



Building a Culturally Competent System of Care

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Cultural Competence

- Cultural competence is a set of congruent practice skills, attitudes, and policies and structures which come together in a system, agency or among professionals and enable that system, agency or professionals to work effectively in cultural situations.

Cross, 1998

The Department of Mental Health and Addiction Services (DMHAS)

- Administrator
- Payer
- Provider
- Over 4000 employees, two hospitals, 15 LMHAs
- \$560 million annual operating expenses
- Contract with 250 private non-profit agencies
- 89,000 people in 2006

Latino Outreach Initiative



- In the first year of program implementation, admissions increased by 24% (1619 new admissions).
- The second year, the admissions increased by 36% (2490 new admissions).

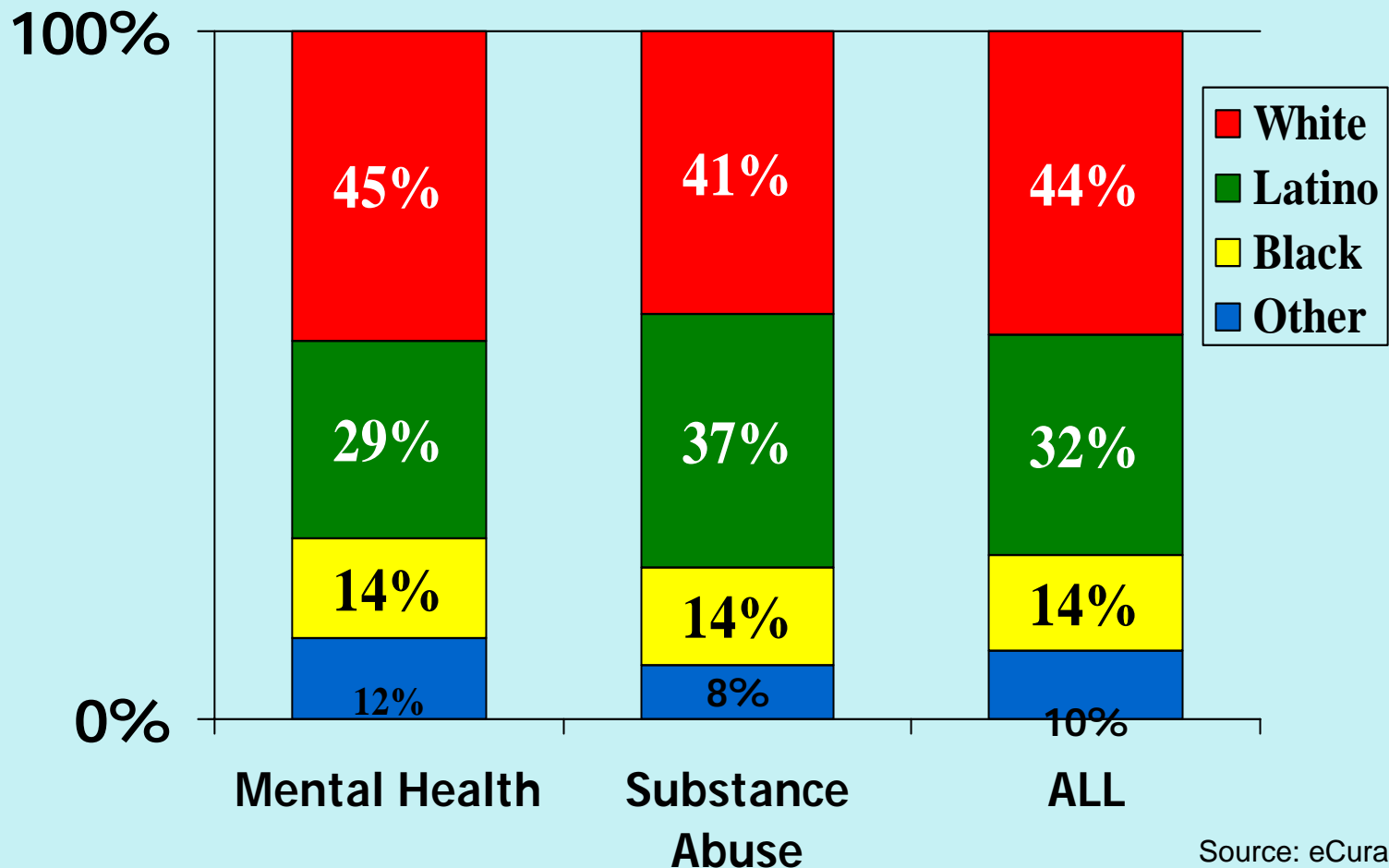
DMHAS Goal Two

Provide culturally competent and integrated services to persons whose needs are particularly challenging or not being well met in the current system

