Psychiatry Grand Rounds WCM Department of Psychiatry

Psychology CE Announcement

Gary Spero Memorial Lecture

Closing the Gap: Reducing Racial/Ethnic Disparities in Behavioral Health by Targeting Multiple Clinical and Policy Mechanisms

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> Meeting ID: 928 1203 6154 Password: 12345

*1.5 CE credit available to full time and voluntary faculty psychologists and Social Workers who sign in with their full name, attend the majority of the lecture and complete a survey which will be emailed following the completion of the lecture.

SPEAKER DISCLOSURE:

Dr. Lê Cook has no relevant financial relationship(s) with ineligible companies to disclose and DOES NOT INTEND to discuss off-label or investigational use of products or services.

Dr. Benjamin Lê Cook is Director of the Health Equity Research Lab at Cambridge Health Alliance, Associate Professor in the Department of Psychiatry at the Harvard Medical School and Visiting Clinical Associate Professor at the Albert Einstein College of Medicine in the Bronx, NY. He holds a Ph.D. in Health Policy from Harvard University and an MPH in Health Behavior and Health Education from UNC Chapel Hill. Dr. Cook is a health services researcher focused on improving quality of life, and access and quality of treatment for individuals living with mental illness and substance use disorder. His NIH, AHRQ- and Foundation-funded research tracks healthcare disparities in the U.S. and the impacts of health reform on disparities, seeks to understand discrimination in the patient provider interaction, and evaluates the impact of system-based interventions on health equity. As Director of the Health Equity Research Lab, he also oversees research on criminal justice and mental health, transgender health, opioid use treatment evaluation, integrated behavioral health care, and the promotion of community-engaged research partnerships. Dr. Cook has experience mentoring students and faculty at all levels in health disparities and health system evaluation.

Abstract: Racial/ethnic disparities in mental health treatment are greater in mental health care than other areas of health care. Looking over the last decade, disparities in access to treatment have remained, and are a major contributor to the greater severity and persistence of mental illness among racial/ethnic minorities. Meanwhile, there has been major health insurance reform over the past decade, and a hope held by many that these reforms will have reduced disparities. Using analyses of nationally representative data and based on evaluations of major policy reforms, I will show that these reforms have in fact not reduced disparities in mental health treatment are one of multiple causes of the disproportionate severity and persistence among Latinx and Black communities. To inform equity-improving interventions, I present quantitative and qualitative data on the impact of preventative efforts linking criminal justice and mental health services, community perspectives on how to overcome obstacles to mental health, and the importance of peer specialists and fully integrated screening and wraparound services to improving treatment for communities of color.

Learning Objectives:

- 1. Identify racial and ethnic inequities in behavioral health and service use
- 2. Understand systemic factors that contribute to and perpetuate racial and ethnic inequities.
- 3. List and evaluate reforms within and outside of the healthcare system that will lead towards a more equitable community-based mental health treatment system.

References:

- 1. Cook B, McGuire T, Zaslavsky A. Measuring racial/ethnic disparities in health care: methods and practical issues, Health Services Research. 2012; 47(3pt2): 1232-1254.
- Slopen N, Cook BL, Morgan JW, Flores MW, Mateo C, Carcia Coll C, Acevedo Garcia D, Priest N, Wethington E, Krumholz S, Williams DR. Family Stressors and Resources as Social Determinants of Health among Caregivers and Young Children 2022, 9, 452. https://doi.org/10.3390/children9040452
- 3. Creedon T., Cook B. Access to mental health care increased but not for substance use, while disparities remain. Health Affairs. 2016; 35(6): 1017-1021.
- Cook BL, Flores M, Zuvekas SH, Newhouse JP, Hsu J, Sonik RA, Lee E, Fung V. The impact of mentalhealth cost-sharing parity in Medicare on use of behavioral health care services. Health Affairs. 2020;
- 5. Sonik R, Creedon T, Progovac AM, Carson N, Delman J, Delman D, Health Equity Consortium, Cook BL. Depression Treatment Preferences by Race/Ethnicity and Gender and Associations between Past Healthcare Discrimination Experiences and Present Preferences in a Nationally Representative Sample. Social Science & Amp; Medicine, 2020; 253:112939.