



# Hennepin County Children's Mental Health Collaborative

*A summary of work and lessons learned by cross-cultural agencies funded in 2013-2015*

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# Background

Hennepin County Children’s Mental Health Collaborative (HCCMHC) mission is to improve access to and resources for high-quality, trauma-informed mental health services for children, youth and families within Hennepin County. In spring 2013 through winter 2015, three organizations received funding HCCMHC to promote cultural competency among mental health providers in Hennepin County (Figure 1). These organizations also offered trainings to other organizations and agencies that provide mental health services.

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## 1. Overview of cultural competency programs

Program	Description
Guadalupe Alternative Programs (GAP)	Coordinates organizational cultural competency assessments. Provides cultural competency consultation relating to diagnostic assessments as well as cultural competency workshops.
Volunteers of America, MN (VOA-MN)	Coordinates organizational cultural competency assessments. Facilitates cross-cultural dialogues with ethnic-specific mental health providers. Provides cultural consultation to clinicians.
Washburn Center for Children (Washburn)	Provides culturally specific consultative services for mental health clinicians; specific workgroups focusing on Spanish-speaking mental health services as well as mental health services for African American clients. Coordinates training events that focus on organization-wide cultural competency training.

Under contract with HCCMHC, Wilder Research staff worked with program representatives and Collaborative members to develop a coordinated data collection effort for these agencies to provide information about the aggregate impact of their efforts. HCCMHC identified specific evaluation measures that grantees were required to collect and report, demonstrating their efforts and lessons learned.

This report summarizes each agency’s report, as well as findings from the focus group and a discussion that were conducted, in addition to the internal cultural competency assessments that all three agencies completed.

# Funding

HCCMHC provided a total of \$174,068 to the three agencies (Figure 2).

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## 2. Funding from HCCMHC by program

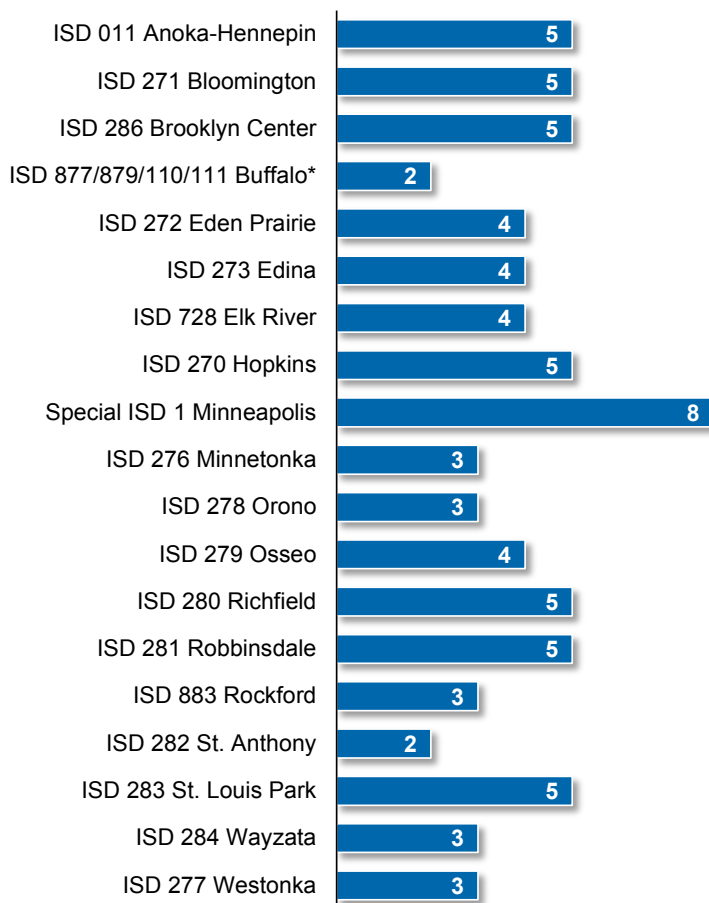
	Funding
GAP	\$60,000
VOA-MN	\$50,580
Washburn	\$63,488

# Summary of cross-cultural work

## Number of agencies trained and school districts served

Grantees were asked to estimate the number of agencies they trained and which school districts the youth they served attended. The following chart shows the total estimated number of agencies trained per school district, as reported by all three grantees (Figure 3). There are a total of 22 school districts in Hennepin County and at least two agencies in each of the districts in Hennepin County received training.

