



2022 American Rescue Plan: Services to Undocumented Immigrants

Submit Application to: CDDapplications@cityofmadison.com

Deadline: 12:00 pm CST (noon) January 28, 2022

Late applications will not be accepted

Please limit your proposal and responses to the spaces provided in this form. Any materials submitted in addition to this application form will not be considered in the evaluation of the proposal. Please *do not attempt to unlock or alter this form*. If you need assistance with this proposal or are unclear about how to respond to any questions listed below, please contact CDD staff at 266-6520

Agency Name:	The Rainbow Project, Inc.	Amount Requested:	\$ 150,000
Title of Proposal:	Rainbow Project Services to Undocumented Immigrants		
Contact Person:	Sharyl Kato	Email:	skato@therainbowproject.net
Agency Address:	831 E. Washington Ave Madison	Telephone:	6082557356
Is this Group a 501 (C) (3)?	Yes or No Yes	If no, applicant will need to secure a fiscal agent with 501 (C) (3) status.	
Name of Fiscal Agent (if Applicable):		Fiscal Agent Phone:	
Fiscal Agent Contact Person:		Fiscal Agent Email:	

Project Goal:

1. Please describe your proposal’s goal of supporting undocumented immigrant households as they deal with the negative impacts of the COVID-19 pandemic.

The stress of COVID-19, other stressors, and the isolation that resulted from the pandemic aggravated underlying physical and mental health conditions. Among our own undocumented immigrant clientele, we witnessed an increase of depression, hopelessness, and suicidality. By Fall of 2020, there was further eroding of resilience. Lost jobs, inability to pay bills, the increase in racism and racial hatred, and domestic and community violence on top of great unknowns about the future created even greater anxiety for already traumatized children and families trying to heal. Our client families were sometimes immobilized by the uncertainties of COVID-19. Trauma exacerbates inequities & creates new barriers to positive life outcomes. RP programs are designed to ameliorate the impact of trauma. The outcomes from our services include reduced trauma symptoms (for both children/caregivers). Child outcomes include improved attention, academic performance, alternatives to aggression, communication/social & problem-solving skills, strengthened positive conflict resolution/problem solving skills for children, improved social skills, emotional/behavioral regulation, and evidence of improved resiliency. Caregivers report knowledge of community resources, less isolation, and increased confidence in parenting their child. Our specialized culturally proficient, early intervention and short and long-term mental health treatment services provides restorative healing & hope for young children and their families who have experienced trauma, helping them build a foundation for the mastery of life-sustaining skills. RPs services are culturally safe & responsive, addressing not only the acute traumatic experience but also the many other contributing factors that often intensify the trauma. Historical trauma, chronic racism & racial

inequities, as well as other untreated adverse experiences identified through out comprehensive, evidence-based (EB), trauma- & culturally-informed pre-service assessment, are addressed in our treatment programs. Services are provided by seasoned clinicians who reflect the BIPOC population (language & culture) that we serve, as do our staff & board, across the agency. Our trauma treatment services & approaches are culturally proficient, & specifically designed for young BIPOC children & their families in order for treatment programs can provide restorative healing & hope. RP's sole focus is young children (infant-11) who experience trauma as a result of being sexually, emotionally, or physically abused; have been victims of sex trafficking; witnessed the death of a loved one; or are exposed to violence in the home & community & other traumatic experiences. Children who experience such trauma are at highest risk for developing post-traumatic stress disorder. Although childhood trauma has been tied to academic challenges, dangerous risk-taking behaviors as adults, addiction, violence & more, it has been demonstrated that early intervention with traumatized young children can ameliorate the impact of trauma. The sooner a response occurs, following a crisis, the greater likelihood of reducing risks for more serious problems from occurring later. For young children in particular, this is significant, as children under six years are at highest risk for developing post-traumatic stress disorder (National Child Traumatic Stress Network & the National Center for PTSD). We provide specialized, TI, culturally proficient, mental health services for child victims of trauma & their caregivers or provide the continuum of services that RP provides for child consumers & their caregivers. Furthermore, RP developed a wrap-around, collaborative focus with other agencies & professionals to improve services & delivery of services for children & families we mutually serve & to avoid duplication. Our programs are specifically created to address the unique needs of young children who experience trauma & their caregivers. Our comprehensive assessment is used to develop treatment plans & goals. All programs are culturally proficient, & an array of unique programs have been designed for BIPOC children/families, including Spanish speaking.

