

CALIFORNIA REDUCING DISPARITIES PROJECT –LATINO FOCUS COMMUNITY FORUM

LOS ANGELES

Abril 30, 2011

CONDADOS ♦ LOS ANGELES ♦ SAN DIEGO

Participants of the Mesas de Trabajo

This Southern California “Mesas de Trabajo” (working group) meeting was represented by participants from the counties of Los Angeles and San Diego. A total of 32 individuals self-identified as Latino LGBTQ attended the Mesas de Trabajo and represented various groups including consumers, family members, service providers, mental health programs, ethnic service managers and community based organizations.

Structure of the Focus Group Discussion

The process initiated by organizing the group in six Mesas de Trabajo. Each Mesa was instructed to address one strategy. The six strategies were produced by the Latino Behavioral Health Institute and UC Davis Center for Reducing Health Disparities. In order to facilitate the group process, each strategy had also recommended discussion points. Each Mesa was asked to identify a chair, a note taker and a recorder. They were provided with a flip chart and a computer to document their recommendations on the assigned strategy. Once all recommendations were posted, the group proceeded with an individual voting process of the top strategies. They used color dots to prioritize the list (the value for each color was 4, 3, 2 and 1 for red, green, yellow and blue respectively). At the end of the session, each Mesa selected a spokesperson who would present their recommendations to the forum participants.

The forum started with opening responses from the forum participants to the question: If you could make 1 thing happen in Mental Health that would benefit Latino LGBTQ, what would it be?

- All mental health providers would be trained to work with the LGBTQ community.
- More psychiatry education for primary care providers.
- Provide counseling to young LGBTQ Latinos in deciding how to come out.
- Being culturally and linguistically competent.
- Providing resources for LGBTQ youth that are kicked out from their homes.
- More on “gay life education” at the high school level.
- Provide more support and awareness to families of LGBTQ youth who lack the knowledge and understanding of ways in which they can support their LGBTQ youth.
- Support LGBTQ youth as they transition into living as an LGBTQ.

- Improve specialization within mental health providers of working with the LGBTQ community.
- Avoid language that is heterosexual and hurtful.
- More familiarization with LGBTQ life experiences.
- Understand dynamics of each LGBTQ (e.g., “masculine-centered” vs. feminine-centered”)
- Continue the dialogue about LGBTQ issues.
- Media campaign and outreach services.
- More outreach to schools.
- Enhance awareness education in schools.
- Increase education to parents (e.g., parenting workshops).
- More outreach services for youth.
- Reduce stigma.
- Focus on mental health prevention services oppose to reacting after the fact.
- For example, more education and training improving LGBTQ youths’ self-esteem.
- Normalizing LGBTQ by increasing school’s awareness and demanding that LGBTQ topics be a part of school curriculum. No one talks about it in schools.
- Assist parents and family with counseling so that they are fully informed and know how to approach and work with their LGBTQ youth.

The following section will describe in detail, which were the top priorities for each group in their designated strategy.

STRATEGY 1

Strategies for increasing treatment participation of Latino LGBTQ by reducing individual and community barriers to care

- PRIORITY #1 POSITIVE MEDIA REPRESENTATION
- PRIORITY #2 MANDATE LGBTQ TRAINING FOR EXISTING/FUTURE WORKFORCE
- PRIORITY #3 INCREASE FAMILY AND COMMUNITY SUPPORT FOR LGBTQ YOUTH IN SCHOOLS
- PRIORITY #4 PARENTING CLASSES/TRAINING FOR PARENTS WITH A CHILD COMING OUT

I. POSITIVE MEDIA REPRESENTATION

- Having more information through Spanish TV channels that connect with children so that they are better informed to shape their perceptions.
- Providing LGBTQ youth with more education and a supportive environment.
- One way to lessen the fear of talking about LGBTQ issues is to team up with other well attended activities (e.g., Cinco de Mayo) so that people see the LGBTQ community as being “normal.” This can help in dealing with stigma.
- LGBTQ groups and information tables should not be isolated or moved to an isolated corner to avoid offending others.
- Develop positive media images of LGBTQ e.g., “novelas” (soap opera) always have a gay character who is often flamboyant with feminine traits. This does more harm than good.

