

Asian American Mental Health Access Program

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PROGRAM GOAL

Reduce the language and cultural barriers Asian Americans face when seeking mental health services and improve the overall quality of mental health care.



Asian American Community Services

ASIAN AMERICAN MENTAL HEALTH ACCESS (AAMHA)

“Mental health is a serious issue for our Asian population, especially for refugees and at-risk youth. I hope AACCS and other agencies can build on the past successes and do more for our community.”

*Paul Savanh,
Interpreter*

History

Asian American Community Services (AACCS) is a non-profit organization founded in 1976. The organization began addressing mental health issues shortly after the agency readjustment in 1995, as part of a larger strategy to expand its social service programs for Asian Americans in central Ohio.

In July 1996, AACCS collaborated with Alcohol Drug Addiction and Mental Health (ADAMH) Board of Franklin County on a one-day training of the ADAMH system providers. In the same year, AACCS started the Asian Language and Cultural Access Program (ALCAP), funded by the Ohio Department of Mental Health (ODMH) and Columbus Foundation, to provide interpreter training, provider training, community education and interpreter services. In the summer of 1997, ODMH funded AACCS to conduct the Asian Mental Health Needs Assessment (AMHNA) in Franklin County. Based on the assessment results, AACCS received funding from ODMH and ADAMH

Board to implement the Asian Mental Health Access (AMHA) I and II projects.

The funding enabled AMHA to develop a *Multilingual Mental Health Glossary and Resource Guide for Asian Americans, Resource Guide of Mental Health Issues for Asian American Family Caregivers*, brochure for community education, provide three interpreter training workshops, five in-house cultural competence trainings to ADAMH agencies, and interpreter services and other referrals.

Project Strategy and Service Delivery

The goal of the mental health projects at AACCS is to reduce the language and cultural barriers Asian Americans face when seeking mental health services and consequently improve the overall quality of mental health care for this population. AACCS' four mental health projects were based on a local data and needs assessment that found high depression scale and low help-seeking behavior among Chinese and Vietnamese Americans.

The Asian communities in central Ohio are fast growing. According to U.S. Census Bureau statistics, the Asian population in Franklin County numbered 6,403 in 1980; 19,270 in 1990; and 27,872 in 1998. The number of foreign-born Asians is extremely high, and since many com-

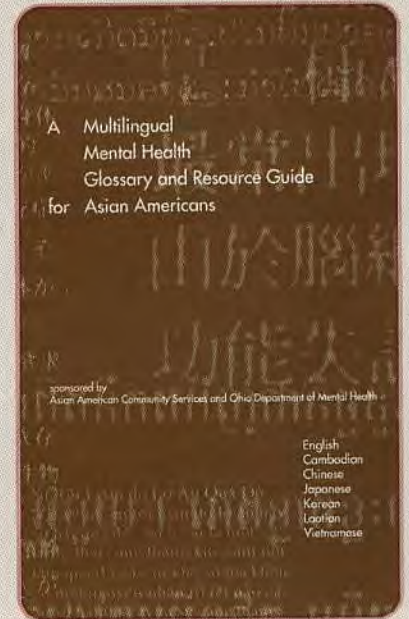
munity mental health providers lack Asian bilingual staff, they were ill prepared to deal with this population's growth and needs.

Knowing that limited resources would make it difficult to establish a mental health service center for Asian Americans, AACS decided instead to bridge Asian communities to the existing mental health system. AACS' strategy aimed to make mental health services more accessible to Asian Americans by conducting cultural competence trainings for mental health providers and professional training for community interpreters. To further increase community awareness AACS also developed and distributed 1,050 copies of a multilingual glossary for providers and interpreters, provided interpretation services and made over a dozen community referrals. Community-wide education and family support was achieved through the development and dissemination of over 4,000 multilingual educational brochures on mental health issues and 1,890 resource guide booklets for family caregivers.

In order to increase cultural and linguistic competence in the mental health system, AACS offered a one-day training workshop to providers, and developed a training program to make front-line mental health professionals more sensitive to the language and cultural issues of Asian clients. A component of provider training included working with limited English proficient clients through interpreters. As a result of these trainings, there is a growing sensitivity among ADAMH system providers, and increased partnership between providers and AACS. The multilingual glossary and resource guide for family caregivers have been distributed to numerous cities throughout the state, and all major ADAMH agencies in Franklin County. AACS has trained over 100 interpreters in central Ohio, and provided interpreter service to hospitals, ADAMH, and other system agencies.

