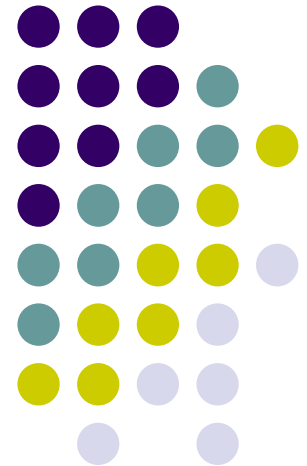


NYSPI Center of Excellence for Cultural Competence: Priorities and Programs

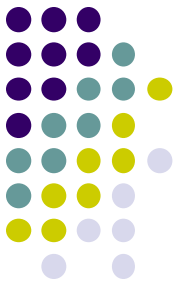
Leopoldo J. Cabassa, PhD, MSW

Assistant Professor of Clinical Psychiatric Social
Work (in Psychiatry), Columbia University

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NYS Center of Excellence for Cultural
Competence
New York State Psychiatric Institute

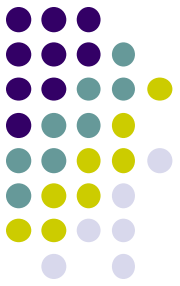


Our Goals



- To reduce disparities in access and quality of care for consumers with serious mental illness (SMI) by enhancing cultural competence of evidence-based practices
- To bridge the gap between what is known about how to deliver effective culturally competent services and what is provided in routine clinical practice in underserved communities

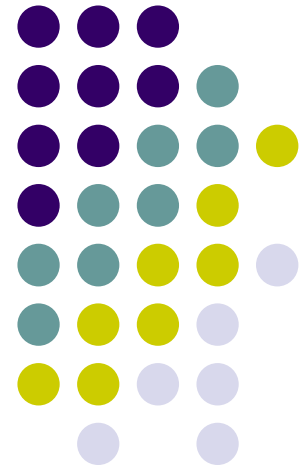
Our Strengths

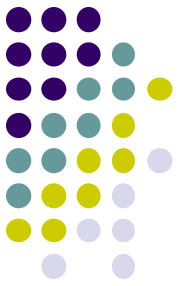


- Multidisciplinary team
- Partner with consumers and their families, community members, providers and policy makers to find effective and feasible solutions
- Use multiple methods to develop and test effective interventions within public mental health system

Program Area I

To identify culturally competent strategies to integrate physical and mental health services for consumers with SMI

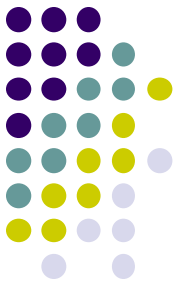




Challenge

- Higher vulnerability to physical health needs in racial/ethnic minority communities
- Evidence of racial and ethnic disparities in access and quality of medical care among consumers with SMI
- Limited attention to cultural factors that influence the physical health needs of consumers with SMI

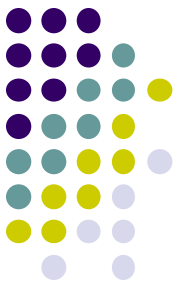
Integration of Physical and Mental Health Initiative among Minorities with SMI



