Abstracts of NIDILRR grantee publications indexed in the REHABDATA Database with a focus on minority mental health.

This search was completed on July 10th, 2018. The search was limited to abstracts with one or more project numbers. Search terms are included in each section. Some abstracts may appear in more than one search. Some articles may be available for document delivery for a small fee. To learn more, contact an information specialist at 800/346-2742 or naricinfo@heitechservices.com.

- Mental Health
- Psychiatric Disabilities
- Behavioral Health/Behavioral Disabilities

“A Mental Health” and (African or Asian or native or Indian or latino or Hispanic or immigrant or refugee or minority)

1 of 90.


NARIC Accession Number: J78132.
Author(s): Kitcheyan, Cassie; Sanderson, Priscilla R.; Rosen-Reynoso, Myra; Sotnik, Paula.
Publication Year: 2017.
Number of Pages: 8.
Abstract: Study examined the perceptions of faculty and staff members employed at a tribal college regarding disability and historical trauma. Specifically, the authors sought to (1) gain insight into respondents’ concepts of disability and types of accommodations requested, and (2) determine respondents’ understanding of historical trauma among Native Americans and its role in the students’ educational experiences. Eleven participants completed an open-ended questionnaire related to disability, student accommodations, and historical trauma. Five novel themes emerged, including minimal disability knowledge, unidentified mental health issues, limited accommodations for students, recognition of historical trauma, and variation in understanding historical trauma. In response to these results, the authors call for enhanced collaboration between educators and rehabilitation counselors beginning in high school, and additional counselor outreach to Native American students. They also note the need for future research that will help to identify best practices for supporting such students with disabilities in their educational pursuits.

Project Number: H133B130023.
Can this document be ordered through NARIC's document delivery service?: Y

2 of 90.

Correlates of co-occurring diabetes and obesity among community mental health program members with serious mental illnesses. Psychiatric Services (formerly Hospital and Community Psychiatry), Volume 67(11), Pgs. 1269-1271.

NARIC Accession Number: J74905.
Author(s): Cook, Judith A.; Razzano, Lisa; Jonikas, Jessica A.; Swarbrick, Margaret A.; Steigman, Pamela J.; Hamilton, Marie M.; Carter, Tina M.; Santos, Alberto B..
Publication Year: 2016.
Number of Pages: 3.
Abstract: Study examined the prevalence and correlates of co-occurring obesity and diabetes among community mental health program members with serious mental illnesses (SMI). Medical screenings of 457 adults with SMI were conducted by researchers and peer wellness specialists in four states (Georgia, Illinois, Maryland, and New Jersey). Body mass index was measured directly. Diabetes was assessed via glycosylated hemoglobin and interview self-report. Multivariable logistic regression analysis examined associations with known predictors. Results showed that 59 percent of the participants were obese, 25 percent had diabetes, and 19 percent had both conditions. When gender, diagnosis, and site were controlled, co-occurring diabetes and obesity was almost three times as likely among African Americans as among participants from other racial groups and half as likely among smokers as among nonsmokers. Older adults and those with poorer self-rated physical health also were more likely to have these co-occurring conditions. Results support the need for culturally competent treatment and for smoking cessation options with sensitivity to the potential for weight gain.
3 of 90.

Predicting employment in the mental health treatment study: Do client factors matter?.

**NARIC Accession Number:** J74783.

**Author(s):** Metcalfe, Justin D.; Drake, Robert E.; Bond, Gary R.

**Publication Year:** 2016.

**Number of Pages:** 9.

**Abstract:** Study examined a battery of potential client predictors of competitive employment, testing the hypothesis that evidence-based supported employment would mitigate the negative effects of poor work history, uncontrolled symptoms, substance abuse, and other client factors. In a secondary analysis of 2,055 unemployed Social Security Disability Insurance beneficiaries with schizophrenia or affective disorders, 20 baseline client factors were examined as predictors of competitive employment. The analysis used logistic regression to identify significant client predictors and then examined interactions between significant predictors and receipt of individual placement and support supported employment. Results indicated that work history was a strong predictor of employment, and other client measures (fewer years on disability rolls, Hispanic ethnicity, and fewer physical health problems) were modestly predictive. Evidence-based supported employment mitigated negative client factors, including poor work history. Participants with a poor work history benefitted from supported employment even more than those with a recent work experience. Factors commonly considered barriers to employment, such as diagnosis, substance use, hospitalization history, and misconceptions about disability benefits, were not significant.

4 of 90.

Acceptance of mental illness: Promoting recovery among culturally diverse groups.

**NARIC Accession Number:** R09405.

**Author(s):** Mizock, Lauren; Russinova, Zlatka.

**Publication Year:** 2016.

**Number of Pages:** 208.

**Abstract:** This book focuses on how people with serious mental illnesses (i.e., schizophrenia, bipolar disorder, severe depression) come to recognize and cope with the symptoms of a mental illness in order to promote recovery. Per the recovery movement in mental health, recovery is understood as not simply symptom elimination, but the process of living a meaningful and satisfying life in the face of mental illness. The book synthesizes research to provide educators, clinicians, researchers, and consumers with an understanding of the multidimensional process of acceptance of mental illness in order to support people across culturally diverse groups. Chapters focus on providing a historical overview of the treatment of people with mental illness, examining the acceptance process, and exploring the experience of acceptance among women, men, racial-ethnic minorities, and LGBT (lesbian, gay, bisexual, and transgender) individuals with serious mental illnesses. The book is a useful tool for mental health educators and providers, with each chapter containing case studies, clinical strategies lists, discussion questions, experiential activities, diagrams, and worksheets that can be completed with clients, students, and peers.

5 of 90.

Focal point: Early psychosis intervention.

**NARIC Accession Number:** O20197.

**Author(s):** Ossowski, John D.; Brennan, Eileen (Eds.).

**Publication Year:** 2016.

**Number of Pages:** 32.

**Abstract:** This issue explores early psychosis intervention services, which may prevent much of the trauma and disability associated with psychosis. Topics include: the evolution of early psychosis research and treatment, internationally and in the United States (US); experiences of young adult leaders and family members illustrate the importance of the Early Assessment and Support Alliance (EASA), the first implementation of early psychosis intervention in the US public mental health system; research that highlights the importance of family and culture in help-seeking during first episode psychosis; efforts to ensure and measure the quality and effectiveness of first episode psychosis services; and some of the effective strategies emerging in the early psychosis field, including cognitive behavioral therapy, the individual placement and support approach to employment and education, and the
role of sensory preferences from an occupational therapy perspective.

**Project Number:** H133B140039.
**Can this document be ordered through NARIC's document delivery service?:** Y

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**Adapting supported employment for emerging adults with serious mental health conditions.**


**NARIC Accession Number:** J71287.
**Author(s):** Ellison, Marsha; Kłodnick, Vanessa V.; Bond, Gary R.; Krzos, Izabela M.; Kaiser, Susan M.; Fagan, Marc A.; Davis, Maryann.
**Publication Year:** 2015.
**Number of Pages:** 17.

**Abstract:** Study examined the feasibility of an adaptation of Individual Placement and Support (IPS) supported employment, an evidence-based adult mental health service, for use with early emerging adults (ages 16 to 21) with serious mental health conditions (SMHCs). The IPS model was adapted for this population by integrating it with components of supported education, peer mentorship, and career development and its feasibility was tested in a psychiatric treatment program for early-emerging adults. Participants were 17 to 20 years old. Most were African American, under the custody of the state, with a primary mood disorder diagnosis. This feasibility study tracked the model's development, recruitment, and retention and tracked vocational and educational outcomes for 12 months. Model refinement resulted in the development of a separate educational specialist position, greater integration of the peer mentor with the vocational team, and further specification of the role of peer mentor. There was an 80-percent retention rate in the feasibility evaluation. The adapted model resulted in positive employment and/or education outcomes for nearly half of participants. Of the 35 participants, 49 percent started a job and/or enrolled in an education program over the 12-month period.

**Project Number:** H133B090018.
**Can this document be ordered through NARIC's document delivery service?:** Y

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**Meeting the transition needs of urban American Indian/Alaska Native youth through culturally based services.**


**NARIC Accession Number:** J71286.
**Author(s):** Friesen, Barbara J.; Cross, Terry L.; Jivanjee, Pauline; Thirstrup, Ashley; Bandurraga, Abby; Gowen, L. K.; Rountree, Jen.
**Publication Year:** 2015.
**Number of Pages:** 15.

**Abstract:** Article presents the findings from three qualitative studies that explored the needs of American Indian/Alaska Native (AI/AN) youth transitioning to adulthood and examined the culturally based approaches and resources that addressed those needs. Community-based participatory methods were employed through a research partnership involving a culturally based community agency, the Native American Youth and Family Center (NAYA), the National Indian Child Welfare Association, and Portland State University. The studies utilized a relational worldview (RWV) framework, where well-being is understood as a balance among the domains of mind, body, spirit, and context. Collectively, findings demonstrate that NAYA employs culturally grounded interventions to overcome the traumatic histories and current oppressive conditions affecting low-income urban AI/AN youth with mental health challenges and to support their well-being and transition to adulthood. In addition, addressing the mental health and well-being of AI/AN youth in culturally appropriate ways involves consideration of all RWV domains. Recommendations for behavioral health practice are to connect AI/AN youth to culturally specific services whenever possible, utilize cultural consultants, and implement holistic and positive approaches to mental health.

**Project Number:** H133B090019; H133B140039.
**Can this document be ordered through NARIC's document delivery service?:** Y

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**Racial and ethnic disparities among adults with intellectual and developmental disabilities.**

**NARIC Accession Number:** O20094.
**Author(s):** Magana, Sandra; Parish, Susan; Moreles, Miguel A.; Li, Henan; Fujiura, Glenn T..
**Publication Year:** 2015.
**Number of Pages:** 5.

**Abstract:** Study investigated the extent of racial and ethnic disparities in the health of adults with intellectual and developmental disabilities (IDD). Data from the 2002-2011 Medical Expenditure Panel Survey and the 2000-2010 National Health Interview Survey were analyzed. Results indicated that Black and Latino adults with IDD were
significantly more likely to be in fair or poor health and mental health than White adults with IDD or those without IDD within their racial and ethnic groups.

Project Number: H133B130007.

Can this document be ordered through NARIC's document delivery service?: Y

9 of 90.

Focal point: Trauma-informed care.

NARIC Accession Number: O19998.
Author(s): Ossowski, John D.; Brennan, Eileen (Eds.).
Publication Year: 2015.
Number of Pages: 40.
Abstract: This journal issue describes innovations in care for young people who have experienced trauma. Topics include: healing through artistic expressions of trauma; neurobiological underpinnings for trauma-informed care; data trends: the ability of the body to help reduce adolescents trauma symptoms; the impact of toxic stress on the developing person becoming a trauma-informed service provider; challenges and considerations in services for transition-age youth with histories of developmental trauma; the trauma of racism in communities of color; trauma-informed method of engagement for youth advocacy; emerging policies to promote and support trauma-informed care; the Substance Abuse and Mental Health Services Administration's concept of trauma and guidance for a trauma-informed approach in youth settings; and creating organizations that address the needs of youth, families, and staff who have experienced trauma.

Project Number: H133B090019; H133B140039.
Can this document be ordered through NARIC's document delivery service?: Y

Factors associated with co-occurring medical conditions among adults with serious mental disorders.


NARIC Accession Number: J73466.
Author(s): Razzano, Lisa A.; Cook, Judith A.; Yost, Chantelle; Jonikas, Jessica A.; Swarbrick, Margaret A.; Carter, Tina M.; Santos, Alberto.
Publication Year: 2015.
Number of Pages: 7.
Abstract: Study examined the prevalence and treatment of 17 co-occurring physical health conditions among adults with serious mental health disorders, and identified factors associated with prevalence of the 5 most common medical comorbidities. Data were collected from 457 adults attending publicly funded mental health programs who participated in community health screenings held in 4 states. Face-to-face interviews included standardized items from the National Health Interview Survey and the National Health and Nutrition Examination Survey. Ordinary least squares regression analysis examined associations between prevalence of the 5 most common comorbid conditions and respondents' demographic, clinical, attitudinal, and health insurance statuses. Compared to the United States general population, prevalence was significantly higher for 14 out of 17 medical conditions assessed. The 5 most common were hyperlipidemia, hypertension, asthma, arthritis, and diabetes. Controlling for age, study site, and Medicaid status, racial/ethnic minorities were almost twice as likely as Caucasians to be diagnosed with hypertension and diabetes; women were almost twice as likely as men to be diagnosed with diabetes; and people with schizophrenia were around half as likely as those with other disorders to be diagnosed with hypertension and arthritis. Age was positively related to all conditions except asthma. Treatment prevalence was below 70 percent for approximately half of ongoing conditions. These results suggest a high level of medical vulnerability and need for coordination of health and mental health services in this population. Associations with age, minority status, and gender point to the need for targeted health care strategies.

Project Number: H133B100028.
Can this document be ordered through NARIC's document delivery service?: Y

Assessing recovery-promoting competencies of providers serving Latinos with serious mental illnesses.

NARIC Accession Number: J74085.
Author(s): Rogers, E. Sally; Russinova, Zlatka; Maru, Mihoko; Restrepo-Toro, Maria E.; Cook, Karon F.; Rogers, James.
Publication Year: 2015.
Number of Pages: 19.
Abstract: The purpose of this study was to culturally adapt an instrument that assesses the competencies of mental health and rehabilitation providers to promote the recovery of Latina/o mental health clients. The authors began with Recovery-Promoting Relationships Scale (RPRS), an instrument that was developed and validated for English-speaking clients and that assesses providers’ ability to promote recovery from the perspective of clients themselves. They obtained data from Latina/o mental health clients through focus groups, refined original items, developed new items, and subjected them to psychometric examination with 318 Latina/o mental health clients. Properties of the resulting 24-item Spanish version of the RPRS demonstrated acceptable reliability and validity and comprised 2 subscales that assess providers’ competencies to maintain a therapeutic alliance and strategies to enhance clients’ recovery process. This study successfully adapted a scale that assesses various aspects of the relationship between mental health providers and their clients. This scale is one of few that has been developed and tested with careful attention to cultural appropriateness.

Project Number: H133G060071.
Can this document be ordered through NARIC's document delivery service?: Y

Abstract: Study examined the lived experiences of 3 urban, low-income, African American mothers diagnosed with serious mental illnesses (SMI). Ethnographic observations and informal interviews were conducted over 12 months with the mothers and their children. Data were analyzed using a case study approach to identify prominent themes, perspectives, and experiences within and across participating families. Five themes emerged to characterize the lived experiences of African American mothers with SMI: (1) mental illness and mental health services are not a prominent focus in everyday life; (2) families live in a context of ubiquitous violence, loss, and everyday stress; (3) family life is the main focus for mothers as they strive for a better life; (4) mothers have limited social support; and (5) religion is a source of meaning and a resource for the everyday work of recovery. The findings suggest that rehabilitative efforts tailored for this population should not focus on, or reside in, professional mental health services. Meaningful rehabilitative strategies for families might include supported employment, social support, youth mentoring, faith-based supports, and community-based antiviolence efforts.

Project Number: H133A080063.
Can this document be ordered through NARIC's document delivery service?: Y

Abstract: Study determined Medicaid disenrollment rates and identified risk factors among young adults after discharge from inpatient psychiatric treatment. Participants included 1,176 Medicaid-enrolled young adults, ages 18 to 26, discharged from inpatient psychiatric care. Medicaid disenrollment in the 365 days after discharge and disenrollment predictors from the 180-day pre-discharge period (antecedent period) were identified from administrative records. Classification and regression tree and probit regression analysis were used. Results showed that 32 percent of the sample was disenrolled from Medicaid within a year of discharge. Both analytical approaches converged on four main risk factors: being in the Medicaid enrollment category for persons with a nondisabled low-income parent or for a child in a low-income household, being age 18 or 20 at discharge, having a Medicaid enrollment gap in the antecedent period, and having no primary care utilization in the antecedent period. For the 48 percent of the sample continuously enrolled in the antecedent period who were in the enrollment categories for disabled adults or foster care children, the disenrollment rate was 13 percent. Findings indicate that a substantial minority of Medicaid-enrolled young adults discharged from inpatient care were disenrolled from Medicaid within a year. About half the sample had a low disenrollment risk, but the other half was at substantial risk. Risk factors largely reflected legal status changes that occur among these transition-age youths. Identifying inpatients at high risk of disenrollment and ensuring continuous coverage should improve access to needed post-discharge supports.

Project Number: H133B090018.
Can this document be ordered through NARIC's document delivery service?: Y
Appealing features of vocational support services for Hispanic and non-Hispanic transition age youth and young adults with serious mental health conditions. Journal of Behavioral Health Services & Research

NARIC Accession Number: J69054.
Author(s): Torres Stone, Rosalie A.; Delman, Jonathan; McKay, Colleen E.; Smith, Lisa M..
Publication Year: 2014.
Number of Pages: 14.
Abstract: Study examined the experiences and general vocational needs of transition age youth and young adults (TAYYAs) diagnosed with serious mental health conditions (SMHCs). In-person, qualitative interviews were conducted with 57 non-Hispanic and Hispanic TAYYAs with SMHCs enrolled in three vocational support programs in Massachusetts: vocational rehabilitation, individual placement and support; and the clubhouse model. Six themes emerged from the data: three themes were identified as social capital (supportive relationships, readily available workplace supports, and vocational preparation), two themes related to human capital (effective educational supports and work experience), and one theme related to cultural capital (social skills training). Unique features (Spanish-speaking staff and/or familiar in Latino culture, familial-like staff support) were frequently noted by Hispanic TAYYAs.
Project Number: H133B090018.
Can this document be ordered through NARIC’s document delivery service?: Y

17 of 90.
Project empowerment e-newsletter: February 20, 2013.

NARIC Accession Number: O19176.
Author(s): Bourdon, Jessica; Gary, Kelli W. (Eds.).
Publication Year: 2013.
Number of Pages: 7.
Abstract: Newsletter provides updates on the research and activities of Project Empowerment, aimed at identifying and evaluating current practice and methods in the area of minority disability research. In this issue: ask the expert: Dr. Keith Wilson; getting to know Dr. Paul Leung; webcasts; stories making news; a research summary; and research-to-action notes on disparities in unmet need for mental health services in the United States; 1997-2010.

Project Number: H133A080060.
Can this document be ordered through NARIC’s document delivery service?: Y

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NARIC Accession Number: J68436.
Author(s): Carpenter-Song, Elizabeth; Whitley, Rob.
Publication Year: 2013.
Number of Pages: 19.
Abstract: This article examines a federally funded research and training collaboration between an Ivy League psychiatric research center and a historically Black university and medical center. This collaboration focuses on issues of psychiatric recovery and rehabilitation among African Americans. In addition, this multidisciplinary collaboration aims to build the research capacity at both institutions and to contribute to the tradition of research in culture and mental health within the medical social sciences and cultural psychiatry. Taking an auto-ethnographic approach, the authors illustrate how collaborative relationships unfold and are constructed through ongoing reciprocal flows of knowledge and experience. Central to this aim is a consideration of how issues of power, privilege, and the hidden transcript of race shape the nature of research and training efforts.

