SALUD MENTAL: INTEGRATED HEALTHCARE, MENTAL HEALTH EDUCATION, & PROGRAM DEVELOPMENT

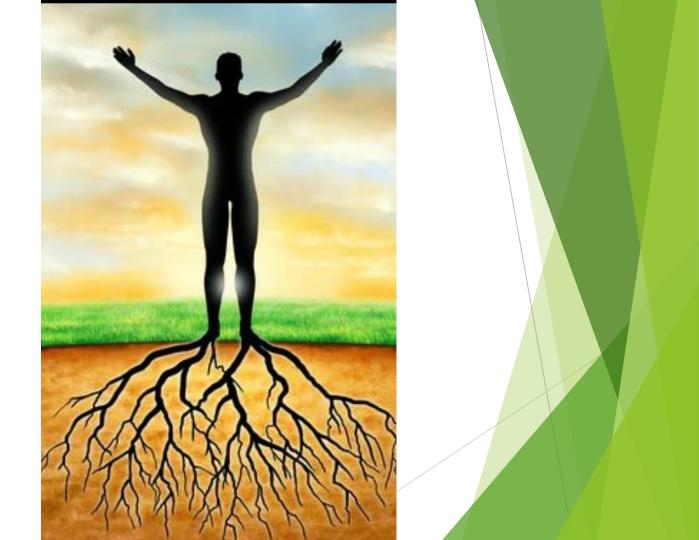
VECINOS

FARMWORKER HEALTH PROGRAM

OVERVIEW

- Why are we here, What do we do, What is our purpose, Concept of MH for Migrant Farmworkers, based on our beliefs & best practices
- Obstacles and difficulties of starting an integrated Health care including COVID times
- Where to get information and how to make it accessible to our population

Settling In



Who is VECINOS

- Began in 2001 as a program of the Jackson County Public Health Department
- 2004: Incorporated as an independent nonprofit and sought funding from the NC Farmworker Health Program, which we still receive annually. Received mobile clinic from area rotary clubs

Expansion to 6 western counties and seasonal

- farmworkers

 2013: Administrative offices on Western
- Carolina University's campus
- ▶ 2017: Expanded to 8 western counties
- 2019: Behavioral health program, additional funding for more staff, new mobile clinic campaign to support BH on outreach, expansion to two additional communities
- 2020: Roll out new Mobil Clinic, COVID response, telehealth, OVW Grant

Serve 8 westernmost NC counties and surrounding communities

Currently: 6 full time

employees - 3 outreach workers, 1 outreach coordinator, Clinic manager

Medical Providers, including:

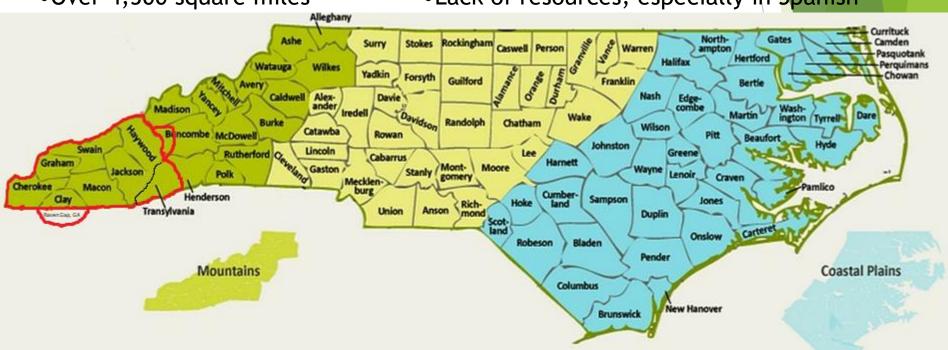
- RNs, FNPs, MDs, LCSWs;
 Interns: WCU interns and
 volunteers

