

Minimizing Disruptions in Care

Behavioral Telehealth (Video and Phone): Skill Development Webinar Series Questions & Answers

Effective Telehealth When Working with Communities of Color

Webinar 12: July 15, 2020

Question	Answer
Will the panel be addressing how to work with children of Color?	Thanks for the question. Yes, this was briefly discussed in the webinar. Working with children of color might include: Racial and Ethnic Socialization (RES) to help children and their families cultivate pride in their race/ethnic roots; and also help prepare them for prejudice/bias. One also needs to be prepared to assess for and potentially intervene with racial trauma and use culturally-adapted interventions (e.g. culturally adapted TF-CBT , kids narrative exposure therapy). Check the resources that Dr. Rubio provided in the slides.
Could the question Dr. Gloria ask her clients about "what have you done to get here" be typed here? That was powerful.	Thank you. I often say to my patients, "with everything you have been through, please tell me what has helped you to survive...because I want to bottle it up and sell it.
Dr. Morrow, do you have any podcasts you lead or facilitate? Would love to continue to hear you speak and inform us. :)	Thank you. Yes. Please like my Facebook page, A Brand New Me with Dr. Gloria. I share my videos there and have a Monday morning show at 7am PST. You are welcome to visit it. I am also facilitating a session on Building the Beloved Community Through Cultural Humility. Please visit thekingcenter.org to sign up for my cultural humility session in August. Thanks again.
Should clinicians bring up the topic of racism with our patients or just be willing to discuss if they bring it up?	Thank you. Clinicians should wait for patients to bring this topic up and be willing to discuss it.
Dr. Rubio, Can you please send the spelling of the dr. you mentioned. Sounded	Thanks for the question. Dr. Joy DeGruy and here's her website: https://www.joydegruy.com/

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like you said, Dr. Choy DeCrue?	
What do you recommend for our elderly who have a deeper stigma associated with mental health due to previous bad experiences and are also limited with their medical issues along with all the barriers you have mentioned?	Thank you. It is important to spend time developing the relationship. Elderly people really appreciate it when younger people ask them for their preferences, I.e., "What would you like me to call you? "Some elders do not wish to be referred to by their first name. That is a starting point towards building respect and trust. Also, you can ask about their prior experiences and assure them that you will be different.
I would like to learn how to work with someone who is a different ethnicity and has distrust in mental health providers. What are key words I can use to build rapport.	Thank you. You can demonstrate an understanding of what they may have experienced in the past and validate their concerns. It is difficult to apologize for the bad behaviors of others but let them know you are here to learn how to best serve them and let them know they are the best teachers. Once they see you are teachable, they will build trust with you.
We work with youth. Telehealth has been difficult. What are ways that we can discuss this with our younger youth in session? is this appropriate if they don't bring it up?	Thanks for the question. If you referring to having race conversations and/or discussing about racism with younger youth, I recommend starting with bibliotherapy. Carefully choose books that prime these conversations with children and/or younger youth. You can refer to guidelines and books by APA's RESilience ; Embracerace ; Social Justice Books ; Charis Books and More . A personal favorite is Something Happened in Our Town: A Child's Story About Racial Injustice . Many youth might not bring it up because they have been socialized not to talk about it outside the family. Consider reflecting on: Talking With Children About Racism, Police Brutality and Protests (from Aha! Parenting.com). This includes developmentally appropriate guidelines on how to facilitate these conversations with toddlers, preschoolers, school-age kids, tweens, and teens. Referenced here is the infographic on They're Not too Young to Talk about Race .
Dr Morrow: What suggestions would you have for engaging	Thank you. Training is the key. Perhaps you can gently push your leadership for additional training opportunities for team building and developing cultural humility. When attempting to

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<p>other clinicians in the team approach you advocated? Professionals are also struggling to adjust and resilience seems to be at a premium... on a peer to peer basis, any suggestions for opening the conversation about the need to consider our own learning process for successful engagement with our clients?</p>	<p>build a team, everyone has to know they are valued and needed in the team. So that would be my second suggestion, find ways to value your colleagues and they will want to become part of the team to help those you serve.</p>
<p>What a cool glove to show the impact of trauma on the brain. Where can one find that?</p>	<p>Amazon sells them: https://www.amazon.com/Handy-Brain-Model-small-adult/dp/B01A3DIRVM.</p>
<p>Can this speaker talk specifically about how or where to find Black providers?</p>	<p>There are a few sites; Psychology Today (online website); ABPSI (Association of Black Psychologists), and therapy for Black Girls https://providers.therapyforblackgirls.com</p>
<p>I heard within the last few months about how schools in Sausalito were still using segregationist practices. Can the speaker talk more about this and if this is being addressed?</p>	<p>In August 2019, the AG of California ruled that the SMCS D was operating a segregated school at BMLK. In his findings, he pointed to the district's financial support (beyond what is required by law) of Willow Creek Academy in Sausalito as a contributing factor to why BMLK in Marin City had become segregated. BMLK is nearly 100% students of Color. The SMCS D and WCA Boards have been working for the past 12 months on unifying both schools. Unification will likely occur in the fall of 2021.</p>
<p>Can I please get the author name for the "Cultural Adaptations" that Dr. Rubio referenced? (It's a little too small to see in the slide and I missed it when he mentioned it). Thanks!</p>	<p>Cultural Adaptations: Tools for Evidence-Based Practice With Diverse Populations (Edited by Guillermo Bernal, PhD, and Melanie M. Domenech Rodríguez, PhD). Find here a good introduction.</p>
<p>Where can we purchase the brain glove?</p>	<p>Amazon sells them: https://www.amazon.com/Handy-Brain-Model-small-adult/dp/B01A3DIRVM.</p>

