

# CULTURE & DIVERSITY EVALUATION REPORT



2023

**Amador County Behavioral Health  
Mental Health Services Act (MHSA)  
COMMUNITY PLANNING  
PROCESS  
Recommendations for Culture and Diversity  
Work in ACBH Services**

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# 2023 Culture and Diversity Evaluation Report Amador County Behavioral Health

## BACKGROUND

As part of their MHSa three-year community planning process for FY 2024-26, Amador County's Behavioral Health Department (ACBH) initiated an effort to understand the County's landscape and identify potential recommendations related to culturally responsive services for Amador's diverse and underserved communities. Towards this aim, the County engaged Joyce Chu, Ph.D., program evaluator and licensed clinical psychologist from Community Connections Psychological Associates, Inc. (CCPA), to provide consultation on evaluation methodology and conduct a mixed-method analysis of quantitative and qualitative data. The current report details the results of this culture and diversity-related planning process.

## METHODOLOGY

In order to gather community input on culture and diversity work in Amador County Behavioral Health Services, both qualitative (community comments) and quantitative survey data were collected. Together these data (described below) were analyzed in a mixed-methods approach to inform concrete recommendations by an independent program evaluation team from Community Connections Psychological Associates (CCPA; team lead Joyce Chu, Ph.D. and team member Stephanie Chin, M.S.Ed).

### 1. COMMUNITY (QUALITATIVE) COMMENTS ABOUT CULTURE AND DIVERSITY IN BEHAVIORAL HEALTH SERVICES

In order to hear directly from community stakeholders, the MHSa staff of ACBH hosted three in-person focus groups: 1 general open focus group, 1 from a NAMI Amador General Meeting, and 1 consisting of Amador County Behavioral Health staff. A total of 37 community stakeholders participated across the 3 focus groups. Community stakeholders participated in each conversation through open verbal conversation, and detailed notes were recorded after each focus group by the facilitator.

#### Focus Group Prompts for Input About Culture and Diversity

1. In your opinion, what cultural and diversity efforts have been working well in Amador County, and what needs improvement?
2. Some community stakeholders have expressed concern with supporting culture and diversity efforts using the limited funds that are available in Amador County.
  - a. Do you have any insight about the nature of these concerns?
  - b. Any suggestions about how to address culture and diversity work given these concerns?

Community comments from the above focus group prompts were combined with responses from the following qualitative write-in question on the 2023 Mental Health Services Act (MHSa) Community Survey.

## Community Survey Write-In Question

Do you have any suggestions for ways that Amador County should change their approach to cultural responsiveness in their behavioral health programs and/or services?

### Data Analysis for Community Conversations

Verbal and written qualitative responses from both sources of community (qualitative) comments from the focus groups and community survey were combined for qualitative data analysis. Each community (qualitative) comment was coded using a grounded theory approach to identify an overarching set of areas of need (called “primary themes or codes”), listed in order of frequency mentioned. Each primary theme / area of need was also organized into subthemes (“secondary” themes) to clarify community feedback and organize recommendations. These subthemes provide descriptions and definitions of stakeholders’ comments within each overarching area of need (primary theme) related to culture and diversity work in Amador County Behavioral Health Services.

### 2. QUANTITATIVE SURVEY DATA

Consumer stakeholders and community members were invited to participate in the ACBH Mental Health & Substance Use Consumer Survey (administered in March through June of 2023). A total of 159 stakeholders responded to the survey.

66.9% of respondents identified as adults 25-59 years old, 28% identified as older adults 60+ years old, 3.8% were young adults 18-24 year old, and 1.3 preferred not to answer. Gender identity included: 76.8% who identified as women, 15.5% as men, 5.2% “prefer not to answer,” .7% as transgender, .7% as gender non-binary, and 1.3% as “other.” Sexual orientation included: 81.3% straight or heterosexual; 8.4% prefer not to answer; 3.9% lesbian, gay, or homosexual; 3.9% bisexual; and 2.6% “other.” 39% as community members, 22% identified as consumers of behavioral health services, 20.1% as contracted service providers/CBO staff or volunteers, 17% as family members, 10.1% as County staff, 7.6% as social service agency staff, 7.6% as other, 6.3% as education agency staff, 6.3% as medical or health care provider/organization staff, 1.9% as law enforcement staff, 1.3% as veteran organization staff or volunteer, 1.3% as domestic violence and/or sexual assault service provider, and .6% as a first responder. Racial or ethnic identity of respondents included: 84.9% White or Caucasian, 12% Hispanic or Latino, 5% American Indian or Alaskan Native, 3.1% preferred not to answer, 1.9% Asian or Asian American, and .6% each of Black or African American, Native Hawaiian or Pacific Islander, and “Other.”

Numerous survey questions were analyzed to understand community input about culture and diversity needs in behavioral health services. First, the following question assessed stakeholders’ rating of the quality of current ACBH attention to culture and diversity: “Amador County Behavioral Health gives adequate attention and support to culture and diversity efforts” rated on a 6-point Likert scale of Strongly Disagree to Strongly Agree.

Second, respondents were asked to identify barriers to doing culture and diversity work in behavioral health with the following question: “What are the top three barriers to being culturally

responsive to and serving the mental health needs of the ethnic minority and LGBTQ+ residents of Amador County? Please select up to three.” Response options included the following:

- Not enough community organizations and/or leaders to support this work
- Lack of support from leaders for culture and diversity work
- Difficulties supporting diverse needs with limited staff and resources
- Lack of awareness/knowledge of Amador County's cultural or underserved communities
- Insufficient numbers of non-English speakers, ethnic minorities, and LGBTQ+ individuals to justify the work
- Reluctance to spend funds on a small number of ethnic minorities or LGBTQ+ individuals in the County
- Political and ideological views that culture and diversity shouldn't be a priority
- Opposition to supporting immigrants, non-English speakers, and/or undocumented individuals
- Other (please specify):

Third, to identify potential cultural communities with high needs, two questions were asked. Culturally diverse identity groups were included in a question that asked survey respondents to rate: “Which of the following groups should be the highest priority for upcoming mental health efforts in Amador County? Please choose up to three.” Response options included the following: Displaced/Temporary Housing Situation, Foster Youth, Individuals/Families Living in Poverty, Isolated Rural Communities, Latino/Spanish Speaking, LGBTQ+, Men, Middle Aged Adults (35-59 year old), Native Americans, Seniors (60+), Single, Working & Commuting Parents/Families, Unhoused, Veterans, White Community, Youth. The second question queried “As a whole, how do you feel MHSA-funded programs are doing in serving the following?” with the following response options: Children 0-5, Youth 6-12, Teens 13-17, Young Adult/Transitional Age Youth (TAY) 18-24, Adults 25-59, Seniors 60+, Hispanic/Latinos, Native American (American Indian or Alaska Native), Veterans, LGBTQ+, Unhoused, Displaced/Temporary Housing Situation, Those w/serious mental illness, Those who might be at risk of mental illness, Pregnant Women, and Other (please specify).

### **Comparison of “Cultural Minority” to Non-minority Respondents**

Fourth, 38 individuals who identified as non-English speaking racial/ethnic minority or LGBTQ+ individuals (together, discussed in the current report as “cultural minorities”) were compared to 121 non-minority individuals on three survey questions that assessed for barriers to service access, quality of services, and outreach modality (i.e., where they get information about behavioral health services). These questions included the following items:

15. What are some issues or barriers that may prevent people from seeking mental health services in Amador County? Please check all that apply.

- Not sure where to go for help
- There is a stigma around mental illness in the community
- Insurance eligibility
- Lack of Transportation

- Services are not provided in consumers' preferred language
- Lack of peer providers
- Lack of Veterans services
- Lack of providers
- Services are not available in a day/time that I can access them
- Lack of providers for young children
- Lack of internet for telehealth services or mental health apps
- Long wait times to access care/appointments
- Other (please specify)

17. If you access services at Amador County Behavioral Health, how do you feel we are doing with the following?

- Client & Family Focused
- Culturally-competent staff
- Recovery-based services
- Welcoming environment
- Collaboration w/community
- Smooth referrals to & from other providers
- Being seen in a timely manner
- Other (please specify)

19. How do you get your information? Please select only two options.

- Email
- Text
- Local Newspaper
- Local Radio Station
- Word of Mouth
- Social Media (Facebook, Instagram)
- Amador's Network of Care website
- Community Announcements Email
- Other (please specify)

### **Survey Respondents Who Do Not Support Using MHSA Funds for Diversity Work**

Survey responses from respondents who opposed funding diversity efforts were examined to inform recommendations for increasing general community support (and resources) for culture and diversity work. Twenty-nine individuals who endorsed that they disagree (slightly disagree, moderately disagree, or strongly disagree) on the question “I support using a portion of MHSA funds to give dedicated attention to non-English speaking, ethnic minority and/or LGBTQ+ individuals in Amador County” were examined on their responses to the following questions: “Which groups should be the highest priority for upcoming mental health efforts in Amador County?” and “What are the top three barriers to being culturally responsive to and serving the mental health needs of the ethnic minority and LGBTQ+ residents of Amador County? Please select up to three.”

