

Bhutanese Community of Central Ohio

HHS REGION - 5

Sudarshan Pyakurel

Executive Director
Bhutanese Community of Central Ohio



Columbus, Ohio



3

2020 in Review

Facing a lethal pandemic and heavy burdens on the refugee and immigrant community it serves, the BCCO steps up to lead the fight and save lives.

The Refugee Journey

Bhutan's brutal ethnic cleansing campaign killed thousands, but the Bhutanese-Nepali community's resilient spirit lives on as they build a hopeful future in Columbus.

10



26

Community Impact

Bhutanese Americans create new businesses, provide critical health care, lead non-profits, serve as elected officials, and make Central Ohio better.

Financial Snapshot

The BCCO rapidly expanded support services to battle COVID-19 fallout. Public and private support helped ensure BCCO remained fiscally sound.

30

With Gratitude

With deep thanks (danyavad!) to our funders, donors and partners, the BCCO works tirelessly to improve the quality of life for thousands.

31



Mission Statement

To serve community members with culturally appropriate social services and empower them through education and advocacy.

Services

Central Ohio is Home to 27,000 Bhutanese-Nepali

Case Management

- ✓ Benefit Application Assistance
- ✓ Bill Payment Management
- ✓ Language assistance
- ✓ Service Refer

Wellness Services

- ✓ Wellness Program (Mental Health)
- ✓ Medical Appointment support
- ✓ Cultural Counseling
- ✓ Health Education & Screening
- ✓ Annual Wellness Fair

Youth Program

- ✓ School engagement program
- ✓ Youth Empowerment Training
- ✓ Higher Education support
- ✓ Sport and youth development activates

COVID-19 Relief

- ✓ COVID -19 Awareness & Education
- ✓ Basic PPE supplies
- ✓ Grocery and food
- ✓ COVID Vaccine Cline

Language & Culture

- ✓ EOSL & Citizenship Classes
- ✓ Youth Nepali Language class
- ✓ Cultural actives and Festivals
- ✓ Cultural Outreach

Research

- ✓ BCCO works with Higher Education institution and engages in researches (OSU)
- ✓ Writing and Publication

Major Successes

- **BRAVE Project: Addressing COVID-19**
BRAVE Project, which was started in March 2020, become a nation model for community-based approach on addressing the impact of COVID-19.
- **ORR Program: Refugee Support**
Post-resettlement program through BCCO has been highlight as one of the best Ethic Community-based Self-Help programs. It serves the largest refugee clients in the nation.
- **Mental Health and Wellness**
BCCO is not only involved in providing director behavioral health support and services but also engaged in research and understating the unique challenges faced by the community.

Major Challenges/ Barriers



Health & Economic Disparities

- ✓ Health in general is a big challenge the community is struggling with. This is mainly due to lack of the knowledge about preventive health care;
- ✓ Post COVID-19 health and economic disparities is emerging as a bigger challeng.



Language and Cultural Barrier

- ✓ Lack of prior formal education and lack of access to continued education has added to the cultural barriers in seeking better services.

Youth Mental Illness and Addiction



- ✓ In the last two years, youth mental illness and substance dependency has called for action as immediately as possible. Parents are desperately looking for any help they can get.

Look Ahead



Direct Mental Health and Canceling Services

- ✓ At BCCO we are working on a project to become a certified mental health provider.



Addressing the Youth MH Challenges

- ✓ Addressing mental illness among youth and providing them hope and stability is an utmost priority for the organization.



Funding and Collaboration

- ✓ We are working on ways to diversify funding sources and built collaboration with other human services agencies in the region.

Sudarshan Pyakurel

Executive Director

Bhutanese Community of Central Ohio (BCCO)

4646 Tamarack Blvd. Columbus Ohio 43229

Email: spyakurel@bccoh.org

Office: [614-396-8965](tel:614-396-8965)

web: www.bccoh.org





LATINO
BEHAVIORAL HEALTH
SERVICES

Salt Lake, UT | Region 8 | contact.lbhs@gmail.com

Breakout Room 4

REGION 9

Community-Based Organizations:

- African Communities Public Health Coalition
- Asian Americans for Community Involvement
- Community Youth Center of San Francisco
- Ka Hale Pomaikai
- Self-Help for the Elderly
- The Cambodian Family

Regional/State/Local Leadership:

- SAMHSA Regional Administrator and Assistant Regional Administrator

Philanthropists:

- Vitalyst Health Foundation
- California Community Foundation

Additional Partners:

- Audacia Consulting LLC

REGION 10

Community-Based Organizations:

- ASHA International
- Muckleshoot Family and Youth Services

Regional/State/Local Leadership:

- SAMHSA Regional Administrator and Assistant Regional Administrator



San Francisco, California

August 31, 2021

Region 9

Mission Statement:

COMMUNITY YOUTH CENTER OF
SAN FRANCISCO CHAMPIONS THE
DIVERSE YOUTHS IN OUR
COMMUNITY—GIVING THEM A VOICE
IN THEIR FUTURES AND PATHWAYS
TO SUCCESS.

About CYC

Founded in 1970, CYC has provided the youth of our city a sense of belonging and vital tools and experiences to succeed in life.

From our offices in the Tenderloin, Bayview, and Richmond, we serve over 8,000 youth and 2,000 families each year, with programs that include education and enrichment, academic and college counseling, job placement and employment training, substance abuse and violence prevention education, crisis intervention and mediation, leadership development, and technology and computer training.

While those receiving services continue to be primarily low-income Asian immigrants with limited English proficiency, CYC also serves Latinx and African American youths and families citywide.

Services

Health and Wellness

For young people in San Francisco, access to culturally attuned and language-appropriate health and wellness services is piecemeal at best. CYC provides a broad array of services for youth facing challenges related to mental health, sexual health, bullying, drug use, and even violence.

Enrichment and Advancement

We support young people to explore their full potential in work and life by building their confidence, empathy, curiosity, and access. We offer school based and beacon programs at middle schools and high schools, as well as linked learning opportunities for work and employment skills development.

Community Engagement

We see young people as active participants and leaders in the broader community. We engage youth with the community issues they feel are important to them, and broaden that engagement to include new groups, elders, children, and civic role models from across San Francisco.

Major Successes

Our Programs

- Many youth in San Francisco deal with difficulties in school, economic hardship, family conflict over acculturation, and other barriers. To overcome isolation and hardship, we provide culturally and linguistically appropriate services that support cultural pride and a family-centered approach.
- **CYC directly serves over 8,000 youth each year and 2,000 youth each week.**

Behavioral Health Services

- CYC champions the diverse youths in our community— giving them a voice in their futures and pathways to success
- **1,652 people received mental health and wellness care services at CYC last year**

Standing Up for Safety and Justice

- In response to rising violence against the API community, CYC has joined with three other local organizations to provide proactive, integrated, culturally competent violence prevention and intervention services.
- CYC is serving as the fiscal agency for the Coalition for Community Safety and Justice (CCSJ) and, through the Coalition, provides coordinated street outreach, crisis response services, intensive care management, financial assistance, mental health support, benefits enrollment and legal and court advocacy.



Looking Ahead...

Together United

- Continued to stand up against hate and advocate for safety and justice.
- Expand our CCSJ program and victim services (including case management and mental health service) to reach the greater Bay Area.

Behavioral Health Services

- Continued to dispel Mental Health stigma within the API population through raising awareness and community outreach
- Growing our therapeutic services (both in-person and telehealth settings)
- Focus on COVID recovery, transition/ adjustment issues.

CYC Richmond Community Hub

- The groundbreaking of our new Richmond Community Hub (located at 952 Clement Street, SF) is now set for Winter 2022.
- The Hub will expand our education and employment opportunities as well as our Health and Wellness services to people in the Richmond District to improve economic self-sufficiency and overall well-being.

