



Data-Driven Approaches to Addressing Disparities and Disproportionality in Behavioral Health

**FY 2019–2020 Cultural and Linguistic Competence (CLC) Strategic Planning Training Series
Behavioral Health Administration (BHA)**

Objectives

During this session we will:

- Discuss data-driven approaches for addressing disparities, disproportionality, and cultural competence
- Discuss strategies to identify needs, gaps, strengths, and priority areas to develop Cultural and Linguistic Competence (CLC) Strategic Plans
- Review and discuss helpful resources to facilitate data-driven approaches

Social Determinant of Health

- **Social determinants of health** are conditions in the places where people live, learn, work, and play that affect a wide range of health risks and outcomes.
- **Social determinants of health**—such as poverty, unequal access to **health** care, lack of education, stigma, and racism —are underlying, contributing **factors of health** inequities.

Source: Centers for Disease Control and Prevention (CDC)

See Tools and Resources at the end of the module for the link.

Health Disparity: Definition

- A type of **health difference** that is closely linked with social or economic disadvantage
- Health disparities adversely affect groups of people who have systematically experienced greater social and/or economic obstacles to health and/or a clean environment
- Usually based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory, or physical disability; sexual orientation; geographic location; or other characteristics historically linked to discrimination or exclusion

Source: National Partnership for Action to End Health Disparities (NPA)
See Tools and Resources at the end of the module for the link.

Health Disparity: Definition

Health disparities result from multiple factors, including:

- Poverty
- Environmental threats
- Inadequate access to health care
- Individual and behavioral factors
- Educational inequalities

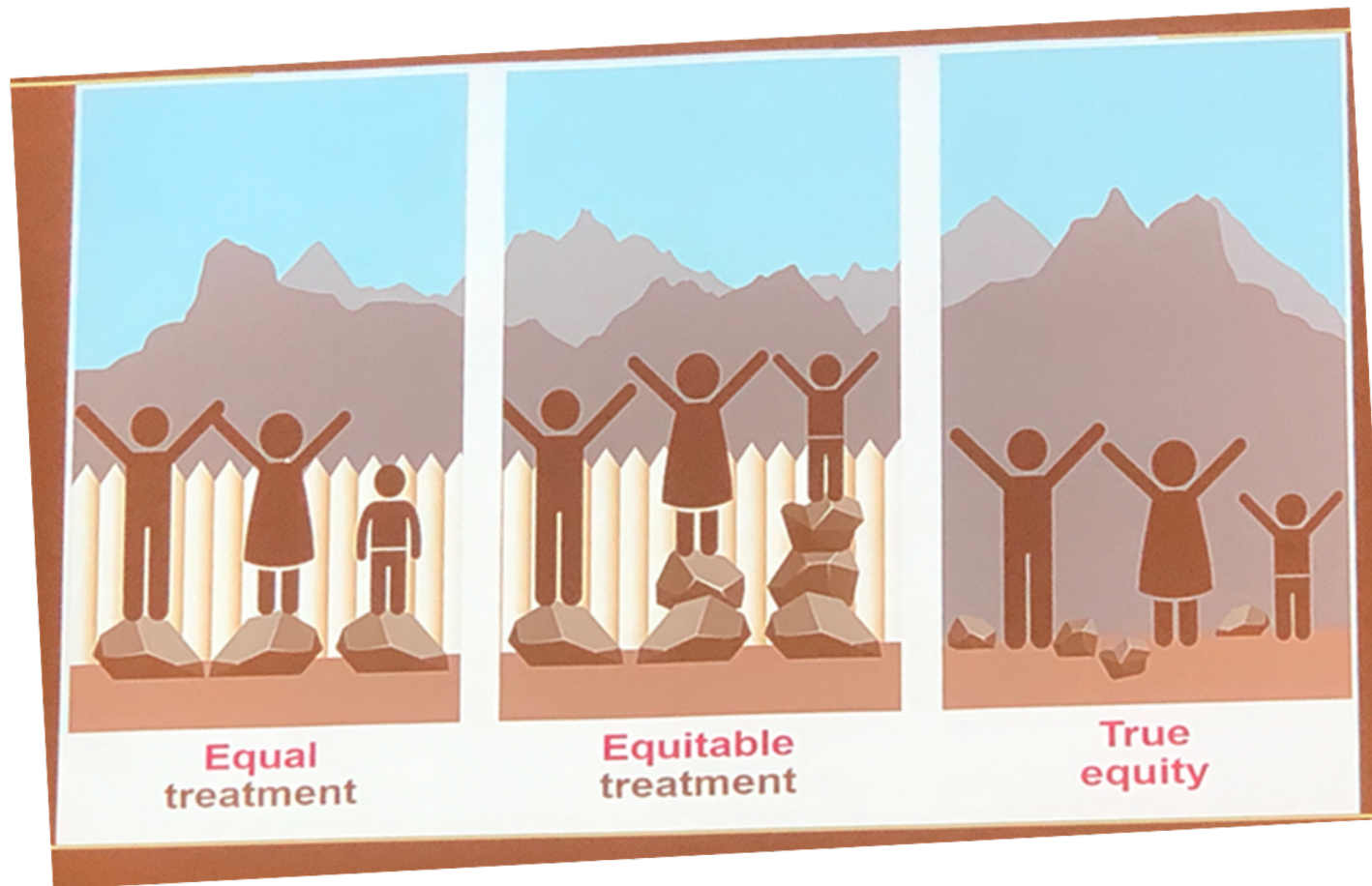
Source: Centers for Disease Control and Prevention (CDC)

