

Going Beyond Grants to End Health Disparities

KAREN VOICI

Executive Director, Harvard Pilgrim Health Care Foundation

SHANI DOWD

Director, Culture InSight

Several years ago, Hallmark Health System, which includes Lawrence Memorial Hospital of Medford and Melrose-Wakefield Hospital and is located north of Boston, realized it had a substantial challenge: while its patient population had changed dramatically in terms of language and culture, its staff and management had not. Enter Culture InSight, an operating program of the Harvard Pilgrim Health Care Foundation that was brought in by Hallmark Health to help facilitate the changes needed to better serve their patients.

Culture InSight's preliminary survey of Hallmark Health's staff revealed that although there was an overall positive feeling about the services provided at the sites, more work needed to be done to ensure that the organization presented a consistent environment that was welcoming to patients of all cultures.

After in-depth meetings with staff at all levels and a full-day retreat with managers, Culture InSight developed a strategic plan for the organization that outlined the need to embrace diversity in the workforce, governance structure, and care of patients in order to provide culturally congruent and competent care. Through several training courses and consultation sessions, as well as continuous and consistent support, Culture InSight was able to help Hallmark Health System better align their goals and improve care for members of ethnic and disadvantaged populations, with a focus on those populations most affected by health disparities.

Rather than providing direct grants, the Harvard Pilgrim Health Care Foundation through Culture InSight, provides cultural competency and medical interpreter training, as well as consulting and organizational development services to health and human service professionals and their organizations throughout Massachusetts, New Hampshire, and Maine.

When Culture InSight was organized nearly a decade ago, there were a number of foundations providing grants that supported a variety of projects to end health disparities. There were, however, few organizations that trained medical and health staff at community clinics, health centers, and small hospitals to actually address cultural barriers in their individual practices.

By providing support for these organizations and their initia-

tives, the foundation aims to combat health disparities in order to improve the health of not only Harvard Pilgrim Health Care members, but also the many communities we serve.

THE CURRENT STATE OF HEALTH DISPARITIES

The consistent increase in the immigrant and minority population throughout New England has had significant implications for patients and the health care industry and has led to growing health disparities, including:

- **Organizational Obstacles** – Pressure to contain spending may disproportionately affect patients who are less educated or less likely to ask doctors for more services. Additionally, many health plans do not offer professional interpretation or translation services to patients who do not speak English. Because of this, organizations may have difficulty connecting with the diverse communities in their service areas.
- **Patients' Attitudes and Behaviors** – Some minority patients may put off health care visits because they do not trust the health care system, reject their doctor's recommendations, or fail to correctly follow physician instructions. Provider/patient communication can be negatively affected by linguistic and cultural factors.
- **Unrecognized Biases and Prejudices** – Health care providers' attitudes and beliefs may influence the quality of care they provide minority patients. These attitudes and biases are likely unconscious, the result of cultural learning, and sometimes reinforced by training.

When large segments of our population suffer an increased burden of chronic health problems and lack high-quality and culturally competent health care and health-related information, it affects all sectors of our community: children have more absences from school, adults are more likely to miss work or be less productive in the workplace, and the financial cost of illness can make individuals and families unable to contribute to the success of their community.

WHY OUR MODEL WORKS

The goal of Culture InSight is to reduce cultural barriers between patients and medical providers, while at the same time help create organizations that are welcoming for people of all cultures, languages, and classes. As a small foundation, it is imperative to maximize the reach and impact of our contributions to society – by turning a portion of our funding into services through Culture InSight, we are able to work with a greater number of organizations for longer periods of time.

In Massachusetts we are lucky enough to have a richness of funding for health services, as well as active health departments, community health centers, and public and private agencies, all working to provide health care for minority and disadvantaged populations. But there are very few organizations that are able to affect change in a substantial way with regards to how patients of all cultures receive care. Our services and support ensure that the health organizations and professionals providing care to these specific populations are able to supply the highest-quality, most culturally competent care possible.

Culture InSight's unique training format utilizes facilitative, rather than didactic, lecture-based learning that positions all participants as learners. Participants bring their unique perspectives to each discussion, while receiving practical, hands-on experience through a variety of teaching methods, including discussion, role playing, and skill-building activities. Programs, such as neighborhood tours, provide insight on cultures and customs that shape our communities. Over the years, the program has grown to include consulting services, medical interpreter training in nine different languages, and a wide range of educational programs for health care and social service professionals. Culture InSight also publishes training materials and reports.

CULTURE INSIGHT'S RANGE OF SERVICES AND REACH

Culture InSight has a longstanding relationship with the Massachusetts League of Community Health Centers, providing cultural competency training for community health centers in Massachusetts, free of charge, with the ultimate goal of disseminating training to areas outside the urban cores of the state.

In collaboration with Neighborhood Health Plan, Culture InSight designed and delivered the region's first cultural competency training program for pharmacists utilizing the train-the-trainer model. Participants in the class are now able to deliver training to additional pharmacists throughout the region.

Culture InSight provides ongoing consultation and training support to the Urban Scholars program at Dartmouth Medical School, serving as a bridge between Dartmouth and various urban medical systems.

The program has supplied scholarships to facilitate training for bilingual staff of health centers in Massachusetts, including the MetroWest Free Care Clinic. By providing free medical training to volunteers, we have enhanced the quality of care they are able to provide to their large population of limited-English proficient patients.

Culture InSight's Foundations in Medical Interpreting program has served as a best practices model in the field of

medical interpreting. Several other programs throughout the region have adopted many of the practices, including providing new interpreters with language coaching by native speakers.

In Maine, Culture InSight is currently working on the Race, Ethnicity and Language (REL) data collection project by providing consultation support to a coalition of community-based organizations working to enhance the collection of REL data and its utilization in the state.

LESSONS LEARNED

- **Relationships, relationships, relationships.** It takes time to develop strong relationships that allow us to be successful; the partner organization must be a willing collaborator.
- **Quality is critical.** We make it a point that our training and consultation services are of the highest quality. We want people to walk away wanting more. Engage the client through curiosity.
- **Establish credibility with ethnic communities.** We are known for our passion and skills in various communities, which allow us to be more effective.
- **Dedication is a must.** A dedicated staff brings not only their skills, but also a commitment to the programs provided.
- **Build long-term, meaningful relationships.** Demonstrate a commitment to the field by being a consistent presence in the community.

We foresee the issue of health disparities and cultural competency evolving to become much more of a mainstream topic. And as we continue to witness significant changes in population across the nation – not just in urban enclaves – the topic of health disparities will be better integrated in the training of medical professionals and discussions surrounding public policy. In 20 years, cultural competency will no longer be an add-on to health care but will move to the center of how we take care of people in this country.

Often, we at the foundation are asked, "If I am a grantmaker without an operating program, what can I do to improve health disparities?" And while answers to that question differ depending on size, budget, and service, a critical point for all funders is to be more knowledgeable about the diverse communities they serve and build strong relationships within those communities. It is not enough to just read the data. Get out of the office and meet community members and leaders. Serve as the bridge between funders and the ethnic and poor communities.

Additional funding and grants are always valued. But ultimately, we have made a strong impact because we have developed a specific approach that adds value to all of the efforts that take place in the health disparities field, and we have stayed with that framing and strategy over the past 10 years. Our focus and consistency about what we are doing is what leads to strong patient-provider relationships to improve the quality of health care throughout the region.

VIEWS FROM THE FIELD is offered by GIH as a forum for health grantmakers to share insights and experiences. If you are interested in participating, please contact Faith Mitchell at 202.452.8331 or fmitchell@gih.org.