

The background features a gradient from red at the top to blue at the bottom. It is overlaid with various circular and semi-circular patterns, some resembling a scale or dial with numerical markings (140, 150, 160, 170, 180, 190, 200, 210, 220, 230, 240, 250, 260). There are also smaller circles and dashed lines scattered throughout.

SALUD MENTAL: INTEGRATED MENTAL HEALTH FOR MSAW

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VECINOS FARMWORKER HEALTH PROGRAM

CULLOWHEE, NC

OVERVIEW

- **Obstacles and difficulties of starting an integrated care facility**
- **Where to get information and how to make it accessible to our population**
- **Why are we here, What do we do, What is our purpose, Concept of MH for Migrant Farm Workers, based on our beliefs**

VECINOS

- Started in 2001 out of the public health department with a “rogue” RN and doctor
- Worked with NCFHP grant, which we still receive yearly
- 2004: Incorporated as a non-profit
- 2005: mobile unit
- Continual growth, now serving 950 patients in 8 counties and surrounding areas
- Serve 8 western-most NC counties
- Staff: 4 Full-time employees; Providers, including RNs, FNPs, MDs, LCSWAs; Interns: WCU interns and SAF Fellows and interns
- 2019 Goals:
 - 900 medical encounters; 100 Behavioral health encounters.
 - 1780 total patient encounters

WESTERN NORTH CAROLINA



LITERATURE REVIEW

Latinos Mental Health Treatment Disparities

<1 in 11 with mental disorder contacts specialists

<1 in 20 uses services from mental disorder specialists

20 Latino mental health professionals per 100,000 Latinos

36% with depression receive care

- Cristancho, Garcés, Peters, and Mueller (2008) found that there is a severe shortage of Spanish-speaking health and mental health providers;
- those who do serve Latinos and Latinas have limited capacity to understand their cultural beliefs and backgrounds.
- alarming lack of interpreters to facilitate patients' communication with English-speaking monolingual providers.
- Cristancho, Peters, and Garcés(2014) found that rural Latinos and Latinas reported a preference for workshops in Spanish in community settings such as schools and faith-based organizations to obtain health information.
- **Mendez, J. L. & Westerberg, D. (2012):**
- Disparities are defined by The National Healthcare Disparities Report (2010) as health conditions that are unequal to some degree, including factors that are associated with differential rates of disease for a subgroup or population (see Carter-Pokras & Baquet, 2002 for analysis of existing state and federal definitions of disparities).
- fewer than 1 in 20 Latino immigrants with mental disorders use services of mental health specialists (U.S. DHHS, 2001) and advances in medicine are less likely to reach Latinos (Reyes, Putte, Falcon & Levy, 2004).
- when a treatment is closely aligned to the cultural worldview of the client, the more likely it is to be successful (Smith et al., 2011).
- There seems to be greater agreement that intervention delivery should at minimum occur in the client's preferred language (Smith et al., 2011).
- multiple meta-analyses suggesting that evidence based practice (EBP) using cultural adaptations, specific to the client's background and preferred language, produce stronger effects than programs without such adaptations, the availability of these types of programs is insufficient (Griner & Smith, 2006; Smith et al., 2011).

PROGRAM ESTABLISHMENT



PROGRAM OVERVIEW

- **Clinic location**
- **Lack of general mental health services in area**
- **Direct interpretation from staff**
- **Office of Rural Health Grant**
- **Bilingual mental health professionals reaching out**
- **Program Coordinator**
- **Advisory Council**
- **Client Needs**

INTERNAL CLINICAL REVIEW FOR CAPACITY

- Mental Health Program Coordinator
 - Intern
 - Mental Health Provider
 - Advisory Team
-
- Static clinic space
 - Integrated care
 - Sterile clinic room
 - Confidentiality



Mental Health Program Logic Model

Program: Mental Health Program for Migrant and Seasonal workers

Goals

Assess patients' mental health needs

Increase knowledge and awareness about mental health

Accessibility to mental health resources

*(45 encounters by March 31st)

INPUTS		OUTPUTS		OUTCOMES	
What we invest	What we do	Who we reach	Why this project: short-term results	Why this project: intermediate results	Why this project: long-term results
<ul style="list-style-type: none"> Vecinos Staff (Executive Director & MH Program Coordinator) LCSW(A) Advisory Team (4, possibly 7, members) Time Money Research (similar programs across the US, evidence-based practices, mental health among migrant and seasonal workers and Latino community) Materials (handouts, factsheets, info packets, videos) Space (clinic? A classroom? outreach) Technology (internet access during outreach? iPad/laptop/phone?- same for clinic) 	<ul style="list-style-type: none"> Develop a needs assessment survey (RHS-15 for MH, think of doing socioeconomic) Administer survey to patients and analyze results Deliver MH education to patients via lessons (some topics chosen, group setting) One on one counseling (clinic and outreach) Group counseling (clinic and outreach) Create MH info packet (can be tailored to H2A and seasonal) Create partnerships with MH providers in the area for referral (Meridian?) 	<ul style="list-style-type: none"> Seasonal patients H2A patients Migrant patients Clinical professionals 	<p><i>Learning</i></p> <ul style="list-style-type: none"> Awareness about MH in the Hispanic community Knowledge about MH topics/ conditions A possible positive change in attitudes towards MH Learn skills or techniques to manage certain MH issues Motivation to seek MH services Learn about MH services and resources 	<p><i>Action</i></p> <ul style="list-style-type: none"> Patients participate in MH lessons and activities Patients attend one-on one and group sessions 	<p><i>Conditions</i></p> <ul style="list-style-type: none"> Patients' MH needs are met Patients' socio-economic needs are met Continue to get funding for the program Vecinos provides a more comprehensive health care <u>services</u>

