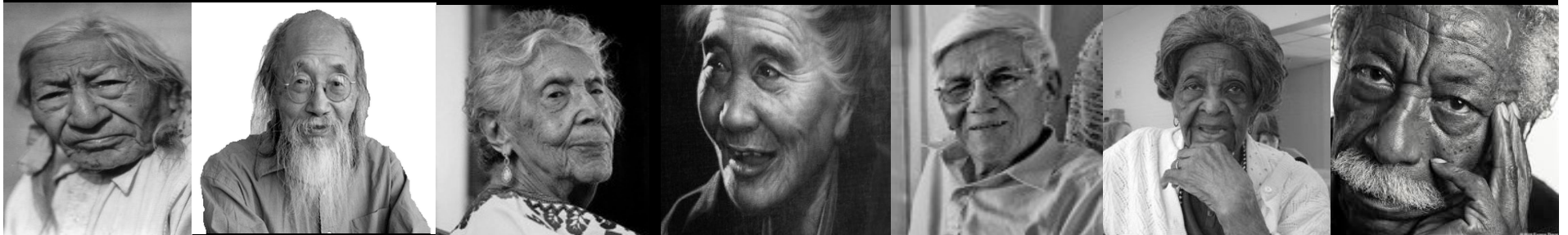




Community Mental Health: **NAVIGATING DIVERSITY & ISOLATION**

**Christoph Sandoval, Director
Community Services Division,
WESTSIDE COMMUNITY SERVICES**

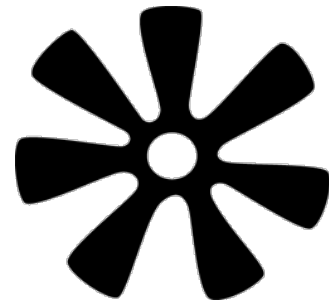
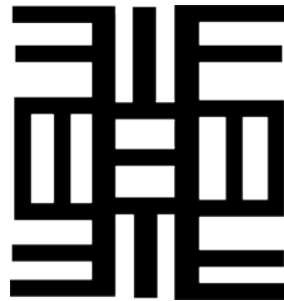
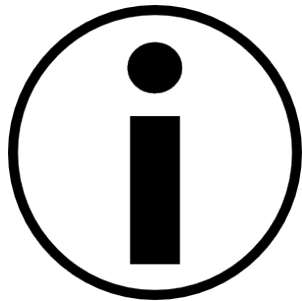




**Where is the knowledge we have lost in information?
Where is the wisdom we have lost in knowledge?**

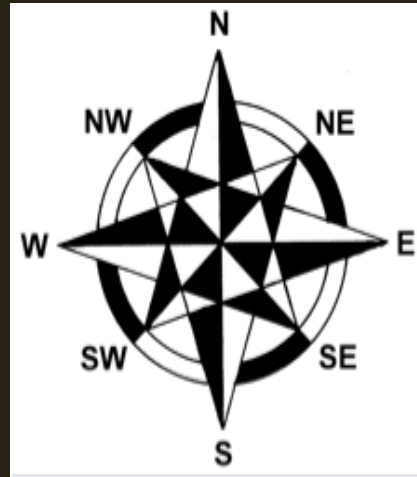
T.S. Eliot

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DEFINITIONS

Navigation: is the act of accurately ascertaining one's own position and planning and following a route through uncharted territories. Public Health Practitioners should follow cultural landmarks visible on the shore of a cultural group of emphasis and study the prevailing winds of community wisdom for clues for direction. The cultural compass of core values is the navigational aid that gives us a constant reference point to set a course.



***“The Paradox of Sameness and Difference:
We are Universally Unique...and Uniquely Universal in our Diversity.”***

Christoph Sandoval

Social Isolation: Social isolation refers to an involuntary complete or near-complete lack of contact with people and society for members of a social species. This includes traditional relationships to family, faith and community of cultural origin.

