

**Report on Cultural and Linguistic Competence
Vermont SAMHSA CMHS Youth in Transition
Grant for the period July 1st, 2010 through December 31st, 2010**

Prepared by Mercedes Avila

Report Contents

1. Major Activities and Accomplishments during this Period

The major CLC activities for this period include:

- a) Creating the CLC workgroup "Hands of Friendship".
 - b) Completing the CLC curriculum/training that addresses the social construction of race and health disparities; and conducting three of these trainings (please see dissemination section of this report).
 - c) Continuing to identify diverse young adult leaders in different communities. Participation of these young adults in:
 - The Training Institutes in Washington, D.C., and
 - The CLC workgroup.
 - d) Collaborating with the Southern Vermont Undoing Racism Organizing Collective.
 - e) Continuing to partner and collaborate to bring an Interpreters' Training-of-Trainers workshop to Vermont.
 - f) Partnering with the Vermont Office of Minority Health to support the Young Adult Voice Movement (YAVM) Conference's Diversity track.
- a) One of the most important accomplishments was the creation of the CLC workgroup "Hands of Friendship". YIT staff and young adults from four regions are participating in this group: Chittenden (Burlington), Franklin-Grand Isle (Saint Albans), South Windham (Brattleboro) and Orange North Windsor (Hartford). The group currently has fourteen members, 50% of the members being young adults. The group has already met three times:
- August 2010 in Burlington: to learn about Native American issues.
 - September 2010 in Saint Albans: to work on the CLC action plan and define goals and objectives of the group.
 - December 2010 in Burlington: to plan the next annual Young Adult Voice Movement Conference.

The CLC Workgroup will meet every other month at different locations throughout Vermont to stimulate discussions about CLC among YIT staff and key stakeholders (including young adult and family leaders) in all regions.

- b) Please see dissemination section of this report for information about the CLC trainings.
- c) Two young adult diverse leaders, **XiaoJun (Junie) Huang** and **Iris Jusufagic** attended the Training Institutes in Washington D.C. They both joined the Youth Empowerment Track and participated in several youth empowerment/development workshops/sessions. **Iris** continues to implement what she

learned at the Training Institutes at school and in the Bosnia and Herzegovina community in Chittenden County. **Junie** started college during fall 2010, and she has recommended another young adult to be part of the CLC portion of the Youth In Transition grant, **Jeetan Khadka**.

Jeetan is a young adult from Bhutan. He arrived in Vermont in 2008 as a refugee and recently graduated from Burlington High School with an Outstanding Student of the Year (2008-2009) award. He participated in the 1st Annual Young Adult Voice Movement Conference organized by the Vermont Youth in Transition grant in May 2009. As a result of attending the conference and becoming involved with the grant, he enrolled in the Community College of Vermont to study Social Work. **Jeetan** currently works as an AmeriCorps state member for the Burlington School District. In this position **Jeetan** works to strengthen and expand cultural competency and equity. He provides resources and training in diversity and equity, works with community organizations and school staff to reach families for after school registration and financial support, and works directly with newly arrived families to create parent involvement in children's learning. While still in high school, **Jeetan** volunteered for the Lund Family Center, an agency which focuses on strengthening families, reducing child abuse and neglect, and helping to create new families through adoption. In 2009, **Jeetan** created a minority youth club for newly-arrived refugee and immigrant youth. Through this group, he reaches out to community organizations for resources and support and coordinates the group's weekly meetings. In 2010, he became a member of the Burlington High School International Club, the Vermont Bhutanese Cultural Group, the Young Adult Voice Movement Conference planning committee, and the Vermont Youth in Transition Cultural and Linguistic Competence workgroup "Hands of Friendship".

d) The CLC portion of the Youth In Transition grant collaborated with the Southern Vermont Undoing Racism Organizing Collective to bring the People's Institute for Survival and Beyond (PISAB) training to the state. The YIT grant contributed \$1029.61 to the Undoing Racism training held in Brattleboro, Vermont from October 29th – October 31st. **Ebony Nyoni** (Franklin County Youth In Transition Grant Coordinator) and **Jeetan Khadka** (young adult from Chittenden county) attended the training with the CLC coordinator. The training provided us with a powerful shared experience upon which we can build our capacity and skill level in how to go about understanding and dismantling racism. The outcomes of the training included:

