Community Defined Evidence Projects for the Hmong in Fresno and Butte Counties

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Overview of Presentation

• Learning objectives
• California Reducing Disparities Project overview
• Background of Hmong history/historical trauma  
  • Hmong mental health
• Zoosiab-Hmong Cultural Center of Butte County’s Community Defined Evidence Based Program
• Hmong Helping Hands-The Fresno Center’s Community Defined Evidence Based Program
Learning Objectives

1. Identify specific cultural beliefs and practices in the Hmong communities and how that negatively impacts their overall mental well-being

2. Recognize how culturally unique mental health services and programs meet the needs of the Hmong communities.
California Reducing Disparities Project Overview

- U.S. Surgeon General David Satcher’s call for national action to reduce mental health disparities.
- Phase I-identify best promising practices within these 5 identified community.
- Phase II-Evaluating and validating these promising practice into community defined evidenced practices.
- $60 million and 41 contractors and grantees throughout the state.
- The Fresno Center and its Hmong Mental Health Collaborative Partners and Hmong Cultural Center of Butte County are 2 of 35 grantees piloting testing projects with the Hmong community in Stanislaus, Merced, Fresno, and Butte Counties.
- All data collected during 2018-2021 will be analyzed by Loyola Marymount University (LMU) and the results of all 35 IPPs (7 IPPs from each of the five populations: African American, Asian and Pacific Islander, Latino, LBGTAQ, and Native American) will be disseminated to the public in 2022.
WHO ARE THE HMONG? How they ARRIVED in AMERICA

• Origin-”unknown”; But had long history in China;
• Today, most family can trace their roots to ancestors coming out of China (Beginning early 1900s)
• In Laos: 1963 to 1975- Involvement in the Vietnam War
• The Hmong Refugee Experience/Movement to the U.S. 1975-Early 1990s and as recently late in 2010,
# BACKGROUND OF HMONG in the U.S

<table>
<thead>
<tr>
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<th>Hmong American average</th>
<th>Asian American average</th>
<th>U.S. average</th>
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<tbody>
<tr>
<td><strong>National population(^1)</strong></td>
<td></td>
<td></td>
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<tr>
<td>U.S. residents, 2013</td>
<td>281,000</td>
<td>19.2 million</td>
<td>316 million</td>
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<tr>
<td>Population growth, 2010–2013</td>
<td>8.2 percent</td>
<td>10.9 percent</td>
<td>2.4 percent</td>
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<tr>
<td>Population growth, 2000–2013</td>
<td>51 percent</td>
<td>62 percent</td>
<td>12 percent</td>
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</tbody>
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| **Top states of residence\(^2\)**     |                        |                        |              |
| California                         | 101,096                | 6,161,975              | 38,332,521   |
| Minnesota                          | 77,575                 | 279,984                | 5,420,380    |
| Wisconsin                          | 55,542                 | 170,997                | 5,742,713    |
| North Carolina                     | 9,835                  | 295,327                | 9,848,060    |
| Colorado                           | 5,889                  | 212,320                | 5,268,367    |
| **Total population in these states** | 249,937                | 7,120,603              | 64,612,041   |

TRAUMA: Triggers

- Exposure to actual or threatened death
- Serious injury
- Sexual violation

The exposure must result from one or more of the following situations, in which the individual

- Directly experiences the traumatic event
- Witnesses the traumatic event in person
- Learns that the traumatic event occurred to a close family member or close friend (with the actual or threatened death being either violent or accidental)
- Experiences, first-hand, repeated or extreme exposure to aversive (unpleasant) details of the traumatic event (does not learn about it through media, pictures, television, or movies, except for work-related events)

Trauma

• An event or series of events that involve fear and threaten
• At the moment of the trauma, the person is rendered helpless by overwhelming force.
• Stay with the person over time.
• Causing the person to not function normally.
REFUGEE CHALLENGES IN MIGRATION

Pre-Migration
- Exposure to war
- Political Violence (Torture, GBV)
- Human rights violation
- Multiple losses
Voluntary repatriation

Migration
- Forced displacement
- Continuous losses of family and resources
- Separation
- Congestive living
- Uncertainty of future
Social (re)integration

Post-Migration
- Cultural & language barriers
- Discrimination
- Acculturative stress
- Identity crisis
Resettlement

Source:
Recognizing Mental Health Issues in the Hmong Elder Community

Hmong Cultural Center of Butte County
Seng S. Yang, MA
Director
Zoosiab means happy in English. This program is mainly targeted at Hmong elders, age 50 or older, however, it’s open to the public. Participants who are under the age of 50, can also be referred from Behavioral Health.
Overview of Zoosiab

• Community-based prevention and early intervention program that aims
  • prevent and/or reduce further mental health problems and social isolation among Hmong elders by strengthening sense of community and social engagement
  • improving both psychological and spiritual mental health
  • and increasing access to culturally and linguistically appropriate mental health services
• Designed to be culturally meaningful and relevant for Hmong elders
• Aimed to improve access and utilization of mental health services, mental health status (psychological distress, emotional well-being), social well-being (social isolation, spirituality, social support), and general health knowledge for Hmong elders in the program.
Culturally Appropriate Services

- Recreational Groups
- Ntoj Ncig (means tourist, similar to field trips)
- Community Garden
- Referrals/Resource connections
- Individual services
Recreational Groups

