Chinese Community Outreach Worker Progress Report

November 2016 – June 2017

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COUNTY OF SAN MATEO HEALTH SYSTEM





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Introduction

According to the US Census 2015, Chinese is the largest Asian population in the United States and Chinese immigrants are the largest group of new arrivals to the US. In response to the increasing number of Chinese-speaking population, in 2014, the California Department of Health Care Services designated Chinese Cantonese and Mandarin as threshold languages. While the Chinese population is growing, there is a pattern of underutilization of behavioral health services by Chinese descents and immigrants (Abe-Kim, 2007). A similar pattern appears in San Mateo County (SMC). While 10% of SMC residents are Chinese (Pew Research Center, 2012), only 1.7% of Behavioral Health and Recovery Services (BHRS) clients identify as Chinese, based client data analyzed in June 2017 by BHRS Systems Engineer. To address this disparity between the number of Chinese residence and their representation in BHRS services, the Office of Diversity and Equity (ODE) at BHRS and the Chinese Health Initiative (CHI) launched a 3-year pilot Chinese Community Outreach Worker (CCOW) program from 2014 to 2017.

During the three years, 3 CCOWs served the community. Their time in-service and vacancy periods in transition were highlighted in the CCOW timeline diagram below. The long vacancy period between the first and second CCOW was mainly due to difficulty recruiting Chinese bilingual candidates with the mental health background. The accomplishments in the current report build on previous CCOWs' achievements. For deeper information on previous outreach workers lessons and successes, please visit <u>http://www.smchealth.org/bhrs/ode</u>. The current report focuses on the third and final CCOW's work, from November 2016 to June 2017.

CCOW Timeline



Goals

The ultimate goal of the 3 year pilot program is to increase behavioral health outreach and engagement services to Chinese immigrants and Chinese Americans living in San Mateo County. In concordance with the values of the Office of Diversity and Equity (ODE), the current CCOW created the following goals for her work. Listed below (Table 1) are the goals and corresponding ODE values.

#	CCOW Goals	ODE Values		
1	To promote mental wellness and reduce stigma in Chinese community in a culturally competent way	Cultural competence and cultural humility		
2	To advocate for and track results of equitable mental health screenings underserved, unserved, and inappropriately served parts of the Chinese community	Using data to determine outcomes		
3	To consult and collaborate with BHRS and community organization Chinese staff on clinical and case management issues	Shared and multicultural leadership		
4	To expand the service areas of community outreach by working with new organizations	Building bridges and sustainability of partnerships		

Data Highlights

As seen in the infographic below, the current CCOW served over 100 individual clients in 8 months, double the number served by the two previous CCOWs combined in the previous 15 months.



A breakdown of presenting problems is illustrated in the pie chart below (Figure 1). Depressive symptoms (30%) was the most common symptoms presented by CCOW's individual clients, followed by anxiety symptoms (16%). Behavioral problems (12%) included internalizing and externalizing behaviors and Attention-Deficit/Hyperactivity Disorder (ADHD). Other mental health related issues (19%) were such as, relationship conflicts, gaming and technology addictions, and developmental delays. The CCOW occasionally (8%) provided information assistance for non-mental health related issues such as housing, legal, and immigration resources.



Figure 1. A distribution of presenting problems

Note. SI = Suicide Ideation. AOD = Alcohol and Other Drugs. DV = Domestic Violence. N = 113





Note. N = 113

Figure 2 illustrates the distribution of age groups among the CCOW's individual clients. Similar to the client demographics collected by the first CCOW, 15% of the current CCOW's clients were between 0 to 15 years, 14% were between 16 to 25 years, 37% were between 25 to 59 years, and 19% were over 60 years. In the CCOW clients' feedback, people explicitly praised both the CCOW's services and the CCOW's bicultural understanding:

"你经常打电话给我,关心我,问我好点没。"

—— (I appreciate that) you often call me to check on me.

"有别的需要我会把你电话给他们。"

—— I will give your number to people I know if they need help.

"Knowing a lot of families are going through the same. We are not alone."

