


The California Endowment (2003). Resources in Cultural Competence Education for Health Care Professionals. Woodland Hills, CA: Author.***[Outstanding resource document downloadable from the web. Also at the same website are resources on working with limited English proficient patients.]***


***Center for Mental Health Services/Substance Abuse and Mental Health Services Administration. (1998). Cultural Competence Standards in Managed Care Mental Health Services for Four Underserved/Underrepresented Racial/Ethnic Groups. Washington, DC: CMHS/SAMHSA. Essential for understanding systems cultural competence. (www.mentalhealth.org. Search for “Cultural Competence Standards in Managed Care Mental Health Services.”)


---

Culture of Emotions Bibliography -- Page 2


***Note chapter 4 on the clinical encounter—very important on bias***


Archive References


**Journals**

There are three major journals exploring these areas. They are *Transcultural Psychiatry* (published by Sage); *Culture, Medicine, and Psychiatry* (published by Kluwer) and *Cultural Diversity and Ethnic Minority Psychology* (published by the American Psychological Association).

**Videotapes**

“The Culture of Emotions” is a 58-minute training videotape (2002) that discusses the *DSM-IV Outline for Cultural Formulation*. It features twenty three multidisciplinary experts in cultural psychiatry commenting on sections of the Outline. It was written, produced, and directed by Harriet Koskoff and is available through Fanlight Productions (www.fanlight.com). A Study Guide and annotated bibliography are available as downloads from the webpage describing the videotape. [Click “Study Guide” on webpage describing the videotape to download a 1995 chapter on the Outline for Cultural Formulation]. Also, Harriet Koskoff and Francis Lu have created two 17-minute videotapes: “A Visit with Irma Bland, MD: Discussing the DSM-IV Outline for Cultural Formulation” and “A Visit With Evelyn Lee, EdD: Working With Asian-American Immigrants and Refugees.” Both of these pioneers in cultural competence passed away in 2003.

**Websites**

1) ***Mental Health: Culture, Race, and Ethnicity,* U.S. Surgeon General: www.surgeongeneral.gov/library/mentalhealth/cre/default.asp

2) ***The Institute of Medicine (www.iom.edu) has published since 2001 a series of important books that have impacted on moving health care policy. Academic psychiatry can benefit from utilizing these perspectives. "Crossing the Quality Chasm" (2001) focused on 6 aims for improving health care: safety, effectiveness, patient-centeredness, timeliness, efficiency and equity. The IOM is currently working on a report adapting it to mental health and addictive disorders; input is welcome at the website. "Health Professions Education: A Bridge to Quality" (2003) suggested 5 core areas for education that would enhance quality. "Unequal Treatment: Confronting Racial + Ethnic Disparities in Health Care" (2002) has clearly established the importance of this area in health care policy. "Speaking of Health: Assessing Health Communication Strategies for Diverse Populations" (2002) addresses the challenge of improving health communication in a culturally diverse society. "Health Literacy: A Prescription to End Confusion" (2004) recommends that health care systems should develop programs sensitive to cultural and language preferences that reduce the negative effect of limited health literacy. If patients cannot comprehend needed health information, attempts to improve the quality of care and reduce health care costs and disparities may
fail. "Research Training in Psychiatry Residency: Strategies for Reform" (2003) has sparked efforts within AAP, AADPRT and NIMH for change. "Behavioral and Social Sciences in Medical School Curricula" (2004) has relevance for our teaching in medical school both within and outside psychiatry. Finally, “In the Nation's Compelling Interest: Ensuring Diversity in the Health Care Workforce” was published in 2004. You can read it online as well as purchase the PDF or hardcopy text at http://iom.edu/report.asp?id= 18287.

“…The report examines institutional and policy-level strategies -defined as specific policies and programs of health professions schools, their associations and accreditation bodies, health care systems/organizations, and state and federal governments - to increase diversity among health professionals. Addressed in the report are an assessment and description of the potential benefits of greater diversity among health professionals and an assessment of strategies that may increase diversity in five areas including:

§ admissions policies and practices of health professions education institutions;
§ public (e.g., state and federal) sources of financial support for health professions training;
§ standards of health professions accreditation organizations pertaining to diversity;
§ the "institutional climate" for diversity at health professions education institutions; and
§ the relationship between Community Benefit principles and diversity....”