Assumptions

- Beliefs about the environment and community

External Factors

- Positive and negative influences
- Culture, economics, demographics

PROGRAM FRAMEWORK

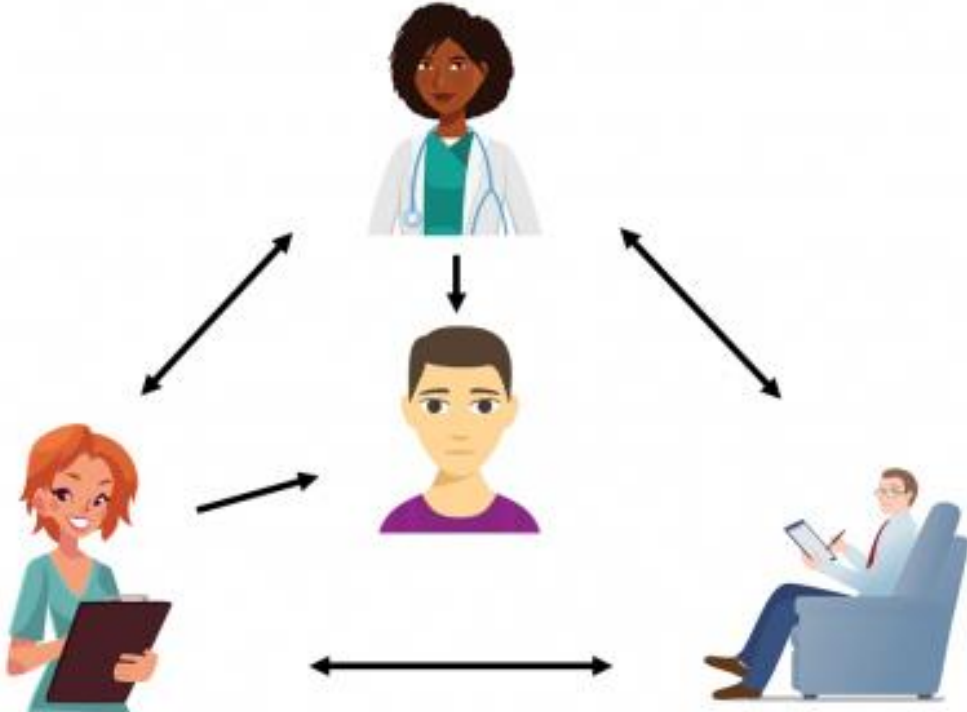


Integrated Healthcare Model

Migrant Farmworkers

Seasonal Farmworkers

Education

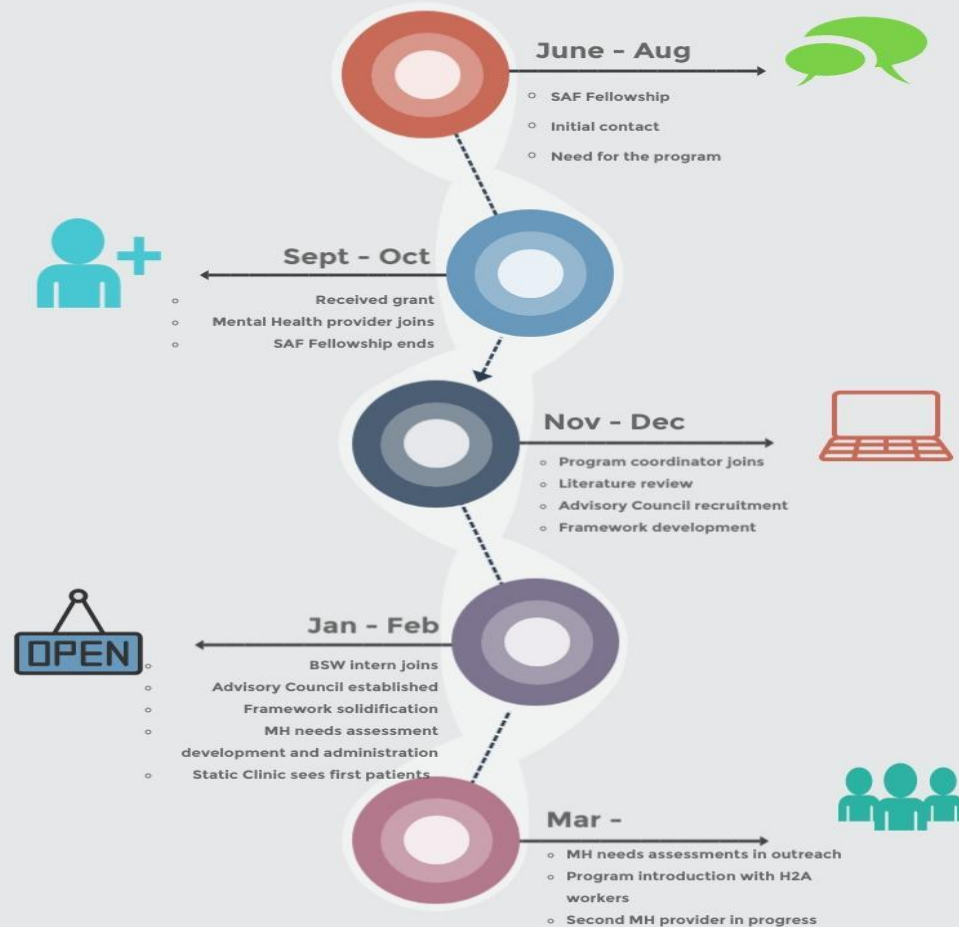


ADVISORY BOARD

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



Program Development Timeline



It's All in the Details

- Communication between providers
- Health records
- How are you getting patients?
- Encounter Tracking
- Assessment tools
- Consent forms
- Tracking patient's progress
- Provider sheet
- Billing codes
- Clinic flow
- Protocols and procedures
- Manual
- Plan for continuity



