
*Cultural
Competency
Toolkit*

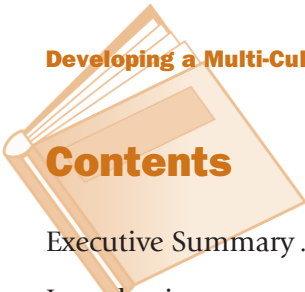
CHAPTER **2**



Developing a Multi-Cultural Outreach Manual

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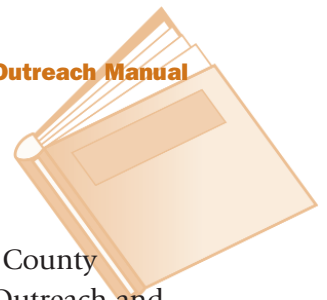
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Executive Summary

Prior to this grant proposal, the Mental Health Association of Allegheny County (MHAAC) participated as a founding member in a local Multicultural Outreach and Education Task Force. Designed to reach out to the underserved African American, Hispanic/Latino and elderly populations in Allegheny County, this task force helped to enroll 1,000 people in a newly created managed care system. MHAAC believed that this massive outreach project was highly replicable, and with a NCSTAC grant, they proposed to design and disseminate a how-to manual for other consumer supporter organizations to launch similar programs.

Project Goal

- To produce a manual for starting a minority behavioral health outreach and education program.

Introduction

Allegheny County is an urban area in Pennsylvania, home to the City of Pittsburgh. Two years before this grant proposal, MHAAC met with other service providers in the Pittsburgh area to discuss the dearth of information in the minority community concerning the county's new managed care system. At that time, a report issued by the Allegheny County HealthChoices Program indicated that elderly, Hispanic/Latino and African American communities in the area were not accessing the health care that they needed.

Allegheny's elderly, Latino and African American communities were not accessing the health care that they needed.

The report found that:

- Elderly persons represented only eight percent of the HealthChoices population, and they received authorizations for only two percent of the total authorized services.
- African Americans represented approximately ten percent of the Allegheny County population and almost half of the eligible HealthChoices population. Yet they received only approximately 37 percent of authorizations.
- Because of small numbers of individuals of Hispanic/Latino descent utilizing HealthCare services, this population was most likely also not accessing needed services.
- Caucasian members made up 51 percent of the eligible population but received 62 percent of the authorizations.

To address these disparities, and under MHAAC's leadership, a Multicultural Outreach and Education Task Force was formed. This task force then assisted more than 1,000 individuals to enroll in the existing managed care system over a two year period.



The Multicultural Outreach and Education Task Force’s success in enrolling so many new members into the existing managed care system convinced MHAAC that the project should be replicated. MHAAC proposed to NCSTAC to create a manual explaining to health care providers how to conduct multicultural outreach and education.

MHAAC helped to enroll more than 1,000 individuals in Allegheny’s managed care system over a two-year period.

Organizational Overview

At the time of this grant proposal, MHAAC had already been providing services to Allegheny County residents for forty years. During this lengthy period, the staff had the opportunity to develop a wide network of connections with direct service providers, with those dispensing educational and informational resources, and with agencies providing ancillary services.

“I went out into the community and held conversations with people so that they could tell me what they needed.”

— Delores Burgess, Minority Outreach Coordinator

During the two years directly preceding this grant, MHAAC participated in a variety of collaborative ventures with various agencies including: the Pennsylvania Office of Mental Health and Substance Abuse Services, the Office of Education and Regional Planning of the University of Pittsburgh, and Community College of Allegheny County.

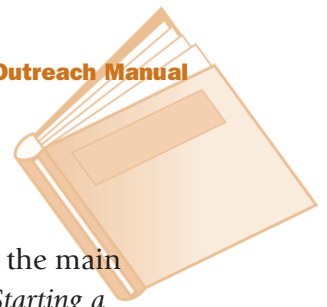
MHAAC also worked together with local social service providers including: Hill House, Peoples Oakland, Renaissance Center, Mon Yough Community Services, Allegheny County Department of Human Services, Project CART (a consumer survey), New Horizons Mental Health Information Center, St. Francis Community Mental Health, Area Agency on Aging, Western Psychiatric Institute and Clinic, Coalition for Leadership, and Mayview State Hospital.

Ongoing projects at MHAAC included a Minority/Community Outreach and Education program, a Services to the Homeless program, a Family Support and Community Advocates initiative, a Substance Abuse and Advocacy program, and an Education Advocacy program.

Many people do not receive health care because:

- They lack information about available care.
- They lack adequate transportation.
- They have difficulty with child care.
- They carry inadequate insurance coverage.
- They are home bound.
- Their jobs limit their ability to keep appointments.
- Lack of cultural sensitivity by professionals keeps them from returning for needed services.

— From the *Step by Step Guide*.



Implementation

Although project director, Brenda Lee, reports that “just finding the time” was the main challenge in completing this project, *The Step by Step Guide and Workbook for Starting a Minority Behavioral Health Outreach and Education Program* was finished in less than a year. (The main body of this workbook is included in the appendix.) Lee and Delores Burgess, the coordinator for MHAAC’s Minority/Community Outreach and Education program, worked together on drafting this manual

Burgess, who developed the outreach program on which the manual was based, relied heavily upon her contacts in the field — providers, family members and consumers. She says, “I went out into the community and made the contacts and held conversations with people so that they could tell me what they liked and what they needed.”

