## YIT PROGRAM PROGRESS REPORT

- 1. Grant Number: 03150-5225
- 2. Grantee Name and Address:

Howard Center, 208 Flynn Avenue, Suite 3J, Burlington, VT 05401

- 3. <u>Telephone Number:</u> (802) 488-6600
- 4. Project Title:

Culturally-Competent Planning and Leadership for Vermont's Youth in Transition Grant

- 5. <u>Period of Performance from</u> January 1, 2011 <u>through</u> June 30, 2011
- 6. <u>Approved Project Period from</u> January 1, 2011 <u>through</u> June 30, 2011
- 7. Author's Name and Telephone number: Mercedes Avila, (802) 999-4985
- 8. Date of report: July 22<sup>nd</sup>, 2011
- 9. Comments (if any): None

The federal Government Performance and Results Act (GPRA) primarily focuses on demonstrating accountability and achieving meaningful outcomes for all federally funded programs. Please make sure to include information on the outcomes of your project activities and the impact of your project on improving the lives of Youth in Transition and their families in the Program Progress Reports submitted.

## Two Program Progress Reports must be submitted for this sub-grant:

- 1. one for the time period from July 1 December 31, 2011 (due by January 31, 2012), and
- 2. one for the period from January 1 June 30, 2012 (due by July 30, 2012).

## **Report Contents**

## 1. Major Activities and Accomplishments During this Period

Report both quantifiable and non-quantifiable accomplishments for the General Expectations and Regional Goals listed in Attachment A (see page 3 of the grant award):

- Quantifiable accomplishments include numbers of youth/families served, people trained, support groups established, etc.
- Non-quantifiable accomplishments should be listed in chronological order. Describe any draft/final products in this section.

# Please report major activities and accomplishments for the following goal and indicators as relevant for the sub-grant. [This section of the report may be entered directly into the table below.]

Goal for strengthening the systems of care	4: System of Care partners gain cultural & linguistic competence (CLC)
System of Care Infrastructure Indicators (for federal TRAC):	<ul> <li><u>Workforce Development</u>: Organizations or communities implementing mental health-related training programs as a result of the grant. Please enter the number of organizations or communities and briefly describe the training programs</li> <li>Organizations hosted Cultural and Linguistic Competence (CLC) Trainings for staff and community members at the following locations:         <ul> <li>New England Survivors of Torture and Trauma (NESTT)/Connecting Cultures – UVM College of Psychology, Burlington, Vermont, January 2011 → 21 participants</li> </ul> </li> </ul>
	<ul> <li>○ Vermont Interdisciplinary Leadership Education for Health Professionals (VT-ILEHP) Program – UVM College of Medicine, Burlington, Vermont, February 2011 → 15 participants</li> </ul>
	<ul> <li>○ Vermont Federations of Families for Children's Mental Health (VFFCMH), Waterbury, Vermont, March/April 2011 → 9 participants</li> </ul>
	<ul> <li>Two trainings at Northwestern Counseling and Support Services (NCSS), Saint Albans, Vermont, May 2011:</li> </ul>
	■ Clinicians and Youth In Transition staff → 21 participants
	<ul> <li>Community members → 10 participants</li> </ul>
	A total of 76 participants were trained in CLC in this time period; for a cumulative total of 136 trained participants in the grant time period. Pre and post surveys were administered immediately before and after each CLC training. Items assessed had a core set of identical items, and questions assessed specific knowledge and attitudes about race, class and health disparities, and related cultural competency topics. Findings from these data collection activities will be reported in December 2011.
	<u>Organizational Change</u> : Organizational changes made to support improvement of mental health-related practices/activities that are consistent with the goals of the grant. Please enter the number of changes and briefly describe them
	<ul> <li>Two mental health agencies/regions are considering incorporating CLC related trainings as part of the required professional development trainings for newly-hired staff as well as current employees.</li> </ul>
	<ul> <li>The CLC training developed under the Vermont Youth In Transition Grant is now being offered as part of the University of Vermont</li> </ul>