OBSTACLES



- **Uncertainty of a new program**
 - Will it work
 - Will patients utilize the services
- **Bilingual Mental Health Providers**
- **Clinic location**
 - Small rural town
 - Majority of the population demographics do not represent patients' demographics
 - Service area is large
- **Clinic's capacity to manage additional services**
 - Staff
 - Patient number growing every year
- **Mental Health beliefs in the Hispanic culture**
 - Negative
 - Association with being "crazy"
- **Visits Documentation**



COMMUNITY
MENTAL HEALTH
NEEDS ASSESSMENT
QUESTIONAIROS



DEVELOPMENT

- What is it?
- Need
- Questions
- Why is it important to learn about the people we are going to serve
- Thought process behind development

CUESTIONARIO



Cuestionario del Programa de Salud Mental y Emocional

En un esfuerzo de brindarle un servicio más completo, Vecinos está desarrollando un programa enfocado en la salud mental y emocional. Antes de continuar con la implementación de dicho programa, nos gustaría incluirlo en el proceso, y saber qué es lo que piensa. Abajo verá un set de preguntas sobre qué es lo que usted, o un ser querido, necesita de Vecinos y cuáles serían sus preferencias si estuviera interesado en usar los servicios del nuevo programa de salud mental y emocional. No le aseguramos que todo lo que mencionamos abajo vaya a pasar, solo son ideas de lo que podríamos hacer con el programa. Sus respuestas solo serán vistas por los empleados de Vecinos y no serán compartidas con nadie más.

Conteste cada pregunta (señalando su preferencia o escribiendo su respuesta).

1. **Hombre/ Mujer** **Edad:** 18-40 41-60 61+

2. **¿Qué son dos cosas que sabe usted acerca de la salud mental?**

- a. _____
b. _____

3. **¿Cómo se siente al utilizar los servicios médicos de Vecinos en general?**

1	2	3	4	5
Incomodo/a		Neutral/Sin opinión		Muy bien

4. **¿En los últimos 3 meses, usted ha:**

Por favor marque todas las casillas que correspondan con su selección

- Tenido problemas para dormir
- Estado preocupado sobre una relación con un ser querido
- Estado preocupado sobre una relación con un compañero de trabajo
- Sentido inseguridad o peligro en su casa o comunidad
- Tenido un buen apoyo emocional de sus familiares y amigos

5. **¿Qué tan probable es de que usted utilizaría los servicios del programa de salud mental?**

1	2	3	4	5
No es probable		Neutral/Sin opinión		Muy probable

6. **¿Qué tan probable es de que usted utilizaría los servicios del programa de salud mental si algún amigo o familiar lo/la pudiera acompañar?**

1	2	3	4	5
No es probable		Neutral/Sin opinión		Muy probable

Por favor marque todas las casillas que correspondan con su selección:

7. **¿Cuales servicios le interesarían más?**

- Grupos de apoyo (para platicar de temas de la salud mental y aprender a sobrellevarlos)
- Sesiones (terapias) individuales (platicar con un trabajador social de uno a uno)
- Educación escrita sobre la salud mental y emocional (folletos y hojas informativas)
- Presentaciones o lecturas sobre la salud mental (sesiones en grupo)
- Sesiones (terapias) familiares o de pareja (asistir con su familia o pareja)
- Actividades dinámicas enfocándose en la salud mental (juegos y actividades)
- Sus sugerencias: _____

Si diéramos pláticas generales en la sala de espera, usted prefería:

La información personal de los pacientes no se discutiría en estas pláticas.

- Pláticas individuales
- Pláticas en pequeños grupos
- Prefiero no tener ninguna plática en la sala de espera

8. **¿Qué tipo de información educativa le gustaría recibir?**

- Información general de salud mental
- Que es la salud mental
- Información sobre condiciones específicas de salud mental (depresión, ansiedad, luto/duelo, trastornos alimenticios, alcoholismo, tabaquismo)
- Información enfocada en qué hacer cuando se tienen ciertas condiciones de salud mental
- Técnicas de relajación

9. **¿Cómo le gustaría que le diéramos esta información?**

- Escrita (folletos, hojas informativas, panfletos, infografías)
- Oral (pláticas o presentaciones)
- En forma de videos, fotos, dibujos

10. **¿Qué tan seguido le gustaría que organizaríamos los grupos de apoyo o presentaciones?**

- Todas las semanas
- Una vez al mes
- Dos veces al mes

11. **¿Se sentiría más a gusto si los grupos de apoyo fueran:**

- Solo de mujeres
- Solo de hombres
- Combinados (no tengo preferencia)

12. **A usted le interesaría:**

- ¿Participar en grupos de apoyo?
- ¿Participar en sesiones individuales?
- Si está interesado, escriba su nombre y teléfono:

RESULTS

- Demographics:
 - N=46, Female: 7, Male: 35; Camps: 14, Clinic: 32
- What are the identified problem areas: use percentages.
 - 31% lack emotional support,
- What services do they want and activity would they engage in.
 - General & Specific mental health information, Group therapy, Education, Dynamic activities
- How open and ready they are: Move question 4 down to those interested in MH services.

