

Health Disparities Needs Assessment

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- **In FY2021 we conducted a study to identify needs and make recommendations for the reduction of health disparities within a subset of Utah's public mental health and substance use treatment systems.**
- **In FY2022 we are working with the subset of Utah's public mental health and substance use treatment providers to set and accomplish disparity reduction goals based on year one recommendations.**

Overview

What are health disparities?

Avoidable and unjust differences in mental health and substance abuse outcomes experienced by socially disadvantaged populations

Who were the target populations?



- Youth in Transition (16-25 years old)
 - Black, Indigenous, and People of Color (BIPOC)
 - Members of LGBTQIA+ community
 - People with developmental disabilities
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Literature review



For different reasons, each of the target populations experienced the following disparities:

- Increased risk and rates of mental illness or substance use disorder
- Reduced access to care
- Disparities in outcomes when receiving care

Structural framework

We focused research and recommendations on three identified levels of health disparity:



Organizational—the organization's leadership, policies and workforce



Structural—the organization's facilities, materials and services



Treatment—the interactions between providers and clients

Needs assessment strategy

- Formed workgroups comprised of individuals from each of the target populations
- Helped workgroups to operationalize what ideal organizational, structural, and treatment level responsiveness would look like
- Collect information from mental health and substance use treatment providers at organizational, structural, and treatment levels
- Report differences between workgroup ideals and provider realities as “needs”
- Help workgroups make targeted recommendations based on the identified needs

Data Collection

**Staff
Demographic
Survey**

**Focus Groups
with Leadership
Teams**

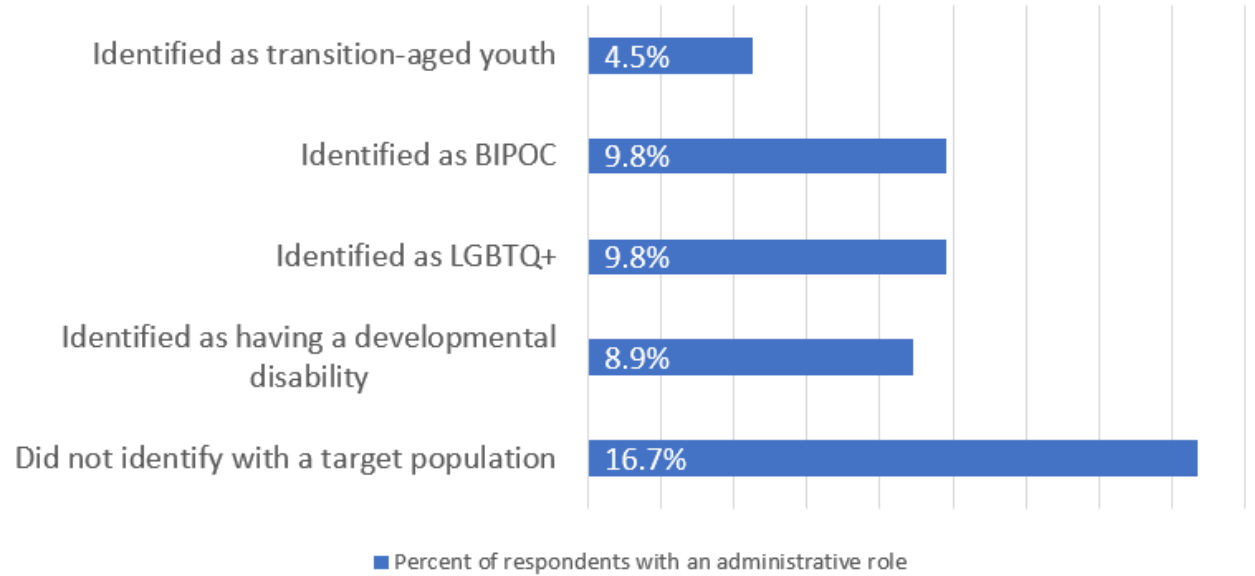
**Focus Groups
with Clients**

**Facility Walk
Throughs**

**Public-Facing
Document
Review**

**Service Provider
Survey**

Employees who identified with the target populations were less likely to have administrative roles than employees who did not.



