



ASSESSMENT OF SELF¹

Before any patient encounter, it is important for the provider to conduct a self-assessment. Self-assessment of one's own cultural identity, values, assumptions & biases can be difficult, the following questions can help begin the process.



CLIENT BARRIERS TO MENTAL HEALTHCARE⁶

• Even the most culturally inclusive healthcare settings will experience challenges with engaging clients. There may be a number of personal & client barriers to consider.

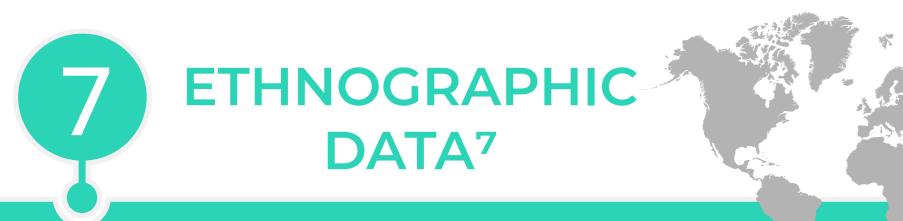
Ask questions to assess barriers:

Client Attitudes

Why do you think thatyou are here to see me today? Have you ever sought treatment before? What have you done to treat this concern so far?

Client Self-Efficacy

every [insert duration]?



- Ethnography: a social research method occurring in natural settings characterized by learning the cuture of the group under study & experiencing their way of life before attempting to derive explanations of their attitudes/behavior.
- Can be related to ethnicity, nationality, gender, occupation, etc. It is normally conducted in a single setting, & data collection is largely dependent upon participant observation & interviews.



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JRING CONTINUITY **OF CARE**

Three types of continuity exist in healthcare:13

- . Informational continuity
- 2. Management continuity 3. Relational continuity

Patient navigators are trained service providers that escort & support patients through multi-levels of care and entitlments.¹⁴ The Patient Navigator Outreach & Disease Prevention Act specified <u>6 tasks:</u>

- . Assist in healthcare
- service coordination
- 2. Facilitate involvement of
- community organizations
- 3. Notify individuals of clinical trials

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12 Steps to Inclusivity in Mental Health Services

STRUCTURAL BARRIERS FO MENTAL HEALTHCARE²

The provider should be aware that there are several factors that may prevent patients to both accessing and following through with mental health treatment.

Structural factors include:

- Insurance
- Transportation
- Proximity of mental health treatment locations
- Encounters with racism & discrimination in healthcare settings

PRACTITIONER BARRIERS TO MENTAL HEALTHCARE⁵

- After conducting an assessment of the mental health setting, providers may be in settings that are not optimal to providing culturally responsive care. Do not be discouraged! Recognizng limits allows opportunity for change.
- For example, review the facility/program mission statment, policies, etc. for explicit mentuona of inclusivity & cultural diversity.

BELIEFS AROUND MENTAL HEALTH⁸

- Cultural beliefs surrounding health influence one's willingness to seek treatment, coping with their symptoms, & where they seek help.
- Questions to ask to help assess beliefs arounds mental health:
- Do you perceive a difference between mental illness & physical illness? What role does religion play in how you handle personal problems? What do you think, or have you heard, causes mental illness? How do you feel about taking medication?

- "Macrosystem" describes the cultural context in which a person lives.
- It is the larger culture as a whole, and includes: socioeconomic status, wealth, poverty, & ethnicity. It also includes their children, parents, and school.
- The macrosystem is dynamic, and it is important to consider when providing treatment recommendations.

What is my cultural identity?

How does my cultural identity shape my views of mental health?

> How does my cultural identity shape my views about others?

> > What factors have made

me least comfortable in

working with patients

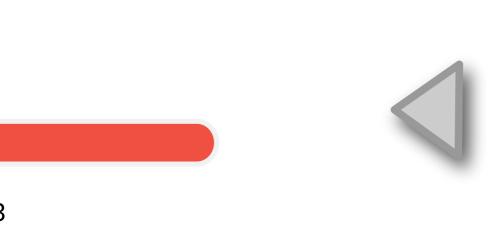
from different

backgrounds?

Do you think you will feel like seeing me Do you feel you have enough support & resources to continue treatment? What can I do to help your success?







- 4. Anticipate & help patients overcome barriers 5. Coordinate with insurers 6. Conduct ongoing outreach

Materials were developed in collaboration with April Thames, PhD, Professor of Psychiatry at UCLA Department of Psychiatry & Biobehavioral Sciences.











quality indicators to ensure inclusivity and mental health services that respond to patients' needs. is needed. An evaluation system can also be used to

 It is important to develop strategic planning and Annual qualitative & quantitative evaluation of indicators identify the needs of disadvantaged social groups.

- Examples of indicators:
- Waiting time in an emergency department



rapport & build a relationship.



• Avoid any use of jargon. Once rapport has been established, gather information about potential barriers to treatment adherance.



CULTURAL IDENTITIES Intersecting identities include:⁹

- Gender Sexual orientation Race
- Nationality
- Social class
- opression, domination, & discrimination.¹⁰





- the family system in terms of influence. It is possible that even among large family structures, 1-2 family members are most
- responsible for the patient's care. • While it is recommended to try to engage all family members diffusion of responsibility.



ASSESSMENT OF MENTAL HEALTH SETTINGS³

• # of chronic patients hospitalized in psychiatric hospitals rather than outpatient • Waiting days/lists for evaluation in the outpatient clinic

• Average patient satisfaction ratings/recording patient experiences • % of patients who have improved as a result of treatment

HANDLING THE **REFFERAL/FIRST ENCOUNTER**⁴

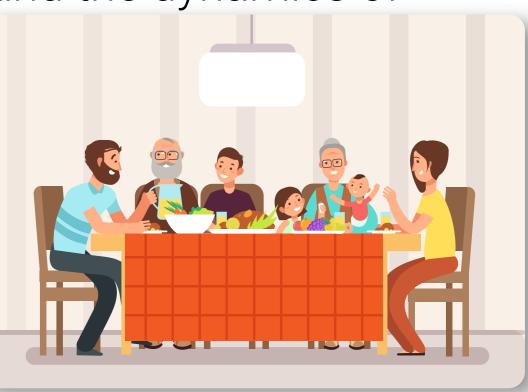
• When meeting clients for the first time, use culturally responsive interview behaviors. Use simple greeting behaviors like as handshakes, warm facial expression, and small talk to establish



- Ethnicity
- Age
- Mental/physical disbility
- Any other forms of identity

• Assessing intersecting cultural identities can help to understand how social identities, when they overlap, relate to systems of

 Involving the family system in treatment recommendations is critical. It is important to understand the dynamics of



in the treatment recommendation process, it may result in