## Join the Conversation! Culturally Responsive Evidence-Based & Community-Defined Practices for Mental Health Session 5: Achieving Whole Health

Martha Staeheli: Welcome everyone, thank you for joining us today and for your interest in our listening series will be starting in just a few minutes we're letting everybody get logged in and in the meantime, we invite you to go to the chat box and enter your name and where you're joining us from.

Martha Staeheli: We also have a couple of reminders up on the screen, so please take a look at that.

Martha Staeheli: And we'll get started in just a moment.

Martha Staeheli: Welcome everyone For those of you who just joined us, we will get started in just a minute, please let us know who you are and where you're joining us from in the chat.

Martha Staeheli: And it will be just one minute.

Martha Staeheli: it's great to see that we have people joining us from all over the country.

Martha Staeheli: From coast to coast, so we will get started.

Martha Staeheli : in just one minute if you're just joining, please put your name and where you're joining us from in the chat.

Martha Staeheli: and take a look at the reminders on the screen.

Martha Staeheli: Okay let's get started.

Martha Staeheli : Welcome everyone i'm Martha staley i'm the school mental health site lead at the New England htc, which is based at the Yale school of medicine.

Martha Staeheli: And i'm very excited to facilitate today's session Thank you so much for joining our conversation today on culturally responsive evidence based and Community defined practices for mental health.

Martha Staeheli: This listening series is a six part series, led by the htc cultural responsiveness working group.

Martha Staeheli: So today's session is the fifth of the series focusing on achieving whole health and we are so excited to start a lovely conversation with you all after i've gone through a few housekeeping items.

Martha Staeheli: For those of you who are just joining us please let us know where you're joining us from by putting your name and your location in our chat box.

Martha Staeheli: First of all, in terms of housekeeping items we want to let everyone know that we've made every attempt to make today's presentation secure.

Martha Staeheli: If we need to end the presentation unexpectedly, we will follow up using your registration information and gabrielle you can go to the next slide please.

Martha Staeheli: And the session today is being recorded and will be posted on our series web page within one week.

Martha Staeheli: you'll receive an email within a week of today's session with the recordings slide deck and Info on how to access a certificate of attendance.

Martha Staeheli: If you have any audio or technical issues during the session, please use the chat box, which will be open for you to communicate with our teens so that they can assist you.

Martha Staeheli: If you have resources you'd like to share with other attendees please also enter those into the chat box as well, we always welcome people sharing the resources that are meaningful to them, if you have questions for the presenters please do enter those into the question and answer pod.

Martha Staeheli: Rather than the chat we have our lovely Working Group co chair Christina clayton monitoring the Q amp a pod and she will ensure that we address questions throughout the session.

Martha Staeheli: we've scheduled time for Q amp a portion with our guests toward the end of the meeting today, but please feel free to submit your questions at any time.

Martha Staeheli: A reminder that captions are available for today's session for those who would like to enable or disable click on the CC button on the bottom of the zoom platform for options.

Martha Staeheli: Now all attendees are muted and cannot share video.

Martha Staeheli: You might be wondering how we plan to have you all converse and engage with us and we will be using the poll everywhere tool to gather your comments throughout the session today next slide.

Martha Staeheli: We will be asking for you to participate in a couple of these polls throughout this.

Martha Staeheli: presentation today for those not familiar with poll everywhere, this tool allows us to share a live poll, with everyone in the audience and you can easily participate by following the steps on the screen.

Martha Staeheli: will also add all of that information into the chat box every time we have a poll to share with you all.

Martha Staeheli: And we'll give everyone a minute to open your web browser and get logged into poll everywhere, or to get your phone and text your way in but don't don't worry when we get to those questions you'll get reminders about where to go and what to do.

Next slide.

Martha Staeheli: So again, welcome to everyone we're so glad that you've joined us this afternoon, if you're new to us this six part series is a collaborative effort of the mental health, technology transfer centers which are known as the.

Martha Staeheli: We are a network funded by the substance abuse and mental health services administration or samhsa.

Martha Staeheli: This network includes 10 regional centers a national American Indian and Alaska native Center a national Hispanic and Latino Center and a network or needing office.

Martha Staeheli: Our collaborative network supports resource development and dissemination training and technical assistance and workforce development for the mental health field.

Martha Staeheli: Next slide.

Martha Staeheli: As I mentioned, there are regional centers across the country so after today's session, we hope that you'll visit our website and find your own regional Center to keep in touch with us for more resources and training opportunities and everything that we do is all free of cost.

Martha Staeheli: So please let us know if you would like to reach out to regional centers or have any questions about that.

Martha Staeheli: Next slide.

Martha Staeheli: Here we have a really quick disclaimer this presentation was prepared by the htc network under a cooperative agreement from the substance abuse and mental health services administration.

Martha Staeheli: The opinions expressed in this learning session or the views of our moderator and panelists and do not reflect the official position of the Department of Health and human services or samhsa.

Martha Staeheli: Next slide.

Martha Staeheli: As part of receiving samhsa funding, we are required to submit data related to the quality of this event.

Martha Staeheli: At the end of today's training, we ask that you please take a moment to complete a very brief survey about today's session all attendees will be automatically redirected to the survey on the Internet browser upon exiting the webinar so please take a couple moments to do that.

Martha Staeheli: that's hey, thank you for your patience, as I went over those reminders and housekeeping items let's officially get started again this is session five of the six part listing series focused on culturally responsive evidence based and Community defined practices for mental health.

website.

Martha Staeheli: Our network uses and encourages all to use affirming respectful and recovery oriented language and our trainings and events, a reminder that, as we engage in conversation today.

Martha Staeheli: let's be mindful to use language that is inclusive and accepting of diverse cultures genders perspectives and experiences and if you're just joining us please continue to let us know where you're calling from and what your name is in the chat.

Martha Staeheli: Next slide and it's important to provide just a little bit of context as to how we got here this series is being led by the mh gtc cultural responsiveness working group.

Martha Staeheli: This group aims to disseminate culturally appropriate information and provide technical assistance for the mental health field to improve access to culturally responsive mental health services.

Martha Staeheli: Our group recognizes the importance of acknowledging and promoting cultural culturally inclusive mental health practices that exist in the mental health field and that led us to plan and host this six part series.

Martha Staeheli: For this session, some of our goals are on the screen here, we aim to engage you all in an interactive conversation about culturally inclusive mental health practices.

Martha Staeheli: explore strengths and barriers of Community define practices and identify ways to increase promotion of ED piece in Community defined practices in technical assistance and trainings offered by the mh ttc network.

Martha Staeheli: here's what we'll be covering in today's session will begin with an overview of achieving whole health in the context of the Asian American and Pacific islander or API population.

Martha Staeheli: As well as how the class Sanders pertained to a wh after a couple of poll questions will move to the examples and lessons learned during the implementation of a wh.

Martha Staeheli: and hopefully we'll have some time at the end for some q&a with our speakers, so please make sure to write your questions in the Q amp a pod on your screen to ensure that we see them.

Martha Staeheli: Okay, everyone we're going to start our first poll coming up next we're going to add the instructions on how to join in the chat box, but it's also up on the screen here.

Martha Staeheli: The easiest way to join, is to open your browser to the web link there or, if you have your phone readily available text n w m htc to the number 22333 and i'll give everyone another 20 seconds to get in there.

Martha Staeheli: Is you're getting that setup.

Martha Staeheli: Our first question is how familiar how familiar, are you with achieving whole health balancing mind body and spirit.

Martha Staeheli: scale from zero to five with zero being not familiar at all, this is the first time you're hearing about it to five being very familiar so we'll just give you another moment to.

Martha Staeheli: get to the poll, and let us know how familiar, you are looks like.

Martha Staeheli: Those of us who are just learning.

Martha Staeheli: Are the biggest group so far, but there are quite a few people who are also moderately familiar with a wh.

Martha Staeheli: And even a couple experts who are very familiar so that's great it looks like we have a wide range of experience with this terrific Program.

Martha Staeheli: So we will with that we'll get started, and I will introduce our terrific panelists.

Martha Staeheli: it's my pleasure to introduce our two phenomenal speakers for today's session.

Martha Staeheli: Dr pata so you moto is a feminist scholar writer educator diversity trainer mental health activist jewelry designer and avid bicyclist.

Martha Staeheli: she's The co chair for the greater Boston regional Suicide Prevention coalition and the Chair of the Massachusetts coalition for Suicide Prevention alliance for equities.