Demographics

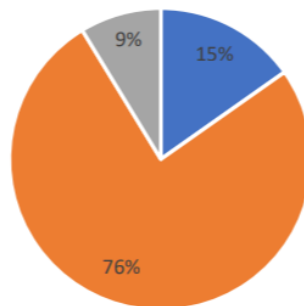
gender	Frequency	Percent	Cumulative Frequency	Cumulative Percent
F	7	15.22	7	15.22
M	35	76.09	42	91.30
U	4	8.70	46	100.00

Age Group	Frequency	Percent	Cumulative Frequency	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

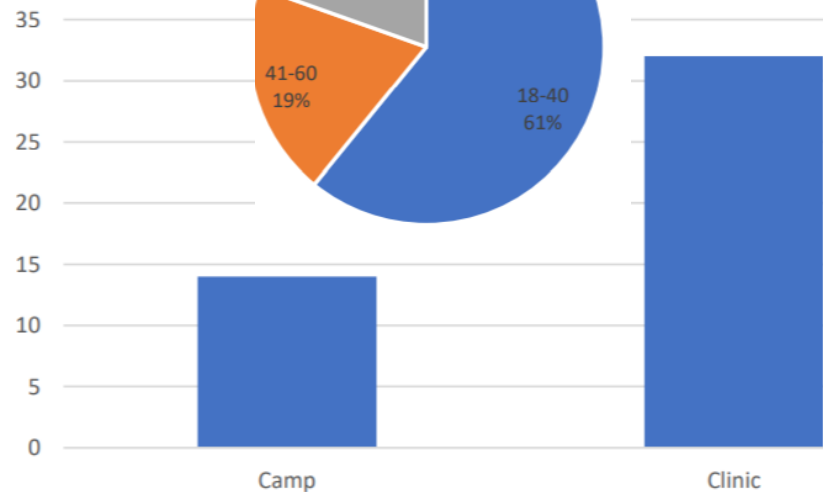
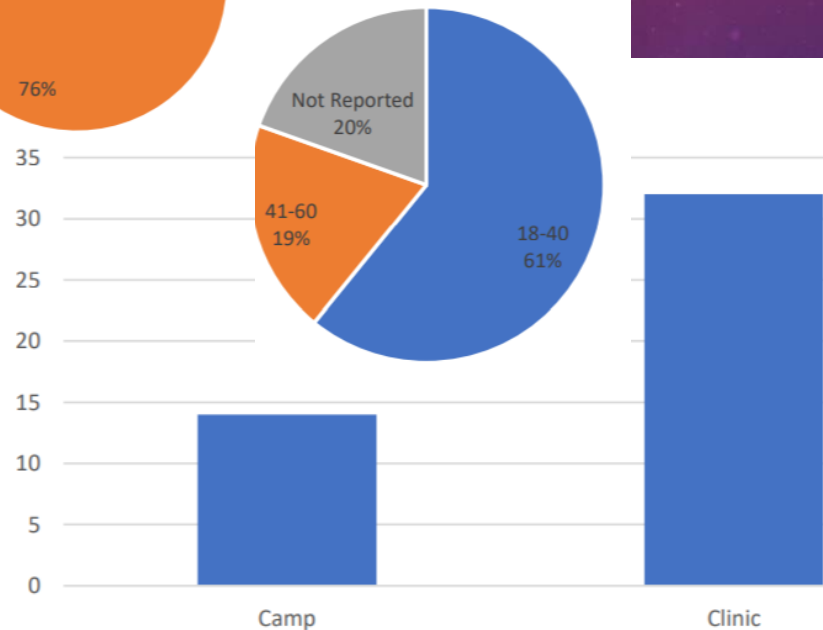
Settings	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Camp	14	30.43	14	30.43
Clinic	32	69.57	46	100.00