Project Number: H133A080063.
Can this document be ordered through NARIC’s document delivery service?: Y

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Methods for translating evidence-based behavioral interventions for health-disparity communities.  Preventing Chronic Disease

NARIC Accession Number: J72636.
Author(s): Napoles, Anna M.; Santoyo-Olsson, Jasmine; Stewart, Anita L..
Publication Year: 2013.
Number of Pages: 12.
Abstract: Article describes specific methodological guidelines for disseminating and implementing evidence-based behavioral interventions to reach individuals from health-disparity populations. Seven methodological phases are described: (1) establish infrastructure for translation partnership, (2) identify multiple inputs (information gathering), (3) review and distill information (synthesis), (4) adapt and integrate program components (translation), (5) build general and specific capacity (support system), (6) implement intervention (delivery system), and (7) develop appropriate designs and measures (evaluation). For each phase, the authors describe specific methodological steps and resources and provide examples from research on racial/ethnic minorities, disabled persons, and those with low socioeconomic status. The methods focus on how to incorporate adaptations so that programs fit new community contexts, meet the needs of individuals in health-disparity populations, capitalize on scientific evidence, and use and build community assets and resources.

Project Number: H133B080002.
Can this document be ordered through NARIC’s document delivery service?: Y

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NARIC Accession Number: J66139.
This chapter examines the social and cultural roots and implications of current concepts of recovery. During the last decade the term "recovery" has come to refer to a social movement promoting a reorientation in psychiatric care, toward ensuring that individuals can live a full life in their communities. Along with this reorientation, recovery is increasingly conceived of as a process, rather than an outcome, with individuals described as "being in recovery" rather than as "recovering from" an affliction. The new recovery "movement", with its roots in civil rights and independent living movements, arose in part as a reaction to perceived attitudes of pessimism and paternalism inherent in conventional psychiatric care. It envisions for individuals with mental illness a reassertion of their rights to a dignified and meaningful life in the community and a renewed sense of agency, with an active say in the direction of their own healthcare. Although sometimes framed in the universalistic language of human rights, recovery is rooted in specific cultural concepts of self and personhood. In particular, cultural notions of the person's connection to family, community, and spirituality play a key role in local notions of recovery. This is illustrated with examples from qualitative research with African-Americans in the United States, indigenous peoples in Canada, and patients in Nigeria. Understanding the cultural and historical roots of recovery provides a framework for considering the relevance of recovery for diverse cultural groups, both within North American and European societies and in other parts of the world.

Project Number: H133A080063.
Can this document be ordered through NARIC's document delivery service?: Y

"Right here is an oasis": How "recovery communities" contribute to recovery for people with serious mental illnesses. Psychiatric Rehabilitation Journal (formerly Psychosocial Rehabilitation Journal), Volume 35(6), Pgs. 435-440.

NARIC Accession Number: J65316.
Author(s): Carpenter-Song, Elizabeth; Hipolito, Maria M. S.; Whitley, Rob.
Publication Year: 2012.
Number of Pages: 6.
Abstract: Article reports findings from a study that examined the influence of stable housing on recovery within intentional communities of people living with severe mental illnesses in Washington, DC. These housing configurations were labeled "recovery communities" (RCs). Most residents of the RCs were female and African American. Focus groups were conducted with RC residents at 4-month intervals to inquire into day-to-day life in the communities. The focus group transcripts were reviewed and thematic analysis was conducted to identify features of the contextual environment of RCs that contribute to recovery. Thematic analysis yielded three contextual domains that contributed to participants' subjective sense of recovery: (1) service environment, (2) physical environment, and (3) social environment. RCs are embedded in a complementary service system; the physical environment provides a refuge from homelessness, drug activity, and violence; and the social environment offers a place to belong amid peer-support for mental health and sobriety. Findings suggest the need for recovery-oriented services to be holistic and prepared to address multiple, complex needs that include clinical efforts to reduce psychiatric symptomatology, substance use, and the impact of trauma.
Project Number: H133A080063.
Can this document be ordered through NARIC's document delivery service?: Y


NARIC Accession Number: J63954.
Author(s): Crawford, Kermit A.; Bennasar, Mari C.; Mizock, Lauren M. B..
Publication Year: 2012.
Number of Pages: 13.
Abstract: This chapter offers suggestions for the behavioral health response model aimed at decreasing outcome disparities for racial, ethnic, and cultural minority groups in the aftermath of disaster. There is a growing body of research documenting disparities and a correspondingly smaller amount of research on ways to mitigate and/or eliminate disparities in this area. The authors view the emerging literature on cultural competence as an important component for decreasing disparities through more effective use of models of behavioral health disaster response. While the two primary models of cultural competence are important, represent significant progress, and are widely recognized, they remain more conceptual than practical. The authors suggest ways to move the "technology" of
behavioral health disaster response forward with more effective implementation of the cultural competence approach. This approach integrates a disciplined process with a set of principles, identified in cultural competence guidelines, that will enhance the given intervention models and approaches. It is hoped that this approach, based on literature and multiple response experiences by the authors, will lead to significant reductions and/or elimination of outcome disparities for racial, ethnic, and cultural minority groups.

Project Number: H133B090014.
Can this document be ordered through NARIC’s document delivery service?: N

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More than a nice thing to do: Using practice-based evidence for outcome evaluation in native youth programs.

NARIC Accession Number: O19260.
Author(s): Cross, Terry.
Publication Year: 2012.
Abstract: Webinar describes the activities and results of a practice-based evidence project, a ten-year collaborative effort between the Native American Youth and Family Center (NAYA), National Indian Child Welfare Association (NICWA), and the Research and Training Center on Family Support and Children's Mental Health. The purpose of the project is to develop strategies for measuring and documenting the effectiveness of NAYA's services; to develop a process for evaluating known “good outcomes” of community-based agencies and programs; and to enhance the transition to adulthood experience of American Indian and Alaska Native youth. Two tools developed by the project, the NAYA Assessment Tool (NAT) and the NAYA Outcomes Planning Protocol are explained. Run time: 1 hour 50 seconds.

Project Number: H133B090019.
Can this document be ordered through NARIC’s document delivery service?: N

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NARIC Accession Number: J65386.
Author(s): Hipolito, Maria M. S.; Malik, Mansoor; Carpenter-Song, Elizabeth; Whitley, Rob.
Publication Year: 2012.
Number of Pages: 4.
Abstract: Article describes a week-long summer course designed to provide training for psychiatry residents, clinicians, and researchers on key issues in African American mental health treatment and research. Minorities are underrepresented as providers, researchers, and as administrators and policymakers in mental health services. The Summer School, through the collaborative efforts between Dartmouth Psychiatric Research Center and Howard University, is intended to narrow this gap and enhance the pipeline supply of underrepresented minorities in the field of psychiatric research. The Dartmouth-Howard Collaboration provides a model for a feasible training program that imparts knowledge regarding culture and mental health, and the conduct of mental health research, with particular attention to African American mental health. Participants' questionnaire rating responses indicated that their experience in the Summer School program enhanced their understanding and experience in dealing with minority, largely African American patients and the diverse factors that affect their treatment.

Project Number: H133A080063.
Can this document be ordered through NARIC’s document delivery service?: Y

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African Americans & stroke: Caregivers. Points of Empowerment, Volume 9

NARIC Accession Number: O18851.
Author(s): Miller, Jessica.
Publication Year: 2012.
Number of Pages: 2.
Abstract: Fact sheet provides information for African Americans caregivers of stroke survivors. It discusses the physical and mental health complications associated with caregiving, interventions designed to ease this burden, and how and where to get additional help.

Project Number: H133A080060.
Can this document be ordered through NARIC’s document delivery service?: Y

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Religious competence as cultural competence. Transcultural Psychiatry, Volume 49(2), Pgs. 245-260.
Article examines the relationship between religion and psychiatry and the implications for the notion of religious competence as a component of clinical cultural competence. Definitions of cultural competence often refer to the need to be aware and attentive to the religious and spiritual needs and orientations of patients. However, the institution of psychiatry maintains an ambivalent attitude to the incorporation of religion and spirituality into psychiatric practice. This is despite the fact that many patients, especially those from underserved and underprivileged minority backgrounds, are devotedly religious and find much solace and support in their religiosity. The author uses the case of mental health of African Americans as an extended example to support the argument that psychiatric services must become more closely attuned to religious matters and suggests ways in which this can be achieved. Attention to religion can aid in the development of culturally competent and accessible services, which in turn, may increase engagement and service satisfaction among religious populations.

Project Number: H133A080063.

Can this document be ordered through NARIC's document delivery service?: Y

Family involvement in transition to adulthood.

Presenters from various backgrounds (family members, service providers, and researchers) share their perspectives on how to involve services and families in ways that are preferred by youth and young adults with disabilities. Ideas and tips for how to navigate conflicts between youth and family, information about family support organizations, and a better understanding of the family journey are also provided. Discussion explains the developmental, legal, and confidentiality issues that affect young people; the balancing act between families and providers; the role of mentors and adult allies; and the strengths and needs of diverse families. Run time: 1 hour.

Project Number: H133B090019.

Can this document be ordered through NARIC's document delivery service?: N

Defining youth success using culturally appropriate community-based participatory research methods.

Article describes the development of a culturally grounded method for measuring outcomes and demonstrating the effectiveness of culturally specific services for Native American youth. This method was developed out of a community-based participatory research project involving Native elders, families, youth, and community partners, as well as the board, staff, and management of an agency serving an urban American Indian community. Through a series of focus groups, community members defined success for Native youth. Responses were analyzed using the four quadrants of the Relational Worldview model, an indigenous way of understanding life from a concept of wholeness and balance as a framework. The use of focus groups in this context and the cultural adaptations necessary both in conducting the groups and in the analysis of the data are described. Focus group results and next steps in the development of a practice-based approach to demonstrating the effectiveness of culturally specific services are summarized. Findings illustrate the need to broaden definitions of success used to guide the development and evaluation of effective services beyond those usually used to identify evidence-based practices, as well as the importance attached to Native youth gaining spiritual understanding and knowledge and skills in traditional cultural practices as essential elements of achieving community-defined outcomes.

Project Number: H133B040038; H133B090019.

Can this document be ordered through NARIC's document delivery service?: Y

Do racial and ethnic minority patients fare worse after SCI? A critical review of the literature.

Findings illustrate the need to broaden definitions of success used to guide the development and evaluation of effective services beyond those usually used to identify evidence-based practices, as well as the importance attached to Native youth gaining spiritual understanding and knowledge and skills in traditional cultural practices as essential elements of achieving community-defined outcomes.
This literature review examined studies specifically investigating racial and ethnic disparities in spinal cord injury (SCI) care, services, and outcomes. Goals of the study were to explore possible causative factors that may explain these disparities; propose strategies that may reduce disparities and improve access, service, and outcomes for minority patients with SCI; and generate ideas for future research in this area. A search using MEDLINE/PubMed, PsycINFO, CINAHL, and HealthSource resulted in 49 articles discussing hospital, mental health, physical functioning, employment, quality of life, and family outcomes. Results indicated that after an SCI, racial and ethnic minority groups have shorter hospital lengths of stay, higher rehospitalization rates, higher levels of depression, more days in poor health, greater degrees of unemployment, more difficulties with mobility, lower self-reported subjective well-being and quality of life and life satisfaction, and greater risk of marital breakup. A variety of causative factors, intervention strategies, and directions for future research are presented.

Can this document be ordered through NARIC's document delivery service?: Y
Appealing features of vocational supports for Latino & non-Latino transition age youth & young adult consumers: Study goals and methods.

NARIC Accession Number: O18354.
Author(s): Torres Stone, R.
Publication Year: 2011.
Number of Pages: 1.
Abstract: This study will interview Latino and non-Latino transition aged youth and young adults about current or past employment supports through clubhouses, individual placement and support programs, or standard state vocational rehabilitation services in Massachusetts. These interviews will address potential barriers and facilitators to the appeal of and retention in employment support services by focusing on the participants’ narratives of their personal experiences with the program. Knowledge gained through this study will provide information for the design of developmentally and culturally informed vocational support programs that will more effectively target at risk youth and young adults with a serious mental health condition.


NARIC Accession Number: J65584.
Author(s): Whitley, Rob; Rousseau, Cecile; Carpenter-Song, Elizabeth; Kirmayer, Laurence J.
Publication Year: 2011.
Number of Pages: 9.
Abstract: Article examines the practice of evidence-based medicine (EBM) in Canadian psychiatry in the context of social and cultural diversity. The authors begin by defining EBM, describing its historical development and current ascendancy in medical practice, and note its importance in contemporary psychiatry, comparing dynamics between the United States and Canada. Next, they offer a constructive critique of the application of EBM and evidence-based practices in the context of ethnocultural diversity, as one consistent reflection on the EBM literature is that it is does not adequately address issues of diversity. Finally, the authors critically examine the following 6 issues related to the practice of EBM in a diverse society: (1) generalizability and transferability of evidence-based interventions; (2) diversifying standards of evidence in EBM; (3) strategies to address diversity in EBM research; (4) cultural adaptations of evidence-based interventions; (5) integrating idiographic knowledge; and (6) training and health service delivery. Research and practice suggestions are offered that may address outstanding challenges regarding the practice of EBM in a diverse society. These include a need for more effectiveness research, more openness to diverse sources of knowledge, better integration of idiographic and nomothetic knowledge, and a critical approach to extrapolation and transfer of knowledge.


NARIC Accession Number: J65383.
Author(s): Yanez, Betina; Thomapson, Elizabth H.; Stanton, Annette L.
Publication Year: 2011.
Number of Pages: 17.
Abstract: A systematic review of the breast cancer literature was conducted among studies that compared mental, physical, social, or sexual quality of life (QOL) between Latinas and women of other racial/ethnic groups. Of the 375 studies identified, 20 quantitative studies and two qualitative studies met criteria for inclusion. Results indicated that Latinas were more likely to report poor mental, physical, and social QOL, relative to non-Latinas. Only four studies assessed sexual QOL, making it difficult to draw any conclusions. Of the four QOL domains, the largest disparity was found in the area of mental health in which Latinas reported poorer QOL than non-Latinas on all measures (6 studies) or reported mixed findings in which Latinas generally demonstrated significantly worse QOL on most, but not all, measures (12 studies) included in the study. Explanatory mechanisms including socio-demographic, treatment-related, and culturally relevant factors are discussed. Implications for research design, measurement, and clinical work are also included. Understanding ethnic differences in QOL among breast cancer survivors can inform interventions targeted at improving health status for Latinas.
Increasing utilization: Strategies for engaging culturally/racially diverse children and their families in mental health services.

**NARIC Accession Number:** O17978.

**Author(s):** Burrus, Thomas; Mowery, Debra; Callejas, Linda M.; Nesman, Teresa; Hernandez, Mario.

**Publication Year:** 2010.

**Number of Pages:** 56.

**Abstract:** This monograph aims to increase awareness of the impact of culture on the utilization of mental health services and to provide field-based examples of strategies that can increase utilization for culturally/racially diverse children and families. The information provided will assist providers, policymakers, and community representatives in understanding factors related to engagement and compliance as well as strategies that can improve all aspects of utilization by culturally/racially diverse children and their families. Utilization of services is presented here in the context of the community and the organizational infrastructure through which services are delivered for specific populations of focus: African American, Asian and Pacific Islander, Latino, and Native American. Utilization by diverse children and families is linked to the level of compatibility between service delivery, population characteristics, and organizational characteristics. Strategies linked to increased utilization in the literature include providing culturally/linguistically appropriate reminder calls for appointments, addressing transportation needs, and tracking utilization rates across cultural/racial groups.

**Project Number:** H133B040024.

**Can this document be ordered through NARIC’s document delivery service?** Y

Literature support for outcomes used to evaluate culturally- and community-based programs: Indicators of success for urban American Indian/Alaska Native youth: An agency example.

**NARIC Accession Number:** O18254.

**Author(s):** Friesen, B. J.; Gowen, L. K.; Lo, P.; Bandurraga, A.; Cross, T. L.; Matthew, C..

**Publication Year:** 2010.

**Number of Pages:** 19.

**Abstract:** This literature review identifies the relationships between community-identified variables relating to well-being for American Indian/Alaska Native (AI/AN) youth and more mainstream outcomes. This review is one product of a community based participatory research project at a community organization providing culturally specific services to urban AI/AN youth. Through several focus groups, program participants, providers, youth, parents, elders, staff members, and other stakeholders met with researchers to define what success and well-being look like for urban AI/AN youth. Through this process, a number of community-defined indicators of success were derived. Many of these indicators, such as lower depression, lower alcohol use and increased school belongingness, are areas that have acceptance, and a strong evidence base in the mainstream research community. In addition to these, focus group members also identified eight indicators of success that were highly valued by this urban Indian community, but are not widely acknowledged in research and policies addressing evidence-based practices. These are: community mindedness, conflict resolution, cultural identity, hope, perceived discrimination, positive relationship with an adult, school belongingness, and spirituality. A review of the research literature was conducted to examine possible links between each of the eight intermediate, value-based variables and indicators of youth well-being that have been studied as outcome variables in published research.

**Project Number:** H133B090019.

**Can this document be ordered through NARIC’s document delivery service?** Y

Perceptions of psychiatric services held by African-American male veterans. Points of Empowerment, Volume 4

**NARIC Accession Number:** O18181.

**Author(s):** Gary, Kelli W.

**Publication Year:** 2010.

**Number of Pages:** 2.

**Abstract:** Fact sheet provides data concerning the perceptions held by African American male veterans about psychiatric services. Discussion includes socio-cultural and system-level barriers, and recommendations for future research and practice.
Perceptions of psychiatric services held by older African-American males. Points of Empowerment, Volume 3

NARIC Accession Number: O18180.
Author(s): Gary, Kelli W.
Publication Year: 2010.
Number of Pages: 2.
Abstract: Fact sheet provides data concerning the perceptions held by older African American male adults about psychiatric services. Discussion includes sources of referral for mental health services; cultural, access, and system-level barriers, and recommendations for future research and practice.


NARIC Accession Number: J59690.
Author(s): Jonikas, Jessica A.; Kiosk, Stephen; Grey, Dennis D.; Hamilton, Marie M.; McNulty, James; Cook, Judith A..
Publication Year: 2010.
Number of Pages: 9.
Abstract: Study explored perceptions of adults with psychiatric disabilities regarding cultural competency of peer-run mental health support groups and programs. Participants were recruited via mental health list-servs, web sites, newsletters, emails, and word of mouth to complete an online survey. A total of 527 participants were surveyed about cultural competency barriers facing peer-run programs; common reasons for not using peer services; and strategies to engage diverse communities. Results showed that both multicultural and Caucasian respondents agreed that lack of funding and staff education about diversity were barriers to cultural competency in peer programs. Multicultural respondents were more likely than whites to feel that both the recognition of the need for and interest in attending cultural competency training is lacking in peer programs, as well as information about the diverse composition of peer program memberships. Among those who had never participated in peer support, people of color were more likely than whites to endorse feeling they would not belong and believing their languages would not be spoken in peer programs. Whites, on the other hand, were more likely to cite a preference for professional over peer support, while nearly half of both groups indicated that the main reason for non-attendance is a lack of knowledge about peer programs. Qualitative results highlighted successful outreach and engagement strategies. These findings were subsequently used to develop a cultural competency tool that was pilot-tested among peer-run programs.

Entrecruzando nuestros caminos: Entrenamiento para compañeros-promotores de recuperación y rehabilitación.

NARIC Accession Number: O17861.
Author(s): Restrepo-Toro, Maria E.
Publication Year: 2010.
Number of Pages: 24.
Abstract: This Spanish-language document provides a detailed lesson plan for those training peer healthcare providers for people with mental illnesses. The plan is made up of three lessons covering: (1) communication skills, (2) promoting recovery, and (3) preparation for rehabilitation. These lessons have several components: (1) discussion, (2) lecture, (3) questions and answers, (4) demonstration, and (5) small group interactions. The plan also includes a training-session orientation that includes the history of the peer-provider movement and the self-reliance movement within the community of people with disabilities. Recommendations for further study and training are provided, including Latino BestNOW and Contac, Leadership Academy.

