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Uncommon Good Pioneers New Mental Health Program

Uncommon Good has brought an innovative and highly successful mental health program to the United States for the first time. For years we have lived with the problem that “mental and dental” have been the two hardest forms of healthcare to access for our low-income community. The poverty of our clients causes high rates of anxiety, depression and stress in the population. There is very little in the way of affordable Spanish language counseling available for our Uncommon Good parents, and very few mental health resources for our students as well.

Even in the best of times, mental health care has been scarce, neglected as the poor stepchild of the healthcare system. However, the pandemic thrust the issue of mental suffering to the forefront, as people who already were living with extremely high levels of stress were pushed beyond their ability to cope. When two clients at Uncommon Good attempted suicide, we knew we needed to find a way to help.

Last year we learned of a global mental health pilot program called Low Intensity Cognitive Behavioral Therapy (LICBT). Cognitive behavioral therapy is a highly effective short term form of therapy that teaches people basic mental health hygiene. Clients learn how not to be at the mercy of their negative thoughts and emotions that cause suffering. You might think of it as the ABCs of managing one’s mental health, skills that are not taught in the mainstream U.S. culture nor in our clients’ cultures of modern day Mexico or Central America. It does, however, have roots in the Toltec traditions of Mexico, as we discovered quite by accident.

For years our Education Programs Director, Carlos Carrillo, has

Lines from the Front Lines

Every year we get an inspiring glimpse into the work of the doctors of our Medicine for the Economically Disadvantaged (MED) program when we ask them to give us a summary of their work. These are the doctors, dentists, pharmacists, psychiatrists, optometrists and podiatrists who work in community clinics serving the poor. They deliver the babies of low-income mothers, restore the smiles of those whose teeth have been destroyed by the ravages of poverty, help non-English speakers to understand how to take their medications, and care for the painful feet of the homeless, among many other works of mercy. Each doctor’s summary includes an anecdote about a patient that helps outsiders to

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Dr. Pearl Caligiuri with a young patient
Woman Between Two Worlds Becomes a Healer

Cecilia (Ceci) Aviles is one of five children of a baker and his wife from the state of Sonora, Mexico. She grew up in the little town of Magdalena de Kino, known as one of the “magical towns” of Mexico for its charm and preservation of its history. Some of that history is a little quirky by our modern sensibilities, such as the town’s mausoleum that displays the skeleton of the Italian missionary, Padre Kino, who died there.

As a child, her teachers described her as a student “who really loves school.” In particular, she loved reading, buying her first book, The Diary of Anne Frank, when she was fifteen-years-old, the same age that Anne had been when she was writing her diary. Another favorite was Antoine de Saint-Exupéry’s The Little Prince, to which she keeps returning, finding new levels of wisdom in its pages. Still a voracious reader, she recently enjoyed I Am Not Your Perfect Mexican Daughter, which she read and discussed with Uncommon Good’s parent book club.

After excelling in high school, Ceci attended the University of Sonora where she majored in international business. Seventy-eight students started with that major in her entering class, but only twelve of them graduated four years later, with the brilliant Ceci being at the top of her class. After her graduation, an uncle convinced her to come to the United States to learn English to help her advance in her field. She took his advice, came to Claremont, and enrolled in the school district’s adult school to learn English and earn her Graduate Equivalency Degree. While there she met a fellow student, Carlos, who fell head over heels in love with her. But she resisted his romantic overtures and returned to Mexico to begin her career.

However, a rude shock awaited her in her home country. Everywhere that she applied, she was told that she was overqualified and no one would hire her! After a long stretch of rejections, Ceci defaulted to Plan B, which was to return to the United States to the man who adored her. Two boys soon rounded out the family, and Ceci threw herself into activities in her sons’ school. She volunteered, became the vice-president for an association for English learner parents, and presented at three of its conferences. When the school told her that it had no funds for a library or a librarian, Ceci organized the other parents to fundraise to create a library which they then staffed themselves. Like her, both Ceci’s boys enjoy school, and her love of books has been inherited by her eldest son, Dylan, which brings her great satisfaction.