### 3. Number of trained agencies providing services to youth in Hennepin County School Districts



\* District includes ISD 877/879/110/111 Buffalo/Delano/Waconia/Watertown-Mayer

## Overview of trainings, workshops, and events

Grantees engaged providers in training and dialogue in a variety of cross-cultural topics including, but not limited to, working with LGBTQ clients, building cross-cultural competency in working with African American families, providing trauma-informed care to immigrant families, and incorporating spirituality, faith, and religion in clinical

practice. In all, there were 209 events and approximately 1,975 attendees. The following is a summary of the events reported by each grantee (Figure 4).

<b>4. Reported trainings, workshops, and events</b>	<b>Number of events</b>	<b>Number of attendees</b>
<b>Guadalupe Alternative Program</b>	<b>N=55</b>	<b>N=170</b>
Change Cohesion Salon	13	47
Relational Diagnostic Assessment I and II	34	105
Agency Cultural Competence Assessment (CCSAQ)	8	18
<b>Volunteers of America – Minnesota</b>	<b>N=64</b>	<b>N=404</b>
2013 Clinical Consultation Groups with Sue Johnson and Christine Harnack	32	47
2014 Clinical Consultation Groups with Ted Thompson	23	171
Cross-Cultural Dialogue	9	186
<b>Washburn Center for Children</b>	<b>N=90</b>	<b>N=1401</b>
Diversity Committee	42	694
Spanish-Speaking Providers Group	23	220
Clinical Consultation: Cross-Cultural Therapy with African American Families	18	195
Clinical Consultation: Cross-Cultural Therapy with GLBTQ Families	5	19
Workshop: Cross-Cultural Therapeutic Work with African American Families	1	137
Workshop: Reflections on Gender & Sexuality in Our Relationships	1	136

### ***Guadalupe Alternative Programs events***

GAP hosted three different cross-cultural competency activities, including a monthly two-hour “salon” called Change Cohesion, a series of trainings on Relational Diagnostic Assessment (RDA), and agency cultural competence assessments using the Cultural Competence Self-Assessment Questionnaire (CCSAQ).

1. **Change Cohesion:** The grantee described the Change Cohesion salons as engaging dialogue that “illuminates issues of relational competence and cultural responsiveness as critical components of effective therapeutic practice.” The Change Cohesion two-hour monthly salons were held a total of 13 times between November 2013 and March 2015. GAP reported 47 unduplicated attendees throughout the 13 monthly salons. The grantee counted 21 of the 47 attendees as members of ethnic and cultural minority communities. Facilitators of the salons included licensed marriage and family therapists David Hesse, Jennifer Krizan, John Souza, and Sue Schroeder. Attendees included licensed mental health

professionals and post-graduates from Change, Inc., GAP, Empower, Minnesota Autism Center, University of Minnesota, Lifespan Resources, and other individuals not associated with agencies.

### ***Lessons learned from attendees of training and/or workshop***

GAP provided the following comments gathered from participants of the Change Cohesion salon:

*Hearing Will's perspective on the struggles of inner-city youth helps me understand and, in turn, helps prepare me to advocate/challenge administration and teachers to better support these kids.*

*The disparity of the black/African American culture "being part of a gang and killing my own people" spoke so loud and clear to me as I think it is always a point of difficulty (shame, guilt, etc.) for those involved in gangs.*

*This was eye opening...practical ways to face life every day with those who are different and the same.*

*As a heterosexual, in a privileged position sexually, I have been hesitant and unsure about how to approach questions in this subject out of fear of offending others.*

*Allowing time for this subject in particular opened a dialogue that I can now continue with others – as the subject affects all of us personally and professionally.*

*I will continue to think about this and to process. Great to counter mainstream cultural perspectives and how we are all shaped by the mainstream culture.*

*I think this helped me think more expanded about my unconscious ideas about age and our timeline.*

*This is an –ism that we don't often discuss and I thought it was very enlightening.*

*This was about relational and cultural work on a larger systemic scale. It is important to remember the system we work in, not just the ones we work with.*

*Having a voice, and being a voice for others who can't voice their own opinions.*