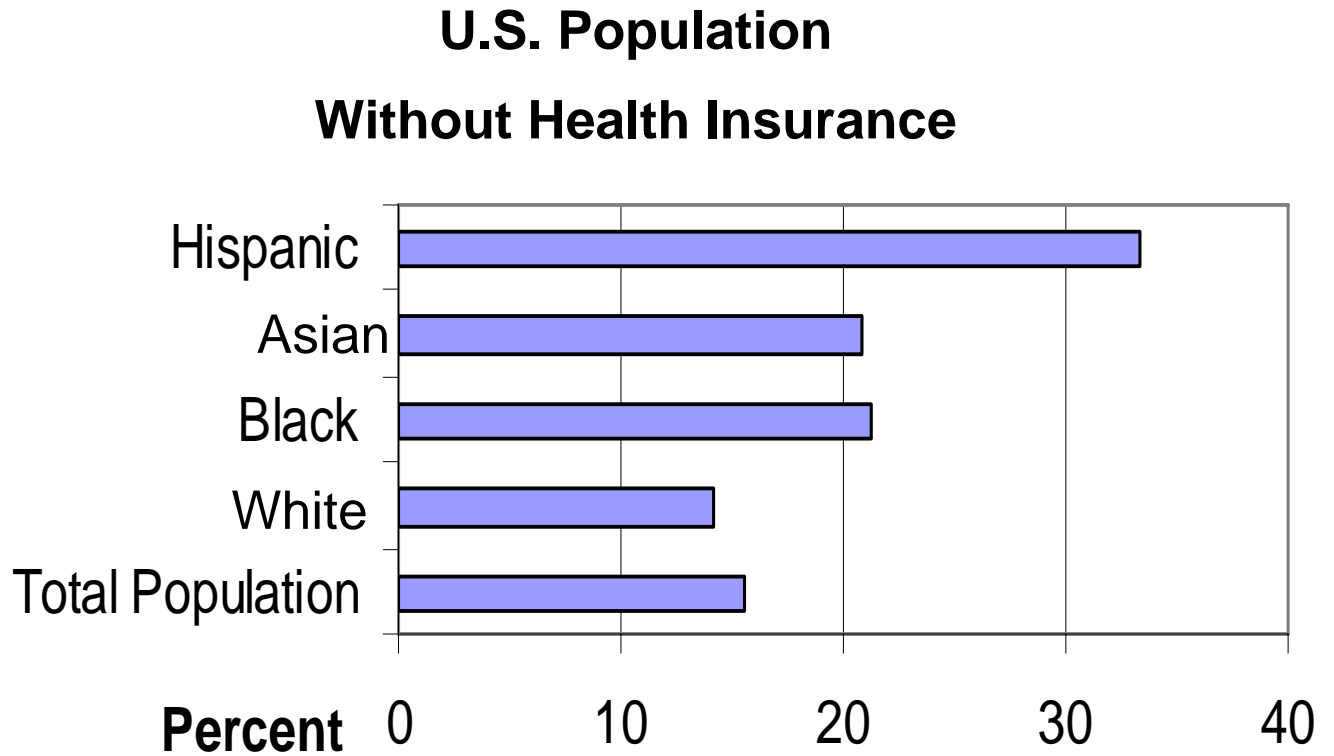


DMHAS Clients Served During FY06

Race and Ethnic Background



The Uninsured



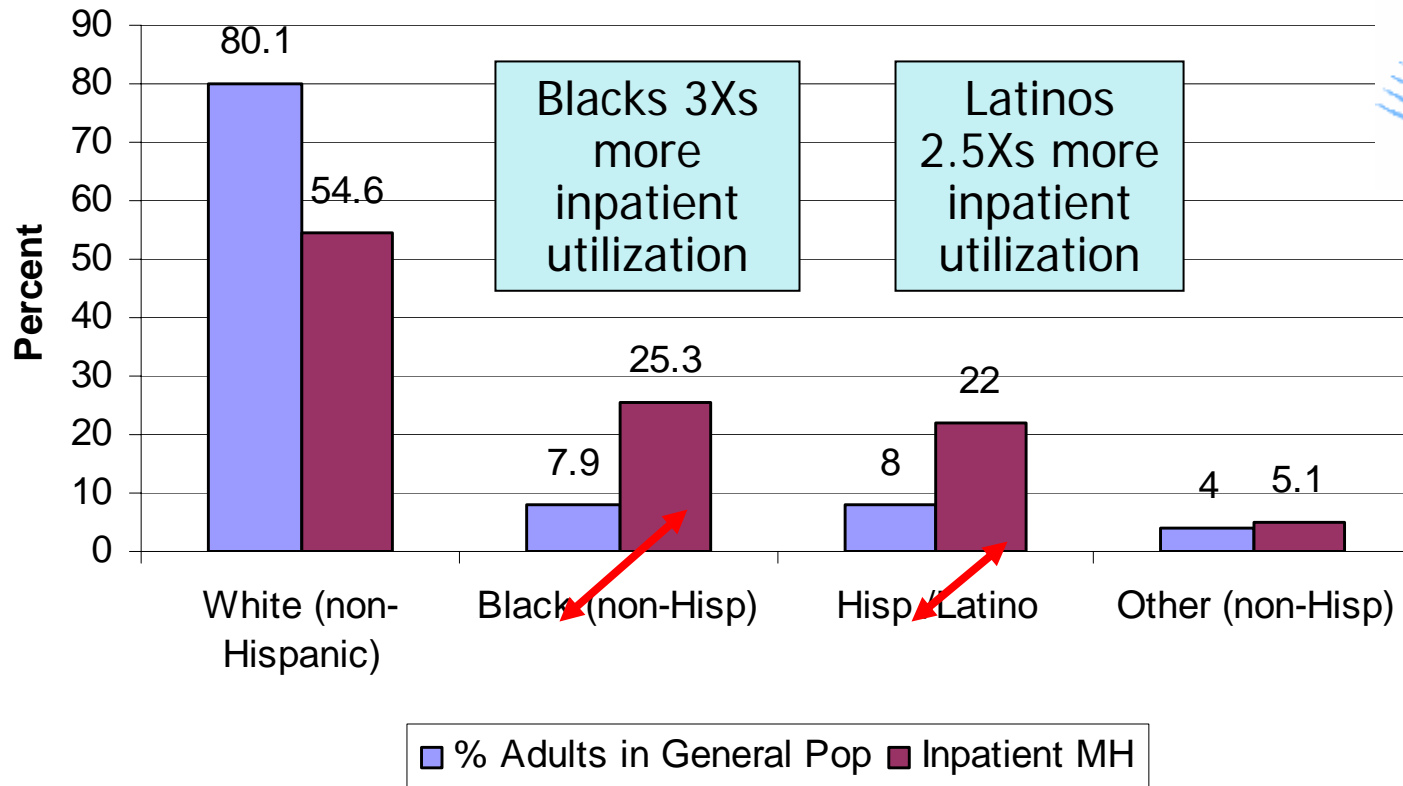
Media Response to the IOM *Unequal Treatment Report* (2002)

New York Times, March 22, “Subtle Racism in Medicine”

“ . . . a disturbing new study by the Institute of Medicine has concluded that even when members of minority groups have the same incomes, insurance coverage and medical conditions as whites, they receive notably poorer care. Biases, prejudices and negative racial stereotypes, the panel concludes, may be misleading doctors and other health professionals.”