RP collaborates with agencies including, but not limited to Centro Hispano, Unidos, DAIS, Latino Academy, UW-Madison Esperanza program, Journey Mental Health, Madison Metropolitan School District, Tenant Resource Center, Worker Rights, RISE, CCS, to provide consultants, referrals, and treatment plan collaboration for the Latinx population.

RP's three Bi-Cultural Spanish Speaking Clinicians are collaborating with UW Madison Esperanza certificate program that focuses on providing bilingual bicultural training, practice, and supervision for Latinx counseling psych students. This program is designed with the hope of providing more bilingual bicultural therapists to provide mental health resources to the Latinx Community.

RP has a waiting list where most of the families are Latinx, the majority being undocumented. RP has a long- and well-established history in the community of providing great services to Latinx families. In addition to RP bilingual Spanish speaking staff, RP uses experienced, proficient interpreters and translators. The Bilingual, bicultural therapists in the agency have worked in the community for many years and have established strong networking relationships with agencies and service providers in the community. RP works closely with an Immigration Affairs Specialist. Most Latinx clients are Latinx monolingual immigrants.

2. Please describe the demographics of the immigrant population(s) your organization serves. (e.g. age groups, ethnicity, economic status, holders, , specific income ranges, etc.).

The majority of RP's Latinx clients are immigrants (most parents) and first or second-generation Latinos (kids) from Mexico and South America. Some have lived in the USA for several years and struggle with acculturation stress, language difficulties and feelings of marginalization. Due to the recent influx of immigrants from South America, there is a growing need for services for new families that have migrated to Madison. We are in the process of creating a program where they will be learning about the culture, coping with acculturation stress, coping with relational issues, how systems work, where to get services they may need, etc. These new immigrants have experienced multiple traumatic experiences. Our plan is to assess these family needs and refer them for services according to their needs. Some of their experiences, reasons for which they have come to the USA include but are not limited to: Poverty and unemployment back home, war, natural disasters, dangerous neighborhoods, neglect, physical abuse, sexual victimization, and domestic violence.

RP serves the most disenfranchised and maintains a commitment to promote and practice cultural proficiency. We recruit/retain staff representing the gender spectrum as well as racial and ethnic diversity of our consumers children/caregivers. We provide staff development opportunities for ongoing knowledge and capacity regarding cultural communities, including training in cultural proficiency and diversity as well as culturally proficient program development.

Agency-wide, in 2020, we provided services for 527 individuals living in poverty; since January 2021, we have served 924 individuals living in poverty, trauma and their adult caregivers and family members; 71% of consumers were BIPOC individuals.

3. Describe how your project will address any formal and informal barriers that prevent undocumented immigrants from accessing needed services.

As a state licensed mental health clinic since 1984, we provide more systems advocacy with the health care, housing, courts and education systems than most mental health agencies do. This advocacy and support is not limited to particular issues, systems or agencies. If our consumers are worried about eviction, healthcare, or employment, they cannot be fully present and engaged in treatment. We support consumers by working with external agencies, systems and problems in order to resolve issues and remove those obstacles to successful treatment. The Rainbow Project is a trauma prevention, intervention and treatment clinic serving young children (infant thru 2nd grade) who have experienced trauma and their caregivers/families. Our services are designed to ameliorate the impact of trauma and help children and families to heal and build resilience. The majority of our clients are Black, Indigenous, People of Color (BIPOC) children/families and primarily low-income. The scope of our services embodies a culturally proficient and trauma-focused perspective beginning with a first contact. We have been successful in our outreach to and work with consumers from diverse communities. We continue to build dedicated programming for BIPOC families in consultation with cultural community partners. Attention is paid to the full extent of pride and acceptance of cultural identity in all therapy models. We have been providing clinical and group services in Spanish for Spanish-speaking client children and their families and continue to expand those offerings. RP's BIPOC clinicians constitute 51% of staff providing clinical services and our BIPOC programs are delivered by our BIPOC clinicians.

Since the Covid-19 Pandemic has disproportionately affected the Latinx community in Madison and Dane County, this is affecting the mental health of the community now, and it will continue to increase. RP understands that there is a lack of mental health services in general, but if we look at the availability of appropriate services for the Latinx community, we are facing a true crisis. Latinx population has had higher rates of exposure, infections and deaths related to COVID. They have higher rates of job losses and have tended to have less protections and benefits during the pandemic.