Communication Sciences and Disorders Interdisciplinary Seminar in Neurodevelopmental Disabilities (CSD311) graduate course.
<ul> <li>The "Hands of Friendship" CLC group continued meeting as part of the Young Adult Voice Movement Conference planning committee in February, March and April. Meetings will now resume in the fall.</li> </ul>
<ul> <li>The CLC training will additionally be part of the new Interpreters' trainings being offered by Champlain Valley Area Health Education (CVAHEC).</li> </ul>
Partnership/Collaboration: Organizations that entered into formal written
inter/intra-organizational agreements ( <i>e.g.</i> , MOUs/MOAs) to improve mental health-related practices/activities that are consistent with the goals of the grant. Please enter the number of organizations and briefly describe the agreements
The Vermont Youth In Transition Project partnered with the Vermont
Department of Health (VDH) Office of Minority Health to conduct the 2 <sup>nd</sup> Annual Young Adult Voice Movement (YAVM) Conference. VDH funded \$10,000 of this year's conference, which goals included:
<ul> <li>Networking opportunities for young people from a variety of diverse backgrounds and regions of Vermont</li> </ul>
<ul> <li>Various opportunities for young adult leadership and teambuilding skills</li> </ul>
• Fun
One of the main focuses for this year's conference was Diversity. Conference participation included:
<ul> <li>42% were Female, 58% were Male</li> </ul>
<ul> <li>Geographically the young people who registered were:</li> </ul>
✓ 55% from Chittenden County
<ul> <li>✓ 9% from Franklin/Grand Isle County</li> <li>✓ 7% from Counth Windows Country</li> </ul>
✓ 7% from South Windsor County
<ul> <li>✓ 7% from Washington County</li> <li>There was also representation from South Windham, Rutland, Orange,</li> </ul>
Lamoille, and Bennington Counties.
<ul> <li>Ethnic and Racial Demographics of those who registered:</li> </ul>
<ul> <li>✓ 30% self-identified as Asian</li> </ul>
<ul> <li>✓ 22% self-identified as Black/African American</li> <li>✓ 42% self-identified as White Coursesian</li> </ul>
✓ 42% self-identified as White/Caucasian
This year the YAVM conference was a two-day event at the University of Vermont campus. Attendance was as follows:
✓ Friday Evening- 114 Young People Attended
<ul> <li>Saturday – 75 Young People Attended Workshops, 60 Young People Attended the Team Building Activities</li> </ul>
There were ten workshops available for young adults to choose from.
Workshops were planned and led or co-led by young adults; and topics
included:
• LGBTQ
Substance Use/Abuse
Suicide Prevention

Military Families
Nutrition and Health
Life Skills
Diversity
Leadership
Mental Health
Small Business
Below are two testimonials of diverse young adults who attended, helped plan the event, and/or presented workshops:
"For me Young Adult Voice Movement Conference meant best place to get socialize
and to gain knowledge about self and the society. This is my second time being part
of this conference and it definitely had offered more than last year. I have seen many
youth leaving this conference with lots of hope and dreams for their life and what I hope to see next is the support, support that might help them to acquire their
dreams." -Jeetan Khadka, 20-year-old Asian young adult
"I am so glad and feel privilege to participate in this conference. Thanks to Jeetan
who told me about this. This conference was so much fun and at the same time it was
very enlightening. I learned a lot and met new people. I wanted to attend all the
workshops but due to the limit of two, I attended "Diversity" and "Mental Health".
Both were fantastic! I feel sad that this would be my last year to participate since I'm
already 21 but I'd definitely go back next year as a volunteer! I encourage every young adult to get involved in this conference. Don't think twice $\mathfrak{O}^{\prime\prime}$ - Esther Doh,
Asian young adult (originally from Burma) who came to the United States/Vermont
in 2010.
In addition to the above testimonials, please see the letter from one of the
young adults who attended the Georgetown Training Institutes last July 2010
(please see Attachment A)
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The Vermont Youth In Transition grant continued partnering with the Vermont Refugee Resettlement Program (VRRP), the Interpreters' Task Force (ITF), and the Champlain Valley Area Health Education (CVAHEC) to bring to Vermont an Interpreter Training of Trainers. This event took place on April 30 <sup>th</sup> and May 1 <sup>st</sup> in Saint Albans. 7 interpreter trainers were trained in the Cross Cultural Communication Systems (CCCS) materials. Since the training VRRP and CVAHEC have offered intensive trainings to interpreters and consensus has been reached to train every interpreter in Vermont using the same materials and covering the same topics in an effort to work towards short and long-term common goals, and possibly state certification. Please see Attachment B for a detailed description of the training-of-trainers objectives and goals. VRRP has additionally provided a letter describing the collaboration between VT YIT and their organization (please see Attachment C)
<u>Types/Targets of Practice:</u> Programs/organizations/communities that implemented evidence-based mental health-related practices/activities as a
result of the grant. Please enter the number of
programs/organizations/communities and briefly describe the evidence-based practices
produced