“A few years ago when he was in middle school, I tried counting all the books he’d read. I got up to 80 and then I gave up!” she proudly told us.

Still with a ferocious appetite for learning, Ceci also enrolled in numerous classes on both sides of the border. During our interview she hauled out a four inch thick folder stuffed with certificates she’d earned, including certificates from the University of Guadalajara for courses in literature, art and music.

When the opportunity arose to join our new mental health pilot program and to be trained as a lay mental health worker, Ceci jumped at the chance. Once the classes started, she quickly was recognized by the teacher and her peers as a natural talent. One of the other students exclaimed: “She doesn’t even need to look at her notes to do the protocols!”

Now that she is working with clients, I asked Ceci for her reflections about the work.

“I realize that I share some of the same issues with my clients,” she said. “So I have that natural rapport with them that is so important in the therapy process. I used to wonder why bad things were happening to me, but now I see that they allow me to relate to where my clients are coming from, and to have a lot of empathy for them. For example, three of my clients lost close family members recently. And I know how that feels because from 2010 to 2012 I lost my grandpa, my father and my sister.”

I asked Ceci if she’d learned anything new about herself through doing this work.

“I’ve learned that I can be productive as a community counselor,” she replied. “I’ve found that I feel comfortable talking to complete strangers. I’ve discovered my inner psychologist!”
When Luis Torres and Carlos are together, they just can’t seem to stop smiling. Luis is one of Uncommon Good’s most successful graduates who is “paying it forward” now by mentoring eighth grader, Carlos. Luis holds a Masters Degree in Business and Science from Keck Graduate Institute and is employed by Edwards Life Sciences, a biotech firm. He also plays with his brother in their own successful band which specializes in regional Mexican music. The band, Hermanos Bros, has toured, recorded and made TV appearances.

When reflecting back on his own youth, Luis realized that Uncommon Good had played an important role in his success by providing him with a mentor and college counselling, and he wanted to do the same for another young boy.

I asked the two of them what they’d first thought of each other when Luis became Carlos’ mentor four years ago. “I thought he was cool!” Carlos exclaimed.

“What impressed me about Carlos,” said Luis, “was that even though he was so young, he’d already won an acting competition.” And indeed, Carlos had won a talent show by giving a monologue about the benefits of certain vitamins, of all things!

As the two of them talked about their relationship, I began to understand what all the smiling was about. Luis has made a basketball fan out of Carlos and Carlos has made a soccer fan out of Luis, and together they play something called Soccer Golf. They’ve hiked the Mount Baldy trail and Claremont Wilderness trail. They’ve visited Luis’ alma mater, Occidental College, after which Luis introduced Carlos to sushi. Luis has taken Carlos to his band’s concerts and let him participate in the back stage set up, sound checks and lighting arrangements. They play chess and solve Rubik’s Cube puzzles.

When I asked Carlos what he thought he might like to be when he grew up, Luis’s positive influence in his life became apparent. Luis had just given us a detailed description of his biotech job. Carlos began to say “I’d like to invent medical devices...” When I interrupted him and clarified, “No, I didn’t mean what you’d like to do at Luis’s company, I meant what you’d like to do if you could do anything in the world.” Carlos smiled patiently and repeated, “I’d like to invent medical devices to help people.”

Every time Luis and Carlos get together, they go through a little ritual. Luis asks Carlos what the high point and low point of his week have been. After Carlos answers, he asks Luis the same question. My guess is that the high point of each week is seeing each other!
The newest member of our farm team, Ken Rivas, is a man whose family history intimately intersects some of the most troubling eras in our country’s modern history: segregation, the dropping of the first atomic bombs, and the Japanese internment camps. Ken’s grandparents on his dad’s side were Mexican immigrants from Aguascalientes, an area of Mexico famous for its natural hot springs. His grandfather was a colorful and enterprising character, working for the railroad but also as a music teacher, a musician in a Dixieland band, and playing first violin in an orchestra. Despite his array of talents, the family was still quite poor, at times subsisting only on tortillas and beans.