Project Number: H133A080060.
Can this document be ordered through NARIC’s document delivery service?: Y

Project Number: H133B050003; H133B100028.
Can this document be ordered through NARIC’s document delivery service?: Y

Project Number: H133B040026.
Can this document be ordered through NARIC’s document delivery service?: Y
Perceptions of psychiatric services held by African-American male adults.  

**Points of Empowerment, Volume 2**

**NARIC Accession Number:** O18179.

**Author(s):** Richardson, Mark A.

**Publication Year:** 2010.

**Number of Pages:** 2.

**Abstract:** Fact sheet provides data concerning the perceptions held by African American male adults about psychiatric services. Discussion includes sources of referral for mental health services, access and cultural barriers, and recommendations for future research and practice.

**Project Number:** H133A080060.

**Can this document be ordered through NARIC's document delivery service?:** Y

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Overview: Diversity in feminist psychology.  


**NARIC Accession Number:** J65736.

**Author(s):** Russo, Nancy F.; Landrine, Hope.

**Publication Year:** 2010.

**Number of Pages:** 47.

**Abstract:** Chapter provides an overview of the importance of including women of diverse ethnicity and sexual orientation in feminist psychology. It also summarizes the topics addressed in subsequent chapters in the book, which address issues in the study of diversity in feminist psychology and consider future challenges for multicultural feminist psychology as well as strategies and opportunities for meeting those challenges.

**Project Number:** H133G080042.

**Can this document be ordered through NARIC's document delivery service?:** Y

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Perceptions of psychiatric services held by African-American male youth.  

**Points of Empowerment, Volume 1**

**NARIC Accession Number:** O18178.

**Author(s):** Shamburger, Aisha.

**Publication Year:** 2010.

**Number of Pages:** 2.

**Abstract:** Fact sheet provides data concerning the perceptions held by African American male youth about psychiatric services. Discussion includes sources of referral for mental health services, access and cultural barriers, parental influences, and recommendations for future research and practice.

**Project Number:** H133A080060.

**Can this document be ordered through NARIC's document delivery service?:** Y

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The psychiatric rehabilitation of African Americans with severe mental illness.  

**Psychiatric Services (formerly Hospital and Community Psychiatry), Volume 61(5), Pgs. 508-511.**

**NARIC Accession Number:** J58605.

**Author(s):** Whitley, Rob; Lawson, William B..

**Publication Year:** 2010.

**Number of Pages:** 4.

**Abstract:** Article discusses issues related to the psychiatric rehabilitation of African Americans with severe mental illness. Evidence suggests that African Americans suffer from significant and persistent disparities within the mental health system. African Americans with severe mental illness are less likely than Euro-Americans to access mental health services, more likely to drop out of treatment, more likely to receive poor-quality care, and more likely to be dissatisfied with care. Dominant patterns of treatment for African Americans with psychiatric disabilities are often least suited to long-term rehabilitation. To be successful, interventions must simultaneously target three levels: macro, provider, and patient. Five domains are posited that cut across these levels. These are cross-cultural communication, discrimination, explanatory models, stigma, and family involvement. These need appropriate research and action to enhance the psychiatric rehabilitation of African Americans. Potential solutions to overcome barriers raised within these domains are suggested.
**Conceptualizing community: The experience of mental health consumers.** Qualitative Health Research, Volume 20(5), Pgs. 654-667.

NARIC Accession Number: J58740.

**Author(s):** Wong, Yin-Ling I.; Sands, Roberta G.; Solomon, Phyllis L.

**Publication Year:** 2010.

**Number of Pages:** 14.

**Abstract:** Study examined the perspectives of diverse groups of mental health consumers on the concept of community. Seven focus groups were conducted with a total of 62 participants. Transcripts were analyzed using the grounded theory approach. The core domains that constitute the notion of community were identified, along with commonalities and differences in the perception of community along the lines of ethnicity and sexual orientation/gender identity. Two domains, togetherness and community acceptance, emerged as common to four types of communities that were most frequently mentioned in the focus group discussion: (1) cultural identity, (2) treatment community, (3) faith community, and (4) neighborhood. The findings show that identities other than those associated with mental illness and the role of service user are critical to the understanding of the psychological sense of community among people with psychiatric disabilities. The authors suggest that mental health providers should empower consumers to expand their “personal communities” beyond that of mental health clients using their diverse identities, and design interventions for addressing the stigma emanating from identities that are discriminated against by the wider society.

**Reducing disparities in mental health care: Suggestions from the Dartmouth-Howard collaboration.** Community Mental Health Journal

NARIC Accession Number: J58746.

**Author(s):** Carpenter-Song, Elizabeth; Whitley, Rob; Lawson, William; Quimbly, Ernest; Drake, Robert E.

**Publication Year:** 2009.

**Number of Pages:** 13.

**Abstract:** Article describes recent collaborative efforts between the Dartmouth Psychiatric Research Center and Howard University to understand (and ultimately reduce) disparities in mental health care among African Americans. Researchers from Dartmouth and Howard recently formalized a longstanding collaboration through the support of a grant aimed at understanding recovery and rehabilitation for African Americans with severe mental illness. Grant-sponsored efforts have included two seminars between multi-disciplinary mental health researchers and clinicians to inform the implementation of a collaborative research and training program. This article outlines the prominent themes arising from these seminars on the issue of health disparities agreed upon by our multi-disciplinary research team. These are (1) situating disparity research in the context of social justice; (2) understanding trends in disparities; (3) promoting a sophisticated understanding of culture and its role in disparities; (4) critically assessing strategies that attempt to mitigate disparities; (5) developing a reflexive research agenda.

**Children’s beliefs about causes of childhood depression and ADHD: A study of stigmatization.** Psychiatric Services (formerly Hospital and Community Psychiatry), Volume 60(7), Pgs. 950-957.

NARIC Accession Number: J56792.

**Author(s):** Coleman, Daniel; Walker, Janet S.; Lee, Junhee; Friesen, Barbara J.; Squire, Peter N.

**Publication Year:** 2009.

**Number of Pages:** 8.

**Abstract:** Study examined children’s beliefs about the causes of childhood mental health problems. A total of 1,091 children were randomly assigned to read vignettes about a peer with depression, attention-deficit hyperactivity disorder (ADHD), or asthma and respond to an online survey. Causal attributions were assessed with 7 items identified from literature: parenting, substance abuse, lack of effort, genetics, brain differences, God’s will, and stress. Social distance, the willingness to interact with people with mental illness in different situations, was assessed with the Social Distance Scale. Correlations were computed between social distance and the 7 causation items. Logistic regression models for each causal item tested main effects and interaction terms for condition (ADHD or depression),
demographic characteristics, and self-reported diagnosis of depression or ADHD. Results demonstrated a consistent presence of stigmatization in children’s beliefs about the causes of childhood mental health problems. The beliefs that parenting, substance abuse, and low effort caused the condition were all strongly inter-correlated and were moderately correlated with social distance. The depression condition was the strongest predictor of endorsement of the most stigmatizing causal beliefs. Stigmatizing causal beliefs were evident for ADHD, but with more modest effects. Children who reported a diagnosis were more likely to endorse parenting and substance abuse as causes (attenuated for ADHD). Modest to moderate effects were found for variation in causal beliefs across ethnic groups.

Project Number: H133B990025.
Can this document be ordered through NARIC’s document delivery service?: Y

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Serving everyone at the table: Strategies for enhancing the availability of culturally competent mental health service.

NARIC Accession Number: O17620.
Author(s): Prince Inniss, Janis; Nesman, Teresa; Mowery, Debra; Callejas, Linda M.; Hernandez, Mario.
Publication Year: 2009.
Number of Pages: 56.
Abstract: This monograph identifies strategies to increase availability of mental health services for racially/ethnically diverse children and their families. It aims to increase awareness of the impact of culture on the availability of mental health services with the goal of improving services in ways that reduce mental health disparities. The concept of availability is presented using the metaphor of "serving everyone at the table", which necessitates knowledge of everyone’s preferences and the ability to respond to those tastes. Availability strategies were identified through interviews conducted with personnel from 12 organizations that met criteria for providing culturally-competent services and supports. The findings presented in this monograph were derived from a broader conceptual model that addresses the community context in which services are delivered, the characteristics of populations served, and the overall organizational infrastructure through which services are delivered.
Project Number: H133B040024.
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Creating a front porch: Strategies for improving access to mental health services.

NARIC Accession Number: O17977.
Author(s): Callejas, Linda M.; Nesman, Teresa; Mowery, Debra; Hernandez, Mario.
Publication Year: 2008.
Number of Pages: 59.
Abstract: This monograph aims to increase awareness of the impact of culture on access to mental health services with the goal of reducing the burden of care for culturally/ racially diverse families. Access is a first step toward receiving needed mental health services and can be seen as the "front porch" of services where people can be linked to services without being identified as a "client." As on welcoming front porches in communities throughout this country, people feel comfortable spending time together, listening and learning, and building relationships of trust. Creating a front porch for mental health requires organizational commitment to the implementation of policies and practices such as flexible funding, increased human resources, and family support that do not depend on billable hours. This document describes strategies to increase access as part of a broader conceptual model that addresses the community context in which services are delivered, the characteristics of populations served, and the overall organizational infrastructure through which services are delivered. These access strategies were identified through interviews conducted with personnel from selected organizations that met criteria for providing culturally competent services and supports for racially/ethnically diverse children and families. The descriptions highlight how these strategies were tailored to meet the needs of the following service populations: African Americans/Blacks, Asian and Pacific Islanders, Latinos, and Native Americans.
Project Number: H133B040024.
Can this document be ordered through NARIC’s document delivery service?: Y

50 of 90.
Health behaviors, service utilization, and access to care among older mothers of color who have children with developmental disabilities. Intellectual and Developmental Disabilities (formerly Mental Retardation), Volume 46(4), Pgs. 267-280.

NARIC Accession Number: J55049.
Author(s): Magana, Sandy; Smith, Matthew J..
Publication Year: 2008.
Abstract: Study examined health behaviors, health care services utilization, and access to care among older Latina and Black American mothers living with a child with developmental disabilities. Using national survey data, Latina and Black American caregivers were compared to similar women who did not have caregiving responsibilities. Results showed that Latina caregivers were more likely to smoke and have insurance, Black American caregivers were less likely to be able to afford medication and mental health care, and both groups were less likely to have seen a doctor in the past year than their non-caregiving counterparts. Findings suggest that service providers should take into account differences across ethnicities when designing programs to address the physical and mental health needs of caregivers.

Project Number: H133B031134.
Can this document be ordered through NARIC's document delivery service?: Y
mothers' tendency to avoid close relationships was unrelated to changes in parenting behavior.

Examining the research base supporting culturally competent children’s mental health services.

NARIC Accession Number: O17120.
Author(s): Hernandez, Mario; Nesman, Teresa; Isaacs, Mareasa; Callejas, Linda M.; Mowery, Debra.
Number of Pages: 164.
Abstract: This monograph presents a description and analysis of the research literature related to child and family mental health among African Americans, Asian Americans/Pacific Islanders, Latinos, and Native Americans. Background information for each of these populations is provided, including population characteristics and community context factors that influence the development, implementation, and operationalization of cultural competence in terms of access, availability, and utilization of mental health services. A conceptual model is introduced to illustrate potential areas of alignment or discordance between cultural/linguistic population characteristics and organizational components (i.e., infrastructure and direct service domains/functions). By examining relationships and potential points of contact, the model is intended to provide a common framework to facilitate alignment between diverse cultural and linguistic populations and mental health service providers. This review is part of a larger study focusing on access to mental health services for culturally and linguistically diverse children and families.

Focal point: Traumatic stress/child welfare.

NARIC Accession Number: O16796.
Author(s): Walker, Janet S.(Ed.).
Number of Pages: 32.
Abstract: Articles in this issue focus on child traumatic stress, particularly the kinds of stress found among children involved with the child welfare system. Topics include: complex trauma in children and adolescents, reflections on abuse and recovery, evidence-based treatment for children in child welfare, early intervention, adapting evidence-based treatments for use with American Indian and Native Alaskan children and youth, creating a trauma-informed child welfare system, and the role of public policy in child trauma.

Focal point: Effective interventions for underserved populations.

NARIC Accession Number: O17230.
Author(s): Walker, Janet S.; Gowen, L. Kris; Aue, Nicole (Eds.).
Number of Pages: 32.
Abstract: This issue describes a number of interventions and programs designed to respond to the specific needs of populations that have been historically underserved. Topics include: new directions in the treatment of Hispanic youth; intervening in the lives of runaway and homeless youth; successful strategies for improving the lives of American Indian and Alaska Native youth and their families; adapting attachment-based family therapy for depressed and suicidal gay, lesbian, and bisexual adolescents; effective mentoring programs; school-based telemental health services; a culturally competent model program for African American children in the foster care system; and research and evaluation programs for Asian American, Native Hawaiian, and other Pacific Islander populations.

Help-seeking pathways and conceptions of illness among Chinese Americans with depression.

NARIC Accession Number: O17337.
Author(s): Wan, Yu-Mui C.
Abstract: This project investigated the help-seeking pathways and conceptions of mental illness among Chinese Americans, as well as the role their families play in the help-seeking process. The study focuses on 20 Chinese Americans with depression who do not utilize formal mental health services or terminated mental health services prematurely. It also explored the relationships between their explanatory models of illness and help-seeking behaviors, and analyzed how treatment decisions were negotiated between Chinese Americans with depression and their significant others. Findings suggest that explanatory model of illness in itself does not determine the help-seeking behaviors, that support from significant others played an important role in enhancing the individual's willingness to seek mental health services, and that there are practical and cultural barriers that prevent Chinese Americans from seeking help. It is recommended that mental health professionals make use of community resources in communicating, educating, and reaching out to Chinese Americans with depression. The importance of motivating and involving family in treatment is discussed.

Project Number: H133F050037.

Can this document be ordered through NARIC's document delivery service?: Y


NARIC Accession Number: J56517.
Author(s): Wong, Yin-Ling; Nath, Sara B.; Solomon, Phyllis L.
Number of Pages: 17.
Abstract: Study examined patterns of organizational involvement among consumers of mental health services residing in supported independent housing (SIH) and indentified the correlates of organizational membership. SIH refers to an independent community living arrangement that is coupled with the provision of flexible and individualized support services. Data regarding group and organizational involvement, social and demographic variables, clinical characteristics, and service use patterns were obtained from 252 participants. Groups and organizations were classified according to whether or not they have a behavioral health focus. Demographic, clinical, and service use characteristics were examined as potential predictors of membership. Results indicated that 60 percent of the sample was involved in some kind of behavioral or non-behavioral health organization. Higher rates of membership were found among older adults, African Americans, those with more years of education, and those with higher incomes. Other correlates specific to SIH included prior homelessness, perceived discrimination, substance abuse history, psychiatric symptoms, psychiatric diagnosis, and contact with service providers.

Project Number: H133B031109.
Can this document be ordered through NARIC's document delivery service?: Y


NARIC Accession Number: J50485.
Author(s): Krause, James S.; Broderick, Lynne E.; Saladin, Lisa K.; Broyles, Joy.
Publication Year: 2006.
Number of Pages: 9.
Abstract: Study investigated health disparities as a function of race and gender and the extent to which socioeconomic factors mediate disparities among people with spinal cord injury. Six outcomes were measured: self-rated health, poor physical health days in the past month, poor mental health days in the past month, number of non-routine physician visits, number of hospitalizations, and days hospitalized. Predictive factors in the analyses included socioeconomic indicators and social support. Results of multivariate analysis of variance indicated significant main effects for both race and gender. Racial disparities were observed in 3 of the 6 health outcomes examined, whereas gender disparities were observed for only 1 outcome (number of non-routine physician visits). African Americans reported a greater number of poor health days, more hospitalizations, and a greater number of days hospitalized. Years of education and household income mediated interrelationships between race and health such that race was no longer associated with these outcomes after consideration of these factors.

Project Number: H133N000005; H133N00023; H133N060009.
Can this document be ordered through NARIC's document delivery service?: Y

NARIC Accession Number: O16762.
Author(s): Magana, Sandra; Smith, Matthew J..
Publication Year: 2006.
Number of Pages: 2.
Abstract: Brief describes the impact of caring for a child with a developmental disability on the physical and mental health of Latina and Black American mothers who were midlife and older. The study compared the health of older mothers living with children with developmental disabilities to the health of same-age mothers without caregiving responsibilities. Results showed that for ethnic both groups, caregivers were more likely to report limitations from arthritis than their non-caregiving peers. Caregiving was associated with more symptoms of depression for Latinas, but not for Black American women. The findings suggest that the impact of caregiving on the health outcomes of women of color needs more attention in research and practice.
Project Number: H133B031134.
Can this document be ordered through NARIC's document delivery service?: Y

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NARIC Accession Number: J50763.
Author(s): Magana, Sandra; Smith, Matthew J..
Publication Year: 2006.
Number of Pages: 11.
Abstract: Study examined the impact of caring for a child with a developmental disability on the physical and mental health of Latina and Black American mothers who were age 40 and older. National survey data was used to compare the health of older mothers living with children with developmental disabilities to the health of same-age mothers without caregiving responsibilities. Results showed that for ethnic both groups, caregivers were more likely to report limitations from arthritis than their non-caregiving peers. Caregiving was associated with more symptoms of depression for Latinas, but not for Black American women. The findings suggest that the impact of caregiving on the health outcomes of women of color needs more attention in research and practice.
Project Number: H133B031134.
Can this document be ordered through NARIC's document delivery service?: Y

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Findings brief 4: Pathways to care. Family experience of the mental health system: Findings compendium

NARIC Accession Number: O16012.
Author(s): Lazear, Katherine J.; Worthington, Janice; Detres, Maridelys; Boterf, Eloise.
Number of Pages: 9.
Abstract: Brief discusses the experiences with pathways to mental health services described by the families who participated in the Family Experience of the Mental Health System Study. For families in the study, the pathway to appropriate mental health services was complex, often through other than the mental health system (i.e., schools, courts, and pediatricians), and often through informal networks (i.e., waiting rooms, playgrounds, etc.). For the Hispanic families who participated in the study, their experiences varied, often depending on language proficiency, and immigration status and permanency. African American families said they did not experience any problems due to
their race; however, they shared feelings about being discriminated against based on their low income or perceived lack of education.

Project Number: H133B040024.

Can this document be ordered through NARIC's document delivery service?: Y

64 of 90.

Youth clinical outcomes: Does race/ethnicity matter?. Focal Point, Volume 17(1), Pgs. 6-9.

NARIC Accession Number: J48182.
Author(s): Baker, Mary J.
Publication Year: 2003.
Number of Pages: 4.
Abstract: Article uses data from a study of youth mental health outcomes to illustrate how race/ethnicity is associated with varying rates of service utilization and with differences in outcomes on standardized measures. The investigation of racial/ethnic differences in mental health outcomes is encouraged to assess the effectiveness of service systems for children and youth from different cultures. This document is included in NCDDR's Guide to Resources Produced by NIDRR Grantees: Infants, Children, and Youth with Disabilities as F.56.

Project Number: H133B990025.
Can this document be ordered through NARIC's document delivery service?: Y

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Tapestry: A wraparound program for families of color facilitated by parent partners. Focal Point, Volume 17(2), Pgs. 26-68.