1. Detect Physical Health Disparities



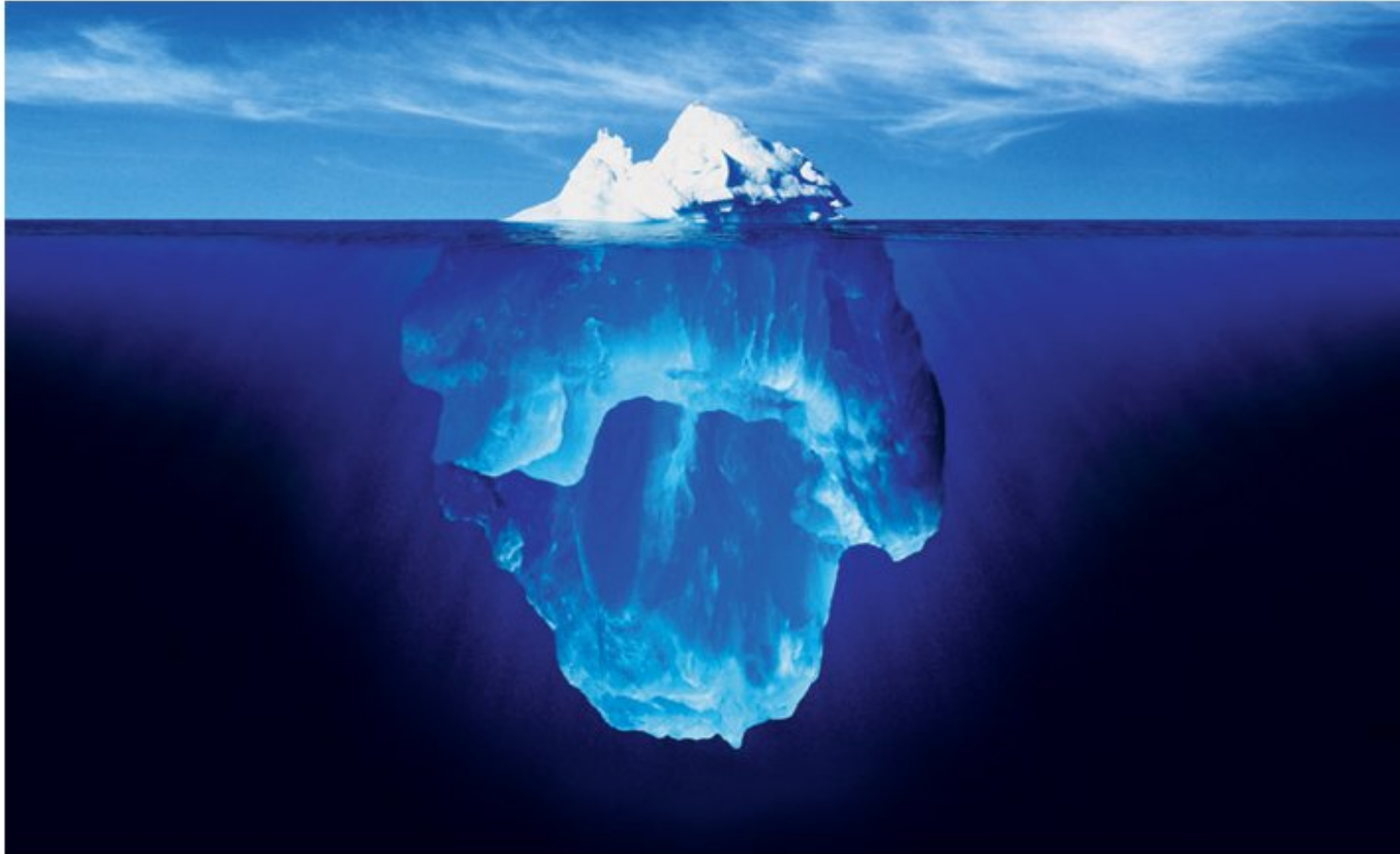
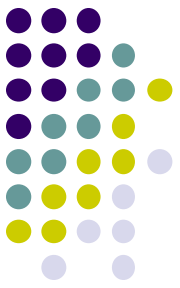
- Systematic literature review of the prevalence of cardiovascular risk factors among minorities with SMI
- Secondary Data Analysis of the National Epidemiologic Survey on Alcohol and Related Conditions (NESARC)



2. Understand Determinants of Disparities

- Qualitative Community Needs Assessment in three Northern Manhattan Communities
- Aims:
 - To explore the provision of culturally competent physical health services to racial and ethnic minorities with SMI
 - To identify systemic and socio-cultural barriers to services integration
 - To inform the development of culturally competent solutions for service integration.

Structural barriers are just the tip of the iceberg

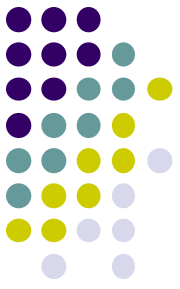


Socio-Cultural Factors: Patient Level



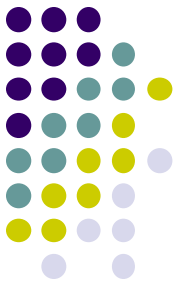
- Since body image varies culturally, lifestyle interventions need to de-emphasize thinness and focus instead on general health and self-efficacy.
- Given that diet is inherently cultural, dietary recommendations need to be culturally meaningful and tailored to the socioeconomic status of consumers.
- Physical activity needs to be culturally meaningful and embedded into care.
- Cultural differences and patients' mistrust of providers contribute to miscommunication and lack of engagement into care.