Martha Staeheli: People of color Caucus as well as a trainer and wellness coach for the national Asian American Pacific islander mental health associations achieving whole health Program.

Martha Staeheli: We also have today, Dr Rochelle a spirit to who provides training technical assistance.

Martha Staeheli: and capacity building at the local territory tribal state and national level in multiple systems, which include mental health substance use public health and education.

Martha Staeheli: Dr spirit to is the Co director of Sam says Pacific Southwest and htc which includes Hawaii California Arizona Nevada and the Pacific Islands.

Martha Staeheli: she's also a founding partner with change matrix a minority and women owned small business that motivates advantages and measures change to support systems that improve lives so with that i'm going to pass it to pata and Rochelle.

Martha Staeheli: rate.

Rachele C Espiritu (she/her): Thank you so much Martha and thank you to the team for all of your support to be able to share information about achieving whole health with this.

Rachele C Espiritu (she/her): group pots and I are really excited we've been doing this training for a while.

Rachele C Espiritu (she/her): And it started off with the national Asian American Pacific islander mental health association, so I just want to acknowledge the executive director Dr DJ EDA.

Rachele C Espiritu (she/her): who unfortunately wasn't able to be on today's call so Martha had presented an agenda a little bit earlier but i'll just go over that again quickly.

Rachele C Espiritu (she/her): We do have on the next slide we do want to share a little bit of context regarding.

Rachele C Espiritu (she/her): The Asian Pacific islander needs currently as well as share more about achieving whole health with you give you some examples and.

Rachele C Espiritu (she/her): and talk about how it works with different cultural groups as well and.

Rachele C Espiritu (she/her): I was curious to see that we do have folks who are very familiar with achieving whole health, so we invite you to share your experiences with us also on chat because.

Rachele C Espiritu (she/her): That is how we continue to learn as well about how to implement the program in different settings and in different contexts so welcome.

Rachele C Espiritu (she/her): So in our next slide we wanted to just share a little bit of the context around what's happening right now for Asian and Pacific islanders in the US.

Rachele C Espiritu (she/her): We know that Asian Americans and Pacific islanders are experiencing some really unprecedented and growing health equity issues that have been brought out brought on by.

Rachele C Espiritu (she/her): The pandemic, as well as that anti API hate that we have been seeing across our country and, in fact, just yesterday, the Asian and Pacific islander.

Rachele C Espiritu (she/her): American health forum publish the results of a net and nationwide coven 19 survey that focus specifically on diverse Asian American native hawaiian Pacific islander communities.

Rachele C Espiritu (she/her): With over 1500 people participating in this study and you can see some of the things that they found.

Rachele C Espiritu (she/her): From their survey, so we know that racism targeting Asian Americans is not new in the US history, especially with exclusionary immigration policies that systematically barred immigration from Asia until 1965.

Rachele C Espiritu (she/her): The antagonistic us China relations and the rhetoric that is going on around the virus it's really exacerbated racism against Asian Americans.

Rachele C Espiritu (she/her): So what we see are you know these serious health disparities that are happening some isolation that is often do to language and cultural barriers and that's not new those have existed for decades.

Rachele C Espiritu (she/her): But what we're seeing is that more Asians are experiencing racism or more stress by the The anti Asian hate that is happening right now and that they're really as a result of that also showing.

Rachele C Espiritu (she/her): This racial comma and psychological and emotional harm.

Rachele C Espiritu (she/her): being caused by that racism, and so what we're hearing in different groups and i've been doing a lot of listening sessions across the country and and specifically in in Denver Colorado where i'm based as well.

Rachele C Espiritu (she/her): Really sharing a lot more from people who are experiencing depression, anxiety fear and it's showing up sometimes as physical symptoms as well.

Rachele C Espiritu (she/her): So with that that context wanted to ask you in a poll to hear from you to find out well what are, what do you know about what are some of the needs of Asian Americans native hawaiians or Pacific islanders in your own community.

Rachele C Espiritu (she/her): And just wanted to note that you know in some communities, the numbers of.

Rachele C Espiritu (she/her): Asian Pacific islanders are really small, so you may not be as familiar, and yet the experiences that they are having as a result of.

Rachele C Espiritu (she/her): Our current context, are very real, so we invite you to share a little bit about what you might know about the needs of this particular population in your own community.

Rachele C Espiritu (she/her): And i'm not sure it's completely fine or you're not you don't know yet and so we'll talk a little bit about how might you get to find out a little bit more about this population to.

Rachele C Espiritu (she/her): And that might have been part of your interest in joining for today as well.

Rachele C Espiritu (she/her): I see that someone indicated in the chat feature that there may be jobs might be a need.

Rachele C Espiritu (she/her): Having more therapists available that speak and native language is is a need in one community.

Rachele C Espiritu (she/her): And an interest in learning more.

Rachele C Espiritu (she/her): we'll just wait a couple more minutes.

Rachele C Espiritu (she/her): Here, what others are sharing.

Rachele C Espiritu (she/her): So access to medical and behavioral health care and native language to be heard right, I think that is something that the Asian community has experienced a lot is that their voices aren't necessarily heard in a lot of spaces, so how to think about engagement as well.

Rachele C Espiritu (she/her): Also, noting that in some regions of the US that the Community the Asian Pacific islander community is growing because of different immigration or refugee patterns that you might be seeing there.

Rachele C Espiritu (she/her): So I want to thank you for engaging in this poll everywhere.

Rachele C Espiritu (she/her): And we will go on to the next slide and I think Martha the poll probably can continue running because i'd love to take a look at some more of these answers, later on, as well.

Rachele C Espiritu (she/her): But anyway, I wanted to make sure many of you are probably familiar with the term Social determinants of health are recognizing that different factors, besides one's personal.

Rachele C Espiritu (she/her): physical health impact our health and noting that these factors can be different things like transportation or your built environment.

Rachele C Espiritu (she/her): or education, all those other kinds of factors that impact our own health that we're becoming more and more.

Rachele C Espiritu (she/her): Aware of and noting that they, these are important asset aspects to be considering and so with achieving whole House.

Rachele C Espiritu (she/her): As you saw in the title this intervention focus focuses primarily on the body, the mind and the spirit.

Rachele C Espiritu (she/her): And so we feel like it was really important as this as this intervention was being developed to start with that broader perspective that takes into consideration that those little determinants of health.

Rachele C Espiritu (she/her): We noted that the Western perspective of health and mental health often separates the body and the mind.

Rachele C Espiritu (she/her): And yet we know for many cultures that that is just not true.

Rachele C Espiritu (she/her): In the way that we approach our health, that there are so interconnected and there's been a lot of research that has shown a direct correlation between.

Rachele C Espiritu (she/her): The two, as well as the impact of spirituality on the individual's physical and emotional health and so we like that this intervention really looks at all three and kind of equal measure.

Rachele C Espiritu (she/her): And, and that we understand that the social, the economic, the political other factors in a person's environment really play an important role in a person's emotional and physical health, so we have done a lot to try to figure out how to integrate that into this particular intervention.

Rachele C Espiritu (she/her): So we wanted to hear from you a little bit again around what do you see as the relationship between mental health and physical health so we've got one more poll here and.

Rachele C Espiritu (she/her): And just wanted to note too that as you're answering these questions we've tried to integrate these are questions that we also asked our participants as they're going through a training so that we can kind of create that common ground and understanding.

Rachele C Espiritu (she/her): Amongst the wellness coaches, as they then provide this intervention to their program participants So these are important reflections for all of us to think about and to understand in from different cultures, what the different perspectives have been.

Rachele C Espiritu (she/her): Know we're being deeply intertwined extremely related that if physical health isn't doing well on that people can experience how things it which in turns worse than the physical symptoms.

Rachele C Espiritu (she/her): So it's nice to see in this audience tara's can have a general feeling of this is important, you can't have good health without good mental health as well.

Rachele C Espiritu (she/her): So that if we're we're if we're not addressing both that we're probably one can't exist without the other.

Rachele C Espiritu (she/her): And so, taking that whole health approach allows us to to take a look at people as whole human beings, which is what achieving host whole health does.

Rachele C Espiritu (she/her): Great well thanks for those continued responses appreciate that we're going to go ahead and I want to i'm I want to share information with you now about achieving whole health.

Rachele C Espiritu (she/her): And you can let that run as well too for a while, so achieving whole health was started about.

