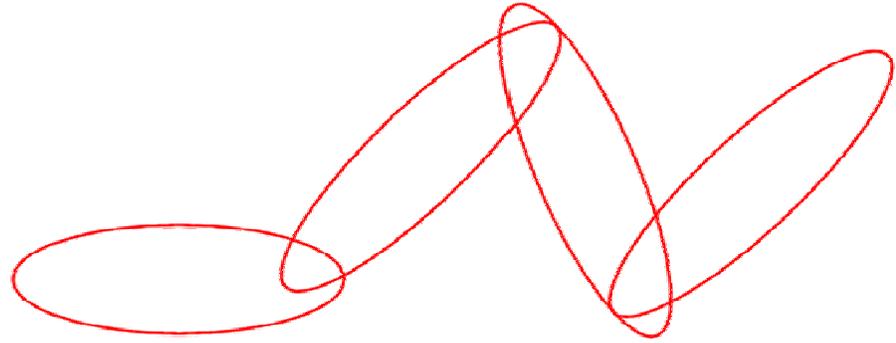


# Missing Links IV: Improving Health by Embracing Diversity



14 July 2010  
Holiday Inn Downtown  
Lincoln, Nebraska

Sponsored By:



REGION **V** SYSTEMS

*Promoting Comprehensive Partnerships in Behavioral Health*



Nebraska Office of Minority Health  
& Health Equity



**Registration Form  
2010 Missing Links Conference  
14 July 2010  
Holiday Inn Downtown, Lincoln, Nebraska**

[ ] Regular Registration Fee - \$50.00 (\$60.00 after July 01)

[ ] Student - \$40.00 (\$50.00 after July 01)

Includes Continuing Education Credit (if applicable), breaks, and lunch

Registration Fee does NOT include parking fees

NOTE: PLEASE TYPE OR PRINT ALL OF THE REQUESTED INFORMATION BELOW  
LEGIBLY TO AVOID DELAY IN PROCESSING YOUR REGISTRATION

Name: \_\_\_\_\_ Organization: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Preferred Name (for Name Tag): \_\_\_\_\_

So that we may better accommodate you, please list any Accessibility or Language Needs:

\_\_\_\_\_

Lunch will consist of a Buffet that will include Vegetarian selections.

A limited number of registration scholarships are available. Please check here if you need a scholarship application [ ]

**Deadline for Registrations is 01 July 2010. NO REFUNDS WILL BE GIVEN AFTER THAT DATE.**

Make Checks Payable to: Region V Systems  
Mail Registration Form with your Check or Money Order to:  
Missing Links Conference  
Region V Systems  
1645 "N" Street, Suite A  
Lincoln, NE 68508

Office Use Only:

Pmt made by: \_\_\_\_\_ Check #: \_\_\_\_\_ Amount: \_\_\_\_\_

## Details...

**Continuing Education Units:** 6.5 hours of credit will be awarded to meet requirements for Continuing Education Units for the following professions: LMHP, LMFT, Social Work, and Professional Counseling. CEU's for LADC have been applied for and are pending. **No partial hours will be awarded. Participants must attend the entire day to receive CEU's.**

**Lodging:** For those registrants requiring overnight accommodations, please contact: Holiday Inn Downtown, 141 North 9<sup>th</sup> Street - Lincoln, NE 68508 - 402.475.4011. Please tell the Hotel that you are with the Missing Links Conference when making your reservation.

**Cell Phones:** Please respect other conference participants and place your cell phone on vibrate or turn it off during sessions. If you should receive a call, please leave the session to take the call in a commons area.

**Dress:** Participants are encouraged to dress comfortably in layers that can be removed or added in the event of temperature fluctuations.

**Check in:** Please check in at the Conference Registration Desk at the back of the Main Lobby.

**Parking:** Parking fees **are not** included in your registration fee. Parking is approximately \$6 per day. In addition to the garage at the hotel, there are several other garages in the area, as shown on the map, below.



# Agenda

- 
- 7:15-8:00 Registration, Exhibits, and Continental Breakfast
- 8:00-8:15 Welcome and Opening Remarks
- 8:15-9:30 Plenary Session—The Pillars of Discrimination - Jessie Myles, PhD  
Racism and Discrimination take on forms that are both overt and covert, and are often hidden within societal/institutional structures
- 9:30-9:45 Break and Exhibits
- 9:45-10:45 Breakout Sessions

## Care Provider Track

### Cultural Change and Adaptation - Shireen Rajarman, PhD

Understanding the ways New Americans and other minority populations conform to the majority culture, or not; and how maintaining elements of their own culture can be healthy.

## Administrative/Policy Track

### A Model for Cultural Competence - Mauricio “Marty” Ramirez, PhD

Defining cultural competence at an organizational level includes assessing populations, organizational structure, service delivery models, and community context.