Acute Psychiatric Hospitalization

Connecticut Data - Fiscal Year 2002



Surgeon General's Mental Health Supplement on Culture, Race and Ethnicity Indicates:

That For People of Color

- Less access to, and availability of mental health services
- Less likely to receive needed mental health services
- Those in treatment often receive a poorer quality of mental health care
- Under-represented in mental health research
- Experience a greater burden of disability

The Barriers



- Attitude that cultural competence is not necessary
- Access is limited and in some cases non-existent
- Lack of resources
- Competing priorities and demands
- Short term remedies
- Unintentional Racism
- Lack of bilingual/bicultural professionals

The PACCT Project

The Project for Addiction Culturally Competent Training

- Recruit 35 participants annually from diverse populations and in recovery
- Provide 14 wks (84 hrs.) of intensive training
- Provide a practicum of 10 hrs a week for 10 weeks
- Provide mentors for each participant
- Increase the workforce applicant pool of substance abuse counselors

The Elements of Change

- **Commitment**
- **Advisory structure**
- **Resources**
- **Multicultural training**
- **Strategic plan**
- **Cultural competence plans**
- **Initiatives**
- **Managerial evaluations**
- **Standards**
- **Multicultural environment**
- **Cultural celebrations**

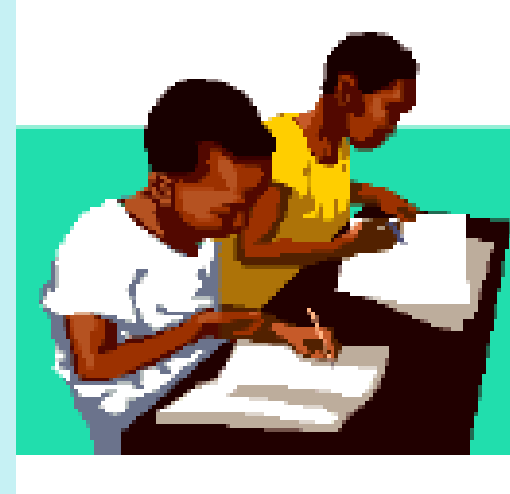


DAME LA MANO

A look at a culture specific program for Latino population

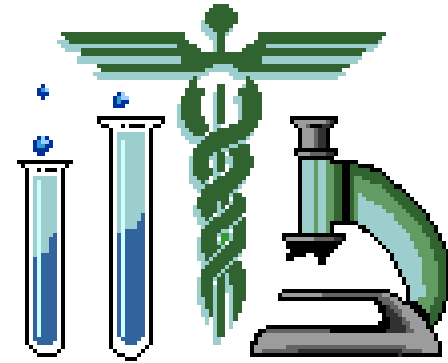


Lessons Learned



- Culture counts as the bridge of communication between client and clinician
- Cultural values facilitate engagement and relationships
- Spanish language is the language of felt emotions

Current Findings



- Reduction of emergency visits to the center and local emergency room
- Reduction of substance use
- Less denial (willingness to discuss relapses)
- Increased periods of abstinence
- Service compliance



A look at a culture specific program for African American population

Future Work



- Continue to measure cultural competence
- Cultural competence is included in all training activities
- Cultural competence is integrated throughout system of care
- Identify and eliminate health disparities
- Replicate what works throughout system
- Publish