Rachele C Espiritu (she/her): I want to say eight or nine years ago at this point it's an interactive one day training that can be.

Rachele C Espiritu (she/her): Really readily incorporated into ongoing services and what it does, is it gives providers and Community members.

Rachele C Espiritu (she/her): The tools and the knowledge and the skills to become what we call wellness coaches.

Rachele C Espiritu (she/her): So as wellness coaches program participant people who go through the training, help the Asian American native points of the calendar community.

Rachele C Espiritu (she/her): learn how to make healthy decisions and how to take an active role in their in their own self care and this training is based on Sam says whole health action management Program.

Rachele C Espiritu (she/her): Which is a nationally recognized peer specialist whole health training program and what we did was we modified we brought together a group of.

Rachele C Espiritu (she/her): stakeholders to engage in a process of reviewing that training and then modifying it and redesigning it for us, so that can be appropriate.

Rachele C Espiritu (she/her): for use with it a an hdi community and one of the things that we were grateful for was that we had some initial grant support from the office of minority health.

Rachele C Espiritu (she/her): And the national network to eliminate disparities and behavioral health or the NED also has been doing professional development.

Rachele C Espiritu (she/her): Opportunities for almost 11 or 12 years now, at this point and achieving whole health has been one of the Community to find evidence based programs.

Rachele C Espiritu (she/her): That has been highlighted through net learn, which is also supported by Samsung.

Rachele C Espiritu (she/her): And so, part of the context behind developing this program was kind of this note, noting that there's a real lack, and I think this was mentioned in one of the earlier polls, is the lack of individuals are professionals who have the language, the cultural.

Rachele C Espiritu (she/her): kind of whole health perspective to address the health and mental health needs of our communities.

Rachele C Espiritu (she/her): And so, this program is really designed to to train Community Members also so there's no need to have a credential we actually.

Rachele C Espiritu (she/her): Really focused initially on training peers and so Community members peers therapists so to become wellness coaches and achieving home health and so what that has done is allowed us to increase the number of individuals.

Rachele C Espiritu (she/her): Who can help improve the outcomes in this Community, and it gives voice to Community members to ensure that.

Rachele C Espiritu (she/her): The traditional values, our customs our beliefs and practices are incorporated into our understanding of what it takes to provide quality care.

Rachele C Espiritu (she/her): So it's it's the team has belief or when the pima was kind of developing this this curricula and it's the belief that the Community can really heal itself if given the proper support the resources and the encouragement to do so.

Rachele C Espiritu (she/her): And so Given this background and the end and approach achieving whole House really does meet the office and minorities health.

Rachele C Espiritu (she/her): their principal class standards are there, culturally and linguistically appropriate services standards.

Rachele C Espiritu (she/her): of providing an effective and equitable a very understandable and accessible way to access, quality care and services that are responsive to the different beliefs and practices in the Community.

Rachele C Espiritu (she/her): So let's see we can go on to the next slide and i'm going to tell you a little bit more about the actual practice now.

Rachele C Espiritu (she/her): Actually i'll start off with the training, so we do this training, I said earlier in one day originally It took three days and we've found that we couldn't keep people away from their day jobs or other commitments for that long and so we've kind of slowly shortened it over the years.

Rachele C Espiritu (she/her): But it's divided into three different sections where we first provide an overview of achieving whole health.

Rachele C Espiritu (she/her): We talk about these three life domains, and the top 10 life elements and then we support people to go through creating a person centered whole health goal.

Rachele C Espiritu (she/her): And so, in each of these elements, you can see we've got three life domains of the body, the mind and the spirit.

Rachele C Espiritu (she/her): And we've got 10 life elements that are under those domains and ideally these exist in balance with each other to promote a healthier lifestyle, using a whole house approach.

Rachele C Espiritu (she/her): And so, as we go through the training participants can choose one or more areas of concern or focus but eventually by the end of the training you choose one goal to develop.

Rachele C Espiritu (she/her): Around one of those 10 life elements, and so the neat thing about going to this training is that you kind of experience it as as a participant would also later on, so it's very experiential.

Rachele C Espiritu (she/her): And then the other thing that that we want to note is that research shows that it takes about eight weeks to effectively change behavior and so.

Rachele C Espiritu (she/her): This program runs about 11 weeks long so usually what we do is in the first three weeks the wealth will cover the wellness coaches will cover an overview they'll review some of the LIFE elements and then.

Rachele C Espiritu (she/her): And then in week three go over the next three things which will see in the next slide if you can toward.

Rachele C Espiritu (she/her): And and in reaching once you get to identify what your goal is what we actually help wellness coaches think through a goal that that needs impact criteria and we'll talk about that a little bit later.

Rachele C Espiritu (she/her): um you help participants develop a realistic action plan and with confidence, because people need to feel confident that they can achieve their goals their whole house goal, so we help them.

Rachele C Espiritu (she/her): Create that action plan, and then the eight weeks are really the next eight weeks of the program are really to provide that support and that encouragement.

Rachele C Espiritu (she/her): For people as they as they try to reach their whole health goals, and so you do weekly check ins as a support group asking about how the goal went that we.

Rachele C Espiritu (she/her): Did you achieve it and you want to celebrate if there were some challenges, what can we do to support you and then what's the next week school and so it's a very strength based.

Rachele C Espiritu (she/her): You we'll talk about that a little bit later it's a very strength based program that is supportive to program participants.

Rachele C Espiritu (she/her): On so now what we want to do is bring to life, some of the strategies that we talked about in this three domains so i'm going to go ahead and turn it over to pata to share a little bit more about.

Rachele C Espiritu (she/her): The body, the mind and the spirit and the activities that we do as part of the training so pata Thank you.

Thanks Michelle.

Pata Suyemoto: So one of the things I wanted to share briefly was the fact that I started out as a being trained at the NED.

Pata Suyemoto: As a wellness coach and then delivered the program in the Community in the Asian American Community in Boston and then became a trainer of wellness coaches, so I have sort of both.

Pata Suyemoto: views, if you will, and.

Pata Suyemoto: So i'm going to share with you some examples of some of the strategies achieving little healthy users in both in the body mind spirit domains.

Pata Suyemoto : And some examples a particular activities that we do, and why we do them, the way we do them on next slide.

Pata Suyemoto: So we we start with the body, and this quote if you don't care take care of your body Where are you going to live we love that quote.

Pata Suyemoto: And the LIFE elements under body or healthy eating physical activity and restful sleep so in the next slide I focus will focus on the physical the healthy eating.

Pata Suyemoto: healthy eating activity next slide please.

Pata Suyemoto: Next slide.

Pata Suyemoto: There should be.

Rachele C Espiritu (she/her): I think you went.

Pata Suyemoto: forward to yeah there should be want no there's not all right well.

Pata Suyemoto: Since the slides doesn't seem to be there.

Pata Suyemoto: The so it just put it back to the.

Pata Suyemoto: healthy eating.

Pata Suyemoto: Then that go back one, please.

Pata Suyemoto: Thank you.

Pata Suyemoto: know.

Pata Suyemoto: yeah body so um so for body, one of the activities you do is is unhealthy eating, and for that that activity, we have a a number of images of foods and we try to make sure that those foods represents the foods that that Community actually eats.

Pata Suyemoto: And you know it varies Community community we try to be mindful and some things are sort of cut across the board things like sugar or salt or you know.

Pata Suyemoto: we'll have images of vegetables and.

Pata Suyemoto: noodles maybe a tie, or you know some kind of bow or so different kinds of.

Pata Suyemoto: Asian foods, as well as what's might be typically American Food so combination of things that people might eat.

Pata Suyemoto: And then we asked them to put them in categories of healthy unhealthy or not sure now the point of this exercise is not.

Pata Suyemoto: To have them determine is this healthy or unhealthy and some ways of four point is to actually have the conversation of critical thinking like Well, this is healthy.

Pata Suyemoto: Sometimes, like if you make, like, for instance, if you make the noodles without as much oil it's more healthy than if you do so, we have this whole conversation about healthy.

Pata Suyemoto: choices and how to make healthy food, but you know we start out with this sort of categories of healthy unhealthy and unsure.

Pata Suyemoto: And you know I think the whole program is really about trying to make better choices and healthy choices um so and and then you know, there are other activities for the other life elements could, could I have the next slide please.

Pata Suyemoto: Thank you, so the next.

Pata Suyemoto : domain is mind a healthy outside starts from the inside set your mind first and the body will follow.