- 2. Relational Diagnostic Assessments:** As described by GAP, the Relational Diagnostic Assessment model and treatment planning is designed to be relationally competent and culturally responsive. GAP hosted a series of 34 training sessions between September 2013 and January 2015. The trainings were facilitated by the developer of the RDA, Dr. Jim Nelson, as well as licensed marriage and family therapists Jennifer Ramji, Lisa Xiong, John Souza, Dave Hesse, and Sam Gunroe. There were a total of 105 unduplicated attendees from Change Inc., GAP, Washburn Center for Children, Headway Emotional Health Services, Watercourse Counseling, and Empower Therapeutic Support Services, LLC.

3. **Cultural Competence Self-Assessment Questionnaire:** Jody Nelson, Associate Director of GAP, facilitated the Cultural Competence Self-Assessment Questionnaire (CCSAQ) for a total of 18 staff from GAP and Change, Inc. The Cultural Competence Self-Assessment Questionnaire were completed between August and December of 2013.

### *Volunteers of America-Minnesota events*

VOA-MN reported hosting a series of two different activities, a clinical consultation group and a cross cultural dialogue.

1. **Clinical consultations:** VOA-MN reported clinical consultations groups led by Christine Harnack, Sue Johnson, and Ted Thompson. The goal of this activity is to guide cross-cultural peer coaching and support among clinical staff.

From March through December 2013, a total of 32 weekly clinical consultations were held between staff from VOA-MN and Somali Family and Youth Services. Sue Johnson led the weekly meetings from March through August of 2013. Christine Harnack led the remainder of that year. The grantee reported that during these weekly clinical consultations, staff from Somali Family and Youth Services presented cases and received feedback on their skills interventions. VOA-MN reported that attendees learned how to document skills on Children's Therapeutic Services and Supports (CTSS), including progress notes and treatment plans. Clinical consultation groups included discussions around cultural considerations of program implementation. Between six and eight staff attended the weekly clinical consultations in 2013.

In 2014, Ted Thompson coordinated clinical consultations groups 23 times with a total of 171 VOA mental health staff. Each meeting included between 5 and 10 attendees. VOA-MN reported many discussion topics, including therapists' cultural awareness, differing cultural views of mental health, incorporating culturally specific community resources in partnerships, and working with families with gang affiliation.

2. **Cross-cultural dialogue:** VOA-MN held nine cross-cultural dialogue sessions between August 2013 and February 2015. The dialogues had between 13 and 40 attendees representing VOA's Children and Family Division, Somali Family and Youth Services, as well as the Institute for Minority Development. In total, 186 people were in attendance throughout the nine sessions. VOA-MN reported they learned a variety of things about several cultural communities including Somali, LGBT, persons living in poverty, and persons living with physical disabilities. The learning outcomes regarding these communities involved understanding community barriers and perceptions of mental health. The cross-cultural dialogues

also helped participants to understand and use culturally specific clinical skills for engagement, motivation, and treatment. Additionally, the dialogues helped participants to understand systemic oppression and to identify inaccurate assumptions about the cultural communities.

### ***Lessons learned from attendees of training and/or workshop***

VOA-MN provided the following comments from staff:

*I'm so glad that we are consistently doing trainings on culture as it is so important to what we do.*

*I learned how much the language you use makes a difference when working with a client.*

*I learned how much I didn't know about the LGBT community.*

*It was nice to learn about LGBTQ population in way that was safe and comfortable.*

*Learned the similarities and differences when looking at poverty amongst racial groups.*

*I learned the challenges of engaging a Somali client in mental health services given the differences of perspectives and some skills to handle this.*

*Learned the challenges of working with an interpreter and not knowing what the interpreter is saying and whether they are doing it correctly. I learned skills to address this, including the importance of finding an interpreter you like and using them for each session with a client.*

### ***Washburn Center for Children events***

Washburn Center for Children reported six different cross-cultural competency activities. These activities included: two expansions of working groups (the Diversity Committee and the Spanish-Speaking Providers Group); two ongoing consultations on cross cultural therapy (working with African American families and working with GLBTQ families); and two educational workshops (Cross-Cultural Therapeutic Work with African American Families and Reflections on Gender & Sexuality in Our Relationships).