The lack of bilingual professionals, funding resources, and coordination in dealing with men-

*AACS developed a Multilingual
Mental Health Glossary and
Resource Guide for Asian
Americans in seven languages*



tal health and AOD (Alcohol and Other Drug) issues made it more difficult to initiate a full-scale mental health operation for Asian communities. AACS' limited operational funds made it difficult to recruit and maintain quality staff, and meet the needs of the community. However, pioneering leadership as well as dedicated staff and consultants helped AACS successfully begin its community mental health programming. Despite its funding and human resource constraints, AACS also succeeded in winning one project at a time, and laid the foundation to expand mental health programs. Though these steps are encouraging, the ADAMH system still needs to commit itself to Asian community needs as well as better coordinate its efforts alongside community efforts to ensure that mental health needs are met.

Translation and Cultural Sensitivity

Bilingual staff at AACS currently speaks Cantonese, Korean, Mandarin and Taiwanese, while outreach workers speak Korean and Vietnamese. AACS also has a pool of trained community

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The *Multilingual Mental Health Glossary* is a very useful tool for us interpreters. Many mental health technical terms have no exact equivalents in Lao language. The glossary will help us to interpret more accurately and to learn more about mental health. The educational brochure on mental health and *Resource Guide of Mental Health Issues for Asian American Family Caregivers* are very helpful to my community. I distributed the material to some Laotian clients and families I have helped, and their feedback is very positive.”

Paul Savanh,
Interpreter

interpreters who speak all the major Asian languages. The organization has reached agreements with several ADAMH and other system agencies to use trained interpreters. Because of funding limits, population size of various Asian groups and language needs, the interpreter training and publications related to mental health are focused on six Asian languages: Cambodian (Khmer), Chinese, Japanese, Korean, Laotian and Vietnamese.

AACS is the leading agency in Ohio providing professional interpreter training in health and mental health. The organization developed “Standards of Practice” for interpreters, and promoted the benefits of using trained interpreters. Some of the interpreter training topics include: terminology, basic interpreting skills, code of ethics, confidentiality, culture and communication, managing interpretation process, interpreting in mental health setting, all of which included practice through role play. To improve the quality of



interpretation in mental health settings, AACS contracted with experienced trainers to conduct interpreter training, and collaborated with other agencies for mini-internship trainings. These efforts not only improved the quality of interpreter service, but also convinced a growing number of providers of the value of trained interpreters, and reduced the liability of providers. So far, both providers and clients are satisfied with AACS' interpreter service.

AACS' multilingual mental health booklets demonstrate the organization's ability to publish highly technical material, and its commitment to provide linguistically and culturally competent support to the community and system providers. AACS attempts to demystify the stigma of mental illness (often rendered as “craziness” among some Asian cultures) and make options available (such as interpreter service and referrals) that encourage Asian Americans to utilize mental health services.

To increase cultural competence within the organization, AACS staff was encouraged to participate in cultural competence conferences and trainings offered by the system organizations. AACS continues to make cultural competence an on-going process for self and system development.

Patient and Staff Education

Since AACS does not offer mental health treatment services, the organization did not develop a patient education program. The multilingual brochures and resource guide for family caregivers however is available to Asian American community members.

Interpreters play an indirect role in patient education since they are trained to serve as brokers between providers and patients. Interpreters inform patients about the mental health system, and inform the provider about patients' cultural values.

The majority of staff and consultants on mental health projects are bilingual and bicultural. Key staff members received training on mental health issues through ODMH and ADAMH workshops and conferences. The entire AACS staff attended the interpreter training on mental health issues, and participated in agency and system trainings in cultural competence. Speakers were invited from mental health and AOD agencies to train AACS staff on skills building and system procedures related to victim assistance, AOD and mental health issues. AACS also partnered with ADAMH and other system agencies in cultural competence training.