II. MANDATE LGBTQ TRAINING FOR EXISTING/FUTURE WORKFORCE

- Train teachers and school administrators so that they know how to work with children who may be dealing coming out issues.
- Focus on providing support to the LGBTQ patient.
- Train and retrain providers. LGBTQ lack resources (e.g., meds) because providers are trained to follow a protocol that often leads to poor services for LGBTQ.
- Ensure that health providers are properly trained.
 - o Mandate training on LGBTQ and mental health issues.
 - o Promote diverse resources and ensure follow-up sessions with LGBTQ who don't return for services.

III. INCREASE FAMILY AND COMMUNITY SUPPORT FOR LGBTQ YOUTH IN SCHOOL

- Provide counseling for LGBTQ youth who come out.
- Family plays a vital role in helping LGBT find his/her role as a LGBT and also as a family member.

- LGBTQ and those that come out feel ignored and just like any other youth who lacks support joins a gang, an unsupported LGBTQ youth is also more likely to seek support and attention from others outside of their family.
- Focusing less on traditional attitudes and more focus on a supportive culture that creates awareness.
- Latino LGBTQ should not go out of his/her way just to avoid making their parents/families uncomfortable, what about how we feel?
- Introduce LGBTQ issues to churches and spiritual leaders. Embrace, LGBTQ issues as an important topic and begin a dialogue.
- Promote the benefits of connecting with (LGBTQ) people within the Latino community; encourage exploring other networks even non-LGBTQ.
- We need a One-Stop Resource Center where all LGBTQ needs are met.
 - o These one-stop centers can also help parents of LGBTQ youth to start the conversation. But more important is the “How to put knowledge into practice?”
 - o These centers can help change the Latino culture way of thinking “just pray and it’ll go away.”
- Incorporate LGBTQ school/program portfolios on the LGBTQ population being served.
- Work with post-secondary colleges and universities and engage them to work with LGBTQ community-based organizations to raise awareness.
- Improve sex education in schools. Sex education in schools is not adequate.
- Health Services for LGBTQ individuals should be mandated, especially in public schools.

IV. PARENTING CLASSES/TRAINING FOR PARENTS WITH A CHILD COMING OUT

- Change family culture to be less traditional and more open to alternative practices in relationship to mental health issues and LGBTQ.
- Do more to encourage self-development and enhancing self-esteem in the LGBTQ person.
- Less emphasis on making parents uncomfortable and more emphasize on the wellness for the LGBTQ person.

STRATEGY # 2

Strategies to increase treatment participation by improving access to existing programs and services

PRIORITY #1 USE SOCIAL NETWORKING MEDIA

PRIORITY #2 RAISE AWARENESS OF SERVICES

PRIORITY #3 OFFER PROGRAMS IN SCHOOLS

PRIORITY #4 BE CULTURALLY COMPETENT

I. USE SOCIAL NETWORKING MEDIA

- Use social media to bring awareness to LGBTQ issues such as Facebook.
- Use Facebook to get the voice out about services.

II. RAISE AWARENESS OF SERVICES

- Clients need to feel comfortable when accessing services. The YMCA and Planned parenthood have good confidential protocols.
- Create programs that have 'YMCA' characteristics.
- Use word of mouth as a promotional tool to get to organizations that provide services. Have one-on-one conversations instead of just preaching if we want to attract consumers to receive services.
- Have social events where HIV awareness is provided.

III. OFFER PROGRAMS IN SCHOOLS

- Have an after school program for certain age groups that can connect with other people in their same situation.
- Educate about diversity especially when working with a specific community.

IV. BE CULTURALLY COMPETENT

- Have yearly training course on how to handle certain situations.
- Diversity should include different cultures, sub-cultures and the definition of what is a Latino.