"(I learned) to adapt to a new environment - country, society, and school."

"I like Shiyu because she is not only bilingual, but she also knows both American and Chinese cultures well. For example, I didn't have to explain in detail about China's one-child policy to her and I could see that she understood my nephew's unfair treatment being the second child in the family."

Innovation: Information and Screening

Community Engagement through WeChat

Cultural Relevance

WeChat is a messaging and social media platform widely used in the Chinese community in the United States and around the world. Thus, the CCOW created a WeChat account to engage with Chinese residents in San Mateo County online. To respect WeChat users' confidentiality, the CCOW reminded everyone who added the CCOW via WeChat to only share non-identifiable information in WeChat and followed up via phone calls. As a result of using WeChat, 16 individuals sought services from the CCOW. For many Chinese community members, WeChat is a more familiar and comfortable way to communicate. Thus, WeChat provided a culturally appropriate channel for the Chinese community members to access behavioral health care.

Engaging the Community Online

Besides individual communication, WeChat allow mental health workers to reach people inside different WeChat groups. For example, the CCOW offered information in a Bay Area parenting group, which had over 100 members. The CCOW posted relevant parenting, mental health, and legal resources in the group. Some parents asked for additional resources in the group, and 7 other parents added the CCOW on WeChat to ask for information and seek help privately.

Furthermore, CCOW successfully organized online seminars via WeChat. CCOW assisted Dora Chen, a StarVista clinician, in hosting a series of parenting classes on WeChat attended by 55 parents over 3 months. Among the 55 participants, 13 were referred from the CCOW. In addition, participants from Dora's WeChat parenting class referred friends from other WeChat groups, which expanded this outreach effort exponentially. That is, WeChat provided an easy-to-access platform to reach people the CCOW would not reach otherwise. 17 participants completed a demographic survey: 88.2% were between age 25-59, 88.2% identified as female, and 76.6% lived in San Mateo County.

Future Plans

The CCOW and Dora Chen's efforts showed that WeChat is a very powerful Chinese community outreach tool. Future CCOWs should keep exploring ways to increase behavioral health services utilization in the Chinese community using WeChat. For example, a CCOW can create WeChat groups on parenting and other topics within San Mateo County, and encourage community members to take ownership of these groups. In essence, these WeChat groups become self-sustained and self-governed communities. The CCOW would be the owner of the group, but could assign community leaders to monitor group activities and generate online or offline event ideas.

Based on the experiences from the last 2 CCOWs, one of the challenges among Chinese residents in San Mateo County is a sense of community. Taking Dora's WeChat parenting class as an example, Wechat can be a solution to overcome such challenge. CCOW owned WeChat groups can create virtual venues for Chinese residents to socially engage with one another, as well as learn behavioral health information and seek services.

Collaboration with the Chinese Hospital

Cultural Relevance

Chinese Hospital (CH) is a health care institution often used by Chinese residents for culturally appropriate medical, surgical and specialty care. Chinese Hospital is the only Chinese-specific hospital in the United States. Since the beginning of the CCOW pilot program, the outreach workers had been working with the CH. Building on existing relationships, the current CCOW established a collaboration with CH staff, which allowed the CCOW to visit one of CH's clinics, Gellert Health Services in Daly City once a week to meet clients where they seek medical care. Connection with this familiar entity in the Chinese community made it easier for Chinese residents to open up to the CCOW about their mental health symptoms, and to be more willing to seek treatment.



Figure 2. A distribution of referral sources

Note. N = 113

Results

Since April 17, 2017, the first time CCOW was invited to the Gellert Health Services, all 7 medical doctors and 2 nurse practitioners in both Daly City locations agreed to give their patients Patients Health Questionnaire (PHQ-2 or 9) or Pediatric Symptom Checklist (PSC-17) during physicals or new patient intakes. PHQ-9 is screener for depression, which is validated in Chinese (Chen, 2013). PSC-17 has also been validated and used successfully to detect attention problems and emotional externalizing or internalizing in children age 4 to 18 years (Gardner et al. 2007). In the first 5 months of the current CCOW's time, 32 patients were referred from CH providers, at a rate of 6.4 referrals per month. After going into the CH, CH providers alone referred 10 patients per month. This was a 56.3% increase in referrals per month from CH staff after reaching out to them.