10:45-11:00 Break and Exhibits

11:00-12:00 Breakout Sessions

## Care Provider Track

### Cultural Perceptions of US Health- care System - Panel - Moderator: Maria Elena Villasante, MS Psy, PLMHP

Through a panel discussion, this session will explore the views of various cultures and their experiences navigating through the US Healthcare System.

## Administrative/Policy Track

### Unnatural Causes: Episode 7 - Mod- erators: Sarena Murray-Dacus, BA and Brenda Thompson, MHP

UNNATURAL CAUSES—is the acclaimed documentary series broadcast by PBS, and now used by thousands of organizations around the country to tackle the root causes of our alarming socio-economic and racial inequities in Health.

# Agenda

12:00-12:15 Break and Exhibits

12:15-1:45 Plenary Session—Operationalizing Cultural Competence - Rubens J. Pamies, MD, FACP

Striving for cultural competency at an organizational level is a process that involves participation at all levels.

and Lunch

1:45-2:45 Breakout Sessions

## Care Provider Track

Cultural Competence in Public Health  
Overview - Raonzil Drake, DMin

This is an Overview of the Cultural Competency Training Curriculum sponsored by the Office of Health Disparities & Health Equity. The curriculum address the question of , “what impact does cultural competence interventions play in the delivery of Behavioral Health services?”

## Administrative/Policy Track

Increasing Access, Availability, and  
Utilization of Health Service by Diverse  
Communities - J. Martin Vargas, AA

Different populations have different needs related to access, availability, and utilization of health services. Healthcare providers should adapt services to meet these needs.

2:45-3:00 Break and Exhibits

3:00-4:30 Plenary Session—National Partnership for Action - Rochelle L. Rollins, PhD, MPH

As part of the Federal Office of Minority Health, the mission of the National Partnership for Action (NPA) is to mobilize and connect individuals and organizations across the country to create a Nation free of health disparities, with quality health outcomes for all people.



## Speakers Bios

### Sarena Murray-Dacus, BA

Since January 2007, Ms. Murray-Dacus has work for CityMatCH at the University of Nebraska Medical Center. Ms. Dacus serves as Faculty/Trainer for urban communities implementing evidence-based programs, coordinates CityMatCH's annual conference, and serves as a member of the data capacity building staff team. She works with the urban health departments and their partners to provide data use and translation training in a variety of capacities. As a Project Coordinator, she is responsible for the development of new curriculum as needed, administration of all aspects of CityMatCH's data-use capacity building project, evaluation, and reporting on activities.

### Raponzil L. Drake, DMin

Rev. Dr. Raponzil Drake is the Administrator of the Nebraska Department of Health & Human Services, Office of Minority Health, where she is responsible for managing the central and satellite offices; coordinating efforts to address health disparities in racial ethnic minorities, newly arrived immigrants, refugees, and Native American people. She also monitors federal programs and private foundations for funding opportunities; and evaluates State health programs to develop recommendations, policies, and strategies for improving the health outcomes for these populations. During the summer of 2007, Dr. Drake was selected for participation in Harvard University's John F. Kennedy School of Government. Among her accomplishments are several written pieces: principal author of the chapter entitled an academic textbook, Cultural Proficiency in Addressing Health Disparities, co-edited by Dr. Sade Kosoko-Lasaki, Cynthia T. Cook, and Richard L. O'Brien, Aug. 2008; author of "Cultural Sensitivity, Cultural Awareness, and Cultural Competence, Is there a Difference?" Nebraska Medicine, A publication of the Nebraska Medical Association, Summer 2006, Volume 5, Number 3; numerous other articles on cultural competency and diversity in The Lincoln Journal Star.

### Jessie Myles, PhD

Rev. Dr. Myles is currently Coordinator of Diversity/At Risk Programs, for the Midwest Equity Assistance Center; as well as an Adjunct Professor Distance Learning Center for Doane College. Prior to these postings, he served as the Multicultural/Urban Education Project Director for the Nebraska Department of Education, Equal Opportunity Education Programs. As the Multicultural/Urban Education Project Director, he traveled throughout the State of Nebraska conducting workshops, seminars, and In-Services, on multicultural education and other diversity related issues. Before his position of Multicultural/Urban Education Director, he was an Assistant Professor of Sociology at the University of Nebraska at Lincoln. Dr. Myles was one of the first individuals to become a Certified National Trainer in a program called Project REACH (i.e., Respecting Ethnic and Cultural Heritage). Project REACH is a multicultural education program designed for infusion regular U.S. History and Social Studies Programs. The program's intent is to increase knowledge and understanding related to cultural diversity in America. As a REACH Trainer and Diversity Consultant, he had conducted workshops, seminars, and keynote addresses across the United States.