• Two sites
  • Chico and Oroville

• 5 health topics
  • Physical Activity, Cultural Activity, Mental Health, Health Education, and Life Skills
    • Each topic lasts 8 weeks, 7 weeks of lesson and activities and 1 week for quiz.
  • All topics have a pre/post survey and pre/post quiz.
    • Survey assesses their attitudes and beliefs of the health topic and the quiz assesses their knowledge before and after the alth topics.
Ntog Ncig

- Intended to increase participant’s social interactions and increase mental well-being
- In-county and out-of-county field trips
- Exploration
- Build natural peer support and relationship
Community Garden

• Culturally appropriate therapeutic intervention to help increase participants’ social interaction

• Promote community involvement, mental well-being, socialization, and physical activity

• Share and distribute crops with community members and partnering agencies
Referrals/Resource Connections

• Resource connections are referrals made to and from Butte County Department of Behavioral Health (BCDBH), health care providers, or cultural brokers (shamans or community leaders).

• Staff takes cultural considerations into account when making individual referrals to BCDBH.

• Shamans are also identified as an effective mental health resource to support the Hmong population.
Individual Services

- Navigation and linkage to community resources and field visits
  - Field visits—primary care appointments/mental health appointments

- Home visits
  - Case managing

- Office visits
  - Culturally appropriate for individual counseling and discussions
  - Empowerment and advocacy support

- Purpose is to provide accessible linguistic and culturally appropriate linkage to mental health care needs and services.
Challenges and Successes

• Challenges
  • Community outreach
  • Linkage/navigation

• Successes
  • Fiscal year 2017-2018—78 enrolled participants from Chico and Oroville
  • Established an Advisory Committee
    • They oversee the evaluation and supports the program for growth
  • Participants are able to retain some knowledge of the health topics
Hmong Helping Hand

The Fresno Center
Dr. Ghia Xiong
Ms. Melanie Vang
What is causes it?

• Tom drown at the lake?
• Tom and Jerry went hunting, Tom shot Jerry thinking he was a deer?
• A healthy and jolly 3 y.o girl went to visit her grandfather’s grave at the cemetery, then came home and was crying irritably for the next 3 nights around the same time?
• Jerry was diagnosed with cancer?
• Tom feels weak, tire, does not want and have energy to do anything.
Here is how Hmong sees it?

• Tom drown at the lake?
• Tom and Jerry went hunting, Tom shot Jerry thinking he was a deer?
• A healthy and jolly 3 y.o girl went to visit her grandfather’s grave at the cemetery, then came home and was crying irritably for the next 3 nights around the same time?
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Traditional Hmong Beliefs

- Animism—that all things living or nonliving have a spirit.
  - Goal: To be in harmony
- Human have many 3 souls (ntsuj) and many spirits (32-plig)
  - Causes of illnesses
- Shamanism (spiritual)
  - Ways restoring balance or healing (kho)
The Hmong Helping Hands (HHH) intervention is a direct prevention and early intervention program that aims to reduce depression, anxiety, and acculturation issues in Hmong adults and elders by improving their physical, psychological, social, and spiritual well-being and increasing their knowledge/awareness of mental health issues.
PROGRAM COMPONENTS

Hmong Talk Based on the Hmong Cultural Practice of “Qhuab Ntuas” (Khua-Thua)

Ncig Teb Chaw (Exploration)

Cultural Arts, Crafts, and Activities

Maij-Maij (Beautiful)

Hmong Spiritual Healing
Component 1: HMONG TALK

- Culturally based from the Hmong’s “Qhuaab Ntuaas” (Khoua Thoua) and is combined with current idea of from modern day Ted Talk:
- Goal: To inspire, motivate, and provide insight for personal growth through having special speakers coming to talk with the participants.
- Addresses the person’s psychologically and socially
Component 2: Ncig Teb Chaws

- Addresses: Socially and physically
- Exploration of the environment-getting to know the environment and its resources gives a sense of belonging and mechanism for survival.
- Getting out means walking-walking is good exercise for the body. For Hmong America is a scarier jungle than back in Laos.
Component #3 Cultural Therapeutic Arts, Crafts, and Activities

- Addresses socially and psychologically
- Cultural arts, crafts, and activities have been employed therapeutically to help all people cope with everyday life problems.
- Also, cultural arts, crafts, and activities can help people to find new meaning and purpose.
- This component will blend past and present cultural therapeutic arts, crafts, and activities to help participants engage in a more meaningful daily activities and learn more about themselves.
Component 4: Maij-Maij (Beautiful)

- Addresses psychologically
- For Hmong culture beauty is forbidden because acknowledging in words would cause you to be ill and physically looking beautiful in public would alarm negative perception from others, Hmong only do this during the Hmong New Year.
- However, we know that when a person feels physically beautiful he/she also feels emotionally happier and physically more active
- So, our goal is to help and make a person to feel and see themselves beautiful through improving looks like grooming, hygiene, positive self talking and thinking.
Component 5: Hmong Spiritual Healing

- Address spiritually.
- Hmong believe strongly that spiritual plays a significant role in a person’s illness.
- This component will explore Hmong’s spirituality and conduct cultural therapeutic activities that will help to empower and restores one’s own inner strength and self.
- Counselors working with respected spiritual healers will collaborate together with the participants and/or group members to implement various cultural healing practices.
5 Themes Emerges

- Together these 5 components address the physical, mental, social, and spiritual aspects of a person.
Questions
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References:


