Webinar Transcript - From Criminalization To Cultural Competence in Mental Wellness

Welcome to the National Criminal Justice Training Center webinar*From Criminalization to Cultural Competence and Mental Wellness.* My name is Greg Brown, and I will be moderating for you today.

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Today's presentation is part of a webinar series funded by BJA, focused on supporting tribal Comprehensive Opiate, Stimulant, and Substance Use Program and Coordinated Tribal Solicitation Purpose Area 3 grantees and other tribal communities in implementing responses to alcohol and substance misuse.

I'd like to welcome our presenter today, Dr. Anjali Nandi. Dr. Nandi is an associate with the National Criminal Justice Training Center and a human service consultant. Anjali is a member of the International Motivational Interviewing Network of Trainers, a licensed addictions counselor in the state of Colorado, and a nationally-certified masters addictions counselor.

Anjali has authored numerous publications, including tribal-specific resources for BJA's COSSUP tribal grantees.

As I mentioned, my name is Greg Brown, and I'm a Program Manager with the National Criminal Justice Training Center. And joining me on the panel today are Paul Fuentes, Kevin Mariano, Kevin Poleyumptewa, and they're all project coordinators from NCJTC, as well as Stefanie Wyatt-- Chief Probation officer, wellness coordinator, and Family Court coordinator, with the Southern Ute Indian Tribe.

Full biographies will be shared in the chat box. Thank you, again, for joining us, and Dr. Nandi, the time is now yours

Thank you so much, and welcome, everyone. I'm excited about this conversation today.

My hope is that we can get pretty practical in, what are ways in which we can develop a program that really supports and helps you, that addresses what are the needs of the community, how do we figure that out, how do we engage stakeholders? And then, we have a clip for you to watch towards the end of the webinar.

And I'm going to try and be as good with time as possible. For those of you who've been on these webinars before, whenever Greg and Paul and Kevin and I get together, we just-- we love the material so much that we can talk so much about it and share so many examples that, at least for me, I tend to lose track of time. So we're going to try really hard to get to the end where we can show you this clip, which I'm really excited for you to see.

So that's our plan for today. However, all of that being said, please don't hesitate to put your comments or questions into the chat. That will help us a lot. We can answer those as we go.

Greg is just incredible at keeping track of all of those questions, as well. So if we miss something, he can help us get back. He also keeps, sort of, running questions that people have asked before. So, don't hesitate to just jump in the chat and communicate with us as things go along.

All right. So, let's get started.

When we talk about reentry rehabilitation, really, what are we talking about? What are the goals? What are the really specific goals?

And of course, the goal is to reduce recidivism, maybe it is even to reduce relapse, but those two goals are not enough. That if we don't work really hard to reduce marginalization, we won't be successful in the long-term.

Now, unfortunately, any-- if we talk about our criminal justice population, just being involved in the criminal system marginalizes people. When they have a felony on their record, for example, or they have a criminal history, they get marginalized and pushed to the side, in terms of simple things, like housing or employment. Or any time they have to discuss or reveal a criminal involvement, unfortunately, the way our society responds is that it increases marginalization.

And anytime you push people to the outskirts of our community, it actually increases their likelihood of committing crime, relapsing, recidivating. Anytime we feel like we don't belong, like we're the other, it increases the risk for doing something that isn't so helpful or pro-social.

Unfortunately, we also have intersecting levels of marginalization, so levels that just sort of plop one onto the other and increase the level of marginalization we feel. So race, for example, being a person of color increases marginalization. Being anything but the way sort of our mainstream society wants us to be increases marginalization.

So we have these intersecting issues that as providers, as practitioners, we really have to pay attention to. So it's not just about recidivism and relapse prevention. Those are really important, but we can't stop there.

We also have to think about how do we reduce marginalization, which means, really paying attention to educating our communities, to making sure that we are understanding what are the needs of our communities, and how do we then address those needs so that we can continue to pull folks into the fold, as opposed to push people away?

So the way-- one of the helpful steps, the first step, is to figure out what the community needs-- what is our-- what are the gaps in our system-- which requires us to be really honest about what might be going on.

So an example-- and this is a little bit of an old example, but Greg can relate to this-- in our community, many, many years ago-- we've come quite far, but probably, 20 years ago-- we were faced with a crisis of people being unhoused. We had a lot of people who were homeless, and our community did not want to admit that we had a problem. And when we were trying to suggest that we build a shelter, that we have resources for people who are unhoused, in a community meeting, we had several community members say something like, "We don't want to build a shelter because building a shelter means that we have a housing problem, and we don't have a homelessness problem in our community."

So I hope some of you are laughing in the background because that sounds so ridiculous, but that's, sometimes, as a community, what we struggle with. People not wanting to admit that we actually have this problem within our community, that our community is not this sort of perfect bubble, and that we do have some of these issues, and that building a shelter doesn't mean creating a problem.

So there were a lot of community members who were really worried that we didn't have the problem, but if you create a shelter, then we attract people who are unhoused from other communities. And what if they come? And we don't want that in our community. All of this.

So, again, this is really-- it's vulnerable to share, so I'm hoping that some of you are laughing in the background, thinking, oh, my gosh, how could people be like this? But then, I'm also hoping that some of you can relate to the ways in which we can be so close-minded as a community.

So if there are similar examples that you have, if you don't mind being willing to pop it into the chat, I would really appreciate it. Just ways in which our community can sometimes get in our own way.

Oh, here's another example. We were working on a needle exchange program-- and Greg and Kevin, Paul, if you have examples, please jump in, as well-- but we were working on a needle exchange program, where we were-- the program was we take in a dirty needle or used needles, and then we provide clean needles, but we also provide other things.

We provide information. We provide education. It also is an opportunity to develop relationship with people. It's an opportunity to check in and see how they're doing. And sometimes, they're struggling, and it's a window into offering treatment and offering services. And you wouldn't believe how many people we were able to recruit from our needle exchange program into treatment, right?