### Rubens J. Pamies, MD, FACP

Dr. Pamies has served as Vice Chancellor for Academic Affairs, Dean for Graduate Studies, and Professor of Internal Medicine at the University of Nebraska Medical Center (UNMC), since September 2003. Prior to that, Dr. Pamies was Chairman of the Department of Internal Medicine, and The Edward S. Harkness Professor of Medicine at Meharry Medical College School of Medicine. He also was Chief of Service in the Department of Internal Medicine at the Metropolitan Nashville General Hospital. While in Nashville, he was a Professor of Medicine in the School of Medicine at Vanderbilt University Medical Center. Recognized widely for his expertise on health disparities, Dr. Pamies was recently selected as a new member and chair of the Advisory Committee on Minority Health for the U.S. Department of Health and Human Services' Office of

## Speakers Bios

Minority Health. In 2005, he collaborated with former United States Surgeon General, Dr. David Satcher, to author and edit one of the first textbooks addressing inequalities in health care titled, *Multicultural Medicine and Health Disparities*. His achievements at UNMC include establishing the Virginia-Nebraska Alliance, a partnership with five Historically Black Colleges/ Universities to address a shortage of minority health care professionals; and the successful advancement of a new College of Public Health which includes a Center for Reducing Health Disparities.

### Shireen Rajaram, PhD

From 2005-2008, Dr. Rajaram served as the chair of the Department of Sociology/Anthropology at UNO. She is currently the Director of the Center for Reducing Health Disparities in the College of Public Health at the University of Nebraska Medical Center (UNMC); and a Professor of Sociology in the Department of Sociology/Anthropology at the University of Nebraska at Omaha (UNO). She has a joint appointment in the Department of Health Services Research and Administration in the College of Public Health (CoPH) at UNMC. She is an Associate faculty of the Eppley Cancer Center and is a co-leader of the Cancer Prevention and Control Program's Population Based Epidemiology research group. Dr. Rajaram teaches graduate and undergraduate classes on Women's Health, Race/Ethnicity and Health, Medical Sociology, and Health and Society. She has conducted several grant-funded, service learning projects in collaboration with community-based organizations such as Lead Safe Omaha Coalition and Nebraska AIDS.

### Mauricio "Marty" Ramirez, PhD

Dr. Ramirez is a therapist with the Counseling and Psychological Services (CAPS) at the University of Nebraska-Lincoln (UNL). He has been with UNL since 1973, starting out working as a counselor with the Department of Multi-Cultural Affairs, and later worked with UNL's Counseling Center. In 1992, Dr. Ramirez was a recipient of Weber State's Minority Lectureship Program in Ogden, Utah. He has presented numerous workshops, both nationally and locally in the areas of Mental Health, Career Planning, and Ethnic Minority issues. A Scottsbluff native, he has been recognized for his many involvements, to include; 1987 Nebraskaland's Days *Hispanic Man of the Year* and LULAC's *National Man of the Year* Corpus Christi, Texas; 1992 *Mexican Independence Day Veteran Award*; and in 2000 he received the YWCA's *Mentors and Allies Award*. Dr. Ramirez is a Vietnam Veteran and recipient of the Purple Heart.

### Rochelle L. Rollins, PhD, MPH

Dr. Rollins is Director of the Division of Policy and Data in the Office of Minority Health (OMH) at the U.S. Department of Health and Human Services (DHHS). The Office of Minority Health develops and coordinates Federal health policy that addresses minority health concerns and ensures that Federal, State and local health programs take into account the needs of disadvantaged, racial and ethnic populations. She oversees efforts to improve health disparities research coordination, evaluation and performance measurement, and data collection and reporting. Dr. Rollins is the alternate chair for the National Partnership for Action (NPA) to End Health Disparities Federal Team and participates on the federal team to implement Healthy People 2010 and 2020. Prior to joining OMH, she worked as Special Assistant to the Deputy Director of the NIH/National Cancer Institute and helped to establish several cancer initiatives in the Health Resources and Services Administration to galvanize community health centers to excel in cancer screening, diagnosis, and referral for treatment. Earlier in her career, she was the Research Director of the Multicultural AIDS Coalition in Boston, Massachusetts, where she advocated for the inclusion of more people of color in AIDS clinical trials.

## Speakers Bios

### Brenda Thompson, MPH

Ms. Thompson is currently a Project Coordinator with CityMatCH at the University of Nebraska Medical Center, Department of Pediatrics' Section on Child Health Policy. She leads work related to Perinatal HIV prevention, and eliminating racial disparities in Infant Mortality. Ms. Thompson initially came to CityMatCH in 2006, via a two year field assignment with the Public Health Prevention Service (PHPS) of the Centers for Disease Control and Prevention (CDC). During that time, she coordinated a national collaborative focused on promoting a healthy weight in women of reproductive age as a means of improving pregnancy and birth outcomes. At the CDC, Ms. Thompson worked in the areas of Health Impact Assessment, physical activity, built environment, healthcare preparedness, and injection safety. Prior to joining PHPS, she worked in HIV Prevention, harm reduction, and international health. Ms. Thompson's passion for Public Health was sparked when designing and implementing an HIV education curriculum in Zimbabwe. She is now equally passionate about domestic public health, especially with regard to health equity and the built environment.