Questions



Contact:

Kyle Chan

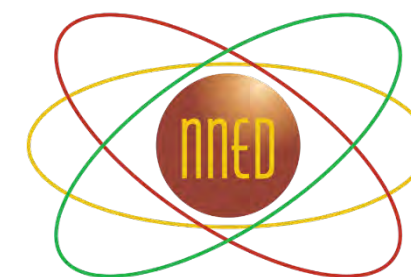
Program Director

Behavioral Health/ Intervention Component

kylec@cycsf.org

Cel: 415.494.9830

Tel: 415.775.2636





AFRICAN COMMUNITIES PUBLIC HEALTH COALITION

“Empowering Africans to Improve Community Health & Wellness”

ACPHC MISSION IS “TO IMPROVE PERSONAL AND COMMUNITY HEALTH AND WELLNESS WITHIN THE AFRICAN COMMUNITY BY; INCREASING THE AVAILABILITY OF CULTURALLY-RELEVANT PHYSICAL AND MENTAL HEALTH SERVICES; PROVIDING EDUCATION TO REDUCE THE STIGMA OF PHYSICAL AND MENTAL ILLNESS AMONG AFRICAN PEOPLE; AND FACILITATING SOCIAL JUSTICE THROUGH ADVOCACY”





MISSION

The African Communities Public Health Coalition (ACPHC) is a non-profit organization founded by African descendants in 2011 with the mission of improving personal and community health and wellness within immigrant and refugee communities by increasing the availability of culturally-relevant physical and mental health services; providing education to reduce the stigma of physical and mental illness among African people; and facilitating social justice through advocacy.

SERVICES PROVIDED

- Mental Health: Services, clinical direct services and outreach and education, use EBPs that are relevant to African descents and culturally appropriate; Intensive Case management.
- Mental Health Outreach and Education: Advocacy at state and county level to reduce disparities for underserved communities (immigrant and refugee communities).
- Immigration: Services, naturalization, asylum, family law, DV, VAWA, etc.
- Tobacco Reduction: Services, policy change advocacy, tobacco use reduction, and work with faith-based organizations to implement tobacco-free policy.
- COVID-19: Services, prevention outreach and education including vaccination, system navigation.
- FGM Project (founder): Working with DHS to implement prevention measurements and culturally and linguistically appropriate services for victims
- Disaster Relief: We are part of Emergency Network of LA (ENLA) and provide services during crisis.

DEMOGRAPHICS OF AFRICAN IMMIGRANTS AND REFUGEES IN US

- About 2,500% since 1970 – from 80,000 in 1970 to about 2.1 million. The number increases from 1.6 million in 2014 study to 2.1 million in 2018 study and to 4.2 million black immigrants when those from the Caribbean nations are counted.
- The top countries of origin for African immigrants were Nigeria 14% (or 221,000), Ethiopia 10% (164,000), Egypt 9% (143,000), and Ghana 8% (121,000), together constituting 41%.

ISSUES

- African Americans and immigrants do not have a clear definition of mental health because people in this community do not readily speak about mental health or mental illness.
- The African Diaspora carry a range of distinct problems alongside their mental health concerns, social, economic, and legal status, and these interact reinforcing one another and making both presenting symptoms and treatments especially complex.
- Challenges affecting the social determinants of physical and mental illness include (1) lack of trust and social cohesion; (2) lack of stability and consistency; (3) inability to envision the future; (4) disempowerment and lack of sense of community ownership; (5) high level of personal need; and (6) depth and breadth of community needs and disinvestment.

WHAT MAKES OUR SERVICES UNIQUE


- We are among the few organizations in Southern California that cater to special populations such as refugees, asylum seekers, undocumented individuals, and human trafficked African-born immigrants.
- There are approximately 68,000 African-born immigrants residing in the Greater Los Angeles Area. Of those, the ones who recently (past 10 years) immigrated are predominantly refugees (27%) who escaped civil war and ethnic conflicts in their various countries of origin.
- Advocacy is an inherent aspect of ACPHC's services.
- For many African Americans and immigrants, spirituality and religion play key roles in the development of coping mechanisms to mental duress.

THANK YOU

www.africancoalition.org

(213) 909-0985

info@africancoalition.org

Several white lines of varying lengths and angles are positioned in the bottom right corner of the slide, creating a modern, abstract graphic element.

HHS Region #10



ASHA
INTERNATIONAL
WE GIVE HOPE
www.myasha.org

Portland, OR





Gayathri Ramprasad, MBA, CPS
Founder, ASHA International



ASHA
INTERNATIONAL
WE GIVE HOPE
www.myasha.org

Our Mission

To promote personal, organizational and community wellness through mental health education, training and support.



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www.myasha.org



ASHA
INTERNATIONAL
WE GIVE HOPE
www.myasha.org

We're normalizing
conversations
about mental health and
inspiring hope and well-being,
one story at a time.

2020 Impact

LET'S TALK ABOUT MENTAL HEALTH

1,173

students, staff, families and
community members reached
through the program.



GRIT & GRACE CONFERENCE

340

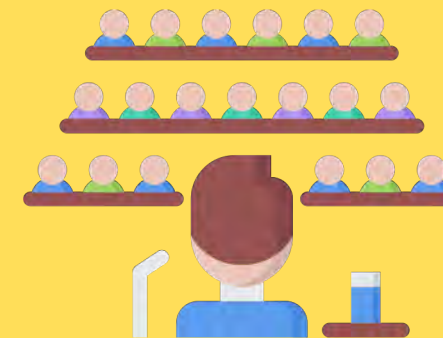
people across 36 states in the
U.S. and 18 countries reached



STORYTELLERS

8

storytellers
trained in 2020



MY STORY MY SUPERPOWER CLUBS

3,600

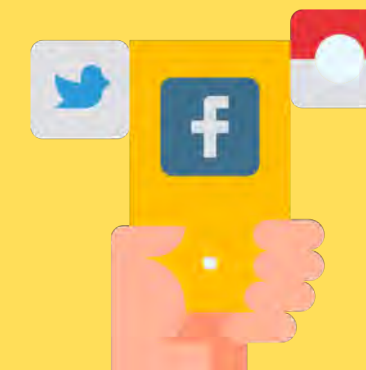
students & staff reached
through 3 high school clubs



CONVERSATIONS ON HOPE & WELL-BEING

7,799

views on Facebook and YouTube




LET'S TALK ABOUT
mental health.



“The Let’s Talk About Mental Health program was very touching and helpful to me because I have struggled with depression and thought about suicide. I learned that even though I don’t think it will get better, it will. Thank you for the wellness resources you shared.”

- Student, Century High School




**Student-led
high-school clubs
dedicated to
normalizing
conversations
about mental health,
one story at a time.**

my story...
MY SUPERPOWER

Do you have a mental health story?

**SHARE YOUR STORY.
GIVE HOPE.
CHANGE LIVES.**



ASHA
INTERNATIONAL
WE GIVE HOPE
www.myasha.org

Join the Movement!

#mystorymysuperpower



my story...
MY SUPERPOWER

“Becoming an ASHA storyteller has truly empowered me to discover who I truly am and what it truly means to share my story without shame.”

- Hoda AbouEich



my story...
MY SUPERPOWER

“Becoming an ASHA storyteller has allowed me to be able to talk to others about mental health and help to break down the stigma surrounding toxic masculinity.”

- Jaxon Buell



GRIT & Grace

MULTICULTURAL WOMEN'S MENTAL HEALTH CONFERENCE



“Life changing conference both personally and professionally!”

- 2019 Grit & Grace Conference Attendee

“It was deeply nourishing to be enriched by this diverse, inspiring circle of women sharing their truth. The Grit & Grace Conference was the best conference I have ever attended.”

- 2018 Grit & Grace Conference Attendee

Celebrating Success

Since the launch of our programs in 2006, we have reached more than 60,000 people nationally and internationally with a resounding message of hope and well-being.

Together, we are ending stigma and empowering people on their road to recovery and wellbeing, one day, one person, one story at a time.



ASHA
INTERNATIONAL
WE GIVE HOPE
www.myasha.org

Major Challenge

Scaling our programs across the country and around the world.



ASHA
INTERNATIONAL
WE GIVE HOPE
www.myasha.org

Looking Ahead

All of us at ASHA International understand the barriers to mental health faced by underserved and underrepresented communities – immigrants, refugees, black, indigenous, people of color and LGBTQ+. And we are dedicated to empowering people within these communities to share their stories to inspire hope & ignite change.

Ashley Schmidt

Development Manager

ashley@myasha.org

503-267-0146

www.myasha.org



ASHA
INTERNATIONAL
WE GIVE HOPE
www.myasha.org

LET'S TALK

ABOUT MENTAL HEALTH

JOIN THE CONVERSATION. END STIGMA. SAVE LIVES.



ASHA
INTERNATIONAL
WE GIVE HOPE

WWW.MYASHA.ORG

Ka Hale Pomaika'i

"The Blessed House"



Where recovery Lives on the
Island of Moloka'i, Hawai'i

HHS REGION 9





Ka Hale Pomaika`i strives to provide treatment options, housing, educational and supportive services to restore people suffering from alcohol and other drug misuse to a state of *pono* (balance).