Future plans

As seen in Figure 2, almost half of the CCOW's overall referrals came from the CH. Thus, future CCOWs should connect early with the CH, collaborate with the hospital staff, and continue working and strengthening the Hospital's relationship with the Chinese community.

Chinese Hospital is not the only community clinics with Chinese-speaking providers. The second largest source of referrals was a pediatric clinic, Sound Pediatric in Daly City. Although its capacity was much smaller than CH, Sound Pediatric still made up 15% of the total referrals. Besides Sound Pediatrics, there were 6 other PCP clinics that had Chinese-speaking physicians and accepted Health Plan of San Mateo. If all of these clinics could ask questions about mental health and refer their at-risk patients to the CCOW regularly, the number mental health service referrals may be even higher. Unfortunately, these clinics were less active in referring their patients to the CCOW. Thus, the future CCOW should try to engage other providers in the Chinese community, such as more frequent follow-ups, and targeting clinics that had expressed interests (e.g., Dr. Lawrence Chao and Dr. Simon Lee in Burlingame).

Outreach: Community Events

The Chinese Community Outreach Worker coordinated and hosted 6 psychoeducation events during her term. Table 2 summarizes the outcomes of each event based on evaluation survey results.

Several of the psychoeducation events included a series of sessions, as indicated in the chart below. "Good" post-event knowledge is indicated by a self-rated 4 or 5 out of 5 on post-event test.

Table 2. Event outcomes

Event Location	Attendance per Events	# Events in this series	Good post-event knowledge about Topics	Good post-event knowledge about Resources	Overall Helpfulness	Future MH events	Future MH events in Chinese
Millbrae Library	45	1	66.7%	66.7%	66.7%	100%	100%
Aragon High School	30	1	75.0%	66.6	55.5%	100%	N/A
Westmoor High School	11	3	60.0%	50.0%	90.0%	100%	100%
San Bruno Chinese Church	67	1	78.9%	58.3%	73.9%	92.9%	100%
Mills High School	25	2	73.8%	71.4%	61.9%	95.2%	66.7%
Jefferson High School	20	2	100%	90%	100%	100%	N/A
Total/Ave	Total per event = 198	Overall Total= 265	M = 75.73%	M = 67.17%	M = 74.67%	M = 98.02%	M = 91.68%

Event Details

Because of the current Chinese Community Outreach Worker's (CCOW) background in child development and parent-child relationships, she focused on children and families in her outreach work. Nevertheless, community outreach also reached senior citizens. Additionally, a substantial proportion of her individual clients were adults. Psychoeducation events below are presented based on age group.

Young Children

StorytimeJune 22, 2017

Location: Millbrae Library, Millbrae

Context: By joining existing bilingual storytime sessions at local libraries, the CCOW leveraged unusual partnerships to connect with new community members. With on-going relationships developed via storytelling, the CCOW established trust with families. Particularly, the families became more likely to open up about mental health concerns for themselves, their children and family. Each storytime included 30 minutes of bilingual (Chinese and English) story reading and singing and 30 minutes of free play. Books were carefully selected to reflect the topic of the month. During free play time, the CCOW communicated with parents and caretakers about behavioral health, while encouraging them to join their children on the floor to play.

Attendance: 45; 96% identified as Chinese ethnicity

Topic: Separation Anxiety

Presenters: Yoko Ng, CHI Volunteer; Shiyu Zhang, CCOW

Outreach Type: Introducing mental health topics to an existing program

Future plans:

- 1. Continue going to Millbrae Library's "Around the World" Storytime.
- 2. Expand monthly storytime outreach to Pacifica, Foster City, and Daly City libraries by contacting branch managers.
- 3. Other potential topics include discipline, confidence, and expression of love.