Loneliness

- ★ Loneliness is a complex and usually unpleasant emotional response to isolation or lack of companionship. Loneliness typically includes anxious feelings about a lack of connectedness or communality with other beings, both in the present and extending into the future. As such, loneliness can be felt even when surrounded by other people. The causes of loneliness are varied and include social, mental or emotional factors.



Aurelia Apodaca—my abuelita (grandmother) in her last days of a life full of love and service to others.

Pluralism Defined

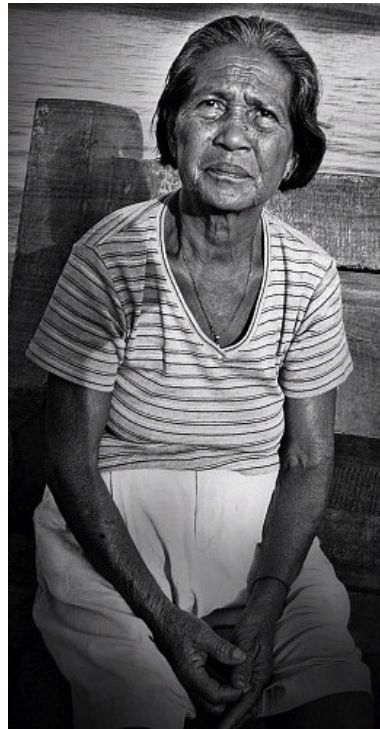
★ “Pluralism” and “diversity” are sometimes used as if they were synonyms, but diversity is just a cluster of different communities — splendid, culturally interesting and sometimes mutually threatening.

★ Pluralism is the engagement that creates a common society from all that plurality. -Diana L. Eck



SOCIAL DETERMINANTS OF LONELINESS

1. Abandonment of the patient by the family.
2. Neighborhoods prone to gun violence and traumatic injuries.
3. Assault and destabilization of People of Color Communities in the name of redevelopment by corporate interests.
4. Interlocking oppression experiences.
5. The Stigma of mental illness which prevents prompt and effective mental health treatment.
6. Memories of ongoing disrespect, humiliation and invisibility by medical professionals.



7. Poverty, powerlessness and physical illness .
8. Distrust of people with credentials, titles and institutional affiliation.
9. Fear of religious discrimination.
10. Cultural and folklore behaviors and beliefs that could be misinterpreted as psychiatric symptoms by clinicians.
11. Use of dominant cultural beliefs on a person of color may lead to misdiagnosis, underdiagnosis and overdiagnosis
12. Lack of mobility and access to services, delays and bureaucratic red tape.

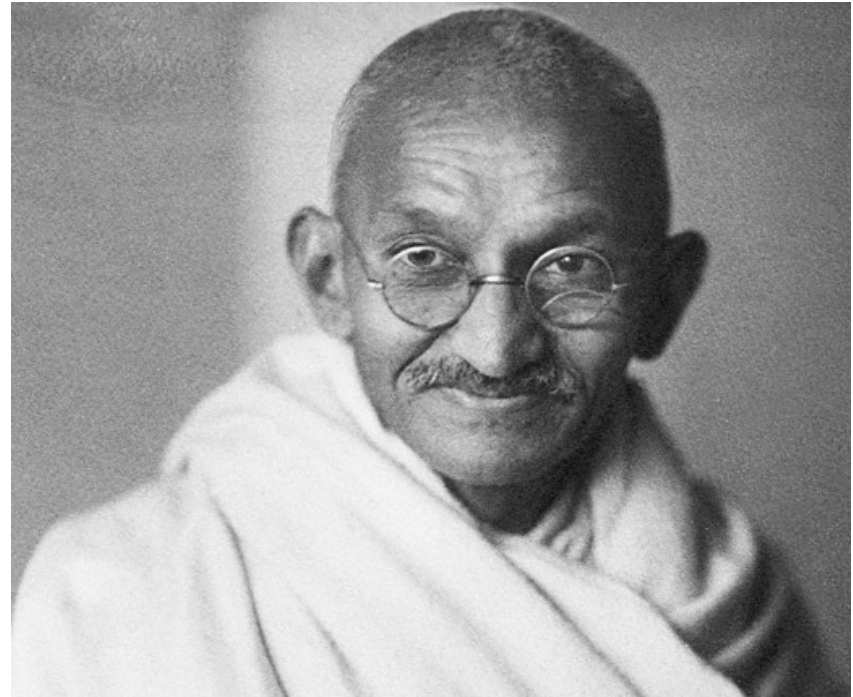
Promising Practice One

1. Abandonment of the patient by family.

1. Show up and choose to be present with heart and mind fully engaged and prepared to dialogue. Dialogue is an exchange of the gifts of information, knowledge and wisdom.