## OVERALL EXECUTIVE SUMMARY OF RECOMMENDATIONS

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### STRENGTHS

On average, survey respondents rated that they *slightly agree* ( $M=4.34$ ) that Amador County Behavioral Health gives adequate attention and support to culture and diversity efforts. These data suggest that existing culture and diversity effort may be a source of strength in services offered by ACBH (see the Table below); however, there was room for improvement in this area. Amongst ethnic minority and LGBTQ+ groups, respondents rated services for Hispanic/Latino, Native American, and LGBTQ+ communities as fair to good.

### RECOMMENDATIONS TO ENHANCE CULTURAL RESPONSIVENESS IN AMADOR COUNTY BEHAVIORAL HEALTH SERVICES

#### Organizational Support

**1. Increase support for staff, resources, and community organizations to lead diversity efforts** that serve the mental health needs of the ethnic minority and LGBTQ+ residents of Amador County.

#### Outreach and Engagement

**2. Facilitate increased outreach to cultural communities** by utilizing approaches such as cultural community partnership and bringing services to where isolated cultural communities may reside. These outreach efforts should aim to decrease stigma, educate about behavioral health, and advertise available services.

**3.** Given the finding that Minority respondents reported “word of mouth” as the top source of information about services, consider outreach efforts via **community helper trainings**.

**4.** Focus on **culturally innovative ways to link and engage underserved cultural communities** with behavioral health services.

#### Culturally Attuned Services

**5. Explore ways to make Amador County services more culturally attuned throughout its services and programs** through efforts such as diversity training, land acknowledgements, gender identity inclusion, or integration of cultural considerations into behavioral health services.

**6. Continue a commitment to offering services and materials in non-English languages like Spanish.**

## RECOMMENDATIONS TO ADDRESS BARRIERS TO BUY-IN & SUPPORT IN THE GENERAL COMMUNITY FOR CULTURE/DIVERSITY EFFORTS

**7. Educate the general population about the presence of underserved and/or isolated cultural subgroups within Amador County, along with existing efforts to serve those cultural communities** (i.e. Spanish-speaking, LGBTQ+, undocumented).

A lack of awareness of Amador’s cultural or underserved communities (i.e., “...myths of ‘Black people don’t live here’ or ‘Asian people don’t live here’” or the misconception that diversity in the County comes only from the incarcerated population) was mentioned as one of the top two barriers to serving the needs of ethnic minority and LGBTQ+ residents by survey respondents who do not support using MHSA funds for diversity work. It was also one of the top two most frequently mentioned themes suggesting ways to increase support for diversity work in the general community.

**8. Raise awareness and provide data about specific cultural communities in need, along with messaging about a need for help from the community.** Consider providing information about equity in provision of funding compared to representation in the population and representation of any disproportionate needs.

**9. Community members may perceive marginalized age and socioeconomic factors as cultural groups with the highest need,** and may benefit from **additional education about racial, ethnic minority, LGBTQ+, and/or non-English speaking groups** who may have elevated needs as well.

**10. Directly address racism within organizations in the community** and educate the general community about racial misconceptions.



## RESULTS

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### COMMUNITY (QUALITATIVE) COMMENTS: AREAS OF NEED

#### More Outreach to Cultural Communities

A need for more outreach to cultural communities was the most frequently mentioned stakeholder need (23 comments). These 23 comments including 8 general comments about needing to continue advertisements and outreach efforts in order to improve cultural responsiveness, and also 4 specific themes that provide more specificity about how to approach these outreach efforts. First, stakeholders suggested collaborating more with cultural partners in the community (i.e., “Be more willing to work with the community” or “Hold public events with the Rancheria [Jackson Rancheria of the Me-Wuk tribe]”). Second, participants discussed a need for efforts that decrease the heightened levels of mental health stigma present in cultural communities: “...There are many cultural pieces, and misconceptions around health...With the added stigma mental health brings, the barriers to access services are overwhelming for the Hispanic, Latino and Spanish-speaking population.”

Third, outreach is needed to isolated cultural groups to bring services to where they are: “...there is an element of cultural isolation that occurs in Amador and how do you reach people? ...we can’t expect folks to come to us for services, we need to go to them.” Finally, outreach to cultural communities should aim to increase awareness and mental health literacy about behavioral health and its services (“Improvements could be made in getting the word out to the communities. These communities do not know that services exist and can be provided to them”).

#### Cultural and Linguistic Attunement in Programs/Services/Providers

The third most frequently mentioned primary theme from community (qualitative) comments pertained to a need for more cultural and linguistic attunement in programs, services, or providers (7 comments). There was a diversity of suggestions in this area, including offering DEI (Diversity, Equity, and Inclusion) training for staff, having services that are more mindful of cultural considerations, more responsiveness to transgender or non-binary needs, or infusing Native American land acknowledgements throughout the County. Stakeholders also pointed to the need for services and materials to be offered in non-English speaking languages.

#### Culturally Tailored Efforts to Facilitate Engagement With Services

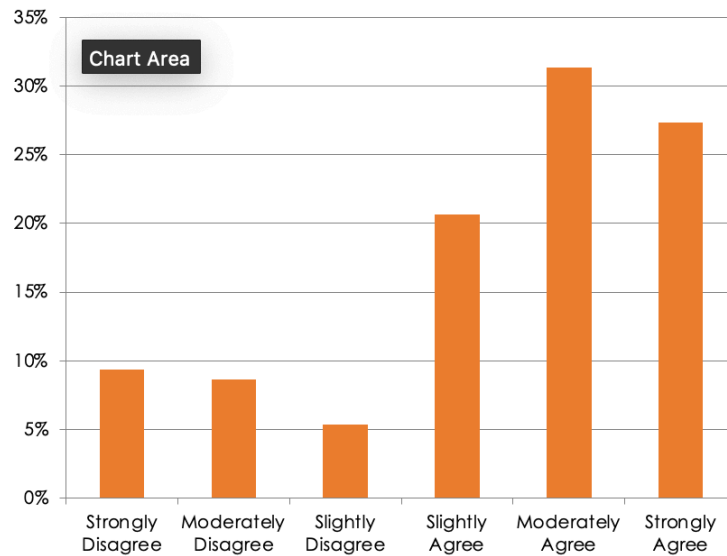
In addition to a need for more outreach and awareness about services for cultural communities, stakeholders recognized the difficulties in engaging such underserved communities (where stigma around mental health is often high and mental health literacy is low) with services. Comments pointed to a need to specifically assist such communities in engaging with services: “...if it is built, will they come? If we do a LGBTQ+ SUDS Group – will people come? If we do a Hispanic/Latino group, will people come? It is very difficult to determine what comes first—the chicken or the egg” and “...hire a bilingual peer PSC who could ... act as a liaison to other services and supports.”

Additional comments addressing needs within specific groups such as youth, older adults, Spanish-speaking/Latinx, Native American, LGBTQ+, Black of African American, Non-English speaking, veterans, or geographically isolated communities are provided in the Appendix data tables as references for any future efforts focusing on such groups.

## COMMUNITY SURVEY: RATING OF CURRENT EFFORTS, BARRIERS, & SPECIFIC COMMUNITIES IN NEED

On average, survey respondents rated that they *slightly agree* ( $M=4.34$ ) that Amador County Behavioral Health gives adequate attention and support to culture and diversity efforts. These data suggest that existing culture and diversity effort may be a source of strength in services offered by ACBH (see the Table below); however, there was room for improvement in this area.

