

Evaluating Services for New Mainers Community

Hibo Omer, MPH

NH-ME LEND, Institute on Disability, University of New Hampshire



NH-ME LEND
PROGRAM

Introduction

Mission: Sandcastle Clinical & Education Services: we decided that children with special needs would no longer be separated and that our classrooms would be composed of a mixture of children. Sandcastle's goal was and still is to this day that children graduating from our program at age five, who had special needs, would transition directly into a regular classroom and not be segregated from their peers. We are proud to have been on the cutting edge of inclusion, and proud to be educating children to be open minded, with open hearts.

Vision: Sandcastle was the first early childhood education program in Lewiston Auburn that was inclusionary.

Collecting Data/Information Sharing

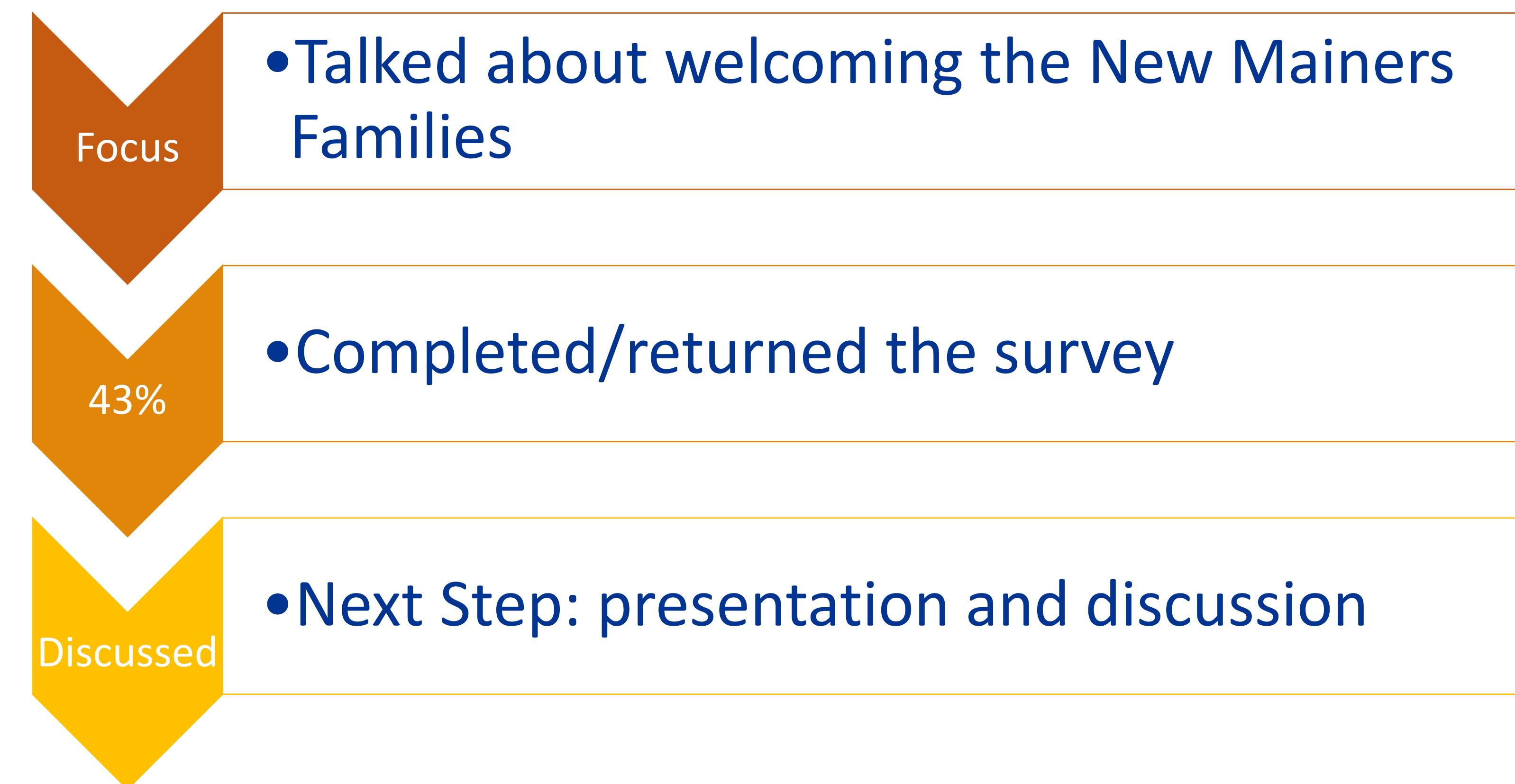
Purpose: Research, craft survey and collect data about where there are barriers to accessing systems that support children and families to access services in the community.