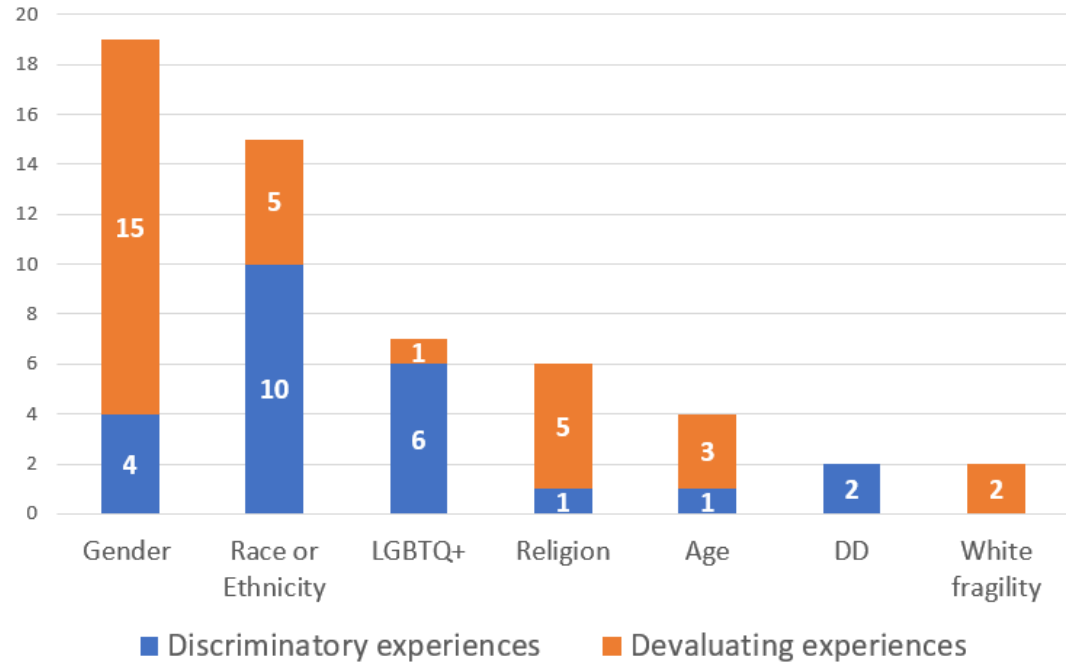
Results- Representation in administrative positions

Employees who identified with the target populations were less likely to feel valued or heard compared to employees who did not.



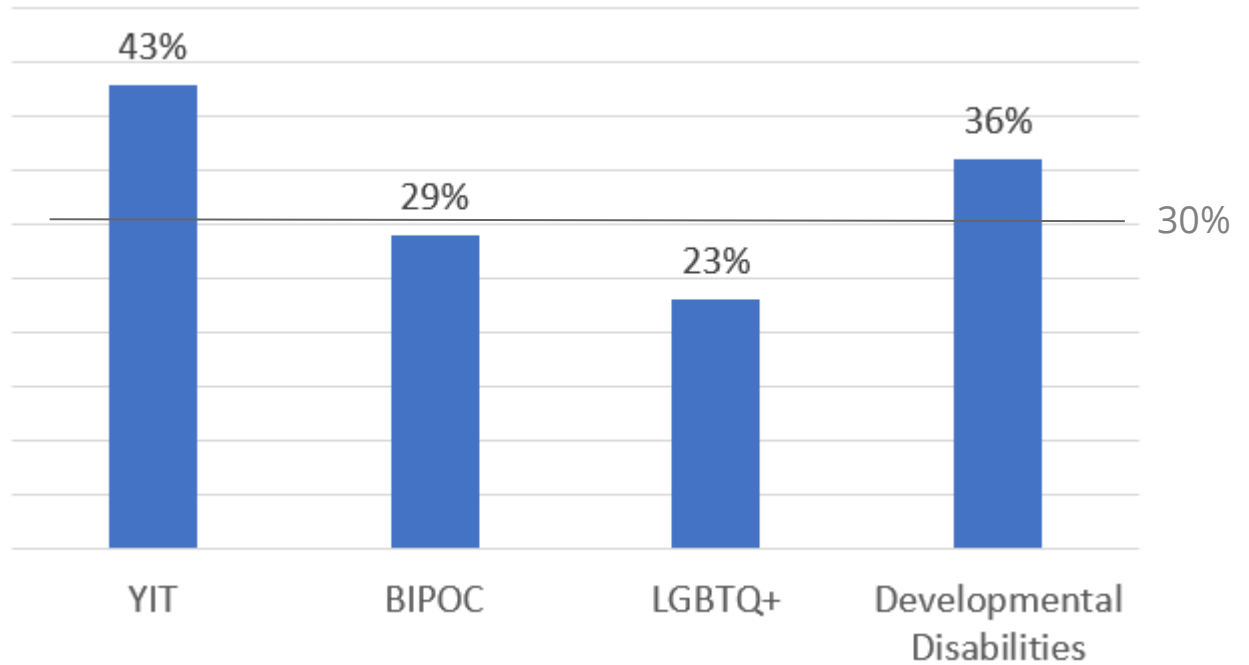
Results- Feeling valued and heard in the workplace