Pata Suyemoto: And under this the LIFE elements are relaxation optimism and hope and positive attitude and so for the positive attitude we have a exercise and I don't I don't think it's in here is it could you go invest slide one more time, I just wanted to see if.

Pata Suyemoto: i'll go to this yay i'm.

Pata Suyemoto: So in positive attitude we have an exercise called catch it check it change.

Pata Suyemoto: And I invite you to try to say that 10 times fast anyway so catch it check it change it it's really based on a cvt.

Pata Suyemoto: You know, cognitive behavioral therapy and a lot of ways, but we don't introduce it like that to our participants because it's you know it's about catching our negative self talk.

Pata Suyemoto: And then, trying to transform that thought to something more realistic a more positive and i'm, you know as a person who, who has a has a history of of my own depression, this is this activity, when I first was introduced to it was very powerful.

Pata Suyemoto: So you can see, like first the little blue bubble is a negative thought that you catch I can't do it i'm not going to be very good.

Pata Suyemoto: And then you consider the action and consequence of that thinking at like if I don't if I i'll never learn if I don't try.

Pata Suyemoto: So you begin to change the thought by thinking about well, what are the consequences of my negative thought and then you think about how to change it to something that's more realistic and.

Pata Suyemoto: That allows participants in negative thoughts can undermine things like self esteem and confidence and then.

Pata Suyemoto: You know change that thought to something like this is important to me so i'm going to try, even if i'm not very good at this time.

Pata Suyemoto: So this is, I think, a very powerful activity that gets people to think about their mental health and how their own negative thinking can undermine their mental health.

Pata Suyemoto: On next slide.

Pata Suyemoto: And the final domain is spirit, just as a candle cannot burn without fire, we cannot live without a spiritual life and that's Buddha.

Pata Suyemoto: So, again in the life elements we are spiritual beliefs and practices and we talk about spiritual least we talked about it very largely it's not just religious practices it's not just a you know specific you know.

Pata Suyemoto: activities that relate to traditional religions, you know a lot of times, people will talk about nature or they'll talk about issues you know things like spending time with family and those can all be spiritual beliefs and practices.

Pata Suyemoto: and supportive relationships service to others and a sense of meaning and purpose and so we're going to look at the exercise specifically for supportive relationships, can I see the next slide.

Pata Suyemoto: But so in this exercise, we asked participants to map out their relationships, looking at the inner circle friendship circle neighbors and connection circle and acquaintances.

Pata Suyemoto: And it really allows people to see you know where they have strong relationships and where they might want to make some changes, and you know and and focus attention on other relationships.

Pata Suyemoto: And this, this does this idea of supportive relationships is really important, when we think about our spiritual lives because we need to be connected with each other and.

Pata Suyemoto: So I think that's that's the underpinnings of this relationship there's some exercise that allows people to look at their relationships and lot of times people.

Pata Suyemoto: Have.

Pata Suyemoto: Looked looked at them and actually said, you know I really want to improve my relationship with my parent or you know something like that, and they focused on that, even in their goal i'm.

Pata Suvemoto: Next slide.

Pata Suyemoto: So after we introduce these different exercises and I gave you an example for each.

Pata Suyemoto: Each domain, we have participants create a goal a hell of a personalized health goal and the goal statement should be with impact which is.

Pata Suyemoto: On the side, improve measurable positively stated achievable call forth action, the time limited so it doesn't improve your life doesn't improve.

Pata Suyemoto: how you feel what you want to do is it measurable, can we know how do we know if we've done it or not, is it you know you can we measure it in a way.

Pata Suyemoto: Is a positively stated, rather than statins a lot of times people want to state, I want to stop smoking and that's a that's a testament taking away versus i'm going to.

Pata Suyemoto : Start running and hopefully that will replace that you know, or I will do something I will do something, you know.

Pata Suyemoto: That is is a stress release to me, instead of smoking, so you know we try to make it a positively stated goal and addition, as opposed to a subtraction um.

Pata Suyemoto : And uh and is it achievable, I mean you don't want to do something that is impossible for you, I mean you just and I think that that's.

Pata Suyemoto: that's really important how confident, are you that it's achievable, that you can do that full in that amount of time.

Pata Suyemoto: And is it calling for the action are you doing something different, is it's not just a matter of doing something you've always done is it's actually adding something new.

Pata Suyemoto: And is a time limited as Michelle said it takes eight weeks or so, to make a change in behavior and that's approximately the time that we work on these goals is a week, so we check in every week and the goals are created.

Pata Suyemoto: You create a final goal, and then you create steps so it's not like you have a goal and then you're left to try to figure out how to get there.

Pata Suyemoto: So you know if you're if you will go actually to the to the next one in a second i'll show you that, with the example.

Pata Suyemoto: So you write the gold impact and then you ask yourself how confident, are you on a one to 10 scale and if someone is not least the seven we ask them to rethink the goal, because if you if you're not a seven.

Pata Suyemoto: Then you're probably aiming.

Pata Suyemoto: too broad for yourself at that time.

Pata Suyemoto: And the questions we asked people to think about when they're making the goals, what will I do right how much will I do it, how often will I do it, and when will I do it.

Pata Suyemoto: Because the more concrete, you are, the more you know um.

Pata Suyemoto: You know whether you have achieved it and and the more you are able to figure out what when where how a lot of times we have goals and they're really.

Pata Suyemoto: ephemeral and like you know i'm going to make this big change in my life, but I have no idea how to do it, and this breaks it down to bite sized pieces so there's actually a plan and people go, step by step, next slide please.

Pata Suyemoto: So an example of a goal was, I want to increase my social activity that was the start of the goal and a lot of times when people start with a goal if they're rather.

Pata Suyemoto: Broad and not very clear about what they're going to do, and after quite a bit of discussion.

Pata Suyemoto: We can the the participant came up with the goal, I will attend to so in group for one hour a week in the evening.

Pata Suyemoto : once a week in the evening, and that was their goal, they wanted to be able to attend this group.

Pata Suyemoto: And every you know, every week.

Pata Suyemoto: Now you know and that could involve a lot of steps, mind you, because things like.

Pata Suyemoto: yeah if they had children, you know, there are numbers of steps to get to being able to do that they might need to find a babysitter and they might need to you know.

Pata Suyemoto: Get the materials those kinds of things um, and so what will they do they'll tend to so in group how much an hour once a week in the evening.

Pata Suyemoto: And they might start out by doing it like attending depending on the group obviously like for a half an hour if they can't do the whole hour or they might start out.

Pata Suyemoto: doing it every other week because their to their schedules too tight, so we try to make it so they go week to week until their final goal is to actually do this once a week in the evening for now.

Pata Suyemoto: Okay um.

Pata Suvemoto: Next slide.

Pata Suyemoto: All right, so now we have a poll everywhere.

Pata Suyemoto: let's see um so um give them what we shared so far, what aspects of this practice would fit well with your organization or your Community um are there aspects that you could see cheat that makes sense and that could that could connect to something i'm doing already perhaps.

Pata Suyemoto: So just give this a thought um and if you're not sure you know just say well i'm not sure, but maybe this or you know there's no pressure here and to be there's not a right answer here, obviously.

Pata Suyemoto: Well, so I see that some people are talking about the activity of supportive relationships that might be helpful.

Pata Suyemoto: simplify the goal to make it achievable, yes, writing impact goals with clients and supported employment program yes, in fact I I take this impactful thing everywhere, I go i'm part of a woman's group i'm like that's still this impactful.

Pata Suyemoto : Support circle i've seven habits determine level support a patient has yeah catch a check and change it.

Pata Suyemoto: Like the idea of impact.

Pata Suyemoto: And I think this would fit with our nurse care management program for interesting a lot of coaching type program with patients all sitting great Thank you very much for all those those ideas.

Pata Suyemoto : And um.

Pata Suyemoto: I guess, we can let this poll run and see what happens with more of it.

Pata Suyemoto: yeah Actually, this is an interesting one, that many people treated with love us and our staff to, and in fact working as with the NED.

Pata Suyemoto: There have been a number, particularly discovered year there's been a number of organizations that first use the program with their staff.

Pata Suyemoto: Because they felt like their staff was so stressed and overwhelmed that it made sense to start with staff even and then bring it to their clients, so I think it's really it's an important you know, to think about this for ourselves and for our for our staff in an organization as well.

Pata Suyemoto: um so.