- Developing a common definition of racism and an understanding of its different forms: individual, institutional, linguistic, and cultural;
- Developing a common language and analysis for examining racism in the United States;
- Understanding one's own connection to institutional racism and its impact on his/her work;
- Understanding why people are poor and the role of institutions in exacerbating institutional racism, particularly for people and communities of color;
- Understanding the historical context for how racial classifications in the United States came to be and how and why they are maintained;
- Understanding the historical context for how U.S. institutions came to be and who they have been designed to serve;
- Understanding how all of us, including white people, are adversely impacted by racism every day, everywhere;
- Addressing surface assumptions about how your work is (or is not) affected by racism;
- Developing awareness and understanding about ways to begin Undoing Racism ;
- Gaining knowledge about how to be more effective in the work you do with your constituencies, your organizations, your communities, your families;
- Understanding the role of community organizing and building effective multiracial coalitions as a means for Undoing Racism.

- e) The Champlain Valley Area Health Education Center (CVAHEC) has hired a new Education Resource Coordinator, **Judy Wechsler**, who replaced **Karin Hammer-Williamson**. **Judy, Tom Ayres** (CVAHEC Executive Director) and the CLC Coordinator met several times in the fall to continue the discussions about interpreting training needs in Vermont. CVAHEC has taken the lead in organizing a "Train the Trainer" session for experienced interpreter trainers, focusing on the medical and mental health interpreter training curricula of Cross Cultural Communication Systems (CCCS). CVAHEC is leading this effort because of their commitment to assuring that an adequate number of trainers are available regionally and statewide so all interested and eligible students are able to take advantage of interpreter training opportunities in medicine and mental health. The Training-of-Trainers will tentatively happen in April or May of 2011 (please see attachment 1 for training proposal).

In addition to the work on Mental Health Interpreting, the Youth In Transition grant donated a copy of the new (CCCS) Art of Medical Interpretation manual and DVDs and the Introduction to the Art of Medical Interpretation manual to **Jacqueline Rose**, Coordinator of the Vermont Interpreting and Translating Services, a program of the Vermont Refugee Resettlement Program (VRRP).

- f) The Department of Health was awarded the Vermont Office of Minority Health (OMH) State Partnership grant in the fall 2010. The grant has five major goals:
- Goal 1: Improve data quality, collection, and reporting.
 - Goal 2: Support a diverse and culturally competent public health workforce.
 - Goal 3: Enhance community development and leadership to reduce health disparities.
 - Goal 4: Reduce risk factors leading to chronic disease among racial and ethnic minorities.
 - Goal 5: Enhance Vermont's infrastructure to coordinate disparities elimination initiatives with state and external partners.

The OMH has agreed to contribute \$10,000 to the Young Adult Voice Movement Conference to focus on "Minority" health and youth leadership topics.

2. Problems

A couple of regions have requested to host a CLC training/technical assistance at their sites; however, most of these requests are not necessarily from mental health agencies. New strategies will have to be discussed to ensure that the mental health agencies in the twelve regions become involved in CLC activities and offer/host the training to their staff and community members/partners.

3. Dissemination activities

Because professional development can increase cultural and linguistic competence, the CLC Coordinator created a 3-hour training session: *Cultural and Linguistic Competence Training*. This training was offered three times during this time period:

- HowardCenter in Chittenden County - September 2010 (22 participants)
- HowardCenter in Chittenden County - October 2010 (19 participants)
- UVM Vermont Child Health Improvement Program VCHIP - December 2010 (19 participants)

In the future, this training will be offered to the other mental health agencies and to family and youth serving organizations around the state.

4. Significant Findings and Events

As part of our efforts to increase Cultural and Linguistic Competence in the Vermont System of Care, we are conducting an evaluation of the effectiveness of the CLC trainings (please see section 3 for trainings offered during this time period). 58 participants (of the 60) that attended the CLC trainings completed a pre and a post test. Participants belonged to the following work settings: 25 (43%) from mental health, 17 (29%) from healthcare, 6 (10%) from education, 5 (8%) from substance abuse and 5 (8%) from "other".

Measures: 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.