'The Culture of the mind must be subservient to the heart'.

Mahatma Gandhi



Promising Practice Two

2. Neighborhoods prone to gun violence and traumatic injuries.

- ★ Set up satellite services in hard to reach neighborhoods
- ★ Offer home visits
- ★ Provide transportation to and from appointments.
- ★ Partner with Church and faith based organizations to stage services.

“Those who make peaceful revolution impossible will make violent revolution inevitable.”

John Kennedy



Promising Practice Three

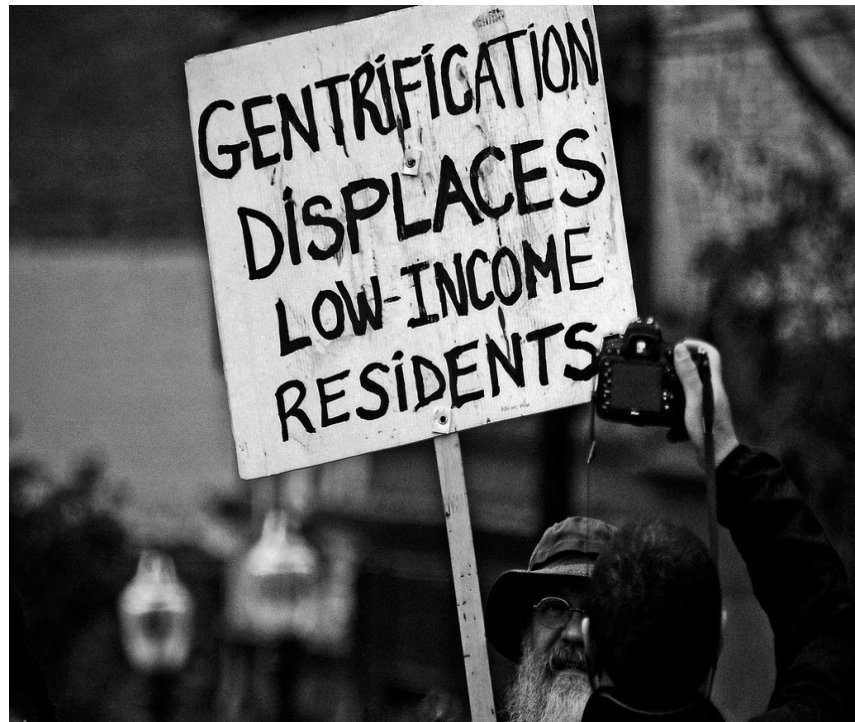
3. Assault and destabilization of People of Color Communities in the name of redevelopment by corporate interests.

Love recognizes no barriers. It jumps hurdles, leaps fences, penetrates walls to arrive at its destination full of hope.

Maya Angelou

★ We must recreate the village by becoming:

1. Transdisciplinary
2. Reaching across sectors for alignment and collective impact
3. Re-connect with neighborhood institutions-churches, schools, small business associations.
4. Get involved in public policy as client advocates.



Promising Practice Four

4. Interlocking oppression experiences.

- Work through a trauma informed lens.
- Provide a safe place for a client to define his/her own experiences.
- Listen with eloquence—the ear of the intellect and the ear of the heart.
- Keep your word.

“We work in a sea of hopelessness attempting to give hope to the hopeless.”