1. **Diversity Committee:** The grantee reported that the Diversity Committee met twice a month. Between April 2013 and January 2015, the group met 42 times with a total of 694 attendees. Topics addressed by the Diversity Committee included the following:

- Individual Development Plans (IDPs)
- #pointergate
- “Dear White People”
- A framework for discussions about facets of diversity
- Article: *Invisible Queer Female*
- Framework for conversations about race from the book *Courageous Conversations*
- Gender and Professionalism
- GLBTQ community and adoption across the U.S.

- Candid dialogue about race
- Child immigration and current humanitarian crisis on the border of the southern United States
- Cracking the Codes: The System of Racial Inequity
- Developing, planning, and starting affinity groups
- The impact of the events surrounding the shooting of Michael Brown
- The article from the Boston Globe called “Led by the child who simply knew”
- Signage for Washburn Center lobby
- Disparity in discipline of children in the public school system
- Nguzo Saba posters discussion of Dr. Julie Tilsen training
- History of agency efforts related to diversity and cultural competency efforts and national workforce trends among diversity in mental health providers
- Racism and privilege using current news
- Recent events in Ferguson, MO
- Religion, Spirituality and Systems of Nonbelief
- School segregation nationwide, and in Minnesota.
- Sexual Assault Awareness Month: National Day of Action
- The Race Card - a project by Michele Norris
- Walk a Mile in Uncomfortable Shoes
- Whittington Family: Ryland’s story

2. **Spanish-Speaking Providers Group:** Between April 2013 and January 2015, Washburn Center for Children coordinated the Spanish-Speaking Providers Group 23 times. The grantee reported a total of 220 staff participants from the Washburn Center for Children, Centro, Inc., and Kente Circle. The Spanish-Speaking Providers Group developed and completed the Spanish Clinical Language and Resource Guide. The resource can be downloaded from the agency’s website. The grantee reported that the Spanish-Speaking Providers Group consulted with various Spanish experts to develop a clear, substantive, and comprehensive guide. The consultations included work with a non-clinical internal staff from Mexico, Justo Garcia from Global Citizens Network, and Mauricio Cifuentes from Comunidades Latinas Unidas en Servicio (CLUES).

Additionally, the grantee reported that the Spanish-Speaking Providers Group participated in trainings and presentations on domestic violence in the Latin community, incorporating spirituality, faith, and religion in clinical practice, and providing trauma-informed care to Spanish-speaking immigrant families.

3. **On-going consultations:** Washburn Center for Children reported a total of 23 ongoing consultations on cross-cultural therapy with African American families (N=18) and GLBTQ families (N=5). The consultations took place monthly and were attended by a total of 214 agency staff.



4. **Educational workshops:** Two major educational workshops were reported and were attended by a total of 273 people. The workshop in September 2013 was facilitated by Dr. Nancy Boyd-Franklin and focused on building cross-cultural competency in working with African American families. The second workshop, in April 2014, was facilitated by Dr. Julie Tilson and focused on working cross-culturally with gay, lesbian, bisexual, transgender, queer (GLBTQ) families.

### *Lessons learned from attendees of training and/or workshop*

Washburn Center for Children provided comments from 78 participants of the workshop on Cross-Cultural Therapeutic Work with African American Families. Comments included:

*I appreciated the practical, applicable, real-life examples and usable techniques introduced by Dr. Boyd-Franklin.*

*Importance of naming systemic discrimination and how it impacts parenting and children.*

*Broaden my understanding of the meaning of family, including churches, friends, and community.*

*It reinforces the need to be who you are when working with clients and to be aware of the energy you are giving off.*

*I learned that above and beyond anything else, it is the use of self that is the key to working with African American families. I also learned that I need to work on not taking things personally.*

*I appreciated she didn't just move through information in a PowerPoint, She clearly had things she really wanted us to learn—mostly attitudes. She presented in a respectful way, challenging us to stretch our thinking. Good reminder about the importance of joining and empowerment, use of self, spirituality and using informal community supports—we didn't use that language much in our team/supervision, so I appreciated thinking in depth about it all today!*

### **Engaging providers in training, dialogue, and capacity-building around cross-cultural effectiveness**

All three grantees engaged at least 25 providers in training, dialogue, and capacity building around cross-cultural effectiveness. Participants included mental health practitioners, mental health professionals, agency directors and leadership, as well as master's-level interns. Participants represented staff from Guadalupe Alternative Programs (GAP), Change, Inc., Empower, Minnesota Autism Center, Lifespan Resources, Volunteers of America - Minnesota (VOA-MN), Somali Youth and Family Services, Institute for Minority Development, Washburn Center for Children, Kente Circle and Centro, Inc.