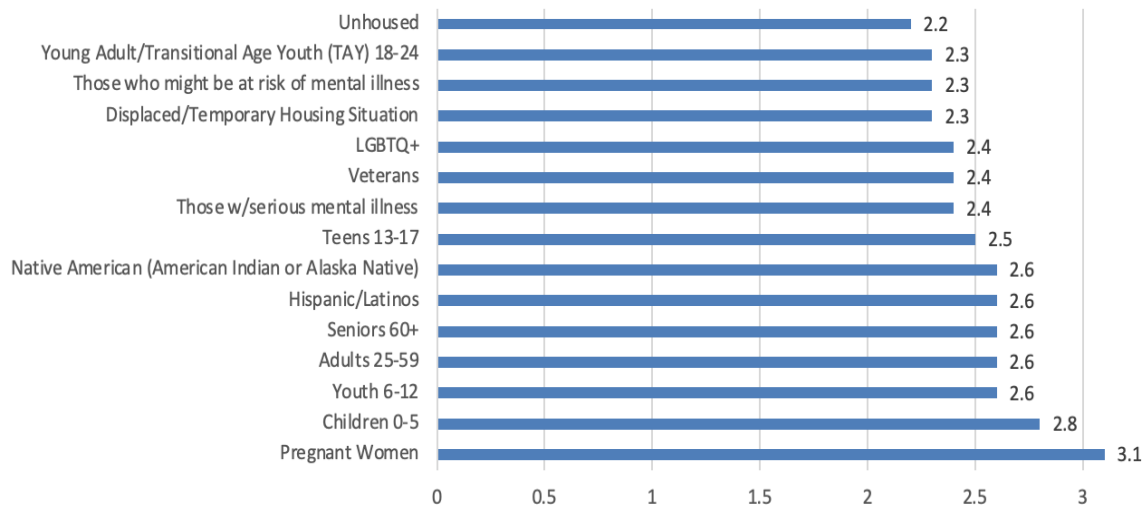
**Rating of Current Diversity Efforts:** “Amador County Behavioral Health gives adequate attention and support to culture and diversity efforts.”



*Note: 1=Strongly Disagree; 2=Moderately Disagree; 3=Slightly Disagree; 4=Slightly Agree; 5=Moderately Agree; 6=Strongly Agree*

Amongst ethnic minority and LGBTQ+ groups, respondents rated services for Hispanic/Latino, Native American, and LGBTQ+ communities as fair to good.

**Specific Communities in Need:** “As a whole, how do you feel MHSA-funded programs are doing in serving the following?”

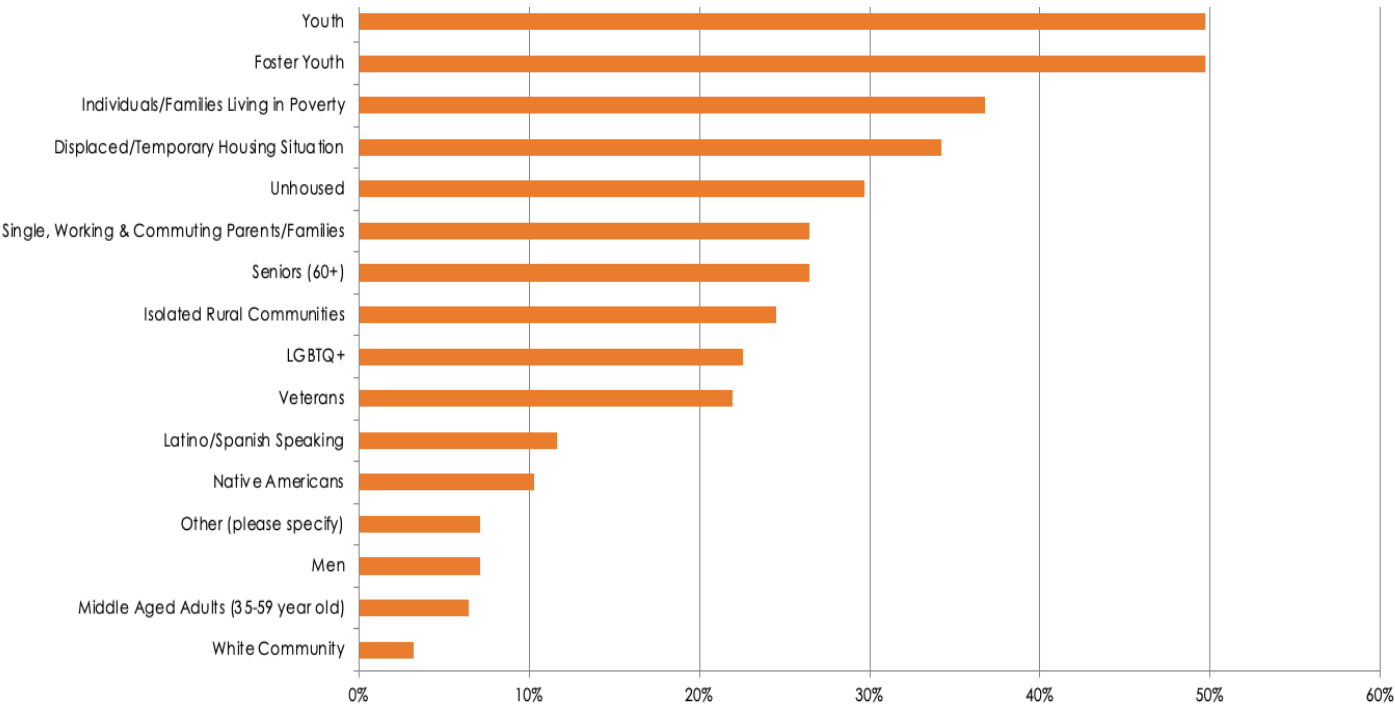


*Note: 1=Poor; 2=Fair; 3=Good; 4=Excellent*

However, respondents did identify specific communities in need by rating which groups should be prioritized for upcoming mental health efforts in Amador County. Specific communities listed in order of the most to least frequently endorsed included: youth and foster youth, followed by individuals who live in poverty or are do not have permanent housing (unhoused, displaced, or temporarily housed), followed by single, working, and commuting parents/families, then seniors, isolated rural communities, then LGBTQ+, veterans, Latino/Spanish speaking, and others (see Table below). These data suggest that respondents predominantly perceived marginalized age groups (youth and seniors) and socioeconomic variables (i.e. poverty, housing struggles, single or working families) as the biggest identity groups of need, rather than race, ethnicity, language, or LGBTQ+ identity.

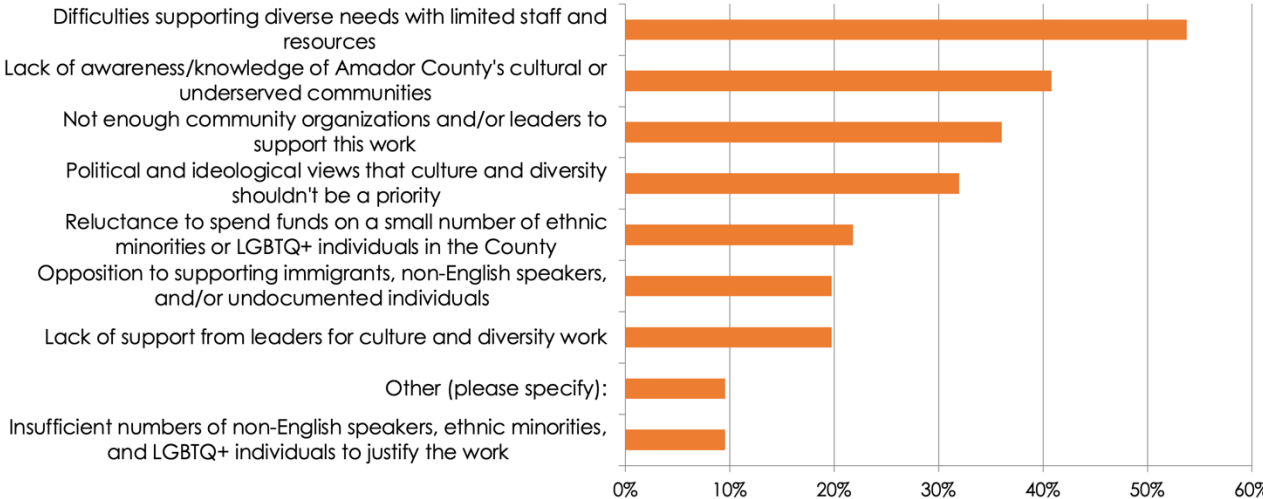
Respondents predominantly perceived marginalized age groups (youth & seniors) and socioeconomic variables (i.e. poverty, housing struggles, single or working families) as the biggest identity groups of need.

**Specific Communities in Need:** “Which of the following groups should be the highest priority for upcoming mental health efforts in Amador County? Please choose up to three.”