Rachele C Espiritu (she/her): yeah, how can I just share something too, I mean I think one of the things that we really aimed for as we were developing this program was that it would be really accessible to everybody.

Rachele C Espiritu (she/her): And what I think you'll see what you hopefully saw and just the three activities that pata shared is that they're they're really easy to conduct I mean they're self reflective.

Rachele C Espiritu (she/her): Unfortunately, you can see the screen of the healthy foods ones, but it's very interactive we have people getting up and putting you know, putting pictures and two different columns.

Rachele C Espiritu (she/her): But it's very low tech too, so we never used slides we didn't we didn't want to create a training or Program.

Rachele C Espiritu (she/her): Where you needed access to a lot of resources that we need sometimes not all Community based organizations add.

Rachele C Espiritu (she/her): So the the activities were really designed in a way that um you could bring in some creative creativity and use supplies are resources that are really accessible to Community based organization.

Pata Suyemoto: yeah and I think i'm.

Pata Suyemoto: Related to that is whenever we even what we had to to in cove it had to go virtual and you know, we were very concerned about that, like, how do you, you know, take a program that really is about.

Pata Suyemoto: being accessible and move it to a computer environment and.

Pata Suyemoto: One of.

Pata Suyemoto: The choices we made was to use Google slides which, personally I find very cumbersome and annoying.

Pata Suyemoto: But we use it, because for a number of reasons, because everyone could have access to it if they had a computer and Internet right, and so we really tried, rather than a PowerPoint or you know another.

Pata Suyemoto: platform that would require people to have more technology budget or or resources, so I think.

Pata Suyemoto: I think I was proud of us to be successful in that to trying to create a you know, a virtual environment that was still interactive that still allow people to participate.

Rachele C Espiritu (she/her): mm hmm.

Pata Suyemoto: let's see if this other things yeah great um.

Pata Suyemoto: Okay um next slide.

Pata Suyemoto: So um we've used achieving whole health.

Pata Suyemoto: In many groups and i'm.

Pata Suyemoto : One of the specific we've used it specifically with specific Asian groups, we had a Korean group from Korea.

Pata Suyemoto: That we work with that and it was very interesting, at least for me as an Asian American very much you know that combo.

Pata Suyemoto: To work with a Korean group and learn about and see how this program fit their needs and also what they had you know certain kind of Korean cultural pieces the foods that they you know the kinds of perspectives that were shared for that specific culture we've also had.

Pata Suyemoto: Groups done in native language there's a Japanese, there was a Japanese group in Boston actually this one, going to be starting up.

Pata Suyemoto: For a Japanese participants who speak Japanese.

Pata Suyemoto: And there wasn't a Korean American group that a specifically Korean American group that was done recently in in in Boston as well.

Pata Suyemoto: And you know the end the presenters were Korean American too, so it really was an affinity group, and I mean and you don't obviously need to have that level of specificity and we certainly have pan Asian groups.

Pata Suyemoto : as well.

Pata Suyemoto: But sometimes that level of cultural awareness can be really powerful as well and I liked I liked the fact personally as a trainer and as a participant that it can it can go many different ways right, I mean you can you can put it in many different groups and it's broad enough.

Pata Suyemoto: That it does have relevance.

Pata Suyemoto: And in the Boston area Asian Women for health, which is an organization I volunteer for also work with women, women and teens and adapted the curriculum specifically for women.

Pata Suvemoto: And teen girls.

Pata Suyemoto: And I must say it was very encouraging, because the I work with a group two groups of teen girls and they were so excited about this, I must say I yeah I was kind of personnel, a little surprised because you know, sometimes.

Pata Suyemoto: My experience, having been a high school teacher is that teens are not always into you know sort of the learning about about their health and that kind of thing, but this this group of girls was very interested in that and.

Pata Suyemoto: They I think one of the things that.

Pata Suyemoto: was really amazing was one of the girls had the goal of getting more sleep, in fact, all of them were sleep deprived, but one of them, wanted to get more sleep.

Pata Suyemoto: and through the conversation of that goal, setting she discovered that it wasn't sleep, that was the issue, it was her phone.

Pata Suyemoto: She would not put up put away our phone for her you know, like during her homework time, which means you got to bed later, which meant she was perpetually tired.

Pata Suyemoto: So she actually created a bowl where she started moving her phone outside of her room solid.

Pata Suyemoto: Until it was in the completely the other room for the whole time she do your homework and she started getting more sleep and I thought that was a beautiful example of a goal and how it developed to something that was really powerful and actually made a real difference in her life.

Pata Suyemoto: So so and, as you can see the goals can be many different levels, I mean maybe some of us as adults need to put our phones away as well, but you know definitely we see this as an issue in teens.

Pata Suyemoto: and

Pata Suyemoto: This year at the NED learn, we had a native American group which was the first time, and you know they self selected to join us, and it was actually a nice fit.

Pata Suyemoto: You know, we found that the content easily adapted for the group and they you know they can obviously add you know the pictures of the foods that makes sense to them, and you know the cultural frames that makes sense.

Pata Suyemoto: But, overall, the program is flexible enough to accommodate that kind of adapted adaptation and the core concepts remain the same yeah and I think that that was a really successful expansion of what achieving whole health is about um Michelle do you have anything to add.

Pata Suyemoto: unmute yourself.

Rachele C Espiritu (she/her): Sorry yeah.

Rachele C Espiritu (she/her): I just noting in the chat that there was a lot of interest to and.

Rachele C Espiritu (she/her): Probably as a follow up to a comment that you shared pata around sometimes agencies, providing this training first for their staff and their employees and I will say that.

Rachele C Espiritu (she/her): A couple of the organizations that we work with early on One example is in Seattle, the Asian American human services organization out there.

Rachele C Espiritu (she/her): decided to become kind of a whole health agency, and so they did implement this program for their staff and then also it it spurred them to think about.

Rachele C Espiritu (she/her): really looking when you become a whole health agency like what are some of the policies that you need to relook at and the programs and how do you support your staff in different ways, and so.

Rachele C Espiritu (she/her): It was kind of more of a transformational experience for them after they went through this training to think about how to shift from kind of the focus on individuals to think about the whole agency as a whole and taking that as a particular lens for themselves.

Rachele C Espiritu (she/her): So it is very applicable to use with your own with their own staff members and agencies for sure.

Pata Suyemoto: And one of the things that I didn't mention when you're talking about goal setting and set the goals could be individual they also be a group called.

Pata Suyemoto : So, like.

Pata Suyemoto: If you had at your agency.

Pata Suyemoto: You know interest in stress reduction through walking or something like that the whole group could make goals.

Rachele C Espiritu (she/her): Right.

Pata Suyemoto: To work on together.

Rachele C Espiritu (she/her): yeah and the other thing is that some some agencies also thought about how to.

Rachele C Espiritu (she/her): integrate this into other wellness oriented programming that they had so while you could organize them first by language or ethnic ethnicity, based as pato was describing earlier we've had.

Rachele C Espiritu (she/her): You know them done in Cantonese and Cambodian and boonies and Nepalese and everything.

Rachele C Espiritu (she/her): But some organizations have also done them and kind of activity based so integrating them into maybe something that they have going on around a walking group or a TAI Chi group or a gardening group actually it's been done quite a.

Rachele C Espiritu (she/her): few times in conjunction with a gardening group and just offering the activities as your gardening right and like coming up with whole health goals still that might take them outside of the gardening focus, but still is.

Rachele C Espiritu (she/her): Very applicable to whole health and then, as part of shared special populations are the focus on particular groups like pain or women or maybe something around ptsd or around social skills.

Rachele C Espiritu (she/her): So agencies and organizations have been quite innovative and how they integrate this into existing programs.

Pata Suyemoto: Right, and I think that.

Pata Suyemoto: A lot of times that the impact is in many levels.

Pata Suyemoto: on many levels for agencies and for organizations, I also want just in terms of like you know the staff, and I really liked the example of you know, the whole a whole health agency right that's a.

Rachele C Espiritu (she/her): Really.

Pata Suyemoto: I mean we saw that to do a net learn in California.

Pata Suyemoto: um let's see I had a thought and now it's gone well.

Pata Suyemoto: So let's let's go to the next slide and talk about lessons learned and then use the question Michelle.

Rachele C Espiritu (she/her): yeah so um we kind of started going into this a little bit about what some of the organizations have learned as they've been trained on achieving all health and and as they've implemented it and so that first.