Youth & Parents

Crisis Intervention May 18, 2017

Location: Aragon High School Asian Parent Club, San Mateo

Context: The outreach worker connected with Asian Parent Club president after a recent suicide at Aragon High School and was invited to talk to parents 3 weeks after the crisis.

Attendance: 30; 50% identified as Chinese ethnicity based on 12 demographic survey collected.

Topics: Suicide prevention and mental health resources

Presenters: Dora Chen, LCSW, StarVista; Shiyu Zhang, CCOW

Outreach Type: Introducing mental health topics to an existing program

Future plans:

- 1. Continue collaborating with Asian Parent Club to provide psychoeducation for parents and students at Aragon High School.
- 2. Based on survey feedback, some potential topics are: stress management, suicide prevention, and parenting.

International Student Support...... March - May, 2017

Location: Westmoor High School, Daly City

Context: This support group met 3 times (March, April, & May) in Spring 2017 semester, helping Chinese international students at Westmoor High School to cope with and adapt to new living and learning environments. Identified Chinese-speaking students were invited to join the group during different period each month, so that they would not miss the same class every month.

Attendance: 11; 100% identified as Chinese ethnicity

Topics: coping skills, problem solving, strategies to reduce stress during final preparation time, and mental health resources

Presenters: Dora Chen, LCSW, StarVista; Dr. Steve Sust, BHRS; Shiyu Zhang, CCOW

Outreach Type: Creating mental health conversations at a new location

Future plans:

- 1. Contact Westmoor High School teachers in August 2017 to discuss possibilities of continuing this group in Fall 2017.
- 2. In response to students' request for longer and more frequent meetings, the future CCOW may help students to create a Chinese student club, so that students have more freedom over time and frequency of any event.

Stress-Free Teen Talk March 10, 2017

Location: San Bruno Chinese Church, San Bruno

Context: Through her relationship with CHI, the CCOW coordinated with church members to host a mental health event for parents and teenagers of the San Bruno Chinese Church. The event consisted of conversations with separate teen and parent groups. Each group discussed separate behavioral health topics in separate rooms. The church was an enthusiastic partner, offering space, food, and assistance in advertising the event. This event generated good publicity as one of the presenters, Maureen Lin, LMFT was interviewed by KTSF Channel 26 to promote this event and Asian mental health.

Attendance: 67; 86.6% identified as Chinese ethnicity

Topics: Communication with teenagers; stress management for teens; mental health resources

Outreach Type: Coordinating a special event on mental health

Presenters: Dora Chen, LCSW, StarVista; Maureen Lin, LMFT, BHRS; Dr. Steve Sust, BHRS; Shiyu Zhang, CCOW

Future plans:

- 1. Contact San Bruno Chinese Church in August 2017 to discuss possibilities of return to this location in Fall 2017.
- 2. Based on feedback from event survey, other topics the group is interested are: parentchild relationship, drug use among teens/young adults; how to manage children addicted to technology.

English Learner Class OutreachApril- May, 2017

Location: Mills High School, Millbrae

Context: In another effort to outreach to Chinese international students in high school, the CCOW contacted English Learner Department (ELD) teachers and arranged 20-minute of reading class time to present on mental health topics.

Attendance: 25, 60% identified as Chinese ethnicity

Topics: coping skills, strategies to reduce stress during final preparation time, and mental health resources

Presenters: Dora Chen, LCSW, StarVista; Shiyu Zhang, Community Outreach Worker

Outreach type: Introducing mental health topics to an existing program

Future plans:

- 1. Contact Mills High School teachers in August 2017 to discuss possibilities of continuing this presentation in Fall 2017.
- 2. The future CCOW may help students to create cultural clubs, such as Chinese student club, so that presentation topics can be more culturally specific.

Peer Counseling Class Outreach...... Nov. 29 & Dec. 6, 2016

Location: Jefferson High School, Daly City

Context: Based on Dr. Steve Sust's ongoing relationship with Jefferson High School's peer counseling class, CCOW was invited to a series of special topic classes on stress and on brain development. CCOW presented on mental health resources at school and in the community, especially for the Chinese community.