Barriers to services for the (RP) Latinx undocumented population include, but are not limited to:

High poverty levels and transportation needs. Clients having to work two or more jobs to make ends meet.

Transportation - having one car per family, usually used by the male member of the family. Having no vehicle and the need to depend on public transportation.

High incidences of domestic violence have increased during the COVID-19 pandemic. Leaving many domestic violence victims alone. RP Clinicians work these families to create safety plans. RP collaborates with other community agencies such as Unidos, RISE, and DAIS for service coordination.

Increased alcohol and drug abuse for 2nd and 3rd generation Latinos. Marijuana is a problem for preteens and teenagers. This increases relational issues with parents. Parents and children have experienced multiple traumas, such as crossing the border, childhood trauma, and experiencing/witnessing domestic violence.

The impact of racism and discrimination. The political climate has increased acts of racism on this population. ICE visits have terrorized families, and the impact has been devastating on children's and parent's sense of safety, and feelings of belonging. Fear of systems based on negative past experiences. RP staff explain how systems, procedures, expectations work, and provide culturally responsive services.

Exploitation at work – clients are not offered benefits or health insurance. They struggle to find work they can do. When injured on the job, they do not receive worker compensation benefits. Some struggle with temporary or long-term disability. RP staff help clients connect through advocacy and legal help, rent deposits/utilities assistance. Lack of linguistic and culturally competent services in the community. High rates of drop out from services and programs because of poor rapport building with Latinx clients.

Rainbow Project's three Bicultural Spanish Speaking Child, Adult, and Family Therapists, and Bicultural Spanish Speaking Service Facilitator and the Madison Latinx Community have created programs in response to Latinx, including undocumented immigrants needs. RP Spanish Speaking Clinicians were instrumental in creating and lead the Latinx Mental Health Coalition (LxMHC), a group of Latinx community leaders that advocate for mental health needs of Latines, including undocumented immigrants. The Latinx Mental Health Coalition led by RP staff has been participating in ongoing conversations with the county and community agencies, not only to advocate, but also to actively provide solutions, ideas, and feedback on what is currently working and what needs to improve moving forward.

The goal of the LxMHC is to create equitable, culturally, and linguistically responsive mental health systems and policies that (1) facilitate connections to resources, (2) improve communication between Latinx clients and service providers, (3) increase utilization of services, (4) improve treatment outcomes and (5) make Madison a place of holistic wellbeing for the Latinx population. Led by RP Clinicians Bilingual Bicultural therapists provide workshops, on how to work effectively with Latinx families.

RP Clinicians are currently working with an Immigration Affairs program to design a psychoeducational, process (talk about experiences) group for new refugees that recently immigrated from Latin America. This will be a collaboration with other community agencies and service providers that specialize on providing culturally responsive assistance to Latinx population.

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4. Describe the process your clients/participant will need to follow to receive assistance.

Goals for our child/family consumers include reducing trauma symptoms for both children and adults; successful parent-child reunification; stabilization and success in classroom/social settings for children at risk for expulsion and suspension; strengthening parent-child-family attachment and wellness; building social emotional development; and strengthening parent education knowledge and skills. We conduct comprehensive assessments, and develop treatment plans to address the behavioral health needs of our child consumers, with caregivers. We assess at regular intervals and revisit treatment plans with caregivers and children to modify as needed to progress.

Staff:

5. Please briefly describe any relevant lived experience, as well as formal training, possessed by your staff, and how it will help make this project successful.