Table of content: Executive Summary 1 Introduction 2 Reconceptualizing Admissions Policies and Practices 3 Costs and Financing of Health Professions Education 4 Accreditation and Diversity in Health Professions 5 Transforming the Institutional Climate to Enhance Diversity in Health Professions 6 Reconceptualizing Admissions Policies and Practices 7 Mechanisms to Garner Support for Institutional and Policy-Level 8 Appendix A: Data Sources and Methods Appendix B: Committee and Staff Biographies Commissioned Papers Contribution A: Increasing Diversity in the Health Professions: A Look at Best Practices Contribution B: The Role of Public Financing in Improving Diversity in the Health Professions Contribution C: The Role of Accreditation in Increasing Racial and Ethnic Diversity in the Health Professions Contribution D: Diversity Considerations in Health Professions Education


4) *** "Cultural Competence Standards in Managed Care Mental Health Services: Four Underserved/Underrepresented Racial/Ethnic Groups," Center for Mental Health Services: http://www.mentalhealth.samhsa.gov/publications/allpubs/SMA00-3457/default.asp

5) ***"Assuring Cultural Competence in Health Care: Recommendations for National Standards,” Health and Human Services' Office of Minority Health: www.omhrc.gov/clas/

6) ***“A Family Physicians Practical Guide to Culturally Competent Care.” This is a web-based CME training about the 14 Cultural and Linguistic Appropriate Services (CLAS) Standards from the HHS Office of Minority Health. Although intended for practicing family physicians, it is useful for any health professional or trainee. Available on DVD. December 2004. http://cccm.thinkculturalhealth.org/

7) “Setting the Agenda for Research on Cultural Competence in Health Care.” This project looks at the question of what impact cultural competence interventions have on the delivery of health care and health outcomes, and investigates the opportunities and barriers that affect how further research in this area might be conducted. August 2004. www.omhrc.gov/cultural/cultural18.htm


9)*** HHS CMS (Centers for Medicare & Medicaid Srvs) at www.cms.gov/healthplans/quality/project03.asp provides information and downloads for three outstanding recent cultural competence guides from HHS:

a) “Providing Oral Linguistic Services: A Guide for Managed Care Plans”
b) “Planning Culturally and Linguistically Appropriate Services: A Guide For Managed Care Plans”

c) “Best Practices for Culturally and Linguistically Appropriate Services in Managed Care Conference: June 3 and 4, 2002 in Research Triangle Park, North Carolina.”

The first two items were the principal material for the handout at 3 national CLAS trainings given by the University of North Carolina School of Public Health in 2003. Information about the HHS Culturally and Linguistically Appropriate Services (CLAS) Standards can be obtained at www.omhrc.gov/clas.


"How do we know cultural competence when we see it?" is the central question that prompted the Health Resources and Services Administration (HRSA) to sponsor a project to develop indicators of cultural competence in health care delivery organizations. The Assessment Profile builds upon previous work in the field, such as the National Standards for Culturally and Linguistically Appropriate Services (CLAS), and serves as a future building block that advances the conceptualization and practical understanding of how to assess cultural competence at the organizational level.

The Assessment Profile is an analytic or organizing framework and set of specific indicators to be used as a tool for examining, demonstrating, and documenting cultural competence in organizations involved in the direct delivery of health care and services. At a general level, the Profile can help organizations frame and organize their perspectives and activities related to the assessment of cultural competence. More specifically, it can be used in routine performance monitoring, regular quality review and improvement activities, assessment of voluntary compliance with cultural competence standards or guidelines, and periodic evaluative studies.


12) Many of the National Institutes of Health have written strategic plans to reduce health disparities. Ones by NIDA, NIAAA, OSSR (approx sp.) + others can be found at http://healthdisparities.nih.gov/working/institutes.html. I could not access the NIMH one, although I have done so in the past.