partic based • • • • • • • • • • • • • • • • • • •	rt of the CLC trainings and at the Share Day Annual Retreats, ipants, agencies, and communities receive a CD with 100+ evidence I CLC related resources/materials that include the following topics: Child Welfare Culture, Race and Ethnicity Faith and Race Health Care Immigrants Interpreters and Cultural Brokers Juvenile Justice System LGBTQI-2S Mental Health Providers Migrant Farmworkers Native Americans Policy and Community Building Strategies Poverty Refugees Rural Populations Schools Screenings Self-Assessments Supporting Families Youth Development and Empowerment than 350 CDs have been distributed to the 12 AHS Vermont regions.
More	than 350 CDs have been distributed to the 12 AHS Vermont regions.
	lition, a second resource with local, state, and national CLC related tes is distributed at CLC trainings.
	esources: the CLC CD index and the CLC related websites document so available on the Vermont Youth In Transition website in the following
http://	youth-in-transition-grant.com/uploads/CLC Related Websites.pdf
http://	youth-in-transition-grant.com/uploads/CLC Resources CD Index.pdf

## 2. Problems

Describe any deviations or departures from the original project plan including actual/anticipated slippage in task completion dates, and special problems encountered or expected. Use this section to describe barriers to accomplishment, actions taken to overcome difficulties, and to advise DMH of any needs for assistance. None for this reporting time period.

## 3. Significant Findings and Events

For special notice to Principal Investigator, State Outreach Team for Youth in Transition, Federal Project Officer, etc. This should include any changes in staffing, including of persons, time spent, and/or responsibilities. Attach resumes and qualifications of new staff. None for this reporting time period.

## 4. Dissemination activities

Briefly describe project related inquiries and information dissemination activities carried out over the reporting period. Itemize and include a copy of any newspaper, newsletter, and magazine articles or other published materials considered relevant to project activities, or used for project information or public relations purposes.

- Northwestern Counseling and Support Services (NCSS) conducted a press release of the CLC trainings/activities offered in May 2011. Please see attachment D.
- The CLC Coordinator provided literature on Mental Health and Migrant Farmworkers to a fellow from UVM's College of Medicine Freeman Medical Scholar's Program and the Champlain Valley Area Health Education who conducted a study on *"The Social and Emotional Stressors of Vermont's Migrant Farmworker Population"*. Please see attachment E.

## 5. Other Activities

Briefly describe other activities undertaken during the reporting period. Please see chart above.

## 6. Activities Planned for Next Reporting Period

Briefly describe the project activities planned for the next reporting period.

- CLC trainings and/or related presentations will continue to be offered at different regions and venues:
  - Youth Services Inc., Brattleboro, Vermont, July 2011
  - Third Annual Success Beyond Six Behavior Interventionist and Clinician Conference - August 18 and 19, 2011, Vermont College of Fine Arts, Montpelier, Vermont - Sponsored by The Vermont Council of Developmental and Mental Health Agencies & The Vermont Department of Mental Health
  - 2<sup>nd</sup> Annual New England Survivors of Torture and Trauma (NESTT) Conference, September 2011
- ✓ Resume CLC workgroup "Hands of Friendship" meetings in the fall 2011.
- Expand and/or further support the Diversity Rocks! International youth group created and led by the Vermont Refugee Resettlement Program young adults.
- ✓ Participate and/or support the Interpreters' Medical/Mental Health trainings.
- Continue partnering with the Vermont Department of Health Office of Minority Health to support activities as they relate to Diversity and Cultural and Linguistic Competence issues.