This process of restoration involves improving wellness in mind, body and spirit.

In keeping with all that Moloka`i is, *Ka Hale Pomaika`i* will promote respectful practices that honor self, family, and community through healthy lifeways, cultural values, and therapeutic services.



Ka Hale Pomaika'i has been offering culturally respectful treatment and support services for 26 years on the island of Moloka'i to Adults and Adolescents who are struggling with Substance Use or Process Disorders, including those who may have a co-occurring behavioral health related challenge. We also reach out to the island of Lana'i each week.

Culturally Focused Therapeutic Outpatient Continuum of Care



Community Based Recovery Support and Education



Organic Agricultural Project to Teach and Promote Wellness



Sober Living Home for Adults in Early Recovery



Peer Driven Motivational Outreach & Transportation



Community Resource to Address Food Insecurity



Major Successes

➤ Award Winning 'Aina Based Cultural Approach to Treatment Honoring Hawaiian Traditions and Values Instilling Pride to Reduce Disabling Effects of Addiction

Recovery for 98% of our **Haumana** (students) requires honor of culture and a restoration of cultural values lost in addiction. This includes the preservation of the wisdom taught by our **Kupuna** (wise elders) including both **'Aina** and **Ke Kai** (land and sea) traditions, **La'au** (wellness), the preparation of foods, practices that have withstood the test of centuries. In Hawai'i, Moloka'i has the highest suicide rate often attributed to generational trauma fueled by addiction. Our culture-based treatment concept combined with EBPs has restored pride and self-worth for over 850 people. Haumana become **Alaka'i** (leaders). This is part of their treatment plan and specifically relates to the Spiritual wellness that is difficult to measure with Western methodology.

➤ The Island's Only Safe and Sober Living Program Addressing Houselessness for 26 Years

We built **Ki'ai**, a sober-living residence, on our home island of Moloka'i, where up to 5 people without housing can engage in sober-living safety while in early sobriety. Peer Recovery Support Specialists assist residents in navigating the challenges of becoming and staying sober. They provide on-site crisis intervention, offering transportation to outside services. Rent is income adjusted. Chores are shared. Recreational activities may include fishing, beach days, cooking out and in-house games or movies.

➤ Food Producing Farm Combined with Traditional Resources to Address Food Insecurity on the Island

A sustainable farm is used to model and teach agricultural subsistence practices that support a person new to sobriety's health improvement plan. KHP's Emergency Food Pantry serves Moloka'i's families who are challenged with food insecurity. Combined with traditional hunting, fishing and gathering practices, Haumana and counselors work with Kupuna and cultural practitioners to prepare food for the **'Ohana** (family), themselves and others. Haumana become excited to "Give Back" but the real lesson becomes having the ability to "Give First"! Each weekly session results in overwhelming exclamations of gratitude as both physical, mental and spiritual wellness improves.





Challenges & Barriers


Rural Remote Life Has Limited Resources

As a water-bound island, Moloka'i has no building taller than a coconut tree, no traffic lights, no fast food chains, no box stores, and a barge that comes in once a week to supply the tiny 3-lane markets. There are no psychiatrists or psychologists on island. Jobs are scarce. Public assistance recipient rates are the highest in the state. People often have to choose between putting food on the table, gas in the car, or paying rent. Isolation of the island itself is a larger example of the isolation and frustration that many people feel when expectations for performance or survival are based on Western model big city experience. Our challenge is having to convince funders and others that culture can heal and restore lives.

Hiring and Retaining Educated and Skilled Employees

Availability of trained professional willing and available to work on Moloka'i in the addiction treatment field is not only a challenge but an impossibility. Pay rates are nearly half of what one could earn in a city elsewhere. Technological demands have made it difficult to provide direct service when data and documentation account for 60% of a counselor's daily duties. The requirement of 6,000 hours of training to become certified is not attractive to interns who can move off island and be hired by larger organizations while attending a 4-year University of which there are none on island. Finally, Moloka'i is uniquely driven by the beauty of traditional ways which are not easily embraced by outsiders. Even tourists are not always welcomed. Trust has been betrayed for years making it hard for locals to respect newcomers.

Normalization of AOD Use & Gambling in the 'Ohana



Many households are multi-generational, living in one small single-family home. Some children are taught early on that they must bring the beer to Papa who thanks them by letting them have a sip. Use of other drugs in the home is not seen as damaging but rather "just the way it is". When one family member tries to get sober, they are often teased and shamed. They hear others say "what, you too good for us now?" Recovery meetings are generally not supported by anyone other than the person attending, even when family is invited. The stigma, resulting from both the active addict's anti-social behavior and then their attempt at recovery, is pervasive. Frustration and isolation trigger relapse just to feel that one "belongs" in their home again.

Looking Forward



Resiliency Education Scholarships For Local Folks in Recovery

By developing incentive and scholarship programs to offset educational fees for interns, we hope to be able to enlist members of our own recovery community to attend college and work in the agency. This demonstrates resilience and models for others how a life can be healed.



Reducing Stigma Through Special Community Events

Plans for holding large scale recovery related events on island are being discussed by the Executive Board. In the past, these have been well received and resulted in improving collaborative relationships with community agencies that otherwise tend to avoid honoring the recovering person's journey. Although recent issues have prohibited large gatherings, it is hoped that going forward, we will be able to attract notable entertainers and speakers who are also in recovery to headline the event.

Honoring the Past While Preparing for the Future; Finding a Way Home

Sustainability focused strategic planning is a priority. Faced with the need to purchase our own building with adequate space for our farm, we are in a continual fund development process as well as in a land acquisition hunt. Moloka'i residents tend to fall over 300% below the national poverty rate which makes it a challenge to fund raise on island. *Ua Mau ke Ea o ka 'Āina i ka Pono*, our State motto, says that the life of the land is perpetuated in righteousness. So it is with Ka Hale Pomaika'i. We must preserve our agency to ensure that no local person seeking recovery ever be turned away, recover alone, or be without services at the Hale they call home.



Shari R. Lynn, MEd, CSAC, CCS,CCJP,CPS,NCAC-II, SAP,CSAPA,ICADC

Executive Director

Ka Hale Pomaika'i

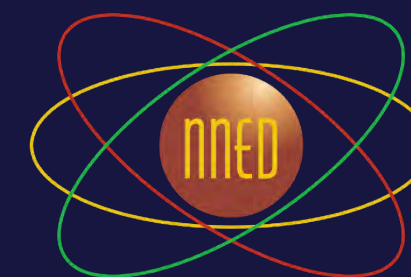
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SAMHSA
Substance Abuse and Mental Health
Services Administration