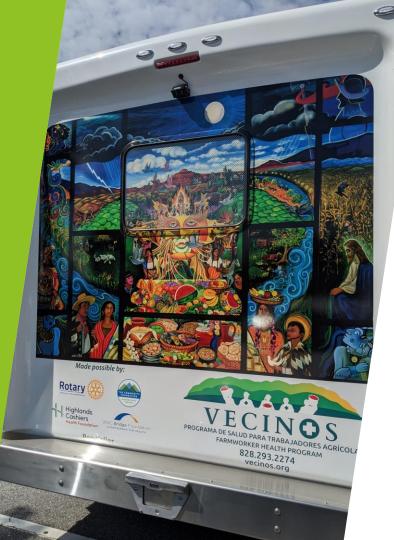
 MH program has many highly
- educated and specialized volunteers, like psychiatrists, psychologists, LCSWs 2020 outcomes:
 - 420 medical encounters;
 - 151 Behavioral health encounters, 39 patients
 - 1438 total patient encounters

WESTERN NORTH CAROLINA

- •Rural, mountainous topography
- •MH HPSA scores range 15-20
- •Over 4,500 square miles

- •Mix of H2A, migrant, seasonal workers
- 3 bilingual therapists in service region
- Lack of resources, especially in Spanish





LITERATURE REVIEW

- Integrated health settings, such as medical homes with mental health services or behavioral health homes with general medical services, may improve treatment utilization and outcomes.
- General practitioners should link LatinX patients to affordable, culturally and linguistically appropriate mental health specialty services
- Providers with substantial knowledge of the cultural norms and immigration histories and patterns of each subgroup should tailor health assessment and education to the distinct experiences of patients.
- MECA- Multidimensional Ecological Comparative Approach
- Most women felt comfortable with individual therapy rather than any other kind.
 - Group family therapy = least comfortable;
 Cognitive Behavioral Therapy or psychotherapy
 = most comfortable; PCP was preferred place
 to receive services; Need information and

CULTURAL EXPECTATIONS

- What does mental health look like in the LatinX culture?
- Is culture a barrier when it comes to mental health?
- How do we help farmworkers make time for their own health care?

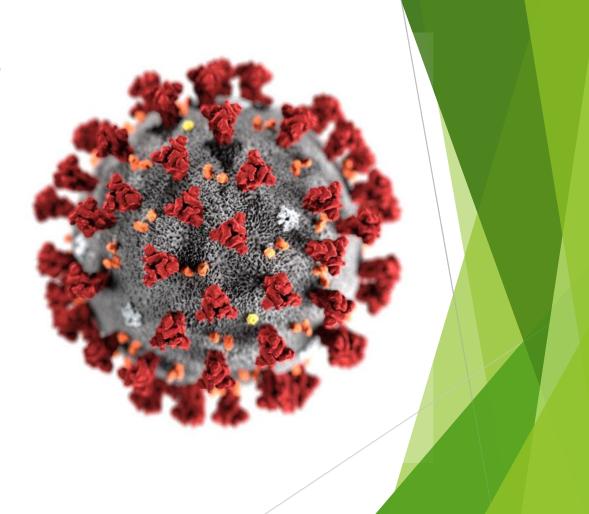


Covid Times



COVID Changes

- Implementing Telehealth
- Zoom meetings-Home office
- Supporting staff through selfcare
- COVID Team on board July
- Utilizing new Mobile unit to provide COVID test, October





BACKGROUND

- Patient Needs
- Lack of bilingual mental health services in area
- Outreach workers interpreting for English MH for 2 years
- Community connections -Kenny/Marianne
- INTERNAL CLINICAL REVIEW FOR CAPACITY
- Office of Rural Health Grant
- MH outreach assessment
- Program Coordinator

- Cuestionarios- MH Community Needs Assessment
- MH Advisory Council
- Implementation of services in clinic
- Currently moving towards offering services at outreach

ADVISORY BOARD

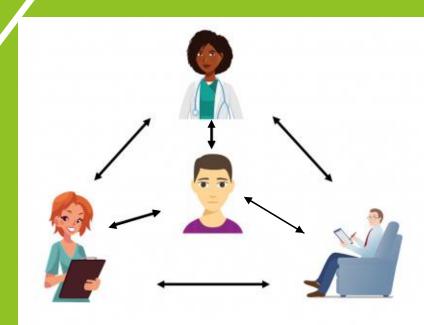
- Executive Director
- Lead Therapist
- Psychologist
- Community partners
- Interns
- LCSW supervisor