Rachele C Espiritu (she/her): That first item, there is what I was referencing earlier that that the program is so flexible, I think that it really does allow.

Rachele C Espiritu (she/her): organizations and agencies to think creatively about how to potentially integrate it into their existing programming.

Rachele C Espiritu (she/her): One thing that we did find from some organizations to was that.

Rachele C Espiritu (she/her): You know, sometimes, making the shift, you know many organizations and and agencies are focused more on the treatment end of Ls and so starting to think about how do you take this more kind of health whole house approach.

Rachele C Espiritu (she/her): to strive for wellness within with for your agency, sometimes it can take a little bit of a shift, because we have such a focus on illness and treating illness and so, how do you kind of make that change.

Rachele C Espiritu (she/her): Engaging leadership in that process is really important for organizations to ensure that they've got leadership, support for this, because one of the things that all add is that funding as with with many programs.

Rachele C Espiritu (she/her): can be challenging to figure out like, how do you sustain this this type of a program that's focused on wellness, which is an often covered by different funding streams.

Rachele C Espiritu (she/her): To support it for sustainability.

Rachele C Espiritu (she/her): So that is definitely one of the challenges that we've heard and we've kind of seen different organizations take different approaches, whether it's through grants, you know pursuing grants or.

Rachele C Espiritu (she/her): You know one agency in California reached out to their to the county and and was able to develop a relationship with their county to provide this service and so have really kind of created a nice a streamline for that as well.

Rachele C Espiritu (she/her): Some also have focused on you know we talked a little bit earlier about this this program being offered in multiple in different languages.

Rachele C Espiritu (she/her): But so depending on the program the participants in your in your community, I know, thinking about whether or not you want to provide space.

Rachele C Espiritu (she/her): By language or if you're going to have pan Asian American is as pato is sharing you know it can raise up some challenges around language and yet.

Rachele C Espiritu (she/her): I will share that you know the organizations that we've worked with up and really creative and many of them have brought in translated materials and so we're looking at trying to find out figure out ways to.

Rachele C Espiritu (she/her): To support that and make it more accessible to other communities so you're not reinventing the wheel around you know translation of some of these resources that we have.

Rachele C Espiritu (she/her): typo What would you share.

Pata Suyemoto : yeah I want to share um we've had a couple of different types of organizations, to which I think you know the CEOs.

Pata Suyemoto: know the Community based organizations lot of times they they can take the materials and put them into existing programs, and sometimes i'll start a whole.

Pata Suyemoto: achievable health program but lot of times they're already existing programs that they can you know put parts of it under or you know incorporate.

Pata Suyemoto: And then also we have coalition's of you know where there are multiple organizations or multiple individuals that are involved that aren't based in like a physical place and that is a little more challenging I mean having been part of a coalition, and when I did the net learn myself.

Pata Suyemoto: You know, but as Michelle talked about you know, there are grants and those kinds of ways to get funding to do the work which is what we did in Boston is to try to get a grant funding and that kind of thing.

Pata Suyemoto: But it is that is one of the challenges in terms of trying to sustain this work in the communities and trying to help you know the communities grow this perspective yeah.

Rachele C Espiritu (she/her): So I think we have another whole next maybe we can go to.

Rachele C Espiritu (she/her): So, given the.

Rachele C Espiritu (she/her): Lessons that we've learned along the way, and there are many.

Rachele C Espiritu (she/her): would be curious to hear from you around what what it might take for you to implement this practice in your work, recognizing that you don't know everything yet about the full Program.

Rachele C Espiritu (she/her): But we'd be curious to hear a little bit about what what you might need in order to implement.

Rachele C Espiritu (she/her): One of the other things I was as you're answering one of the other things I was I forgot to mention, too, is that we heard from some people, and this isn't as relevant during kinds of times of code, but space.

Rachele C Espiritu (she/her): was an issue for several organizations around like how where to host and you know you're having group meetings and.

Rachele C Espiritu (she/her): And the training does require a bit of space, because we have what we call a sticky wall that we put up on a large flat wall, with nothing hopefully behind it to do some of the interactive activities so that ended up being a challenge for some places and finding where where to find.

Rachele C Espiritu (she/her): The space to do the Program.

Rachele C Espiritu (she/her): So yes, that leadership piece is super important seeing that in the poll everywhere and and actually as part of NED learn, which I encourage people to take a look at the the NED website it's just www dot and ed.net.

Rachele C Espiritu (she/her): it's you know we always ask for Community organizations who are applying to get this.

Rachele C Espiritu (she/her): applying to be part of the training to to show that they have leadership support, because this is a creative and different program that does require some thinking around, how do you fit this within your kind of current constellation of services that are happening.

Rachele C Espiritu (she/her): And I think that there is so much need right now so kind of sharing a little bit more about what the current context is for Asian Americans, even if it's a super small percentage in your community and the needs are so high.

Rachele C Espiritu (she/her): That that that sense of urgency, I think, is really important to share as well, so also seeing that Oh, I like this comment around sharing impact goals.

Rachele C Espiritu (she/her): With leadership to help activate change in employment so employee support and motivating clients to see their own whole health.

Rachele C Espiritu (she/her): I see so many in this in this particular intervention, a lot of intersection with motivational interviewing and kind of like, how do we create very strength based approaches and really help program participants see.

Rachele C Espiritu (she/her): That they have that inner strength and opportunity to create change for themselves it's very moving to see what some of the participants have been able to accomplish.

Rachele C Espiritu (she/her): So training on curricula and finding time to train staff and implement this work, yes, and as I said earlier, it used to be a three day training and we really.

Rachele C Espiritu (she/her): got it down to really focus on the key elements and and we found that implementation has still been super successful people still feel wellness coaches still feel prepared when they go out and.

Rachele C Espiritu (she/her): What we like about the net learn model is that there's coaching provided afterwards to to help support.

Rachele C Espiritu (she/her): wellness coaches, as their you know first outreach to find out who might their audience be and what do you need to do to bring together a group and then.

Rachele C Espiritu (she/her): How to be a good wellness coach kind of like what are some of the things and that you need to anticipate or what are some of those challenging situations to navigate, and so we do provide that kind of coaching support.

Rachele C Espiritu (she/her): Afterwards, is people after people have gotten trained and we've also done trainings where multiple organizations do come together so.

Rachele C Espiritu (she/her): You know I think the largest training that we did maybe I think it was that in Seattle again it was at a CRS.

Rachele C Espiritu (she/her): I think I remember a room of at least 50 people, or so it was a little bit of a different training, because the interactive activities are a little harder to do and it's that large mostly we try to aim for about 20 at the most to do a training 20 to 25 at one time.

Rachele C Espiritu (she/her): But there's anything you want to add as you're seeing these these comments or the chat.

Pata Suyemoto : um.

Pata Suyemoto: No, I just think that it, you know, trying to to obviously get leadership and and support is really important, if you start trying to integrate this these materials.

Pata Suyemoto: In it looks like we do have a number of guestions so.

Rachele C Espiritu (she/her): yeah if we want to go on to that Christina you can move on.

Martha Staeheli: Absolutely Thank you so much pot and Rochelle for your presentation and, as people have noted in the chat like, especially now, especially after code and.

Martha Staeheli: The burnout that people are experiencing from the staff somebody mentioned staff burnout but also the trauma that our clients and patients and communities have suffered.

Martha Staeheli: This is just a really important intervention, so we do have a lot of questions and for those of you who entered a question into the chat if you could copy that into our Q amp a pod we can make sure that our presenters get to see those questions and answer them.

Martha Staeheli: But we do have several already so somebody asked about the two parts of the model that you use and how they compared to other popular models.

Martha Staeheli: First, the three part mind body spirit model versus the eight dimensions of wellness used by Sam and the use of impact goals versus smart goal setting where their particular reasons that these strategies were chosen.

Rachele C Espiritu (she/her): Right at the beginning, so so achieving whole health was developed in I was looking it up again, while we're on here 2012 so.

Rachele C Espiritu (she/her): Sam says eight dimensions of wellness came out a little bit later than that, but what what part of the reason was you know, really, as we brought together this stakeholder group of Asian Pacific islander.

Rachele C Espiritu (she/her): Both providers, as well as consumers and people would love to experience you know, this is where we landed in terms of the it.

Rachele C Espiritu (she/her): These three domains being the ones that would most resonate with our with our Community, and so, and we, we wanted to keep it simple to because the other thing is that.

