

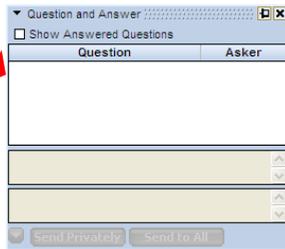
Today's Webinar – Certificates of Attendance

- ▶ A link to the on-line evaluation survey will be emailed within a few days after the presentation.
- ▶ Please complete evaluation surveys by **Thursday, February 7, 2019**. Certificates of Attendance will be emailed upon completion of the survey.
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Optional: Question and Answer

1. Type your question in the white box
2. When text is entered, a "send" option will activate
3. Click send
4. Senders of questions are anonymous and will not be identified



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Renelle Nelson

- Parent Advocate and Trainer for 20 years
- Coordinator of the Children's Mental Health, Emotional or Behavioral Disorders Project
- Experience as an elementary education teacher and school-based mental health professional
- Served on the Minnesota SW-PBIS Leadership Team and the Minnesota EBD Leadership Team
- Member of the State Subcommittee on Children's Mental Health
 - Parent of a son with developmental disabilities and mental health needs



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Hassan Samantar

- Parent Advocate and Trainer
- Parent of a child with a health impairment
- Community Outreach Specialist and advisor to Somali parents
- Translates materials into Somali
- Conducts workshops for professionals on culturally sensitive issues
- Served on several district Interagency Early Intervention Outreach Committees
- Collaborates with State and Federal Agencies in Mental Health/ASD projects



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Bonnie Jean Smith

- PACER Parent advocate, trainer and Multicultural specialist for 17 years
 - Member of MN Governor's Council on Developmental Disabilities
 - Member of the Monitoring and TA Review System team for the Federal Adm. on Developmental Disabilities
 - Evaluator for MN Council for Quality
 - Experience as educator and director at Phillips Community Initiatives for Children, Early Learning Center
 - Author of **"How Big is the Fly; Asking the Right Question."**
- Parent of two children with developmental disabilities



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Jesús Villaseñor

- Multicultural Specialist, Parent Advocate and Trainer at PACER for 20 years
 - Member of the Diversity Advisory Committee of the Minnesota Department of Education
 - Formerly on the Minnesota Special Education Advisory Panel; LEP/IEP Cultural Advisory for the National Center on Educational Outcomes; Chairman of the Latino Affairs Council; served on the "Success By Six" Cultural Dynamics Committee The United Way and as a National Field Reviewer for Cultural and Linguistic Appropriate Services Institute (CLAS)
- Parent of adult child with a learning disability



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Dao Xiong

- Parent advocate and trainer at PACER Center for 23 years
 - Provides information and resources for Southeast Asian American families of children through workshops, personal assistance and written materials.
 - Participates with many organizations in an advisory role.
 - Came to the United States as a refugee 30 years ago
 - Parent of 7 children, including an adult daughter with a mild cognitive disability
- Has extensive involvement in school settings



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Why pay attention?

Research indicates:

- **Parents are interested in their children's success:** There is no significant difference based on race, ethnicity, socioeconomic class, or cultural background
 - **Parents interact with service providers in different ways:** Differences because of ethnic, cultural differences; psychosocial factors such as family structure, value systems, interactional patterns, coping strategies



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Why pay attention?

Research* indicates:

- **Individuals from minority populations are likely to experience more barriers in behavioral health:** less likely to have access to available mental health services, mental health care, often receive poor quality of treatment or delayed treatment.
 - **Diversity within diverse groups groups are often misunderstood**
 - **Mental health – determined by a range of factors including socioeconomic, biological, environmental**



❖ University of Pennsylvania, Collaborative on Community Integration - http://www.tucollaborative.org/pdfs/Toolkits_Monographs_Guidebooks/community_inclusion/Cultural_Competence_in_MH.pdf

❖ World Health Organization, Mental Health Fact Sheet - <http://www.who.int/mediacentre/factsheets/fs220/en/>

The importance of perception

Perception – the meaning we place on what we observe– such as the behaviors of others

When we look at the needs of our families, what we observe is not simply what we see, but how we interpret what we see



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Culture: More than meets the eye

Visible Culture:

Foods, language, music, celebrations, dress, etc.