PROGRAM FRAMEWORK

- ►Integrated Healthcare Model
- ► Migrant Farmworkers
- ► Seasonal Farmworkers
- **▶**Education



A Visit to the Mental Health Program Patient



- Patient Registration- CHW
 - ►Screenings:
 - PHQ-2→ PHQ-9
 - ▶ RHS-15
 - CAGE-AID
 - Multi-Dimensional Behavioral Health Screen (MBHS)
 - Biopsychosocial Assessment
 - MECA Framework

Referral to Mental Health Care Provider





It's all in the Details

- Communication between providers
- Encounter Tracking
- Tracking patient's progress-MBHS
- Policy and procedure
 - Manual
 - Consent forms
 - Release of Information
 - Billing codes





COMMUNITY
MENTAL HEALTH
NEEDS ASSESSMENT
CUESTIONARIOS

DEVELOPMENT of the CMHNA

▶What is it?

▶Questions- Google Forum

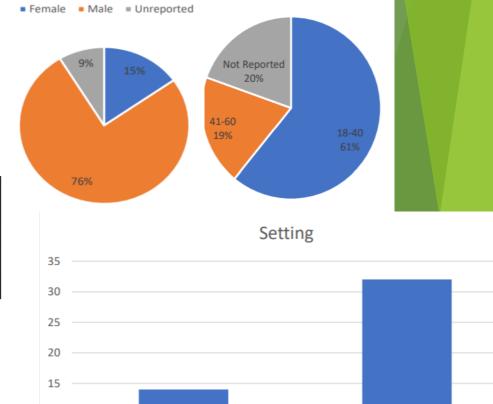
► Why is it important to learn about the people we are going to serve



Demographics				Results Gender		
gender	Frequency	Percent		Cumulative Percent	■ Female ■ Male ■ U	
F	7	15.22	7	15.22	9%	
M	35	76.09	42	91.30	15%	
U	4	8.70	46	100.00		

Age Group	Frequency	Percent		Cumulative Percent
18-40	28	60.87	28	60.87
41-60	9	19.57	37	80.43
Not Reported	9	19.57	46	100.00

Settings	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Camp	14	30.43	14	30.43
Clinic	32	69.57	46	100.00



Clinic

Camp

10

5

0

Age Group

Revisions

Restructured Cuestionarios for this year's Mental Health Needs Assessment

Providing mental health groups

Number of participants

Timely <u>analysis</u> of the research

MENTAL HEALTH EDUCATION

COVID VECINOS



Comprometer a acciones

¿Que puede hacer durante la semana para apoyarse, usted mismo, y a otros? Escribe en una agenda maneras en cual se puede apoyar.



Ove la razón

No presta atención a los pensamientos de ansiedad y preocupaciones Aunque pone su atención en factos y cosas positivas de su vida.



Valores

Cual son sus valores? Como quiere tratarse a usted mismo y a los



Identificar Recursos

Identifique quien da recursos y donde se puede recibir apoyo y ayuda, y en fortaleza



Desinfectar y Distancia

Lava sus manos y mantenga una distancia de 6' pies con otros personas. Use una mascarilla cuando salga en público. Asegúrese de cubrirse la nariz y la boca.



VECINOS Depende en su comunidad, utilizar sus apoyos, y pide ayuda si la



Escuchar

Escucha para la verdad y factos. Encuentra noticias de fuentes confiables.



Mantenga su conexiones familiar y de amigos para el apoyo. Nosotros estamos en esto juntos.



Implementar

Estamos viviendo tiempos nuevos y necesitamos esquillas nuevos: Desarrollar un plan, hacer un Agenda del día, hacer ejercicio, buscar esperanza.



No sale la casa

Mantenga en casa cuando se puede, no sale si no es necesario



Sé el cambio que deseas ver en el mundo. Mantenga su valores y pon un buen ejemplo por su familia y vecinos.