So, however, when people first hear about a needle exchange program, it sounds like a terrible idea. What are you-- the community said, "What are you doing? This is nonsense. You are providing-- you are essentially encouraging people to use. Stop it. No, we're not going to support this."

So there are just ways in which sometimes our community can get in the way. And when we're doing a needs assessment, it's just really important to be considering some of these things about, how do we help our communities understand that it's OK to acknowledge what our needs are?

Greg?

You reminded me of another program, and I'll just talk about when you're not on the same page as one of your partners and you make some decisions that aren't best for the program. So a long time ago, we thought acupuncture-- ear-- what do they call it? Ear acupuncture? I forget.

AcuDetox?

Anyway. Yes.

So, we were doing that. This is, again, about 20 years ago. So we were doing that, and of course, our highest risk people were in jail-- in and out of jail, in and out of jail.

So we said to our jail, "Hey, can we do this treatment in the jail? And they're like, "No way. You're not bringing needles into our jail."

And we're like, "OK, well, what can we do?"

And they said, "How about we transport the people over to the Justice Center, and you can do it there, and then we'll bring them back?" And we're like, "OK, that sounds great."

So we do that for a few weeks, and pretty soon, there's this incredible outbreak of methamphetamines in the jail. So by the time they do their investigation, they trace it down to this woman, who's connecting with her dealer in the Justice Center, who's having a probation appointment. And somehow in the bathroom, they're exchanging drugs, and she's taking them back into the jail.

So, of course, it ended that entire program. So we had to start all over again many years later, and unfortunately, the jail staff seemed to stay for a long time in the jail so their memory is long. It took a lot of work.

But just problem solving, sometimes, can create problems with communication and partnerships and all of that. So just my little faux pas that pops up for me, when you talk about issues.

Yeah, we've come so far. In the jail right now, they have AcuDetox within the jail, and they-- for the inmates, but then they, also, offer AcuDetox for jail staff, which is pretty cool. So we've come a long ways.

But Greg is so right, that sometimes it's a really, really bumpy ride. So if you have other examples, please put that in the chat. And don't hesitate to-- Kevin, you just came-- you turned your video on.

Yeah, I just wanted to add something real quick to that, and the importance of needs assessment. I think, pretty much, most of us are aware of this, but the thing, I think, really makes it important and useful is that there are times when we, as service providers or department or some sort of governmental agency, have a great idea, that this is what the community needs-- yes, we need to get this going and get this started-- so once we do that, sometimes you find out afterwards that that's really not what the community is focusing on.

So without that community input, we can definitely miss the target. So that needs assessment is very important, especially when it comes to applying for grant funding, things like that. We want to start some programs. We need to make sure that we are giving the community what they need, and what they see as most important. And when you do that, then you can also create buy-in for other things to come after that, as well.

Yeah, very true. Greg.

I would just-- as people think about this, I mean, you may not be thinking about a specific program, or maybe you are, but the other thing to think about is if you go through a really good needs assessment, then you don't end up chasing grant dollars that may or may not be exactly on point. If you know what your needs assessment is and what your priorities are, it helps you focus on where can we get some help to get started, and it doesn't feel like reinventing the wheel. And you've already brought people together to talk to agree on this need, so you've got MOUs and you've got letters of support that you can get pretty easily.

And the community's already agreed. So this needs assessment can be globally, where do we have gaps in our system, and then prioritizing those, which Anjali will talk more about, and then looking at what are good fits through BJA or SAMHSA or other granting agencies that might be a really good fit for this. And you can already have momentum and a focus on this as being a need for your community. Anjali.

Yeah. You know, what both Kevin and Greg are talking about, I think, the word that comes up for me is humility. That even though I might be deeply entrenched in my community, that I feel like I know a lot about the criminal justice system, the addictions, all of those things, that I am not the expert of what our community needs. I'm one voice.

And so, even though I might have a ton of information, it's really important that we understand that we not overlay our expertise on top of the community, but that we really hear what the community is worried about.

Now, it's also important to not be reactive when we hear what their needs are. That sometimes when they talk about what their needs are, there might be a bigger kind of systems-level issue that we need to focus on. So it's just really important to listen and gather as much information from the community as possible so that two things can happen. We're coming up with the right kind of program, like Kevin was saying, and so that we're going for the right kind of money or grant funding or whatever requests we're going for, as Greg was talking about.

So we're talking about a needs assessment, but what is a needs assessment? What does that mean?

So here are some primary components of a needs assessment. You can include other things, but these are usually, what exists within a needs assessment.

So you first try and get clear, what is the purpose and the scope of this needs assessment? Like, what are you trying to figure out? What is the problem that you are trying to solve?

How are you going to gather the data to see whether this is an issue or not? What areas are you going to focus on? How are you going to analyze and interpret the data?

How do you report it back into whom do you report it? And then, how do you get some feedback from the community based on what you've found out?

So these are usually, the components of a needs assessment. And when you conduct a needs assessment, the report out is really incredibly important. But here's an example of a summary report after a needs assessment.

So when I say that the needs assessment needs to have a purpose and scope, here is an example of the purpose. So the purpose might be, to identify the needs of folks who are formerly incarcerated, and to develop a supportive reentry program. So maybe that's the purpose.

The purpose is to figure out what kind of a reentry program do we need, and then we go do our data gathering. Maybe part of data gathering is focus groups, maybe it's to take a look at all of the services that currently exist.

Just as an aside, frequently, as a consultant, I get pulled in to do needs assessments for other communities and organizations. And I'll show up thinking-- what they've said to me is we need a reentry program, we don't have all of these services. And what I find out, through focus groups and seeing everything that exists, that they actually have incredible programs. It's just none of these programs talk to each other, and nobody knows that some of these programs exist.

Also, they have misconceptions about each other. So, for example, there'll be a program that provides some mental health support. Somebody else says, "Oh, no, they have very long wait lists so we don't use them." Come to find out that there is no wait list. They just haven't been talking to each other. So there are just misconceptions like that, that sometimes happen, that are really helpful to uncover when you're doing a needs assessment.