NARIC Accession Number: J48181.
Author(s): Becker, Julie; Kennedy, Mark.
Publication Year: 2003.
Number of Pages: 3.
Abstract: Article describes a successful warparound program in southeast San Diego, CA for ethnic and racial minority families in need of mental health services. Wraparound involves the use of collaborative family-provider teams to create and implement individualized service plans for children with severe emotional and behavioral disorders. Authors describe the program's development and outcomes. This document is included in NCDDR's Guide to Resources Produced by NIDRR Grantees: Infants, Children, and Youth with Disabilities as F.45.

Project Number: H133B990025.
Can this document be ordered through NARIC's document delivery service?: Y

66 of 90.

Implementing culturally competent research practices: Identifying strengths of African-American communities, families, and children. Focal Point, Volume 17(1), Pgs. 10-16.

NARIC Accession Number: J48183.
Author(s): Briscoe, Richard; Smith Aaron; McClain, Gwen.
Publication Year: 2003.
Number of Pages: 6.
Abstract: Article focuses on the methods and results of two research projects aimed at identifying strengths in African-American families and communities. The studies provided a strong foundation for identifying and supporting the development of a strengths-based approach with African-American children, families and communities. This document is included in NCDDR's Guide to Resources Produced by NIDRR Grantees: Infants, Children, and Youth with Disabilities as F.27.

Project Number: H133B990025.
Can this document be ordered through NARIC's document delivery service?: Y

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Cultural competence in services to children and families. Focal Point, Volume 17(1), Pgs. 21-23.

NARIC Accession Number: J48185.
Author(s): Clowes, L.
Publication Year: 2003.
Number of Pages: 3.
Abstract: Article describes specific steps that are being taken in New Hampshire to increase the level of cultural competence in a system of care for children with severe emotional disturbances and their families. Cultural competence means gaining knowledge about cultures and engaging in a comprehensive process that involves:
<table>
<thead>
<tr>
<th>Title</th>
<th>Author(s)</th>
<th>Publication Year</th>
<th>Number of Pages</th>
<th>Abstract</th>
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<tbody>
<tr>
<td>Assessing behavioral and emotional strengths in Black children: A measure designed by and for Blacks</td>
<td>Lambert, Michael C.; Rowan, George T.</td>
<td>2003</td>
<td>4</td>
<td>Article describes the development of the Behavior Assessment for Children of African Heritage, an instrument designed to measure the behavioral and emotional strengths of Black children. The strengths-based measure can be used as the basis for developing culturally sensitive and effective interventions. This document is included in the NCDDR Guide to Resources Produced by NIDRR Grantees: Infants, Children, and Youth with Disabilities as F.3.</td>
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<tr>
<td>An examination of the vocational rehabilitation needs of American Indians with behavioral health diagnoses in New York</td>
<td>Marshall, Catherine; Bruyere, Susanne; Shern, David; Jircitano, Lois.</td>
<td>2003</td>
<td>2</td>
<td>Study examined the level of vocational rehabilitation (VR) and mental health services being provided in New York State for American Indians with behavioral health diagnoses. Results showed that of the 81 American Indians who applied for VR services in 1991, 43 (51 percent) were accepted for services. Of the 43 individuals, 16 (37 percent) had a behavioral health diagnosis. Eight of these 16 (50 percent) were closed rehabilitated. In the same year, the New York Office of Mental Health indicated that 179 American Indians were served who had severe and persistent mental illness. Findings suggest that the level of VR service delivery falls well below the need. Recommendations included the need for cultural sensitivity training for VR administrators and counselors, and aggressive outreach within American Indian communities.</td>
</tr>
<tr>
<td>Focal point: Cultural competence, strengths, and outcomes.</td>
<td>Walker, Janet (Ed.).</td>
<td>2003</td>
<td>23</td>
<td>Issue reviews research on the level of cultural competence in the children's mental health care system. Topics include: facilitating culturally reciprocal interactions in educational settings, the impact of race/ethnicity on service utilization and clinical outcomes, implementing culturally competent research practices, assessing behavioral and emotional strengths in African American children, and cultural competence in services to children and families. Four of the articles are included separately in the NARIC collection under accession number J48182 through J48185.</td>
</tr>
<tr>
<td>Focal point: Quality and fidelity in wraparound.</td>
<td>Walker, Janet S.(Ed.).</td>
<td>2003</td>
<td>32</td>
<td></td>
</tr>
</tbody>
</table>
Publication Year: 2003.
Number of Pages: 32.
Abstract: Issue focuses on quality and fidelity of wraparound, also known as individualized service planning. Topics covered include: history of the wraparound process; assessing the necessary agency and system support; practices to promote effective teamwork; tips for managers and implementers; ensuring fidelity; national wraparound initiative; Tapestry, a wraparound program for families of color; and challenges and strengths of being a parent and wraparound facilitator. This document is included in NCDDR's Guide to Resources Produced by NIDRR Grantees: Infants, Children, and Youth with Disabilities as F.45.
Project Number: H133B990025.
Can this document be ordered through NARIC's document delivery service?: Y

72 of 90.

NARIC Accession Number: J44704.
Author(s): Pickett-Schenk, Susan A.
Publication Year: 2002.
Number of Pages: 8.
Abstract: Study examined the outreach efforts and group participation outcomes of African American families who attended a church-based family support group. Results indicated that providing information about the group in the church bulletin and church members sharing their group experiences with one another were effective outreach strategies. Participants reported that, as a result of attending the support group, they had greater knowledge of mental illness and its treatment, better understanding of the mental health service system, and improved morale.
Project Number: H133B000700.
Can this document be ordered through NARIC's document delivery service?: Y

73 of 90.
Focal point: Assessing and addressing cultural competence.  , Volume 16(2), Pgs. 1-40.

NARIC Accession Number: O15490.
Author(s): Walker, Janet S.(Ed.).
Publication Year: 2002.
Number of Pages: 40.
Abstract: Issue focuses on approaches to increasing cultural competence in systems of care for children and their families. Articles describe how the understanding of cultural competence in children's mental health has evolved in the past 15 years.
Project Number: H133B990025.
Can this document be ordered through NARIC's document delivery service?: Y

74 of 90.
Community action grant for service system change: The Latino initiative.  Recovery & Rehabilitation, Volume 1(3)

NARIC Accession Number: O14757.
Author(s): Anspacher, Lisa (Comp.).
Number of Pages: 4.
Abstract: Describes a program developed to build consensus for, implement, and evaluate exemplary service delivery practices to meet the needs of Latino adolescents and adults with mental health and/or substance abuse problems.
Project Number: H133B990023.
Can this document be ordered through NARIC's document delivery service?: Y

75 of 90.
Focal point: Early intervention in children's mental health.  , Volume 14(1)

NARIC Accession Number: O15485.
Author(s): Caplan, Elizabeth (Ed.).
Number of Pages: 32.
Abstract: Issue focuses on early intervention in children in children's mental health. Topics include: mental health
screening and services in the public schools, early intervention to promote preschoolers’ language skills, preventing conduct problems and promoting social competence in Head Start children, juvenile justice and delinquency prevention, cultural competence in early intervention, poverty reduction strategies, and policy implications. Two of the articles are included separately in the NARIC collection under accession number J48173 and J48174.

**Project Number:** H133B990025.

**Can this document be ordered through NARIC’s document delivery service?:** Y

76 of 90.

**Health outcomes among American Indians with spinal cord injury.** Archives of Physical Medicine and Rehabilitation, Volume 81(7), Pgs. 924-931.

**NARIC Accession Number:** J39881.

**Author(s):** Krause, J S; Coker, J L; Charlifue, S; Whiteneck, G G.

**Publication Year:** 2000.

**Number of Pages:** 8.

**Abstract:** Study to identify risk factors for poor health outcomes and secondary conditions among Native Americans with spinal cord injury (SCI). Data are from comprehensive telephone interviews with 97 Native Americans with traumatic SCI at least 1 year post-injury. Seven outcome variables were examined: self-rated health; health status compared with 1 year ago; number of poor health days in the past month; number of poor mental health days in the past month; number of days in the past month in which poor health disrupted normal activities; number of pressure sores in the past year; and number of post-SCI injuries in the past year. These were related to biographical, injury-related, psychosocial, and behavioral predictors, including selected items from the Behavioral Risk Factor Surveillance Survey (BRFSS). Results indicated that depressive symptoms, post-SCI injuries, alcohol abuse, and older age were predictors of poorer health outcomes.

**Project Number:** H133N000023; H133N500001.

**Can this document be ordered through NARIC’s document delivery service?:** Y

77 of 90.

**PSYCHOLOGICAL AND VOCATIONAL ASSESSMENT OF NATIVE AMERICANS.**

**NARIC Accession Number:** O13185.

**Author(s):** Thomason, T. C.

**Publication Year:** 1999.

**Number of Pages:** 45.

**Abstract:** Paper provides an introduction to issues regarding the psychological and vocational assessment of Native American clients in schools, mental health clinics, counseling centers and rehabilitation programs. Aspects of fairness and bias are reviewed as they pertain to racial, ethnic, and cultural groups. The paper presents types of assessment, assessment of acculturation, and general issues in the assessment of Native Americans. Psychological and personality influences, assessments and diagnoses are discussed. Assessments pertaining to alcohol usage, intellectual functioning, interests, abilities, and aptitudes are reviewed. Recommendations for other assessment tools are provided.

**Project Number:** H133B300068.

**Can this document be ordered through NARIC’s document delivery service?:** Y

78 of 90.

**REGION V TRANSITION HANDBOOK: UNLOCKING THE DOORS TO THE FUTURE - A GUIDE FOR STUDENTS WITH DISABILITIES AND THEIR PARENTS TO ASSIST IN PLANNING FOR LIFE AFTER GRADUATION - SPRING, 1998 EDITION.**

**NARIC Accession Number:** O12651.

**Author(s):** Ipsen, C.

**Publication Year:** 1998.

**Number of Pages:** 53.

**Abstract:** Handbook on transition to adult life for students with disabilities and their parents in Montana. Provides descriptions of programs serving adults with disabilities. Programs include: state funded programs; programs for adults with developmental disabilities; vocational rehabilitation (VR), including Native American (tribal) VR; advocacy programs; community services; mental health services; recreation programs (Very Special Arts Montana and YMCA); Social Security Administration (SSA); Summit Independent Living Center; The Rural Institute of the University of Montana; and job training programs. Also includes glossaries of terms and abbreviations, and an index of services by community.

**Project Number:** H133B970017.

**Can this document be ordered through NARIC’s document delivery service?:** Y
HAVING OUR SAY: WOMEN MENTAL HEALTH CONSUMERS/SURVIVORS IDENTIFY THEIR NEEDS AND STRENGTHS.

NARIC Accession Number: O12638.
Author(s): Jonikas, J.; Bamberger, E.; Laris, A.
Number of Pages: 21.
Abstract: Booklet about the needs and concerns of women with psychiatric disabilities. Data are from focus group interviews and open-ended individual interviews with Latina, African American, and Caucasian consumers/survivors of psychiatric services. Topics covered include: rehabilitation and recovery; parenting; relationships; safety and abuse; vocational services and employment; finances; housing and independent living; and physical health needs. Includes suggestions for ways to address each concern.
Project Number: H133B50004.
Can this document be ordered through NARIC’s document delivery service?: Y

A SURVEY OF VOCATIONAL REHABILITATION COUNSELORS CONCERNING AMERICAN INDIAN AND ALASKA NATIVE CLIENTS WITH ALCOHOL AND OTHER ABUSE DISORDERS. American Indian-Alaskan Native Mental Health Research, Volume 7(3), Pgs. 50-67.

NARIC Accession Number: J36908.
Author(s): Schacht, R M; Gaseoma, L.
Publication Year: 1997.
Number of Pages: 18.
Abstract: Article presents survey data from 124 rehabilitation counselors regarding the characteristics of their American Indian clients with alcoholism or drug abuse problems, and the kinds of service they receive. Fifty-three counselors had more than 12 American Indians/Alaskan Natives with substance abuse or alcoholism disabilities. It is noted that roughly half of the counselors had fewer than ten American Indians/Alaskan Natives with these disabilities suggesting that these vocational rehabilitation counselors have less than an ideal amount of experience handling such cases. Results discussed include descriptions of relationships with clients, minimum periods (if any) of sobriety before implementing services, services provided, training background and needs of the counselors, treatment modalities, elements of treatment, and aftercare. Recommendations and future research are discussed. This document is included in NCDDR’s Guide to Substance Abuse and Disability Resources produced by NIDRR Grantees, Number D.47. This document is included in NCDDR’s Guide to Substance Abuse and Disability Resources produced by NIDRR Grantees, 2nd Ed, number D.59.
Project Number: H133B30068.
Can this document be ordered through NARIC’s document delivery service?: Y

STRATEGIES THAT ACHIEVE IMPROVED EMPLOYMENT OUTCOMES. In Menz, Eggers, Wehman, & Brooke (Eds.), Lessons for improving employment of people with disabilities from vocational rehabilitation research (pp. 87-99)

NARIC Accession Number: J33519.
Author(s): Schriner, K.
Publication Year: 1997.
Number of Pages: 13.
Abstract: Chapter from a book on practical applications of disability and vocational rehabilitation (VR) research, providing information on research, program development projects, and policy and program evaluation related to strategies to improve employment outcomes for persons with disabilities. Describes model building research at Rehabilitation Research and Training Center (RTC), including: a project for the diffusion of service delivery changes called for in the Rehabilitation Act of 1992; a project to assign vocational specialists to new clients at a community mental health center; a project to identify the features of rehabilitation programs that are most helpful to people with psychiatric disabilities; a project to evaluate public sector employment for Native Americans with severe disabilities; a consumer-driven model called the Choose-Get-Keep model; and a project on effective job search strategies. Also describes program and policy evaluation research on self-employment and supported employment.
Project Number: H133B30059.
Can this document be ordered through NARIC’s document delivery service?: Y
AN EXAMINATION OF THE VOCATIONAL REHABILITATION NEEDS OF AMERICAN INDIANS WITH BEHAVIORAL HEALTH DIAGNOSIS IN NEW YORK STATE, FINAL REPORT.

NARIC Accession Number: O12160.
Author(s): Marshall, C. A.; Bruyere, S.; Shern, D.; Jircitano, L.
Publication Year: 1996.
Number of Pages: 111.
Abstract: Examines the level of Vocational Rehabilitation (VR) and mental health services being provided in New York State to American Indians with Behavioral health diagnosis, including those with dual diagnosis involving substance abuse. Addresses the extent to which American Indians with severe mental illnesses have successfully accessed the public VR system, and the difficulties American Indians with a dual diagnosis face when seeking rehabilitation services. Provides recommendations to ensure VR agency responsiveness to the diverse needs of Native People.

Can this document be ordered through NARIC’s document delivery service?: Y

Focal point: Adoption: A lifelong journey for children and families.

NARIC Accession Number: O15481.
Author(s): McManus, Marilyn C. (Ed.).
Publication Year: 1996.
Number of Pages: 36.
Abstract: Issue focuses on the impact of adoption on families. Topics include: the social and emotional support adopted children and their families require, the adoptive family life cycle, the disproportionate representation of adopted children among youth receiving mental health services, and issues presented by transracial and transcultural adoptions.

Can this document be ordered through NARIC’s document delivery service?: Y

An introduction to cultural competence principles and elements: An annotated bibliography.

NARIC Accession Number: O17963.
Author(s): Mason, James L.; Braker, Kathie; Williams-Murphy, Tracy.
Publication Year: 1995.
Number of Pages: 84.
Abstract: This annotated bibliography focuses on principles of culturally competent systems of care for children and youth with serious emotional disabilities and their families. A primary concern is the application and comprehension of a cultural competence model developed by the Child and Adolescent Service System Program (CASSP). The CASSP model requires that behavioral and programmatic changes be manifested in professional and agency attitudes, practices, policies, or structures. The bibliography is divided into five sections that correspond to basic principles of the model: self-assessing one's own cultural behavior, understanding the dynamics of difference, valuing diversity, adapting to diversity, and incorporating cultural knowledge. For each journal article, book, or monograph listed, an abstract and bibliographic documentation are provided, along with information on applicable principles of the model, the target population or audience, and applicable disciplines.

Can this document be ordered through NARIC’s document delivery service?: Y

ASSESSMENT OF AMERICAN INDIANS, MAR 1, 1995.

NARIC Accession Number: O11566.
Author(s): Thomason, T C.
Publication Year: 1995.
Number of Pages: 17p plus appendices.
Abstract: Introduction to the vocational and psychological assessment of American Indian clients at mental health clinics, counseling centers, and rehabilitation facilities. The first section reviews methods for gathering information. The second section describes the components of vocational assessment and discusses the use of norm referenced
tests versus criterion referenced tests with American Indians. The third section discusses the psychological assessment of American Indians, including: the assessment of acculturation, issues in the administration and interpretation of assessments, issues in the diagnosis of psychological disorders, issues in personality assessment, objective personality tests, projective personality tests, instruments for the assessment of psychopathology, issues in the assessment of intelligence, and potential sources of bias in standardized tests. Additional guidelines, a vocational interest inventory, and other supplementary materials are included in appendices.

Project Number: H133B30068.
Can this document be ordered through NARIC's document delivery service?:

CO-OCCURRING DISORDERS IN ADOLESCENCE: SERIOUS EMOTIONAL DISTURBANCES AND SUBSTANCE USE DISORDERS SERVICE NEEDS FOR A VULNERABLE POPULATION.

NARIC Accession Number: O13107.
Author(s): Greenbaum, P. E.; Foster-Johnson, L.; Petrila, A.
Number of Pages: 166.
Abstract: Comprehensive report gathers information on the status of adolescents who have been identified or may need to be identified as having a serious emotional disturbance and substance use problems. Information includes: prevalence according to clinical studies and general population studies; assessment tools available for use, their utility, some of their limitations, recommended procedures, and DSM-IV changes; proposed service needs with treatment models and approaches, special considerations for adolescents, treatment phases and treatment modalities; current service system capacity, mechanisms, policies, and comments from states; special population considerations for females and ethnic groups and individuals who are homeless, HIV-positive, or live in rural communities; federal, state and local policies; barriers and gaps in policies; components of treatment including integration, comprehensiveness, flexibility, and continuity; and recommendations regarding prevalence, assessment, services, and policy.

Project Number: H133B40023.
Can this document be ordered through NARIC's document delivery service?: Y

Focal point. Volume 8(2)

NARIC Accession Number: O12426.
Author(s): McManus, Marilyn C. (Ed.).
Number of Pages: 28.
Abstract: Issue focuses on developing culturally competent health and human services organizations. Topics include: cultural competence self-assessment questionnaire, tips for accessing and involving minority families, the Pennsylvania and the South Carolina Department of Mental Health cultural competence plans; research reviews, cultural competence and the juvenile justice system, and outreach efforts for underserved families of children with neurobiological, emotional, or behavioral disorders.

Project Number: H133B40021.
Can this document be ordered through NARIC's document delivery service?: Y


NARIC Accession Number: O10848.
Author(s): Dwyer, K, ed; Spas, D, ed; Rodine, K, ed.
Number of Pages: 143.
Abstract: Proceedings of the 1992 Common Threads conference on rural resources for persons with disabilities. The conference papers describe exemplary programs in five areas: accessibility and community integration, formal and informal networking partnerships, training issues and opportunities, career development, and natural support systems. A summary of "common threads" is included for each topic area to highlight key issues and solutions within that area. The document also contains summary reports from conference forums on Native American disability issues, rural supported employment, rural mental health, and rural profiling strategies; a directory of information
resources on rural disability; and listing of state technology assistance programs.