Rachele C Espiritu (she/her): I think, as you probably have seen is that you know these are concepts that I think the Community can really connect with and understand.

Rachele C Espiritu (she/her): You know, given the diversity of the term Asian Americans in America, I mean it encompasses so many different groups.

Rachele C Espiritu (she/her): And, and we wanted to have an of frameworks that really people could connect with and that's why we did go with the body mind and spirit.

Rachele C Espiritu (she/her): In terms of the impact goal setting, I will say that partially mostly That was a function of the fact that that was what the whole health action management.

Rachele C Espiritu (she/her): The way i'm model had used and we felt like that that worked and that it could be, it was relevant for the group and so that that was part of it, I mean, I think there are some just slight nuances between impact versus smart goal goal setting that we just kept what what when hazed.

Pata Suyemoto: I think I mean they do very similar things and so.

Pata Suyemoto : You know whether using smart are impacted you know the, the result is pretty much the same.

Rachele C Espiritu (she/her): yeah it does take a while, I will say to work with program participants sometimes to get to that a goal with impact, you know I mean it takes several iterations of working through.

Rachele C Espiritu (she/her): participants to eat keep on asking them does it meet this you know and so.

Rachele C Espiritu (she/her): You know, as you saw the example that pothead earlier, I mean most of the time, what we see with program participants that yeah the first goal is super broad or it's it's negatively stated or it's about an admission rather than strength base, and so we do go through.

Rachele C Espiritu (she/her): A lot of coaching to help participants with that.

Great.

Martha Staeheli: Thank you, I think that this is for pata about, could you please explain the circle, not a little bit more in depth.

Pata Suyemoto: You only get to that side and go back to that slide is that okay so easier to look at is that hard it's hard, but I can just make it up.

Pata Suyemoto: Oh, oh there it is.

Rachele C Espiritu (she/her): Why, you went straight to it.

Pata Suyemoto: That was impressive so um.

Pata Suyemoto: The way you work through this exercise is you give participants, I mean you can give us a piece of paper and have them draw their own circles, you know you can also give them a handout if you're.

Pata Suyemoto: live and presence and you add just ask people to put in each circle so in the inner circle and that sort of purple a red circle, it would put their inner circle of people, you know their names, and this is not shared you know, like you know they don't have to share the whole.

Pata Suyemoto: You know diagram with anybody else.

Pata Suyemoto: But they'll start with the inner circle and then their friendship circle and then neighbors and connection circle and acquaintances circle.

Pata Suyemoto: And they just write the names in and then, then we have the debrief, which is actually you know where they might be in pairs with small groups and as a how satisfied, are you with these.

Pata Suyemoto: With your network of people, you know Are there things you would like to change, you know, are there areas.

Pata Suyemoto : You know relationships that you'd like to.

Pata Suyemoto: Strengthen so we have a series of questions we asked afterwards and they discuss in Paris they're not to share.

Pata Suyemoto: Their circle, but they talk in general terms about what you know this, this situation, I know this this group I don't have very many people in my friendship circle I just moved.

Pata Suyemoto: For instance, and you know I want to expand that and then, then you know, one of the things that we do do is for each domain, we have them start to write possible goals as they finish, you can.

Pata Suyemoto: piece of information for themselves, and so you know, a person who has relationships aren't satisfactory might have.

Pata Suyemoto: A goal of I want to strengthen my friendship circle, for instance, and then that's not a gold impact.

Pata Suyemoto: But we would then work with them to create a goal well, what are you going to do with that right, so if you want to strengthen your friendship circle, are you going to.

Pata Suyemoto: Like go to the sewing group or are you going to you know do some what activity, you know, are you going to do to do to make that happen for you, Michelle do you have anything to add or was that.

Rachele C Espiritu (she/her): I think I think that's great.

Thank you.

Martha Staeheli: And amanda who asked that question also asked if the slides will be made available, and yes, they will be sent out to everybody, and I imagine she's asking because of that great very helpful graphic.

Martha Staeheli: For the circles.

Rachele C Espiritu (she/her): yeah i'll just add that I think it's useful sometimes like I think what part of what this program does is it provides time for people to step back and reflect.

Rachele C Espiritu (she/her): And so, as you're thinking about supportive relationships as Patrick was saying, like you have some time to think about like what are these positive relationships, for me, are they supportive, what do I want to do about it, where do I have some gaps or where do I want to focus and so.

Rachele C Espiritu (she/her): it's it's just a nice organizing way to look at at who we have around us.

Martha Staeheli: Well, in that same thing lily asked about and you touched on this a little bit Rochelle about how companies or organizations can utilize a whoto provide support.

Martha Staeheli: she's asking specifically for employees are their trainings for the employees and she mentioned that because burnout is so high, how can we use these trainings to provide support care of their staff.

Rachele C Espiritu (she/her): me yeah I think achieving whole health is such a great easeful opportunity to use in organizations, because it is so accessible to and so we're we're starting to do some work with.

Rachele C Espiritu (she/her): With organizations that are wanting it for their their staff and employees, first, so I think it, you know oftentimes, it is about how do you find the time.

Rachele C Espiritu (she/her): Especially if you're doing it for providers that need to be seeing clients, but you know with with transforming this this program on into a virtual setting and that's probably made it a little bit easier for us to be able to do.

Rachele C Espiritu (she/her): So would encourage you to check out the pima website or reach out to potter i'm happy to have a conversation with you around how that could look.

Pata Suyemoto: And although there is, I personally I think there's real power and having a.

Pata Suyemoto: Cultural specific like you know, have the you know group on that, but I also understand that that's not always possible to.

Pata Suyemoto: Patients so um you know a lot of these concepts do have do resonate.

Pata Suyemoto: With just about everybody so.

Pata Suyemoto: And you know, it was also I mean developed with API populations in mind, and I think.

Pata Suyemoto: that's that's a strength of it at the same time, I do think that it's relatable across the board.

mm hmm.

Martha Staeheli: One is Michelle said just having a moment to step back and think about these things in a deeper way is so helpful but Susan asks about how you incorporate these practices within the areas where the API population might be smaller or where you might have.

Martha Staeheli: Less expertise i'm in that population on your staff.

Pata Suyemoto: i'm i'm at this, I think, a couple of things, one is um.

Pata Suyemoto: You can open it up.

Pata Suyemoto: To you know to to a larger group The other thing is, with it being virtual you can also.

Pata Suyemoto: expand I yeah if it's like in the city if if there's more in the city and you're a little bit more outside of the city more rural maybe you would combine you know with another organization or something that has more api's.

Pata Suyemoto: And a virtual setting Michelle do you have other thoughts on them and.

Rachele C Espiritu (she/her): that's where I was going to go to Part I mean i've done some listening sessions recently with coven and after with the rise in the anti Asian attacks.

Rachele C Espiritu (she/her): Where a group of organizations have come together to ask for a facilitated listening session or action section to provide some support and space for.

Rachele C Espiritu (she/her): API providers to to just share and to get support collectively from each other and i'll just share that on those listening sessions, there have been several.

Rachele C Espiritu (she/her): Several providers who have shared well i'm the only one, and my agency or you know I do feel so isolated and alone, because nobody else is understanding how i'm.

Rachele C Espiritu (she/her): i'm hi i'm how i'm experiencing all of this current context here and so having that space for them with other providers, like the connection is being an API provider like that has been really strong.

Rachele C Espiritu (she/her): So it doesn't have to be necessarily geographically based, but sometimes it is just around like, how do you identify and where, can you find those kinds of connections.

Pata Suyemoto: yeah partially depends on the population group right, I mean a fighter's you know is different than elders in the Community.

Pata Suyemoto: You know I mean so like you're going to have different resources and different kinds of ways of interacting so thinking about what makes sense in relation to what specific population you're actually looking at.

Rachele C Espiritu (she/her): Right.

So.

Martha Staeheli: Rachel asks I think this is sort of related to what you are saying.

Martha Staeheli: I appreciate that training for staff implement the program is only one day and very low tech to keep it accessible is additional coaching retraining debriefing built in later on to help staff address issues that arise as they implement the program or are they on their own after that.

Pata Suyemoto: I actually I I just I want to say a couple things one is that, yes, the training can be done in a day but it isn't always done today.

Pata Suyemoto: In Boston I think we took two days to do it because we felt like we wanted to make sure that the participants were.

Pata Suyemoto: Had the full experience of the program so you know because so depending on how much time you have there is some flexibility there.

