

Improving Latinx Mental Health: *Role of Promotores*

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Promotores Training

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La salud mental

- ¿Que entiende Ud. sobre las palabras la salud mental?
Hazme un dibujo.
- ¿Cuales son unas cosas que causan o contribuyen al
estres en nuestras comunidades Latinas?

En grupos pequeños

- ¿Cual es una contribución que hace Ud. como una promotora que le da mucha satisfaccion? ¿Que la hace Ud. feliz?
- ¿Cual es una cosa que le da Ud. estrés en su papel como promotora?

Consideraciones y Barreras

- **What are major issues in mental health that impact Latinas and Latinos? (individual symptoms and structural barriers)**
- **What do you identify as major barriers of Latinx population re: accessing mental health?**

Disparidades que la comunidad Latina se encuentra en el estado de Washington

- Latinas and Latinos face significant economic, health and mental health disparities
- Overall, 26% of Latino adults and 36% of Latino children live in poverty, 52% of Latinos aged 18-64 years are uninsured and 27% report poor health compared to 14% of non-Hispanic Whites (WA DOH, 2013)
- In Washington state, nearly one in three Latinas and Latinos lack health care coverage despite the implementation of the ACA (Justice, 2015).

Mental Health Access and Utilization Issues

- Latinas and Latinos experience disparities in the availability, access, and provision of quality mental health care and service that is culturally and linguistically competent (*USDHHS, 2010*).
- Latinx populations have less access to mental health care and, after entering care, they face a higher risk of practitioners misconstruing or misdiagnosing their symptoms.
- Thus, Latinx individuals are less likely to receive care consistent with evidence-based treatment (*USDHHS, 2001; Vega et al., 2010*).

Barriers to Access & Utilization

Individual Level

- Economic, acculturative and migration-related stress, language barriers, discrimination, lack of insurance and transportation, lack of availability of services for co-occurring disorders, and a fear of deportation
- not knowing how to navigate systems not having the necessary documentation required to access services scarcity of services community suspicion of governmental services

Provider Level


- Competing demands, lack of time
- Lack of Spanish-speaking and culturally competent providers
- Clinician cultural beliefs and bias may also contribute to poor quality of care (Schraufnagel et al., 2006)
- Lack of knowledge--risk of misinterpreting and misdiagnosing somatic complaint (a culturally preferred idiom of distress) that may be an expression of depression, anxiety disorder or other mental illness

Falta de proveedores bilingües y biculturales

- Lack of bilingual, bicultural workforce is a serious issue-- hampers ability to provide quality and linguistically competent and culturally responsive mental health care to Latinx population and other racial/ethnic and immigrant populations in our state
- Scarcity is more pronounced in rural communities

Un modelo—que no sirve bien nuestra gente

- Una falta de connexion resultando en una falta de entendimiento y respeto



La sistema
de salud
mental



La
comunidad
latina

Una falta de conocimiento y confianza

Mental Health Providers—WA state

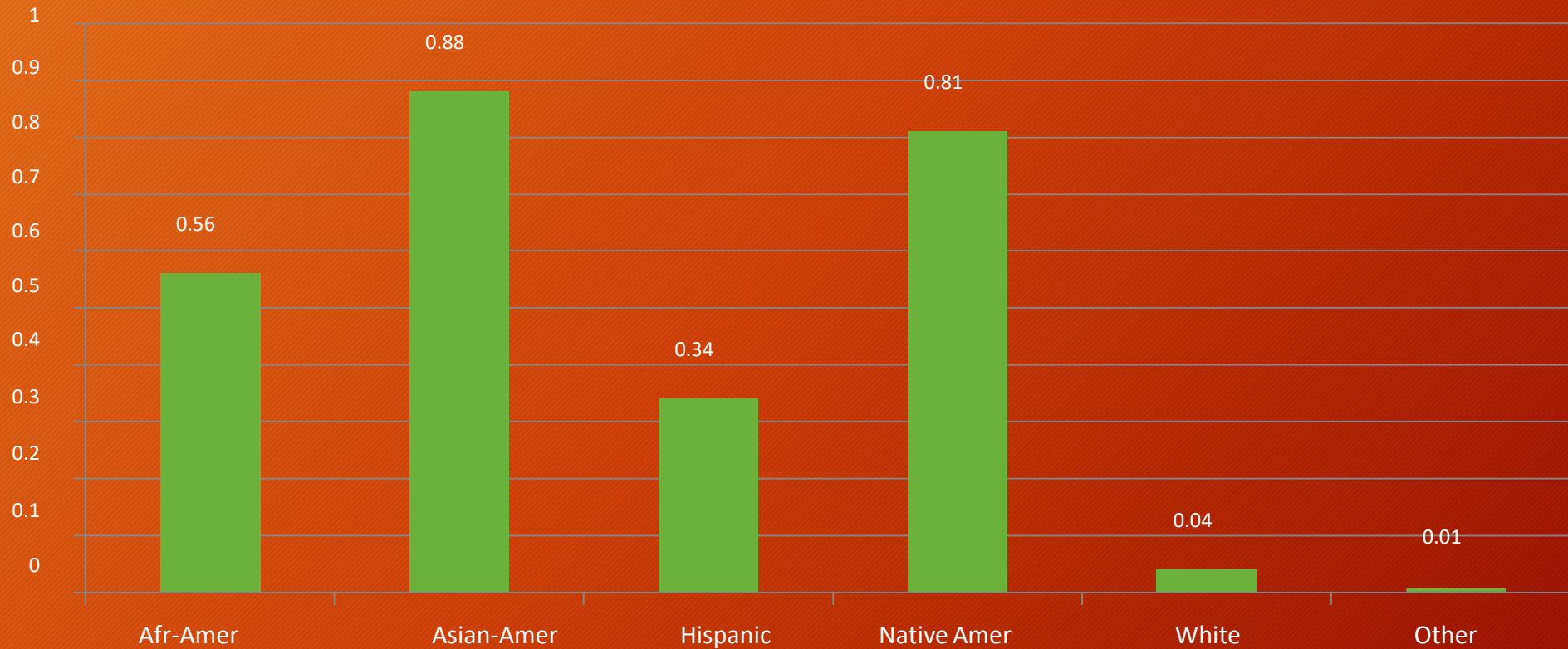
According to 2017 County Health Rankings (a program of the Robert Wood Johnson Foundation):