## Partnerships for interagency sharing of cross-cultural knowledge and experience

All programs reported establishing partnerships for sharing cross-cultural knowledge and experience.

- Although frequency was not noted, GAP reported established partnerships for cross-cultural knowledge sharing with the following organizations: Change, Inc.; Watercourse Counseling; Empower Therapeutic Support Services, LLC; Headway Emotional Services; and Washburn Center for Children.
- VOA-MN reported an established weekly clinical consultation for Somali Youth and Family services with Sue Johnston, Chris Harnack, Ted Thompson, and David Schuchman. VOA-MN also reported planning meetings conducted with partners from the Institute of Minority Development.
- Washburn Center for Children reported an established Spanish-speaking Children’s Mental Health Provider Consortium that meets every other month. The consortium includes providers from Centro, Inc., Kente Circle, Comunidades Latinas Unidas en Servicio (CLUES), Community-University Health Care Center (CUHCC), The Family Partnership, Fraser, GAP, Headway Emotional Health Services, St. David’s Center, Watercourse Counseling Center, and several private practice clinicians. Washburn Center for Children reported that the consortium meets to provide clinical and linguistic peer consultation, resource sharing, and presentations.

## Provider confidence and perceived ability

Two program grantees reported data measuring provider confidence and perceived cross-cultural competence. Of these two grantees, one reported a pre- and post-assessment to measure improvement.

- For provider’s confidence and perceived ability of effective cross-cultural care, GAP reported a result from a survey item in the Relational Diagnostic Assessment training. For the survey item, “this training built on my relational competence and helped me develop concrete strategies to start “cultural” conversations,” GAP reported that 85 percent of survey participants responded “very much so” (57%) or “adequately” (28%).
- VOA-MN reported using the Multicultural Counseling Self-Efficacy Scale to assess provider confidence and perceived ability. The organization attempted to measure impact from the Clinical Consults and Cross-Cultural Dialogue using a pre- and post-test. Due to staff turnovers, it is unclear whether there was improvement in provider confidence or perceived ability to provide effective cross-cultural care. Additionally,

VOA-MN surveyed participants after each Cross-Cultural Dialogue session. Overall, VOA-MN reported that Cross-Cultural Dialogue participants were 90 percent satisfied.

## Engagement and retention of cross-cultural care relationships among participating providers

Grantees were asked to report on increased engagement and retention of cross-cultural care relationships among participant providers. However, this proved difficult. One grantee explained difficulty in assessing and measuring this outcome.

*We were challenged to develop a method for collecting this information. We did maintain our partnerships as outlined in the contract to the best of our ability, but one of our partner agencies experienced internal changes outside of our control that negatively impacted their ability to remain engaged as previously desired.*

## Youth and family satisfaction with cross-cultural care

Grantees were asked to describe progress and status for the goal, “Improve youth and family satisfaction with cross-cultural care.” Two of the three grantees reported positive results from satisfaction surveys. One grantee reported not tracking this progress and goal.

- GAP reported that this measure is not being tracked.
- VOA-MN reported results from a semi-annual client satisfaction survey. A survey item asked clients if “my provider respects my cultural experience and identity.” VOA-MN reported that survey results from the past 12 months showed a 91 percent satisfaction rate.
- Washburn Center for Children reported an improvement in youth and family satisfaction with cross-cultural care in 2014.

## Focus group findings

In January 2015, Wilder Research conducted a focus group with representatives from funded cultural competence organizations to collect detailed information about the implementation process, barriers faced and lessons learned.

One person from each agency attended the focus group. Grantees reported they had maintained or expanded efforts, including consultation with an African American mental

health services organization, as well as the development of a Spanish-English manual of clinical terms.