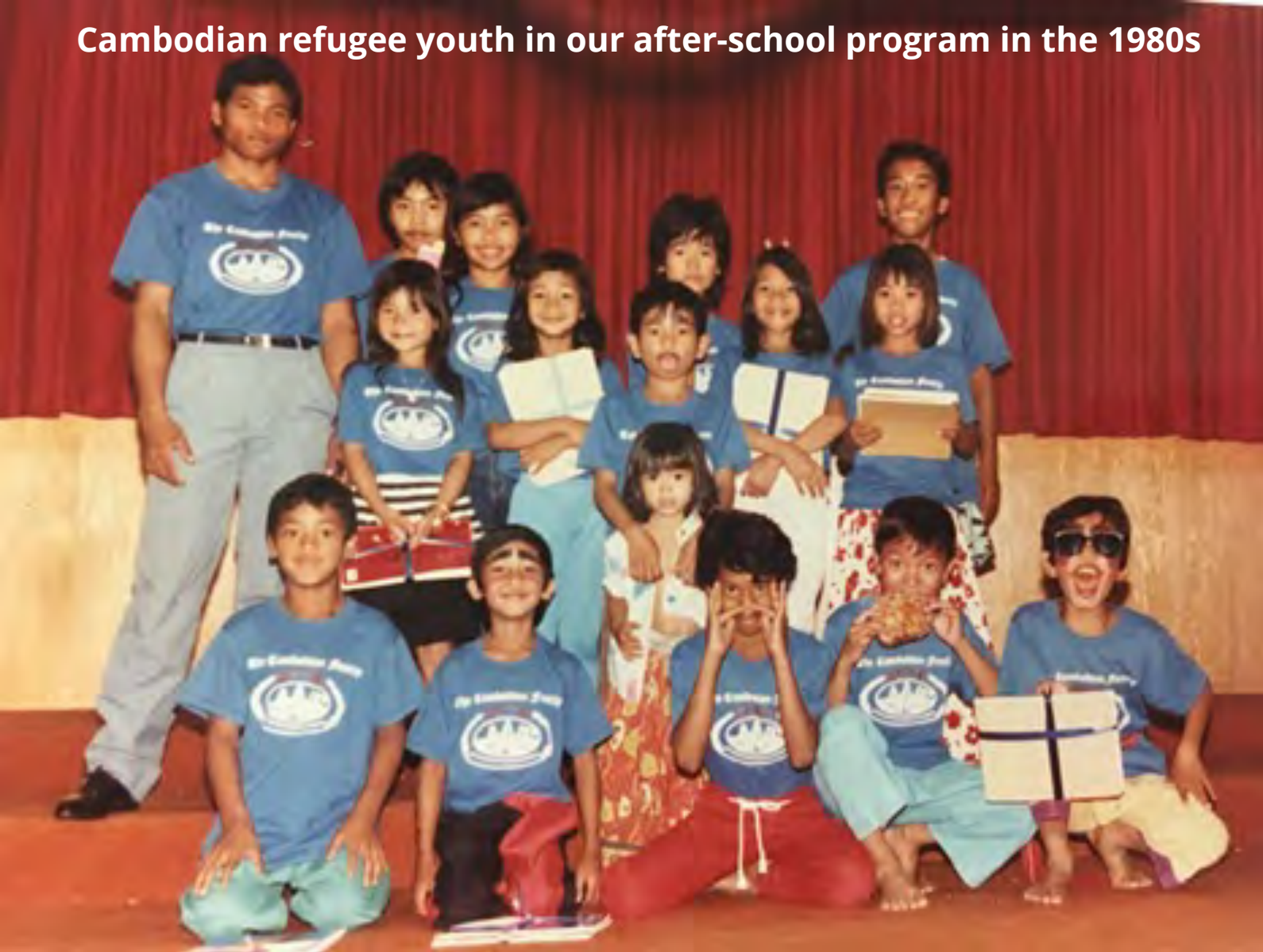
HHS REGION 9

The Cambodian Family Community Center

Santa Ana, California



Cambodian refugee youth in our after-school program in the 1980s



Trained Community Health Ambassadors



- **Mission:** To provide opportunities for refugee and immigrant families to develop the knowledge, skills, and desires for creating better health and well-being in their lives.
- A community-based organization founded in 1980 by a group of Cambodian refugees who escaped the civil war and genocidal regime in Cambodia (the Killing Fields).
- Originally founded to provide resettlement services to Cambodian refugees; a few years later became a multi-ethnic human services agency, expanding services to immigrants and refugees from around the world.
- The only nonprofit organization that provides significant services to Cambodians in Orange County, CA. In FY2020, we reached over 30,000 community members and provided over 15,000 services to 2,800 clients. Over 90% of our clients are low-income and limited-English proficient.



Community Health and Mental Health ផ្នែកសុខភាពសហគមន៍និងសុខភាពផ្លូវចិត្ត

- Prevention and Early Intervention Health and Mental Health Programs
- Mental Health Services (short-term individual and group counseling)
- Family Support Services
- Benefits Enrollment (i.e. Medical, Food Stamp)
- Health Education and Health Accessing
- Family Advocacy and Comprehensive Case/Disease Management/Health Navigation

Youth

- Academic/After-School Tutoring
- Life Skills and Leadership Development
- Youth Mentoring
- Extracurricular Activities: Field Trips, Art Workshops, Music Programs, Sports & Athletics, Colleges Tours
- Youth Substance Use Disorder Prevention Program

- កម្មវិធីបង្ការជម្ងឺនិងលើកកម្ពស់សុខភាពផ្លូវកាយ និងសុខភាពផ្លូវចិត្ត
- សេវាកម្មប្រឹក្សាសុខភាពផ្លូវចិត្ត (ការប្រឹក្សាជា លក្ខណៈបុគ្គលនិងជាក្រុមក្នុងរយៈពេលខ្លី)
- សេវាកម្មគាំទ្រគ្រួសារ
- ការចុះឈ្មោះទទួលបានអត្ថប្រយោជន៍ដូចជាធានារ៉ាប់រងសុខភាពរដ្ឋមេឌីកាល់ និងហូតស្តែម
- ការអប់រំសុខភាព និងការសម្រួលក្នុងការណាត់ជួប ឬទៅជួបពេទ្យ
- ការតស៊ូមតិគ្រួសារ/ការជួយកាន់សំណុំរឿងផ្សេងៗ

ផ្នែកយុវជន

- ការបង្ហាត់បង្រៀនបន្ថែមក្រោយចេញពីសាលា
- បំណិនជីវិតនិងការអភិវឌ្ឍន៍ភាពជាអ្នកដឹកនាំ
- ការផ្តល់យោបល់ និងណែនាំផ្លូវល្អដល់យុវជន
- សកម្មភាពក្រៅកម្មវិធីសិក្សា៖ ការសិក្សាក្នុងកំឡុងពេលដើរកំសាន្ត កម្មវិធីសិល្បៈ តន្ត្រី កីឡានិងអត្តពលកម្ម ទស្សនកិច្ចតាមមហាវិទ្យាល័យ
- កម្មវិធីបង្ការការប្រើប្រាស់គ្រឿងញៀន

ផ្នែកចូលរួមរបស់ប្រជាពលរដ្ឋ និងសេវាកម្មផ្នែកអន្តោប្រវេសន៍

- កម្មវិធីចូលរួមរបស់សហគមន៍និងពលរដ្ឋ/កម្មវិធីតស៊ូមតិ
- កម្មវិធីភាពជាអ្នកដឹកនាំឯកអគ្គរដ្ឋទូតសហគមន៍
- សេវាកម្មផ្នែកអន្តោប្រវេសន៍/ចូលសញ្ជាតិអាមេរិច
- សេវាកម្មបកប្រែភាសាខ្មែរ
- ការតស៊ូមតិផ្នែកសុខភាព / សុខភាពផ្លូវចិត្ត
- វគ្គបណ្តុះបណ្តាលសមត្ថភាពផ្នែកយល់ដឹងពីវប្បធម៌

Civic Engagement and Immigration

- Community and Civic Engagement/Advocacy Field Work
- Community Ambassador Leadership
- Immigration Referrals/Citizenship Application Assistance Services
- Interpretation and Translation Services
- Health/Mental Health Advocacy
- Cultural Competency Training

Services

Southeast Asian, Latinx, and Other Underserved Populations



Major Successes

Mental Health Services for Culturally, Linguistically, and Socially Isolated Cambodian Seniors Age 60+

Mobilizing & engaging LEP senior residents in advocating for mental health policies and plans that are responsive to the needs of their underserved communities by achieving the first Orange County (OC) Mental Health Services Act Three-Year Plan FY 17/18- FY 19/20 that reflects the mental health needs of the OC Cambodian community (first plan was done in FY2005-2008) – resulting in approx. \$95,000 in funding being invested in in-language mental health services for Cambodian older adults; opened our first-ever in-house Cambodian mental health counseling clinic after 39 years of Cambodian refugees and immigrants resettling in OC, CA.

COVID-19 Community Response

- Supporting over 3,000 clients with their basic needs (i.e. rent/utilities assistance, culturally-appropriate food, internet access, technology/equipment access, etc.)
- Providing in-language COVID-19 and vaccination outreach and education to over 19,000 individuals
- Helping over 2,000 seniors and other vulnerable populations receive COVID-19 vaccines
- Providing CalFresh (Food Stamp), Medical, Unemployment application assistance and information to over 1,200 clients
- Offering in-language tele-mental health counseling, case management, public charge education, financial relief assistance, and other family support services

Significant Improvements in Mental Health Outcomes through Implementing Community-Defined Evidence Practice (CDEP*)

Thanks to CDEP, 58% of program participants reported reductions in effects of past trauma, while depression-related symptoms declined by 69%. Also, PHQ-9 scores were greatly reduced at follow-up.