In the overall sample of respondents, limited staffing and resources, lack of awareness/knowledge or Amador County’s cultural or underserved communities, and not enough community organizations and/or leaders to support this work were rated as the top three most frequently mentioned barriers to being culturally responsive to and serving the mental health needs of the ethnic minority and LGBTQ+ residents of Amador County.

**Barriers to Diversity Work:** “What are the top three barriers to being culturally responsive to and serving the mental health needs of the ethnic minority and LGBTQ+ residents of Amador County? Please select up to three.”

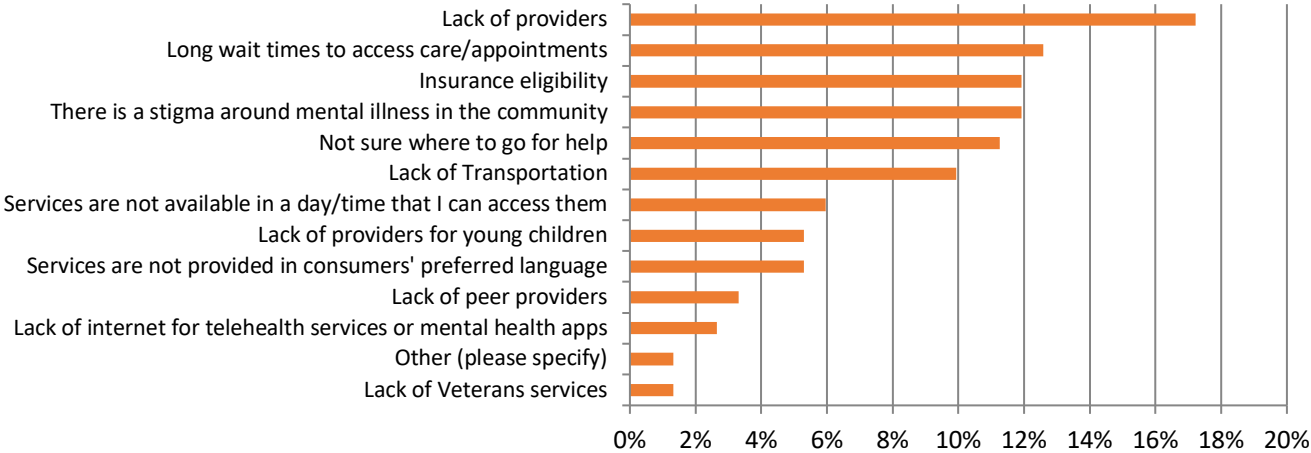


**COMPARISON OF CULTURAL MINORITY TO NON-MINORITY RESPONDENTS**

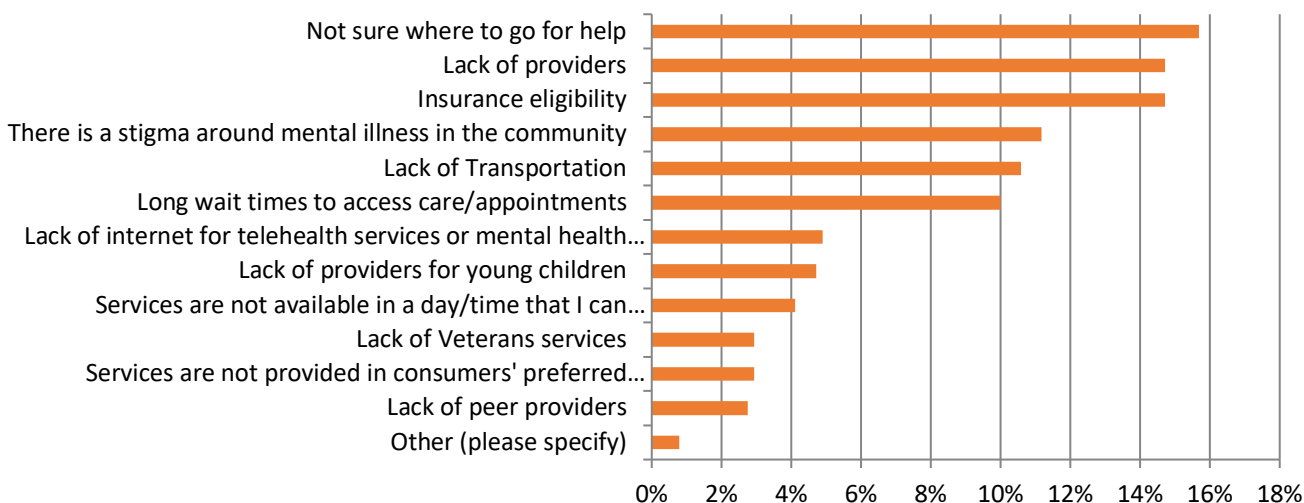
Responses to barriers to services, quality of services, and access to information about services were compared between 38 individuals who identified as “minority participants” compared to “non-minority” participants. “Minority” participants included anyone who identified as non-White (including mixed race individuals), LGBTQ+, and/or having a non-English preferred language; in total, 28 identified as ethnic minorities, 15 as sexual minorities, and 2 as non-binary or transgender, and 7 as having Spanish as their preferred language. Non-minority participants included 121 White, heterosexual, cisgender respondents.

A comparison of top-rated barriers to service access did not reveal any meaningful differences between the minority and non-minority participants. Both groups rated lack of providers, long wait times, insurance eligibility, stigma, not being sure about where to get help, and lack of transportation as the top barriers to access services.

**Minority Participants: Barriers to Service Access**



## Non-Minority Participants: Barriers to Service Access



There were also no meaningful differences in quality of care ratings between minority and non-minority participants, though sample size was limited.

## Quality of Care Domains

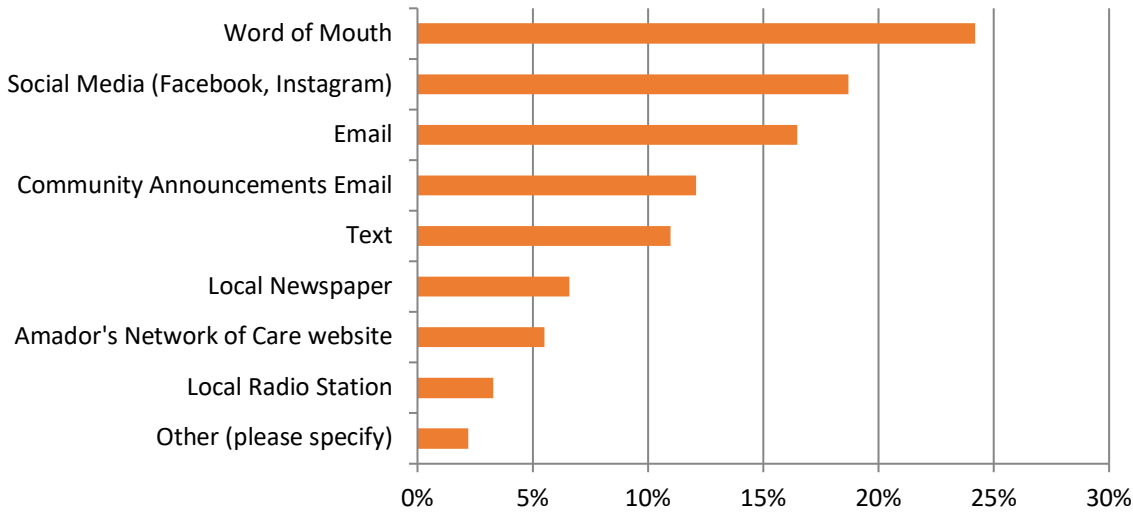
“If you access services at Amador County Behavioral Health, how do you feel we are doing with the following?”