Pata Suyemoto: And you know, certainly as Michelle says, you know, like sometimes you only have a day, and so you know it is definitely being able to be done in that day, I also think.

Pata Suyemoto: You know that ah.

Pata Suyemoto: that yes, there is follow up there's coaching yeah it was in the actual program there's discussion, how to be a good wellness coach and what kinds of things and i'm.

Pata Suyemoto: Recently in the net learn, we also have we've divided it, so the first part of it is the actual information, and you know sharing exercises and creating goals for the disciplines in the training and the second half is them doing it.

Pata Suyemoto: Actually, they they actually practice each of the teams get a you know exercises that they're responsible for doing.

Pata Suyemoto: And that has been a very helpful model, I mean coming from education myself, where you have you know teaching and student teaching yeah it was sort of that model, the idea that getting their feet wet and getting a sense of what it meant to be a wellness coach what might come up.

Pata Suyemoto: And you know, and you always have a Community group, you always have a range of people who are comfortable with presenting presenting, so this gives people a chance to do that in a safe space.

Pata Suyemoto: which I think also is really helpful um and then you know yeah There are individual meetings.

Pata Suyemoto: Like in the net learn will have many for different organizations and then we'll have individual meetings with each organization to talk about implementation and the challenges are having because each each group each you know situations different so.

Pata Suyemoto: You know, we.

Rachele C Espiritu (she/her): yeah by that yeah.

Rachele C Espiritu (she/her): We also paths I mentioned earlier that we did training for a group in in Korea and the way that we set up that one was.

Rachele C Espiritu (she/her): In it was it was a three hour blocks pata we did a series a series of our blocks, where it was like our late evening and their early early morning but was you know with the you know, transforming or modifying the curricula, so that it can be provided online.

Rachele C Espiritu (she/her): That we also wanted to recognize that people have no capacity to stay on a zoom more than a certain number of hours and so.

Rachele C Espiritu (she/her): We did split it up, so that it could be done over a series rather than in one day or day and a half and then learn is the day and a half right pata it ends up being about that much like 12 to 16 hours yeah.

Pata Suyemoto: yeah, and I mean the net learn is is nice allows opportunity, particularly when you're in person right because you have the connections during lunch or you know the conversations that happened at these other times and I think that's really interesting as well.

Pata Suyemoto: And sometimes it's very powerful to have a number of organizations come together and share across organization to.

Pata Suyemoto: that's one of the strengths of the net known as well, is that you know you have four or five cohorts from different places in the country different contexts, and then they come together during these sort of support meetings, after the training and they share across.

Pata Suyemoto: You know across agency which is actually very powerful as well.

yeah.

Martha Staeheli: Thank you so much, both of you, it looks like we have a couple of extra minutes, so if anybody else has questions, please do put them in the Q amp a pod.

Martha Staeheli: But I did see somebody mentioned earlier in the chat.

Martha Staeheli: asking about sort of how you would think about achieving whole health in the context of recovery in mental health, and I wonder if you could talk a little bit about using this with people who are working on their mental health recoveries and the API population.

Rachele C Espiritu (she/her): After do you want to take that.

Pata Suyemoto : For i'll start um.

Pata Suyemoto: I think that um it's it's a really powerful tool for people who are struggling with their mental health um because first it's not embedded in a medical model it's a Community model, and I think that that is very helpful.

Pata Suyemoto: it's, also the case that just I just want to say this as a side note that whenever we do this, mental health challenges might come up whether you're working with a population who have who has them or not.

Pata Suyemoto: And that we always try to make sure that whoever's leading the groups has a connection of way to refer, if something comes up beyond the scope.

Pata Suyemoto: Of a wellness coach and we make it very clear is not therapy it's a wellness program and that you know you don't have to be PhD psychologist to absolutely do it to run it.

Pata Suyemoto: But I also feel like it allows support in a different way, because it allows people to bring them their whole selves.

Pata Suyemoto: and his dresses their whole self and a lot of times in western medicine, the mental health is, you know very isolated and compartmentalize, this is not, and I think that that really helps people on it certainly helped me, you know with my own mental health.

Pata Suyemoto: journey in terms of really being able to think about well how do these things, integrate and you know they they do, and a lot of times, I think we, you know where we're so focused on the therapy or you know the.

Pata Suyemoto: You know the the sort of.

Pata Suyemoto: You know, different kinds of perspectives that we lose track of the fact that you see if you're eating better perhaps you'll feel better to you know i'm this this or if you, you know are paying attention to your spiritual practice that has a connection to how you're going to feel mentally.

Rachele C Espiritu (she/her): mm hmm.

Rachele C Espiritu (she/her): I will say pata that, like, I find that the domain of spirituality is the one that is often most surprising for people to have the space to focus on that aspect of themselves.

Rachele C Espiritu (she/her): it's so rare in in kind of group settings and even in professional settings that having time to explore that and recognize the intersection ality of all three domains is it's powerful and important for us to provide that for ourselves.

Pata Suyemoto: And sometimes just having a group.

Pata Suyemoto: actually do it in person or a non line, but in person, where you have an actual group that kind of support and i've seen this in the groups that have been done in Boston.

Pata Suyemoto: You know, is really important, and it got it often goes beyond full health like after you know these foods will meet afterwards.

Pata Suyemoto: You know how the.

Pata Suyemoto: program has ended and they'll continue to me and.

Pata Suyemoto: And the with a team rooms, I had two groups of teens and I did the two groups in one location and some of the teams wanted to repeat it, I thought that was really powerful I say you want to do it again, really.

Pata Suyemoto: But they did, and part of the power of that was not only what we're talking about, but the fact that we were in a group of you know, young women Asian American young women with the two leaders were older Asian American women, and you know they felt a real benefit of that as well.

Martha Staeheli: That is a wonderful way to end.

Martha Staeheli: your presentation today and our time together during this session.

Martha Staeheli: Except that I will just ask you to say very briefly how people can get started with this you mentioned net learn, but is there a place that they people can go to get started on this.

Rachele C Espiritu (she/her): yeah I would probably mostly recommend reaching out to nip tema.

Rachele C Espiritu (she/her): To Dr DJ EDA who's the executive director, or you know if you want to reach out to pata and I, we can also help with the connection to since our emails have been shared but really it's around like.

Rachele C Espiritu (she/her): reaching out to inquire about training and figuring out how am I how that might work within your current context, for your agency or the particular group that you're working with if we have a trainer who might be more.

Rachele C Espiritu (she/her): Local to your area or has worked potentially with like group that you're trying to serve so.

Rachele C Espiritu (she/her): That, I would say is probably the best way NED learn is only offered once a year, and to NED members and so it's free to join the NED So if you want to check that out, please do I also serve as the project director for that initiative.

Rachele C Espiritu (she/her): happy to answer questions about that also but Neptune does offer it outside of node learn as well.

Martha Staeheli: Thank you very much, I have a couple of quick announcements, at the end, but I want to take a moment to thank.

Martha Staeheli: Practice so yumoto and Rochelle a spear to for sharing their expertise and experience with us today.

Martha Staeheli: we're so appreciative of your time to talk with us about achieving whole health and I also want to thank the Pacific Northwest and mm hmm etc and gabrielle or C.

Martha Staeheli: for assistance with technical support today, and thank you to our htc network Coordinating Office, especially JESSICA Gonzalez and a special thank you to the cultural responsive working group.

Martha Staeheli: Committee, led by Maria restrepo toro and Christina clayton who feel did all of our questions today.

Martha Staeheli: let's let's see okay we're at the end of our time together, and I want to remind you that we have one remaining session in this series and it's not too late to register, you can go back one slide.

Martha Staeheli: The next session is on August 5 and we will focus on evidence based practice preventing long term anger and aggression in youth play model next slide.

Martha Staeheli: Have a final reminder for information about local state and regional school mental health, training and technical assistance activities, including with the.

Martha Staeheli: Contact your mh gtc regional Center on our website.

Next.

Martha Staeheli: And we are so thankful for your time to get today, we want to hear what you think about our event.

Martha Staeheli: So please take a moment to complete the very brief survey about today's session it's about one or two minutes long.

Martha Staeheli: All attendees will automatically be directed to the survey on their Internet browser upon exiting the webinar but the link is also in the chat Thank you again everyone for your time and we hope that you'll join us again in two weeks so have a beautiful rest of your day, thank you.

Rachele C Espiritu (she/her): Thank you, thank you Martha Thank you everyone everyone.