Participants noted that potential implications of systemic racism are still present, particularly when partnering with smaller, ethnic-specific organizations. Specifically, program staff noted that institutional racism may be perceived to be a factor when large, mainly white organizations received funding and reached out to ethnic-specific, largely nonwhite organizations. Moreover, these partner organizations cannot bill time to HCCMHC, which excludes them from attending collaborative meetings or other events facilitated by the collaborative. In addition, program staff noted that staff at ethnic-specific partner organizations sometimes had full-time jobs alongside providing mental health services.

### Implementation barriers

All grantees reported experiencing barriers to implementing programs. Two grantees reported staff turnover as a challenge to planning timelines and as a barrier to data collection. One grantee described barriers as the extra time and work burden on program therapists.

- GAP reported no barriers in recruiting and training the expected number of clinicians. One challenge GAP reported was the turnover of a key staff position at the start of the grant. GAP explained that this turnover resulted in a late start of a few training events.
- VOA-MN reported barriers regarding staff turnover at the leadership level and restructuring of the Children, Youth and Family Division. The grantee explained that changes related to the turnover and restructuring made it difficult to access information about the implementation of the Cross-Cultural Providers Program. VOA-MN reported that they were unable to receive data from the Cultural Competency survey from African American Family Services (AAFS). As a result, VOA-MN lost funding from the Management Improvement Fund of the Saint Paul Foundation. The grantee explained that the funding would have supported one-half of the \$24,000 cost of the analysis planned with Kente Circle. Additionally, VOA-MN reported that internal changes in partner agencies prevented them from remaining engaged as previously planned.
- Washburn Center for Children reported that the main barrier was the time burden on therapists' workload. The grantee explained that participating in training and consultation events takes the therapists away from direct services with clients. The grantee described this as added stress on the therapists to maintain quota requirements as well as financial stress on the agency to support therapist time for attending the

important training and consultation events. Washburn Center for Children reported an attempt to address these challenges through supportive supervision and additional philanthropy.

## Lessons learned and recommendations moving forward

The funding from Hennepin County Children’s Mental Health Collaborative allowed a number of activities, events, and dialog to begin. Overall, the cultural competency activities had positive and sustaining impact. These sustained impacts include the formal establishment of processes such as Change Cohesion and the creation of a Spanish Clinical Language and Resource Guide. GAP reported that the Change Cohesion Salons draw on and uplift the strengths of current clinicians who are 65 percent people of color. Additionally, Washburn Center for Children reported that the funded activities served as a catalyst to greater awareness as well as internal buy-in and commitment on the importance of cultural competence. Programs reported because of this funding, there is momentum to collaborate with other organizations to continue and expand the work.

Programs reported some lessons learned. These lessons includes understanding the difficulty of implementing pre and post assessments as well as understanding that certain assessments may not be a good fit for the agency. Washburn Center for Children reported a positive experience with using an assessment called the Intercultural Development Inventory (IDI). The agency described the IDI assessment as useful on both the individual level and the agency level. Washburn Center for children will regularly use the IDI assessment to track progress.

When asked what the agency representatives perceived as the future needs of the Hennepin County mental health system, the response was greater representation of people of color in mental health professions and leadership. One agency shared that consultants described organizational change as taking seven to ten years. Another agency described the change process as the “lake turning over.”

Programs provided a couple recommendations for the collaborative:

- Focus on supporting resources for culturally responsive supervisors and people who are training new staff, to have a ripple effect.
- Provide funding support for affinity groups initiatives and developments such as a clinical language and resource guide for the Hmong and Somali community.

Programs felt staff appreciated a dedicated concentration of trainings on cultural components. As the programs consider lessons learned and next steps, some of the following thoughts were shared:

- When working with other agencies, especially ones that are new, keep in mind they may not be ready to do the work and instead have other priorities, to get off the ground.
- Continue to be engaged with other agencies in the conversation (about being culturally responsive).
- Move past “cultural competence” and towards cultural awareness and cultural intelligence.
- For agencies with predominantly white clinicians working cross culturally, focus on reflective practice and identifying privileges and assumptions.
- Create internal culture for clinician buy-in by having specific language to state commitment.

## **Wilder Research**

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451 Lexington Parkway North  
Saint Paul, Minnesota 55104  
651-280-2700

[www.wilderresearch.org](http://www.wilderresearch.org)



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### **For more information**

For more information about this report, contact Julie Atella at Wilder Research, 651-280-2658

Authors: Julie Atella and Sophak Mom

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