Approximately 11% of respondents who identified with a target population reported experiences of discrimination or microaggressions in the workplace.



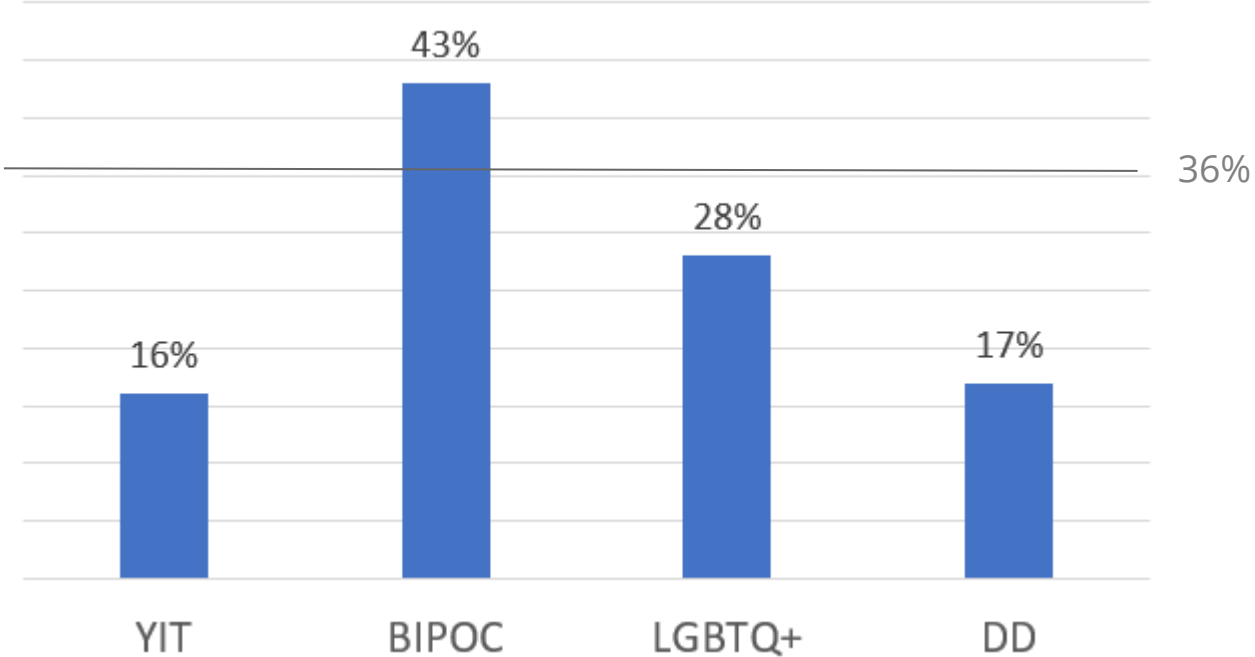
Results- Discriminatory or devaluating experiences

Leadership focus group participants addressed, in any way, about 30% of the elements identified by workgroups as part of an ideal response.