Results: Data were aggregated and analyzed using chi square tests. Data revealed significant increases in participants' knowledge relating to providers' ability to eliminate their own prejudices or negative assumptions about certain types of clients (21% pre vs. 79% post, $p < .01$) and the difference in net worth between white and black families of similar incomes (53% pre vs. 71% post, $p = .04$). There was a trend towards increased knowledge relating to race identification (33% pre vs. 93% post), genetic variation (24% pre vs. 100% post), and genetic similarity of groups (5% pre vs. 97% post).

Conclusion: Participants in the CLC trainings made changes in their knowledge, attitudes and confidence regarding racial disparities in health and mental health; this knowledge is key for enhancing the Cultural and Linguistic Competence of the Vermont System of Care.

5. Other Activities

Participation in the following trainings/conferences:

- CLC Pre-Institute Intensive Training and conference at the Summer Training Institutes, July 2010, Washington D.C.
- People's Institute for Survival and Beyond (PISAB) Undoing Racism Training, October 2010, Brattleboro, Vermont.
- 21st Annual National Federation of Families for Children's Mental Health Conference, November 2010, Atlanta, Georgia.

The CLC Coordinator also completed two related graduate courses at UVM [not using grant funds]:

- Social Processes and Institutional Change – Fall 2010.
- Advanced Seminar in Organizational Leadership – Fall 2010.

6. Activities Planned for Next Reporting Period

Activities planned for the January 1st- June 30th 2011 period include:

- Participate and/or support the Interpreters' Training-of-Trainers next April/May 2011.
- Continue meeting with the CLC Workgroup "Hands of Friendship"
- Conduct the following CLC trainings already scheduled for this second part of the fiscal year:

STATE OF VERMONT
VERMONT DEPARTMENT OF HEALTH - GRANT AWARD

Page 5 of 11
Grant # 03150-5225

- New England Survivors of Torture and Trauma (NESTT)/Connecting Cultures – UVM College of Psychology, Burlington, Vermont, January 2011
- Vermont Interdisciplinary Leadership Education for Health Professionals (VT-ILEHP) Program – UVM College of Medicine, Burlington, Vermont, February 2011
- Vermont Federations of Families for Children’s Mental Health (VFFCMH), Waterbury, Vermont, March/April 2011
- Two trainings at Northwestern Counseling and Support Services (NCSS), Saint Albans, Vermont, May 2011:
 - Clinicians and Youth In Transition staff
 - Community members
- Submit an abstract proposal for the Youth Workers’ Conference, May 2011
- Submit an abstract proposal for the next Annual System of Care Conference in Chicago, July 2011

SEMI-ANNUAL PROGRESS REPORT

COVER SHEET

1. Grant Number: 03150-5225
2. Grantee Name and Address:
Howard Center, 208 Flynn Avenue, Suite 3J, Burlington, VT 05401
3. Telephone Number: (802) 488-6600
4. Project Title: Culturally-Competent Planning and Leadership for Vermont's Youth in Transition Grant
5. Period of Performance: July 1, 2010 thru December 31, 2010
6. Approved Project Period: July 1, 2010 thru December 31, 2010
7. Period Covered by Report: July 1, 2010 thru December 31, 2010
8. Author's Name and Telephone number: Mercedes Avila – 802-999-4985
9. Date of report: January 22nd, 2011
10. Comments (if any):



Proposal

History:

For the past year, CCCS has been contacted by several non-profit organizations who provide interpreter services or who train healthcare interpreters based on the Bridging the Gap Curriculum. Due to fiscal reasons and new demands by the Joint Commission, experienced trainers from both Maine and Vermont have agreed to consolidate resources and bring consistency to the quality of training. As a group, they would like to be coached on how best to utilize CCCS materials, develop a curriculum and perform student assessments for both medical and mental health interpreters.

Up to now students had a language screening through one of the telephone interpreting companies, but they were not exposed to language coaching sessions during the course. The group of trainers is willing to work towards integrating language coaching into its training sessions. However a problem they face is the lack of enough qualified language coaches in languages of diffusion.

CCCS was asked that trained interpreters need to meet "JACHO" requirements. The Joint Commission has not developed specific requirements for interpreter trainings, but through their ROADMAP for hospitals document, they have made recommendations about interpreter qualifications. CCCS, as a provider of interpreter services, can make some very concrete recommendations on quality assurance and professional development activities that interpreter programs should have.