Gender

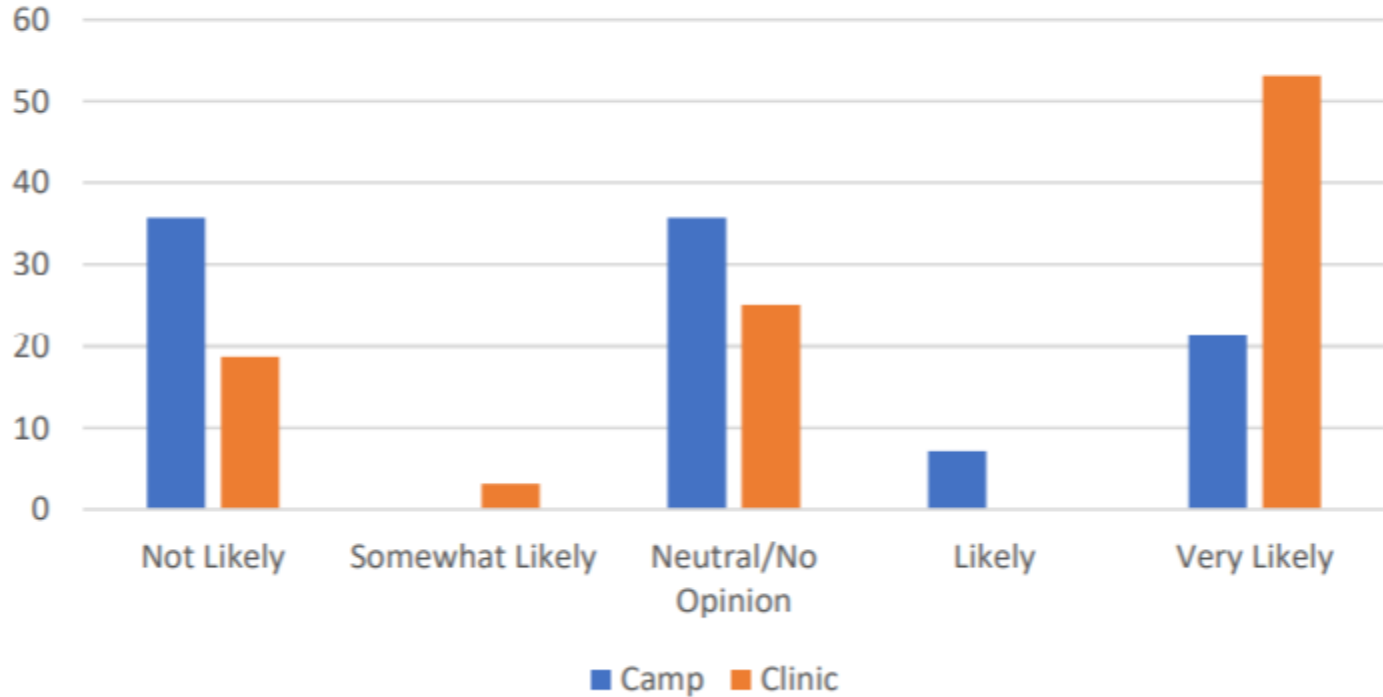
Female Male Unreported



Age Group



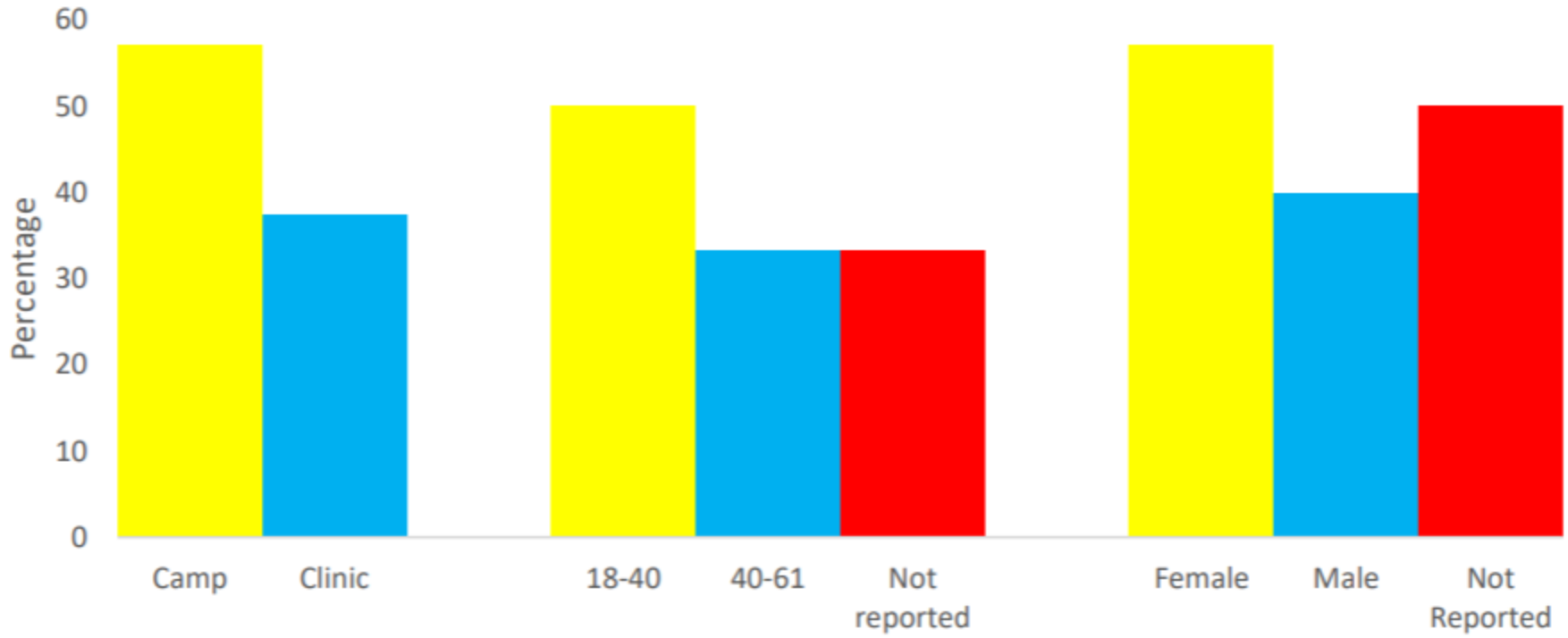
Likelihood of Using MH Services by Setting



How likely is it that you would use Vecinos MH program?

grptherapy	Frequency	Percent	Cumulative Frequency	Cumulative Percent
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Percentage Interested in Group Therapy