### J. Martin Vargas

Mr. Vargas is currently the Director of the Minority Health Program at Community Action Partnership of Western Nebraska. He holds Certificates of Training on *Bridging the Gap* Medical Interpretation Training and Cultural Competency from Cross Cultural Healthcare Program, Certificate of Advanced Medical Interpreting from Connecting Worlds, and Certificate of Training on Positive Self Management (Chronic Disease Management) from Stanford University. Mr. Vargas is also an adjunct instructor at Western Nebraska Community College in Conversational and Occupational Spanish classes that focus on Healthcare. He has over a decade of experience working with the community, and has held several supervisory positions.

### Maria Elena Villasante, MS Psy, PLMHP

Ms. Villasante is the Bilingual/Bicultural Service Coordinator of Mental Health and Substance Abuse services for Lutheran Family Services TASC (Targeted Adult Services Coordination) Program. She provides direct advocacy and case management services for consumers with limited English proficiency (LEP), as well as support services for providers on an as needed basis, and develops trainings and presentations to promote the provision of culturally sensitive services for the needs of the minority populations most represented in her community. Additionally, she provides mental health services for Latino consumers as a Therapist at Lutheran Family Services. She is a cross-culturally trained professional, educated and trained in Peru, the US, and Italy. Her research and thesis were focused in juvenile delinquency, self-esteem, and moral development; and later she specialized in community organization, needs assessment and capacity mapping, and program monitoring and evaluation. Before settling in Nebraska, Ms. Villasante worked as Program Director for ADRA Peru, overseeing a program for homeless children and youth at risk, developing programs and building partnerships to empower the community to address social issues. She is co-author of the manual *Llamados para servir* (Called to Serve) published in 1999, and used to train faith communities on community development and project management.

# Federal Culturally and Linguistically Appropriate Services (CLAS) Standards

Standards 1-3, and 8-13 are Guidelines; Standards 4-7 are Federal Office of Civil Rights 1964 Requirements; and Standard 14 is a Recommendation.

1. Health care organizations should ensure that patients/consumers received from all staff members effective, understandable, and respectful care that is provided in a manner compatible with their cultural health beliefs and practices and preferred language.
2. Health care organizations should implement strategies to recruit, retain, and promote at all levels of the organization a diverse staff and leadership that are representative of the demographic characteristics of the service area.
3. Health care organizations should ensure that staff at all levels, and across all disciplines receive ongoing education and training in culturally and linguistically appropriate service delivery.
4. Health care organizations must offer and provide language assistance services, including bilingual staff and interpreter services, at no cost to each patient/consumer with limited English proficiency at all points of contact, in a timely manner during all hours of operation.
5. Health care organizations must provide to patients/consumers in their preferred language both verbal offers and written notices informing them of their right to receive language assistance services.
6. Health care organizations must assure the competence of language assistance provided to limited English proficient patients or consumers by interpreters and bilingual staff. Family and friends should not be used to provide interpretation services (except on request by the patient/ consumer).
7. Health care organizations must make available easily understood patient-related materials and post signage in the languages of the commonly encountered groups and/or groups represented in the service area.
8. Health care organizations should develop, implement, and promote a written strategic plan that outlines clear goals, policies, and operational plans, and management accountability/oversight mechanisms to provide culturally and linguistically appropriate services.
9. Health care organizations should conduct initial and ongoing organizational self-assessments of CLAS-related activities and are encouraged to integrate cultural and linguistic competence-related measures into their internal audits, performance improvement programs, patient satisfaction assessments, and outcomes-based evaluations.
10. Health care organizations should ensure that data on the individual patients/consumer's race, ethnicity, and spoken and written language are collected in health records, integrated into the organization's management information systems, and periodically updated.
11. Health care organizations should maintain a current demographic, cultural and epidemiological profile of the community as well as a needs assessment to accurately plan for and implement services that respond to the cultural and linguistic characteristics of the service area.
12. Health care organizations should develop participatory, collaborative partnerships with communities and utilize a variety of formal and informal mechanisms to facilitate community and patient/consumer involvement in designing and implementing CLAS-related activities.
13. Health care organizations should ensure that conflict and grievance resolution processes are culturally and linguistically sensitive and capable of identifying, preventing, and resolving cross-cultural conflicts or complaints by patients/consumers.
14. Health care organizations are encouraged to regularly make available to the public information about their progress and successful innovations in implementing the CLAS standards and to provide public notice in their communities about the availability of this information.