So some of the findings might be that there are high rates of substance use or mental health issues or whatever it is, and that there's limited care available.

Maybe that's not the issue. Maybe employment is the issue, and we have great treatment programs, but what's getting in the way of people being successful long-term, when they're reentering the community, is not having employment options or housing options.

Or maybe it's something entirely different. That their cultural needs aren't getting met, that they're not being reintegrated culturally into the community. So those are some examples of what some of these key findings might look like.

And so, if those are our findings, then we need to start prioritizing. OK, based on that, what are the needs?

So is the need a substance use and mental health program? Is it job training, employment support? Is it housing assistance? Is it making sure that any program that we design has a culturally integrated component to it? Like, what are the needs-- how do we prioritize what the needs are, which then influences what our next steps are.

So once we get clear about that, we then develop an action plan. Ideally, an action plan has short-term, medium, and long-term goals about what we do next.

So maybe in the short-term, we have to develop some partnerships so that there's immediate access, for example. Maybe in the slightly longer term, we have job training workshops that are put together. Maybe in the long-term, we need some policy changes, which, of course, take forever, right? Policy changes take quite a while, takes a ton of education, a ton of support to get moving. So ideally, there are things we can make happen pretty quickly, and then things that, maybe, will take time that form our action plan.

And then the next steps are, how do we present this information back to the community so that we can get feedback and see, based on their sort of assessment of what we've come up with, are we moving in the right direction? So, for example, you go back to your community, and you say, "Here is what we found, and these are our findings based on our needs assessment, and here's what we're proposing. We're proposing developing partnerships with health providers."

During that conversation, sometimes it's really incredible what community members can come up with. They'd say-- they come up with ideas or they say, "Hey, I would like to participate in that," or, "I know a lot of businesses that are willing to provide internships for folks returning to our community," for example. So that's when you get some feedback, really cool ideas, and then you can refine the action plan based on their input.

Once you've done that, this is a summary of what it looks like. You understand what the needs are, you prioritize, and then you start connecting with whatever the resources are in the community to start being able to provide whatever the program is or put that program together.

Greg.

I was just going to ask our panelists to think about-- maybe give our audience some examples of how they've used needs assessments. So, panelists, maybe starting with Kevin M-- Mariano-- how have you incorporated a needs assessment into developing a new program? And from your professional perspective, how has that needs assessment been helpful?

Hi, Greg. I guess, you could say, our needs assessment, from the law enforcement side, would be just taking all the information that we could collect from the officers that responded to certain situations. One of those areas was the issues we had with individuals dealing with mental health issues, that we really didn't have a place to take them to because, obviously, they didn't need to go off to jail or detention or something like that. So we needed to pull together all the information and collect that and figure out what we need to do and what our response was going to be to those individuals.

So I think just being able to collect all that information was really helpful and useful in ways that we actually were able to create a position called a case manager, that they can work more closely and directly with those individuals to direct them into services-- treatment services and all. But, I guess, that would be some kind of a needs assessment of some sort. I hope that kind of answers the question there, Greg.

Yeah. From a programmatic standpoint, the needs assessment can be a very valuable tool in being able to help your program become more successful or even enhance the level of service that you're providing, because-- and I think everybody should do this every six months, every year-- do a self-evaluation-- well, not self-evaluation-- have the group or the program participants evaluate their facilitator, evaluate the program, because that's useful information that you can utilize, again, to figure out and really pinpoint what the needs of-- the people that we're servicing, what their needs are. That way, we can really be able to provide some authentic help to them and help them move forward, I think, at a faster pace.

I've had to do that a couple of times within the programs that I've run, where we've done the need assessment, find out that they want something different in their curriculum. So then we have to readjust or redevelop entirely our curriculum, as well. And sometimes that needs to happen.

And it's all based on the needs of the people that we're serving. And if we don't listen to that, then how much of a service are we really doing them? So that's what makes these needs assessments so important, because you're really pinpointing the needs of the people that you're serving.

I love that, Kevin. The just, really privileging the wisdom of the people that we serve. They know what they need. And trusting that information, being willing to gather it, and then changing what we're doing based on the feedback that we get so that we're truly providing them what they're needing. I think, that's so incredibly important.

Well, as we're talking about this, a few things came to mind. Three, I think. But the first one was to give a plug for the CTAS grant. That should be out somewhere in November. December, hopefully. So that is a notice of funding opportunity for CTAS-- Coordinated Tribal Assistance Solicitation.

But on purpose area two of that grant, it allows for strategic planning. And one of the cool things is that you get us, as your TTA providers, and we're able to walk through at least, probably, two years worth of work on creating a good-- a needs assessment, collecting data, all the different types of things that go into creating a strategic plan. And so, I think, that that's really helpful for those who can put themselves in a position to be-- to write for that grant this year, if you don't already have it. So I wanted to say that.

The other thing, one piece that we do as a training and technical assistance provider on that grant specifically is the Tribal Justice system mapping. And so, I thought that that's a good way, a lot of times, to assess our needs. And so, sometimes what we'll do is we'll walk through a program-- and I'll just use, for example, if we're talking, maybe, tribal justice as a whole, it could be like, what happens when someone needs 911 or law enforcement services or emergency services?

And so we may map out like a domestic violence situation, and what happened-- a person calls 911. How long does the response take for law enforcement to get there, if you even have law enforcement. And then we'll start kind of mapping in all the other services that may intersect and provide a service, either to the perpetrator in this case or to the victim or to kids, if there are kids. So that-- after we kind of map that out, we'll do where the strengths are in that system and where the weaknesses are in that system, and I feel like that gives a good idea and kind of helps pinpoint where some of those areas are.

The last thing I'll say is a personal experience with developing a needs assessment. We had gotten a, I think it was called, a category two, just a corrections facility grant. And on that one, we were supposed to do a needs assessment so that we could build a corrections center.