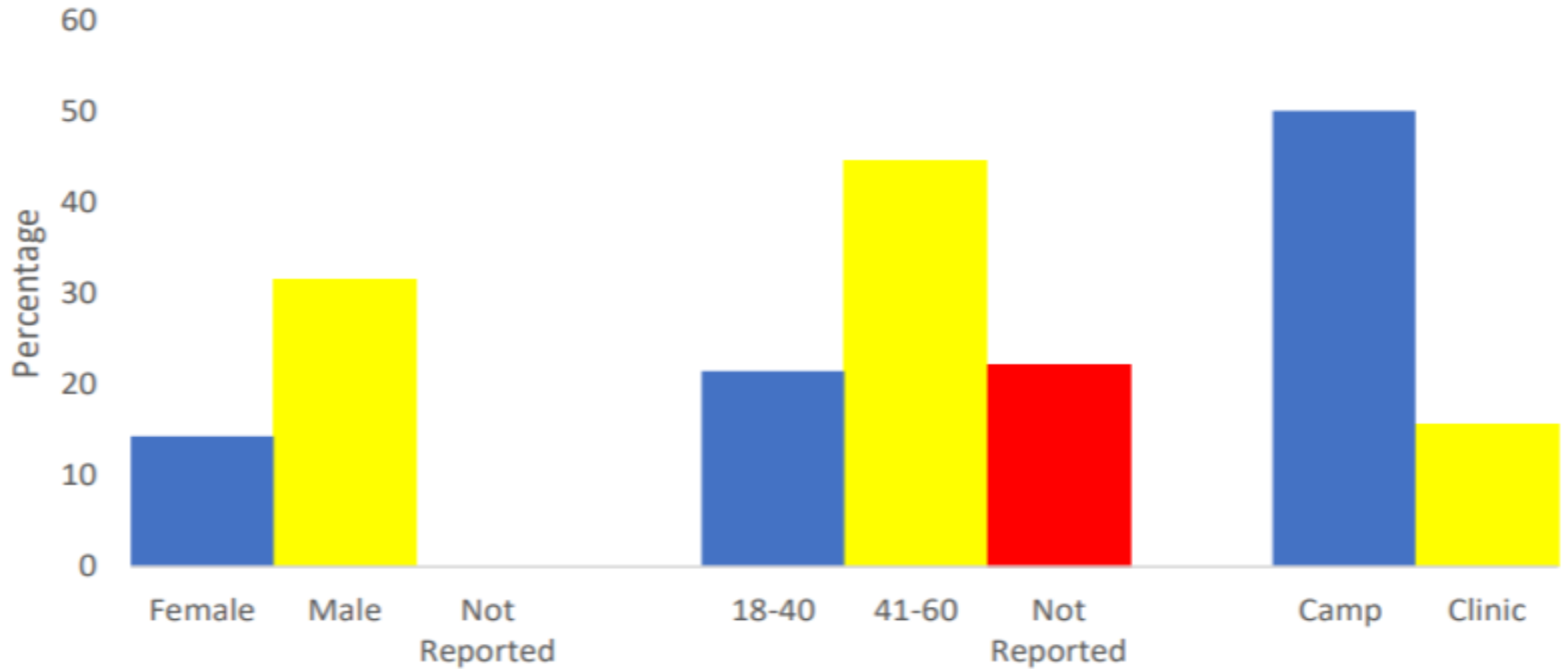


Total	26	20	46
Support Gro	56.52	43.48	100.00

Would you be interest

			Cumulative	Cumulative
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Percentage Interested in Individual Therapy



Would you be interested

Individual Therapy	73.91	26.09	100.00
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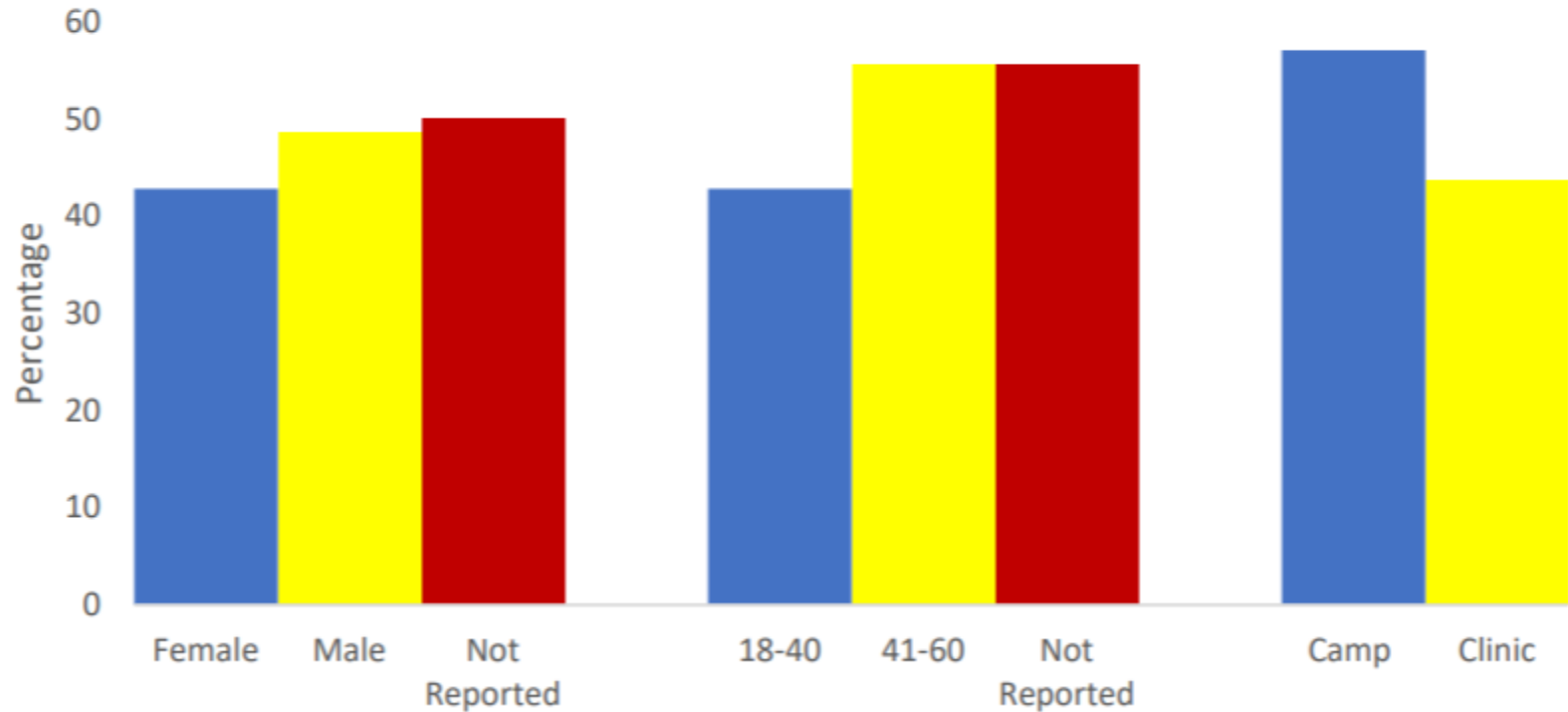
writtenmaterial	Frequency	Percent	Cumulative Frequency	Cumulative Percent
N	28	60.87	28	60.87
Y	18	39.13	46	100.00

