

Immigrant and Refugee Listening Sessions

Between August and November 2021, Commission staff conducted a series of listening sessions to gather information on the current needs of immigrant and refugee communities and to inform the next round of stakeholder advocacy contracts. The first listening session was held with the current Immigrant and Refugee contractors to understand the most important advocacy tasks and deliverables from the perspective of local level organizations. The second listening session was held with stakeholders, CBOs, and county representatives and focused on specific advocacy tasks. The third listening session included members of the Cultural and Linguistic Competency Committee on best practices for advocating on behalf of immigrants and refugee populations.

Questions Asked Across Listening Sessions

1. What recommendations do you have regarding the approach of five local level organizations expanding advocacy, education, and outreach to their local communities?
2. Are there advantages in contracting with a statewide advocacy organization to assist the efforts of local immigrant and refugee organizations?
3. Should the Commission continue to award contracts to organizations within each of the five mental health regions, award contracts based on specific immigrant and refugee populations, or another approach?
4. What are the most important advocacy tasks to conduct on behalf of immigrant and refugee communities?
5. How can we conduct evaluation? What outcomes are we looking for? Should funds be set aside for evaluation? Should outside organizations be engaged for this?
6. For the upcoming three-year contracts, what are your thoughts on holding virtual, in-person, and/or hybrid advocacy events?

Summary of Listening Sessions

- Awarded local organizations should have the ability to be culturally and linguistically responsive who can effectively communicate messages on mental health to the local communities
- Local organizations should be awarded based on their capacity to serve specific regions that correspond to the largest or highest concentration of an immigrant or refugee community
- A statewide contractor should be included and would support the local organizations through technical assistance and advocating at the state level
- The statewide organization should have experience working with different cultural groups and should consist of immigrants, refugees, and other diverse racial, ethnic, and LGBTQ groups
- The current challenges to be addressed in immigrant and refugee communities include education for service providers, development of language training and interpreters, building up of peer-based providers, and empowerment of youth and TAY
- Contracted organizations should aim to develop trust in their communities in western health care systems, government programs, and community-based mental health resources



- Contracted organizations should provide cultural humility trainings for service providers and expand knowledge of specific immigrant and refugee groups to empower providers
- Evaluation can include workforce development, growth of trained clinicians, and increase of community-defined and affirming mental health practices
- Indicators for success of outcomes should be easily accessible to keep contracted organizations accountable
- Use a model which builds a coalition of representatives from organizations that serve immigrants and refugees to advocate at the state and local level.

Listening Session Common Themes

1. Contracts should be awarded to local organizations based on regions where there are the highest concentrations of the immigrant and refugee populations that the organizations serve
2. A statewide organization should be included in the contract and should have experience serving immigrants and refugees, have the ability to support the awarded local organizations, and have the capacity to advocate at the state level by bringing together the local community voices
3. Advocacy tasks should address outreach and awareness of existing mental health programs for community members, cultural humility training for service providers, development of an interpreter workforce, development of peer-based workers, and empowerment of youth involvement in decision making processes
4. Evaluation should be included as a component of the contracts, with measures of success being relevant to each specific immigrant and refugee community