

# CAN Community Council Meeting Notes

Monday, May 16, 2022

Zoom Video Conference

**Present:** Kelly Crook, Nora Comstock, Nancy Gilliam, Rachel Hampton, Laura Goettsche, Donovan DePriest, Lou Serna, Caroline Reynolds, Dulce Gruwell, Melissa Quintela

**Staff Present:** Jelina Tunstill, Raul Alvarez, Carlos Soto

**Guests:** Ara Merjanian

<b>Call to Order and Announcements</b>	Rachel called the meeting to order at 6:08 pm. A quorum was present.
<b>Approval of April 18, 2022 Minutes</b>	The April 18, 2022 minutes were approved unanimously on a motion by Nora and second by Donovan.
<b>CAN Community Council Chair's Report</b>	<b>Summary:</b> Rachel stated that the Community Council presented the mental health workgroup report at the last Board meeting. The Board meeting was dedicated to discussing issues around mental health and Tamara is committed to meeting our work with action.  Rachel's goal for this meeting is to develop specific goals and action items to meet this year for each workgroup.
<b>Presentation of Dashboard Mental Health Metrics and Drilldowns</b>	<b>Summary:</b> Carlos shared a presentation on 2020 mental health data and how the pandemic impacted our communities mental health. 27% of Travis County adults reported poor mental health according to the Behavioral Risk Factor Surveillance System. He made charts with the new available data on poor mental health by race and ethnicity, income, age, employment, health insurance, marital status, disability status, and sexual orientation.  For race and ethnicity each group saw a rise in reporting in 2020 compared to other years. There may have been a margin of error in the reporting for the black community because they were the only group with a decrease. With income, each level experienced an increase in 2020 compared to other years, but the middle-income range experienced a sharp increase. With age, older groups mental health declined in 2020 compared to past years, but young adults reported less mental health problems in 2020 compared to past years. With employment status there was an increase in reporting mental health issues in 2020 compared to past years. With health insurance, both uninsured and insured people reported more mental health issues in 2020 compared to

	<p>past years, but the uninsured increase was less drastic than the insured increase. With marital status, both married and unmarried had a rise in reporting. With disability, both groups experienced a rise in mental health issues. With sexual orientation, there wasn't much data available before 2020, but in 2020 LGBTQ+ experienced more mental health issues than their straight counterparts.</p> <p><b>Q&amp;A:</b> Rachel requested one-page summary sheet of all this data. Nora stated that the data in this presentation seems rosier than it actually is, and we need a statement that indicates that the data collection in this presentation is from 2019. Donovan would be interested in seeing the employment rate, jobs, and income level, of the people surveyed to see why the 18–29-year-olds lowered, while the other age groups all increased in 2020. He explained that there is a stigma about mental health in older generations due to cultural expectations and traditionalists mindsets, so they are less likely to report, and this dates back to slavery. Ara added that he was surprised about how little the increase was before covid and there may be a bigger increase when 2021 data comes out, but it made him question the accuracy of this data. Carlos explained that it is a federal survey taken through phone calls. Kelly stated that there are flaws in using a phone survey. Caroline stated the age groupings are too wide. Ara would like to see how the questions were worded and suggested the Dashboard Steering Committee to delve into these a bit more to find more accurate mental health measures.</p>
<b>Executive Director's Report</b>	<p><b>Summary:</b> Raul stated that CAN is moving forward with forming the TUUNAA. In June, we will launch the Race Equity Principles in Practice training series to use the Race Equity Action Framework to transition from dialogue to action. Executive Committee and the Board approved our language access work.</p>
<b>Language Access Project for Mental Health and Wellness Overview</b>	<p><b>Summary:</b> Raul shared a presentation on the Central Texas Language Access Fund grant and proposed budget. He explained that this is where the funds will go instead of directly to CAN. He went over the budget which is estimated to be \$260,000 for the full project. Most of the money has been raised, but we don't have all the money yet. \$26,000 will go to CAN for coordination. This project is part of CAN's core work of creating, sharing, and communicating information and resources. He stated that there are 3 phases of the project, and we don't move forward to a new phase until we have the resources for it. We will release an RFP to get partners to engage these language communities. The Spanish</p>

	<p>engagement will move quicker since there is a large Spanish speaking population and media outlets available in Spanish.</p> <p><b>Q&amp;A:</b> Rachel stated that a lot of the work for the Language Access Project will rest on the Language Access Action Team. Kelly suggested working through the Chambers.</p>
<b>Summary of Breakouts and Charges</b>	<p><b>Public Information and Person-to-Person Social Civic Engagement (PIPPSCE):</b> We looked at the “in the community” recommendations. We will focus on the public information campaign and get on the Language Access Action Team subcommittees to impact that work. The other recommendation we will work on is the peer-support recommendation. We will do that through asset mapping. We will do some scoping, presentations, and follow a more traditional community council structure. One of our outputs will be to develop a presenter schedule for the rest of the year and creating a workflow graphic.</p> <p><b>Data and Systems (D&amp;S):</b> They discussed evaluating the data sources, how to look at the available data differently, and elevating community voices. We will utilize the tables we are already at to develop a community focused gap analysis. What does a one-stop shop mean to people and what measures should the Dashboard Steering Committee consider for mental health. She stated they may also try to pull some presenters and they may not overlap with the presenter of the PIPPSCE group. They want to connect with schools and the Chambers who are already collecting related data.</p>
<b>Adjournment</b>	Rachel adjourned the meeting 8:00 pm.