

STANISLAUS COUNTY BEHAVIORAL HEALTH AND RECOVERY SERVICES

CULTURAL COMPETENCY UPDATE

...a newsletter to address cultural issues that enable us to effectively work in cross cultural situations.

July 2017 Volume 13, Issue 7

Inside this issue:	
Genesis Program	1/2
Meeting Highlights	2

BHRS Cultural Competence, Equity and Social Justice Committee meets on the 2nd Monday of each month from 9:00 a.m. to 10:30 a.m. in the Redwood Room, 800 Scenic Drive

Genesis Program

By Amaeo Beasley, Francisca Curiel, Curtis Rager and Wanda Toomey

Genesis, which provides narcotic replacement therapy, was first licensed in January of 1983. Genesis is a medical model; (methadone maintenance and detoxification) which focuses on harm reduction. Methadone is used medically for maintenance and detoxification of individuals with opioid dependence it is prescribed to manage withdrawal symptoms, reduce cravings and can block the intoxicating effects of illicit opioids.

There has been a shift in those seeking treatment at Genesis to include those with a substance use disorder related to *prescription opiates* as opposed to a primarily injection (IV) heroin using population. The population of young adults presenting with opiate addiction has increased significantly. Opiate use may have begun as a result of receiving treatment for a legitimate medical condition that indicated an opiate prescription. While using the prescription, the process of addiction followed the natural progression of increased tolerance and avoidance of the effects of withdrawal.



According to the New York Times, "Prescription drug abuse is America's fastest-growing drug problem. Every 19 minutes, someone dies from a prescription drug overdose in the United States. The US Food and Drug Administration is in the process of taking forceful steps to control the opiate epidemic, and cut back on unnecessary prolonged pain killer use. Misuse of painkillers sends 1,000 Americans to emergency rooms daily. Opiate related overdoses have quadrupled since 1999. Approximately 2 million Americans have a substance abuse disorder related to painkillers and more than 33,000 Americans died from opiate overdose in 2015. One of the ways Genesis is responding to the opioid crisis is to provide Naoloxone (Narcan) an antidote to opioid induced overdoses to clients.

The overwhelming majority of programs have 'abstinence only' as a condition to remain in treatment. Narcotic replacement therapy (NRT) introduces an approach to recovery that focuses on the reduction of harm. Nevertheless, *the stigma of the participating in methadone maintenance presents some limitations on being accepted in the recovering community.* The perception of the client receiving methadone maintenance usually is that the individual is an injection (IV), non-motivated person seeking to achieve intoxication through the use of methadone, and is most likely continuing to use heroin. Although this represents some clients, there are many diverse individuals seeking treatment including those addicted to opiates such as pain killers and some use heroin solely by smoking it.

Genesis provides a place of acceptance, support and hope staffed by individuals qualified to deliver highly technical forms of intervention, while coordinating with other community providers. Genesis primarily focuses on prescribing methadone to manage withdrawal and cravings. Genesis serves a diverse population of clients with severe opioid use disorder. Genesis' client population is broad and diverse including individuals who are homeless, have mental illness, practice different faith traditions and speak different languages. Opiate addiction remains a subculture of the population of individuals with moderate to severe substance use disorders.

If you would like to learn more about the Genesis program, please contact: Behavioral Health and Recovery Services Genesis Program 800 Scenic Drive Building 4, Modesto, CA 95350 Phone: 209-525-6146, Fax: 209-525-5361

> Fees and Coverage: Medi-Cal and VA insurance is accepted. Self-pay is \$300 detox and \$280 for maintenance

Highlights of June Cultural Competency, Equity and Social Justice Committee (CCESJC) Meeting

Review CLAS Standard #3

Reviewed CLAS Standard #3: Recruit, promote, and support a culturally and linguistically diverse governance, leadership, and workforce that are responsive to the population in the service area. The committee broke up into groups to discuss and answer CLAS Standards #3 Exercise activity: the following questions were on the handout:

How can we continue to operationalize CLAS Standard #3 throughout our agencies? Our Programs? Some of the feedback from the committee:

- Work and collaborate with different workforce generations.
- Evaluate the Impact of social media.
- Do we need to start looking at other resources for hiring?
- Work on having competitive salaries to avoid individuals get hired/trained/licensed then moving on.
- Be willing to adapt and look at change.
- Ensure that staff have an updated Cultural Interpreters list. Work on updating our training for the use of interpreters.

As best as possible, ensure that our work force reflects the community that we serve

<u>Mental Health Awareness Month</u>

May was Mental Health Awareness Month.

- PEI staff attended a conference in Sacramento a lot of speakers and resources
- were provided.
- Drop in Center passed out big green ribbons to consumers and shared stories.
- Housing & Employment held a BBQ and had prizes for their consumers.
- RedHawk-Community Health & Recovery shared with Empowerment Center held a BBQ to honor their individuals and had prizes.

Laura's Law En Español

Community meeting on Laura's Law was held May 23, 2017 in Spanish. Stanislaus County residents can now express opinions about Laura's Law through an on-line survey. The on-line survey is to be completed only by residents who did not attend the community forums as those individuals already completed paper surveys. <u>https://www.surveymonkey.com/r/LauraLaw.</u>

If you have questions or suggestions regarding Cultural Competency, please e-mail: Abraham Andres, aandres@stanbhrs.org Jorge Fernandez, jfernandez@gvhc.org