Collaboration

AACS is one of the few community agencies targeting central Ohio's Asian population, and the only agency focusing on Asian mental health issues. AACS collaborated with other community agencies in numerous cities for interpreter training and professional development. AACS also collaborated with the ADAMH board for provider training and major ADAMH agencies (such as NetCare, CHOICES, Southeast, North Central and CompDrug) for interpreter service, referrals, technical support and training.

Financial Coverage

Primary funding sources for AACS mental health projects are ODMH, the Columbus Foundation and ADAMH Board of Franklin County.

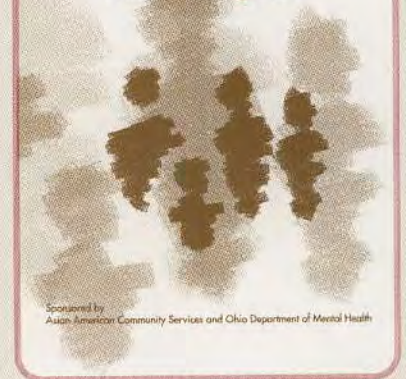
Interpreter services were provided at an hourly rate; bilingual materials and referral service are provided free of charge.

Interaction of Mental Health Program and Substance Abuse Program

Apart from its mental health projects, AACS implemented three mini-grants related to AOD funded by Franklin County Prevention Institute,

AACS developed a resource guide for Asian American family caregivers

Resource Guide of Mental Health Issues for Asian American Family Caregivers



Ohio Parents for Drug Free Youth, and Columbus Area Council on Alcoholism. The outcomes included supporting AOD prevention education in the Columbus Chinese School during summer 1996 and the Vietnamese Summer School in 1997, and the development of a multilingual brochure on alcohol prevention. The mini-grant projects and the mental health projects supported one another in community outreach and education. But because our mental health projects focused on adult population, and AOD prevention education focused on juvenile population and prevention education, the interaction between the two projects was minimal. The lack of interaction was also due to the fact that the AOD projects were limited in duration and funding.

Evaluation/Measurement of Project's Strategy Effectiveness

All mental health projects receive ongoing input and recommendations from project consultants and evaluators. AMHA I received a comprehensive evaluation report. The outcomes were measured by surveys, training evaluations, and feedback on the products produced by ALCAP and

“I find the AACS interpreter training very helpful. It helps me to provide interpreter service more professionally, work with providers and clients more effectively, and to deal with many dilemma situations in interpretation.”

Paul Savanh,
Interpreter

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The AACCS
brochure and
booklet in Laotian
are very useful to
me and my family.
”

*Former Client,
50-year-old
Laotian Woman*

AMHA. More than 300 interpreters and providers completed evaluation forms, most of which rated very positively. The feedback for ALCAP and AMHA products (multilingual education brochures, glossary and caregiver booklets) from local providers and Asian professionals in the U.S. and Canada is overwhelmingly positive.

Innovation

AMHA's multilingual glossary is a useful tool that provides interpreters and providers with DSM IV terminology. The tool is also useful since some limited English proficient clients may prefer not to utilize interpreters.

Lessons Learned

- AACCS realized that mental health is of primary importance to the well being of the whole Asian American community.
- Mental health and Alcohol and Other Drug (AOD) issues need to become an integral part of the agency's strategic plan, and should be coordinated with other social service programs and outreach activities.
- Greater efforts should be made to partner with state and county mental health agencies in order to obtain stable funding for effective community mental health programs, thus creating a meaningful impact in the lives of Asian Americans.

Recommendations for Replication

- In small to medium cities with fast growing Asian populations and limited bilingual mental health professionals, community organizations can effectively serve population needs by creating bilingual support and bridging needy individuals and families to existing resources and services.
- AACCS' multilingual glossary and resource guide for family caregivers are excellent models for replication in similar Asian American communities across the country.
- Cultural competency training of mental health providers and skill training of interpreters are important components to start effective community mental health programs, and to help the system be more prepared for Asian American clients.
- To create a sufficient interpreter pool and attract more community members to become interpreters (particularly for small languages), community organizations should obtain funding to cover interpreter training costs and network with hospitals and mental health agencies to provide paid interpretation opportunities. This will help to develop a professional pool of community interpretation services.
- Multilingual community education brochures are effective tools to reach more people, reduce the stigma associated with mental health, help with self-support tips in reducing depression, and provide resource information.