The group also requested coaching on developing a legal interpreting course. Presently CCCS consultants can provide consultation on the curriculum. CCCS is preparing a manual for legal Interpretation during 2011. For this class, interpreter students will be required to buy audio equipment so they can practice Simultaneous and Consecutive skills with take home role-plays.

CCCS Philosophy:

As professional standards for interpreters evolve, "best in class" training programs are increasing in length and the CCCI Art of Medical Interpretation class will expand from Fifty-four (54) to sixty (60) hours. These additional hours allow for more in depth coverage of topics and more practice time for essential skills. The program targets interpreters at all levels and fosters an environment that gives each individual a measure of control over the learning process. Training sessions focus on interpreting technique, cultural competency, interpreting ethics, mastering medical terminology through the Samurai! Method, developing specialized glossaries and increasing memory power. Learning is measured through role-play and interpreter evaluation tools.

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.

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.
- Assist in the development of homework sheets, four quizzes, as well as oral and written exams.
- Review potential language resources available to assist with homework and student accuracy while in training.
- Understand rationale of teaching pedagogy behind CCCS materials.

Scope of Work and Schedule:

Day One:	Knowledge Based
1. Defining a qualified interpreter according to The Joint Commission and Interpreter Associations	
2. Understand Trainers’ past experiences and identify areas that may require room for improvement as to best reflect current industry standards of training interpreters	
3. Understanding and applying the teaching pedagogy behind CCCS materials. CCCS will go over manuals and recommended videos and their purposes as teaching tools	
4. Review of Language Coaches and attempt to still meet Budget Restrictions	
Day Two:	Application of Knowledge
5. Work on course pre- requirements	
6. Work on curriculum development	
7. Work on quizzes, homework and final oral and written exams	
8. Review grading and student rubrics	
9. Go over answers to manual with a pedagogic application	

Responsibilities:

Trainers Group:	CCCS:
<ul style="list-style-type: none"> • Will provide the space and resources for the training • Each trainer will own manuals and recommended videos • Will keep confidential information in this proposal and during training • When advertizing course, Trainers Group may use CCCS manuals and refer to their titles, but CCCS reserves the right to use The Art of Medical Interpretation title only for our trainings • Will keep updated with Federal, state and industry policies and laws • Will respect and follow copyright laws for all materials shared by CCCS for the courses 	<ul style="list-style-type: none"> • Agrees that all materials created and developed by CCCS, Inc. can be used by trainers group only for non-commercial purposes. CCCS, Inc. will be able to use all materials for commercial purposes • Will be available for up to 2 hours for consulting purposes at no additional cost for up to one year after work has been completed • Will prepare handouts for each Goal and will facilitate coaching activities for the two days • will review and comment on materials created by Trainers group if submitted within a reasonable time frame for no more than two hours total • will provide one primary trainer Zarita Araujo-Lane or Vera Duarte Outeiro • Is not responsible for the quality of the trainings offered by the Trainers Group

Additional services:

CCCS, Inc. can provide a translation of role-plays and glossaries for some languages at a discounted rate on an as needed basis.

CCCS, Inc. is also able to provide exit screenings over the phone or via remote video conferencing in the some of the student’s target language at a discounted price

CCCS, Inc. will be available for on-going professional development for staff interpreters at an agreed price per on-line training

CCCS, Inc. will assist with Legal course and curriculum development for an additional fee

Schedule:

CCCS has agreed to provide a total of 14-hours of face to face consultation at an appropriate site provided by the Trainers Group. Training will be conducted on a Saturday and Sunday from 9:AM-5:PM with one hour lunch breaks and short bathroom breaks during the morning and afternoon sessions

We have agreed on two tentative weekends for April ____ and May _____

Budget

Consultation Services: CCCS will provide Interpreter training the trainer consultation for up to 16 hours, involving one full weekend of 7 hours each day of direct face to face consultation and a telephone or e-mail follow-up consultation of up two hours for year 2011.

Services	Total of Hours	Hourly Rate	Sub-Total
Consultation Services	16	\$120.00	\$1,920.00
Gasoline for round trip			\$120.00
Hotel and food	Up to three nights	\$ 150.00 per night for room \$100.00 for food	\$550.00
Travelling time for round trip for	Up to 8 hours	\$80.00	\$640.00
Preparation time and Handouts	Up to 5 hours	\$80.00	\$400.00

Grand-Total: \$ 3, 630.00

Staff and Institutional Qualifications:

Cross Cultural Communication Systems, Inc. (CCCS), is a SOMWBA and M/WBE and DBE certified company in Massachusetts and New Hampshire. Its mission is to improve communication with LEP and non-English speakers by implementing cultural-linguistic services in health care, educational and legal institutions.

