

Latino Access Study

Presentation to National Council
for Community Behavioral
Healthcare, March 14, 2005

Introduction

- State mandated all counties to do Latino access studies
 - ◆ Respond to low service rates for Latinos in CA
- We chose to view project as multi-year
- Focus in Phase I on initial access
- Focus in Phase II on retention

Research Questions in Phase I of Study

- What are primary barriers to Latino access in SM County?
- What images, issues affecting stigma are evident in Latino community in SM County?
- What do Latino consumers expect when they seek services?
- How familiar are Latinos with ways to access MH services?

Method

- Policy & Procedure review
 - ◆ Identify any barriers at policy level
- System data analysis. Examples:
 - ◆ Penetration rate
 - ◆ Staff composition x region of county
 - ◆ Analysis of complaint data
- Self-study
 - ◆ Added questions for Latino Access Study
- Consulted with Andres Consoli, Ph.D.,

Method - Focus Groups of Stakeholders

- Clinicians
- Support Staff
- Consumers
- Family members
- Community
- All groups were asked core set of questions

Method - Interviews With Key Contacts

- Education
- Social services
- Law enforcement
- Primary medical care
- Faith community
- Business leaders

Response of Participants

- Study generated a lot of excitement on part of participants, staff, & community
- Staff excited that this study was supported by MH management & State
- Staff responded with eagerness & volunteerism

Findings - System Data

- Penetration Rate – some improvement noted, but below other groups (7%)
- Penetration Rate lower still for Sp sp consumers
- Regional disparities in penetration greatest in areas characterized by poverty, geographical isolation, or limited MH resources

Findings - System Data

- Latinos more likely to receive services from teams offering less intense services
- Utilization highest at teams:
 - ◆ Connected to health services
 - ◆ Services close to home or in home
- Only 7% of Medi-Cal calls to Consumer Affairs were from Latino consumers

Findings - Staff Survey

- 19% of staff are Latino; 23% speak Spanish
- Proportion of Latino staff especially robust for support staff
- Most staff have attended trainings on serving Latinos, but 40% reported no such training
- 85% of staff feel services by their teams are culturally competent. Latino staff are in agreement
- Most staff, including Latino staff, do not think most typical barriers are, in fact, barriers at SMCMH

Findings - Focus Groups; Key Contacts

- Stigma has a major influence in Latino community
- SMCMH needs to do more education concerning the nature of mental illness
- SMCMH alienates the Latino community & potential MH consumers
- SMCMH must approach community in an open, accessible manner
- SMCMH must find a way to listen to the “voice” of the community

Findings - Focus Groups; Key Contacts

- MH system viewed as lacking essential services & difficult to penetrate
- Service providers must:
 - ◆ Speak Spanish or understand the emotional significance when Latinos express themselves
 - ◆ Develop trusting, empathic relationships with their clients
- Do more to reassure Latinos about that seeking MH services is safe & will not expose them to INS

Findings - Focus Groups; Key Contacts

- Nearly half of participants did not know there was an 800 number to access services, including key contacts
- Key contacts & focus group comprised by community members or staff were more critical of MH services delivered than were the focus group of consumers
- Key contacts who had seen our facilities did not feel they were welcoming to Latinos
- Emphasized that face to face contact more welcoming than phone messages

Findings - Internal Group Process

- Discussions about translation of written documents. Helped all of us to realize that translation is not merely a word for word; originating the document in Spanish is preferred
- Latino staff may not feel comfortable expressing their views with non-Latino staff

Findings - Internal Group Process

- Discussion of findings led to awareness that effective access required a change in the orientation or stance of our system to the Latino community
 - ◆ Access results from an active process of engaging, joining the community and expressing an eagerness to understand their needs and to serve,
 - ◆ rather than passive stance of “opening the doors” and expecting Latinos to come to us

Recommendations

- Initiate educational campaign addressing stigma
- Create a “client navigator”
- Improve initial contact with our clinics by: improving physical appearance, using Spanish language videos re MH
- Appoint community advisory committee to advise us re our success in entering the Latino community
- Share results of study in community meeting; meet annually with community to report on our progress increasing access

Recommendations - Staff

- Use diversity training to help staff become aware of need to have an active stance toward Latino access
- Provide education to staff about barriers to services Mandate yearly training in Latino cultures
- Share results of study in all staff meeting

Next Steps - Community Meeting

- Planning for community meeting to discuss findings of study
- Conducted in Spanish with translation for non-Sp speakers
- Introduce community to ways of becoming involved in MH system & decision making, including MH Board
- Describe our plans for future
- Discuss creating advisory comm.

Next Steps: Client Navigator Project

- Attempt to engage agencies serving Latinos in a SM community
- Enlist them in working with us to establish a client navigator
 - ◆ Client navigator will work with our ACCESS Team to shepherd referrals to the appropriate resource
- Measure our success in terms of community impression re the openness, accessibility of our system

Next Steps: Future Projects

- Implement client navigator
- Improve the initial, “first impression” of our clinics
 - ◆ Add art, images, signage in Sp
 - ◆ Video capability using Sp language presentations on MH topics
 - ◆ Computer availability
 - ◆ Post satisfaction data from Latino consumers

Next Steps: Future Projects

- Develop educational project in the community focusing on stigma, mental illness, & wellness & recovery
- Develop more training and support for staff in special issues associated with the Latino community