

California MHSA Multicultural Coalition

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John Aguirre

September 6, 2011

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Commissioner Larry Poaster, PhD
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Mental Health Services Oversight and Accountability Commission
1300 17th Street, Suite 1000
Sacramento, CA 95814

Rocco Cheng

Connie Chung-Joe

**RE: JOINTLY IMPROVING THE ENGAGEMENT OF UNSERVED,
UNDERSERVED AND INAPPROPRIATELY-SERVED COMMUNITIES**

Crystal Crawford

Viviana Criado

Dear Chairman Poaster,

*Kanwarpal
Dhaliwal*

On behalf of California MHSA Multicultural Coalition (CMMC), we write to share ideas on how we could ensure the reliable engagement of unserved, underserved and inappropriately-served communities on critical issues of diversity and cultural competence. We include in this letter four ways in which we could jointly ensure greater consideration, inclusion and genuine collaboration between government and community representatives enshrined in the spirit of the Mental Health Services Act (MHSA). We extend the hand of honest engagement and genuine partnership, and look forward to having open dialogue on how we could work together.

Don Edmondson

Jim Gilmer

Jamila Guerrero-Cantor

Janet King

CMMC is comprised of representatives from unserved, underserved and inappropriately-served communities throughout California. CMMC was formed on March 28, 2011 as a component of the California Reducing Disparities Project and with the responsibility "to identify and prioritize current leading issues that are barriers to unserved, underserved and inappropriately-served communities and recommend solutions to overcome these barriers and improve the mental health system." To meet this responsibility, we value every opportunity to provide vital counsel to government stakeholders on issues germane to the elimination of access barriers to mental health services for unserved, underserved and inappropriately-served communities.

Kirk Lee

Beatrice Lee

Jessica LePak

Poshi Mikalson

Emma Oshagan

Mari Radzik

With the passage of AB 100, we commend the Mental Health Services Oversight and Accountability Commission (MHSOAC) for taking leadership in convening a workgroup of government and community representatives to come to consensus on issues regarding the future of the MHSA.

Perry Tripp

Russell Vergara

John Viet

Gwen Wilson

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However, while the CMMC recognizes the hard work performed by the AB 100 workgroup, we also have (a) process- and (b) outcome-oriented concerns regarding the work of this workgroup.

Process-Oriented Concerns. We reviewed the list of participants of the AB 100 workgroup. Although we support the inclusion of mainstream community organizations, we reject the exclusion, or at best, the disregard of unserved, underserved, and inappropriately-served community representatives from AB 100 workgroup meetings.

- One of the overarching principles of the MHSA is the reduction of ethnic and racial mental health disparities. This can be best accomplished when knowledgeable representatives of underserved, unserved and inappropriately-served communities are routinely included as equal parties to all high level policy discussions and decisions regarding the MHSA, especially in workgroups convened by the MHSOAC.
- We have also learned that the AB 100 workgroup meetings were closed not only to representatives of underserved, unserved and inappropriately-served communities, but other community representatives, as well. We do not believe this aligns with the spirit and intent of the MHSA, which is about “doing business differently.”

Outcome-Oriented Concerns. We reviewed the recommendations for each of the twelve (12) Priority Issues outlined in the AB 100 Workgroup Final Report. Although we commend the great effort invested in the identification of these priorities and their corresponding recommendations, we view them as neither adequately addressing cultural competence, nor providing a strong guidance in reliably accounting for cultural competence in the areas where such a consideration would be relevant.

In service of having an open dialogue with the MHSOAC on how to jointly work in an atmosphere of honest engagement and genuine partnership with the CMMC, we propose several actionable strategies:

Solution-Oriented Strategies for Collaboration. We propose collaborating on four proactive, solution-oriented strategies designed to improve the consideration, inclusion and engagement of representatives of unserved, underserved and inappropriately-served communities in future workgroups and MHSOAC-sponsored planning efforts:

1. Agendize this letter for discussion and public comment at your September OAC meeting.
2. Implement a small group meeting of representatives from our communities and MHSOAC to discuss “meaningful next steps” in proactively problem-solving the exclusion of underserved, unserved and inappropriately-served communities in meetings.
3. Adoption of a page of “Inclusion Principles” into the MHSOAC charter. These principles could be developed through a formal workgroup consisting of members of our communities and representatives from MHSOAC.
4. Implement a policy to ensure appropriate notification of upcoming and important meetings like the AB 100 workgroup to unserved, underserved, and inappropriately served communities.

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We believe these strategies operationalize what we mean by greater consideration, inclusion and genuine collaboration between government and community representatives. These inhabit the spirit of the MHSA and allow for more transparent and inclusive decision-making.

We look forward to collaborating with the MHSOAC. We invite MHSOAC commissioners and staff to attend our coalition and committee meetings. We are eager to engage in solution-oriented dialogue on how the CMMC could be of service to you and the MHSA. Thank you for your prompt attention to these important matters.

Sincerely,

Jamila Guerrero-Cantor
MC

Jamila Guerrero-Cantor
Co-Chair
CMMC MHSA Assessment & Recommendations Committee

Gwen Wilson

Gwen Wilson
Co-Chair

cc: Governor Jerry Brown
Darrell Steinberg, President Pro Tempore, California State Senate
Sherri Gauger, Executive Director, MHSOAC
Members of the MHSOAC