



CULTURAL COMPETENCY UPDATE

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

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The Spirit Catches You and You Fall Down

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MHSA Document

The MHSA Plan Update FY14-15 is available for 30-day public review and comment August 14—September 12, 2014

The draft document can be viewed and printed from:

www.stanislausmhsa.com

BHRS Cultural Competence Oversight 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



To further our understanding of the Hmong American experience and to examine some of the typical problems of cross-cultural medicine within a culturally imbalanced American medical establishment, I write about a story that originated in a nearby county hospital. The Spirit Catches You and You Fall Down, the story of Lia Lee, a Hmong child diagnosed with severe epilepsy serves as subject for this report. Anne Fadiman, the books author, tells the tale of a 3 month old child whose parents take their daughter the emergency room. Fadiman’s research suggests that from the initial interaction with hospital personnel major cultural disparities, these were already firmly planted in procedures used to treat minority patients. Even though large numbers of Hmong families had received treatment in this community setting, most of their requests to enlist non-traditional healing techniques were most often ignored by hospital staff.

From the beginning, some of the typical problems of cross-cultural medicine were apparent. Both Hmong parents and the medical experts are ignorant of each other’s culture, languages, traditions, and beliefs. The translation service is non-existent and communication weak at best. To complicate the situation, the Lee’s have no skills in written word and have no way to carry out the precise medication regime directions hospital staff members prescribe in treating the child (Fadiman P. 43).

Doctors are primarily concerned with preventing further seizures but her parents have a different conception of what it means for Lia to be “healthy”. Her condition, while serious, is seen as a noble affliction in Hmong culture and her seizures are a sign that she might one day become a spiritual healer. In fact, they describe her condition as “The spirit catches you and then you fall down”, not the western construct of “epilepsy”.

While the hospital staff considers these beliefs to be largely irrelevant, they are the source of continuing conflicts between her parents and the

staff. Armed with very little cultural information to proceed in the Lee's best interest, our medical professionals engaged in a power theft as community hospital workers engage in a continuance of the status quo, a tradition that supports the unjust treatment of the minority Asian American immigrants. A belief that has strong historical ties to the treatment of Chinese workers that arrived here in the nineteenth century to build the rails and mine California's gold.

The case unfolds and the child is removed from the family and placed in foster care for a period of time. The family dedication and perseverance unites them once again with their ill daughter. The conditions worsen and the child becomes brain dead. In a state of coma, the Hmong family cultural strength shines as the daughter is cared for around the clock in the vegetative state and lives far past the expectation of the medical expert's prediction.

This treatment is shocking, of course it is. Consider this, there are often barriers of mistrust and superiority that thrive within the established public mental health systems for our mental health peers and their family members and or care providers with lived experiences treated or often not treated by their "clinical expert" providers that are often ignorant of each other's culture, languages, traditions, and beliefs. Food for thought!

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



Champion Award Name & Criteria — The revised Cultural Competency, Equity & Social Justice (CCESJC) Champion award nomination form was distributed. With the expansion of the nomination criteria, two separate awards will be awarded at the September's meeting: Cultural Competency and Equity and Social Justice.

Integrated Behavioral Health & Underserved Population Access — Ruben Imperial shared a PowerPoint presentation about the Integrated Community Behavioral Health Culture, Equity & Social Justice Committee efforts to improve mental health access to the underserved population. The purpose of the committee is to inquire how the underserved populations, primarily Latino/Spanish-speaking, access behavioral health supports both within their community and professional service providers and provide consultation on the development of new Mental Health Services Act programming targeting underserved populations.

"Cultura Cura" Training Briefing — Nancy Zamora and Luis Molina shared a PowerPoint presentation on the Cultura Cura Training. The Cultura Cura is a transformative health and healing philosophy that recognizes an individual's authentic cultural values, traditions, and indigenous practices. The PowerPoint presentation will be posted on the Intranet/Extranet.

If you have questions or suggestions regarding Cultural Competency, please forward them by e-mail to:

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