Table of Settings by writtenmaterial			
Settings	writtenmaterial		
Frequency Percent Row Pct Col Pct	N	Y	Total
Camp	7 15.22 50.00 25.00	7 15.22 50.00 38.89	14 30.43
Clin	21 45.65 65.63 75.00	11 23.91 34.38 61.11	32 69.57
Total	28 60.87	18 39.13	46 100.00

Would you be interest

onal health?

Interested in General MH Educational Information



Would you be interested in Educational information on: General Mental Health?

Limitations

Restructure Questionarios for next year Mental Health Needs Assessment.

Providing Mental health groups

Number of participants

Timely analysis of the research

MENTAL
HEALTH
EDUCATION

ANOREXIA
PTIMIST
APPY
GRIEF
ANXIETY
GENETIC
PHOBIA
TREATMENT
COGNITIVE
ATTITUDE
DRUGS
ENJOYS
POSTPART
CRISIS
PSYCHOLOGY
SUICIDE
POST-TRAUMATIC STRESS
PSYCHOLOGICAL
RELATIONSHIP
TRAUMA
IQ
POSTPART
CRISIS
PSYCHOLOGY
SUICIDE
POST-TRAUMATIC STRESS
PSYCHOLOGICAL

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

TOPICS

- What are people interested in? How do we find out what they want to learn about?
- What do we see in the fields
- What do farmworkers tell us

