Eliminating Behavioral Health Disparities through Integrated Health Care

The goal of integrating health care for racial and ethnic minority populations and people with limited English proficiency is to improve their health and behavioral health status while eliminating disparities in care. To examine the role and impact that integrated health care can have in promoting health equity and eliminating health disparities, the U.S. Department of Health and Human Services Office of Minority Health partnered with the Hogg Foundation for Mental Health to convene a two-day expert meeting on Nov. 7-8, 2011 in Austin, Texas.

National experts in the fields of health, mental health, substance use and addiction, integrated health care, and cultural and linguistic competency were invited to share best practices, insights, strategies and tools for creating a framework for national models that can improve integrated health care for racial and ethnic minorities and people with limited English proficiency.

The following consensus statements and recommendations were identified by the national experts as being critical components of a successful strategy to eliminate health care disparities through integrated health care. They are provided below to inform a broad audience of health and behavioral health care providers, educators, advocates, consumers and their families, researchers, policy makers and other stakeholders with an interest in eliminating behavioral health disparities.

Consensus Statements

• Integrated care organizations and teams will be culturally and linguistically competent and responsive to the needs of the communities they serve, including being located in reasonably accessible areas and providing flexible hours of service.

• Integrated care teams will actively engage with patients/consumers, their family members and their community across the lifespan. The team must be multidisciplinary and cross-trained in health and behavioral health, thereby leveraging the strengths of the team.

• Integrated care teams will recognize and incorporate the strengths of patients/consumers, their families and their cultures, permeating all levels of assessment, diagnosis and intervention.

• Integrated care organizations will ensure one health and behavioral health history and treatment plan for patients/consumers, under one roof, with a wellness component and a focus on health promotion, prevention and person-centeredness across the lifespan.

• Integrated care organizations will participate as a member of a learning community in which health and behavioral health professionals gain knowledge, develop data collection plans and foster the growth of an ethical workforce that represents the diversity of the community with language and cultural competency.
The following recommendations represent key strategies from practice to improve the dissemination and implementation of integrated health care in a manner that more effectively meets the needs of racial and ethnic minorities and people with limited English proficiency.

**Recommendations**

**Patients/Consumers**

- Conduct comprehensive assessments that are linguistically competent to understand cultural values, beliefs and constructs and how they may inform the symptom picture, diagnosis and treatment.
- Develop patient/consumer-driven treatment plans that activate patients/consumers in their own health care.

**Practice**

- Develop and share appropriate tools that go beyond standard measurement.
- Build understanding by cross-training providers and exposing them to other systems.

**Communities**

- Create culturally responsive, strength-based environments where the innate strengths of the community are being tapped.
- Use community-based participatory approaches to help communities define the evidence.
- Identify and empower leaders from within the community.
- Provide health/behavioral health education wherever people are in the community.

**Health Care Systems**

- Provide services where needed.
- Ensure institutions reflect the populations they serve.
- Address cultural and linguistic diversity, including professional culture.
- Evaluate practice for efficacy.

**Workforce**

- Attract and retain bilingual/bicultural providers.
- Identify and engage individual health care workers early in their studies/career.
- Provide in-culture and in-language supervision.
- Build and support diverse, empowered leadership.

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