And as we begin to do our needs assessment and survey the community and collect data, we realized, if we built the prison, it probably wouldn't get much use, and that what we truly needed was like a one-stop-shop tribal justice system that offered like social services, the alternatives to corrections, all those-- courts, law enforcement, all those types of things.

So we asked the Department of Justice, "Hey, is it OK if, instead of doing a prison, we take this angle?" This was, like, 15 years ago, and they were open to it.

So we later on built the Tribal Justice Center that reflected what that original needs assessment was.

So that is a little bit of information on needs assessment, as far as like, how I think it could help the audience as they're thinking about how can a needs assessment help my program. And it really can-- really can do it, no matter what program you're trying to build, be it a whole tribal justice system, be it construction, or if it's just like, how do I improve our substance abuse treatment program. So, OK, thank you.

That was awesome. That was really, really great.

So, just highlighting a couple of things. When Paul talked about mapping-- what happens when somebody starts with a 911 call? What happens next? What happens next-- that mapping process helps you, like you was saying, determine your strengths, and then it highlights gaps. So there are things that, maybe, the response time is really quick, but then what happens next is a gap, because there are no services available, for example.

So it just highlights what, as a community, we do well, and then where are some of our gaps that we might need to fill. So that's-- a needs assessment just helps us understand and to go through just a very meticulous process of trying to figure out what we have and what we don't.

And then for us to be really flexible. So when Paul says we went in to build a prison and we came out building something entirely different, that's awesome. That means, you paid attention to your needs assessment.

You really heard the community. You figured out what they actually need, because sometimes, we pick the thing that sounds really great, and it's not really what the community needs. So way to go, being so flexible.

Greg, and then, we should bring Stefanie in, as well.

Yeah. I was just going to say, Stefanie, you're our boots-on-the-ground person these days, so thoughts about this topic on a needs assessment?

We're constantly assessing our different programs and trying to meet the rising needs that we have. For example, with our Healing to Wellness Court, even though that it's a program that's been around since 2001, we continually look at it monthly in program development meetings and start analyzing. And as tribal codes change, you have to assess and make changes to meet those needs, all while making sure that you're meeting the needs of the individual you're serving or the population you're serving.

So it can go from a program we've had forever to our family treatment court, where we're having those monthly meetings and reassessing where we're at. But as you're developing these programs and meeting individual's needs, it's OK to bring those technical assistance providers in to really help you break down your programs, and make sure that you're meeting the needs of the individuals in the community.

And I reflect back, also, on something that was just brought up by Paul is doing that mapping and identifying the needs. We just did the same instance with a juvenile correction facility. We had all these issues going on, but we had to meet with the individuals and determine, is this something the community needs? Is this something that our tribal council even wants within the community? Is this dollar amount that needs to be spent? So in assessing the needs and meeting your community and the individuals where they're at is super important.

Thanks, Stefanie. One of the thing that all of these guys are talking about, not as directly as I'm going to say, but sometimes, you have a judge, a court administrator, a tribal council, who thinks I've got the silver bullet. This is what we need. And a needs assessment can kind of back up from that, and get input from a bunch of people. And maybe you end up where Paul or Stefanie talked about, "That isn't what our need is. Thanks for pointing that one out, but our needs assessment says, maybe we should start here."

So, it can work to actually bring people to the table, especially when you've got those amazing people that have great ideas, but they may not be where you're at, or what you need right now, or something that's going to be as impactful as going through this process. Anjali.

Yeah, very true. The CTAS solicitation that Paul mentioned-- Lynn, thank you so much. Lynn put a link in the chat. So if you're interested in that and you want to prep for the next solicitation, Lynn put a link in the chat.

And I'm hoping you all can see the chat. If you can't, just put up your hand or make a noise, do something, and we'll try and help.

And then, Lynn just added another note. It usually comes out in the November, December time frame, so keep your eyes peeled for an announcement. And if you want, you can also subscribe to funding notifications from BJA. There's a link in the chat for these funding notifications, and then at the top of the page you can subscribe.

All right. Thanks, Lynn, for doing that.

The teamwork is just amazing. Love, love this.

OK, so step 1, needs assessment. Step 2 is trying to survey what services exist, and what are some partnership opportunities that we can create.

Very frequently, our solution is to just create a new thing. And unfortunately, the amount of effort that might take, the amount of expense, et cetera, isn't always-- doesn't always make it the wise choice. And so, sometimes, what's needed is just better, enhanced partnership. So surveying what exists out there, and then what are ways in which we can increase some of the partnerships related to the services that exist.

So here are some key components of the second step, where we're surveying what exists, and figuring out if there are ways in which we can enhance what exists. So are there tailored services and supports that are already there?

Do these supports promote healing and rehabilitation? Meaning, the existing agencies that are providing these services, are they in line with our values? Are they in line with the cultural values that we have, the values around recidivism, prevention, relapse prevention, supporting resilience, or is their way of functioning actually counter to our values?

So this part is important, and I know it's a tough conversation to have. And maybe, Greg, you can help me out a little bit here, but there have been times where we have tried to partner with certain organizations-- this happened, actually, really recently. We were partnering with an organization to provide some treatment services, and unfortunately, their values kept misaligning with ours. Their focus was that the client was the victim, and that the criminal justice system was so problematic that it was the criminal justice system that had to really realign with what the clients needed to do. And so, that showed up in really problematic ways.

So, for example, during court, they would hide information from probation or from the courts. So let's say the client had relapsed, had shared it with that treatment provider. The treatment provider wasn't providing that information, even though we had releases of information, et cetera. So that's an example of where there's a values misalignment.

Frequently, I say to folks that we are partnering with, particularly on very, very high risk clients, is that there are no secrets. That, as agencies, as partners, we do not keep anybody's secrets. We're not in the business of shielding client secrets because secrets now harm.

We are in the business of teaming up together to fully support the client. And so when there's a values misalignment, it's really, really important to uncover it, voice it, and then decide, do we want to all get on the same page and get clear about what our values are so we can move on forward, or is it time to split ways?

Greg.