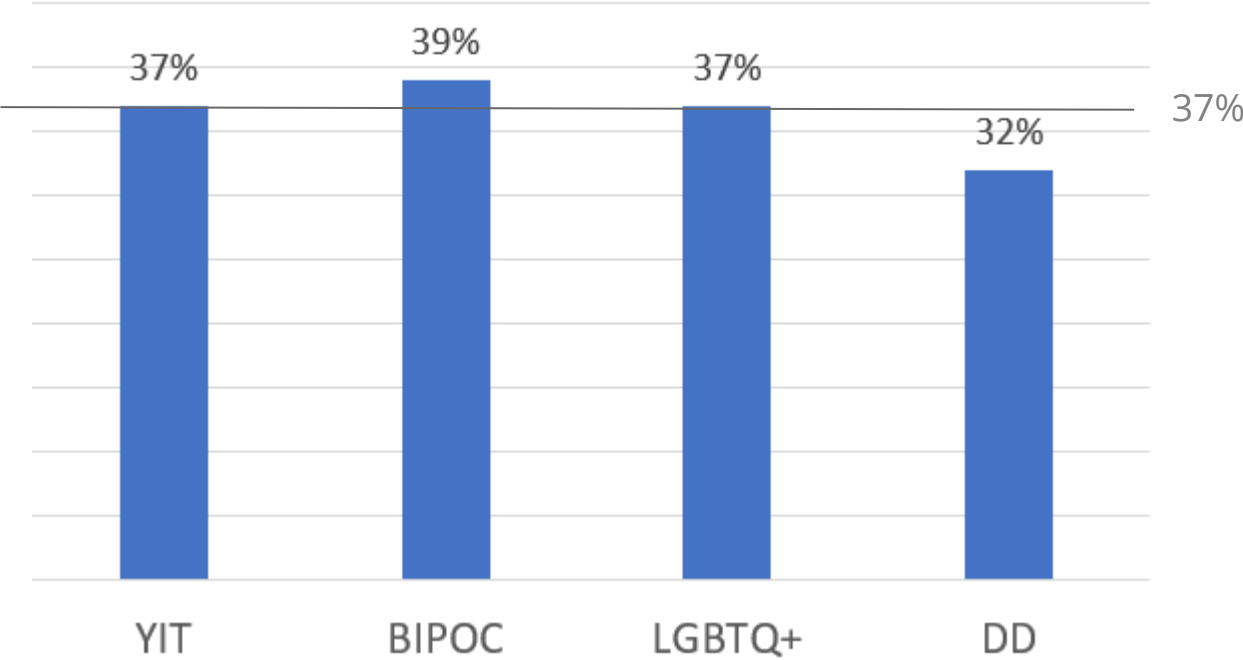
Results- Leadership focus group responses

Workgroup and community members reviewed public-facing materials from each agency; items that workgroups identified as important to their communities were found about 36% of the time.



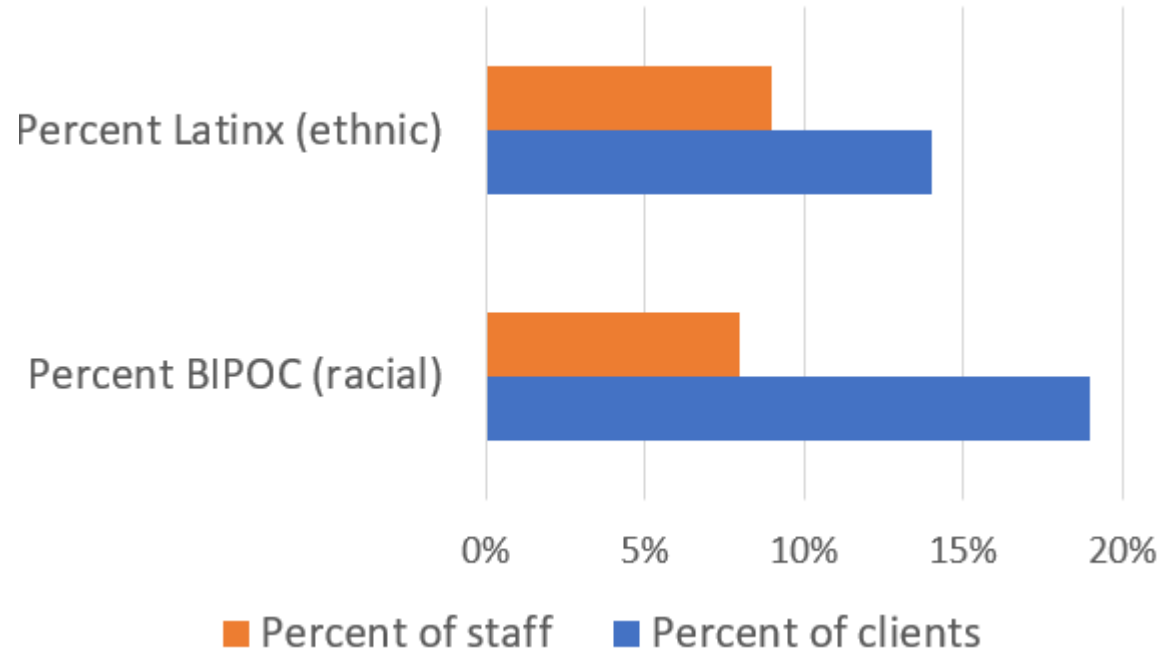
Results- Public facing document reviews

In walk throughs of the facilities, the research team and workgroup members observed items identified by workgroups as important to their communities about 37% of the time.



