CDC API Focus Group Summary
May 17, 2013, 1:30 – 4:30p.m.
Blue Sky

Participants		
	Profession/Agency	**Contact Information**
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Title	API EMPOWERMENT
Purpose	The purpose of API Access Empowerment is empower the API community to unleash its capacity through leadership/advocacy training; mentorship to foster increasing multicultural workforce; and technical assistance and disaggregation of data collection for ensuring API access to unmet mental health needs in the Greater Central Valley.
Community-Defined Evidence-Based Criteria	To adequately empower API needs to address at three (system, agency & provider) levels with seven (7) different criteria: professional skills; linguistic capacity; culture specific considerations; community relations & advocacy; flexibility in program design & service delivery; capacity building; use of media & data collection and research.
Finding Summary	1. Lack of access to care and support for access to care due to logistical challenges, such as transportation, hours of operation and location; and "Medical necessity" may not take cultural specific conditions and symptoms into consideration; 2. Lack of Quality Care that cultural factors as determined by the community often are not included in the definition of quality of care. Currently, the clinicians are not trained on culturally specific mental health symptoms. 3. Lack of Disaggregated Data and Culturally Appropriate Outcome Evaluation: a) Lack of disaggregated data results in difficulties in establishing, assessing, and addressing needs; b) Due to cultural differences, conventional assessment tools developed based on Western cultures may not be appropriate for evaluation of community-driven programs and strategies. 4. Stigma and Lack of Awareness and Education on Mental Health Issues: a)The issue of stigma remains significant and deters may AANHPIs from

	seeking needed services; b) In many ANNHPI languages, there is no proper translation for "mental health" without some kind of negative connotation; c) There is a lack of resources to support culturally appropriate strategies to reduce stigma and to raise awareness of mental health issues in the AANHPI community; & d) There are insufficient resources to support stigma-reduction efforts such as education and collaborating with community partners like primary care providers, spiritual leaders, and schools.
	5. Workforce Shortage: a) The development and retention of culturally competent workforce continues to be a major challenge; & b) Outreach workers are usually not supported with adequate training and resources under the current system despite their importance and effectiveness in outreach and engagement.

Recommended Innovative Strategies for Fresno County	I. Access, Affordability, Availability, & Quality Service
	   a. *Increase access by supporting culturally competent outreach, engagement, and education to reduce stigma against mental illness and to raise awareness of mental health issues:*
	      1) Ongoing culturally/linguistically appropriate mental health promotion campaign using different methods (TV & radio broadcast; written brochures & billboards) and settings (primary care providers; education; small community groups; cultural festivities; health fair; & clan leaders, etc.) to increase awareness and reduce stigma education between a period of 3-5 years for ensuring MH language recognitions and consistent messages.
	
	   b. *Increase access by modifying eligibility requirements, by including ancillary service supporting access, and by providing affordable options:*
	      1) Cultural Competence Training for clinicians on cultural differences in client presentation of mental health symptoms to meet medical necessity;
	      2) Culturally/linguistically appropriate Mobile MH services available at community settings to reduce cultural/linguistic and transportation barriers for effective screening; increase access and timely linkages/referrals to obtain treatments;
	      3) Enhance/expand existing system with appropriate support to ensure clients access to clinics.
	
	   c. *Increase availability and quality of care by supporting the development and retention of a culturally competent workforce:*
	      1) MH Career Mentor Program for youth and parent to cultivate interests of diverse youths to pursuit career in MH;
	      2) Clinician Mentorship Program to match clinicians with emerging diverse young adults (in-house entry level & recent college graduates) interested in mental health as professional careers.
	
	   d. *Increase availability and quality of care by supporting services that meet*

	the core competencies and promising program selection criteria as defined by the API-SPW:
	1) <u>Support for the development of cultural competence service models as alternative to mainstream mental health model;</u>
	2) <u>Supports identified existing best practice service models and try to replicate it with other providers, counties and state with similar or high density of population residents.</u>
	
	II. OUTCOME AND DATA COLLECTION
	a. *Reduce disparities by collecting disaggregated data to accurately capture the needs of various AANHPI communities, by supporting culturally appropriate outcome measurements, and by providing continuous resources to validate culturally appropriate programs:*
	   1) <u>Support for mandating collection of disaggregated data with respect to County population diversity;</u>
	   2) <u>Support development of culturally/linguistically appropriate outcome objectives to validate financial and technical resources for ensuring efficient evaluation.</u>
	   3) <u>Disaggregated API population data served by MH system to ensure access and enable advocacy for appropriate penetration rates. Emphasize on the existing number served and increasing that incrementally thereafter.</u>
	   4) <u>Support resources to identify and develop the necessary scientific tools/methodologies relevant to measure and evaluate culturally/linguistically appropriate programs (include stakeholder as knowledge expert panel on cultural/linguistic issues);</u>
	   5) <u>Technical Assistance to assist providers on how to gather and analyze data relevant to its purpose of service.</u>
	
	III. CAPACITY BUILDING
	a. *Empower the community by supporting community capacity building through efforts such as leadership development, technical assistance, inclusion of community participation in the decision-making process, and establishment of infrastructures that can maximize resource leveraging:*
	   1) <u>Leadership and technical assistance to insure inclusion of API in the decision making process and establishments of community capacity infrastructures;</u>
	   2) <u>Accommodate for diverse MHB by moving day time meeting schedule to evening for inclusion of community represented individuals interested to serve, but unable due to day time work obligations.</u>
	   3) <u>Community capacity building with leadership and advocacy training to empower individual participation in the decision-making process, so they may find their own solutions to sustain its community.</u>