Ken’s father, Edward Rivas, was born and raised in Bakersfield. Though overt racial segregation is commonly associated with the South, it was alive and flourishing in California as well. When Edward was a child, swimming pools, drinking fountains, theaters and more were racially segregated. Edward told one story about going with some other boys of Mexican heritage to the local movie theater. The doorman told them very kindly that he had saved them “the very best seats in the house – the ones in the very back.” Edward recalled feeling quite special, believing that he and his friends had been given the best seats!

When Edward reached adulthood, he was counseled by an uncle, who had served in WWII in the army, that it would be better to join the Navy, as it was safer to be off shore on a ship than fighting on the ground. In a bit of haunting foreshadowing, this particular uncle had fought in Okinawa, Japan, the home of his future wife’s family. When Edward signed up for the Navy he was sent on a ship to the Bikini Atoll in the Marshall Islands where the U.S. was detonating 23 nuclear weapons. When a detonation was scheduled, Edward and the other soldiers simply were told to turn their backs on the test site. They did so and witnessed a huge blast of light as the bomb was exploded. Afterward the ship would sail over to the bombsite to examine the wreckage, further exposing the men to radioactive nuclear fallout. Edward ultimately would die of cancer.

After leaving the service, Edward married and the couple settled in Texas. However, when the children started arriving and reached school age, they moved back to California because in Texas even the schools were segregated at that time and offered a substandard education for Latino and Black students.

Meanwhile, on the other side of the world in Kagoshima Prefecture in south Japan, Ken’s other set of grandparents were preparing to immigrate to this country. His grandfather, Kunika, came at age seventeen to work as a farmhand. Kunika was made to do farm work alongside the Germans. He said that he liked working with the German soldiers because they were hard workers, except for their officers, who were useless!

It was there in the Amche internment camp in Colorado, together with German prisoners of war, Kunika was made to do farm work alongside the Germans. He said that he liked working with the German soldiers because they were hard workers, except for their officers, who were useless!

As a child, Ken was raised mostly by his maternal grandfather, Kunika, since both of his parents worked. Kunika was regarded by his children as an exceptionally strict and stern paternal figure, but it turned out that he had a surprising soft spot for his grandson. Ken was
Ken Rivas of Uncommon Good’s farm program

Ken with a collection of Uncommon Good’s organic melons

A mischievous child, who often got into trouble. Once his mother was horrified to see that he had taken apart his grandfather’s valuable watch. She expected Kunika to be furious and was amazed when he commented mildly, “This is good. He’s curious about things.” In fact, Ken attributes his own calm personality to the influence of his grandpa who was so gentle with him.

The signs of a future farmer also were present in Ken’s childhood. He loved playing in the dirt so much that he earned the nickname “Pig Pen” after the Peanuts comic strip character who was always surrounded by a cloud of dirt. At first, though, Ken’s love of working with his hands led him to become a massage therapist at the famed New Age retreat center, Esalen Institute, in Big Sur. The center was quite a culture shock for the kid from conservative Orange County.

“I didn’t realize the weather was so cold and wet up there,” he admitted. “So I took only my Southern California clothes and would have frozen if they hadn’t had some leftover clothes to give me. The work culture is very unique, too. Work is broken up with periods for meditation, sessions to share feelings, and meetings to talk about ‘process.’ They also had clothing optional baths.”

However, Ken managed to adjust to the odd new culture, and it was while he was there that he was offered an internship at the Esalen farm that grows the produce for the center. There his love of farming blossomed.

“I find putting my hands in the earth is grounding, literally,” he explains. “I love the way that plants move in cycles through Nature. Working with them is like seeing a great view on a hike. It makes me and my problems feel small, in a good way. I also like the balance between having a structure that you have to follow, such as providing the right light and irrigation, but also the creativity you have in farming. There are so many different ways to grow food, such as aquaponics, organic methods, with UV light in warehouses, and so on. Every culture around the world has its own techniques and there is always so much to learn!”