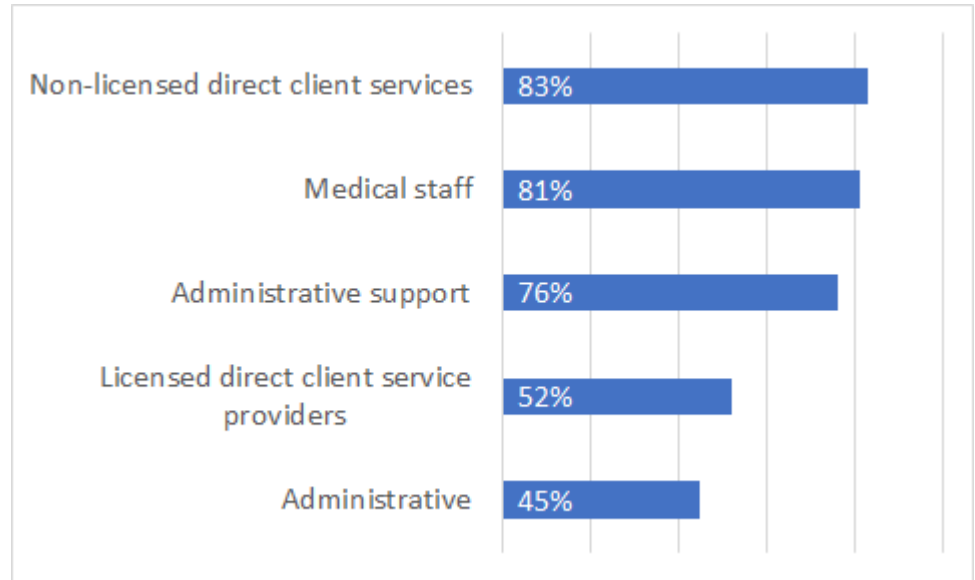
Results- Facility walk throughs

Employees were significantly less racially and ethnically diverse than were clients.



Results- Representation in the workforce

Sixty-seven percent (67%) of all workforce members agreed with the statement, “I am completely unbiased and not racist” and about 33% disagreed with the statement. This indicated poor awareness of implicit bias among workforce members.



Results- Awareness of bias

Recommendations

- Came from the workgroups
- Covered by the data collected
- Given to agencies based on need
- Broken out into “themes”

Recommendations

Build Understanding

- Demonstrate tangible commitment of leadership teams to understanding bias, stigma, and history that contribute to disparities
 - Demonstrate tangible commitment by agency to make cultural shifts within the organization to ensure work is based in anti-oppressive frameworks
 - Have leadership actively seek out information concerning discriminatory experiences (from clients and staff alike) and respond appropriately
 - Increase connections with the target populations, directly or through close contact with grassroots organizations, to better understand their needs
 - Work to increase social connections and sense of community among target populations
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Recommendations

Trainings

- Address training deficits by providing not necessarily a higher quantity, but rather better, more effective trainings. In order to maximize effectiveness, these trainings must be held with target population community members or target population-led organizations with content that focuses on what is important to that particular target population and should open a dialogue between the agency and target population stakeholders.
 - Proactively seek out antiracist and antidiscrimination workshops for ALL staff
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Recommendations

Hiring and Inclusion Practices

- Promotion of target population staff to leadership roles
 - Include target populations in all policy decision making
 - Hire BIPOC and native speakers of non-English languages
 - Implement a strategic plan for workforce development, recruitment, and retention for BIPOC. This entails providing mentorship and financial support in order to secure a path for BIPOC to obtain licensure and become mental health providers.
 - Hire a youth coordinator to improve social connection for youth and young adults and provide youth voice to materials and policies
 - Increase number of service providers from target populations
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Recommendations

Data & Analysis

- Improve data collection and analysis
 - Add flags and indicators to current tools for LGBTQ+ community
 - Analyze satisfaction and outcome data by subgroup to understand disparities