Dr. Kenneth Hardy



Promising Practice Five

5. The Stigma of mental illness which prevents prompt and effective mental health treatment.

- ★ Use the term "counseling" over "psychotherapy.
- ★ Use frequent check ins by telephone and in person to address fears of losing one's independence.
- ★ Offer transportation to a neutral location.
- ★ Use a conversational dialect for all communication.

"Mental illness is nothing to be ashamed of, but stigma and bias shame us all." Bill Clinton

Stigma Deters Treatment

Individuals

- Keeps people who are experiencing a problem from acknowledging problem and seeking help

Family / Community / Societal

- Keeps people from recommending help or acknowledging problem for family and friends

Policy Arena

- Keeps government and private sector from addressing problems

Promising Practice Six

6. Memories of ongoing disrespect, humiliation and invisibility by medical professionals.

- ★ Debriefing of the hidden trauma of abuse at the hands of medical professionals will help in the healing of memories.
- ★ The clinician is the new message, the new messenger and the new medium for rebuilding trust.
- ★ “Get in touch with the way the other person feels. 55% body language, 38% tone and 7% words.”

We will have to repent in this generation not merely for the hateful words and actions of the bad people but for the appalling silence of the good people.

-Rev. Martin Luther King Jr.



Promising Practice Seven

7. Poverty, powerlessness and physical illness .

Apply the LEARN Model

Keys to compassion, consolation and comfort across cultures.

- **LISTEN** with empathy and culturally receptive understanding to the client's perceptions of the problem.
- **EXPLAIN** your view of the problem.
- **ACKNOWLEDGE** and discuss the differences and similarities.
- **RECOMMEND** treatment options that are culturally appropriate.
- **NEGOTIATE** agreement with the client about what will be done by client and by provider.

We think sometimes that poverty is only being hungry, naked and homeless. The poverty of being unwanted, unloved and uncared for is the greatest poverty. We must start in our own homes to remedy this kind of poverty.

Mother Teresa



Promising Practice Eight

8. Distrust of people with credentials, titles and institutional affiliation.

- ★ Become part of the “warm hand off” in integrated care.
- ★ Behavioral health professionals must use a lay language to break open a conversation and build a connection. Pay attention to body language, vocal intonation and authenticity.
- ★ it is more effective to use general terms such as ‘colleague’ or ‘someone who specializes’ instead of ‘therapist’ or ‘social worker’.

“A friend is someone who understands your past, believes in your future, and accepts you just the way you are.”

--Unknown



Promising Practice Nine

9. Fear of religious discrimination.

"I believe in Christianity as I believe that the sun has risen: not only because I see it, but because by it I see everything else."

C.S. Lewis

- ★ Undergo interfaith diversity training.
- ★ Undergo Spiritual Care training
- ★ Engage the San Francisco Interfaith Council
- ★ Breakdown the walls between Spiritual Care, Mental Care and Physical Care.



Promising Practice Ten

10. Cultural and folklore behaviors and beliefs could be misinterpreted as psychiatric symptoms by clinicians.

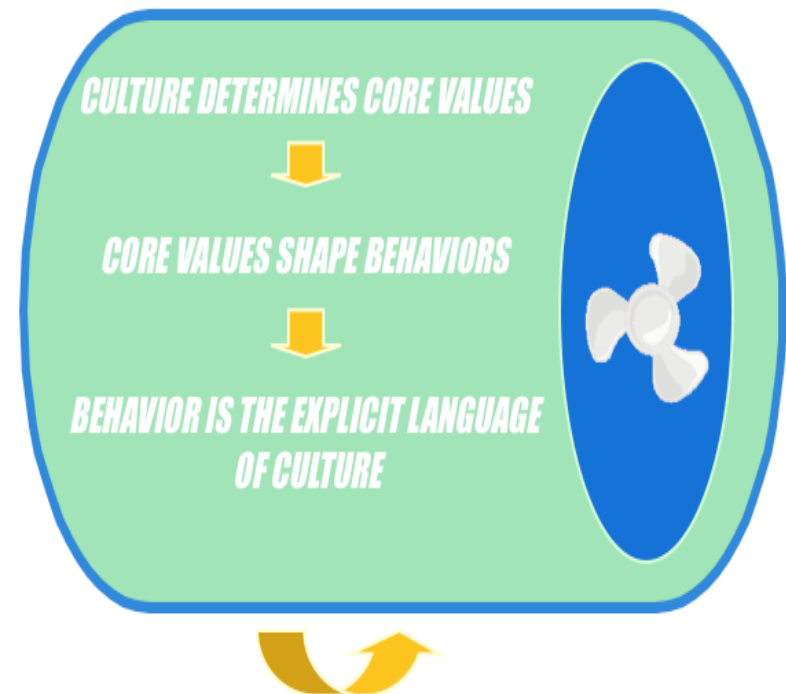
“There is no greater agony than bearing an untold story inside you.”