	Minority	Non-Minority
<b>Client &amp; Family Focused</b>	2.93	2.91
<b>Culturally-competent staff</b>	2.92	2.96
<b>Recovery-based services</b>	3.08	2.86
<b>Welcoming environment</b>	3.15	2.82
<b>Collaboration w/community</b>	3.25	2.90
<b>Smooth referrals to &amp; from other providers</b>	2.55	2.39
Being seen in a timely manner	2.79	2.53
<b>Overall Mean</b>	<b>2.90</b>	<b>2.77</b>

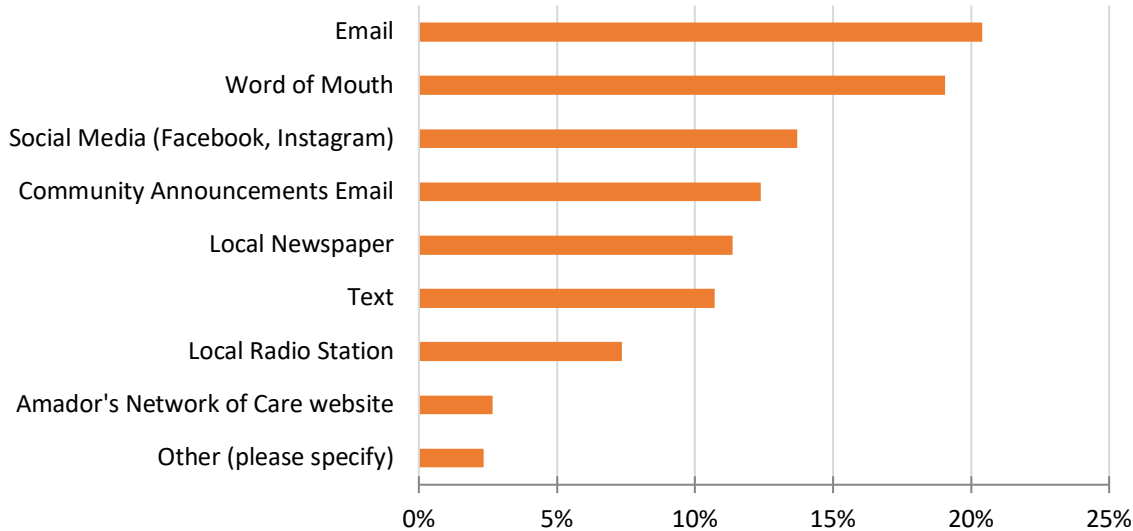
Note: 1=Poor; 2=Fair; 3=Good; 4=Excellent

Respondents were also asked about how they learn about behavioral health information, as a measure of method of access to care with the following question: “How do you get your information? Please select only two options.” Word of mouth was chosen as the top source of information about services for minority participants, whereas email was the top source for Non-Minority respondents.

**Minority Participants: Avenue of Information about Services**



**Non-Minority Participants: Avenue of Information about Services**



**WAYS TO INCREASE SUPPORT FOR DIVERSITY WORK**

**Suggestions from Community (Qualitative) Comments**

The second most frequently mentioned primary theme from community (qualitative) comments addressed ways to increase support for diversity work (15 comments). Stakeholders pointed to unique challenges to, and potential solutions for, gaining buy-in and support for culture and diversity work.

Three main ideas or suggestions for increasing support for diversity work emerged from these stakeholder comments. First, comments pointed to a general lack of awareness (i.e., by the general population, and non-minority and already resource-connected individuals) about the presence of cultural groups in need such as LGBTQ+, Spanish-speaking, or others, within Amador County. Comments such as “There is no real diversity in Amador” or “[there’s] just not much diversity in

our area” demonstrate that some community members are unaware of some of the culturally marginalized subpopulations in Amador who may be more isolated from or less visible to the general population. This lack of awareness was inclusive of racial misconceptions about representation: “[The group discussed] ... the Mule Creek State Prison population skewing demographics. However, it is not the case. So, this misconception could be a reason why people don’t want to support funding towards these efforts.” Some felt that with increased awareness about the presence of cultural community-specific needs, support for such work would grow. “Insight around the nature of these concerns is lack of education. If the community understood that the time and funding being spent was proportionate to the populations being served, they would have a better understanding and probably be more supportive of these efforts.”

**General lack of awareness about the presence of cultural groups in need in Amador County**

“[There’s] just not much diversity in our area.”

Second, stakeholders discussed racism or other conservative ideologies as barriers to support for diversity work: “There is fundamental disregard for minority groups in AC. Folks want a closed

**Racism or other conservative ideologies as barriers to support for diversity work**

“There is a fundamental disregard for minority groups in [Amador County].”

community. We see it displayed through signs and flags. We hear and see it in attitudes of patrons and some providers at local businesses...[there are] attitudes that don't welcome outsiders or even our own educated citizens.” These ideologies included implicit thoughts that racial diversity was a negative thing: “[The group discussed] *blaming* racial and ethnic diversity on the Mule Creek State Prison population skewing demographics...” To address these racism/ideology-based barriers, community members called for efforts to address racism or racial

misconceptions (“Addressing racism and intolerance in our schools”), and patience and hope for changing such support over time (“The community is very conservative – however it is getting better. Discussed how conservative people can still have open minds, just takes time”).

**Patience and hope to change support over time**

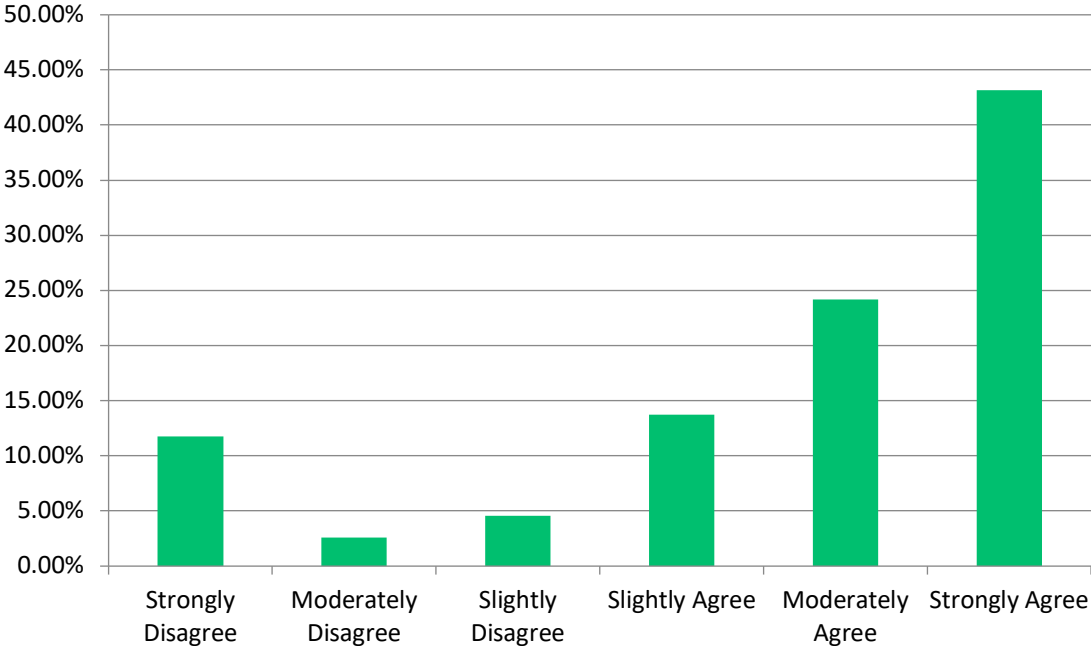
“...it is getting better...conservative people can still have open minds, just takes time.”

Third, awareness about the presence of cultural subgroups in need within Amador County can be paired with and enhanced by education about existing culture and diversity efforts, to address comments showing a lack knowledge about ongoing efforts that address cultural needs (“I have no idea what Amador County's current approach to cultural responsiveness is”).

**Survey Respondents Who Do Not Support Using MHSA Funds for Diversity Work**

*Respondents who opposed funding diversity efforts* were defined as anyone who endorsed that they disagree (slightly disagree, moderately disagree, or strongly disagree) on the question “I support using a portion of MHSA funds to give dedicated attention to non-English speaking, ethnic minority and/or LGBTQ+ individuals in Amador County.” In total, 29 individuals were identified as *respondents who oppose funding diversity efforts*.