13) The National Center on Minority Health + Health Disparities can be found at www.ncmhd.nih.gov

14) "National Healthcare Quality Report" and the "National Healthcare Disparities Report." The reports present data on the quality of and disparities among services for seven clinical conditions and provide "a snapshot of the American health care system." The reports are available at http://qualitytools.ahrq.gov

In a February 10, 2004 hearing before the House Committee on Ways andMeans, Department of Health and Human Services (HHS) Secretary Tommy Thompson admitted that his department made a mistake in revising a December 23, 2003 report from the Agency for Healthcare Research and Quality (AHRQ) on racial and ethnic disparities in health care. Secretary Thompson told the committee that HHS would release the original version of the "National Healthcare Disparities Report," in its unaltered form, "without any changes whatsoever." On January 13, Representative Henry Waxman and seven other House members complained to Secretary Thompson that the first publicly released version of the report was a "watered-down" version of the original findings and that "HHS substantially altered the conclusions of its scientists" in order to portray a less pervasive national health disparities problem.

15) *** The California Endowment at www.calendow.org has 3 very important monographs:

a) “Principles and Recommended Stds for Cultural Competence Education of Health Care Professionals”

b) “Manager's Guide to Cultural Competence Education for Health Care Professional”
c) “Resources in Cultural Competence Education for Health Care Professionals”

Also other important monographs on interpreters and an annotated bibliography "Multicultural Health 2002"

This is a landmark document. Also, you can search "disparity" on the APA website at http://search3.apa.org/results.cfm.

17) The American Medical Association efforts on disparities can be seen at www.assn.org/ama/pub/article/2403-7066.html.
Also you can check www.Ama-assn.org/go/diversity/healthdisparities.

18) The Association of American Medical Colleges (AAMC) sponsors a campaign to reduce health care disparities. The Henry J. Kaiser and Robert Wood Johnson foundations, along with the AAMC and nine other co-sponsoring health care associations, have launched a $1 million campaign to reduce racial and ethnic disparities in health care. This national initiative includes an outreach effort to engage physicians in dialogue; an advertising campaign in major medical publications; and a review of the evidence on racial/ethnic disparities in healthcare. The campaign begins with a focus on cardiac care and, as part of the effort, the American College of Cardiology and the Kaiser Foundation recently released a report listing racial and ethnic disparities in cardiac care. Information: Go to http://www.kff.org/content/2003/6067. Also www.aamc.org, then “diversity” section of the site has additional resources.

19) Massachusetts General Hospital Office of Multicultural Education. Has a search engine for updated literature at www.mgh.harvard.edu/healthpolicy/cche.htm

20) McGill Department of Psychiatry Division of Transcultural Psychiatry Cultural Consultation Program: Ww2.mcgill.ca/psychiatry/ccs/eng/finalreport/toc.html


22) The American College of Mental Health Administration Summit March 2003 focused on "Reducing Disparity: Achieving Equity in Behavioral Health Services." www.achma.org/Summits/summit_2003.htm

23) “Strategies for Diversity of the Health Professions” (2003). Funded by the California Endowment, it focuses on California. At the UCSF EQOP website http://www.ucsf.edu/senate/0-committee/g-eop.html, the PDF document is at the bottom of the page under "Documents of Interest."

24) “Cultural Competency for California Public Health Staff.” As part of the OMH State Partnership Initiative, the UC San Francisco Center for the Health Professions has completed a report that outlines a cultural competency curriculum specifically for public health staff. The report, Cultural Competency for California Public Health Staff: Train-the-Trainer State Partnership Project, was written for the California Department of Health Services’ Office of Multicultural Health. September 2004: http://futurehealth.ucsf.edu/pdf_files/Final%20OMH%20Report.pdf.


26) State of California Department of Mental Health Office of Multicultural Affairs: www.dmh.ca.gov/multicultural

27) “State of California Task Force on Culturally and Linguistically Competent Physicians and Dentists Final
Report to the Legislature Pursuant to AB 2394” is available at www.dca.ca.gov/cltaskforce or www.dca.ca.gov/reports.htm

28) San Francisco Department of Public Health Cultural Competence Website: www.dph.sf.ca.us/CLAS