-Maya Angelou

The AWARE Model Communicating Across Cultures

- A** **ACCEPT** the other person's behavior without judging it based on what that behavior means in your culture.
- W** **WONDER** what the other person's behavior means in their culture rather than what it means in your culture.
- A** **ASK** what it means to them.
- R** **RESEARCH** and read about the other person's culture so that you are able to place their behavior in the context of their cultural worldview.
- E** **EXPLAIN** what their behavior means in your culture and demonstrate the behavior in your culture that expresses that feeling so that they can learn new behaviors that will help them function in your culture.

Functional Relationship Between Culture & Behavior



Promising Practice Eleven

11. Use of dominant cultural beliefs on a person of color may lead to misdiagnosis, underdiagnosis and overdiagnosis

American Psychological Association

1. Recognize cultural diversity;
2. Understand the role that culture and ethnicity/race play in the sociopsychological and economic development of ethnic and culturally diverse populations;
3. Understand that socioeconomic and political factors significantly impact the psychosocial, political and economic development of ethnic and culturally diverse groups
4. Help clients to understand/maintain/resolve their own sociocultural identification; and understand the interaction of culture, gender, and sexual orientation on behavior and needs.

DEFINITION OF CULTURE

♥ Culture is the blueprint of beliefs, behaviors and identities, which shape the character of a person or a group of persons.

♥ It is an inheritance of ideas, practices, and attitudes, which are conveyed and reinforced from generation to generation through institutions of society, like family, faith and community.

♥ Culture defines right and wrong, delineates assumptions and expectations, and ultimately describes our dreams and the meaning of life.

♥ Culture is humankind's changing response to his/her environment, his/her interior search for connection to creation and his/her need to act, react, and interact with members of the same species.

Promising Practice Twelve

12. Lack of mobility and access to services, delays and bureaucratic red tape.

“Everyone is kneaded out of the same dough but not baked in the same oven.”

—Yiddish Proverb

1. Make Transportation Available
2. Promote Sense of Purpose
3. Encourage Religious Seniors to Maintain Attendance at their Places of Worship
4. Give a Senior a Pet or Plant to Take Care Of
5. Encourage a Positive Body Image
6. Encourage Hearing and Vision Tests
7. Make Adaptive Technologies Available
8. Notify Neighbors
9. Encourage Dining with Others
10. Address Incontinence Issues
11. Give a Hug
12. Give Extra Support to Seniors Who Have Recently Lost a Spouse



UNIVERSAL ADVOCACY

UNIVERSAL ADVOCACY is the notion that we need to advocate for the rights, privileges and the common good of the global community in addition to advancing only one or two communities of my personal identity.

Equal access, fairness, inclusion, respectful engagement and power parity for all stakeholders within the global diversity of our world is paramount in the articulation of cultural democracy.



Planetization vs. Globalization

★ *"Let us look at things more closely to see whether even in those troubled regions of the heart, there may not be a gleam of light heralding the Planetization of Mankind."*

Pierre Teilhard de Chardin



★ Planetization mobilizes and empowers us collectively in ways never before possible. It merges our political, ecological and spiritual energies and activism into one unified framework of thought and action. It also calls into question our most fundamental and entrenched assumptions, even how we position ourselves in Time and Space.