Attendance: 20; 10% identified as Chinese ethnicity

Topics: Stress and brain development

Presenters: Dr. Steve Sust, BHRS; Dr. Joanne Lee, Stanford; Shiyu Zhang, CCOW

Outreach type: Introducing special topics to an existing mental health curriculum

Future plans

1. Contact Mills High School ELD teachers in August 2017 to discuss possibilities of continuing this presentation series in Fall 2017.

2. One student commented that they were happy to learn about resource in Chinese and wanted small group discussion, so it would be easier to share experiences. In response to this student's comment, the future CCOW may help students to create a Chinese student club to create a more intimate space for discussion.

Older Adults

PHQ-9 Screening..... May 22, 2017

Location: Self-Help for the Elderly, San Mateo

Context: The previous CCOW organized a mental health screening event in July 2016. The current CCOW contacted Self-Help for the Elderly to conduct a six-month follow-up of the same questionnaire (PHQ-9). Rather than invite clinicians to check clients at the center, Self-Help for the Elderly staff volunteered to pass out questionnaires during the center's lunch hours to allow privacy for Chinese seniors at the center who did not want others to suspect their mental health status. 2 out of 8 participants had either a PHQ-9 score above the cut-off or suicide ideation. CCOW followed up with both seniors, but both of them declined services. No current suicidal ideation or psychosis symptoms were reported by the seniors. CCOW also informed both seniors about mental health services covered by their insurance and provided them with emergency information.

Attendance: 8; 100% identified as Chinese ethnicity

Topics: Patient Health Questionnaire-9

Presenters: N/A (self-report)

Outreach type: Introducing mental health topics to an existing program

Future plans

- 1. Visit Self-Help regularly (e.g., twice a month) to establish trusting relationships with Chinese seniors before introducing mental health topics.
- 2. Conduct another 6-month PHQ-9 follow-up after establishing trust with the seniors.

Culturally-Appropriate Intervention in the Chinese Community

Understanding Minimized Symptoms

Client A was a 9-year-old boy from San Mateo who was reported to Child Protection Services (CPS) because of his aggressive behaviors at school. CPS social worker contacted A's primary care provider (PCP) from a local clinic to request mental health services for A. Thus, PCP referred A to the CCOW. After contacting A's mother, CCOW noticed that the mother described her son's behavior as much less severe than the behavior reported by the PCP. After consulting with a SMC bicultural Chinese clinician, CCOW realized this mother might be displaying a practice common among Chinese parents: parents may try to protect their children by minimizing their children's mental health symptoms. To overcome this potential cultural barrier, the CCOW requested permission from the parents to talk to A's school counselor. The CCOW provided A's parents with the Chinese version of the Authorization for Use or Disclosure of Protected Health Information and explained their rights as health care consumers. Based on information provided by A's school counselor, A was connected with a Chinese-speaking BHRS therapist in Central County. In this case, the CCOW coordinated care with the CPS social worker, PCP, school, and parents. More importantly, she recognized the cultural barrier to services and provided culturally and linguistically appropriate assistance as the liaison between school and family members.

Connecting through Family Relationships

Adult Client B and his mother came to CCOW's office on the second day of the current CCOW's position. B and his mother attempted to contact the previous CCOW, but were caught in the vacant period between two CCOWs. Due to the urgency of the situation, they came to the physical address on the Office of Diversity and Equity business card instead. B's hallucinations had increased over the years and his mother had become very concerned. Although B's Medi-Cal was out-of-county, because of his symptom severity, CCOW took B and his mother to the Psychiatric Emergency Room, after consulting the ACCESS Call Center and a San Mateo County psychiatrist. B's mother initially had no knowledge about his son's diagnoses and was very afraid of the Psychiatric Emergency Room. CCOW sat with the mother at the waiting area and explained her son's diagnoses and procedures in the emergency room in Chinese. It is very common in Chinese culture for parents to take care of their children's health even when the children have grown up. CCOW saw Client B's trusting relationship with his mother. Thus, debriefing B's mother and having her on-board were key to linking B with services. B eventually agreed to receiving mental health services after talking to his

mother. B was then connected with services in his county of residence and continued to live under the care of his mother at home.

