WE'RE ESTAMOS AQUÍ

IN A COVID-19 WORLD, mental health care is perhaps more important than it ever was before.

But like the rest of health care, mental health care in the United States isn't always accessible. It can be expensive. There's a stigma associated with seeking care. And, broadly speaking, it's a field that excludes many.

For years, UNC Greensboro has been committed to transforming the field of mental health through culturally responsive care. It's an approach that improves outcomes by developing and delivering treatments and interventions that take into account cultural contexts and nuances.

Culturally responsive care isn't about making assumptions or responding to stereotypes. It means practicing cultural humility and fighting against systemic inequities upon which our mental health care system has been built.

It's about reducing disparities and making real change in our communities. And Spartans are leading the way, through training, outreach, and research.

THE UNDERSERVED

Historically, the vast majority of psychology research in the U.S. has been conducted by White researchers, with most participants being White and affluent, says Susan Keane, professor of psychology. Most mental health professionals have been White men, although today, the field tends to be dominated by White women. The result? Many segments of the population are excluded, leaving certain communities and groups more privileged over others. Treatments, often developed by White researchers for White people, are not as effective when applied to other

racial and ethnic groups.

Conversations around culturally competent mental health care, often referred to as culturally responsive care, began in the late 1980s. While significant progress has been made in recent decades, more work remains.

"COVID-19 has laid bare the deep disparities that exist in minoritized communities that we've all known have been there," says associate psychology professor Gabriela Livas Stein. "Culturally responsive care is about dismantling these systemic inequalities, while at the same time acknowledging the resilience and strength of these communities."

UNCG's approach starts with how it trains its students. Since the late 1980s, UNCG's clinical



66 It's been important for me to work with different communities and help normalize things like anxiety and depression. Language plays a key role in this – we need friendly, accessible language that breaks down some of these terms.

> - PhD candidate Sudheera Ranaweera is involved in a \$2.2M training grant to diversify mental health services

A TRADITION OF SERVING

psychology program has had a "philosophy of helping the underserved," says Dr. Keane, who serves as clinical training director.

A new five-year, \$2.2 million grant from the U.S. Health Resources and Services Administration will further this work. The grant aims to recruit, retain, and support the training of clinical psychologists from underrepresented and disadvantaged backgrounds to enter primary care settings and medically underserved communities.

The goal of the grant is twofold: diversify the clinical workforce and address disparities in access. UNCG will team up with a variety of community partners - including Brenner Children's Hospital in Forsyth County and Moss Street Partnership School in Rockingham County to offer additional clinical experience to students.

Keane leads the grant, with Dr. Rosemery Nelson-Gray, Dr. Jason Herndon, Dr. Julia Mendez Smith, and Dr. Stein as co-principal investigators. "It's important that people from a variety of communities are able to see themselves in this profession. Diversifying the workforce now will help to continue to diversify the workforce long term," says Herndon, who is director of UNCG's Psychology Clinic.

"Additionally, while people can absolutely serve communities that are different from them, it's important for people to have the option to see a mental health care professional who identifies with their community."

Photo: Research assistant Xiadani Avila and community health worker Maria Soledad Aispuru (I-r) recruit participants for the Strong Minds, Strong Communities project, at a local event in Sept. 2020.

INCREASING ACCESS

When it comes to effective mental health services, the client-therapist relationship is key.

There has to be trust – and trust often requires some level of connection or shared experience.

For Black and Latinx communities, it's particularly important. But in a field that has been built by and for middle- to uppermiddle-class White Americans, it can be difficult to build trusted relationships. There can also be socioeconomic and linguistic barriers, as well as cultural stigmas.

All these social historical realities existed pre-COVID-19. Now, barriers have increased, and stressors have multiplied. The Black and Latinx communities have been disproportionately affected by the pandemic, which has serious implications for mental health.

Dr. Gabriela Livas Stein is a leader in research on mental health and Latinx families. Her latest project is a five-year, \$4.3 million National Institutes of Health-funded study that aims to increase mental health care access for local underserved populations.

"Strong Minds, Strong Communities" is co-led by Dr. Kari Eddington in psychology with co-investigators Dr. Stephanie Irby Coard and Dr. Andrew Supple in human development and family studies.

The team includes community health workers who have been trained to deliver an empirically supported intervention. Part of their work is partnering with community organizations to recruit participants in need of these services. Engaging communities is key – it helps address the mistrust that often exists between medical providers and underserved populations, and it helps in delivering interventions that better speak to the experiences of clients.

"Having community health workers who are integrated in the community allows for the intervention to be really embedded and enriched by cultural nuances," says Stein.