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<p>What is the name of the sandtray app?</p>	<p>1. https://www.sandtrayplay.com/ 2. https://simplysandplay.com/</p>
<p>Could you talk about seniors of Color and some resources to share with them for coping with these events.</p>	<p>Culturally responsive psychotherapy as well as linking them with community organizations in their community such as "sister circles, etc. " Visit the California Black Women's Health Project cabwp.org for resources on sister circles in both northern and southern California.</p>
<p>Is it true when children experience trauma as a child it usually carries on into adulthood and the issue usually gets worse, resulting in drug abuse, suicide, sexual abuse if they do not continue to receive treatment?</p>	<p>It is very possible that childhood trauma leads to many issues in adulthood without treatment and healing. This is the major finding of the ACES questionnaire. A good summary is found here: https://acestoohigh.com/got-your-ace-score/. California is pushing for a universal screening of ACES as a way to prevent and/or mitigate consequences of trauma into adulthood. Beyond ACES, the proposed measure called PEARLS, captures ongoing and complex trauma experienced by communities of color (e.g. community violence, poverty, racism, etc.).</p>
<p>I wanted to know if there are any ways to access cultural training's mentioned by Dr. Morrow?</p>	<p>Please feel free to contact me at dr_gloria_morrow@msn.com and I will send you the list of trainings that are coming up.</p>
<p>What telehealth platform(s) have shown to be the best for multicultural communities, i.e. easiest to access, free, etc.</p>	<p>There's still a dearth of studies that address what platforms are most effective in engaging and helping communities of Color. But in case you are exploring the integration of apps into your work with communities of Color, here's an article. PsyberGuide also gives good reviews of apps including one for working with Black/African-American clients.</p>
<p>I am an African-American Transgender identified person and would like to know "how and when" do these trainings include the Black transgender community/clients.</p>	<p>Thank you. This training was more specific to telehealth and more broadly covered some of the barriers and factors to consider for communities of Color. However, all the cultural competency trainings I facilitate include your community. This is a great recommendation for inclusion in future trainings. Thank you.</p>
<p>Can you define BIPOC?</p>	<p>BIPOC stands for Black, Indigenous and People of Color. July has been proposed to be BIPOC Mental Health Month. Here's</p>

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	<p>a good place to read more: https://www.mhanational.org/bipoc-mental-health</p>
<p>Maria Rea: What efforts are going on in Marin City to support the African American Community? Do residents have access to Culturally sensitive Therapist, i.e African American male therapist? How are the Mental Health needs of the African American community in Marin City being met?</p>	<p>Addressing the mental health needs of African Americans in Marin City has been a long-standing area of need. BMLK and the Marin City Wellness Clinic offer mental health services with a focus on culturally sensitive therapy. The Center for Domestic Peace also offers services to members of the Marin City community. The providers are diverse in race and professional experience. Marin County BHRS provides over 200k annually in funding for mental health supports at Bayside MLK and additional dollars are being allocated in the next MHSA 3-year plan to fund Community Health Advocates in Marin City.</p>
<p>What about the term People of Color. As a Chichimeca person myself, I find the term offensive. The historical context of melanin endowment is one that needs holistic approaches. However, I find the term divisive. Many times when I share this POV I am censored or asked to understand, how would you respond to someone with a similar POV?</p>	<p>Thank you for sharing. There's a recent shift from People of Color to BIPOC (Black, Indigenous and People of Color). The other two letters, for Black and Indigenous, were included in the acronym to account for the erasure of Black people with darker skin and Native American people, according to Cynthia Frisby, a professor of strategic communication at the Missouri School of Journalism. A good history can be found here: https://www.nytimes.com/article/what-is-bipoc.html.</p>
<p>I know people throughout the presentation mentioned clients not being able to have privacy in the their home with telehealth, what's the difference when they bring siblings to the sessions?</p>	<p>Thank you. I think it is difficult in either situation because of the need for the client/patient to be able to express themselves freely. However, telehealth may be a little bit more difficult because when an individual brings their children/siblings with them, the therapist can sometimes help to distract them by giving them something to do. That may not always happen when a person is trying to engage in a session via telehealth.</p>