Socio-cultural Factors: Provider Level



- Mental health providers feel a sense of professional boundary and uncertainty regarding the physical health management of their patients. Therefore, roles and responsibilities need to be clarified.
- Stigma toward patients with SMI in primary care impacts access and quality of care.

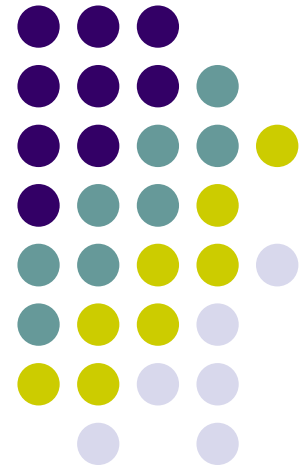
3. Intervene to Reduce Disparities



- Development of culturally appropriate tool-kits and guidance documents to improve the physical health of minorities with SMI
- Systematic literature review of lifestyle interventions for people with SMI
- Next Steps: Cultural adaptations of existing evidence-based practices.
 - Peer to Peer Health and Wellness Program
 - Physical Health Care Management Program

Program Area II:

To evaluate language access and expand cultural brokering function of interpreter services

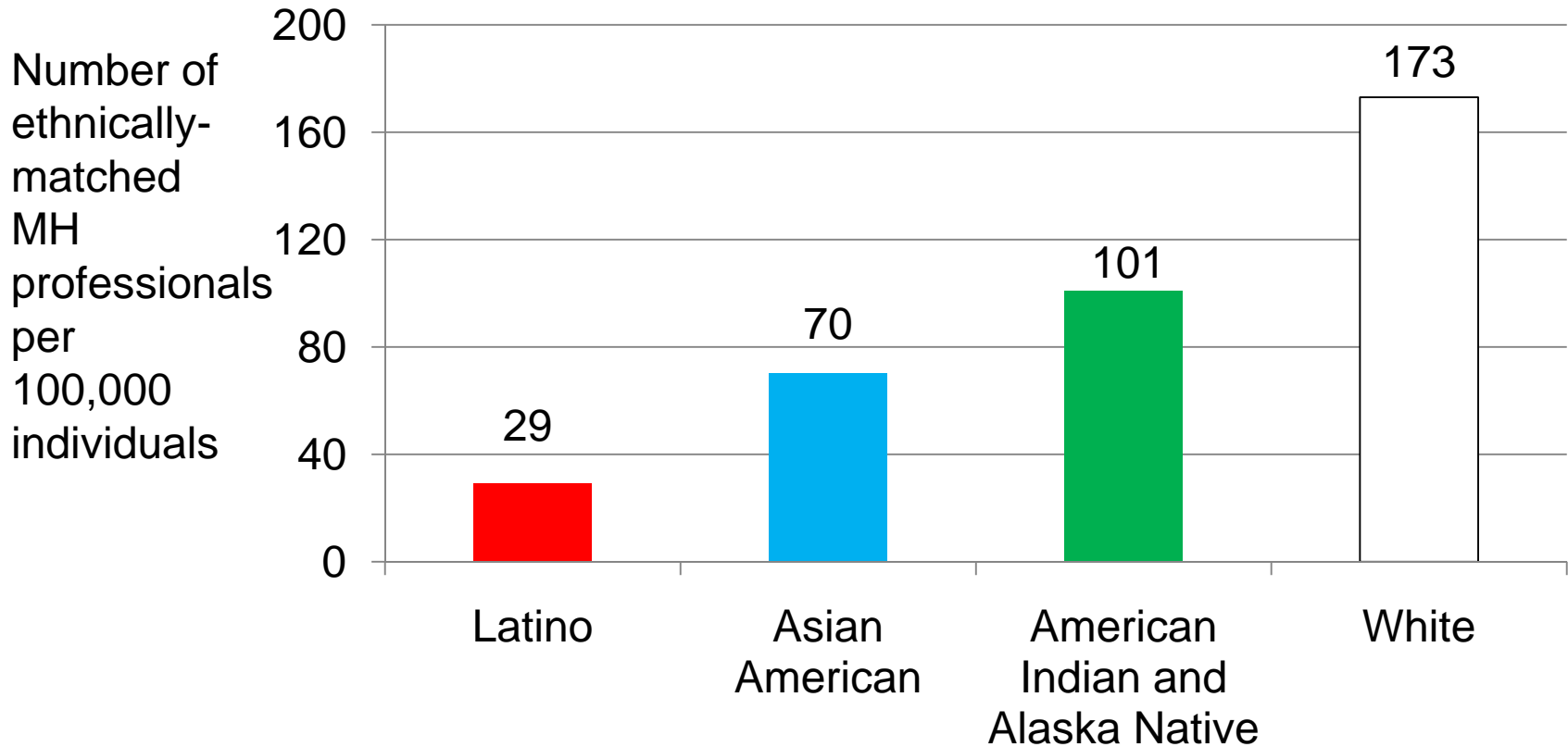


Challenge



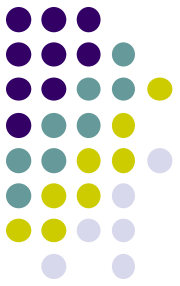
- Language barriers for consumers with limited English proficiency (LEP) are linked to:
 - Underutilization of mental health services