Sustenta bienestar, Come saludable, Duerma bien, Respirar bien profundo, buscar tranquilidad en su mente, Mover su cuerpo; Hablar con su médico si tiene algunos síntomas: Fiebre, Tos, Respiración dificultosa

COVID RESPONSE

Utilize systems of MH Education that were already in place.

LITERACY LEVELS

- English as a second language
- Spanish as a second language
- Indigenous language as first language
- Diverse reading and writing levels



Solution

- Translate English documents
- Concise sentences
- Picture based

Resources

Journeyworks--https://www.journeyworks.com Vistaprint----https://www.vistaprint.com www.samhsa.gov



MEASURES

Evaluation of the qualitative review of community needs assessment

Quantitative review of regular behavioral health screenings

Quantitative data on patient encounters, discuss case studies, weekly meetings with MH team

Number of encounters from 2020:

mental health: 151

mental health ed: 585

Common diagnosis: 34% Post Traumatic Stress

Average Patient visits: 2.87 (1-18 visits per patient)

31 patient have received consistent mental health counseling

Subjective Take Away

Connections, Collaborations & Advisors

Meet the clients where they are

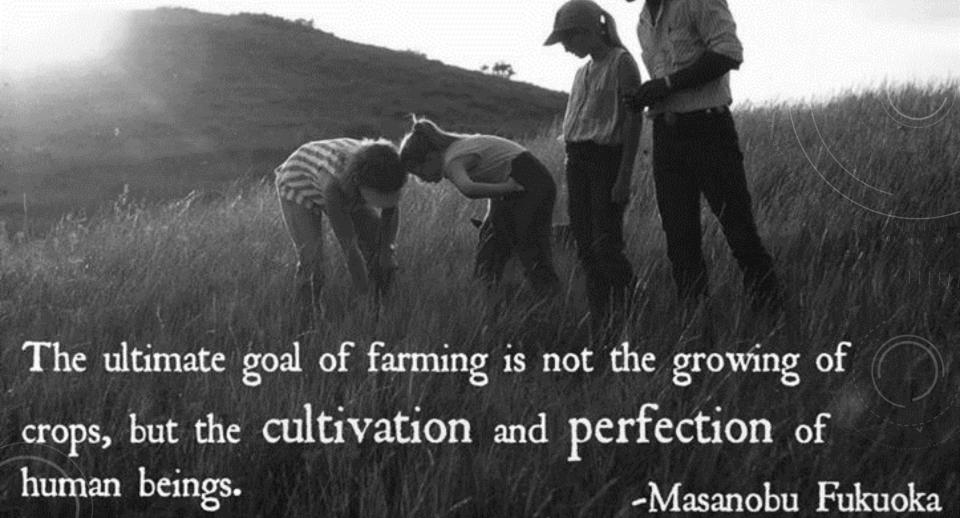
Grant Funding

Tracking Patient Outcomes

What have you learned?

- ▶ Unique factors to consider when establishing an integrated health care program for MSAW
- ▶ Guidelines for implementing mental health
- Performance measures that can be used when measuring programmatic results education for MSAW
- ▶ The growing pains of COVID-19

Farmworkers: We need them! They need us,



REFERENCES

- Arcury et al. (2012). Work safety climate, musculoskeletal discomfort, working while injured, and depression among migrant farmworkers in North Carolina.
- Anthony M, Martin E, Avery A, Williams J. Self care and health-seeking behavior of migrant farmworkers. Journal Of Immigrant & Minority Health [serial online]. October 2010;12(5):634-639. doi: 10.1007/s10903-009-9252-9.
- Bello-Bravo J, Dannon E, Agunbiade T, Tamo M, Pittendrigh B. The prospect of animated videos in agriculture and health: A case study in Benin. International Journal Of Education & Development Using Information & Communication Technology. 2013;9(3):4-16
- Cohen, S., & Wills, T. A. (1985). Stress, social support, and the buffering hypothesis. *Psychological Bulletin*, *98*(2), 310-357.
- Crain, R., Grzywacz, J. G., Schwantes, M., Isom, S., Quandt, S. A., & Arcury, T. A. (2012). Correlates of mental health among Latino farmworkers in North Carolina. The Journal of rural health: official journal of the American Rural Health Association and the National Rural Health Care Association, 28(3), 277-285. doi:10.1111/j.1748-0361.2011.00401.x