- Meeting with leadership to decide what to do
- Crafting survey and letters, disseminating survey
- Two presentations and analyzing results

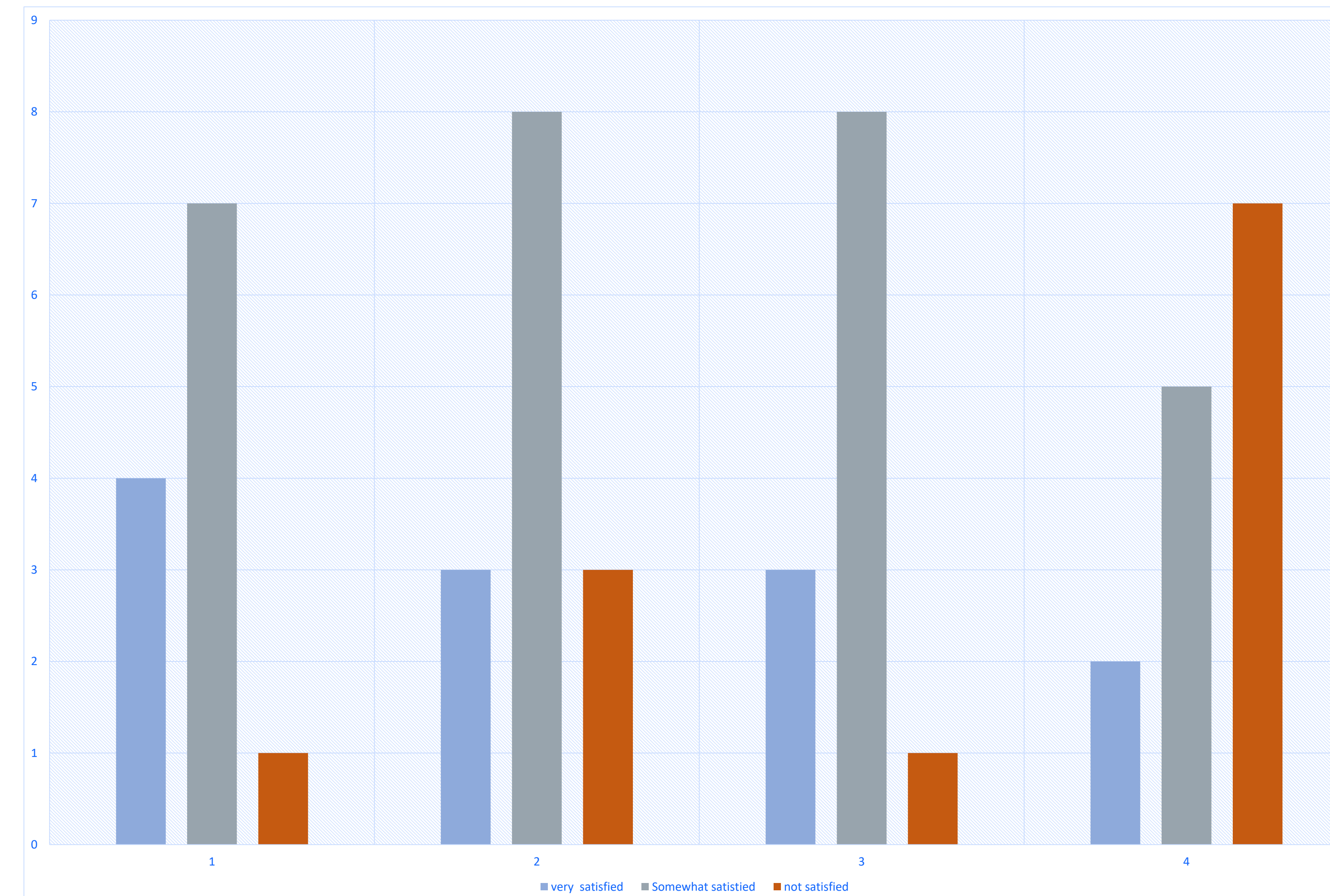
History of Somalia

- History and journey to get to the resettlement countries. Some cultural norms and taboos. View that is believed by many Somalis and the how things are in the USA. Discovering myself through this research of who my ancestors are.
- Disabilities cultural belief and the reality for families
- Survey for the parents: Worked with the Sandcastle site to disseminate surveys to families.
- Seventeen families responded with positive comments citing flexibility, friendliness and level of care and professionalism of staff.

Data Analysis



Staff Results Chart



Staff Results Survey



Results

Survey for Staff: Devise survey questions specific to the Sandcastle site and staff to determine if they perceive there to be barriers for access for families that are culturally and linguistically diverse (with a focus on Somali families).

- Balancing the roles
- Open to change
- Training cultural humility
- Acknowledging cultural difference/embracing
- Patience, understanding, and open mindedness

Recommendations

- Make direct connections with families vs. interpreters
- Professionals being open to change
- Seek training in cultural humility
- Shifting from interpreters to cultural brokers or community health workers

Reference

- A Guide for Advancing Family-Centered and Culturally and Linguistically Competent Care. (2007). Retrieved from <https://www.healthtyouth.org/resources/a-guide-for-advancing-family-centered-and-culturally-and-linguistically-competent-care>
- Bringing the Cultural Divide in Health Care Settings. (n.d.). Retrieved from <https://nccc.georgetown.edu/culturalbroker/>