Navigating the Behavioral Health System

Client C was a senior, monolingual Cantonese speaker seeking psychiatric services at San Mateo County Behavioral Health and Recovery Services (BHRS) because her previous Cantonese-speaking psychiatrist had retired from a local community agency. Thus, her PCP from a local clinic referred Client C to CCOW. Since CCOW did not speak Cantonese. CCOW asked assistance from a San Mateo County Cantonesespeaking clinician. Due to client's severe anxiety with suicidal ideation, she was sent to Same Day Assistance in a San Mateo County Mental Health Clinic. However, client declined to continue going to the clinic because of transportation difficulties. Fortunately, CCOW knew that Client C also had a social worker with San Mateo County's Older Adult Mental Health Services (OASIS) program, which could provide home visits. CCOW contacted the social worker from OASIS and transferred the client to this team. CCOW followed-up with all parties involved in this case until client received therapy from a psychiatrist with Chinese cultural background. Many clients struggle to navigate the behavioral health system. In addition, this client was monolingual, immobile and reluctant to treatment. Therefore, it was important to have a CCOW to reduce her confusion in system navigation. The CCOW knew available county staff who spoke her language and to coordinated communication between multiple teams in BHRS, both of which were crucial for clients open up to the idea of mental health treatment again.

Opportunities for Change

In the last past 8 months, the CCOW seen the following three fixable challenges in the behavioral health service landscape for the Chinese community:

- 1. Limited sources of referral
- 2. Underserved Chinese resident populations
- 3. Limited Chinese bicultural bilingual staff

Limited sources of referral

From Primary Care Providers (PCP)

As seen in Figure 2 (p. 7) Chinese Hospital and Sound Pediatric were the CCOW's top two referral sources. However, there were 7 identified private primary care clinics or hospitals with Chinese-speaking PCP that accept Health of Plan San Mateo (HPSM). 4 of them did not refer any patient to CCOW for mental health services after CCOW outreached to them multiple times both in-person or over-the-phone. 3 of PCP clinics or hospitals responded that they gave patients the ACCESS Call Center number. However, since ACCESS does not have Chinese-speaking staff, there is a high chance that monolingual Chinese patients would hang up if they do not hear their own language over the phone. Thus, it remains a challenge to engage other PCP clinics/hospitals to use the CCOW's services in the Chinese community.

From Schools

CCOW's referrals from schools across San Mateo County (SMC) consisted of only 14% of the overall referral sources. Specifically, CCOW received 7 referrals from Mills High School, 4 from Aragon High School, 2 from San Mateo High School, and 1 each from Burlingame High School and San Mateo Union High School District. It was challenging for one CCOW to establish and maintain relationships with all schools in SMC. Additionally, schools may have more resources than individual PCPs. Therefore, sometimes CCOW's services provided to a specific population may be overlooked.

Insufficient Services for Chinese Youth and Older Adults

For Youth

Often, parents contacted the CCOW because they were worried about their children, but their children declined mental health services. In the past, the CCOW referred those cases to StarVista's Child and Adolescent Hotline and Prevention Program (CAHPP). CAHPP had a Chinese-speaking clinician who provided prevention and early intervention services for these parents and their children. However, after the termination of CAHPP in June 2017, CCOW was unable to find other prevention and early intervention services that were bicultural and/or bilingual for parents and children in those situations. A disagreement between parents and children may be an indication for deeper conflicts and behavioral health needs between the two parties. Without intervention, it could lead to less communication, and potential further deterioration of symptoms without treatment.

For Seniors

Chinese senior residents had the lowest success rate in mental health referrals in CCOW's 8 months of work. Stigma reduction remains a challenge in this population. Besides going into senior centers, many seniors are homebound, which were beyond reach under the current CCOW's job description.