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<p>How do we educate or have conversations with coworkers or clients who have underlying racism/racist beliefs? It feels very uncomfortable at times.</p>	<p>Thank you. Perhaps asking your colleagues to join you in watching a short video during lunch and then discussing it may accomplish the goal. However, some people have no desire to abandon their beliefs.</p>
<p>Do you have any good ways to specifically learn about our client's cultural experience? I often find clients saying "I don't have a culture" because their culture feels so normal in their life that they don't even identify it as a part of their culture. Thanks!</p>	<p>Thank you. Sometimes we have to educate our clients to think of culture in other ways. For example, a person may not see themselves as a cultural being, but they belong to a quilting circle. That is a culture. I simply ask my clients/patients, please share any part of your story that you wish me to know about. That's where I learn about their culture.</p>
<p>What are your thoughts on agencies developing "agency specific" apps for phones for clients to log on, find their information and schedule appointments?</p>	<p>Despite the relaxation of HIPAA rules with this COVID-19 crisis, agency-specific apps need to be HIPAA compliant and have end-to-end encryption. Relevant HHS guidelines can be found here: https://www.hhs.gov/hipaa/for-professionals/privacy/guidance/access-right-health-apps-apis/index.html</p>
<p>This question is for Dr. Morrow. How do you support the Black community and letting them know it is ok to ask for help via telehealth with the racial injustice and COVID hitting the Black community so hard?</p>	<p>Thank you. I do a lot of education in my community, through the Black church, organizations, agencies, and even on my social media platform. I have been on a Zoom call doing presentations since these pandemics have taken us hostage because of the need to educate people so they can get the help they need.</p>
<p>Can you briefly explain post traumatic slave syndrome?</p>	<p>Post-Traumatic Slave Syndrome describes the multi-generational trauma experienced by Black/African-Americans that leads to undiagnosed and untreated post traumatic stress</p>

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	<p>disorder (PTSD) in enslaved Africans and their descendants. This was theorized by Dr. Joy DeGruy here: https://www.joydegruy.com/post-traumatic-slave-syndrome</p>
<p>How do you help a CLT who is diagnosed with a mental illness and the CLT can't speak about sx's or safety due to having family members listening to the session?</p>	<p>Thanks for your question. This calls for a lot of flexibility from the clinician and tele-adapt ways for the client to be able to talk about their mental health needs. If finding a private space is not an option, ask the client to communicate via chat in a video conference platform. You can ask the client to wear headphones so they can listen to you more privately. Have a psychoeducation session with the family members on the importance of privacy in helping the client.</p>
<p>What sandtray apps do you recommend?</p>	<p>3. https://www.sandtrayplay.com/ 4. https://simplysandplay.com/</p>
<p>Maria, what protocol guidelines around confidentiality do you use when encouraging sharing on social media and community building events?</p>	<p>As part of our community building events, we indicate:</p> <ul style="list-style-type: none"> • What is shared in the groups stays in the group. • Lean in/out, let others share. • We acknowledge people can change the name on their screen or indicate if they do not want their name called out. • We get agreement before we record The Parent Conversation Series with the Marin County Office of Education (MCOE) <p>The Parent Conversation Series are more psychoeducational but the events "Lean on Me" are more community connecting and we address topics as they come up.</p>
<p>First time face to face assessments are no longer possible. What are tools and ways you have adapted practice to make people comfortable with continuing services versus people who already are connected?</p>	<p>When meeting new clients, we have found it is very important to be flexible around scheduling appointments and amount of time of the appointment. It is also valuable to acknowledge how challenging virtual meetings are and discuss with clients the benefits and disadvantages of having telehealth. And to constantly check in with them about how they are feeling regarding virtual meetings to address challenges that may arise.</p>
<p>Should clinicians bring up the concepts of racism and their personal stories and experiences with their</p>	<p>Thank you. If your experiences are relevant to your experiences in the workplace then they are relevant. If they ask you to share your experience, by all means if you feel comfortable, share your experiences. However, if you do not</p>

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employers? Sometimes it does not feel safe.	feel safe in sharing, don't do it. If you are feeling oppressed at work, visit your HR department and file a complaint.
Can we get the PDF for embracerace?	<p>https://www.embracerace.org/ is a website founded in early 2016 by two parents (one Black, the other multiracial Black/White) who set out to create the community and gather the resources they needed (need!) to meet the challenges they face raising children in a world where race matters. If you are referring to Riana Anderson's EMBRace intervention, you should check out this website that introduces the model: https://theembraceprogram.wixsite.com/embrace</p>
Please go into more detail describing the telehealth kiosks and how they are used.	<p>We have three currently deployed pilot telehealth kiosks at clinic sites. Clients are welcome to schedule a time or drop in when the kiosk is not in use. It consists of a secure, clean, safe space with computer and telephone that allows clients to remote into sessions with a provider who may be in a different part of the county through telehealth. This is especially beneficial for clients who do not have easy access to technology, WIFI, or a safe space to speak freely with their provider. Based on an evaluation of this pilot and client needs, we hope to launch additional kiosks in the near future.</p>
Any thoughts about how telehealth is being implemented in jail settings	<p>Use of telehealth for incarcerated clients definitely poses challenges and barriers. Here are some recommendations: https://www.ruralhealthinfo.org/toolkits/telehealth/4/specific-populations/incarcerated-persons. Here's also a good guide for best practices: https://www.ncjrs.gov/pdffiles1/nij/190310.pdf</p>