Washington state:	303 MHP per 100,000 people
King County:	344 MHP per 100,000 people
Yakima County:	250 MHP per 100,000 people

WA State Mental Health Specialists

- Availability and use of mental health specialists to serve as cultural brokers for practitioners working with Latinos and other diverse populations has been underutilized and not sufficiently funded
- Compared to other racial/ethnic Medicaid enrollees, Latinx population has the lowest ratio of mental health specialists.

Mental Health Specialist per 1,000 Medicaid Enrollees



Part II

¿Que puede hacer Ud?

- Como una promotora, ¿que puede hacer Ud. a responder a estas realidades?
- ¿Cuales son unos cambios que querien promover Uds?
- ¿Que comunicacion tiene Ud. con trabajadores sociales o doctores o las clinicas?

Un modelo--Una puente



Las clínicas de atención primaria y la depresión

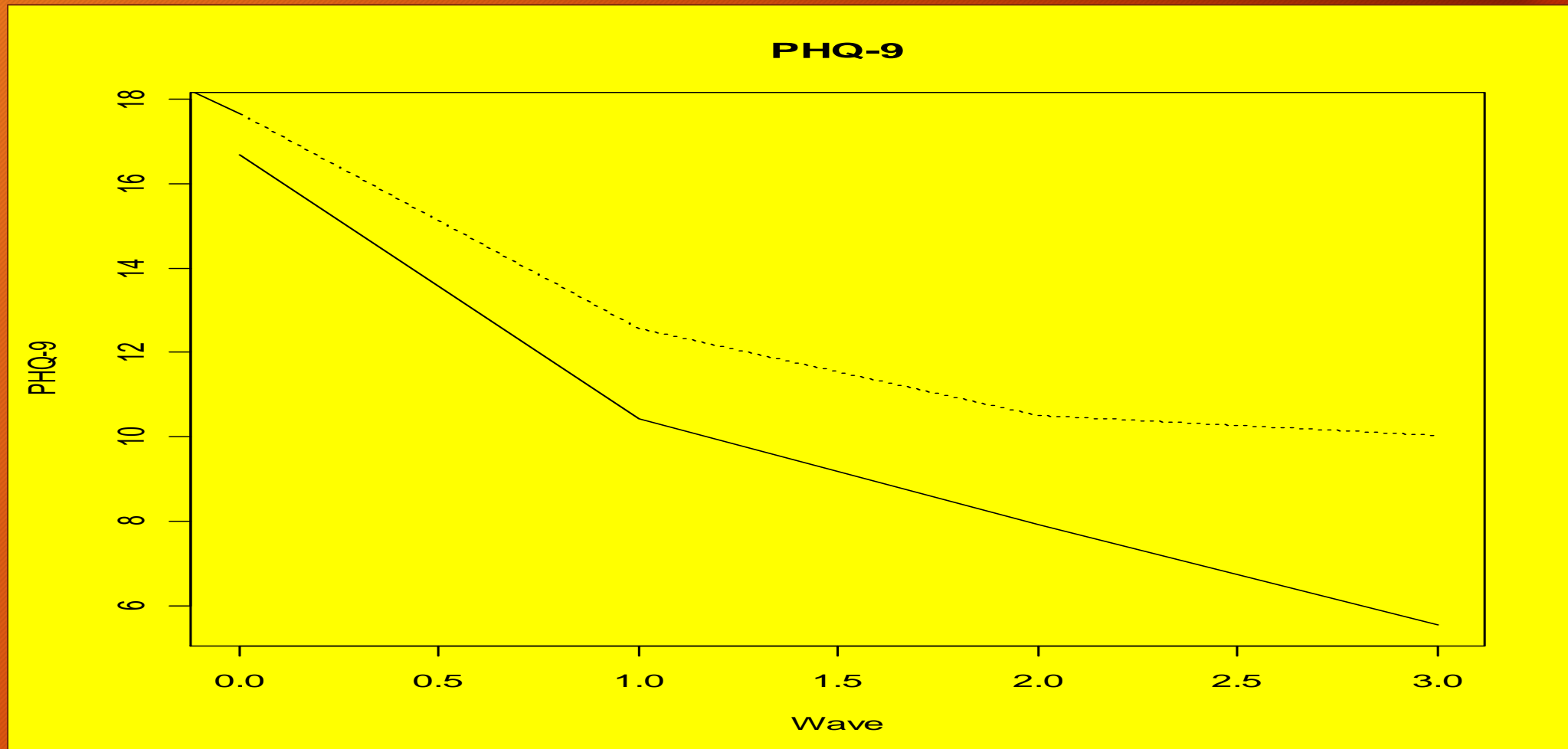
- Up to 30% primary care patients have significant depressive symptoms
- 5-20% meet criteria for major depression
- Rates are higher in primary care settings serving low income patients
- Among Mexican Americans, the largest subgroup of Latinos in the country and state, only a third who are living with depression receive any care and only 12% receive care concordant with practice guidelines (Gonzales et al. 2010)
- Even when primary care providers diagnose depression and recommend treatment Latinos are less likely than whites to obtain specialty mental health services