CAMINOS lab researchers meet. Clinical psych doctoral students Puja Patel (I) and Michele Chan (c) are part of the first cohort funded by the new training grant, while postdoc Michelle Martin Romero (r) is now a faculty member at UNCG. Photo: Nov. 2018

66 *The intervention is interactive. We use role* playing in group sessions to teach parents to advocate for their kids at school and in health care settings. We also teach self-care – to do this advocacy you need to take care of yourself. $\P \P$

> – Community partner Dr. Juan Prandoni works with providers across NC to implement Padres Efectivos, a Stein lab intervention

Stein's CAMINOS Lab directs several community-engaged projects aimed at increasing access to mental health care. In 2013, they developed and tested "Padres Efectivos," an intervention for Latinx families raising children with mental health needs. The intervention was a success, and now a version is being disseminated across the state by community partner El Futuro, a nonprofit outpatient clinic based in Durham, North Carolina. "I've seen the intervention have such great impacts," says Dr. Juan Prandoni, who is El Futuro's training director and a PhD alum of the Stein lab.



The Strong Minds, Strong Communities intervention is offered in both English and Spanish. Roughly 65% of the study's participants are Latinx, and the project also serves a large Black population. Studies have shown that in the United States, only 11% of Latinx people and 13% of Black people obtain the mental health services they need, says Stein.

Due to COVID-19, the intervention is now offered over the phone and via video conferencing. Leslie Estrada (photo above), a 2019 UNCG graduate, is one of the study's community health workers.

Estrada has seen increased levels of anxiety among the participants in recent months. Yet as they work through the intervention, she's seen symptoms dramatically decrease.

"It's amazing to see how people can grow throughout the intervention. We're just there as a guide – it's up to them to put in the work. I've seen people improve, and that's been fulfilling."

RACISM'S IMPACT ON MENTAL HEALTH

The country has been battling another virus this year: racism.

Instances of racist violence continue to plague our communities, with high-profile violent events targeting Black individuals sparking nationwide conversations about policing, race, and systemic inequities.

Concerns are climbing around the heavy psychological toll Black youth and families face, as they see violent images and videos of the deaths of innocent Black people on the news and in their social media feeds.

"Occurrences in media and social media are incredibly traumatizing, and you don't necessarily have a choice. Even if children don't think it's traumatizing, it is," says Dr. Coard.

Meanwhile, Asian American families have seen an increase in discrimination due to COVID-19, and Latinx families also continue to experience xenophobia, in part due to national debates around immigration.

And it's not just media that is impacting the mental health of minoritized youth. It's the everyday instances of racism that existed long before the internet did - that affect people of color in the United States at an early age. Children experience discrimination in schools, daycares, parks, and playgrounds. They often start to internalize these messages, which can result in negative mental health and academic outcomes long term.

A COMMON GOAL

Mental health care is an interdisciplinary field, and as a result, UNCG's response involves researchers across disciplines – from psychology to human development and families studies to education – and a variety of community partners. It's a collective effort led by faculty, students, and advocates from diverse backgrounds, but with the same goal: reducing health disparities.

"Culturally relevant care has always been important – before COVID-19, before Black Lives Matter, before all of this," says Coard.

"There are lots of strategies and interventions and programs that we know can have a positive impact on families and youth, but they have to be relevant to our places and spaces. If you don't make these interventions so that they speak to diverse populations and their experiences, then you might as well not have them," says Coard. "We're taking what we know works, and we're making it work for diverse families and communities."

by Alyssa Bedrosian • learn more at psy.uncg.edu caminoslab.org/strongminds | caminoslab.org/onetalk



In response to this critical issue, Coard and Stein have teamed up on the "One Talk at a Time" project - an online video series that helps parents of color talk with their children about racism – along with Dr. Laura Gonzalez in the School of Education and Dr. Lisa Kiang at Wake Forest University.

The pilot program launched in 2018 with funding from a UNCG Strategic Seed Grant. The program is designed for families in the United States, with specific videos for Black, Latinx, and Asian American families.

Now, the team is developing videos for White families, led by Dr. Gonzalez.

Typically, when White caregivers have conversations about race with kids, Coard explains, they take a color-blind approach, or they simply say, "We're all human, we must treat people equally." This approach is problematic because it doesn't prepare White children to be anti-racists – to understand their privilege, to recognize racism, and to actively work to dismantle racism.

And, of course, some families deliberately perpetuate White supremacy.

"I think that these videos for White families will close the loop, because racism needs to be discussed and addressed with people who are in positions of power and privilege," says Coard.

"It brings them to the table so that they can get schooled on the experiences of families of color and see how their positionality can be part of the solution, not just the problem."



Gonzalez, Stein, Coard, and Kiang (I-r) teamed up to launch the One Talk at a Time project. Photo: Jan. 2019