Understood rules:

Courtesy, time, conduct across situations

Unconscious rules:

Communication (human interaction). Includes voice tone, verbal/non-verbal, touch, eye contact, etc.



Communication

A continuum of preferences

- Direct / indirect
- Formal / informal
- Decision-making
- Eye contact
- Deference (showing respect)
- Physical proximity
- Touch



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Respect for family differences

➤ What if you went to dinner in a stranger’s home – someone you had never met? Would you:

- Know if they like wine with dinner?
- Know if they dress informally or formally for meals?
- Know if they pray before eating?



➤ How would knowing these things help you?

The more we know about all families, the more likely we will be able to avoid breaching important boundaries

First Contact with culturally diverse families

- ❖ Call parents before any meeting or visit to answer any questions they may have about services
- ❖ Be sure to carefully explain confidentiality to parents, and remember that fear, for some parents, is natural
- ❖ Think about what strategies you might use to ensure that parents understand what is discussed



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First contact with culturally diverse families

- ❖ No phone? Mail info and include your phone number; include information on confidentiality
- ❖ Explain the purpose of any meeting and its expected outcome
- ❖ Explain who, if anyone, will participate and their roles



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Meeting with parents

- ❖ Remind parents that they may invite anyone of their choosing to your meeting
- ❖ Recognize the importance of community elders, spiritual leaders or healers that families use for guidance and direction



Meeting with parents

Greet each family personally



- ❖ Share a bit of personal information about yourself
- ❖ Talk to both parents (unless the family has expressed another preference)
- ❖ Invite and expect that extended family may be present at meetings, either relatives or non-relatives

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Meeting with parents

Explain your services & check for understanding



- ❖ When explaining your services, be aware they may be new or unfamiliar
- ❖ Ask questions to identify the individualized concerns and needs
- ❖ Restate what you understand and give examples of how the service may help.

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Meeting with parents

Help the family to understand their role in services



- ❖ “Parents as experts” may be a concept that takes time for families to fully understand
- ❖ “Getting along” may take priority for some parents over expressing their opinion, when their opinion is different from the provider or the team

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Meeting with parents

Be sensitive to emotional states



- ❖ Be sensitive to the family’s emotional state as you decide the issues that brought a child to your services
- ❖ Expect some families to say that everything is fine; acknowledge this and build the relationship so that the parent is able to later hear what you have to say

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Meeting with parents

- ❖ Many diverse families show respect through offering food or refreshments to guests
- ❖ If you meet in a family’s home and are unable to accept, share this information before the visit in an informal way
- ❖ You may also bring something, like bottled water, so that the family sees that you have what you need



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Meeting with parents

Be sure to ask if the family wants an interpreter

- ❖ Ask whether a family prefers written information in English or their primary language
- ❖ Have information available in a variety of languages
- ❖ Do not ask family members to translate for the family – if at all possible!



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Ending a meeting

- ❖ **Explain** what will happen next for the child and the family
- ❖ **Encourage** parents to call with questions or concerns – and give them contact information
- ❖ **End** on a positive note!
 - Praise child or family strength
 - Thank parents for their participation



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Strategies for working with families

Reinforce the value of parent participation

- ❖ Help parents to understand how highly their role is valued
- ❖ Talk about a structure for reaching agreement if parents are not happy with services
- ❖ Honor the knowledge of families – and use it whenever possible



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Strategies for working with families



- ❖ Some parents may be reluctant to have their child in services, and may be fearful of what will happen to their child or their family
- ❖ Take the time needed to work on the relationship so that parents are comfortable with you and services
- ❖ Allow enough time in the process for families to make decisions in a way that makes sense to them

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Strategies for working with families

- ❖ Many families fear being judged for their home, dress, or skills
- ❖ Sometimes families ARE judges judged and it shows up in reports
- ❖ If you provide home visits, meet in a setting determined by parents the first time
- ❖ Many families are wary of strangers in their home, and some may even be wary of meeting in an office. Build the relationship!



