CULTURAL HUMILITY TRAINING FOR VIETNAMESE-AMERICAN MENTAL HEALTH SERVICE PROVIDERS: A GRANT PROPOSAL

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INTRODUCTION

• After nearly one century of war, millions of Vietnamese migrated to the United States in a mass exodus (Nguyen, 2013; U.S. Department of Commerce, Census Bureau, 2010).

• Scholars found that exposure to traumas of the First Indochina War and more notably, the Vietnam War, posed numerous challenges, both socioemotional and cultural (Korinek & Teerawichitchainan, 2014; Loo, Lira, Koff, Morton, and Kiang, 2007; Tsai & Kong, 2012).

• To accommodate this growing population of Vietnamese, along with various ethnic and racial minorities, providers have embraced culturally competent practices, one of which is the cultural matching of providers to consumers (Raja, 2015).

• While cultural matching can facilitate rapport building and establish trust during intervention (Chang & Yoon, 2011; Horst et al., 2012; Ibaraki & Hall, 2014; Ruglass et al., 2014), a match, in it of itself, may not be enough to yield successful treatment outcomes.

• The proposed program seeks to address this by training Vietnamese providers to approach consumers with an attitude of humility, as opposed to assumptions of sameness. Discussions of Vietnamese language, attitudes, and health behaviors will be presented to inform that differences exist within the culture.
How does the proposed program meet the core values of the NASW Code of Ethics?

- Improves service
- Promotes the dignity and worth of persons
- Illuminates practices that treat consumers with integrity
- Builds cultural competence (NASW, 2016a)
When interacting with newer ethnic populations, such as the Vietnamese, service providers must familiarize themselves with the manners and social nuances that exist in these groups.

Social workers who work at mental health clinics, hospitals, senior centers, and other areas of community life must embrace concepts of cultural competence and social diversity, in order to uphold the principle of respecting individuals’ dignity and worth (NASW, 2016a; NASW, 2016b).

Accepting these cultural practices as valid and normative empowers cultural minority groups, restoring their ability for social functioning (NASW, 2016b).
METHODS

- **Target population:** The Vietnamese Community of Orange County’s (VNCOC) staff of 80 mental health workers, which includes personal services coordinators, social workers, marriage and family therapists, in-take coordinators, interns, and child-development specialists (T. Nguyen, personal communication, October 7, 2016).

- **Potential funding sources:**
  - Foundations known to serve Asian-American: Blue Shield of California.
  - Other websites available through the California State University Library: Grantmanship Center online and Grants.gov.
  - Keywords: “grants for Vietnamese-Americans,” “Asian-American mental health grants,” “mental health grants,” “grants for cultural training,” and “grants for training providers” were used to conduct the search.

- The **California Wellness Foundation** was selected as the identified funding source.
METHODS

• **Sources used for needs assessment:**
  
  • Review of literature
  
  • The VNCOC’s data sources (i.e., patient charts)
  
  • Interviews with the VNCOC’s providers

• **Projected budget:** $34,787
  
  • Covers personnel costs, direct costs, and indirect costs over one program year
GRANT PROPOSAL

- **Program summary and description:**
  - The purpose of the proposed training program is to help Vietnamese-American providers reduce knowledge gaps in:
    - Vietnamese language
    - Cultural attitudes, particularly those about mental health
    - Health behaviors
  - The proposed program, serving approximately 80 VNCOC workers, attempts to provide the baseline cultural knowledge needed to adequately serve Vietnamese consumers with mental health needs.
  - Three 2-hour sessions will be held at each of the 4 VNCOC sites.
  - Program will use didactic teaching and skill training exercises to improve workers’ cultural competence and thus service in the Orange County area.

- **Sustainability:** Videotaping of training may occur at discretion of VNCOC director.
• **Program objectives:**
  1. Increase the VNCOC workers’ Vietnamese language capacity to serve consumers with mental health needs.
  2. Increase workers’ ability to communicate in a strength-based and culturally appropriate manner.
  3. Increase workers’ awareness of traditions, values, and nuances within and between Vietnamese subcultures.

• **Program evaluation:**
  • Pre-tests and post-tests - Knowledge-based questions, designed by the program facilitator, will assess VNCOC employees’ knowledge about Vietnamese language and culture, specific to mental health, before and after trainings.
  • Report of pre-test and post-test outcomes of each session
  • Follow-up tests - Tests will be sent to the training program’s participants, 3 months from final training day.
    • Knowledge-based test to measure retention
    • Section for participant feedback
LESSONS LEARNED AND IMPLICATIONS FOR SOCIAL WORK PRACTICE

• Lessons learned:
  • To substantiate the need for a program that would target an underserved and understudied population, grant writers must be creative in identifying similar populations in the existing literature to illustrate the need.
  • Specificity is helpful to program development. However, too much can beget limitations (i.e., in host agency selection, target populations, etc.).
  • When developing a new training of its kind, grant writers and program developers must develop realistic goals and objectives that can be fulfilled in the given timeframe.

• Implications for social work practice:
  • Cultural competence is considered a hallmark of successful social work practice.
  • Less emphasis has been placed on cultural humility, a concept critical to all therapeutic relationships, but especially relevant to culturally matched dyads.
  • Vietnamese workers must assume the role of learner, despite prior knowledge and lived experiences as Vietnamese-Americans, during service delivery.
    • This will improve social work practice and uphold the NASW Code of Ethics.
REFERENCES