Limited Chinese bicultural/bilingual staff

In San Mateo County BHRS

The primary goal was for CCOW to connect more Chinese residents to BHRS services. However, not all Chinese-speaking clients were connected with Chinese-speaking therapists. In some cases, the parents had limited English skill, but their children (the clients) spoke fluent English. Often, the children were assigned to English-speaking therapists and their parents received communication via interpretation services. In other cases, the clients spoke mainly Cantonese, but had to see a Mandarin-speaking psychiatrist because of the lack of Cantonesespeaking psychiatrists in BHRS.

In Community Agencies/Community-based organizations

Community-based organizations offer great resources for the general SMC residents. However, there is also a general lack of Chinese-speaking staff in community agencies. Often, community agencies have to rely on Chinese-speaking volunteers. For example, some senior clients contacted CCOW to seek senior housing and senior center activity information. Other clients and family members were looking for support groups in Chinese. Although CCOW provided referrals to Healthy Aging Response Team (HART) program and National Alliance on Mental Illness (NAMI) San Mateo County accordingly, both organizations only had one Chinese-speaking part-time volunteer. Yet, many other community agencies do not have the capacity to assist clients in Chinese language, making it difficult for Chinese monolingual residents to seek legal, housing, transportation, and psychoeducation services.

Recommendations for Chinese Community Outreach

Align values with ODE

The Office of Diversity and Equity (ODE) provided the values that paved the way for the achievements for all three CCOWs. The alignment between values of ODE and current CCOW's goals can be found in Table 1. The future CCOW position should also reflect ODE values and be designated in serving the Chinese community in SMC. One way to achieve this goal is to have a strong presence and participation in the Chinese Health Initiative (CHI).

Build Continuity and Sustainability

As seen on CCOW timeline (p. 1), 3 different CCOWs were hired in last 3 years, and there were substantial gaps between each outreach worker. The strength to the community and individual Chinese residents could be undermined during vacant periods. Therefore, the next CCOW position should emphasize the continuity and sustainability of outreach work. A full-time with benefit position is recommended to attract candidates with long-term commitment to the field of community mental health.

Create regular access to clinicians

A clinical license was not required in the current CCOW's job description, which meant the CCOW had to consult with BHRS clinicians often on symptom severity and crisis management in determining referral options. If the future CCOW remains as a non-clinical position, ideally the outreach worker should report to a clinical supervisor in the organization to ensure quality and liability of the mental health referral outcomes.

Allow flexibility in outreaching to all public, private, and nonprofit sectors in San Mateo County

The flexibility in the CCOW job description enabled all three CCOWs to find alternative platforms to bring mental health resources and services to the Chinese community. For example, psychoeducation presentations were hosted at high schools, libraries, and churches. Additionally, strong present at local hospitals, such as the Chinese Hospital and North East Medical Services (NEMS) was the drive to high referral numbers. Thus, the future CCOW should also be flexible in collaboration with all public, private, and nonprofit organizations across SMC. Furthermore, based on the experience from CCOWs, the lack of help-seeking behaviors were commonly seen in both Medi-Cal and private insurance Chinese clients. Thus, the future CCOW's work should not be limited by insurance type.

Encourage primary care providers to screen mental health problems

As explained in the challenges section above, not all primary care clinics were engaged in mental health referrals to CCOW. Two strategies to overcome this challenge are recommended. First, SMC could mandate all PCPs to screen mental health problems as a part of all new patient intakes and physical exams. A brief 4-item measure of depression and anxiety (PHQ-2 and GAD-2) is great for this purpose (Löwe, 2010). PCPs may implement these 4 questions to their patients' intake and physical exam forms, conduct PHQ-9 and GAD-7 if patients scored more than 0 on either form accordingly, and bill for such screening service. A second strategy is to place more CCOWs in PCPs to conduct mental health screenings, similar to what the current collaboration the CCOW had with the Chinese Hospital.

Make community outreach worker/team a resource hub for San Mateo County residents

Chinese residents in SMC have been referred to CCOW not only for mental health related questions, but also all other inquiries, such as housing, legal issues, and transportation. As all social factors are interrelated and can contribute to one's' mental well being, having one consistent and reliable resource for the Chinese community is important in linking this hard-to-reach community to services. Thus, a long-term goal is to make the current CCOW position into the prototype of a resource hub for Chinese residents in SMC by embedding the position in or more closely aligning it with community resources and community-based organizations.