Yeah, no, I think, I can think of multiple-- unfortunately, multiple situations where this has happened. And I'm thinking of a mentoring program, where we had mentors-- the judge and the drug court or the problem solving court said, you can only go to one doctor for prescriptions, nobody else. You're signing an agreement because you want to be in this court.

And their mentor, they call them, and said, "I'm in pain. Can you take me to the ER?" They went to the ER and got them another script. Even went to Walgreens and picked it up for them. And said, "A judge doesn't have the power to do that. They can't tell the doctor what to do." And so, the client gets in the middle.

So we're modeling this colluding behavior. And I mean, maybe that's too strong of a word. They don't mean to collude, but I think, it has to do with getting clearer on goals and objectives and values, and any baggage that you have with that agency, for sure, has to be on the table. And it can be historical baggage that you don't even-- you don't even know where it came from, but it becomes institutional in that agency. And so this is the way that they interact, but getting really clear on that.

And education, I mean, outside of a specific case or outside of a specific program, talk about what we know about helpful people and helpers want to develop relationships and really training them around relationships, and what colluding means, and the dangers of it, and where all these rules came from. Where did it-- where was it decided that a judge could say to a person, you can only go to one doctor, where is that?

People need explanations, and outside of the system, you would think, well, nobody can tell me I can't go to a doctor or go to the ER, right? And here's a court that's trying to do that.

So when you're dealing with really high risk people, they're very good at getting what they think they need, and they take good people and kind of pull them down that path. And even good programs, I would say.

And I think it speaks to the health of your partnerships when there isn't collusion. When the client can't split, it actually speaks to the quality of the relationship that you've developed with that entity that you're partnering with.

I see Stefanie hopped on, too. Yeah.

Yeah, go for it, Stefanie.

So chiming in where Greg was at. I think, that's where it's important when you're working with these other organizations and developing MOUs and outlining what the expectations are of your program, and what you need from that program so that they have an outline to follow.

Yes. So clearly stated expectations.

And Paul, I know you get excited when we talk about MOUs because, I mean, like you, find them so incredibly helpful. There's something that as organizations we can return to about what are our fundamental agreements with each other, what are we committing to, what are the expectations that you and I have of each other as organizations? So, incredibly important, Stefanie. Quite.

And also with the high turnover in our field.

Yes.

Putting those MOUs in place so when you see someone new step into that role or position, reaching out to them and sharing that MOU with them. And the understanding. And educating them on their role in the service that they're providing.

Yes. Yeah, it's so true. The continuity of the program. So MOUs was really helped with that as well, with just the continuity of the values, the agreements, all of that.

Because if Stefanie and I are partnering as two different agencies to do a particular project, she and I can absolutely be on the same page, and then with turn over, it's just, "Oh, I don't know what Anjali and Stefanie had decided." Then, we start losing the integrity of the program, so really, really important.

I saw some hearts and some thumbs ups. I'm guessing, both came from Paul. We'll keep moving forward.

There was something that Greg said that I wanted to comment on.

Greg, you talked about colluding. Oh, yes, education.

So Greg mentioned that it's frequently not their intent-- the other agency's intention-- to do a particular thing or to triangulate. And education really helps so that everybody understands what we're doing, and why we're doing it.

And when he said that it reflects the health of the partnership when there is no triangulation, I have had that experience so many times, where a client will try and triangulate.

They'll say something like, "Well, I asked you, you said no. But I went and asked this other person, and they said yes. And so, I went and did it."

Immediately, I know that our partnership is so strong. I will say, "OK, let's get that person on the phone," or, "Let's go talk to that person down the hall," or whatever. And so, we're able to get on the same page. Again, not to catch anybody doing anything wrong, but to make sure that clients know that this part in this partnership, we all talk to each other, there are no secrets, and that actually increases safety. Safety for them.

Now, I know that we're talking about pretty high risk individuals when we're talking about drug courts and things like that, but just important, I think, as an example.

OK. It's also important to understand who are our stakeholders. Who they are, what their needs are, and why they're asking for whatever they're asking for, so really trying to understand, who are the people involved? Who are these stakeholders?

So whenever you bring stakeholders to a table, it's helpful to understand what our shared vision is, and what our goals are. So, folks, I know you've all been pretty quiet so far, so I would love for you to just type into the chat, from your perspective, who are your stakeholders?

When I use that term, stakeholders, who are those people? Who are your stakeholders? Type that into the chat.

And while you all do that, I'm going to just cover one more piece. That when you do-- when you are clear about who your stakeholders are, not only do we need to hear what people's goals are, what our shared vision is, but we also need some help building some strong relationships, because without those strong relationships and these trusting relationships, we're not going to be able to get what the real needs are, and how do we actually partner, right?

How do we start to share resources? How do we get together in coming up with a shared vision? So that relationship and trust piece is incredibly important.

So yes, please type into the chat, who you think your stakeholders are.

So, Arlen, thank you so much for being the first person to jump in. Good to see your name again. And thank you for that contribution.

Great. Here come more responses. This is great.

So, some examples of stakeholders. Legislator. Councils. Sophia said the state and federal government. Dan said working for the state of Nebraska, all our taxpaying citizens would be stakeholders.

So when we're trying to come up with a plan for the community, it is so incredibly important that we include community members, that we include folks from our community. So within the programs that you manage, said justice-involved folks, job seekers, migrant and seasonal farm workers. Yes.

Tammy says the tribe. Yeah.

Claudine says the governor and the council.

The entire community. Brianne, you're absolutely right.

Other community partners, really important, like nonprofits or school districts. Yeah, great.

These are great examples. Our stakeholders, essentially, are everybody who we end up influencing, touching, or receives our services or provides those services. So it's the clients, it's our entire community.

Now, when we do stakehold-- when we reach out to stakeholders, we don't have to reach out to everybody. We just need representatives from all these communities. We just want to make sure that we're not missing certain voices.

Very frequently, when we reach out and put together, let's say, a group of stakeholders, a meeting for all the stakeholders, sometimes we forget really important voices. We forget the clients, or sometimes we forget the client's parents, if you're putting together a juvenile program, or the caregivers.