Recommendations

Policy Changes

- Develop policies that provide clear guidance to support clients and from target populations:
 - Have a policy readily available for staff or patients who may change their names or gender markers
 - Create a policy to protect the privacy of youth as much as possible
 - Create or improve accommodation policy for people with developmental disabilities
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Recommendations

Practice Changes

- Create inclusive intake forms that ask about name, pronouns, and whether the client would like to discuss their identity during the session. If the client is TAY and LGBTQ+, ask whether they are out to their parents or guardians. Indicate that on the file
 - Reduce interactions between clients and law enforcement
 - Providers need to share pronouns in order to encourage clients to share pronouns
 - Ensure Evidence Based Practices are culturally relevant and responsive
 - Therapists have connections to clinics with gender affirming services
 - Ensure that programs tailored to target populations are available
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Recommendations

Supporting Clients

- Develop materials to support therapist interactions with target populations
 - Create a guide for each of the target populations on current issues and definitions for therapists to use in between trainings with references
 - Increase knowledge about therapeutic guidelines for target populations
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Recommendations

Facility Changes

- Address specific areas of need from facility walkthroughs to provide a welcoming and respectful physical environment for all
 - Address specific areas of need from public-facing documents review to provide a welcoming and respectful online environment for all
 - Remove stigmatizing pamphlets and information
 - Work with agencies to correct language and develop better materials for target populations
 - Resources for target populations should be reviewed by the target populations
 - Offer a variety of communication options - phone, email, adapted communication tools
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Recommendations

Client Involvement and Mindfulness

- Allow youth to have input in their treatment plan by, for example, creating a worksheet that is given to all youth and updated regularly
 - Provide resources on harm reduction and recognize that abstinence from substances isn't the goal for everyone
 - Give youth autonomy around which and how much of a medication is prescribed, if they are given any
 - Create a manual for parents around privacy and how to debrief therapy with youth
 - Recognize and address limits of some traditional therapies, screenings, and tools for some disabled people. For example, screenings or therapeutic tools that require reading or writing
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FY2022 Accomplishments

Youth in Transition



- **Posted guest wi-fi**
- **More comfortable chairs spaced further apart**
- **Manual for parents around privacy and how to debrief therapy with youth was created and disseminated**
- **Youth are allowed to complete outcome questionnaire in privacy (away from parents)**
- **Youth are now given copies of their treatment plans**
- **Pamphlets about client privacy (HIPAA) placed in lobbies**
- **Youth transitioning to adult services are given a copy of their treatment plans**
- **Increased connections with YIT by connecting with youth-led grassroots organizations**
- **Trainings offered to support treatment of YIT**

FY2022 Accomplishments

BIPOC



- **Comment boxes made available, with forms in English and Spanish**
- **Identified bilingual staff and languages spoken on website**
- **Posted signs about how to access services in multiple languages**
- **Incorporated necessity of hiring more BIPOC and native speakers into hiring manager training**
- **Provided antiracist and antidiscrimination training to all staff**
- **Scheduled speakers to address inclusion related to BIPOC during annual conference**
- **Added more respectful BIPOC images to website**
- **Approved stipend for Spanish-speaking staff**
- **Fully translated website into Spanish**
- **Made culturally responsive hygiene products available**
- **Hired native speakers of non-English languages**
- **Trainings offered to support treatment of BIPOC**
- **All services available in Spanish**
- **Created office space for Latino Behavioral Health Services**

FY2022 Accomplishments

LGBTQIA+



- **Trevor Project hotline posted in public facing spaces (lobbies, websites, etc.)**
- **Gender neutral bathrooms, with signs, made available**
- **Pronouns added to email signatures**
- **Pronoun buttons created and distributed**
- **Pride flags placed in public spaces**
- **Added gender identity options to intake paperwork**
- **Provider profiles updated to include LGBTQ+ designations**
- **Made connections with grassroots service organizations and train staff to make referrals**
- **Added pronouns to HR and EHR systems**
- **Trainings offered to support treatment of LGBTQ+**

FY2022 Accomplishments

Developmental Disabilities



- Made see-through masks/face shields available
- Made pamphlets on autism (strength-based and neurodiversity emphasis) available
- Placed brochures or pamphlets related to disability needs in exercise and mental health in lobbies
- Removed fragrances from bathrooms
- Adjust tools, screenings and assessments for the needs of people with disabilities
- Revise intake form for plain language
- Made fidget spinners and stress balls available
- Trainings offered to support treatment of developmentally disabled clients

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