Make community outreach worker/team a liaison to other Bay Area counties mental health and substance use organizations

The San Francisco Bay Area consists 9 counties. Among them, San Francisco-Oakland-Hayward and San Jose-Sunnyvale-Santa Clara metropolitan areas rank the third and fourth in Chinese population across the US metropolitan areas. Since the Bay Area is interconnected, the CCOW often encountered clients who lived in one county, but sought services in another. Therefore, to serve Bay Area Chinese residents quickly and effectively, more cross-county collaboration is needed. The future CCOW's outreach and networking should not stop at the SMC boundaries, as people live and work across county lines. To accomplish this, the CCOW position should be closely connected to or embedded in community resources or a communitybased organization.

Conclusion

During the last three years, the Chinese Community Outreach Workers (CCOWs) have connected 167 individuals with mental health, drugs and alcohol, and social services. More than 700 community members participated in psychoeducation events coordinated by CCOWs. The Chinese Community Outreach Pilot Program generated momentums in Chinese community members and agencies. For example, the first CCOW, Sunny Choi built the foundation for the three-year outreach program by conducting outreach and education to 24 community-based organizations throughout San Mateo County (SMC). Among them, Chinese Hospital and Self-Help for the Elderly became crucial places for community outreach for his following CCOWs. The second CCOW, Phillip Chen continued to establishing relationship with community-based organizations. Additionally, he built strong relationships with the Access Call Center to increase efficiency for Chinese-speaking Health Plan of San Mateo clients to connect with behavioral health services.

Over the last 8 months, the third CCOW, Shiyu Zhang connected 113 individuals with mental health, drugs and alcohol, and social services. Over 180 community members participated in psychoeducation events coordinated by the CCOW. Building and expanding on previous community workers' accomplishments, the CCOW created new strategies such as using WeChat to connect with Chinese residents in SMC online, and conducting mental health screening at the Chinese Hospital.

In 23 active months of Chinese Community Outreach, the three CCOWS achieved extraordinary results. Nevertheless, in a community that is know for its strong resistant to mental health services, community outreach should be an on-going effort to reduce the cultural stigma towards mental health and to improve the mental wellbeing of Chinese community members.

References

- Abe-Kim, J., Takeuchi, D. T., Hong, S., Zane, N., Sue, S., Spencer, M. S., ... & Alegría, M. (2007). Use of mental health–related services among immigrant and US-born Asian Americans: Results from the National Latino and Asian American study. *American Journal of Public Health*, *97*, 91-98.
- California Department of Health Care Services (2014). Standards for determining threshold languages. Retrieved from http://www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/ APL2014/APL14-008.pdf
- Chen, S., Fang, Y., Chiu, H., Fan, H., Jin, T., & Conwell, Y. (2013). Validation of the nine-item Patient Health Questionnaire to screen for major depression in a Chinese primary care population. *Asia-Pacific Psychiatry*, *5*(2), 61-68.
- Gardner, W., Lucas, A., Kolko, D. J., & Campo, J. V. (2007). Comparison of the PSC-17 and alternative mental health screens in an at-risk primary care sample. *Journal* of the American Academy of Child & Adolescent Psychiatry, 46(5), 611-618.
- Löwe, B., Wahl, I., Rose, M., Spitzer, C., Glaesmer, H., Wingenfeld, K., ... & Brähler, E. (2010). A 4-item measure of depression and anxiety: validation and standardization of the Patient Health Questionnaire-4 (PHQ-4) in the general population. *Journal of Affective Disorders*, *122*, 86-95.
- Office of Diversity and Equity (2017). Reports. Retrieved from http://www.smchealth.org/bhrs/ode
- Pew Research Center (2012). The rise of Asian American. Retrieved from http://www.pewsocialtrends.org/asianamericans-maps/#chinese
- U.S. Census Bureau (2015). American community survey 1-year estimates. Retrieved from

https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src =bkmk.