**CDEP described as “a set of practices that communities have used and determined by community consensus over time and which may or may not have been measured empirically but have reached a level of acceptance by the community” (Hernandez, Statutes of 2013).*



Major Challenges / Barriers



LATIMES.COM

For Cambodian and Vietnamese immigrants, multiple barriers prevent access to culturally sensitive healthcare



LATIMES.COM

Mental healthcare for Cambodian, Vietnamese refugees limited by shortage of bicultural, bilingual providers

Language barrier and the lack of culturally sensitive PEI and mental healthcare programs and services for Cambodian community

With over 3.1 million residents, Orange County is becoming increasingly diverse. However, there are no dedicated, fully bilingual Khmer-speaking mental health therapists in all of Orange County, where approximately 10,000 Cambodians have resided for over four decades.

Lack of organization's capacity to meet a significant increase in in-language mental health counseling/therapy services among monolingual and older adult community members

According to a recent study conducted the CDC, the percentage of adults with symptoms of an anxiety or a depressive disorder in the past 7 days increased significantly during the pandemic, from 36.4% to 41.5%. At our organization, we have seen a 110% increase in our community members seeking mental health services. We only have one fully bilingual, part-time Khmer-speaking mental health counselor, who sees nearly 20 cases per week, so much that we have had to institute a waitlist.

Shortage of bicultural, bilingual health and mental health providers

There are no dedicated, fully-bilingual Khmer-speaking mental health therapists, and there is only *one* Khmer-speaking medical doctor in all of Orange County, where approximately 10,000 Cambodians reside.

Featured articles in Los Angeles Times:

1. <https://www.latimes.com/socal/daily-pilot/entertainment/story/2020-09-17/mental-healthcare-for-cambodian-vietnamese-refugees-limited-by-shortage-of-bicultural-bilingual-providers>
2. <https://www.latimes.com/socal/daily-pilot/entertainment/story/2020-09-24/addressing-a-lack-of-culturally-sensitive-healthcare-for-cambodian-and-vietnamese-communities-in-o-c>
3. <https://www.latimes.com/socal/daily-pilot/entertainment/story/2020-09-10/for-cambodian-and-vietnamese-immigrants-multiple-barriers-prevent-access-to-culturally-sensitive-healthcare>

Looking Ahead

Sustaining our high-demand in-language mental health counseling services through building a sustainable revenue stream; becoming a MediCal (California Medicaid) billable services agency

We expect the demand for our in-language mental health counseling services to continue to increase, as the pandemic has significantly contributed to the increase of widespread mental health problems, due to fear, grief, social isolation, loneliness, unemployment, food insecurity, housing, and so much more. We need to increase our organizational capacity to respond to these urgent needs.

Continuing our COVID-19 response efforts, addressing social determinants of health, leveraging coalitions/partnerships

In partnership with other community organizations and governmental agencies, we will continue to provide in-language COVID-19 education, vaccination, free testing, testing navigation, housing during quarantine/isolation, and other critical resources in maintain the spread of COVID-19, including basic needs – resources needed for getting our vulnerable community members back on their feet.

Promoting community-defined evidence practices such as our currently-implemented Body, Mind, Spiritual Wellness (BMSW) program

The BMSW Program promotes mental health and wellness for the underserved Cambodian and other underserved populations of OC, whose mental health needs have not been met, and who have been disproportionately impacted by the pandemic. The program provides mental health continuum of care services, ranging from culturally/linguistically-tailored prevention and early intervention outreach, engagement, workshops, mental health case management, mental wellness-promoting activities and resources, to mental health assessment and counseling services.



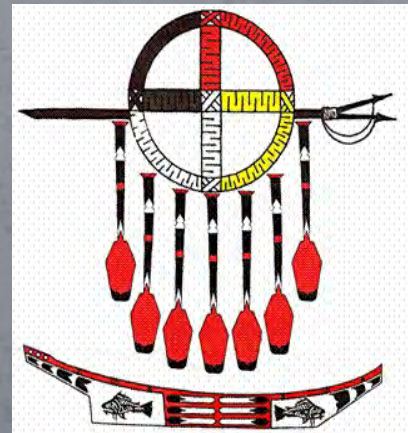


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Muckleshoot Behavioral Health Services:

Presented By: Dave McLeod, SUDP
Clinical Supervisor
Muckleshoot Behavioral Health Program
Region 10



Recovery is Possible



Muckleshoot Behavioral Health

- Holistic approach – medical, mental health, chemical dependency
- Incorporate Native American culture – The Medicine Wheel, The Red Road to Wellbriety, and Seeking Safety Curriculum
 - Outpatient treatment services for youth and adults
 - Medication Assisted Treatment services including Suboxone and Vivitrol (Methadone is now also available at WeCare Daily Clinics in downtown Auburn)

Adult Outpatient

The Behavioral Health Program provides comprehensive, state certified, chemical dependency treatment to enrolled Muckleshoot Tribal members, families, and other Native Americans living on or near the Muckleshoot Indian Reservation.



Adult Chemical Dependency Services

- 8 full-time SUDPs (including a certified problem gambling (PG) counselor) and 2 SUDPTs
- Assessments/Intakes – Referrals to chemical dependency and problem gambling inpatient treatment programs
- DUI assessments
- Individual Counseling for SUD and PG
- IOP AM/Afternoon//PM – Fallen Warrior Curriculum (Medicine Wheel teachings along with traditional IOP information)
- Outpatient groups: Wellbriety, Women's Group, Seeking Safety, and MAT groups



Adult Chemical Dependency Services Continued...

- **Problem gambling counseling** - we have 1 SUDP who is able to provide gambling assessments and outpatient individual treatment.
- **Smoking cessation** – the medical staff and SUDPs work together with a combination of counseling and medication to help those who wish to quit smoking.
- **Outreach advocates** – We currently have 5 full-time Outreach Advocates who go to client homes and encourage participation in treatment programs, visit clients in hospitals for crisis issues, distribute Narcan kits in the community, transport clients to inpatient treatment, receive outreach requests from Elders, Housing, MCFS, and Medical programs to attempt to engage clients in treatment services.



Youth Outpatient

The youth outpatient program, located in the Health and Wellness Center, provides chemical dependency services for youth up to age 18.

Chemical Dependency Services

- Assessments/Intakes
- Individual Services
- Outpatient Groups – incorporates White Bison, the Medicine Wheel curriculum, and Healing of the Canoe material
- Outreach
- Prevention
- School-based services



Residential Services

- The **Youth Recovery Home** (opened in October 2013) is available for up to 8 female youth, ages 13-18. The recovery home provides youth with a positive transitional living environment where Muckleshoot tribal and community members recovering from alcohol and drug dependency or mental health issues can gain the skills and support needed to be successful in their lives.
- The **Adult Recovery Home** (opened in April 2009) is available for 14 men and 12 women, ages 18+. Staffed 24/7, the adult recovery home also employs 2 SUDP's that assist with case management for issues such as medical, employment, child custody, court involvement.
- The **Lilly House** (opened in March 2015) is a transitional house available for 5 adult women and up to 6 children.
- The **Butterfly House** (opened in April 2017) is an additional transitional house for 5 adult women and up to 6 children.
- The **Red Cedar House** (opened in June 2015) is a transitional house for up to 5 men.
- The **Annex** (opened in 2019) is available for 2 male residents with primary mental health diagnosis



Mental Health Services: Youth & Adult

Youth

- Individual therapy
- Family therapy
- Anger management
- Equine assisted therapy
- (Domestic violence services and advocacy)
- Crisis intervention
- Intake assessments
- Psychiatric assessments
- Medication management (4-H Club)
- Prevention
- School based services



Adult

- 6 full-time and 1 part-time Licensed Mental Health Professionals, 1 psychiatrist & 1 ARNP
- Individual therapy
- Couples therapy
- Family therapy
- Anger Management
- Equine Assisted Therapy
- (Domestic Violence services and advocacy)
- Healthy Relationship Group
- Crisis Intervention
- Outreach
- Intake Assessments
- Psychiatric Assessment
- Medication Management

What is Suboxone?