Previous Pilot Study with YVFWC

- We previously conducted a randomized pilot study (NIMH R34 MH079191-01A1, Aisenberg, PI), that culturally adapted Simon and Ludman's manualized depression intervention
- 101 YVFWC patients (50 received telephone based 8 session CBT and 51 received usual care). CBT was delivered by masters level practitioners.

	overall mean(SD)	Intervention	UC	T	p
Baseline PHQ-9	17.2 (3.6)	16.7 (3.7)	17.7 (3.3)	1.40	0.163
Month 3 PHQ-9	8.9 (6.4)	7.3 (5.4)	10.4 (6.9)	2.09	0.040*
Month 6 PHQ-9	7.7 (7.4)	5.4 (6.3)	10.0 (8.0)	2.67	0.009*

Treatment outcomes over time



We know what works

- This study clearly demonstrated the effectiveness of telephone-based, manualized CBT treatment for rural Latinas and Latinos, delivered by Master level practitioners
- Importance of sustained communication with PCPs
- Challenges
 - scarcity of Master level bilingual practitioners

Nuevo estudio en colaboración con YVFWC y la Universidad de Heritage

- Preparar estudiantes en el programa de BSW (paraprofessionals) a ser el proveedor del tratamiento de CBT por el telefono.
- 6 estudiantes cada año por los dos años que vienen

Innovation and Goal

- Our program es el primer y unico programa en el pais that enables indigenous paraprofessionals to learn from local and national experts while maintaining connections to their communities.
- Es possible hacer algo semejante con promotores en este pais? En otros partres del mundo?
- **GOAL:** *The provision of improved, sustainable depression care for rural and urban Latinx populations*

El papel de Promotores

- En muchos casos, with specialized training and support, promotores can provide mental health prevention and early intervention services and link individuals and families with needed treatment.
- Cual es una barrera?

Promoting Health and Wellness

- **Role of promotores in promoting wellness and healthy relationships and functioning—**
 - as understood by professionals &**
 - as understood by promotores**

Su papel

- ESCUCHAR
 - Ser presente
 - Acompañar
 - Comunicar
 - Facilitar y Promover
-
- Nuestra agenda
 - Ejemplo de Drew

Buenas practicas

- **Aumentando la confianza**--“Una platica” o tomando un cafecito
- **Quien es el enfoque**—Ud. o la persona buscando ayuda?
 - Es importante ser presente a la otra persona.
 - Must distinguish between their own concerns and experiences from those of the members of the community

Elevar y capacitar

- Provide emotional support to individuals and families
- Facilitate support groups
- Provide mental health education to address the challenges Latinos face including co-morbidity of mental illness with physical diseases
- Provide training so as to identify and refer people in need of additional services and offer support for accessing resources and navigating systems
- Evaluate impact and successes of promotores

Support for Promotores

- **Enhancing support for promotores and enhancing their effectiveness and impact via entrenamientos, conferencias y supervision con cualidad.**
- **Tiene Uds. experiencias, sabiduria, y entendimiento que son tan importantes para la transformacion de nuestra sistema de salud mental.**



RESEARCH • PRACTICE • POLICY

LATINO CENTER FOR HEALTH

ENGAGING LATINO COMMUNITIES

Gracias!

Thank you!

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