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Strategies for working with families

- ❖ In many families, it is better not to initiate a handshake unless the parent extends their hand first (belief system may affect physical contact)
- ❖ Try to start and end any meeting as scheduled (parents may not want to interrupt, even if they have something else to do)

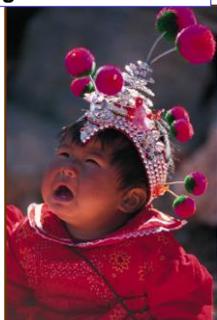


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Strategies for working with families

Open-ended questions encourage conversation:

- ❖ “I really want to be able to assist you with meeting your child’s needs. Is there anything you can tell me about your child that would help me do a better job?”
- ❖ “Have you found any resources that have been helpful?”



Strategies for working with families

- ❖ In some Asian families, both Western and Eastern medicine will be used
- ❖ In Native American families, traditional healing practices are often combined with Western medicine
- ❖ Parents may use other healing practices common in their culture (massage, smudging, cupping, etc.); Consider including in service plan, if you have one.



❖ Acknowledge differences in a positive way.

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Strategies for working with families

Ask about how parents perceive their child and the child’s future

Parents may have:

- ❖ Different images of their child than you carry
- ❖ Different beliefs about their child’s success as an adult
- ❖ Different thoughts about services would be useful
- ❖ Different expectations for the child receiving services --or for all their children



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Strategies for working with families

Check frequently for understanding:

- ❖ Questions like “Do you understand?” may receive a “yes” response, even when parents do not understand
- ❖ Try: “Do you think this sounds right, or.....?”
“Can you tell me what you think of this idea?”
“Do you know what to do next?”



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Hassan Samantar

- › Take time to get to know each other through informal conversation
- › Be prepared to address language challenges with interpreter and family
- › Recognize differences in expectations for development and age-appropriate skills



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Hassan Samantar

Struggles for Somali families relating to mental health

- › Early intervention is rare
- › Confidentiality is a new idea
- › Seeking help from the mosque is a common practice
- › Belief that symptoms reflect a spiritual need rather than a psychiatric crisis
- › Pressure to be successful
- › Belief that mental illness is a family curse



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Bonnie Jean Smith

- ▶ Each family has a different culture even when they have the same ethnicity.
- ▶ Don't make assumptions if you do not understand something you have seen or heard
- ▶ Affirm what the parents have been doing and put it into the context of what you will be providing



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Bonnie Jean Smith

- ▶ Check for understanding in a respectful way
- ▶ Address the adult using Mr., Mrs., Miss or Ms.
- ▶ Refer only to confirmed, available resources



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Jesús Villaseñor

- ▶ Hispanic/Latino families have many different levels of acculturation
- ▶ Establish trust through good communication
 - Plan what you are going to say, then cut it in half!
- ▶ Discuss meeting with interpreter ahead of time
- ▶ Be prepared to address confidentiality



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Jesús Villaseñor

Challenges for Latino families with mental health needs

- › Stigma
- › Disrupted family unit
- › Sense of loss
- › No sense of security
- › Fear



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Dao Xiong

- ›Expect that families will seek help and resources in different ways
- ›Focus on strengths and incorporate traditional practices
- ›Consider differences in view of disability, emotions and communication styles
- ›Respect the home environment



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Dao Xiong

Perception of Mental Health and Seeking Mental Health Services

Concept of Mental Health

Traditional Healers and Church Leaders

Medication and Therapy

Strategies for working with SE Asian families



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A final note

What professionals and a family have in common is to meet the mental health needs of a child in a respectful way

Building partnerships with diverse families can help them acquire skills to help their child and family

Partnerships are not easy, but they yield tremendous rewards. Thank you for what you do.

Thank You for Attending!

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- ▶ Questions? Renelle Nelson 952.838.9000 or rmelson@pacer.org

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