- Attend the Connecting Circles of Care Historical Trauma and Native Americans Training of Trainers in California in July.
   The CLC coordinator was selected to attend the Georgetown Leadership Academy to Address Disparities in Mental Health Care in New Mexico in August.

#### To Whom It May Concern:

2010's Georgetown Systems of Care Training Institute was a great learning experience for me. It was the first national conference I had ever attended, and it impacted me a great deal. The Institutes provided information of how to effectively provide systems of care for children with mental health needs. I followed the Cultural and Linguistic Competency and Youth tracks, which incorporated cultural and youth based training into the program as well.

As a refugee myself, I had a very different perspective from my peers at the conference. I recognized tools, training and efforts that I knew from experience worked, and others that did not. I most focused myself on finding new, more effective and efficient ways to implement in my community. My reference tool was my own experience. I knew what to look for. I needed to find training that would have helped my acclimation to a new country, community and culture, but no one at that time knew what was missing.

Throughout the workshops, I learned that I had been missing a strong peer leader. Most importantly, I needed somebody around my age that had gone through something similar to what I was going through. I needed a leader that could explain to me cultural nuances I had been missing, how to navigate for myself. I needed somebody I could have confided in who and experiences in similar situations, letting me know that I was to be understood and fought for. However, no one in my immediate community had thought to be trained in such a way, or provide youth with the skills to help each other.

Now, with the aid of my training, I have undertaken that role. Even though I have only begun my training and learning experiences in becoming a leader, I help where I can. I have mediated between faculty and administrators and students at my school. I have offered my experiences and advice to current students who need help with navigating the difficulties of the school system as a refugee. I have found ways to include my peers into school activities who had been largely ignored, due to their cultural differences.

I am constantly finding new areas of my community and myself I want to improve. These goals create struggles and challenges of which I am continuously learning new things about myself, those around and my entire community, and adapting to become a positive influence, whether that means finding ways of which I can directly help, or contacting the many people and resources that the Training Institutes introduced me to.

Thank you, Iris Jusufagic

Student 107 Northgate Rd Burlington, Vt 05401 (802) 660.0745 CCCS Inc. Consultation to Healthcare Interpreter Trainers

by Zarita Arujo-Lane, CCCS President

#### Purpose:

To assist experienced healthcare interpreter trainers in developing a training curriculum, and evaluation tools for healthcare and mental health interpreter students by using CCCS materials and others.

#### Summary of Goals:

With CCCS staff assistance, trainers will learn how best to utilize CCCS materials, develop a curriculum and perform student assessments for both medical and mental health interpreters.

Trainers will have the opportunity to learn about language coaching, a method which can be used in conjunction with language proficiency testing.

CCCS will make recommendations to us about quality assurance and professional development activities that interpreter programs may want to work toward.

#### Objectives:

- Understand Trainers' past experiences and identify areas that may require room for improvement as to best reflect current industry standards of training interpreters.
- Assist in developing a 40-60hour training program for qualified bilingual community members and prepare major learning goals for the courses.
- Recommend how to best utilize training manuals and other tools such as videos
- Assist in developing consistency with student rubrics and grading process for all students in all languages.
- Assist in developing criteria for entering and exiting training program.
- Introduce concept of language coaches and how to recruit and work with them through role-play exercises.



April 1, 2011

To Whom It May Concern:

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VRRP has benefitted from the donation of CCCS materials from the Vermont Youth In Transition Grant recently. As VRRP plans to roll out its first bit-hour CCCS Merical Interpreter Certification Course longing in June 2011, these materials will be involvable to the training. VRRP is coordinating with AHEC and members of the VT interpreter Task Force to certify medical interpreters of various fanguages in Vermont, and this training will include an essential Mental Health Interpreting segment. VRRP plans this as the first of many trainings, aimed at increasing the overall quality of interpreting at all kinds of Medical and Mental Health sessions.

Please do not hesitate to call my if you should have any questions or concerns.