51% of RP staff are BIPOC individuals, including 4 bilingual/bicultural Spanish Speaking Latinx staff (3 clinicians and 1 service facilitator), 1 bilingual/bicultural Farsi speaking clinician, 1 Asian clinician/executive director, and 1 African American community service facilitator/referral coordinator. From our inception in 1980, RP has maintained a fundamental commitment to promote and practice cultural proficiency. Today, we recruit/retain staff representing the gender spectrum as well as racial and ethnic diversity of our consumers children/caregivers. Our diversity among staff, members of the Board of Directors, our vendors and our Professional Resource Network are all emblematic of our commitment. We provide staff development opportunities for ongoing knowledge and capacity regarding cultural communities, including training in cultural proficiency and diversity as well as culturally proficient program development. In addition to working with BIPOC children and families who experience trauma, we use the platform of our organizational strength to advocate for our clientele as well as with community partners against systemic racism, advocate for racial equity and social justice. We also support our staff on their paths to work against racism, and for justice. Social justice and advocacy are an important part of the RP mission and purpose, committed to providing services for those most disenfranchised, we also provide more systems advocacy, case management services than most mental health agencies do, within the health care, housing, courts and education systems. To us, diversity is not an endpoint, but rather our organizational culture and the scope of our services embody a culturally proficient lens as well as a trauma-focused perspective beginning with a first contact that provides a consumer-centered orientation that is timely, welcoming, respectful and supportive. Our staff, board and consumer demographics reflect our seriousness about equity as do our organizational policies and practices and how we engage with our community partners. From our inception, RP has continually worked to engage community partners representing communities of color and disenfranchised populations and communities. RP actively and intentionally fosters an organizational culture that celebrates diversity and cultural humility and we actively build staff development opportunities for ongoing knowledge and capacity regarding cultural communities. Our recruitment efforts are sophisticated in our commitment to hiring clinicians of color; successfully recruiting bilingual (English/Spanish) Clinicians, who provide culturally responsive treatment to Spanish speaking children/families in their native language. RP is also currently piloting a Reflective Consultation groups, to ensure high quality consultation is available in a more in-depth/individualized format. The agency has a strong history of professional development focusing on cultural and inclusive proficiency with regular internal/external training experiences, including an 18-month commitment with Don Coleman, Cultural Diversity Trainer and practicing Therapist, to participate with RP staff in ongoing training/discussion sessions to learn about our own attunement of cultural awareness/identity as well as how to improve awareness, understanding and skills with consumers. We have also consulted with Dr. Pancho Sanchez, psychologist, who helped at RP clinical staff meetings in our work with Latino children/families, on an ongoing basis. Dr. Will Hutter has provided a number of training presentations on serving the gender spectrum. External to the agency are other training and learning events RP staff participate in, including Study Circles on Race. At the same time, RP staff has provided community-wide training presentations to others, in response to many requests by other mental health service providers, teachers, parent groups developing cultural proficiency. Our weekly, Mujer a Mujer group for Latina moms is a great example of providing a culturally specific population. Throughout the content of providing mental health services each consumer in individual therapy is also provided care and attention to the full extent of pride and acceptance of their cultural identity. Such considerations are also given in children's group settings, adoptive families and all other settings.

A particular seasoned RP Clinician has worked in the Madison area with Latino children and families for 28 years in Social Work and Mental Health clinic settings. Worked at Centro Hispano for seven years, an agency that works specifically with Underserved monolingual immigrants, helping with advocacy and referrals. RP and Centro Hispano continue to work together and plan to collaborate in the upcoming prevention and intervention program for new Latin American refugees. Through the LxMHC, have begun meetings with DCHFS Director and other community program directors to address gaps in appropriate provision of linguistic and culture responsive

mental health services. RP staff have been addressing inappropriate and discriminating practices we hear from our clients and people who come to us looking for help connecting to mental health services.

Timeline:

6. Describe the anticipated timeline for your proposal.

Program Start Date 04/01/2022	Program End Date 12/31/2024
Remember funds will be allocated by the second quarter of 2022, and are available until 12/31/24.	

7. Budget: Summarize your project budget by estimated costs for staff and participants.

BUDGET EXPENDITURES	TOTAL PROJECT COSTS	AMOUNT OF CITY \$ REQUESTED
A. Personnel Costs		
Salaries/Wages (show detail below)	170050	85025
Fringe Benefits and Payroll Taxes	78272	39363
B. Estimated Program Costs		
Utility Bills	8716	4358
Internet Bill	10800	5400
House Supplies	6275	3137
Transportation	10610	5305
Job Training Assistance	1468	734
Language Learners Assistance	1722	861
Meal Programs	6116	3058
Telephone	5518	2759
Other (explain below):		
TOTAL (A + B)	300000	150000

Other please explain:

Staff Position	FTE	Total \$ Amt
Executive Director	0.02	2,527
Clinical Manager	0.02	2,159
Referral Coordinator	0.2	13,530
Service Facilitator	0.35	25,419
Finance Manager	0.02	1,893
Administrative Manager	0.02	1,426
Administrative Assistant	0.02	582
Childcare	0.5	1,025
Bilingual Child, Adult, & Family Therapist	0.54	50,348
Child, Adult, & Family Therapist	0.3	25,479

Totals

1.99

124,388