- A prescription medication used for the treatment of opiate dependence
- Suboxone is a partial opiate that prevents withdrawal
- Also acts as a blocker that prevents the most of the effects of other opiates
- It is a combination of naloxone and buprenorphine
 - Taken sublingually Suboxone is absorbed and little, if any, naloxone is absorbed
 - Taken intravenously (IV) naloxone is absorbed and causes immediate withdrawal
- The client should no longer experience withdrawal symptoms, have minimal side effects or euphoria, and not have uncontrollable cravings



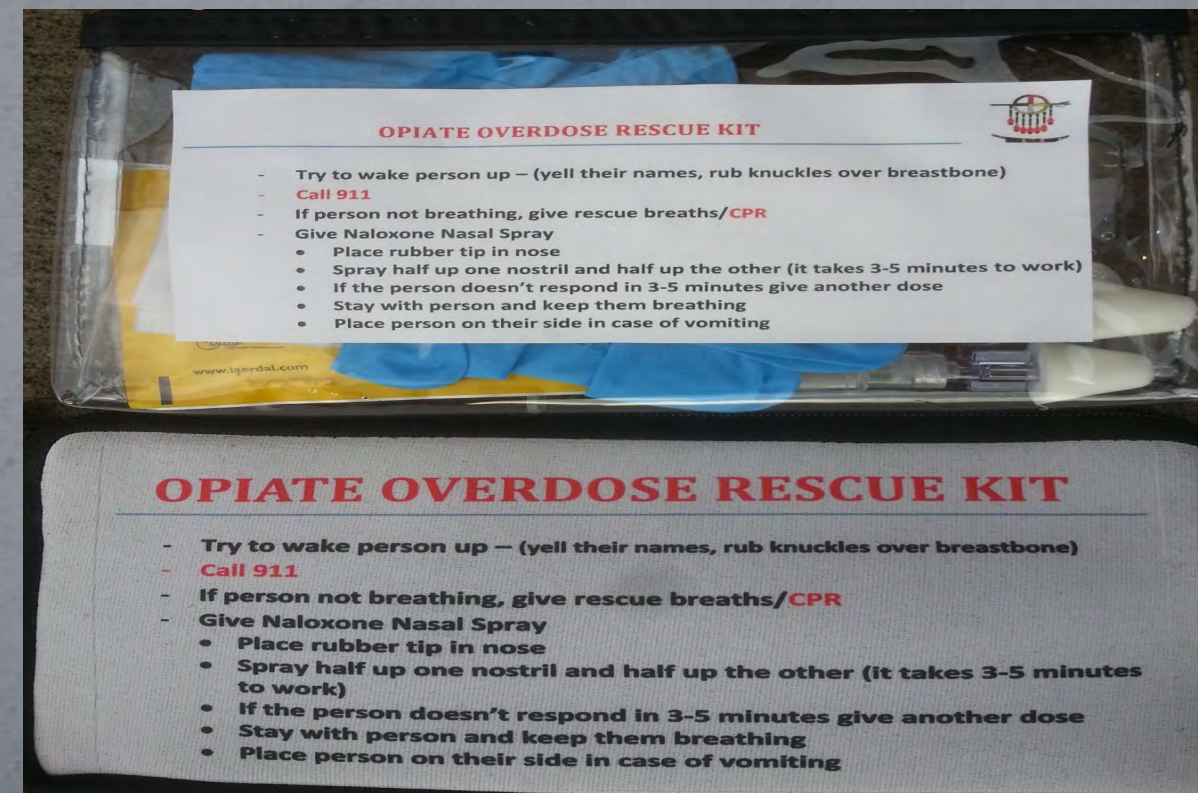
What is Vivitrol?

- A prescription injectable medication used for opiate and alcohol dependence
- Injected after 7 to 10 days of abstinence from opiates or injected immediately for treatment of alcohol dependence
- Blocks the effects of opioids in the brain's reward system
- Decreases cravings for alcohol
- It is not addictive and does not lead to physical dependence
- It does not provide pain relief or create a “high”



What is Narcan?

- Narcan is a prescription medication that reverses an opiate overdose.
- Community wide NARCAN distribution – collaboration among medical providers, pharmacy staff, SUDPs, mental health providers, and Outreach.
- We continue to make efforts to ensure there are NARCAN kits in all Tribal homes and Tribal Programs.
- There have been many reported reversals but unfortunately, there are still opioid overdose deaths in our community.



THANK YOU.





**Self-Help for
the Elderly**

安老自助處

www.selfhelpelderly.org

REGION 9



**BUILDING A CONTINUUM OF
ELDERCARE SERVICES IN THE
SAN FRANCISCO BAY AREA**

Overview

Mission

Self-Help for the Elderly (Self-Help) promotes independence, well-being, and dignity of older adults through culturally aligned services and programs in the San Francisco Bay Area.



Overview

Organization

Self-Help began serving seniors in San Francisco's Chinatown community in 1966.

Today, we serve over 40,000 seniors annually in five Bay Area counties: San Francisco, San Mateo, Santa Clara, Alameda and Contra Costa.



Overview

Vision

We envision a world where all elders have the respect, care, and support to lead dignified and vibrant lives.



Serving population



**Self-Help for
the Elderly**
安老自助處



Our Programs & Services



Adult Day Services

Adult Day Services (ADS) is a licensed facility serving the health and social needs of the frail elderly and adults.



Adult Day Services Programs



The **Adult Day Care (ADC)** emphasizes opportunities for socialization, activities, non-medical personal care and supervision services.

Adult Day Health (ADHC) is an organized day program of therapeutic, social and health services provided to frail and/or disabled older adults. Available services include nursing care, physical, occupational and speech therapy, psychiatric care and nutritional counseling.

The **Alzheimer's Day Care Resource Center (ADCRC)** provides quality day care for a person with Alzheimer's disease or other dementias while giving respite to their caregivers. In addition, this program can provide education and training for caregivers, families, and members of the community about Alzheimer's; disease.

Housing



Lady Shaw Senior Housing

- 70 units in San Francisco Chinatown
- Affordable senior housing for seniors 62+ years old



Lincoln Court

- 82 units in Oakland
- Affordable housing for older adults 55+ years old



Autumn Glow

- 15-bed facility in San Francisco's Western Addition district
- Assisted living facility for Alzheimer's patients
- Below market rate fee

Caregiving, Housekeeping & Commercial Cleaning Services



Commercial Cleaning Services

Business Services

- Social enterprise to enhance the independence of elderly at home
- Rate based on the square footage, frequency and need for services
- Trained commercial cleaners

Caregiving Services

Private pay / long term care insured caregiving services

- Experienced caregiver and certified Home Health Aide (HHA)
- Regular Registered Nurse (RN) assessments and visits for care plan

Housekeeping / Gardening Services

Private pay

- Experienced and trained housekeepers

 Call the service hotline at 415-677-7618

Employment Training & Placement



The employment training and economic development department (ETED) creates and provides training, counseling, employment, and job retention for adults of all ages.

Our senior community service employment program (SCSEP) provides job training and placement.

Neighborhood Job Center provides job search assistance, training, and placement.

Employment Training & Placement

Employment, training and placement services for:

1. Home Health Aide (HHA) & Certified Nursing Assistant (CNA)
2. Commercial and Residential Cleaning
3. Appliance Repair and Maintenance

Health Insurance Counseling and Advocacy Program (HICAP)



HICAP provides free, unbiased benefits counseling to Medicare and pre-Medicare clients, including educational presentations, workshops, and informational booths at health fairs and community social events as well as training sessions for organizations. Counseling sessions are provided one-to-one. We serve a very diverse population of Medicare populations in San Francisco and San Mateo counties.

Home Health Care & Hospice

Our experienced team will coordinate care with the patient's physician and design a customized care plan to meet the patient's needs. We care for patients who reside in San Francisco and Daly City.

Our patient care may include:

Home Health Care

- Skilled Nursing
- Physical Therapy
- Speech Therapy
- Occupational Therapy
- Medical Social Services
- Home Health Aides

Hospice

- Skilled Nursing
- Medical Social Services
- Spiritual Counseling
- Personal Care Assistance
- Hospice Volunteers

Cost of Services: Medicare, Medi-Cal and most insurance companies reimburse for home health care services.

Nutrition & Senior Centers

Our Senior Centers promote active and healthy lifestyles for older adults by providing nutritious meals and a multitude of recreational activities, senior living education and support services.

Self-Help for the Elderly operates 13 active senior centers in San Francisco, San Mateo, Santa Clara, and Alameda Counties.