I know I've made the mistake of forgetting about schools. We were putting together something for the juveniles and completely forgot that schools are a really important stakeholder in anything that we do for our juveniles. So just thinking about what are all the organizations that either are impacted, or we come across, or that could be helpful to us.

Great. These are wonderful examples.

So building relationships, making sure that people feel included and participate, and that we're communicating effectively, and we're being careful about power. That we're-- sometimes when you bring people to the table, immediately there are power differentials.

So we have a particular stakeholder group where we have clients part of it. We also have a judge on that particular group. And in that moment, it's very easy for there to be a power imbalance, because you have a judge and you have a client. However, we have very clear expectations of everybody that at this table, all ideas from everybody are welcome, and we leave our roles and our power at the door. And we're here as members of this stakeholder community. So just make sure that power isn't, unfortunately, in the way.

It's one thing to start off something new with client-- with stakeholders. People get kind of excited. But then if things aren't going as quickly as they want, it's really important to think about how do you sustain this partnership, how do you sustain this level of engagement? We have some stakeholder groups that have been operating together for, probably, 22 years-- maybe, Greg, you'd say longer? But for over 20 years, these groups have been coming together with their particular values and goals in mind. And what sustains us is several different things.

That we use our resources wisely. That we know when people are coming together in a partnership, that everybody's time is precious. And so we use not just money resources, but time resources really carefully. That we're very targeted in our conversations.

That we might involve other sectors so that no single agency is bearing the brunt of whatever the sustainability for the partnership is. That everybody has access to resources. That if things aren't going well, we provide timely feedback.

That we keep reminding people the goal that we're focused on, but that, also, we provide feedback around how we're getting towards this goal. So if the goal is recidivism reduction, are we doing that? If the goal is reducing jail bed use, are we doing that?

So we're staying really clear about our goals, and we're trying to be as realistic as possible, and then, as a group, staying accountable. So sustaining partnerships is really, really important.

When you're thinking about actually creating the program, that's when the rubber starts to meet the road. And I'm hoping that Paul and Kevin and Stefanie, that you all can jump in here, but the process of creating a program requires us to answer so many questions. It requires us to get clear about who do we serve, but then, also, who do we not serve? So both, who gets in, but who do we say no to?

And any anytime you're setting up a new program, also be asking yourself, if I'm saying no to these folks, if there's a group of people say no to, are there services that they can access, or is that another gap in our system? We want to be careful not to be everything to everyone. That's a sure path to burnout. If we try and be everything to everyone, you're headed to burnout pretty quickly. Your program will not survive. You'll probably be outside your scope, as well.

But if we don't want to be everything to everyone, who are we attending to? And then, the folks that we are not attending to, is there a place for them to go?

So let's say you decide that the program you want to set up is for high risk, high mental health needs people, so folks who are reentering your community with high mental health needs. You have to define what are those high mental health needs. How do you assess that they have high mental health needs?

And then if somebody doesn't have high mental health needs, where do they go? So that when you say no to somebody, you're also saying, "And here's where you can go to get your needs met." Right? You're not just saying, "Sorry, we don't serve you. Good luck. Not sure where you can get services." You're making sure that there is a place.

So who do you serve? What do you provide? You provide-- we're using the example of mental health-- Do you provide an inpatient program? Do you provide an intensive outpatient program?

Do you have medical staff on site? How do you provide these services? All of these things that you have to answer.

And then, how do you know that you're successful? What does success look like?

And it shouldn't just be completing your program. It should be more interesting than that. Is there a symptom reduction for folks?

When people leave your program, how do they leave? Do they leave with housing? Do they leave with employment? Do they leave with medication? Do they leave with a solid understanding about how to manage their symptoms, for example? So, what does success look like?

Who are your resources? Who are your folks who can help when things get really tough or you need some-- you need a backup, you need people to take the folks that you are not taking? Or when you have a waitlist, what do you do?

And then, who are you accountable to? And by the way, we're all accountable to clients. But then we, also, are accountable to others, right? So, who are you accountable to? And it could be your entire community, I'm not sure. So being really clear about that.

OK, before I move on, actually, I'm just going to go back there. And I'm curious from our panel, when you've set up a new program-- and Kevin Mariano or anybody can start this. Paul. Whoever wants to go first. Stefanie-- when you set up a new program, what are some questions that you've had to really consider that maybe tripped you up or were a little tough for you?

Who should we start with?

All right, Stefanie. Go for it.

So just recently-- well, not recently-- over the past three years, we've been trying to establish a family treatment court program, and working through all the barriers of who we were going to serve, what it looked like, because at one point, referrals would come from Social Services, and they wouldn't have a criminal case. And then, we start identifying most of the individuals with that DNN also had a criminal case. So how was probation and Social Services going to work together with that case plan or those caseloads?

So getting those assessments, identifying who would need to be the case manager, what services they would be needing, that was our big obstacle. And that's why we also utilize a TA, helping us identify. Because we started-- in a lot of wellness court programs, and this family treatment court program, as we've been utilizing technical assistance and meeting with TA each month now, to break down some of our barriers in that program, and meeting the needs, we're now being told we no longer look at sobriety before moving through phases for family treatment court, that we look at engagement and stop counting sobriety time.

And that's something, when I've-- because I've been in this field for so long, we become old school and set in our ways and counting sober time when now, they're trying to re-educate us on what does their success really look like? What does their parenting look like? Are we getting them their services?

And when we get our behavioral health assessments for any of our programming, including just probation, we now have where our behavioral health providers, when we call it a behavioral health assessment, they're doing a mental health and a drug and alcohol together. And our judge writes on all of our orders, follow the recommendations. That's what their court order is, to follow the recommendation of that provider.

So at the bottom, the provider may have contact our doctor that does medically-assisted treatment just for education on it, or they may have if plan A, B, and C fail, then we're looking at residential treatment. So, just bringing those resources in to make sure you have a solid program.

Awesome. Yeah.