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Disproportionality: Definition

- A situation in which a racial/ethnic/cultural group is represented in a system at a higher percentage than other racial/ethnic/cultural groups
- Looks across racial/ethnic/cultural groups at relative ratios of groups at various points in a system to their numbers in the general population
- Overrepresentation refers to the difference between how groups are represented at some point in a system and how they are represented in the general population

Examining the Concept of Equity



Effective Behavioral Health Services

The **Five A's** help us understand the nature of behavioral health disparities, disproportionality, and issues of equity.

They include:

- Access
- Affordability
- Acceptability
- Availability
- Accountability

Data Points

Demographics:

- What is the make-up of the community to be served (e.g., race, ethnicity, age, gender, disability, limited English proficiency, cultural make-up, and other dimensions of diversity)?

Utilization and expenditures:

- What is the rate of service usage, who are served, who are underserved, and why?

Needs:

- What are the behavioral health needs of community members?

About the Blueprint

The blueprint supports the development and implementation of data-driven strategies through a step-by-step process.



Source: Cultural Competence Action Team of the Technical Assistance Partnership for Child and Family Mental Health and the American Institutes for Research.

See Tools and Resources at the end of the module for the link.

1. Community Readiness

Consider these questions: Is your community/state ready? Is there leadership to begin and sustain the effort?



2. Community Engagement

Engagement is the process of entering into a relationship with a community that is based upon mutual respect and trust around common goals.



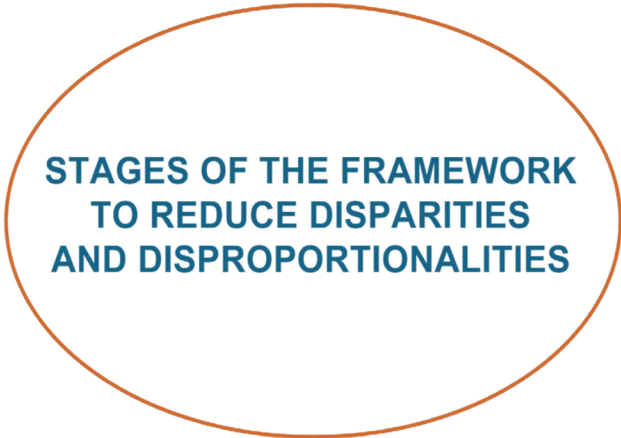
8. Sustainability



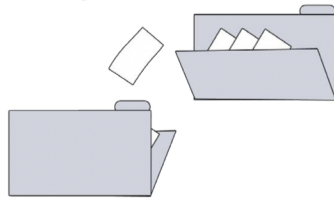
Sustainability can be achieved at different levels: policy, financing, organizational cultures, practice changes, and evaluation.

3. Identification

Disparities and disproportionalities (D&D) exist everywhere, even when we want to think otherwise. Analysis of D&D data is the foundation of the work.



7. Replication



Data gathered from conducting a process evaluation is vital in guiding decisions about whether or not particular approaches are relevant for replication.

6. Continuous Quality Improvement and Evaluation of Interventions



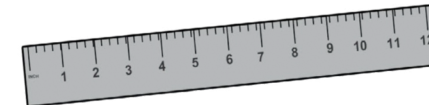
Develop a process, outcomes, and impact evaluation along with a continuous quality improvement plan. Make adjustments based on community feedback and characteristics.

5. Intervention



Develop intervention strategy(ies), determine who needs to be involved, the resources needed, and implement intervention.

4. Assessment



Once data sources have been identified, gather all data relevant to the population, disaggregate it, start assessing possible causes, validate the hypotheses, and interpret the results.

About the Blueprint: Step-by-Step Process

Step 1: Readiness assessment

- Is your community ready?