Nutrition & Senior Centers

Senior Activities, Wellness and Fall Prevention Activities

- Safety & emergency preparedness
- Always Active, Tai Chi for Arthritis and Fall Prevention, and Walk with Ease programs
- Partnered with Dignity Health to educate seniors about homecare, hospice advanced directives
- Hosted healthcare workshops with Asian Health Collaborative
- Annual Health Fair for Chinatown and Richmond residents



Community Center Activities



Lifelong Learning



Social Services

- ❖ Case Management
- ❖ Information and Assistance Program
- ❖ Housing Counseling and Housing Subsidy Program
- ❖ Family Caregiver Support
- ❖ Naturalization Services
- ❖ Senior Escort Services
- ❖ SRO COVID Response Team

Major Successes

1

Ensure seniors have nutritious meals throughout the pandemic

- ✓ Delivered 1 million plus meals with the help of 350 volunteers
- ✓ Food = Love: meeting physical needs helps to support mental health

2

Technology engagement to stay connected during pandemic

- ✓ More than 100 Zoom virtual classes with more than 1,000 seniors joining
- ✓ Reduce loneliness and social isolation by connecting virtually

3

Conduct thousands of wellness calls with trained case managers and staff

- ✓ Build rapport with clients and provide emotional support
- ✓ Early screening, and connecting clients to mental health services when needed

Major Challenges

1

Challenges learning technology due to language barriers, physical/mental functional limitations

- ✓ Advocacy on funding for computer classes in different languages, and for devices
- ✓ One-to-one assistance

2

Fear due to COVID-19 and AAPI hate crimes

- ✓ Senior escort services
- ✓ Promote vaccinations
- ✓ Empowerment on street safety and

3

Stigma on mental health

- ✓ Raise awareness through providing services that meet clients' needs
- ✓ Build trust, and rapport through understanding clients' culture.

Future Opportunities

1

Continue with Technology

- ✓ Intergenerational and youth computer programming
- ✓ Expand virtual and hybrid (virtual and in-person) classes

2

Socialization

- ✓ On-going safety training for staff and clients
- ✓ Conduct wellness calls
- ✓ Report on anti-Asian violence/hate crimes
- ✓ Reopen senior centers 100% safely for in-person services

3

Wellness Calls & Senior Escort Services

- ✓ Companionship
- ✓ Social services as gateway to preventative health and wellness
- ✓ Screening for prevention and early intervention



**Self-Help for
the Elderly**

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the Elderly**

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<https://www.linkedin.com/company/selfhelpelderly>

HHS REGION 9

**Asian Americans for
Community Involvement**

San Jose, CA





Mission Statement

Our Mission:

To strengthen the resilience and hope of our diverse community members by improving their health and well-being.



Services

Service Population: marginalized and ethnic communities of Santa Clara County

Specialty Mental Health

Family and Children
Adult and Older Adult
CalWORKS
Intensive Outpatient
Ethnic Specific

Substance Abuse Services

Youth Education and Outreach
Intervention and Relapse Prevention
Adult DUI Program

FQHC Services

Integrated Prevention Services for
Cultural Communities
Behavioral Health Integration
Incentive Program
WPC - ECM

^P SOT, Human Trafficking, IPV

Center for Survivors of Torture
Shelter, Crisis Line, Safe Chat,
Case Management, Counseling

Prevention and Early Intervention

New Refugee
Youth Programs
Senior Wellness
Elder Story Telling

Advocacy

Leaders For Education, Advocacy, And
Democracy (LEAD); Client Councils;
Anti-racism; Health Parity; Permanent
Supportive Housing and other
Social Determinants Of Health

Major Successes



Success

Integrated Services/Whole Person Care approach
Availing our array of services, building upon
Achieving Whole Health model and utilizing
innovative approaches to care (Healing Arts) with
multidisciplinary/multilingual team



Success

Local, Statewide & National Advocacy:
Trans Care Coalition, API Health Parity, Anti Racism
Task Force, Project Safety Net, Refugee Forum,
Racial and Social Equity Task Force, Survivors of
Torture International



Success

Addressing Barriers to care: Multi language Anti-
stigma campaign, Telehealth hybrid model
implementation, Digital Literacy Programming,
Youth developed outreach materials

Major Challenges/ Barriers



Challenge/Barrier

Gaps in resources to serve all community members in need: eligibility rules; access to affordable housing, transportation, telehealth and other resources



Challenge/Barrier

Impact of racial violence on community members as well as providers.
Fear of accessing services and impact on engagement.



Challenge/Barrier

Workforce shortage of qualified bilingual/bicultural providers with increased need and level of acuity.
Competing with for profit, county, CBO's

Look Ahead



Future Initiative/Growth

Increase co-occurring capability and assessment and treatment of Autism Spectrum.



Future Initiative/Growth

Expand outreach in all communities of need via Community Health Workers and Promotoras



Future Initiative/Growth

Continued Movement towards Full Collaboration in a Transformed/ Merged Integrated Practice

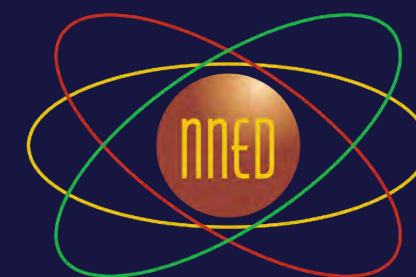
Nira Singh, PsyD

Director of Behavioral Health

AACI

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SAMHSA
Substance Abuse and Mental Health
Services Administration

Community Youth Services

Olympia, WA





Mission Statement

Community Youth Services empowers youth at-risk and their families to meet their goals for safety, stability, belonging and success by providing a continuum of individualized services and advocacy.



Multisystemic Therapy (MST) Program

Service Population & Description

MST is an EBP

MST is an evidence-based practice with over 30 years and 60+ published studies of research.

Worldwide Recognition

MST is recognized by 24 groups worldwide, including SAMHSA, NIDA, CSAP, and CSAT.

Population Served

Youth must be between 12-17 years old and have at least one caregiver willing to participate.

Treatment Target

To reduce the youth's acting out behaviors and keep youth in the home, in school, and not getting arrested.

Typical MST Behaviors

Aggression, running away, substance use/abuse, theft, fire setting, and school problems.

Modality & Intensity

For 3-5 months, MST is available to families 24/7 and meets frequently with them in their home and community.

Major Successes

These Outcomes are at the time of discharge for the CYS MST Team from 1/01/13 – 3/15/21, n=355 youth



MST Ultimate Outcomes

- 92.4% of youth were living at home
- 89.3% of youth were in school/working
- 84.2% of youth did not get arrested during MST
- 82.7% of youth met their goal of reducing / eliminating their substance use



MST Instrumental Outcomes

- 88.2% of parents had the skills to handle future problems
- 87.3% of families had improved their family relationships
- 90.1% of families had improved their network of supports



Population Served 1/2019 – 12/2020

- 3% Black/African American, 2% American Indian/Alaska Native, 19% Multiple Races, 76% White
- 13% Hispanic/Latino, 87% Non-Hispanic/Latino
- 38% Female, 60% Male, 2% Transgender

Major Challenges/ Barriers

- **Engaging families during the COVID-19 pandemic**
 - We navigated it well in the beginning by shifting to Telehealth for safety.
 - However, recently there has been an increase of burnout amongst families, therapists, and key stakeholders.
- **Engaging the community in the notion that “more” is not always “better”**
 - Working with high-risk youth, there’s a tendency to refer the youth for more services, which creates barriers to success.
- **Not having a way to track and report on outcomes specific to underserved populations**
 - Efforts have been made to address this need, yet efforts need to continue.

Look Ahead



Expansion into Pierce County

- With sustained success in Thurston and Mason Counties, the goal is to expand to Pierce County.
- The plan is to connect further with funders for next steps.



Strategies to improve staff retention

- Offering student loan reimbursements.
- Exploring grant opportunities to offer retention bonuses.
- Assessing needs of staff to ensure we are targeting those.



Funding for youth without Medicaid in Mason County

- We only have Medicaid funding for youth in Mason County, so we continue to look for opportunities to serve all youth regardless of insurance.