It's so funny, right, when we think that we are cutting edge, and we're suddenly told that we're old school? I've had that happen a couple of times, and gosh, it's such a shock. So, thanks for sharing that, Stefanie.

Kevin.

I think a couple of the biggest questions that we've had were how do you measure success? What does that look like? How are we going to justify that this program is successful?

When you're dealing with things like recovery, incarceration, parenting, those types of things, it's how do you measure what a good parent is? If they've had issues with substance misuse or alcohol, whatever it might be, what exactly is a success? Is it a success for us in the way that we see it, or is it a success for them?

Maybe they've gone a year without a relapse, and for them, that's a success, because they've never been able to do that, or six months.

So, how do we measure those-- the levels of success? Are there levels, or are we just looking for one big, ultimate goal that this is never going to happen again, then we deem them successful?

Are they spending a little more time with their children? Has their relationship gotten better?

All of those things can be labeled as success, and they should be. And that's the difficulty in measuring success, sometimes, is what exactly does success mean, and what does it look like?

And, how do we track it? How long are we going to track it? Most programs aren't going to go beyond a year to follow-up to see how they're doing, so in a large community, that can be difficult. In smaller communities, it can be a little easier because everybody knows everybody, right, so you can see what they're going through and all of those things.

So that was, I think, and can be one of the most difficult things to answer in the beginning is, all right, what is success?

I think, Kevin brings up a really good point. And one of the things, obviously, that we wanted to get to in this webinar is talking about cultural competency and sensitivity for our clients. And, is that an outcome measure, too? We need to look at what we're doing, not just what our clients are doing, because it's obviously interacting with each other. And so-- and we're realizing how important those pieces are to a holistic look at the work that our clients-- the difficult work our clients are doing, and the changes they're trying to make.

So I wonder, if we could talk a little bit more about that, as well? So, how and why is cultural competency and sensitivity important to this process for the panelists? And then, Anjali, maybe you could bring that together, that piece.

Sure. Paul, do you want to start with a response to that? And if not, we can toss it to Kevin.

Sure. Yeah. What I understood was like-- like, how to incorporate the cultural part, and how that's important. Is that correct? Yeah?

Well, for us, like, I mean, I feel like it just touched-- the culture was just like so integrated into our justice system. And maybe that's just like an-- just because I directed so many of the services that were created or so many of the programs around justice, I try to make sure that was always a part of it.

But even-- even before my efforts, for example, there was a treatment center that we worked really closely with, and they've, probably, since they've existed, have always incorporated like, sweat lodges. And whenever I started working for this tribe, in particular, I officed out of that treatment center three days out of the week, I think.

And so, seeing how they would incorporate like the sweat lodges and then, also, do some kind of-- just, kind of like their group discussions we're always in a circle, and a lot of times they would pass around a sacred object, if you will. And that signifying, you had the microphone or you had the ability to speak, and just kind of watching that treatment center.

Like, they even, I'm thinking, like they, at least at that time, they were really focusing on hiring people who knew more of culture and maybe those who may have had a past, where they were themselves suffering with substance misuse, as opposed to going for an LPC or an LADC or any of those like licensed counselors or licensed substance abuse counselors.

So just seeing that, I felt like was a great kind of, I don't know if you'd call it, like an orientation for me. So then later on, when I had more of a leadership position, and as I was developing justice programs, that always stuck to me, so i always incorporated that.

And I also made referrals to that treatment center. So I think that kind of describes just a little bit of how I just made sure, be it elders or spiritual leaders, that they had a say in what we were doing. And even in our construction, that they had a say in what the Justice Center looked like, and things that were sacred that those were reflective in our building. So that's a little bit about that.

That's awesome. Yeah, thank you. Thank you for sharing that.

I just wanted to put out there too, I think from the law enforcement side, it was interesting. Some of the areas that we were-- I guess, you can say, the questions that were coming our way was how was the program that we were looking at, to assist those individuals, with directing them into treatment service from the law enforcement side, is it going to work, and how are you going to build that connection with gaining that buy-in and that support from different programs?

I think the focus was building those collaborations with, obviously, those key important programs, such as Behavioral Health Services. At first, we were trying to knock down that wall that we had right between us and figure out how can we make this successful, and all that.

One way was that we invited individuals to the meetings, and it kind of more started small, and it rolled out to be big meetings, where we had one person, two persons, three, and ended with, I think, 10 people involved in the meetings and all that.

But it was interesting to know about the different programs that they had within-- connected in with the cultural side of it there.

We found out that they had a program there that they were taking individuals out into the fields in the community, and they were teaching them how to plant and grow things and more of taking that focus away from the site of dealing with the cops, dealing with law enforcement, going through the system of the justice system and all that.

But just learning about different types of programs that they offered really opened up the site from our side, from the law enforcement side of it. There were-- we could build that connection in with them. And I think it just took some sitting down, too, and putting it up on the board and just drawing it out for one another. And it just opened up the doors for us to be successful with the program, with that one position that we actually created and all that.

So I just wanted to put that out there for everyone there, so thank you.

Yeah, thank you. And thank you for being here and sharing that with us, but that was really helpful. Super innovative program.

OK, so let me take us to the clip that we wanted to share with you. But I'm going to start this so that we can then talk about it. And I want you to hear how important story is, what are ways in which you can relate to this, and how it supports resiliency.

All right, here we go.

So, that clip, to me, just really epitomized the importance of community, about sharing our stories, but also, about community. So, I'm wondering, if I could lean on our panel a little bit about when you were listening to that, what really rang true for you, or what were your takeaways? And then folks, participants, who are listening on the call, if you can type into the chat, what were your takeaways from that thought?

And let's start-- Greg, should we start with you?

Sure, you can start with me.

So I think, storytelling really resonates with me because I think that it gives a context for people, it gets them connected to something. And I remember, how I know about my family and my community was through storytelling and the people who could tell those stories. And funny stories about individuals, cathartic stories about individuals, even struggles that people had helped me connect, because I would think, oh, they've never had the problems that I've had, or they've never encountered these things.