**Project Number:** H133A00035.
**Can this document be ordered through NARIC's document delivery service?: Y**

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**IMPROVING MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES FOR ADOLESCENTS.**  
Administration and Policy in Mental Health, Volume 19(3)

**NARIC Accession Number:** J36898.
**Author(s):** Friedman, R. M.; Burns, B. J.; Behar, L.
**Publication Year:** 1992.
**Number of Pages:** 15.
**Abstract:** Article focuses on nine overlapping topics dealing with improving mental health and substance abuse services for adolescents and their families. These topics are: 1) organization of service delivery systems, 2) prevention, 3) professional training and overall human resource development, 4) role of consumers and their families, 5) accountability, 6) ethics, 7) financing, 8) services for minority adolescents and their families, and 9) research. Depending on the state of knowledge of each topic, the authors either highlight areas of importance or offer a specific position statement. It is hoped that these statements be reviewed for possible endorsement by the American College of Mental Health Administration (ACMHA) and for transmission to other professional organizations, federal and state government agencies and the field in general.

This document is included in NCDDR's Guide to Substance Abuse and Disability Resources produced by NIDRR Grantees, number D.27.

**Project Number:** H133B90004.
**Can this document be ordered through NARIC's document delivery service?: Y**

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**CALL TO THE FIELD: RESEARCH ON FAMILIES AND DISABILITY.**

**NARIC Accession Number:** O09589.
**Author(s):** Schaffer, H; Cross, J.
**Publication Year:** 1989.
**Number of Pages:** 73.
**Abstract:** Booklet provides information about family oriented research activities nationwide. Information comes from 38 Rehabilitation Research and Training Centers (R & T Centers) and 92 other projects, primarily funded by NIDRR. After introducing the booklet and explaining how it works, information is presented by state, in alphabetical order. A second section presents projects connected with universities (not R & T Centers), in alphabetical order by name of the university or project. A final section includes miscellaneous projects from the Human Services Research Institute, New York State Head Injury Association, PEAK Parent Center, Inc., TEACCH Program, and Through the Looking Glass. Project topics include spinal cord injury prevention, American Indian rehabilitation, progressive neuromuscular diseases, pediatrics, mental health, childhood trauma, mental illness, independent living, supported employment, traumatic brain injury, and aging.

**Project Number:** H133B80046.
**Can this document be ordered through NARIC's document delivery service?:**

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“Psychiatric” and (African or Asian or native or Indian or latino or Hispanic or immigrant or refugee or minority)

1 of 65.

**Perspectives on work and work-related challenges among Asian Americans with psychiatric disabilities.**  

**NARIC Accession Number:** J78676.
**Author(s):** Millner, Uma C.; Kim, Min.
**Publication Year:** 2017.
**Number of Pages:** 13.
**Abstract:** Study examined the work-related perspectives and experiences of Asian Americans with psychiatric disabilities. The Meaning of Work Scale was used to compare the perspectives of 53 Asian Americans with psychiatric disabilities regarding work with those of 96 White Americans with psychiatric disabilities. The perspectives of the Asian American respondents regarding work were further explored using an open-ended qualitative questions.
Data comparing the two groups were analyzed using t tests while qualitative data were analyzed using grounded theory methodology. The results revealed that Asian American individuals with psychiatric disabilities share similar perspectives on work when compared with White Americans with psychiatric disabilities with the notable exception of intrinsic motivation for work. Major themes derived from qualitative results included barriers that affect work, cultural values and expectations that influence work, and helpful strategies, services, and supports to deal with work-related challenges. The perspectives on work among Asian Americans with psychiatric disabilities are influenced by cultural values and expectations and barriers and resilience related to their cultural identity. These findings have important implications for providers of clinical and rehabilitation services working with Asian Americans diagnosed with psychiatric disabilities.

Project Number: H133P130011.

Can this document be ordered through NARIC’s document delivery service?: Y


NARIC Accession Number: J74868.
Author(s): Barrio, Concepcion; Hernandez, Mercedes; Gaona, Lizbeth.
Publication Year: 2016.
Number of Pages: 20.
Abstract: Article presents the findings of a review of the literature on family caregiving and family support for adults with disabilities. This review included 33 research studies published between 2000 and 2015 focused on three disabilities: developmental disabilities, serious mental illnesses, and traumatic brain injury. Following the ecological framework, findings on individual, family, and community domains were examined and synthesized. At the individual caregiver level, the evidence on subjective and objective burden shows that the needs of caregivers increase with the level of impairment of the care recipient and are further compounded by multiple caregiving responsibilities, particularly for ethnic minority families with fewer socioeconomic resources. Findings in the family caregiving context show that the level of care and burden varies depending on the nature, severity, and course of the disability. The findings underscore the critical role of family caregivers in addressing the needs of their loved one with a disability; however, the needs of the caregiver are insufficiently met by existing service approaches. A better understanding of the unique needs and strengths of the family support context of caregivers and care recipients is needed, giving greater attention to ethnic, racial, and cultural considerations in future research.

Project Number: H133B140046.

Can this document be ordered through NARIC's document delivery service?: Y

Correlates of co-occurring diabetes and obesity among community mental health program members with serious mental illnesses. Psychiatric Services (formerly Hospital and Community Psychiatry), Volume 67(11), Pgs. 1269-1271.

NARIC Accession Number: J74905.
Author(s): Cook, Judith A.; Razzano, Lisa; Jonikas, Jessica A.; Swarbrick, Margaret A.; Steigman, Pamela J.; Hamilton, Marie M.; Carter, Tina M.; Santos, Alberto B..
Publication Year: 2016.
Number of Pages: 3.
Abstract: Study examined the prevalence and correlates of co-occurring obesity and diabetes among community mental health program members with serious mental illnesses (SMI). Medical screenings of 457 adults with SMI were conducted by researchers and peer wellness specialists in four states (Georgia, Illinois, Maryland, and New Jersey). Body mass index was measured directly. Diabetes was assessed via glycosylated hemoglobin and interview self-report. Multivariable logistic regression analysis examined associations with known predictors. Results showed that 59 percent of the participants were obese, 25 percent had diabetes, and 19 percent had both conditions. When gender, diagnosis, and site were controlled, co-occurring diabetes and obesity was almost three times as likely among African Americans as among participants from other racial groups and half as likely among smokers as among nonsmokers. Older adults and those with poorer self-rated physical health also were more likely to have these co-occurring conditions. Results support the need for culturally competent treatment and for smoking cessation options with sensitivity to the potential for weight gain.

Project Number: 90RT5038; H133B100028.
Can this document be ordered through NARIC’s document delivery service?: Y

Predicting employment in the mental health treatment study: Do client factors matter?. Administration and
Policy in Mental Health and Mental Health Services Research (formerly Administration and Policy in Mental Health)

**NARIC Accession Number:** J74783.
**Author(s):** Metcalfe, Justin D.; Drake, Robert E.; Bond, Gary R.
**Publication Year:** 2016.
**Number of Pages:** 9.
**Abstract:** Study examined a battery of potential client predictors of competitive employment, testing the hypothesis that evidence-based supported employment would mitigate the negative effects of poor work history, uncontrolled symptoms, substance abuse, and other client factors. In a secondary analysis of 2,055 unemployed Social Security Disability Insurance beneficiaries with schizophrenia or affective disorders, 20 baseline client factors were examined as predictors of competitive employment. The analysis used logistic regression to identify significant client predictors and then examined interactions between significant predictors and receipt of individual placement and support employment. Results indicated that work history was a strong predictor of employment, and other client measures (fewer years on disability rolls, Hispanic ethnicity, and fewer physical health problems) were modestly predictive. Evidence-based supported employment mitigated negative client factors, including poor work history. Participants with a poor work history benefitted from supported employment even more than those with a recent work experience. Factors commonly considered barriers to employment, such as diagnosis, substance use, hospitalization history, and misconceptions about disability benefits, were not significant.

**Project Number:** H133B140028.

*Can this document be ordered through NARIC's document delivery service?* Y

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**Acceptance of mental illness: Promoting recovery among culturally diverse groups.**

**NARIC Accession Number:** R09405.
**Author(s):** Mizock, Lauren; Russinova, Zlatka.
**Publication Year:** 2016.
**Number of Pages:** 208.
**Abstract:** This book focuses on how people with serious mental illnesses (i.e., schizophrenia, bipolar disorder, severe depression) come to recognize and cope with the symptoms of a mental illness in order to promote recovery. Per the recovery movement in mental health, recovery is understood as not simply symptom elimination, but the process of living a meaningful and satisfying life in the face of mental illness. The book synthesizes research to provide educators, clinicians, researchers, and consumers with an understanding of the multidimensional process of acceptance of mental illness in order to support people across culturally diverse groups. Chapters focus on providing a historical overview of the treatment of people with mental illness, examining the acceptance process, and exploring the experience of acceptance among women, men, racial-ethnic minorities, and LGBT (lesbian, gay, bisexual, and transgender) individuals with serious mental illnesses. The book is a useful tool for mental health educators and providers, with each chapter containing case studies, clinical strategies lists, discussion questions, experiential activities, diagrams, and worksheets that can be completed with clients, students, and peers.

**Project Number:** H133P070001.

*Can this document be ordered through NARIC's document delivery service?* N

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**Focal point: Early psychosis intervention.**, Volume 30

**NARIC Accession Number:** O20197.
**Author(s):** Ossowski, John D.; Brennan, Eileen (Eds.).
**Publication Year:** 2016.
**Number of Pages:** 32.
**Abstract:** This issue explores early psychosis intervention services, which may prevent much of the trauma and disability associated with psychosis. Topics include: the evolution of early psychosis research and treatment, internationally and in the United States (US); experiences of young adult leaders and family members illustrate the importance of the Early Assessment and Support Alliance (EASA), the first implementation of early psychosis intervention in the US public mental health system; research that highlights the importance of family and culture in help-seeking during first episode psychosis; efforts to ensure and measure the quality and effectiveness of first episode psychosis services; and some of the effective strategies emerging in the early psychosis field, including cognitive behavioral therapy, the individual placement and support approach to employment and education, and the role of sensory preferences from an occupational therapy perspective.

**Project Number:** H133B140039.

*Can this document be ordered through NARIC's document delivery service?* Y

NARIC Accession Number: J72371.
Author(s): Cook, Judith A.; Burke-Miller, Jane K.
Publication Year: 2015.
Number of Pages: 14.
Abstract: Study explored the relative contributions of adverse working conditions, job satisfaction, wages, worker characteristics, and local labor markets in explaining voluntary job separations (quits) among employed workers with psychiatric disabilities. Job separation data were obtained from the Employment Intervention Demonstration Program in which 2,086 jobs were ended by 892 workers during a 24-month observation period. Stepped multivariable logistic regression analysis examined the effect of predictor variables on the likelihood of quitting. Results indicated that over half (59 percent) of all job separations were voluntary while 41 percent were involuntary, including firings (17 percent), temporary job endings (14 percent), and layoffs (10 percent). In multivariable analysis, workers were more likely to quit positions at which they were employed for 20 hours a week or less, those with which they were dissatisfied, low-wage jobs, non-temporary positions, and jobs in the structural (construction) occupations. Voluntary separation was less likely for older workers, members of racial and ethnic minority groups, and those residing in regions with lower unemployment rates. The patterns of job separations for workers with psychiatric disabilities mirrored some findings from research in the general population labor force but contradicted others.

Project Number: H133B100028.
Can this document be ordered through NARIC's document delivery service?: Y

Adapting supported employment for emerging adults with serious mental health conditions. Journal of Behavioral Health Services & Research, Volume 42(2), Pgs. 206-222.

NARIC Accession Number: J71287.
Author(s): Ellison, Marsha; Klodnick, Vanessa V.; Bond, Gary R.; Krzos, Izabela M.; Kaiser, Susan M.; Fagan, Marc A.; Davis, Maryann.
Publication Year: 2015.
Number of Pages: 17.
Abstract: Study examined the feasibility of an adaptation of Individual Placement and Support (IPS) supported employment, an evidence-based adult mental health service, for use with early emerging adults (ages 16 to 21) with serious mental health conditions (SMHCs). The IPS model was adapted for this population by integrating it with components of supported education, peer mentorship, and career development and its feasibility was tested in a psychiatric treatment program for early-emerging adults. Participants were 17 to 20 years old. Most were African American, under the custody of the state, with a primary mood disorder diagnosis. This feasibility study tracked the model's development, recruitment, and retention and tracked vocational and educational outcomes for 12 months. Model refinement resulted in the development of a separate educational specialist position, greater integration of the peer mentor with the vocational team, and further specification of the role of peer mentor. There was an 80-percent retention rate in the feasibility evaluation. The adapted model resulted in positive employment and/or education outcomes for nearly half of participants. Of the 35 participants, 49 percent started a job and/or enrolled in an education program over the 12-month period.

Project Number: H133B090018.
Can this document be ordered through NARIC's document delivery service?: Y


NARIC Accession Number: J73466.
Author(s): Razzano, Lisa A.; Cook, Judith A.; Yost, Chantelle; Jonikas, Jessica A.; Swarbrick, Margaret A.; Carter, Tina M.; Santos, Alberto.
Publication Year: 2015.
Number of Pages: 7.
Abstract: Study examined the prevalence and treatment of 17 co-occurring physical health conditions among adults with serious mental health disorders, and identified factors associated with prevalence of the 5 most common medical comorbidities. Data were collected from 457 adults attending publicly funded mental health programs who participated in community health screenings held in 4 states. Face-to-face interviews included standardized items from the National Health Interview Survey and the National Health and Nutrition Examination Survey. Ordinary least squares regression analysis examined associations between prevalence of the 5 most common comorbid conditions
and respondents' demographic, clinical, attitudinal, and health insurance statuses. Compared to the United States general population, prevalence was significantly higher for 14 out of 17 medical conditions assessed. The 5 most common were hyperlipidemia, hypertension, asthma, arthritis, and diabetes. Controlling for age, study site, and Medicaid status, racial/ethnic minorities were almost twice as likely as Caucasians to be diagnosed with hypertension and diabetes; women were almost twice as likely as men to be diagnosed with diabetes; and people with schizophrenia were around half as likely as those with other disorders to be diagnosed with hypertension and arthritis. Age was positively related to all conditions except asthma. Treatment prevalence was below 70 percent for approximately half of ongoing conditions. These results suggest a high level of medical vulnerability and need for coordination of health and mental health services in this population. Associations with age, minority status, and gender point to the need for targeted health care strategies.

Project Number: H133B100028.
Can this document be ordered through NARIC's document delivery service?: Y

10 of 65.

**Abstract:** Study examined the lived experiences of 3 urban, low-income, African American mothers diagnosed with serious mental illnesses (SMI). Ethnographic observations and informal interviews were conducted over 12 months with the mothers and their children. Data were analyzed using a case study approach to identify prominent themes, perspectives, and experiences within and across participating families. Five themes emerged to characterize the lived experiences of African American mothers with SMI: (1) mental illness and mental health services are not a prominent focus in everyday life; (2) families live in a context of ubiquitous violence, loss, and everyday stress; (3) family life is the main focus for mothers as they strive for a better life; (4) mothers have limited social support; and (5) religion is a source of meaning and a resource for the everyday work of recovery. The findings suggest that rehabilitative efforts tailored for this population should not focus on, or reside in, professional mental health services. Meaningful rehabilitative strategies for families might include supported employment, social support, youth mentoring, faith-based supports, and community-based antiviolence efforts.

**Project Number:** H133A080063.
**Can this document be ordered through NARIC's document delivery service?:** Y

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**NARIC Accession Number:** J68849.
**Author(s):** Carpenter-Song, Elizabeth A.; Holcombe, Billy D.; Torrey, John; Hipolito, Maria M. S.; Peterson, Loretta D..

**Publication Year:** 2014.
**Number of Pages:** 8.

**Abstract:** Study examined the lived experiences of 3 urban, low-income, African American mothers diagnosed with serious mental illnesses (SMI). Ethnographic observations and informal interviews were conducted over 12 months with the mothers and their children. Data were analyzed using a case study approach to identify prominent themes, perspectives, and experiences within and across participating families. Five themes emerged to characterize the lived experiences of African American mothers with SMI: (1) mental illness and mental health services are not a prominent focus in everyday life; (2) families live in a context of ubiquitous violence, loss, and everyday stress; (3) family life is the main focus for mothers as they strive for a better life; (4) mothers have limited social support; and (5) religion is a source of meaning and a resource for the everyday work of recovery. The findings suggest that rehabilitative efforts tailored for this population should not focus on, or reside in, professional mental health services. Meaningful rehabilitative strategies for families might include supported employment, social support, youth mentoring, faith-based supports, and community-based antiviolence efforts.

**Project Number:** H133A080063.
**Can this document be ordered through NARIC's document delivery service?:** Y

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**Identifying young adults at risk of Medicaid enrollment lapses after inpatient mental health treatment.** Psychiatric Services (formerly Hospital and Community Psychiatry) , Volume 65(4) , Pgs. 461-468.

**NARIC Accession Number:** J68541.
**Author(s):** Davis, Maryann; Abrams, Michael T.; Wissow, Lawrence S.; Slade, Eric P..

**Publication Year:** 2014.
**Number of Pages:** 8.

**Abstract:** Study determined Medicaid disenrollment rates and identified risk factors among young adults after discharge from inpatient psychiatric treatment. Participants included 1,176 Medicaid-enrolled young adults, ages 18 to 26, discharged from inpatient psychiatric care. Medicaid disenrollment in the 365 days after discharge and disenrollment predictors from the 180-day pre-discharge period (antecedent period) were identified from administrative records. Classification and regression tree and probit regression analysis were used. Results showed that 32 percent of the sample was disenrolled from Medicaid within a year of discharge. Both analytical approaches converged on four main risk factors: being in the Medicaid enrollment category for persons with a nondisabled low-income parent or for a child in a low-income household, being age 18 or 20 at discharge, having a Medicaid enrollment gap in the antecedent period, and having no primary care utilization in the antecedent period. For the 48 percent of the sample continuously enrolled in the antecedent period who were in the enrollment categories for disabled adults or foster care children, the disenrollment rate was 13 percent. Findings indicate that a substantial minority of Medicaid-enrolled young adults discharged from inpatient care were disenrolled from Medicaid within a year. About half the sample had a low disenrollment risk, but the other half was at substantial risk. Risk factors largely reflected legal status changes that occur among these transition-age youths. Identifying inpatients at high risk of disenrollment and ensuring continuous coverage should improve access to needed post-discharge supports.

**Project Number:** H133B090018.
**Can this document be ordered through NARIC's document delivery service?:** Y
12 of 65.

**Focal point:** Co-occurring disorders. , Volume 28(1) , Pgs. 1-32.

**NARIC Accession Number:** O19422.

**Author(s):** Gowen, L. Kris; Aue, Nicole (Eds.).

**Publication Year:** 2014.

**Number of Pages:** 32.

**Abstract:** This journal issue examines the treatment of co-occurring substance use and mental health disorders in youth. Topics include: the rise and success of collegiate recovery programs; treating young people with co-occurring disorders; using social networking to promote strengths-based mental health; helping young people get treatment in juvenile justice and beyond; a parent perspective on transition-age youth; the Patient Protection and Affordable Care Act and the Mental Health Parity and Addiction Equity Act: addressing co-occurring substance use disorder services for transition-aged youth; and disparities in treatment for substance use disorders and co-occurring disorders in ethnic/racial minority youth.

**Project Number:** H133B090019.

**Can this document be ordered through NARIC’s document delivery service?:** Y

13 of 65.