After learning the craft of farming at Esalen, Ken moved back to Anaheim to take care of his parents in their last illnesses. While caring for them, he also volunteered at the Braille Institute, leading a balance and mobility class for the blind. After the death of his parents, he found it therapeutic to resume farming. Among other things, he worked at an aquaponics farm, and was a tour guide for a tourist farm where he oversaw a giant pumpkin patch and gave milking demonstrations. His last job before Uncommon Good stole him away, was at a senior residence where he ran gardening projects for the memory impaired residents.

As you may well imagine, we are thrilled to have Ken join our ranks here at Uncommon Good with his love of farming, varied experiences, and big and gentle heart.

“Working with (plants) is like seeing a great view on a hike. It makes me and my problems feel small, in a good way”
run a parent book club in which parents read and discuss books in Spanish, to model and encourage reading for their children. One of the books the group read was *The Four Agreements*, a best seller by Mexican neurosurgeon Don Miguel Ruiz. Dr. Ruiz is of Toltec ancestry, and his parents were healers and practitioners of ancient indigenous traditions. He introduced Toltec ancestral teachings to the modern world through his books. When I read *The Four Agreements*, I recognized that they summarized the basic principles of cognitive behavioral therapy, and realized that this wisdom once had been available to the ancestors of our clients. Our Uncommon Good parents reacted with great enthusiasm to the book, which made me hopeful that our pilot project also would resonate with them.

The LICBT pilot program originally was created to bring affordable quality mental health care to the poorest communities on earth. It debuted in India, Gaza, Africa, Mexico and parts of Europe. Through the program, high quality training in the techniques of cognitive behavioral therapy is provided to individuals in low-income populations. These people then become lay mental health workers for their neighborhoods, for pennies on the dollar compared to traditional therapy. Most significantly, analysis of the program shows that the patients of these lay mental health workers get just as well, just as fast, as patients who are treated by licensed professional therapists.

Encouraged by the results of the program abroad, I approached the international LICBT team and proposed that the program be brought to the U.S. with Uncommon Good as its sponsor. The team embraced the idea and we recruited the first class of lay mental health workers (or “promotoras” as we call them in Spanish) from the ranks of our Uncommon Good parents.

The first phase of the training was for the students to experience cognitive behavioral therapy themselves as patients. These sessions were conducted via Zoom with Victoria Chicurel Levin from Mexico City, one of the top LICBT trainers in Latin America. Twenty-three Uncommon Good mothers participated, and then sixteen chose to go on to the second phase of the program with Victoria, which was to learn how to teach the basic skills of cognitive behavioral therapy to others. These women now have been trained and are accepting clients.

Some of the clients already have completed their therapy, happy with their newfound peace of mind. We are in the process of fundraising to continue the program and to pay for a professional analysis of the program at the end of the first year, which we expect will prove its effectiveness.

It is our fond hope that once we prove that this model works in the U.S., that it will be adopted by many other organizations and spread throughout the country, bringing mental health healing into communities sorely in need of it.
Lines from the Front Line
(con’t. from page 1)

understand the nature of their work. We thought you would enjoy reading some of these touching accounts.

From Pearl Caligiuri, DDS of Northeast Valley Health Center in Canyon Country:
I saw a two-year-old boy the other day who had never been to the dentist. When I entered the room he was timid and scared. His mom said he just had his shots and was fearful of doctors. I started my exam by discussing with mom the importance of home care and diet. She informed me that her son hated when she brushed his teeth and that he frequently consumed sugary drinks throughout the day. As a new mom with a young child, I told her that I sympathize with her because my son also hates when I brush his teeth. However, I stressed how important regular tooth brushing and flossing are in preventing decay. I told her it is similar to when you changed your son’s diaper even though he cried. He didn’t like it, but it was something you had to do for him. I also educated her about the impact that frequent sugar consumption has on her son’s teeth. A child’s twenty baby teeth are identified by letters from A to T. In order to put a child at ease, I often count either the names of princesses from A to T or different animals beginning with those letters. As I started the little boy’s exam with “alligator, bear, cat, dog...”, he began to smile and was excited to hear what other animals were in his mouth. I then began to sing “The Wheels on The Bus” for his cleaning and he continued to keep his mouth open until I finished.

