LASSEN COUNTY CULTURAL COMPETENCY NEWSLETTER

PURPOSE:
To reduce and eliminate cultural disparity by improving access to culturally and linguistically sensitive competent mental health and Substance Use Disorder (SUD) services.

GOALS:

- Continuous assessment of service needs throughout the community

- Development and implementation of strategies to reduce disparities

- Training for professionals and community members

- Stigma reduction and promotion of culturally appropriate services

Cultural competence, in brief, is the ability to interact effectively with people from different cultures. This ability depends on awareness of one's own cultural worldview, knowledge of other cultural practices and worldviews, tolerant attitudes towards cultural differences, and cross-cultural skills.

CLAS STANDARDS

One of the key objectives of the Cultural Competence Committee is to bring awareness of the National Culturally and Linguistically Appropriate Services (CLAS) Standards. CLAS Standards were developed by the US Health and Human Services Office of Minority Health. The CLAS Standards represent a path to correcting current inequities in the provision of healthcare services and to making those services more responsive to the needs of individuals of all cultural and linguistic backgrounds.

We will highlight a CLAS standard in each issue of the Cultural Competence Newsletter.

CLAS Standard 12 – Conduct regular assessments of community health assets and needs and use the results to plan and implement services that respond to the cultural and linguistic diversity of populations in the service area.

A critical component to ensure the linkage between culturally competent care and improved outcomes is the collection of race/ethnicity and primary language data from patients. The quality of patient-provider relationships is important—it affects patients' adherence to treatment regimens and their satisfaction with care. Despite the knowledge of its importance to improving the delivery of culturally competent care and reducing disparities in the quality of care, the collection of race/ethnicity and language data is not systematic or standardized. Stratifying measures by race/ethnicity and primary language will enable physicians, hospitals, healthcare systems, and others to review their quality information to determine where disparities exist and act on them. Additionally, collecting race/ethnicity and primary language data is an integral step if a healthcare organization wants to create a report to examine inequalities in the care provided to patients from different racial, ethnic, and language backgrounds. Such a report can track both areas that need improvement and those that do not and monitor progress toward eliminating healthcare disparities.

The Office of Management and Budget's (OMB) basic racial/ethnic categories (i.e., White, Black, Asian, American

Indian/Alaskan Native, Native Hawaiian/Other Pacific Islander) should be supplemented by additional questions that identify subgroups within each group to capture better the unique experiences of smaller populations within each major category (e.g., the category "Asian" encompasses people of Japanese, Indian, Laotian, etc., origin). Additionally, people should be able to identify as multiracial a group that should not be considered homogenous but rather should be divided into subgroups based on the component identities. When self-report data are not available, estimations using a combination of geo-coding and surname analysis should be used.

In considering the future collection of information on race, ethnicity, and language, several considerations should be taken into account. First, as legislation increasingly requires the reporting of this information, it will be more widely available; and as the use of electronic health records continues to spread, obtaining and sharing this information among different levels of the health system may make measuring disparities more efficient. However, during this time of transition, there also is the possibility that because of their generally more limited access to resources, providers who care for large numbers of minority and LEP patients will lag behind providers of less diverse populations in their ability to collect this information and analyze health outcomes and quality measures by it.

Ways to collect data:
Self identification through enrollment forms
Incoming and outgoing customer service calls
Disease/care/case management
Health risk appraisals and health needs assessments
Member surveys via providers or hospitals
Web portals
Interactive voice response surveying

The next meeting of the Lassen County Cultural Competence Committee will be May 7, 2019.

MAY AWARENESS

Mental Health Awareness Month

Some ideas on how to bring about more mental health awareness.