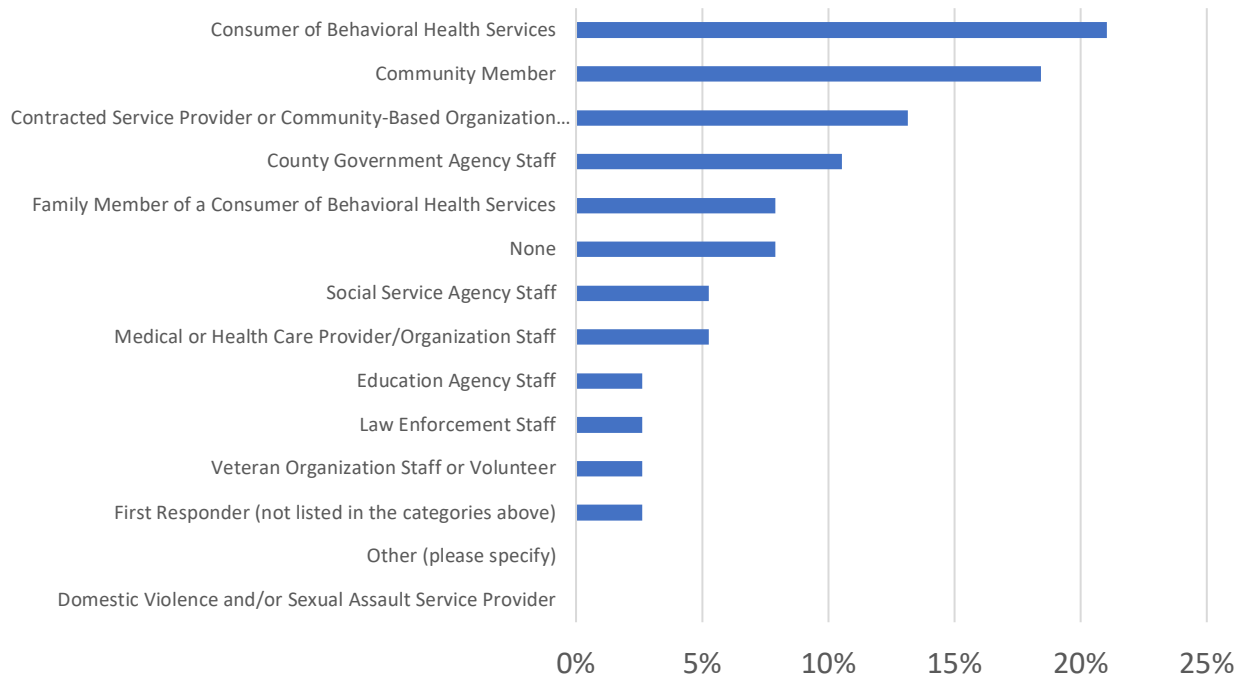
**I support using a portion of MHSA funds to give dedicated attention to non-English speaking, ethnic minority and/or LGBTQ+ individuals in Amador County**



21 of the 29 respondents identified as adults 25-59 years old, 7 identified as older adults 60+ years old, and 1 skipped the question. Gender identity included: 21 who identified as women, 3 as men, 2 “prefer not to answer,” 1 skipped the question, and 2 “other” with the following write-in responses: “There are two genders, biological males and females.. period” and “there are only 2 genders. To say differently is mental illness. I am female.” Sexual orientation included: 21 straight or heterosexual; 2 lesbian, gay, or homosexual; 4 prefer not to answer; and 1 “other” with the write-in response of “Why is this a question? This is personal and private.” Eight identified as consumers of behavioral health services, 7 as community members, 5 as contracted service providers/CBO staff or volunteers, 4 as County staff, and 3 as family members. Other stakeholder identification is represented in the graph below. Three of the 29 “diversity funding opposing” respondents identified as racial or ethnic minorities (2 Hispanic/Latino, 1 American Indian or Alaskan Native), 4 identified as mixed race White + ethnic minority identity, 22 individuals as White, and 1 endorsed “prefer not to answer.”

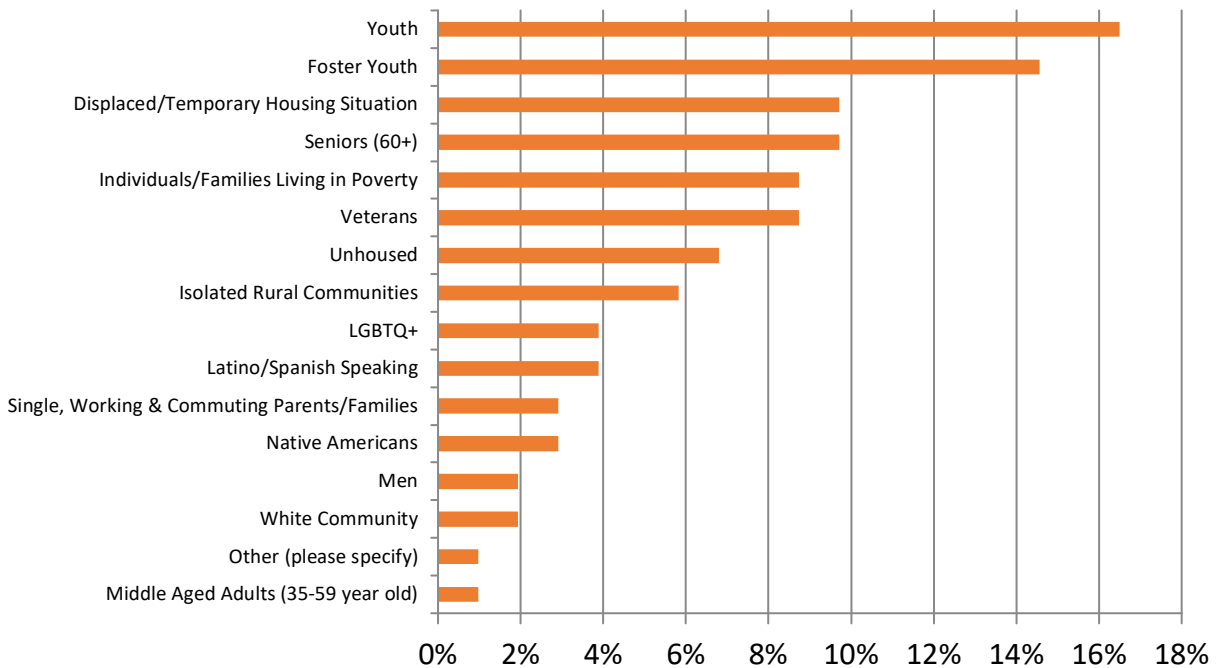


## Descriptive Data: Connection to Behavioral Health Services



*Respondents who opposed funding diversity efforts* identified youth, foster youth, individuals with displaced or temporary housing, seniors, individuals/families living in poverty, and veterans as groups who should be prioritized for mental health efforts.

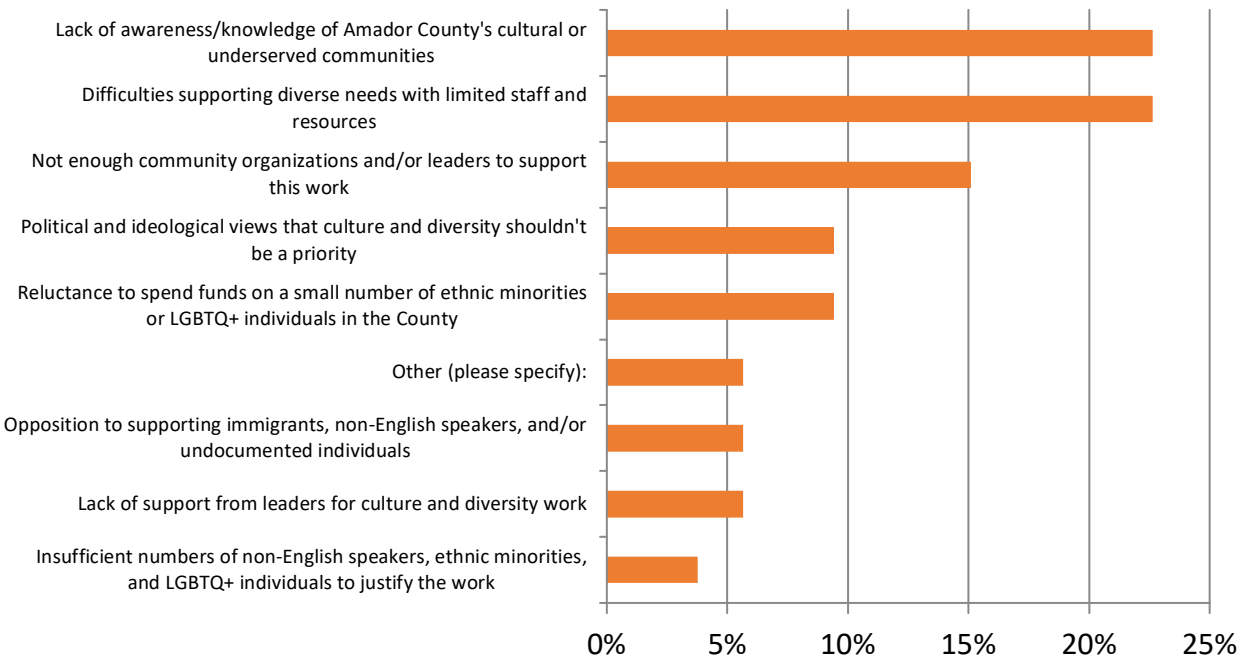
## Which groups should be the highest priority for upcoming mental health efforts in Amador County?