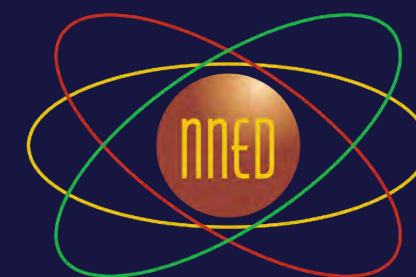
Tricia Wiltse, MA, LMHC MST Program Director

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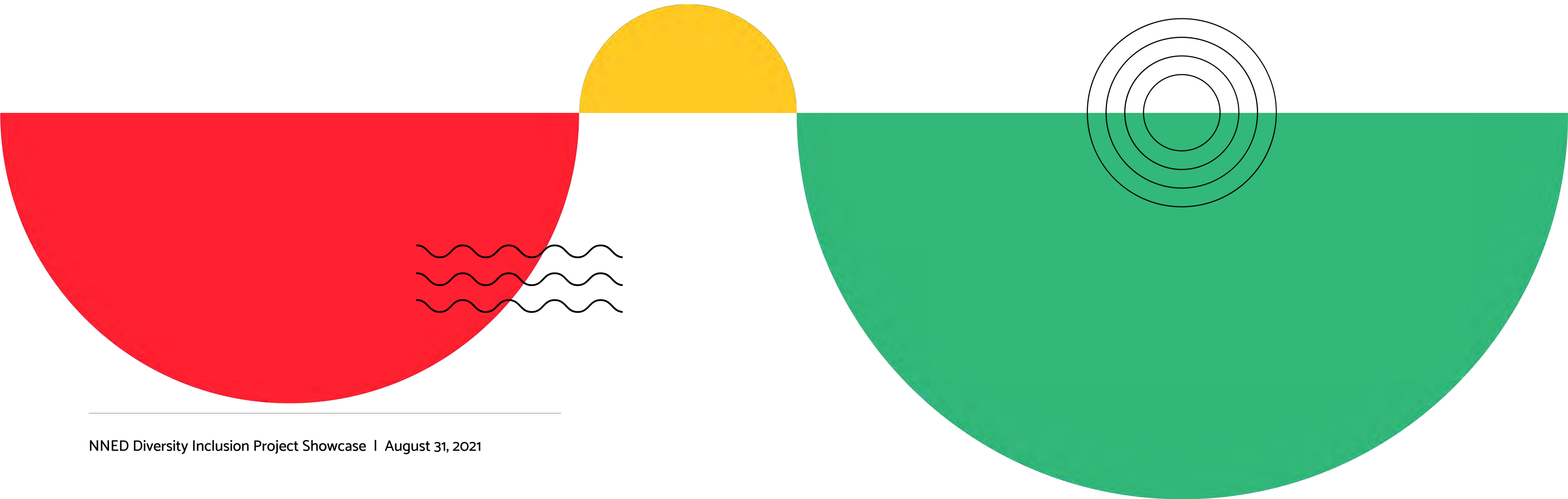
SAMHSA
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Services Administration

Break & Partner Central Highlight

THERE ARE OPPORTUNITIES TO CONNECT WITH MORE
COMMUNITY-BASED ORGANIZATIONS AS PARTNERS IN
BEHAVIORAL HEALTH!

Partner Central, a tool from the NNED, allows funders, leaders, other community-based organizations, and interested individuals to connect with trusted CBOs working in communities across the country, territories, and tribal nations.

nned.net/connect/about-partner-central



Recap From the Breakout Rooms

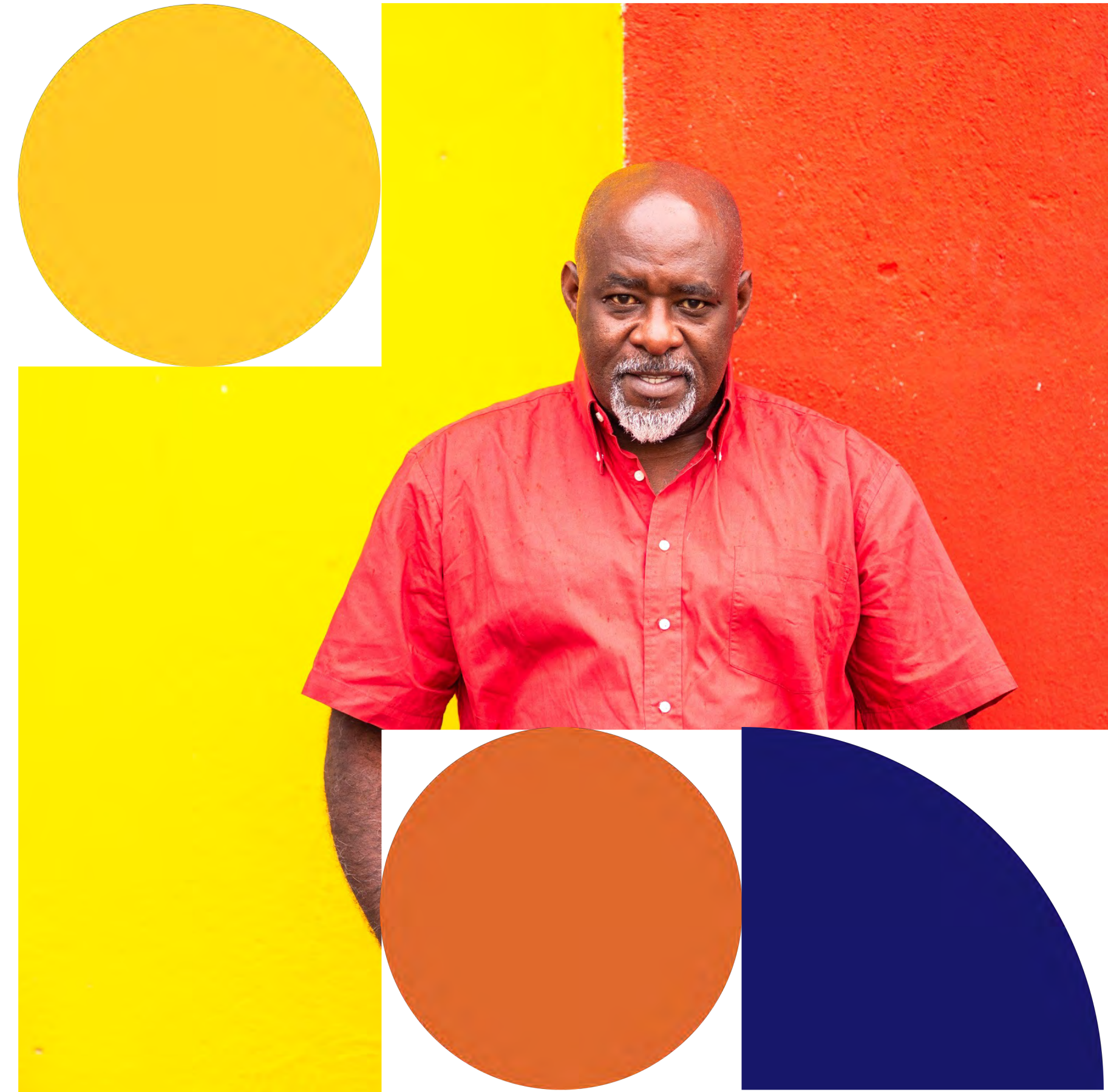
REPORT OUT BY NNED STEERING
COMMITTEE MEMBERS

- What were some themes that came up in terms of focus areas or successes amongst CBOs to address behavioral health in diverse communities?
- What about challenges or barriers?
- What opportunities for future work/connection were created?



Questions & Answers

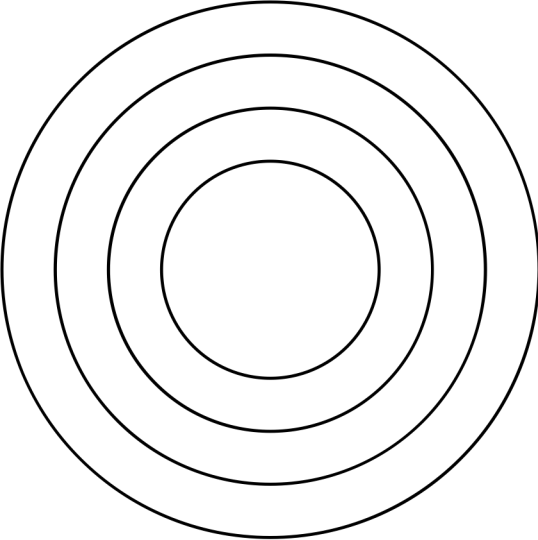
Final time to ask those burning questions!



Closing Remarks

PERRY CHAN, MS
PUBLIC HEALTH ADVISOR, SAMHSA
OFFICE OF BEHAVIORAL HEALTH EQUITY

Thank you again for joining us today. We encourage you to connect with each other and build long-standing relationships that will help to support diverse communities in achieving behavioral health equity.



Thank You for Your Participation Today!

For resources & to stay connected

nned.net/DIPS

Once available, the recording from the DIPS session will be posted along with any resources on the above page. You can also visit here for the slides and for more information about how to stay connected.



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