 - Poor quality of care
 - Medical errors
- Lack of step-by-step procedures and training of interpreters in cultural brokering function
- Limited evaluation of utilization and quality of telephone-based interpreter services at OMH

Disparities in proportion of ethnically-matched mental health professionals

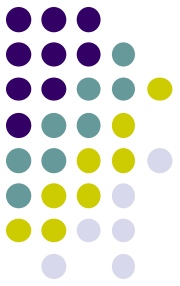


SAMSHA, 2001

Development of Interpreter/Cultural Broker Intervention using Videoconferencing Technology



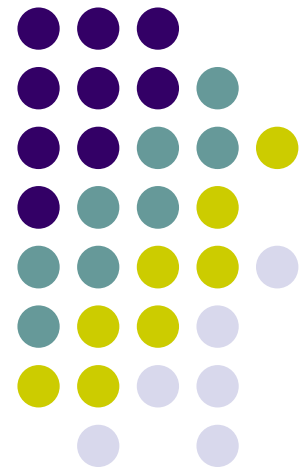
Anticipated Products



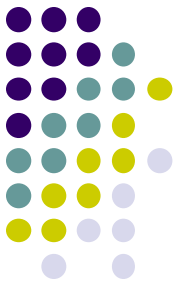
- Written report on best practices literature on interpreting and cultural brokering for dissemination to OMH staff
- Survey of OMH facilities on need for and use of interpreters, with feedback on findings and recommendations
- Development of step-by-step manual for how to do cultural brokering with Spanish- and Mandarin-speakers with SMI
- All linked to CC Bureau initiative on language access

Program Area III

To develop and disseminate evidence-based culturally and linguistically appropriate engagement strategies across the lifespan