**NARIC Accession Number:** J73725.

**Author(s):** Lukyanova, Valentina V.; Balcazar, Fabricio E.; Oberoi, Ashmeet K.; Suarez-Balcazar, Yolanda.

**Publication Year:** 2014.

**Number of Pages:** 10.

**Abstract:** Study examined the factors that contribute to racial disparities in employment outcomes for African-American and White vocational rehabilitation (VR) consumers with mental illness. VR data were obtained from a Midwestern state that included 2,122 African American and 4,284 White participants who reported mental illness in their VR records. Logistic regression analyses were conducted. Results indicated that African Americans had significantly more closures after referral and were closed as non-rehabilitated more often than Whites. Logistic regressions indicated that African Americans are less likely to be employed compared to Whites. The regression also found differences by gender (females more likely to find jobs than males) and age (middle age consumers, ages 36 to 50, were more likely to find jobs than younger consumers, ages 18 to 35). Case expenditures between $1,000 and $4,999 were significantly lower for African Americans. VR agencies need to remain vigilant of potential discrepancies in service delivery among consumers from various ethnic groups and work hard to assure as much equality as possible.

**Project Number:** H133P110004.

**Can this document be ordered through NARIC’s document delivery service?:** Y

14 of 65.

**Appealing features of vocational support services for Hispanic and non-Hispanic transition age youth and young adults with serious mental health conditions.** Journal of Behavioral Health Services & Research

**NARIC Accession Number:** J69054.

**Author(s):** Torres Stone, Rosalie A.; Delman, Jonathan; McKay, Colleen E.; Smith, Lisa M..

**Publication Year:** 2014.

**Number of Pages:** 14.

**Abstract:** Study examined the experiences and general vocational needs of transition age youth and young adults (TAYYAs) diagnosed with serious mental health conditions (SMHCs). In-person, qualitative interviews were conducted with 57 non-Hispanic and Hispanic TAYYAs with SMHCs enrolled in three vocational support programs in Massachusetts: vocational rehabilitation, individual placement and support; and the clubhouse model. Six themes emerged from the data: three themes were identified as social capital (supportive relationships, readily available workplace supports, and vocational preparation), two themes related to human capital (effective educational supports and work experience), and one theme related to cultural capital (social skills training). Unique features (Spanish-speaking staff and/or familiar in Latino culture, familial-like staff support) were frequently noted by Hispanic TAYYAs.

**Project Number:** H133B090018.

**Can this document be ordered through NARIC’s document delivery service?:** Y

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**Behind the scenes of a research and training collaboration: Power, privilege, and the hidden transcript of race.** Culture, Medicine and Psychiatry , Volume 37(2) , Pgs. 288-306.
This article examines a federally funded research and training collaboration between an Ivy League psychiatric research center and a historically Black university and medical center. This collaboration focuses on issues of psychiatric recovery and rehabilitation among African Americans. In addition, this multidisciplinary collaboration aims to build the research capacity at both institutions and to contribute to the tradition of research in culture and mental health within the medical social sciences and cultural psychiatry. Taking an auto-ethnographic approach, the authors illustrate how collaborative relationships unfold and are constructed through ongoing reciprocal flows of knowledge and experience. Central to this aim is a consideration of how issues of power, privilege, and the hidden transcript of race shape the nature of research and training efforts.

Racial and ethnic cultural factors in the process of acceptance of mental illness. Rehabilitation Counseling Bulletin (RCB), Volume 56(4), Pgs. 229-239.

Methods for translating evidence-based behavioral interventions for health-disparity communities. Preventing Chronic Disease

This chapter examines the social and cultural roots and implications of current concepts of recovery. During the last decade the term "recovery" has come to refer to a social movement promoting a reorientation in psychiatric care, toward ensuring that individuals can live a full life in their communities. Along with this reorientation, recovery is increasingly conceived of as a process, rather than an outcome, with individuals described as "being in recovery" rather than as "recovering from" an affliction. The new recovery "movement", with its roots in civil rights and independent living movements, arose in part as a reaction to perceived attitudes of pessimism and paternalism inherent in conventional psychiatric care. It envisions for individuals with mental illness a reassertion of their rights to a dignified and meaningful life in the community and a renewed sense of agency, with an active say in the direction of their own healthcare. Although sometimes framed in the universalistic language of human rights, recovery is rooted in specific cultural concepts of self and personhood. In particular, cultural notions of the person's connection to family, community, and spirituality play a key role in local notions of recovery. This is illustrated with examples from qualitative research with African-Americans in the United States, indigenous peoples in Canada, and patients in Nigeria. Understanding the cultural and historical roots of recovery provides a framework for considering the relevance of recovery for diverse cultural groups, both within North American and European societies and in other parts of the world.

Can this document be ordered through NARIC's document delivery service?: Y
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NARIC Accession Number: J65386.
Author(s): Hipolito, Maria M. S.; Malik, Mansoor; Carpenter-Song, Elizabeth; Whitley, Rob.
Publication Year: 2012.
Number of Pages: 4.
Abstract: Article describes a week-long summer course designed to provide training for psychiatry residents, clinicians, and researchers on key issues in African American mental health treatment and research. Minorities are underrepresented as providers, researchers, and as administrators and policymakers in mental health services. The Summer School, through the collaborative efforts between Dartmouth Psychiatric Research Center and Howard University, is intended to narrow this gap and enhance the pipeline supply of underrepresented minorities in the field of psychiatric research. The Dartmouth-Howard Collaboration provides a model for a feasible training program that imparts knowledge regarding culture and mental health, and the conduct of mental health research, with particular attention to African American mental health. Participants’ questionnaire rating responses indicated that their experience in the Summer School program enhanced their understanding and experience in dealing with minority, largely African American patients and the diverse factors that affect their treatment.
Project Number: H133A080063.
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NARIC Accession Number: J66673.
Author(s): Salazar, Amy M.; Keller, Thomas E.; Gowen, L. Kris; Courtney, Mark E..
Publication Year: 2012.
Number of Pages: 7.
Abstract: Study investigated the lifetime exposure to specific types of traumatic events based on interviews with youth in the child welfare system, as well as the prevalence of posttraumatic stress disorder (PTSD) diagnoses associated with each type of trauma. Data were obtained from a longitudinal panel study of 732 adolescents aged 17 and 18 who were in foster care. Lifetime trauma exposure and PTSD diagnosis were assessed using the Composite International Diagnostic Interview. Statistical comparisons were made using logistic regressions. The majority of respondents had experienced at least one trauma in their lifetime. While overall trauma prevalence did not differ by gender, males were more likely to experience interpersonal violence and environmental trauma, while females were more likely to experience sexual trauma. Caucasian participants reported higher rates of trauma exposure than African-American participants did. The types of trauma associated with the highest probability of a lifetime PTSD diagnosis were rape, being tortured or a victim of terrorists, and molestation. Youth in foster care are a highly traumatized population and meet diagnostic criteria for PTSD at higher rates than general youth populations. The ongoing impact of trauma may be particularly problematic for these young people given their abrupt transition to independence.
Project Number: H133B090019.
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"Thank you God": Religion and recovery from dual diagnosis among low-income African Americans. Transcultural Psychiatry, Volume 49(1), Pgs. 87-104.

NARIC Accession Number: J65685.
Author(s): Whitley, Rob.
Publication Year: 2012.
Number of Pages: 18.
Abstract: Study examined the relationship between religion and recovery among low-income African Americans diagnosed with severe mental illness and a co-occurring substance use disorder. A 6-year ethnographic study was conducted with poor African Americans with lived experience of dual diagnosis in Washington, DC, to assess barriers and facilitators to recovery. The study set out to answer two research questions: (1) What is the self-identified role of religious commitment and activity in participants’ recovery from dual diagnosis? (2) What (if any) religious activities, notions, and resources are positively harnessed to enhance recovery? Research activities consisted of focus groups and participant observation. Results indicated high levels of Christian religiosity among participants. Participants perceived their ongoing recovery as a process reliant upon (1) an intimate and personal relationship with God, and (2) engagement in certain core private religious activities, most notably prayer, reading of scripture, and listening to
religiously inspired radio, television, or music. Participants' religiosity was underpinned by a Pauline theology of transformation and reconciliation. Findings suggest that psychiatric professionals serving African Americans living with a dual diagnosis may increase effectiveness by better harnessing client religiosity to assist recovery.

Project Number: H133A080063.
Can this document be ordered through NARIC's document delivery service?: Y

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Religious competence as cultural competence. Transcultural Psychiatry, Volume 49(2), Pgs. 245-260.

NARIC Accession Number: J65686.
Author(s): Whitley, Rob.
Publication Year: 2012.
Number of Pages: 16.
Abstract: Article examines the relationship between religion and psychiatry and the implications for the notion of religious competence as a component of clinical cultural competence. Definitions of cultural competence often refer to the need to be aware and attentive to the religious and spiritual needs and orientations of patients. However, the institution of psychiatry maintains an ambivalent attitude to the incorporation of religion and spirituality into psychiatric practice. This is despite the fact that many patients, especially those from underserved and underprivileged minority backgrounds, are devotedly religious and find much solace and support in their religiosity. The author uses the case of mental health of African Americans as an extended example to support the argument that psychiatric services must become more closely attuned to religious matters and suggests ways in which this can be achieved. Attention to religion can aid in the development of culturally competent and accessible services, which in turn, may increase engagement and service satisfaction among religious populations.

Project Number: H133A080063.
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NARIC Accession Number: J63159.
Author(s): Cross, Terry L.; Friesen, Barbara J.; Jivanjee, Pauline; Gowen, L. Kris; Bandurraga, Abby; Matthew, Cori; Maher, Nichole.
Publication Year: 2011.
Number of Pages: 21.
Abstract: Article describes the development of a culturally grounded method for measuring outcomes and demonstrating the effectiveness of culturally specific services for Native American youth. This method was developed out of a community-based participatory research project involving Native elders, families, youth, and community partners, as well as the board, staff, and management of an agency serving an urban American Indian community. Through a series of focus groups, community members defined success for Native youth. Responses were analyzed using the four quadrants of the Relational Worldview model, an indigenous way of understanding life from a concept of wholeness and balance as a framework. The use of focus groups in this context and the cultural adaptations necessary both in conducting the groups and in the analysis of the data are described. Focus group results and next steps in the development of a practice-based approach to demonstrating the effectiveness of culturally specific services are summarized. Findings illustrate the need to broaden definitions of success used to guide the development and evaluation of effective services beyond those usually used to identify evidence-based practices, as well as the importance attached to Native youth gaining spiritual understanding and knowledge and skills in traditional cultural practices as essential elements of achieving community-defined outcomes.

Project Number: H133B090019; H133B040038.
Can this document be ordered through NARIC's document delivery service?: Y

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NARIC Accession Number: J62668.
Author(s): Mizock, Lauren; Harkins, Debra; Ray, Sukanya; Morant, Renee.
Publication Year: 2011.
Number of Pages: 18.
Abstract: Study examined the interaction of researcher and participant race in collecting data on race-based traumatic stress. Forty qualitative narrative interviews were conducted involving 20 Black participants, 20 White participants, one Black researcher, and one White researcher. The race of the researcher and participant were varied
to examine differences in discussion of traumatic racism. Results revealed that the race of researcher and participant impacted the story of traumatic racism. Excerpts from each researcher–participant racial dyad interview are included to highlight main findings. Suggestions for future research and clinical implications of issues related to traumatic racism and researcher race are proposed.

Project Number: H133P070001.
Can this document be ordered through NARIC’s document delivery service?: Y
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Perceptions of psychiatric services held by African-American male veterans. Points of Empowerment, Volume 4

NARIC Accession Number: O18181.
Author(s): Gary, Kelli W.
Publication Year: 2010.
Number of Pages: 2.
Abstract: Fact sheet provides data concerning the perceptions held by African American male veterans about psychiatric services. Discussion includes socio-cultural and system-level barriers, and recommendations for future research and practice.
Project Number: H133A080060.
Can this document be ordered through NARIC's document delivery service?: Y

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Perceptions of psychiatric services held by older African-American males. Points of Empowerment, Volume 3

NARIC Accession Number: O18180.
Author(s): Gary, Kelli W.
Publication Year: 2010.
Number of Pages: 2.
Abstract: Fact sheet provides data concerning the perceptions held by older African American male adults about psychiatric services. Discussion includes sources of referral for mental health services; cultural, access, and system-level barriers, and recommendations for future research and practice.
Project Number: H133A080060.
Can this document be ordered through NARIC's document delivery service?: Y

32 of 65.

NARIC Accession Number: J59690.
Author(s): Jonikas, Jessica A.; Kiosk, Stephen; Grey, Dennis D.; Hamilton, Marie M.; McNulty, James; Cook, Judith A..
Publication Year: 2010.
Number of Pages: 9.
Abstract: Study explored perceptions of adults with psychiatric disabilities regarding cultural competency of peer-run mental health support groups and programs. Participants were recruited via mental health list-servs, web sites, newsletters, emails, and word of mouth to complete an online survey. A total of 527 participants were surveyed about cultural competency barriers facing peer-run programs; common reasons for not using peer services; and strategies to engage diverse communities. Results showed that both multicultural and Caucasian respondents agreed that lack of funding and staff education about diversity were barriers to cultural competency in peer programs. Multicultural respondents were more likely than whites to feel that both the recognition of the need for and interest in attending cultural competency training is lacking in peer programs, as well as information about the diverse composition of peer program memberships. Among those who had never participated in peer support, people of color were more likely than whites to endorse feeling they would not belong and believing their languages would not be spoken in peer programs. Whites, on the other hand, were more likely to cite a preference for professional over peer support, while nearly half of both groups indicated that the main reason for non-attendance is a lack of knowledge about peer programs. Qualitative results highlighted successful outreach and engagement strategies. These findings were subsequently used to develop a cultural competency tool that was pilot-tested among peer-run programs.
Project Number: H133B050003; H133B100028.
Can this document be ordered through NARIC's document delivery service?: Y

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The empowerer, Issue 2A, Spring 2010.

NARIC Accession Number: O18175.
Author(s): Lewis, Allen; Shamburger, Aisha (Eds.).
Publication Year: 2010.
Number of Pages: 7.
Abstract: Newsletter provides quarterly updates on the research and scholarship, capacity building, training/dissemination and knowledge translation activities, and upcoming events of Project Empowerment. The goal of this project is to identify and evaluate current practice and methods in the conduct of minority disability research and to begin to increase capacity in this area. In this issue: special journal issues, journal articles, and conference presentations; update on research studies; capacity building forum; profile of a recent doctoral graduate and new minority disability researcher, Dr. Mark Richardson; profile of a current doctoral student, Almaz Mimi Getachew; latest archived webcast: Perceptions of Psychiatric Services Held by African American Males: Implications for Service Providers and Researchers; a research to action note: Helping Persons with Traumatic Brain Injury of Minority Origin Improved Career and Employment Outcomes; and upcoming grant-writing module.
Project Number: H133A080060.
Can this document be ordered through NARIC's document delivery service?: Y

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NARIC Accession Number: J59653.
Author(s): Lewis, Allen N.; Arango-Lasprilla, Juan C.
Publication Year: 2010.
Number of Pages: 2.
Abstract: Article introduces this special journal issue focusing on multicultural challenges in employment of people with disabilities. Subsequent articles address: (1) the engagement of ethnically diverse individuals with disabilities in the vocational rehabilitation system, (2) application of the behavioral model of service utilization to predict factors associated with vocational rehabilitation use among Latino men with HIV/AIDS, (3) predicting outcomes among women of color with psychiatric disabilities, (4) evaluation and follow-up of supported employment initiatives in Spain from 1995 to 2008, (5) employment and vocational rehabilitation experiences among Latinos with different patterns of acculturation, and (6) employment outcomes after traumatic brain injury among racial and ethnic minority groups.
Project Number: H133A080060.
Can this document be ordered through NARIC's document delivery service?: Y

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Entrecruzando nuestros caminos: Entrenamiento para compañeros-promotores de recuperación y rehabilitación.
NARIC Accession Number: O17861.
Author(s): Restrepo-Toro, María E.
Publication Year: 2010.
Number of Pages: 24.
Abstract: This Spanish-language document provides a detailed lesson plan for those training peer healthcare providers for people with mental illnesses. The plan is made up of three lessons covering: (1) communication skills, (2) promoting recovery, and (3) preparation for rehabilitation. These lessons have several components: (1) discussion, (2) lecture, (3) questions and answers, (4) demonstration, and (5) small group interactions. The plan also includes a training-session orientation that includes the history of the peer-provider movement and the self-reliance movement within the community of people with disabilities. Recommendations for further study and training are provided, including Latino BestNOW and Contac, Leadership Academy.
Project Number: H133B040026.
Can this document be ordered through NARIC's document delivery service?: Y

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Perceptions of psychiatric services held by African-American male adults. Points of Empowerment, Volume 2
NARIC Accession Number: O18179.
Author(s): Richardson, Mark A.
Publication Year: 2010.
Number of Pages: 2.
Abstract: Fact sheet provides data concerning the perceptions held by African American male adults about psychiatric services. Discussion includes sources of referral for mental health services, access and cultural barriers, and recommendations for future research and practice.
Perceptions of psychiatric services held by African-American male youth. Points of Empowerment, Volume 1

NARIC Accession Number: O18178.
Author(s): Shamburger, Aisha.
Publication Year: 2010.
Number of Pages: 2.
Abstract: Fact sheet provides data concerning the perceptions held by African American male youth about psychiatric services. Discussion includes sources of referral for mental health services, access and cultural barriers, parental influences, and recommendations for future research and practice.

The psychiatric rehabilitation of African Americans with severe mental illness. Psychiatric Services (formerly Hospital and Community Psychiatry), Volume 61(5), Pgs. 508-511.

NARIC Accession Number: J58605.
Author(s): Whitlley, Rob; Lawson, William B.
Publication Year: 2010.
Number of Pages: 4.
Abstract: Article discusses issues related to the psychiatric rehabilitation of African Americans with severe mental illness. Evidence suggests that African Americans suffer from significant and persistent disparities within the mental health system. African Americans with severe mental illness are less likely than Euro-Americans to access mental health services, more likely to drop out of treatment, more likely to receive poor-quality care, and more likely to be dissatisfied with care. Dominant patterns of treatment for African Americans with psychiatric disabilities are often least suited to long-term rehabilitation. To be successful, interventions must simultaneously target three levels: macro, provider, and patient. Five domains are posited that cut across these levels: these are cross-cultural communication, discrimination, explanatory models, stigma, and family involvement. These need appropriate research and action to enhance the psychiatric rehabilitation of African Americans. Potential solutions to overcome barriers raised within these domains are suggested.