- Talk about it. Ask people how they're doing and mean it! Always be ready to listen and encourage. Ask questions and never judge.
- Share your story. Have you personally struggled with mental illness? Don't hesitate to tell friends and family about it. Your story can encourage others to ask for help.
- Talk to loved ones about how they are feeling. Regularly check in with those close to you, especially if you know they are dealing with mental illness.
- Encourage non-judgmental speak. Try to educate those around you o how to talk about mental illness. Never use words like "crazy" or "insane" as insults.
- Be a supportive friend. Sometimes spreading mental health awareness can simply mean supporting and listening to those close to us.
- Talk about mental health with your children. Don't assume kids are too young to understand. Depression can affect children in elementary school.

ARMED FORCES DAY

In the United States, Armed Forces Day is celebrated on the third Saturday in May. It falls near the end of Armed Forces Week, which

begins on the second Saturday of May and ends on the third Sunday of May (the fourth if the month begins on a Sunday, as in 2016).

First observed on 20 May 1950, the day was created on 31 August 1949, to honor Americans serving in the five U.S. military branches – the U.S. Army, U.S. Navy, U.S. Marine Corps, U.S. Air Force and U.S. Coast Guard – following the consolidation of the military services in the U.S. Department of Defense. It was intended to replace the separate Army, Navy, Air Force, Marine Corps and Coast Guard Days, but the separate days are still observed, especially within the respective services.

The first Armed Forces Day was celebrated by parades, open houses, receptions and air shows. The United States' longest continuously running Armed Forces Day Parade is held in Bremerton, WA. In 2019 Bremerton will celebrate the 71st year of the Armed Forces Day Parade.

Because of their unique training schedules, National Guard and Reserve units may celebrate Armed Forces Day/Week over any period in the month of May.

On 19 May 2017, President Donald Trump reaffirmed the Armed Forces Day holiday, marking the 70th anniversary since the creation of the Department of Defense

MAY AWARENESS CALENDAR

May 5   Cinco de Mayo
May 6   National Nurses Day
May 7   National Teachers Day
May 8   World Red Cross Crescent Day
May 8   Receptionist Day
May 12   Mother's Day
May 15   Peace Officers Memorial Day
May 18   Armed Forces Day
May 27   Memorial Day
May 5-11   Public Service Week
May 5-11   Brain Tumor Action Week
May 6-12   Nurses Week
May 6-10   Teacher Appreciation Week
May 11-17   Armed Forces Week
May 12-18   National Police Week
May 19-25   Emergency Medical Service Week

National Military Appreciation Month
National Arthritis Month
Asthma and Food Allergy Awareness Month
Brain cancer/Tumor Action Month
Osteoporosis Awareness and Prevention Month
Melanoma Skin Cancer Awareness Month
Lupus Awareness Month
Stroke Awareness Month
Bladder Cancer Awareness Month
Mental Health Awareness Month
Tuberous Sclerosis Awareness Month
Celiac Disease Awareness Month
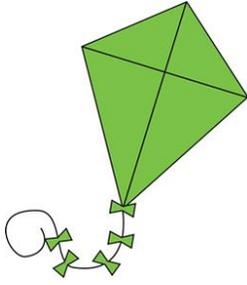
MENTAL HEALTH AWARENESS MONTH

HELP SUPPORT EDUCATION, AWARENESS, AND WELLNESS FOR EVERYONE

Mental health is essential to everyone's overall health and well-being, and mental illnesses is common and treatable. When you or someone you love is dealing with a mental health concern, sometimes it's a lot to handle. It's important to remember that mental health is essential to everyone's overall health a well-being, and mental illnesses are common and treatable.

So much of what we do physically impacts us mentally. That is why this year's theme for May is Mental Health Wellness Month is a call to pay attention to your spiritual, physical health and mental health, which can help achieve overall wellness and set you on a path to recovery.

Each year thousands of individuals wear lime green ribbons. You might be asking why lime green? Lime green is the national color of mental health awareness. By wearing the lime green ribbon, you are showing support for people living with mental health challenges and helping to break down the barriers that prevent many people from seeking the help they need.

If you want more information, please contact Lassen County Behavioral Health at 530-251-8108. If you would like more information regarding mental health awareness campaign contact https://www.eachmindmatters.org/