STRATEGY # 3

Recommendations for new programs and modification of service delivery to increase participation

PRIORITY #1 MEDIA CAMPAIGN THAT FOCUSES ON STIGMA FOR LGBTQ

PRIORITY #2 OUTREACH TO COMMUNITIES

PRIORITY #3 EDUCATION AND OUTREACH FOR LGBTQ

PRIORITY #4 PREVENTION, EDUCATION AND SUPPORT SERVICES

I. MEDIA CAMPAIGN THAT FOCUSES ON STIGMA FOR LGBTQ

- “I went to a therapist for domestic abuse and when I she came out to the therapist, the therapist said ‘so what if you are gay’ when she told my parents, they told me to get out the house.”
- Therapist need to understand how to help LGBTQ individuals become more accepting of who they are. Increase their self-esteem.
- Provide LGBTQ with the support and techniques to engage their family when they come out this will minimize depression and suicidal thoughts/attempts.
- People are influenced by information they get from TV, radio, Internet or friends or social media.

II. OUTREACH TO COMMUNITIES

- “Bienestar”¹ and “Altamed”² are successful programs because they outreach to schools and staff from these programs attend Service Planning Area (SPA) meetings where all agencies come together on a regular basis and discuss issues surrounding the communities. Should be adapted to include LGBTQ issues.
- Increase awareness about mental health services and HIV prevention. “When I came to LA I did not know where to go for mental health services or get tested.”
- There needs to be a way for people who are coming out be well informed. Coming out for an individual is when they are most vulnerable.
- Networking with others increase shared resources.
- Focus on churches that are already working with the LGBTQ community and build upon them.

III. EDUCATION AND OUTREACH FOR LGBTQ

- Go into schools and integrate mental health and LGBTQ topics and resources available for LGBTQ. Include LGBTQ as a topic in the sex/health education.

¹ BIENESTAR provides culturally and linguistically appropriate programs to the Latino community. BIENESTAR understand how important culture intertwines with HIV. Most importantly, our programs speak directly to the need of each community.

² AltaMed ELA to eliminate disparities in health care access and outcomes by providing superior quality health and human services through an integrated world-class delivery system for Latino, multi-ethnic and underserved communities in Southern California.

- “The Wall-Las Memorias Project”³ have been successful in outreaching to churches and to the Latino community to educate about HIV/AIDS.
- Use a “Train-the-Trainer” approach to increase capacity.
- Build upon SB71⁴, a law that just passed requiring public school to include LGBTQ topics in instruction/curriculum.

IV. PREVENTION WITH EDUCATION AND SELF-ESTEEM

- Create a novela (soap opera) with a character who lives with HIV/AIDS and is enjoying life with treatment. HIV/AIDS does not mean a death sentence. Latinos still think if one has HIV/AIDS they will die.
- Develop a story line that properly reflects a real LGBTQ Latino (free of stereotypes).
- Community providers need to be educated on use of language and the LGBTQ terminology. They need to be better equipped to help someone who is questioning or getting ready to come out. There needs to be specialization in treating LGBTQ consumers.
- Identify and work with schools that have the highest LGBTQ suicide rates.
- Develop LGBTQ symbols that can be placed in the window or in their waiting rooms that convey to the consumer that agency is LGBTQ friendly.

³ *The Wall - Las Memorias Project is dedicated to promoting wellness and preventing illness among Latino populations affected by HIV/AIDS by using the inspiration of The AIDS Monument as a catalyst for social change.*"

⁴ Previous law required classes to discuss abstinence from sexual intercourse, a heterosexual focus that excluded LGBT youth. SB 71 changed the language to make it more inclusive. Now, in grades 7-12, sexual health education must teach the value of abstinence from sexual intercourse in preventing pregnancy and the value of abstinence from sexual activity in preventing sexually transmitted diseases. SB 71 also requires that all instruction and material be appropriate for use with students of all races, genders, sexual orientations, ethnic and cultural backgrounds, and students with disabilities.