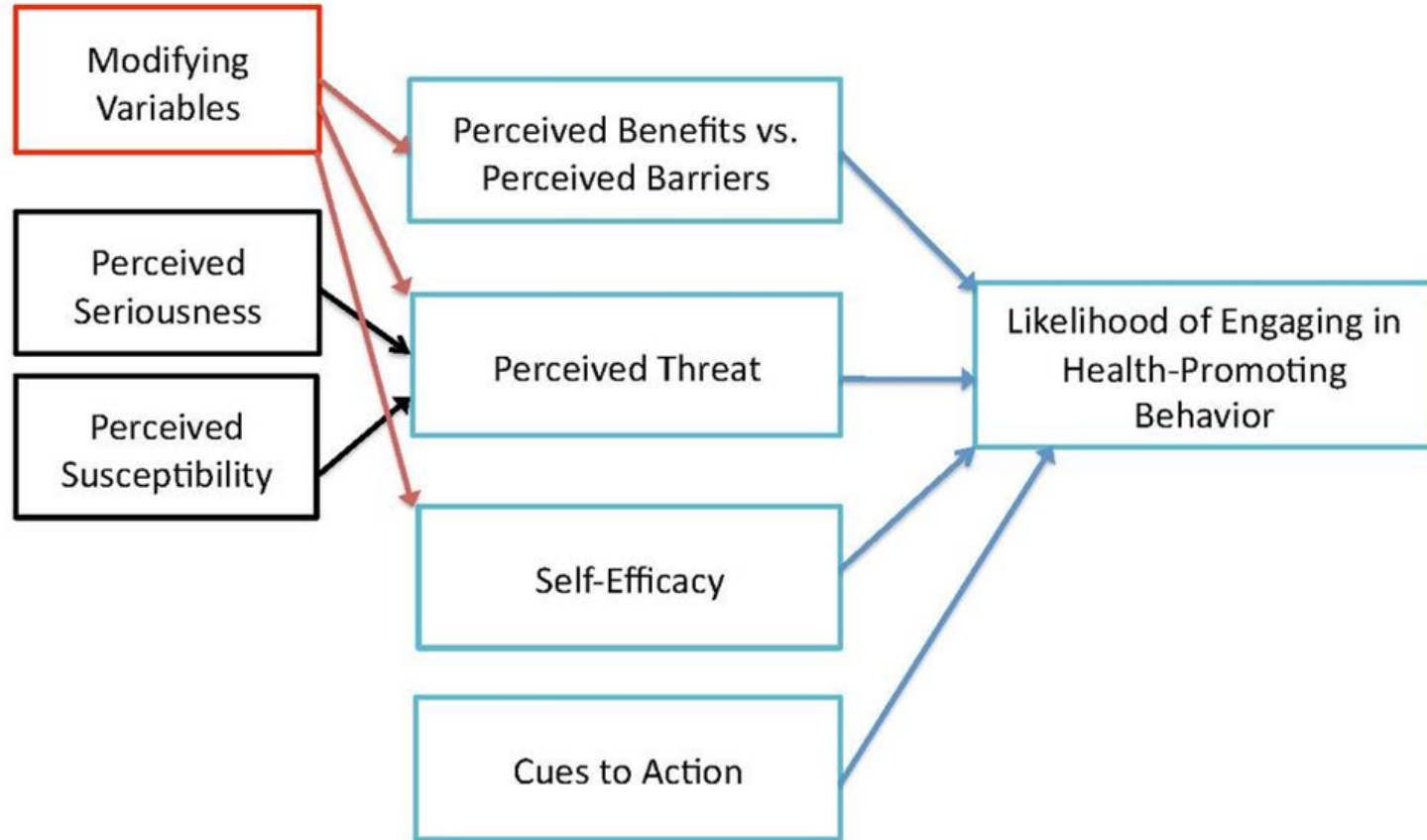


CULTURAL EXPECTATIONS

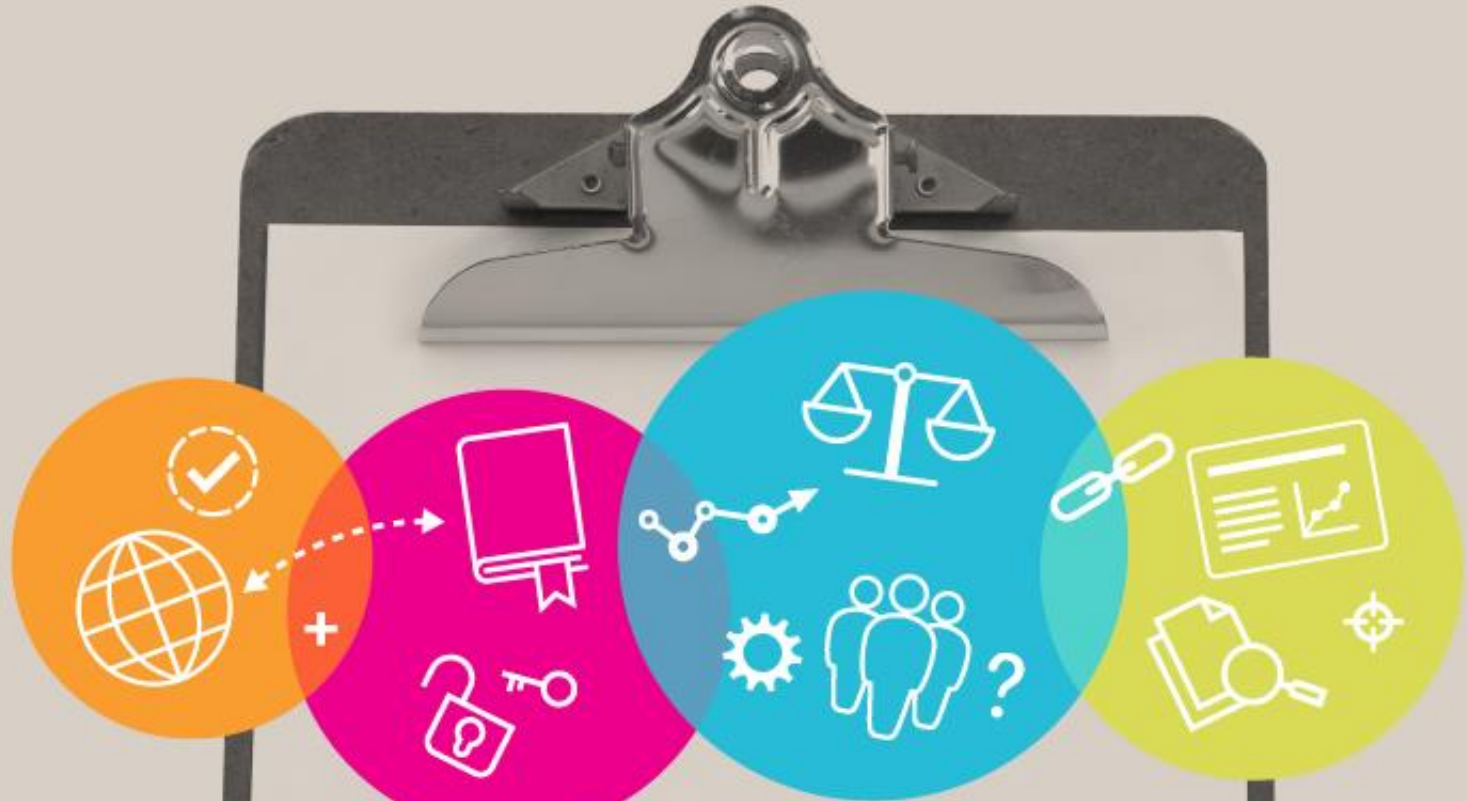
- Beliefs and thoughts
- What does mental health look like in the Latin culture?
- Mental Health- positive, negative, or neutral
- Is culture a barrier when it comes to mental health?



The Health Belief Model







PERFORMANCE MEASURES

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

MBHS data:

- N: patients encounters
- Common Dx.
- Average visits
- Case Study
- Patient satisfaction survey
 - https://ncruralhealth.az1.qualtrics.com/jfe/form/SV_cBAj8mwBNKVCjlj
 - Occurrence site
 - Would you recommend this service to a family or friend?

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



Farm workers. We depend on them.
They depend on us.



The ultimate goal of farming is not the growing of crops, but the cultivation and perfection of human beings.

-Masanobu Fukuoka

WHAT WILL YOU APPLY
WHEN YOU RETURN?

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THANKS!

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