Cross Cultural Communication Systems, Inc. (CCCS, Inc.) was founded in 1996. Its president, Zarita Araújo-Lane, holds Bachelor's degree from the University of Massachusetts in Human Services and a Masters degree from Simmons College, School of Social Work.

Zarita has over two decades of experience working with cross-cultural populations in medical and mental health institutions, as well as designing, implementing and supervising interpreter programs. She began her career as an interpreter service coordinator by starting one of the first medical interpreter programs in the country at *Cambridge Hospital* in Massachusetts.

She was the director of a mental health cross cultural team for over ten years at Health and Education Services in the North Shore area. She has published articles on Cross Cultural Management including a chapter written in 1996 and 2005 on "Portuguese Families" for the book, Ethnicity and Family Therapy by Monica McGoldrick, second and third edition. She has authored multiple articles for the American Translation Association on Medical Interpretation, and she is the main writer for a column in the ATA Medical Division Newsletter called Interpreters at Work.

Ms. Araújo-Lane has spent the last twenty years presenting, training, and providing consultation services to a diverse customer population, including government human services departments, health care agencies and privately owned companies. She has taught Portuguese Medical Interpretation at Bentley College in Waltham, Massachusetts, and Cross Cultural Communication in the Context of Medical Interpreting at Cambridge College in Cambridge, Massachusetts.

Ms. Araújo-Lane has also developed CCCS, Inc.'s successful training programs and expanded them to include classes in Kentucky and New Hampshire. A prime example is the 24-hour *Basic Medical Training Program* for the State of New Hampshire refugee communities. Another popular CCCS, Inc. training program is the 60-hour *The Art of Medical Interpretation* training program for medical interpreters.

Ms. Araujo-Lane has also designed and assisted with the implementation of two healthcare interpreter programs for Cambridge Rindge and Latin High School, in Cambridge, Massachusetts, and Brockton High School in Brockton, Massachusetts.

Cross Cultural Communication Systems, Inc. is a corporate member of professional associations such as the American Translation Association (ATA), Massachusetts Medical Interpreters Association (MMIA), American Society for Training & Development and New England Translators Association (NETA). CCCS, Inc. is also proud to belong to NHITO (New Hampshire Interpreters and Translators Organization) and CHIA (California Healthcare Interpreters Association) and National Council on Healthcare Interpreters (NCHIC).

Vera Duarte Outeiro, Primary Medical Interpretation Instructor at CCCS, Inc., holds a BA and MA in Foreign Language Education from Portugal and a MA in Applied Linguistics from the University of Massachusetts. Vera is certified by the Massachusetts Department of Education to teach ESL to grades 5-12. She currently teaches a course that addresses issues of minority students and academic achievement. She also teaches ESL, World Literature, and Medical Interpretation at Cambridge Rindge and Latin School in Cambridge, MA. She is a native speaker of Portuguese. She also speaks Spanish and French fluently. For the past three years, Vera has been involved in designing, developing, and implementing curriculum at CCCS, Inc. She was the main force behind the manual The Art of Medical Interpretation, 3rd Edition.

Dr. Richard S. Lane is an Internist in the Extended Care Facility Program at Harvard Vanguard Medical Associates of Boston, Massachusetts. He has a Masters degree in Education and he is a bilingual educator, fluent in Spanish. Dr. Lane's interests are the doctor/patient relationship, teaching interview skills to medical students and residents, cross-cultural communication in medicine, care of elderly patients in rehabilitation and sub-acute units, palliative medicine and hospice care at end of life. Dr. Lane became board certified in Palliative Care and Hospice Medicine in 2005. He is one of the main writers of the role-plays for CCCS, Inc.

Minority Status

CCCS, Inc. is certified as a Disadvantaged Business Enterprise (DBE), having been assigned sic code 8742 by the Commonwealth of Massachusetts. CCCS, Inc. has also been certified as a Minority/Woman Owned Business Enterprise (M/WBE) by the states of Massachusetts and New Hampshire.