- Cristancho, S., Peters, K. E., & Garces, D. M. (2016). Community mental health services for Latinos and Latinas in the rural U.S.. *Revista Interamericana de Psicología*, 50(1), 149-160.
- Fortuna LR, Porche MV, Alegria M. (2008). Political violence, psychosocial trauma, and the context of mental health services use among immigrant Latinos in the United States. *Ethnicity & Health (13)*, 435-463. doi: 10.1080/13557850701837286.
- Gardner, S. (2015). Salud Mental: A CBT Program for migrant and seasona vineyard workers. Unpublished bachelor's of science capstone project. Pacific University, Forest Grove, Oregon.
- Hiott, A. E., Grzywacz, J. G., Davis, S. W., Quandt, S. A., & Arcury, T. A. (2008). Migrant farmworker stress: mental health implications. *The Journal of Rural Health*, 24(1), 32-39. Retrieved from https://onlinelibrary.wiley.com/doi/epdf/10.11 (361.2008.00134.x
- Kaltman, S., Mendoza, H.A., Gonzales, F. (2014). Preferences for Trauma-Related Mental Health Services among Latina Immigrants from Central America, South America, and Mexico. *Psychological Trauma Theory*, *Research*, *Practice and Policy* 6, 83-91.

REFERENCES CONT.

- Kaltman, S., Pauk, J., & Alter, C. (2011). Meeting the mental health needs of low-income immigrants in primary care: A community adaptation of an evidence-based model. *American Journal of Orthopsychiatry*, 81(4), 543-551. http://dx.doi.org.proxy195.nclive.org/10.1111/j.1939-0025.2011.01125.x
- Kanamori M, De La Rosa M, Diez S, et al. A Brief Report: Lessons Learned and Preliminary Findings of Progreso en Salud, an HIV Risk Reduction Intervention for Latina Seasonal Farmworkers. International Journal Of Environmental Research And Public Health. 2016;14(1). doi:10.3390/ijerph14010032.
- Liebman A, Juárez P, Leyva C, Corona A. A pilot program using promotoras de salud to educate farmworker families about the risk from pesticide exposure. *J Agromedicine*. 2007;12(2):33-43.
- Leite et al. (2014). Cell Phone Utilization among Foreign-born Latinos: a Promising Tool for Dissemination of Health and HIV Information.
- Mendez, J. L. & Westerberg, D. (2012). Implementation of a culturally adapted treatment to reduce barriers for Latino parents. Cultural Diversity and Ethnic Minority Psychology, 18(4), 363-372. doi: 10.1037/a0029436
- Mitchell, H.G. (March, 2019). Comparing the Multidimensional Behavioral Health Screen to the PHQ-9 in Predicting Depression-Related Symptomatology in a Primary Medical Care Sample. (Master's dissertation). Retrieved from https://libres.uncg.edu/ir/wcu/f/Mitchell20
- Mora D, Gryzwacz J, Quandt S, et al. (2013). Social Isolation Among Latino Workers in Rural North Carolina: Exposure and Health Implications.
- Mora, D. C., Quandt, S. A., Chen, H., & Arcury, T. A. (2016). Associations of Poor Housing with Mental Health Among North Carolina Latino Migrant Farmworkers. *Journal of agromedicine*, 21(4), 327-334. doi:10.1080/1059924X.2016.1211053
- National Center for Farmworker Health, 2017. Agricultural Workers and Mental Health. Retrieved from
 - http://www.ncfh.org/uploads/3/8/6/8/38685499/fs_mental_health.pdf
 - Sungkyu, L. & Held, M.L. (2015). Variation in Mental Health Service Use Among U.S. Latinos by Place of Origin and Service Provider Type. *Psychiatric Services*, 66(1), 56-64. Retrieved from https://ps.psychiatryonline.org/doi/full/10.1176/appi.ps.2013005333

THANKS!

Contact:

Kenneth Parmenter

Kparmenter@vecinosinc.org

Marianne Martinez, Executive Director

Mmartinez@vecinos.org