NARIC Accession Number: J58740.
Author(s): Wong, Yin-Ling I.; Sands, Roberta G.; Solomon, Phyllis L.
Publication Year: 2010.
Number of Pages: 14.
Abstract: Study examined the perspectives of diverse groups of mental health consumers on the concept of community. Seven focus groups were conducted with a total of 62 participants. Transcripts were analyzed using the grounded theory approach. The core domains that constitute the notion of community were identified, along with commonalities and differences in the perception of community along the lines of ethnicity and sexual orientation/gender identity. Two domains, togetherness and community acceptance, emerged as common to four types of communities that were most frequently mentioned in the focus group discussion: (1) cultural identity, (2) treatment community, (3) faith community, and (4) neighborhood. The findings show that identities other than those associated with mental illness and the role of service user are critical to the understanding of the psychological sense of community among people with psychiatric disabilities. The authors suggest that mental health providers should empower consumers to expand their "personal communities" beyond that of mental health clients using their diverse identities, and design interventions for addressing the stigma emanating from identities that are discriminated against by the wider society.
collaboration. Community Mental Health Journal

NARIC Accession Number: J58746.
Author(s): Carpenter-Song, Elizabeth; Whitley, Rob; Lawson, William; Quimbly, Ernest; Drake, Robert E..
Publication Year: 2009.
Number of Pages: 13.
Abstract: Article describes recent collaborative efforts between the Dartmouth Psychiatric Research Center and Howard University to understand (and ultimately reduce) disparities in mental health care among African Americans. Researchers from Dartmouth and Howard recently formalized a longstanding collaboration through the support of a grant aimed at understanding recovery and rehabilitation for African Americans with severe mental illness. Grant-sponsored efforts have included two seminars between multi-disciplinary mental health researchers and clinicians to inform the implementation of a collaborative research and training program. This article outlines the prominent themes arising from these seminars on the issue of health disparities agreed upon by our multi-disciplinary research team. These are (1) situating disparity research in the context of social justice; (2) understanding trends in disparities; (3) promoting a sophisticated understanding of culture and its role in disparities; (4) critically assessing strategies that attempt to mitigate disparities; (5) developing a reflexive research agenda.
Project Number: H133A080063.
Can this document be ordered through NARIC's document delivery service?: Y

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Children’s beliefs about causes of childhood depression and ADHD: A study of stigmatization. Psychiatric Services (formerly Hospital and Community Psychiatry), Volume 60(7), Pgs. 950-957.

NARIC Accession Number: J56792.
Author(s): Coleman, Daniel; Walker, Janet S.; Lee, Junghoe; Friesen, Barbara J.; Squire, Peter N..
Publication Year: 2009.
Number of Pages: 8.
Abstract: Study examined children’s beliefs about the causes of childhood mental health problems. A total of 1,091 children were randomly assigned to read vignettes about a peer with depression, attention-deficit hyperactivity disorder (ADHD), or asthma and respond to an online survey. Causal attributions were assessed with 7 items identified from literature: parenting, substance abuse, lack of effort, genetics, brain differences, God’s will, and stress. Social distance, the willingness to interact with people with mental illness in different situations, was assessed with the Social Distance Scale. Correlations were computed between social distance and the 7 causation items. Logistic regression models for each causal item tested main effects and interaction terms for condition (ADHD or depression), demographic characteristics, and self-reported diagnosis of depression or ADHD. Results demonstrated a consistent presence of stigmatization in children’s beliefs about the causes of childhood mental health problems. The beliefs that parenting, substance abuse, and low effort caused the condition were all strongly inter-correlated and were moderately correlated with social distance. The depression condition was the strongest predictor of endorsement of the most stigmatizing causal beliefs. Stigmatizing causal beliefs were evident for ADHD, but with more modest effects. Children who reported a diagnosis were more likely to endorse parenting and substance abuse as causes (attenuated for ADHD). Modest to moderate effects were found for variation in causal beliefs across ethnic groups.
Project Number: H133B990025.
Can this document be ordered through NARIC's document delivery service?: Y

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Conceptualizing community: A comparison of neighborhood characteristics of supportive housing for persons with psychiatric and developmental disabilities. Social Science & Medicine, Volume 68(8), Pgs. 1376-1387.

NARIC Accession Number: J57792.
Author(s): Wong, Yin-Ling I.; Stanhope, Victoria.
Publication Year: 2009.
Number of Pages: 12.
Abstract: Study compared the neighborhood characteristics of publicly-funded housing for people with psychiatric disabilities (PD) and developmental disabilities (DD) in a metropolitan community. The purpose of the study was to determine whether the contrasting housing approaches are reflected at an ecological level and to consider how these findings relate to the goal of community integration for people with PD and DD. Administrative databases provided residential addresses of 1,932 residents with PD living in 297 locations and 1,716 residents with DD living in 749 locations in the city of Philadelphia. The 2000 United States Census and city's police department database provided information on neighborhood characteristics. Geographic information system methodology generated maps displaying the distribution of housing locations in relation to spatial dispersion, distress, stability, safety, and
race/ethnic diversity. Statistical analyses compared neighborhood characteristics of the DD and PD populations. Results indicated that the DD population in supportive housing was more spatially dispersed, and lived in less distressed, less unstable, more secure, but equally racially/ethnically diverse neighborhoods when compared to the PD population in supportive housing. Greater geographic dispersal among those with DD may be the result of more emphasis on normalization within policies and programs determining the location of their housing. The higher funding levels for housing and residential support for people with DD also provided programs with the option of placing people in higher income neighborhoods.

Project Number: H133B031109.

Can this document be ordered through NARIC's document delivery service?: Y

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Building opportunities, bringing hope. Recovery & Rehabilitation, Volume 4(2)

NARIC Accession Number: O17523.
Author(s): St. Pierre, Cathy (Ed.).
Publication Year: 2008.
Number of Pages: 5.
Abstract: This newsletter focuses on efforts to address the significant barriers that exist in providing adequate mental health and rehabilitation services for Latinos. These barriers include an insufficient number of culturally sensitive mental health providers; an insufficient body of research, conducted with Latino mental health consumers; and minimal involvement of Latinos and Latino consumers in the shift in mental health services to a recovery-oriented model. Through the Latino Initiatives, the Center for Psychiatric Rehabilitation has been working over the past ten years to create tools, conduct research, and provide training in collaboration with Latinos with mental illness, family members, and professionals to improve mental health services for Latino consumers.

Project Number: H133B040026.

Can this document be ordered through NARIC's document delivery service?: Y

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Focal point: Effective interventions for underserved populations. , Volume 21(2), Pgs. 1-32.

NARIC Accession Number: O17230.
Author(s): Walker, Janet S.; Gowen, L. Kris; Aue, Nicole (Eds.).
Number of Pages: 32.
Abstract: This issue describes a number of interventions and programs designed to respond to the specific needs of populations that have been historically underserved. Topics include: new directions in the treatment of Hispanic youth; intervening in the lives of runaway and homeless youth; successful strategies for improving the lives of American Indian and Alaska Native youth and their families; adapting attachment-based family therapy for depressed and suicidal gay, lesbian, and bisexual adolescents; effective mentoring programs; school-based telemental health services; a culturally competent model program for African American children in the foster care system; and research and evaluation programs for Asian American, Native Hawaiian, and other Pacific Islander populations.

Project Number: H133B040038.

Can this document be ordered through NARIC's document delivery service?: Y

45 of 65.

Help-seeking pathways and conceptions of illness among Chinese Americans with depression.

NARIC Accession Number: O17337.
Author(s): Wan, Yu-Mui C.
Number of Pages: 24.
Abstract: This project investigated the help-seeking pathways and conceptions of mental illness among Chinese Americans, as well as the role their families play in the help-seeking process. The study focuses on 20 Chinese Americans with depression who do not utilize formal mental health services or terminated mental health services prematurely. It also explored the relationships between their explanatory models of illness and help-seeking behaviors, and analyzed how treatment decisions were negotiated between Chinese Americans with depression and their significant others. Findings suggest that explanatory model of illness in itself does not determine the help-seeking behaviors, that support from significant others played an important role in enhancing the individual's willingness to seek mental health services, and that there are practical and cultural barriers that prevent Chinese Americans from seeking help. It is recommended that mental health professionals make use of community resources in communicating, educating, and reaching out to Chinese Americans with depression. The importance of motivating and involving family in treatment is discussed.

NARIC Accession Number: J56517.
Author(s): Wong, Yin-Ling; Nath, Sara B.; Solomon, Phyllis L.
Number of Pages: 17.
Abstract: Study examined patterns of organizational involvement among consumers of mental health services residing in supported independent housing (SIH) and indentified the correlates of organizational membership. SIH refers to an independent community living arrangement that is coupled with the provision of flexible and individualized support services. Data regarding group and organizational involvement, social and demographic variables, clinical characteristics, and service use patterns were obtained from 252 participants. Groups and organizations were classified according to whether or not they have a behavioral health focus. Demographic, clinical, and service use characteristics were examined as potential predictors of membership. Results indicated that 60 percent of the sample was involved in some kind of behavioral or non-behavioral health organization. Higher rates of membership were found among older adults, African Americans, those with more years of education, and those with higher incomes. Other correlates specific to SIH included prior homelessness, perceived discrimination, substance abuse history, psychiatric symptoms, psychiatric diagnosis, and contact with service providers.
HAVING OUR SAY: WOMEN MENTAL HEALTH CONSUMERS/SURVIVORS IDENTIFY THEIR NEEDS AND STRENGTHS.

NARIC Accession Number: O12638.
Author(s): Jonikas, J.; Bamberger, E.; Laris, A.
Number of Pages: 21.
Abstract: Booklet about the needs and concerns of women with psychiatric disabilities. Data are from focus group interviews and open-ended individual interviews with Latina, African American, and Caucasian consumers/survivors of psychiatric services. Topics covered include: rehabilitation and recovery; parenting; relationships; safety and abuse; vocational services and employment; finances; housing and independent living; and physical health needs. Includes suggestions for ways to address each concern.
Project Number: H133B50004.
Can this document be ordered through NARIC's document delivery service?: Y

ASSESSING EMPLOYMENT DISCRIMINATION CHARGES FILED BY INDIVIDUALS WITH PSYCHIATRIC DISABILITIES UNDER THE AMERICANS WITH DISABILITIES ACT.


NARIC Accession Number: J35682.
Author(s): Moss, K; Johnsen, M; Ullman, M.
Number of Pages: 25.
Abstract: Article comparing outcomes of employment discrimination complaints filed under the Americans with Disabilities Act (ADA) by disability type, with a focus on outcomes for persons with psychiatric disabilities. The authors analyzed data on charges filed with the Equal Employment Opportunity Commission (EEOC) during a 3 year period from July 26, 1992, when the ADA employment provisions went into effect, and June 30, 1995, when there was an important change in the EEOC charge processing policy. They present results on the following: (1) the percentage of charges that result in benefits to the person filing the complaint, by disability type; (2) the kind of benefits received; (3) whether demographic characteristics (race, ethnic origin, gender, age) are associated with differences in outcome; and (4) whether the type of issue over which charges are filed is associated with differences in charge outcome.
Project Number: H133F50029.
Can this document be ordered through NARIC's document delivery service?: Y

THE RURAL EXCHANGE.

NARIC Accession Number: O12236.
Publication Year: 1997.
Number of Pages: 20.
Abstract: Newsletter of the Montana University Affiliated Rural Institute on Disabilities, University of Montana, Missoula. Topics covered in the April 1997 issue include: self-employment and the Rehabilitation Act; Native Americans and the Americans with Disabilities Act (ADA); the Rural Institute’s American Indian Disability Legislation Project, studying disability legislation as it applies to Native Americans, and the role of disability in Native American culture; connecting Native Americans to disability services; community rehabilitation programs among Native Americans; and a list of research institutes and federal agencies related to Native Americans and disability. V9, N2 (1996): Topics include: Rural Visibility and Rural advocacy; MonTech; Rural Advocacy and the hierarchy of worthiness; Etiquette and consumer involvement; History of the self-advocacy movement; The value of trust; Psychiatric survivor advocacy; Self-advocacy and independent living; West Virginia’s leadership academy. V11, N2 (1998): Topics include: Summaries of 17 new Rural Institute projects including a new five-year Research and Training Center on Rural Rehabilitation Services (RTC: Rural). RTC: Rural will conduct 10 research projects in four core areas. V12, N1 (1999): Topics include: Healthcare Ethics in rural communities; Bioethics in rural America; Thalidomide; Rural hospitals and organ donation regulations; Rural culture and mandatory requests for organ donations; and ethical considerations for health care and people with disabilities. V12, N2 (1999): Topics include: Entrepreneurs with disabilities; self-employment curriculum for VR counselors; President’s task force on employment of adults with disabilities; Montana’s micro loan program for entrepreneurs with disabilities; and more V14, N1 (2001): Topics include: Self-employment for individuals with psychiatric disabilities; Rural Institute launches employment service; worker cooperative businesses; careers through partnerships; and new choices for communities through self-
employment. V14, N2 (2001): Topics include: Mentoring for rehabilitation leaders; recruitment and retention of quality employees; effective rural outreach; geographical diversity; outstationing; and igniting the spirit through coaching.

**Project Number:** H133B20002.

**Can this document be ordered through NARIC’s document delivery service?: Y**

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THE ISSUES PAPERS: EIGHTH ANNUAL FORUM ON ISSUES IN VOCATIONAL ASSESSMENT.

**NARIC Accession Number:** O12479.
**Author(s):** Fry, Ronald R.
**Publication Year:** 1997.
**Number of Pages:** 265.
**Abstract:** Collection of papers presented at the Eighth National Forum on Issues in Vocational Evaluation and Assessment, held in Colorado Springs, CO, during March 1997. Topics include: current practices and trends; use of vocational assessment in school settings and transition; use of the internet; work adjustment and work hardening; and special populations, including older adults, worker's compensation clients, persons with traumatic brain injury (TBI), persons with psychiatric disabilities, victims of domestic violence, and African Americans.

**Project Number:** H133B30088.

**Can this document be ordered through NARIC’s document delivery service?: Y**

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PEOPLE CHARACTERISTICS THAT AFFECT EMPLOYMENT OUTCOMES. In Menz, Eggers, Wehman, & Brooke (Eds.), Lessons for improving employment of people with disabilities from vocational rehabilitation research (pp. 33-48)

**NARIC Accession Number:** J33517.
**Author(s):** Sanderson, P. L.
**Publication Year:** 1997.
**Number of Pages:** 16.
**Abstract:** Chapter from a book on practical applications of disability and vocational rehabilitation (VR) research, providing information on research related to the differing needs of people with different characteristics and in different populations. Populations discussed include: rural residents; ethnic minorities, particularly American Indians/Alaska Natives; persons with head injuries; and persons with serious mental illness.

**Project Number:** H133B30068.

**Can this document be ordered through NARIC’s document delivery service?: Y**

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STRATEGIES THAT ACHIEVE IMPROVED EMPLOYMENT OUTCOMES. In Menz, Eggers, Wehman, & Brooke (Eds.), Lessons for improving employment of people with disabilities from vocational rehabilitation research (pp. 87-99)

**NARIC Accession Number:** J33519.
**Author(s):** Schriner, K.
**Publication Year:** 1997.
**Number of Pages:** 13.
**Abstract:** Chapter from a book on practical applications of disability and vocational rehabilitation (VR) research, providing information on research, program development projects, and policy and program evaluation related to strategies to improve employment outcomes for persons with disabilities. Describes model building research at Rehabilitation Research and Training Center (RTC), including: a project for the diffusion of service delivery changes called for in the Rehabilitation Act of 1992; a project to assign vocational specialists to new clients at a community mental health center; a project to identify the features of rehabilitation programs that are most helpful to people with psychiatric disabilities; a project to evaluate public sector employment for Native Americans with severe disabilities; a consumer-driven model called the Choose-Get-Keep model; and a project on effective job search strategies. Also describes program and policy evaluation research on self-employment and supported employment.

**Project Number:** H133B30059.

**Can this document be ordered through NARIC’s document delivery service?: Y**

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**NARIC Accession Number:** J35265.
Article about a 3-year prospective study of older mothers living with adult children with either mental retardation (n = 308) or mental illness (n = 73), meant to determine what factors predict the end of co-residence and what the results are. With regard to predictors, it was found that adults with mental retardation were more likely to move away from the parental home if their mothers were older and in poorer health, or if they had been on a waiting list. Adults with psychiatric disabilities were more likely to move away from home when the adult child had more behavior problems and when the mother was apt to focus on and vent her emotions. With regard to outcomes, the following was found: 95.6% of those with mental retardation and 21.7% of those with psychiatric disabilities were in supervised settings after leaving the parental home; the great majority of mothers continued to have frequent contact with their children, and a large minority continued caregiving; and the end of co-residence resulted in lower feelings of maternal burden, but did not affect depressive feelings.

Project Number: H133B30069.
Can this document be ordered through NARIC's document delivery service?: Y
include: cultural competence self-assessment questionnaire, tips for accessing and involving minority families, the Pennsylvania and the South Carolina Department of Mental Health cultural competence plans; research reviews, cultural competence and the juvenile justice system, and outreach efforts for underserved families of children with neurobiological, emotional, or behavioral disorders.

**Project Number:** H133B40021.

**Can this document be ordered through NARIC's document delivery service?:** Y

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**A PROFILE OF CLIENTS SERVED BY A MOBILE OUTREACH PROGRAM FOR HOMELESS MENTALLY ILL PERSONS, P 1139-1141.** HOSPITAL AND COMMUNITY PSYCHIATRY, Volume 45(11)

**NARIC Accession Number:** J29438.

**Author(s):** Slagg, N.B; Lyons, J S; Cook, J A; Wasmer, D J; Ruth, A.

**Publication Year:** 1994.

**Number of Pages:** 3.

**Abstract:** Paper discusses the services available from mobile outreach programs for homeless individuals with mental illness, describing the population serviced by one mobile assessment program in its first 2 years of operation. The program began in 1990, serving urban Chicago and offering assessment and brief intervention in immediate crisis situations. It also offers linkage with ongoing services in order to help prevent further decompensation. Ten staff members provide the services from 8 a.m. until midnight. They travel in two vans linked with walkie talkies and cellular phones. The vans travel to areas where homeless people congregate. Data on 1,430 clients served over 2 years indicated that during those 2 years, more than 65 percent of the clients were members of minority groups and 60 percent were male. A total of 21 percent of the clients were assessed as needing psychiatric hospitalization, which may reflect the fragility of the homeless population and their isolation and alienation from ongoing support and treatment systems. Over one-quarter had substance abuse problems. One man's case history shows that outreach programs can have a powerful effect on individuals whose needs have not been met by more traditional service systems.

**Project Number:** H133B00011.

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**PSYCHOSOCIAL REHABILITATION OF DEAF PERSONS WITH SEVERE MENTAL ILLNESS: A MULTIVARIATE MODEL OF RESIDENTIAL OUTCOMES, P 261-274.** REHABILITATION PSYCHOLOGY, Volume 38(4)

**NARIC Accession Number:** J27248.

**Author(s):** Cook, J A; Graham, K K; Razzano, L.

**Publication Year:** 1993.

**Number of Pages:** 12.

**Abstract:** Study examines the use of psychosocial rehabilitation in a community setting in the treatment of adults who are deaf and mentally ill. The first 60 clients who entered the Thresholds Bridge Program for the Deaf in Chicago from May 1984 through August 1989, were the study sample. Clients were assessed during their first month in the program and throughout the study period. Staff counselors work with clients to obtain community living arrangements then perform site visits to assist in developing specific goals for independent living. Variables were ability to establish independent residence rather than living in a supported setting, gender, ethnicity, diagnosis of schizophrenia, ability to community in spoken or sign language, use of an amplification device, prior employment, age, education, age at first psychiatric hospitalization, level of functioning on the Global Assessment Scale, and length of time in the program. While in the program, 45 percent of participants lived in independent settings, 53 percent were employed, and 43 percent remained free of psychiatric hospitalization. Five significant variables that affected outcome were age, level of functioning, minority status, diagnosis of schizophrenia, and prior employment. (Article is from Special Issue on Psychology and Deafness, related articles can be found under J27245 through J27249).