STRATEGY # 4

Recommendations for new programs and modification of service delivery to increase retention in services and reduce dropout

PRIORITY #1 MARKETING CAMPAIGN TO EDUCATE PEOPLE

PRIORITY #2 DIVERSITY AND FOLLOW-UP SERVICES

TRAIN DOCTORS TO BE MORE EMPATHETIC

PRIORITY #3 ASSESSMENT TO ENSURE PROPER TREATMENT

PRIORITY #4 INCREASE RELATEDNESS

I. MARKETING CAMPAIGN TO EDUCATE PEOPLE

- Create a social marketing campaign to reduce the stigma and promote the benefits of mental health programs.
- Develop online community resource page webpage and printed materials.
- There is no mechanism for Latino LGBTQ to access LGBTQ friendly services.
- Alcohol and substance abuse hinders consumers from maintaining a schedule.
- Engage faith community leaders and other community stakeholders in promoting mental health.

II. DIVERSITY AND FOLLOW-UP SERVICES

- Offer holistic approaches and other wellness activities.
- Doctors who are not LGBTQ or LGBTQ sensitive –lack understanding and are uncomfortable treating an LGBTQ consumers.
- Show Empathy.
- Offer incentives for them to return to receive services.

III. ASSESSMENT TO ENSURE PROPER TREATMENT

- Doctors need to better assess the consumer so the individual may be placed in the right program that is culturally and linguistically sensitive and therapeutic.
- Develop an individual plan of action for each client.

IV. INCREASE RELATEDNESS

- Have role models and celebrity spokespersons.
- Therapists and doctors need to be more personal with the client. Show more feelings and be understanding. Have more of a personality.

STRATEGY # 5

Recommendation for new programs and modification of existing services to improve successful treatment outcomes (other than retention)

PRIORITY #1 STRATEGIES ON HOW TO COME OUT TO FAMILY

PRIORITY #2 LGBTQ COMPETENT MENTAL HEALTH PROVIDERS

PRIORITY #3 SAFE SEX EDUCATION

PRIORITY #4 AFFORDABLE HEALTH CARE FOR ALL LGBTQ

I. STRATEGIES ON HOW TO COME OUT TO FAMILY

- Offer a class or discussion on how to be able to come out to friends or family members.
- Training for parents. They have a misconception of gays because of what they see in the media.
- Offer a class or workshop for the family on how to deal with the aftermath as a result of a family member coming out.
- Develop rejection therapy as well as dealing with denial.

II. LGBTQ COMPETENT MENTAL HEALTH PROVIDERS

- Develop educational material that compliments LGBTQ language, (be sensitive on how to address issues, have understanding that there are fem lesbians and butch lesbians etc.).
- Provide mental health service for transgender individuals so the provider can guide them through the process.
- The mainstream organizations like APLA⁵ should hire Latino staff that the Latino communities can identify. Give more money to Latino clinics who are providing services to the Latino LGBTQ communities because they already are culturally and linguistically competent.
- Provide therapy to deal with rejection and denial of self-acceptance and provide family counseling.

⁵ AIDS Project Los Angeles (APLA) is dedicated to: improving the lives of people affected by HIV disease; reducing the incidence of HIV infection; and advocating for fair and effective HIV-related public policy

III. SAFE SEX EDUCATION

- Develop education material in the Latino community on “how Men who have Sex with Men (MSM) can have safe sex,” “how lesbians can have safe sex” Because many partners are bisexual, they need to protect themselves against Sexually Transmitted Diseases (STDs) and HIV/AIDS.
- Integrate LGBTQ in sex education classes in high school.
- Increase educational materials on self-acceptance as an LGBTQ individual.

IV. AFFORDABLE HEALTH CARE FOR ALL LGBTQ

- Affordable programs/healthcare for LGBTQ.
- Fund a clinic that is affordable in a Latino community (LGBTQ-LATINO competent) –Ensure that physicians deal with all medical and mental health aspects.
- Develop an LGBTQ White coat health card.