When examining what folks who do not support using MHSAs funds for diversity work reported as main barriers to being culturally responsive to and serving the mental health needs of ethnic minority and LGBTQ+ residents of Amador County, a top rated barrier was “a lack of awareness of Amador’s cultural or underserved communities” (endorsed by 22.5% of respondents). The next most frequently endorsed barriers were “difficulties supporting diverse needs with limited staff and resources” (endorsed by 22.5% of respondents), and “not enough community organizations and/or leaders to support this work” (endorsed by 15% of respondents).

Barriers related to fundamental opposition to the idea of supporting ethnic minority and LGBTQ+ residents were *infrequently endorsed* by *less than 10%* of respondents who opposed funding diversity efforts. For example, “Political and ideological views that culture and diversity shouldn’t be a priority” was only endorsed by 9.5% of “diversity funding opposing” respondents, “Reluctance to spend funds on a small number of ethnic minorities or LGBTQ+ individuals in the County” by 9.5%, and “Opposition to supporting immigrants, non-English speakers, and/or undocumented individuals” by 6%.

**Top 3 barriers to being culturally responsive to and serving the mental health needs of ethnic minority and LGBTQ+ residents of Amador County**



These results seem to suggest that reluctance to use funds for diversity work is not primarily driven by political ideologies or opposition to supporting the needs of ethnic minority or LGBTQ+ individuals, but rather by a concern for the scarcity of staff, leadership, and financial resources to cover their needs. Combined with a lack of awareness that ethnic minority and LGBTQ+ individuals live in the County, there may be a perception and/or concern about lack of fairness, with a desire to not have funds disproportionately allocated to cultural communities where there are not very many people and/or not very much need (e.g., “There are no barriers, the ethnic minority and LGBTQ+ members are already socially, financially, politically, and governmentally supported far more than the rest of the community members”). One “diversity funding opposing” respondent expressed a willingness to assist when there is a need: “There are no barriers. Ask for

help and we will do all we can to help. We are a small county that cares way more about people in our community than other counties.”

Notably, endorsement of ideological barriers to diversity work were rated more frequently by respondents who supported vs. opposed funding diversity efforts, pointing to a potential gap in perception about the source of differing viewpoints about diversity work.

Barrier to Culturally Responsive Services	Respondents Who Supported Funding Diversity Efforts	Respondents Who Opposed Funding Diversity Efforts
Political and ideological views that culture and diversity shouldn't be a priority	31.97%	9.43%
Reluctance to spend funds on a small number of ethnic minorities or LGBTQ+ individuals in the County	21.77%	9.43%
Opposition to supporting immigrants, non-English speakers, and/or undocumented individuals	19.73%	5.66%

**APPENDIX**

**Stakeholder Identified Needs from Community (Qualitative) Comments**

Primary Theme	Sub-Themes
<p><b>More Outreach to Cultural Communities</b> (23 comments)</p>	<p><u>General Comments - 8</u></p> <ul style="list-style-type: none"> <li>• Continue and increase advertisements – 3</li> <li>• General outreach to communities - 5</li> </ul>
	<p><u>Collaboration with Cultural Partners – 4</u></p> <ul style="list-style-type: none"> <li>• “Outreach, collaborate with community partners.” - 1</li> <li>• “Be more willing to work with the community and other services.” - 1</li> <li>• “Hold public events with the Rancheria [Jackson Rancheria of the Me-Wuk tribe].” – 1</li> <li>• “Promotores program – outreach to Spanish speaking communities seems to be going well, however, connecting with the Promotores and our Spanish speaking providers has always been challenging.” - 1</li> </ul>
	<p><u>Decrease Stigma – 4</u></p> <ul style="list-style-type: none"> <li>• “It’s hard to promote mental health and support services when a lot of the community has the belief that mental health is not a thing.” - 1</li> <li>• “In working with [Hispanic, Latino and Spanish-speaking] adolescents, there are many cultural pieces, and misconceptions around health in general. With the added stigma mental health brings, the barriers to access services are overwhelming for the Hispanic, Latino and Spanish-speaking population.” - 1</li> <li>• “Other barriers that exist for the LGBTQ+ community are that Amador is so small so sometimes there are conflicts within the community that deter individuals from accessing what is available to them.” – 1</li> <li>• “[We need] high school programs that release cultural stigma within family and community.” - 1</li> </ul>
	<p><u>Isolation of Cultural Groups: Bring Services to Where They Are – 4</u></p> <ul style="list-style-type: none"> <li>• “...there is an element of cultural isolation that occurs in Amador and how do you reach people? ...we can’t expect folks to come to us for services, we need to go to them.” - 1</li> <li>• “The Hispanic and Spanish-speaking community is isolated and more outreach to them needs to occur.” - 1</li> <li>• “I believe that the county does not provide adequate support for our aging community. There needs to be more active outreach to seniors for services where they live.” - 1</li> <li>• “ [Hire an in-house] bilingual peer PSC who could provide outreach to outlying areas, yet, also provide groups and one-on-one support in-house as well...Overall, this seemed to be a more streamlined approach to providing outreach to this specific population.” – 1</li> </ul>
	<p><u>Increase Awareness and Literacy – 3</u></p>

	<ul style="list-style-type: none"> <li>• “Improvements could be made in getting the word out to the communities. These communities do not know that services exist and can be provided to them.” - 1</li> <li>• “More information in Spanish needs to be provided so that they are aware they can seek services, assistance, anything.” - 1</li> <li>• “Get out and network in Spanish speaking areas.” - 1</li> </ul>
<p><b>Ways to Increase Support for Diversity Work in the General Community</b> (15 comments)</p>	<p><u>Increase Awareness in General Community about Diverse Groups - 6</u></p> <ul style="list-style-type: none"> <li>• “There is no real diversity in Amador.” - 1</li> <li>• “...just not much diversity in our area.” - 1</li> <li>• “Insight around the nature of these concerns is lack of education. If the community understood that the time and funding being spent was proportionate to the populations being served, they would have a better understanding and probably be more supportive of these efforts.” - 1</li> <li>• “...myths of ‘Black people don’t live here’ or ‘Asian people don’t live here’.” – 1</li> <li>• “This is a difficult ‘sell’ because if we ask people who are already using the resources, they don’t see people who aren’t accessing the resources because of other stigmas or the fact they don’t know they exist (e.g. LGBTQ+, Spanish-speaking, etc.) So, the group discussed ways to reframe this so that it says what it is – people live in Amador who are not utilizing services and they don’t know they exist. One example -- they are underserved in many ways because of different intersecting reasons (e.g. Spanish-speaking, undocumented, isolated rural area, etc.) The funding and efforts would be utilized to ensure those folks know resources exist for them and they can access them.” – 1</li> <li>• “[The group discussed] blaming racial and ethnic diversity on the Mule Creek State Prison population skewing demographics...” However, it is not the case. So, this misconception could be a reason why people don’t want to support funding towards these efforts.” – 1</li> </ul>
	<p><u>Racism or Other Ideologies as a Barrier / Potential Solution – 6</u></p> <ul style="list-style-type: none"> <li>• “ [The group discussed] blaming racial and ethnic diversity on the Mule Creek State Prison population skewing demographics...” - 1</li> <li>• “I think the Amador Football Team debacle was a big teachable moment for our community, and as far as I can tell, that opportunity was missed.” - 1</li> <li>• “Addressing racism and intolerance in our schools.” – 1</li> <li>• “There is fundamental disregard for minority groups in AC. Folks want a closed community. We see it displayed through signs and flags. We hear and see it in attitudes of patrons and some providers at local businesses. You read about a parent beating up a teacher and local police do such a haphazard investigation that the local DA can’t prosecute the offender. A local CHP kills his wife. This is the result of a closed community and attitudes that don’t welcome outsiders or even our own educated citizens.” - 1</li> </ul>