Sincerely, Cong Ale Roman

. ajequeline Rose, MPH

Coordinator, Vermont Interpreting and Translating Services

Vermont Refugee Resettlement Program

(802) 654-1706

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### FOR IMMEDIATE RELEASE

April 12, 2011

CONTACT:

Joe Halko/Direct line 802-393-6414 Director of Community Relations Northwestern Counseling & Support Services

## Cultural and Linguistic Competency Training at NCSS

May is Mental Health Awareness Month. This training is part of an NCSS series in an effort to reduce stigma. In fact, NCSS prefers to view stigma as an acronym for Striving To Increase Good Mental health Awareness.

Join other members of the community for this informative and FREE training on Thursday, May 19<sup>th</sup> from 1:00 – 4:30pm at the NCSS Family Center. Mercedes Avila, MED, will present an insightful look at how individuals from different cultures can collaborate each day for the betterment of our community. Don't miss this opportunity to learn more about cultural and linguistic competency.

#### Some working definitions of Cultural Competency

- Cultural competence refers to an ability to interact effectively with people of different cultures. Cultural competence comprises four components: (a) Awareness of one's own cultural worldview, (b) Attitude towards cultural differences, (c) Knowledge of different cultural practices and ...
- Is a "set of congruent behaviors, attitudes and policies that come together in a system, agency, or among professionals that enables effective work in cross-cultural situations. ...
- Is a developmental process that evolves over an extended period of time. Individuals, organizations, and systems are at various levels of awareness, knowledge and skills along the cultural competence continuum. It requires organizations to have:
- The ability to understand, respect and effectively work with persons/groups with various cultural backgrounds including age and gender.
- The concept refers to the ability of health care providers to deliver culturally appropriate services to members of different ethnic and linguistic groups. ...
- The knowledge, interpersonal skills, and behaviors that enable a person or program to work effectively cross-culturally by understanding, appreciating, and respecting differences and similarities in beliefs, values, and practices within and between cultures.



The Social and Emotional Stressors of Vermont's Migrant Farmworker Population Robert C. Areson, MS II, University of Vermont College of Medicine, Burlington, VT Summer 2010



#### BACKGROUND

Migrant workers make up a large portion of Vermont's dairy farm work force. The Open Door Clinic provides them with the physical healthcare that their demanding work requires. In the spring of 2010 the Open Door Clinic identified the mental health needs of this population as potentially under-addressed



Mignet Permoviers The value of dairy in VT: Addison/Franklin Counties

- Add \$450 million annually to the local economy 0
- Provide >10% of all jobs in region 0

#### **OBJECTIVES**

Migrant farmworkers are essential to the survival of dairy farming in the State of Vermont.

- As such, this two week study aimed to: o Interview as diverse a sample of workers as possible
  - . Individually
    - In groups
- Identify what some of their social and emotional stressors are
- Assess how many of these stressors are being addressed Reveal what work remains to be done to alleviate potential
- 0

#### ental health challenges

including

- Allerage-thanks of who contributed to two-Open Door Clinic staff Jalie Arel, MSW, MPH, Executive Director Elizabet Betty "Heldies, RN, Case Mana Lauren Trottier, Administrative Assistant Karin Hanner-Williamson, CVAHEC Maria Mercedes Avila, Med Maria owners and workers who contri

INTERVIEW OBSERVATIONS

A broad spectrum of experiences is evident on Vermont's dairy farms. Relevant reflections by interviewees include the following:

"I feel as if I'm in a jail. Every day I go to work and I go back to the house...nothing other than work and sleep ever. It's constant suffering."

"My mind isn't on work because I'm always thinking of my family at

"There's no way to share your thoughts with anyone. You're all alone working all day and then without time to talk to anyone about it. You milk cows but your mind is in a different place ... "

"In Mexico, you can't buy food and clothes and shoes. You have to choose one or another. Here, we make enough money to buy all of them at the same time."

"All I want is anything to do that isn't related to work...even if just a trip to the lake, or a visit to town. Something to look forward to."



Photo: ODC website: http://b

**OBSERVATIONS and CONCLUSIONS** 

The Open Door Clinic may better identify those potentially in need of additional emotional care by examining that worker's environment and taking into consideration: Geographical isolation

- Size of farm
- o Presence/absence of family members

Providing migrant farmworkers the support they deserve will ultimately require a restructuring of the laws and politics around how we incorporate them into our society. Until that time, we can take it upon ourselves to provide the basic enjoyments and necessities that are currently difficult for some of them to acquire.