Step 2: Community engagement

- Identify audience
- Define purpose
- Define message
- Identify communication channels



About the Blueprint: Step-by-Step Process

Step 3: Identification of disparities and/or disproportionalities (D&D)

- Identify data sources

Step 4: Gathering, disaggregating, analyzing, and synthesizing data

- Generate possible explanations of D&D
- Validate explanations
- Identify and address challenges
- Partner in data gathering, analysis, and interpretation



About the Blueprint: Step-by-Step Process

Step 5: Designing data-driven intervention strategies

- Design the intervention strategies
- Assess resources needed to carry out intervention

Step 6: Evaluation of interventions and continuous quality improvement

- Process evaluation
- Outcomes evaluation
- Impact evaluation



About the Blueprint: Step-by-Step Process

Step 7: Replication

- Develop strategies for replication

Step 8: Sustainability

- Strategies to sustain change



Applying the Blueprint

Let's look at a fictitious example

The Equityville County System of Care (SOC) is a partnership between:

- The Equityville County Department of Mental Health
- The local education agency
- The juvenile court
- The Equityville Family Federation Network
- Community-based service agencies

Applying the Blueprint

Equityville County's population distribution:

- Suburban communities less than 50 miles from an urban center
- Rural farming communities
- 75,000 residents
 - Approximately 50,000 in suburban areas
 - Approximately 25,000 in rural areas

Applying the Blueprint

Equityville County's demographics:

- 30% African American or Black
- 30% Hispanic or Latinx
- 30% White
- 5% Asian or Pacific Islander
- 5% Native American

Causes of population growth:

- Farm industry
- Office parks
- Affordable housing

Applying the Blueprint: Community Issues

Budgetary setbacks:

- Increased school enrollments
- State budget cuts
 - Negative effect on the delivery of core services for youth and families
 - Negative effect on mental health services

Applying the Blueprint: Community Issues

Juvenile justice system:

- Equityville County juvenile detention center confines a disproportionate amount of African American and Latinx youth
- The detention center has also confined growing numbers of transgender and gender diverse youth

Educational system:

- Students of color are suspended or expelled at disproportionately high rates
- Lesbian or gay students are suspended or expelled at disproportionately high rates

Applying the Blueprint: Community Issues

Other issues based on race:

- Lack of racial diversity on the County Board of Supervisors
- Racial profiling by local law enforcement
- Inadequate behavioral health services

Other issues based on language:

- Inadequate interpretation and translation services for the Limited English Proficiency population

Other issues based on sexual orientation:

- Harassment of openly gay or lesbian Latinx students

Applying the Blueprint: Community Issues

Differential patterns of entry, exit, service responses, and quality outcomes affect:

- Youth of color
- LGBT youth

Applying the Blueprint: Preparing for Change

Readiness for change:

- Broad public support for examining disparities and disproportionality
- Interest in developing strategies

Obstacles to change:

- Methods of data collection
- Accuracy of the data

Applying the Blueprint: Process Overview

Step 1: Readiness assessment

Step 2: Community engagement

Step 3: Identification of disparities and/or disproportionalities

Step 4: Gathering, disaggregating, analyzing, and synthesizing data

Step 5: Designing data-driven intervention strategies

Step 6: Evaluation of interventions and continuous quality improvement

Step 7: Replication

Step 8: Evaluation

Applying the Blueprint: Steps 1–3

The Equityville County SOC:

- Created the Council for Children, Youth, and Families in Equityville Council
- Formed a work group within the council

The work group:

- Identified issues facing the county's populations
- Explained the importance of addressing these issues
- Built consensus around these issues with stakeholders
- Listened to the concerns of advocates
- Developed a list of intended outcomes

Applying the Blueprint: Steps 4–5

Next, the work group:

- Collaborated with partners to identify questions and analyze data
- Addressed resistance to the findings

Once the work group overcame resistance from the County Board and other stakeholders, it did the following:

- Identified strategies to address disparities and disproportionality at individual, organizational/institutional, and community levels
- Requested assistance from a technical assistant (TA)
- Reviewed examples from other communities

Applying the Blueprint: Steps 6–8

At the end of the process, the work group:

- Developed a plan for evaluation and continuous quality improvement (CQI)
- Identified responsible parties for data collection and analysis
- Identified CQI reporting mechanisms

As the work group discovered, the reduction of disparities and disproportionality is **NOT** a linear process.

Why Focus on Cultural and Linguistic Competence?

As a driver to:

- Build trust and work respectfully in communities
- Facilitate a sense of cultural safety for the communities in which we work
- Ensure that all who need to be included are included
- Determine what contextual mitigating factors need to be considered
- Understand cultural diversity and appreciate its benefits
- Identify the needs of diverse stakeholders and communities and determine the most effective ways to meet those needs

One Last Word about the Importance of Data

- Collecting data
- Implementing inclusive practices to collect data
- Focusing on disparities and impact
- Interpreting data and trends with a cultural lens
- Sharing feedback and findings
- Using data-driven approaches to make decisions