And when people start doing that, then I think you feel connected to them. You understand that these things happen to lots of people.

I mean, I think, like, when you think of your parents, your parents are on a pedestal, and I think a lot of parents don't share their transgressions early on in life with their kids because they think, oh, we're going to give them permission to do that. But as you get older and you're more-- it's more of an adult-adult relationship, they start sharing this with you, and you're like, oh, my gosh, you should have shared with me years ago, thought I was the only one, or I was a failure because this. So that's what really popped up for me when she was talking about storytelling.

I know it's not as central as it is in many of the communities that we serve, the Alaska Native and Native Americans, which storytelling is central to almost everything that they do. Every conversation you have, there's a story or a context to it.

And I love what like, Paul and Kevin and Kevin bring to that because they bring it in a context of a story, which helps me learn and understand what they're talking about so much better. So those were my thoughts, just bringing it full circle. Thank you.

Awesome, Greg. Thanks. Kevin.

You know, watching that video, it definitely brought back a lot of memories, too. And you talk about storytelling, and you see that kind of process in many of the Native American-focused programs or services, and not even just in Native America, but in quite a few areas, as well. The talking circle is a place to do just that.

It's a place for people to share their story. And a lot of times, we talk about sharing your story as you're going through whatever program it might be, and you'll hear people say, well, I don't have a story. Nothing really exciting has ever happened to me, or anything like that, or don't know how to tell a story.

But once you're able to get them to start to just talk about their life and their experiences, they then begin to see and learn from one another that we do share a lot of commonalities. We may have grown up in the same community. Even if we didn't, we still have very similar experiences, as children, as teenagers, growing up, and what those things are like.

And that-- the power of storytelling is so great that it really can bring people together and create a very strong cohesiveness in your program, in any sort of program, because you're learning about each other, and then, at times, you become vulnerable, as well. And people will see that, and so they are more likely to open up a little bit and become a little vulnerable, as well.

And then once you share that vulnerability, that's when you start to create a very, very strong bond, and people will start to take care of one another, just as she said, at the end, she just walked over to the neighbors, gave them a card, and that just shows that, hey, I'm paying attention. I see you, and I'm here, I don't know you, but.

And that is a huge gesture because there's many people in our society today who are too afraid to do something like that. You can't even get them to step in to stop a kid that may be in the process of being abducted or being abused. People won't step in because they're afraid.

So when you have that courage to be able to do that, I think, it really does mean a lot.

And so when we're talking about storytelling in a group setting or service program, that's important. And sometimes, we, as service providers, forget that, I think. That we're people, too, and in some cases, you have barriers that are put up by the system that don't allow you to do that. You can't share your story with them. You can't talk about your family and things like that.

But I think, in many of our Native communities, it's something that we can't avoid, because it's who we are. We have to share that. We have to be able to create that trust, and sometimes you can't do that without a little bit of vulnerability, as well.

And love how you put it, that it's the vulnerability that actually creates deeper connections, that really builds relationship. Yeah, beautiful. Thank you. Kevin.

Paul.

Yeah, I mean, what I'm going to say probably blends a little bit of both what Greg and Kevin think. But I mean, from the video, at least as it relates to storytelling and then her message that she shares, I mean, I feel like, the resiliency has been a theme in all of our-- on all these webinars. And I feel like that resiliency-- so like, she doesn't shy away from, maybe, some of the devastations that her community has faced.

And in my interactions with tribal communities, be it, virtually or in person, I mean, a lot of times, a lot of the work that we do does-- we do shed light on areas of weakness. But it's so crazy that even as we explore and go into discovery on weaknesses that never-- people don't shy away or people don't say, "You know what? I need to move to a different community."

It's the opposite. It's like, I'm needed. I can make a difference. And so, I think, that that's what I took more from-- that's what I took, especially as she opens up about dreams, and as we look at our communities. And maybe we all can relate to her struggle in some form or fashion, but our ability to dream for a better future, a better tomorrow-- I know this sounds very cheesy, probably-- but seriously, I feel like all of us are in this field because we really do dream of something better. So that was my take.

That's beautiful, Paul. Thank you.

Stefanie, we'll end with you. If you want to share some of your responses, and then we'll go to Greg to wrap us up.

Yeah. So when I think about healing through storytelling, I believe it aids in recovery from trauma, being able to share your story. And it eliminates that feeling of being alone once you're able to tell that story, because then it connects you with others with shared experiences. And so, then you build a community of individuals.

And I was just going to share, here, this last year, Left The Label campaign was here, and individuals were able to tell their story and share their story. And now, it's popping up on my MSN. Like, all these individuals from our tribe, their stories are popping up. And the individuals that have been telling their stories, it's empowered them to want to go further, so now they're wanting to continue their journey and share their stories to help individuals find recovery and help them find a safe place to share those challenges.

Wow, that's such a great story of hope. Thank you, Stefanie.

Thanks, everybody. I think that's going to wrap up our questions for today.

An extremely valuable resource is the COSSUP Resource Center. A screenshot of that Resource Center and the web link are shown on your screen and in the PowerPoint that we obviously gave you in the chat.

Some featured resources available include funding opportunities for COSSUP grantee site profiles with data visualization tool information about demonstration projects, peer-to-peer learning, and recordings of previous COSSUP webinars covering a wide range of substance use disorder-related topics and strategies.

The COSSUP TTA program offers a variety of learning opportunities and assistance to support tribal, local, and state organizations, stakeholders, and projects in building and sustaining multidisciplinary responses to the nation's substance misuse crisis. Of particular significance is the ability to request training and technical assistance-- TTA-- services, whether you're a COSSUP grantee or not.

TTA can be requested at the link shown on your screen. And join the COSSUP community by subscribing at the link shown on your screen.

I want to thank you, again, Dr. Nandi and our panel for taking the time to answer questions and share your experiences and expertise. Thank you all to the attendees for joining us today, and we hope to see you in future webinars and communities of practice. Thanks, and have a wonderful day.