	<ul style="list-style-type: none"> <li>• “The community is very conservative – however it is getting better. Discussed how conservative people can still have open minds, just takes time.” – 1</li> <li>• “Continue supporting all citizens...” - 1</li> </ul> <p><u>Education About Diversity Efforts in General – 2</u></p> <ul style="list-style-type: none"> <li>• “I have no idea what Amador County's current approach to cultural responsivity is.” – 1</li> <li>• “I don't know enough about their services to respond.” - 1</li> </ul> <p><u>Increase Efforts Overall – 1</u></p> <ul style="list-style-type: none"> <li>• “I don't see much effort toward diversity. I think the Amador Football Team debacle was a big teachable moment for our community, and as far as I can tell, that opportunity was missed.” - 1</li> </ul> <p><u>Support Inclusion of Non-English Speaking Staff – 1</u></p> <ul style="list-style-type: none"> <li>• “Need to keep the counselor's and to speak better English.” - 1</li> </ul>
<p><b>Programs / Services / Providers Need to Be More Culturally &amp; Linguistically Attuned</b> (7 Comments)</p>	<p><u>General Comments - 4</u></p> <ul style="list-style-type: none"> <li>• “Being mindful of the impact of culture considerations to mental health.” - 1</li> <li>• “More D.E.I. training.” - 1</li> <li>• “Native land acknowledgements on site and in print.” - 1</li> <li>• “More attention to non-binary or gender confirming information.” - 1</li> </ul> <p><u>Language Services/Programs/Materials Needed - 3</u></p> <ul style="list-style-type: none"> <li>• “Have linguists or zoom/remote translators available 24/7 in all languages and ethnicity in Census and currently, if not.” - 1</li> <li>• “Offer services in other languages.” - 1</li> <li>• “Materials/brochures available in Spanish.” - 1</li> </ul>
<p><b>Culturally Tailored Efforts to Facilitate Engagement with Services</b> (7 comments)</p>	<p><u>Access Issues – 4</u></p> <ul style="list-style-type: none"> <li>• “Mom chat is amazing but other wise it is not very easy to find behavior health services [in] the county.” - 1</li> <li>• “Access for non-english speakers.” - 1</li> <li>• “I have not been able to find available mental health services.” – 1</li> <li>• “Actually offer enough services.” - 1</li> </ul> <p><u>Focus on Service Linkages – 2</u></p> <ul style="list-style-type: none"> <li>• “LGBTQ Work Group/Round Table—the group is a great community resource but has failed to ‘link’ people back to behavioral health support...The #Out4MentalHealth Task Force meeting...was more advocacy focused, as opposed to connecting and linking to services focused.” - 1</li> <li>• “Perhaps hire a bilingual peer Personal Services Coordinator (PSC) who could ... provide groups and one-on-one support in-house as well. Calaveras does a similar approach and has had good success. The bilingual peer PSC could also provide case management and act as a liaison to other services and supports that promote overall health as well.” - 1</li> </ul> <p><u>Service Availability May Not Yield Engagement – 1</u></p>

	<ul style="list-style-type: none"> <li>“...if it is built, will they come? If we do a LGBTQ+ SUDS Group – will people come? If we do a Hispanic/Latino group, will people come? It is very difficult to determine what comes first—the chicken or the egg.” - 1</li> </ul>
<b>Staff for Cultural Work: Different Types &amp; Identities</b> (6 comments)	<ul style="list-style-type: none"> <li>“...possibly move the Promotores program or some version in-house. Perhaps hire a bilingual peer PSC...” - 1</li> <li>“One participant offered to do a Spanish speaking or Hispanic focused group if it is ever needed.” - 1</li> <li>“Provide more doctors.” - 1</li> <li>“Having more staff/employees be persons of different, cultural backgrounds.” - 1</li> <li>“Add more members of those communities to an advisory board.” - 1</li> </ul>
<b>No Changes Needed</b> (3 comments)	<ul style="list-style-type: none"> <li>“Seems fine.” - 1</li> <li>“Nope they are doing great.” - 1</li> <li>“No none that I could think of right now at this moment.” - 1</li> </ul>

**Specific Cultural Subgroups: Stakeholder Identified Needs from Community (Qualitative) Comments**

Primary Theme	Sub-Themes
<b>Youth</b> (5 comments)	<ul style="list-style-type: none"> <li>The mental health of youth not only in Amador County but across California following the draconian covid actions of gavin newsom and public education teachers unions will be negatively and immeasurably felt by all for decades.</li> <li>Another response stated that young people need support and hope for the future.</li> <li>Make it available to teens in school and educate teachers is all aspects surrounding behavior health. Sometimes their comments, actions or in actions make it worse.</li> <li>Hands-on and interactive presence, programs and training in all schools from T-K to 12th grade.</li> <li>Start in the elementary schools</li> </ul>
<b>Older Adults</b> (3 comments)	<ul style="list-style-type: none"> <li>I feel our seniors are underserved in our community, a community that has a high percentage of seniors. These same seniors, most of whom do not have access to transportation require more home based services. These same seniors do not (most, not all) have access to internet services. We are a rural community and because of this there needs to be more outreach and locally based (up country, Plymouth, River Pines, Fiddletown, Buckhorn, Inspiration Area) access to mental health services.</li> <li>Provide services/programs to address the hoarding, depression, and other symptoms many seniors experience prior to becoming Seniors. Senior Support Groups and provide LGBTQ support groups for not only minors but for Seniors as well.</li> </ul>

	<ul style="list-style-type: none"> <li>• I believe that the county does not provide adequate support for our aging community. There needs to be more active outreach to seniors for services where they live.</li> </ul>
<p><b>Spanish-speaking / Latinx Communities</b> (3 Comments)</p>	<ul style="list-style-type: none"> <li>• Offer services in other languages, get out and network in Spanish speaking areas. Be more willing to work with the community and other services</li> <li>• The Hispanic and Spanish-speaking community is isolated and more outreach to them needs to occur. More information in Spanish needs to be provided so that they are aware they can seek services, assistance, anything.</li> <li>• Promotores program – outreach to Spanish speaking communities seems to be going well, however, connecting with the Promotores and our Spanish speaking providers has always been challenging. In working with adolescents, there are many cultural pieces, and misconceptions around health in general. With the added stigma mental health brings, the barriers to access services are overwhelming for the Hispanic, Latino and Spanish-speaking population. There is still a large amount of undocumented people living in Amador County. This also creates barriers to the adolescents when discussing higher education and other legalities.</li> </ul>
<p><b>Native American Communities</b> (1 comment)</p>	<ul style="list-style-type: none"> <li>• The group discussed ongoing efforts to reach various groups including Native Americans, LGBTQ+, Hispanic/Latino community and geographically isolated areas located within the County [as strengths]</li> </ul>
<p><b>LGBTQ+ Communities</b> (4 comments)</p>	<ul style="list-style-type: none"> <li>• The group discussed ongoing efforts to reach various groups including Native Americans, LGBTQ+, Hispanic/Latino community and geographically isolated areas located within the County [as strengths].</li> <li>• LGBTQ Work Group/Round Table—the group is a great community resource but has failed to ‘link’ people back to behavioral health support. There is a large LGBTQ+ population misusing substances in Amador County and a lack of specific support for this group is not being addressed. There are resources being provided if LGBTQ+ folks would like to seek gender affirming care through the LGBTQ+ Provider Network, as well as resources in Sacramento County – but nothing here locally that can support those accessing those services. The #Out4MentalHealth Task Force meeting was discussed. One participant has attended that meeting and it was more advocacy focused, as opposed to connecting and linking to services focused.</li> <li>• Other barriers that exist for the LGBTQ+ community are that Amador is so small so sometimes there are conflicts within the community that deter individuals from accessing what is available to them.</li> <li>• Provide services/programs to address the hoarding, depression, and other symptoms many seniors experience prior to becoming Seniors. Senior Support Groups and provide LGBTQ support groups for not only minors but for Seniors as well.</li> </ul>



<b>Black or African American Communities</b> (1 comment)	<ul style="list-style-type: none"> <li>• Also what are we doing to be more inclusive of our African American culture?</li> </ul>
<b>Non-English Speaking Communities</b> (4 comments)	<ul style="list-style-type: none"> <li>• Access and outreach for non-english speakers</li> </ul>
<b>Veterans</b> (3 comments)	<ul style="list-style-type: none"> <li>• Accept veterans even if they don't have medi-cal. Not all veterans qualify for VA health care.</li> </ul>
<b>Geographically Isolated Communities</b> (1 comment)	<ul style="list-style-type: none"> <li>• The group discussed ongoing efforts to reach various groups including Native Americans, LGBTQ+, Hispanic/Latino community and geographically isolated areas located within the County [as strengths].</li> </ul>