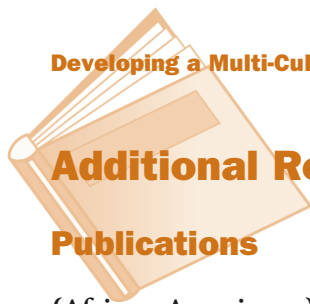
Organizations and individuals who would ultimately be served by the manual reviewed Burgess’s and Lee’s drafts and provided comments. The finished manual takes the reader through a series of questions such as “What are the barriers to access in your community?” and “What are the reasonable expectations of the community you will be serving?” that can provide guidance in creating a program appropriate for a particular community.

The finished manual takes readers through a series of questions that can provide guidance in creating an outreach program appropriate for a particular community.

Discussion and Conclusion

Now that the *Step by Step Guide* is complete, it will continue to be a resource for other groups wishing to conduct outreach and education. Burgess has already presented on the outreach program at various counties in the Allegheny area, as well as out of state, and she plans to distribute the manual “to other people who might want to start up a program like our own.”

Lee warns anyone wishing to undertake community outreach that “it can be time consuming.” But, she adds, “it’s well worth it.”



Additional Resources

Publications

(African Americans)

Byrd, W. Michael and Clayton, Linda A. *An American Health Dilemma, Volume One: A Medical History of African Americans and the Problem of Race: Beginnings to 1900*. New York: Routledge. 2000.

Cultural Competence Standards in Managed Care Mental Health Services: Four Underserved/Underrepresented Racial/Ethnic Groups. Center for Mental Health Services, Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services. (Available on the internet at www.samhsa.gov/centers/cmhs/cmhs.html)

Mitchell, Angela, et al. *What the Blues Is All About: Black Women Overcoming Stress and Depression*. New York: Berkeley Publishing Group. 1998.

Poussaint, Alvin and Alexander, Amy. *Lay My Burden Down: Unraveling Suicide and the Mental Health Crisis among African-Americans*. Boston: Beacon Press. 2000.

Villarosa, Linda (editor). *Body & Soul: The Black Women's Guide to Physical Health and Emotional Well-Being*. New York: HarperPerennial. 1994.

(Hispanic/Latino Americans)

Augenbraum, Harold et al. *Growing Up Latino: Memoirs and Stories*. Boston: Houghton Mifflin. 1993.

Garcia, Jorge and Zea, Maria (editors). *Psychological Interventions and Research With Latino Populations*. Boston: Allyn and Bacon. 1997.

Olmos, Edward (editor). *Americanos: Latino Life in the United States*. Boston: Little, Brown. 1999.

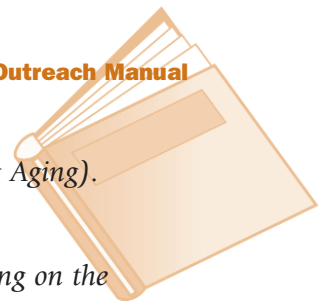
Padilla, Felix. *Latino Ethnic Consciousness: The Case of Mexican Americans and Puerto Ricans in Chicago*. Notre Dame, Indiana: University of Notre Dame Press. 1985.

(Older Americans)

Fogel, Barry S., Furino, Antonio and Gottlieb, Gary L. *Mental Health Policy for Older Americans: Protecting Minds at Risk*. Washington, D.C.: American Psychiatric Press. 1990.

Gatz, Margaret (editor). *Emerging Issues in Mental Health and Aging*. Washington, D.C.: American Psychological Association. 1995.

Knight, Bob. *Outreach With the Elderly: Community Education, Assessment and Therapy*. New York: New York University Press. 1989.



Smyer, Michael A. and Qualls, Sara H. *Aging and Mental Health (Understanding Aging)*. Malden, Massachusetts: Blackwell Publishers. 1998.

Tice, Carolyn J. and Perkins, Kathleen R. *Mental Health Issues and Aging: Building on the Strengths of Older Persons*. Pacific Grove, California: Brooks/Cole. 1996.

Zarit, Steven H. and Zarit, Judy M. *Mental Disorders in Older Adults: Fundamentals of Assessment and Treatment*. New York: Guilford Press. 1998.

Organizations

American Association for Geriatric Psychiatry
7910 Woodmont Avenue, Bethesda, MD 20814-3004
Tel. (301) 654-7850
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E-mail: info@aagponline.org
Website: www.aagpgpa.org

Office of Minority Health
Department of Health and Human Resources
Tel. (800) 444-6472
E-mail: info@omhrc.gov
Website: www.omhrc.gov

United Seniors Health Cooperative
Suite 200 409 Third Street, S.W., Washington, D.C. 20024
Tel. (202) 479-6973
Fax. (202) 479-6660
E-mail: ushc@unitedseniorshealth.org
Website: www.unitedseniorshealth.org

Internet Resources

Medicare: The Official U.S. Government Site for Medicare Information. www.medicare.gov

Mental Health Association of Southeastern Pennsylvania: Mental Health and Aging.
www.mhaging.org