STRATEGY # 6

Strategies for design of effective approaches to the evaluation of implemented recommendations

PRIORITY #1 QUALITY OF CARE PLAN SPECIFIC TO LGBTQ

PRIORITY #2 PRE-TEST AND POST-TEST (DIVERSE) METHODS WITH FOLLOW-UP

PRIORITY #3 USER FRIENDLY SURVEYS SPECIFIC TO LGBTQ COMMUNITY

PRIORITY #4 ADVISORY BOARD MADE UP OF LGBTQ

I. QUALITY OF CARE PLAN SPECIFIC TO LGBTQ

- Be friendly.
- Providers should be aware of LGBTQ and Latino culture.
- Quality of care is equal to quality of service.
- Have an individual survey the Latino LGBTQ community to understand their needs.
- Educate staff to be sensitive and treat patient with respect.
- Obtain feedback from community before implementation of services.
- Include family, significant others in care and treatment plan.

II. PRETEST AND POST-TEST METHODS WITH FOLLOW-UP

- Provide Pre and Post evaluation about services- follow up in timely manner.
- Design best practices modeled towards the LGBTQ community.
- Tracking referral system for consumers.
- Comprehensive evaluation with integrated treatment process. Structure out benchmarks to progress.
- Shorter but comprehensive assessment to fulfill needs of patient.

III. USER FRIENDLY SURVEYS SPECIFIC TO THE LGBTQ COMMUNITY

- Create program that involve Latino and LGBTQ community.
- Develop program that in capsules the Latino community.
- Create an assessment of how many therapists in the community are Spanish speakers.

IV. ADVISORY BOARD MADE UP OF LGBTQ

- Form a Latino LGBTQ advisory board composed of different members of the community and not just community based organization.
- Adaptation and or creation of comprehensive evidence based mental health interventions for LGBTQ Latino community.
- Advocate for inclusive policies that address the specific needs of LGBTQ Latino communities so that there are appropriate resources.

Table 1. The six strategies and guiding points provided for each group

<p>1. Strategies for increasing treatment participation of Latino/a LGBTQ by reducing individual and community barriers to care.</p> <ul style="list-style-type: none"> • Ideas on reducing stigma (community and individual education) • Increasing workforce appropriate to Latinos at all levels (training and education) • Increasing family and community support • Suggest MH programs that are appropriate for Latinos • Suggest approaches to community outreach and engagement • Other ideas
<p>2. Strategies for increasing treatment participation by improving access to existing programs and services for Latino/a LGBTQ</p> <ul style="list-style-type: none"> • Ideas on how to increase treatment participation • Ideas on how to improve access to existing programs • Suggestions on programs that are proven to be successful with Latinos • Suggestions on culturally appropriate workforce development (training and education) • Other ideas
<p>3. Recommendations for new programs and modification of service delivery to increase Participation of Latino/a LGBTQ</p> <ul style="list-style-type: none"> • Ideas on new programs that should be offered to increase participation • Ideas on modification of existing programs to increase Latino participation • Ideas on programs that have proven to be successful in serving Latinos • Other ideas
<p>4. Recommendations for new programs and modification of service delivery to increase retention in services and reduce drop out for Latino/a LGBTQ</p> <ul style="list-style-type: none"> • Ideas on how to reduce dropout rates • Ideas on how to modify current programs to reduce dropout rates • What new programs should be offered to reduce dropout • Other ideas
<p>5. Recommendation for new programs and modification of existing services to improve successful treatment outcomes (other than retention) for Latino/a LGBTQ</p> <ul style="list-style-type: none"> • Ideas on modifying existing programs to increase treatment outcomes • Ideas on new programs that would increase treatment outcomes • Other ideas
<p>6. Strategies for design of effective approaches to the evaluation of implemented Recommendations for Latino/a LGBTQ</p> <ul style="list-style-type: none"> • Ideas on how to evaluate individual quality of care • Ideas on how to evaluate complementary interventions • Ideas on how to evaluate programs serving Latinos • Other ideas