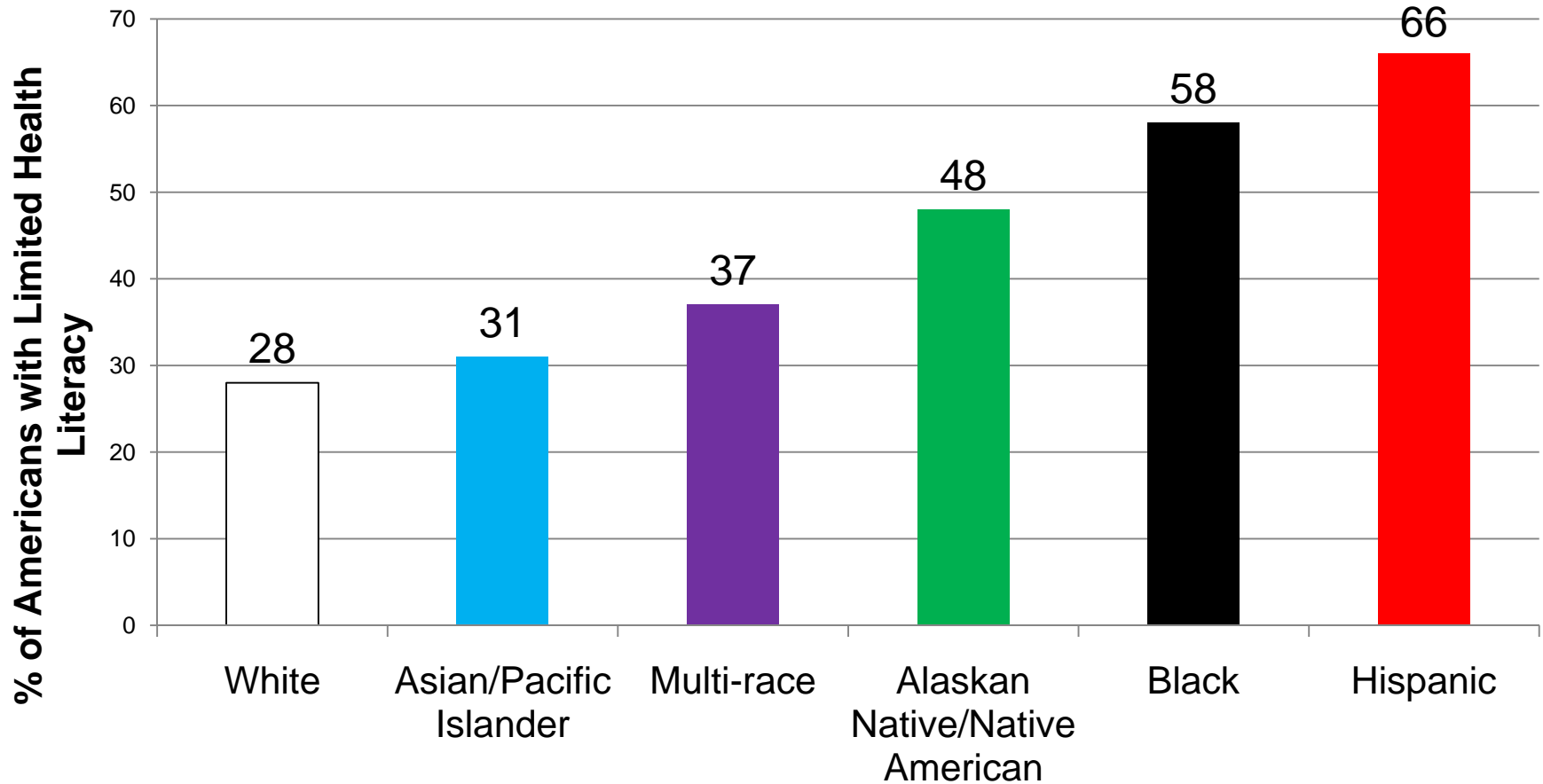
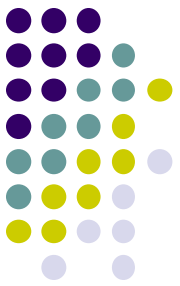


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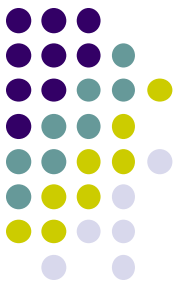


- Rates of consumer engagement in mental health services are low throughout US, but are **even lower** among racial and ethnic underserved groups
- Limited effectiveness of engagement practices in mental health and non-mental health settings due to strong barriers, particularly health literacy, stigma, and mistrust
- Need for novel approaches to enhance engagement, including use of culturally competent practices

Limited Health Literacy among Americans



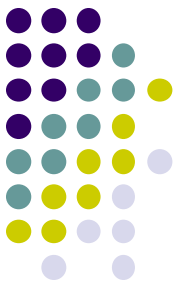
CC Engagement: Mental Health Literacy Tool



- Culturally and linguistically tailored mental health literacy tool



CC Engagement : Right Question Project



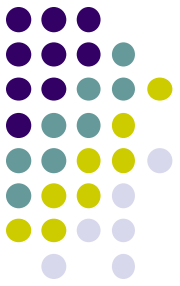
- Intervention focused on patient empowerment to raise questions for clinician and participate in decision making
- Based on practice-based evidence
- 3 patient trainings by care managers, 30 min each
- Incorporated CBT strategies, role-play, homework, and cultural components
- Parallel sites, N=231

Other Activities within Engagement Initiative



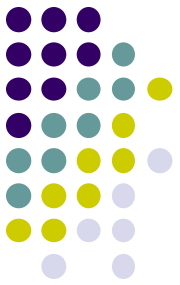
- Working closely with Clinic Plus team for Year 2 evaluation
- Developing a culturally adapted motivational interviewing training curriculum to increase medication adherence of OMH consumers with limited English proficiency
- Helping to enhance cultural competence of engagement approaches involving peer/parent advisors to increase family participation

Conclusion and Next Steps



- Our work is dedicated to reducing disparities related to cultural diversity and bridging the gap between best practices and usual care in underserved communities
- We want to respond to OMH's priorities for cultural competence focused on recovery and person-centered care
- How can we best help?

Thank You // Gracias



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