From Lane Dedrick, DO of AltaMed Health Services in West Covina:
Over the past year, I have noticed what most physicians I have spoken with have noticed in their clinics. I have seen a considerable amount of fear, some justified and some blown out of proportion, quite a lot of isolation, depression, anxiety, mistrust in any new information presented by authority figures, anger, some people turning to alcohol, almost all turning to increased amounts of comfort food, and finally, hope for a return to fitness, wellness, and connections. One patient of mine was diagnosed with diabetes right in the middle of the second surge of COVID, June 2020. His blood sugar was in the 400’s and he was started on insulin and metformin. He was overweight but averse to exercise and coped with life via comfort food. Upon learning of his diabetes diagnosis, however, he was determined to control his blood sugar and came off insulin because he had seen diabetes take the toes, feet, and eventually lives of multiple family members, including his mother. We set to work with a plan of exercise and diet along with the medication. He exercised at home daily for the next 10 months. He was gradually tapered off his insulin until in January of 2021, we stopped his basal insulin. He is now well controlled via his diet and continued exercise, and his sugars are not even in pre-diabetic range! He also happened to lose 70 lbs. along the way and is no longer considering bariatric surgery! He is now well controlled via his diet and continued exercise, and his sugars are not even in pre-diabetic range! He is now well controlled via his diet and continued exercise, and his sugars are not even in pre-diabetic range! He is now well controlled via his diet and continued exercise, and his sugars are not even in pre-diabetic range! He is now well controlled via his diet and continued exercise, and his sugars are not even in pre-diabetic range! He is now well controlled via his diet and continued exercise, and his sugars are not even in pre-diabetic range! He is now well controlled via his diet and continued exercise, and his sugars are not even in pre-diabetic range! He is now well controlled via his diet and continued exercise, and his sugars are not even in pre-diabetic range! He is now well controlled via his diet and continued exercise, and his sugars are not even in pre-diabetic range! He is now well controlled via his diet and continued exercise, and his sugars are not even in pre-diabetic range! He is now well controlled via his diet and continued exercise, and his sugars are not even in pre-diabetic range! He is now well controlled via his diet and continued exercise, and his sugars are not even in pre-diabetic range! He is now well controlled via his diet and continued exercise, and his sugars are not even in pre-diabetic range! He is now well controlled via his diet and continued exercise, and his sugars are not even in pre-diabetic range! He is now well controlled via his diet and continued exercise, and his sugars are not even in pre-diabetic range! He is now well controlled via his diet and continued exercise, and his sugars are not even in pre-diabetic range! He is now well controlled via his diet and continued exercise, and his sugars are not even in pre-diabetic range! 

From Stanislav Spasov, DMD of El Proyecto del Barrio in the San Fernando Valley:
A six-year-old boy, Juan, and three of his siblings came to our clinic, and Juan was in pain. The kids had never been to the dentist, neither here nor in Guatemala where they were born. His jaw was swollen and he needed an extraction of one his molars. It is always emotionally stressful when you are compelled to traumatize a child with an extraction, but Juan never flinched or cried. He stood still like a statue, cooperated with all directions, and made the procedure remarkably simple. We gave him a well-deserved toy for his good behavior, after which my assistant pointed out to me that I should look at his chart again, because today was also his birthday. I asked him if he got any presents for his birthday and he replied “I didn’t get anything, my mom forgot. But it’s ok, she has a lot of things going on and she’s busy because she was taking us to the doctor.” His high level of maturity and selflessness continued to impress me when I saw him give the toy to his younger sister. When we told him that his sister will get her own toy and he can keep his, the smile on his face made my week.

Dr. Stanislav Spasov with a young client