**Project Number:** H133B00011.

**Can this document be ordered through NARIC's document delivery service?:**

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**IMPROVING MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES FOR ADOLESCENTS.** Administration and Policy in Mental Health, Volume 19(3)

**NARIC Accession Number:** J36898.

**Author(s):** Friedman, R. M.; Burns, B. J.; Behar, L.

**Publication Year:** 1992.

**Number of Pages:** 15.

**Abstract:** Article focuses on nine overlapping topics dealing with improving mental health and substance abuse
services for adolescents and their families. These topics are: 1) organization of service delivery systems, 2) prevention, 3) professional training and overall human resource development, 4) role of consumers and their families, 5) accountability, 6) ethics, 7) financing, 8) services for minority adolescents and their families, and 9) research. Depending on the state of knowledge of each topic, the authors either highlight areas of importance or offer a specific position statement. It is hoped that these statements be reviewed for possible endorsement by the American College of Mental Health Administration (ACMHA) and for transmission to other professional organizations, federal and state government agencies and the field in general.

This document is included in NCDDR's Guide to Substance Abuse and Disability Resources produced by NIDRR Grantees, number D.27. This document is included in NCDDR's Guide to Substance Abuse and Disability Resources produced by NIDRR Grantees, 2nd Ed, number D.32.

Project Number: H133B90004

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Behavioral and (African or Asian or native or Indian or latino or Hispanic or immigrant or refugee or minority)

1 of 41.


NARIC Accession Number: J77136.
Author(s): Johnstone, Brick; Bhushnan, Braj; Hanks, Robin; Yoon, Dong P.; Cohen, Daniel.
Publication Year: 2016.
Number of Pages: 15.

Abstract: Study evaluated the factor structure of the Brief Multidimensional Measure of Religiousness/Spirituality (BMMRS) based on individuals from the United States (US) and India with diverse cultures; ethnicities (i.e., Caucasian, African-American, South Asian); and religions (i.e., Christian, Muslim, Hindu). A total of 109 individuals with traumatic brain injury (TBI) completed the BMMRS as part of a broader study on spirituality, religion, prosocial behaviors, and neuropsychological function. A principal components factor analysis with varimax rotation and Kaiser normalization identified a six-factor solution accounting for 72 percent of the variance in scores. Five of the factors were deemed to be interpretable and were labeled based on face validity as: (1) Positive Spirituality/Religious Practices; (2) Positive Congregational Support; (3) Negative Spirituality/Negative Congregational Support; (4) Organizational Religion; and (5) Forgiveness. The results were generally consistent with previous studies, suggesting the existence of universal religious, spiritual, and congregational support factors across different cultures and faith traditions. For health outcomes research, it is suggested that the BMMRS factors may be best conceptualized as measuring the following general domains: (1) emotional connectedness with a higher power (i.e., spirituality, positive/negative); (2) culturally based behavioral practices (i.e., religion); and (3) social support (i.e., positive/negative). The results indicate that factor relationships may differ among spiritual, religious, and congregational support variables according to culture and/or religious tradition.

Project Number: H133A080044.

Can this document be ordered through NARIC's document delivery service?: Y

2 of 41.

The association between metabolic syndrome and pressure ulcers among individuals living with spinal cord injury. Spinal Cord (formerly Paraplegia), Volume 54(11), Pgs. 967-972.

NARIC Accession Number: J75187.
Author(s): Li, C.; DiPiro, N. D.; Cao, Y.; Szlachcic, Y.; Krause, J..
Publication Year: 2016.
Number of Pages: 6.

Abstract: Study examined the relationship between metabolic syndrome (MetS) and pressure ulcers (PrU), after controlling for demographic and injury characteristics, socioeconomic factors, health behaviors and fatigue among 350 participants with spinal cord injury (SCI). Blood tests and physical examination were performed. Waist circumference, high-density cholesterol, triglycerides, blood pressure and fasting glucose were used to diagnose MetS according to Criteria for Clinical Diagnosis of Metabolic Syndrome defined by the American Heart Association. All other variables were self-reported. Three-stage multivariate logistic regression models evaluated the effects of three sequential sets of predictors, including demographic/injury, socio-environmental/behavioral and health factors, basing the order of analysis on the Theoretical Risk and Prevention Model. The prevalence of PrU and MetS was 11.0 percent and 35.3 percent, respectively. Ethnicity, smoking, alcohol consumption and MetS were statistically associated with PrU in the full model. Participants who were non-Hispanic, smokers, and drank over 30 drinks per month had greater odds of having a PrU compared with those who were Hispanic, non-smokers, and non-drinkers, respectively. Participants who had MetS had higher odds of PrU than those without MetS, even after adjusting for multiple covariates.
Focal point: Early psychosis intervention. , Volume 30

NARIC Accession Number: O20197.
Author(s): Ossowski, John D.; Brennan, Eileen (Eds.).
Publication Year: 2016.
Number of Pages: 32.
Abstract: This issue explores early psychosis intervention services, which may prevent much of the trauma and disability associated with psychosis. Topics include: the evolution of early psychosis research and treatment, internationally and in the United States (US); experiences of young adult leaders and family members illustrate the importance of the Early Assessment and Support Alliance (EASA), the first implementation of early psychosis intervention in the US public mental health system; research that highlights the importance of family and culture in help-seeking during first episode psychosis; efforts to ensure and measure the quality and effectiveness of first episode psychosis services; and some of the effective strategies emerging in the early psychosis field, including cognitive behavioral therapy, the individual placement and support approach to employment and education, and the role of sensory preferences from an occupational therapy perspective.

Project Number: H133B140039.
Can this document be ordered through NARIC's document delivery service?: Y


NARIC Accession Number: J73789.
Author(s): Shamburger-Rousseay, Aisha E.; Conyers, Liza M.; Armstrong, Amy J..
Publication Year: 2016.
Number of Pages: 13.
Abstract: Study examined the specific use of vocational rehabilitation (VR) services among HIV-positive African American women. Participants who volunteered to complete the National Working Positive Coalition-Vocational Development and Employment Needs Survey were recruited from AIDS Service Organizations and national HIV/AIDS networks across the United States. The survey was used to collect data from 313 African American women living with HIV/AIDS. The behavioral model for vulnerable populations was applied to examine key predisposing, enabling, and need variables related to and predictive of the utilization of VR services among African American women with HIV/AIDS. Hierarchical logistic regression statistical analyses were conducted to identify key factors predictive of use of VR services. Receipt of income benefits and knowledge of VR services were found to be predictive of the utilization of VR services among African American women living with HIV/AIDS.

Project Number: H133F060045.
Can this document be ordered through NARIC's document delivery service?: Y

Impacts of school structural factors and student factors on employment outcomes for youth with disabilities. Rehabilitation Counseling Bulletin (RCB)

NARIC Accession Number: J73787.
Author(s): Dong, Shengli; Fabian, Ellen; Luecking, Richard G..
Publication Year: 2015.
Number of Pages: 11.
Abstract: Study examined school structural factors (i.e., free/reduced lunch percentage, proportion of minority student enrollment, and student-teacher ratio) that may contribute to employment outcomes for transitioning youth with disabilities beyond individual student factors through hierarchical linear modeling analyses. The secondary data for 3,289 students were obtained from the Bridges From School to Work Program, and the school structural data for 121 schools were drawn from the Common Core of Data. The major types of disabilities for the student participants included learning disabilities, emotional and behavioral disabilities, sensory disabilities, and others. Around 41 percent of participants were female. The study found that employment outcomes (i.e., whether a participant secured a paid job and weekly job earnings) were primarily attributed to student individual factors rather than school structural factors, particularly prior paid work experience. The finding suggests the potential importance of effective transition interventions to improve employment outcomes for all youth with disabilities. Implications for rehabilitation professionals are discussed.
Adapting supported employment for emerging adults with serious mental health conditions. Journal of Behavioral Health Services & Research, Volume 42(2), Pgs. 206-222.

NARIC Accession Number: J71287.
Author(s): Ellison, Marsha; Klodnick, Vanessa V.; Bond, Gary R.; Krzos, Izabela M.; Kaiser, Susan M.; Fagan, Marc A.; Davis, Maryann.
Publication Year: 2015.
Number of Pages: 17.
Abstract: Study examined the feasibility of an adaptation of Individual Placement and Support (IPS) supported employment, an evidence-based adult mental health service, for use with early emerging adults (ages 16 to 21) with serious mental health conditions (SMHCs). The IPS model was adapted for this population by integrating it with components of supported education, peer mentorship, and career development and its feasibility was tested in a psychiatric treatment program for early-emerging adults. Participants were 17 to 20 years old. Most were African American, under the custody of the state, with a primary mood disorder diagnosis. This feasibility study tracked the model's development, recruitment, and retention and tracked vocational and educational outcomes for 12 months. Model refinement resulted in the development of a separate educational specialist position, greater integration of the peer mentor with the vocational team, and further specification of the role of peer mentor. There was an 80-percent retention rate in the feasibility evaluation. The adapted model resulted in positive employment and/or education outcomes for nearly half of participants. Of the 35 participants, 49 percent started a job and/or enrolled in an education program over the 12-month period.

Meeting the transition needs of urban American Indian/Alaska Native youth through culturally based services. Journal of Behavioral Health Services & Research, Volume 42(2), Pgs. 191-205.

NARIC Accession Number: J71286.
Author(s): Friesen, Barbara J.; Cross, Terry L.; Jivanjee, Pauline; Thirstrup, Ashley; Bandurraga, Abby; Gowen, L. K.; Rountree, Jen.
Publication Year: 2015.
Number of Pages: 15.
Abstract: Article presents the findings from three qualitative studies that explored the needs of American Indian/Alaska Native (AI/AN) youth transitioning to adulthood and examined the culturally based approaches and resources that addressed those needs. Community-based participatory methods were employed through a research partnership involving a culturally based community agency, the Native American Youth and Family Center (NAYA), the National Indian Child Welfare Association, and Portland State University. The studies utilized a relational worldview (RWV) framework, where well-being is understood as a balance among the domains of mind, body, spirit, and context. Collectively, findings demonstrate that NAYA employs culturally grounded interventions to overcome the traumatic histories and current oppressive conditions affecting low-income urban AI/AN youth with mental health challenges and to support their well-being and transition to adulthood. In addition, addressing the mental health and well-being of AI/AN youth in culturally appropriate ways involves consideration of all RWV domains. Recommendations for behavioral health practice are to connect AI/AN youth to culturally specific services whenever possible, utilize cultural consultants, and implement holistic and positive approaches to mental health.


NARIC Accession Number: J71502.
Publication Year: 2015.
Number of Pages: 6.
Abstract: Study investigated the prevalence and rate of hospitalization among 368 adults with pediatric-onset spinal cord injury (SCI) and explored medical and behavioral factors associated with hospitalization. Participants were interviewed on an approximately annual basis between 1996 and 2014 using a study-specific questionnaire and
standardized outcome measures: Satisfaction with Life Scale; Short-Form 12 Health Survey; Alcohol Use Disorders Identification Test; Patient Health Questionnaire-9 Depression Scale; and Craig Handicap Assessment and Recording Technique. Overall, 61 percent of participants self-reported at least one hospitalization across all time points; the average length of hospitalization was 14.8 days. Individuals who were ethnic minorities as well as those with high cervical-level SCI were more likely to be hospitalized. Those who were unemployed and those with health-care coverage were more likely to be hospitalized and have longer hospitalization stays. The risk of hospitalization was higher with occurrence of pressure ulcers, urinary tract infections, pneumonia, pain, and a chronic medical condition. Smoking cigarettes increased the risk of hospitalization, whereas those who engaged in exercise and were active in the community had lower odds of hospitalization. The results suggest that both medical and lifestyle factors have an important role in predicting hospitalization. An increased understanding of the risk and protective factors associated with hospitalization should assist clinicians in developing strategies and prevention efforts to minimize secondary health complications and foster healthy lifestyle behaviors.

Project Number: H133P100008.
Can this document be ordered through NARIC's document delivery service?: Y


NARIC Accession Number: J72370.
Author(s): Johnson, Ebonee T.; Lynch, Ruth T.; Chan, Fong; Bezyak, Jill; Mahr, Michele.
Publication Year: 2015.
Number of Pages: 13.
Abstract: Study investigated the utility of the expanded Health Action and Process Approach (HAPA) model for predicting physical activity and exercise behaviors in African Americans living with HIV/AIDS. The HAPA model comprises the motivational stage, which leads to behavioral intention, and the volitional stage, which leads to actual health behavior. HAPA variables include risk perception, action self-efficacy, outcome expectancy, intention, maintenance self-efficacy, recovery self-efficacy, action and coping planning, perceived barriers, social support, and physical activity/exercise. To make the model more relevant for African Americans with HIV/AIDS, HIV symptom severity and spirituality were added as variables to the traditional HAPA model. Predictions of physical activity/exercise participation were investigated among 110 African Americans living with HIV/AIDS. Results indicate the expanded HAPA model accounts for 35 percent of the variance in physical activity/exercise participation. The most significant predictor variables were symptom severity, outcome expectancy, and action and coping planning. Action and coping planning also partially mediated the relationship between physical activity/exercise intention and behavior. The findings provide partial support for the use of this expanded HAPA model in the design and implementation of health-promotion behavioral interventions targeting physical activity/exercise for African Americans with HIV/AIDS.
Project Number: H133B100034.
Can this document be ordered through NARIC's document delivery service?: Y

Appealing features of vocational support services for Hispanic and non-Hispanic transition age youth and young adults with serious mental health conditions. Journal of Behavioral Health Services & Research

NARIC Accession Number: J69054.
Author(s): Torres Stone, Rosalie A.; Delman, Jonathan; McKay, Colleen E.; Smith, Lisa M..
Publication Year: 2014.
Number of Pages: 14.
Abstract: Study examined the experiences and general vocational needs of transition age youth and young adults (TAYYAs) diagnosed with serious mental health conditions (SMHCs). In-person, qualitative interviews were conducted with 57 non-Hispanic and Hispanic TAYYAs with SMHCs enrolled in three vocational support programs in Massachusetts: vocational rehabilitation, individual placement and support; and the clubhouse model. Six themes emerged from the data: three themes were identified as social capital (supportive relationships, readily available workplace supports, and vocational preparation), two themes related to human capital (effective educational supports and work experience), and one theme related to cultural capital (social skills training). Unique features (Spanish-speaking staff and/or familiar in Latino culture, familial-like staff support) were frequently noted by Hispanic TAYYAs.
Project Number: H133B090018.
Can this document be ordered through NARIC's document delivery service?: Y
Methods for translating evidence-based behavioral interventions for health-disparity communities. Preventing Chronic Disease

NARIC Accession Number: J72636.
Author(s): Napoles, Anna M.; Santoyo-Olsson, Jasmine; Stewart, Anita L..
Publication Year: 2013.
Number of Pages: 12.
Abstract: Article describes specific methodological guidelines for disseminating and implementing evidence-based behavioral interventions to reach individuals from health-disparity populations. Seven methodological phases are described: (1) establish infrastructure for translation partnership, (2) identify multiple inputs (information gathering), (3) review and distill information (synthesis), (4) adapt and integrate program components (translation), (5) build general and specific capacity (support system), (6) implement intervention (delivery system), and (7) develop appropriate designs and measures (evaluation). For each phase, the authors describe specific methodological steps and resources and provide examples from research on racial/ethnic minorities, disabled persons, and those with low socioeconomic status. The methods focus on how to incorporate adaptations so that programs fit new community contexts, meet the needs of individuals in health-disparity populations, capitalize on scientific evidence, and use and build community assets and resources.

Project Number: H133B080002.
Can this document be ordered through NARIC's document delivery service?: Y


NARIC Accession Number: J67960.
Author(s): Saunders, Lee L.; Ekoja, Ene; Whitlock, Chelsea S.; DiPiro, Nicole D.; Gregory-Bass, Rosalind; Krause, James S..
Publication Year: 2013.
Number of Pages: 8.
Abstract: Study compared protective and risky health behaviors of African Americans with spinal cord injury (SCI) to those of African Americans in the general population. Mail-in surveys were collected from 252 adult participants with SCI and data was downloaded from the 2009 Behavioral Risk Factor Surveillance System. Analysis revealed that participants with SCI were more likely to report currently smoking. Among those who reported currently smoking, people with SCI were less likely to report ever trying to quit. Those with SCI were also more likely to report consuming alcohol and binge drinking in the past month. Participants with SCI were more likely to receive a flu shot/spray in the past year and to have ever received a pneumonia vaccine. Conversely, those with SCI were less likely to report ever having their blood cholesterol checked. Results of this study suggest that, consistent with previous research, individuals with SCI focused their preventive health behaviors on conditions consistent with SCI prophylactic standard of care (e.g., flu shots and pneumonia vaccines), as compared to behaviors intended to prevent chronic diseases consistent with the overall population.

Project Number: H133A080064.
Can this document be ordered through NARIC's document delivery service?: Y

Cognition assessment using the NIH toolbox. Neurology, Volume 80(11 (Supplement 3)), Pgs. S54-S64.

NARIC Accession Number: J76494.
Author(s): Weintraub, Sandra; Dikmen, Sureyya S.; Heaton, Robert K.; Tulsky, David S.; Zelazo, Philip D.; Bauer, Patricia J.; Carlozzi, Noelle E.; Slotkin, Jerry; Bliz, David; Wallner-Allen, Kathleen; Fox, Nathan A.; Beaumont, Jennifer L.; Mungas, Dan; Nowinski, Cindy J.; Richler, Jennifer; Deocampo, Joanne A.; Anderson, Jacob E.; Manly, Jennifer J.; Borosh, Beth; Havlik, Richard; Conway, Kevin; Edwards, Emmeline; Freund, Lisa; King, Jonathan W.; Moy, Claudia; Witt, Ellen; Gershon, Richard C..
Publication Year: 2013.
Number of Pages: 11.
Abstract: Article describes the development of the Cognition Battery of the NIH Toolbox for the Assessment of Neurological and Behavioral Function (NIH-TB), and presents results on its test-retest reliability, the effects of age on performance, and convergent and discriminant construct validity. Cognition is 1 of 4 domains measured by the NIH-TB, and complements modules testing motor function, sensation, and emotion. On the basis of expert panels, the cognition subdomains identified as most important for health, success in school and work, and independence in daily functioning were: Executive Function, Episodic Memory, Language, Processing Speed, Working Memory, and Attention. The Cognition Battery has 7 computerized instruments that measure constructs within these subdomains.
The instruments were validated in English, in a sample of 476 participants ranging in age from 3 to 85 years, with representation from both sexes, 3 racial/ethnic categories, and 3 levels of education. The NIH-TB Cognition Battery is intended to serve as a brief, convenient set of measures to supplement other outcome measures in epidemiologic and longitudinal research and clinical trials.

**Project Number:** H133A070037; H133A080035; H133A980023; H133B090024; H133G070138; H133G090022; H133N060022.

Can this document be ordered through NARIC's document delivery service?: Y

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**Cultural competence in behavioral health disaster response: The challenge, the opportunity.** In J. L. Framingham and M. L. Teasley (Eds.), Behavioral Health Response to Disasters. Boca Raton, FL: CRC Press, Pgs. 175-188.

**NARIC Accession Number:** J63954.

**Author(s):** Crawford, Kermit A.; Bennasar, Mari C.; Mizock, Lauren M. B..

**Publication Year:** 2012.

**Number of Pages:** 13.

**Abstract:** This chapter offers suggestions for the behavioral health response model aimed at decreasing outcome disparities for racial, ethnic, and cultural minority groups in the aftermath of disaster. There is a growing body of research documenting disparities and a correspondingly smaller amount of research on ways to mitigate and/or eliminate disparities in this area. The authors view the emerging literature on cultural competence as an important component for decreasing disparities through more effective use of models of behavioral health disaster response. While the two primary models of cultural competence are important, represent significant progress, and are widely recognized, they remain more conceptual than practical. The authors suggest ways to move the "technology" of behavioral health disaster response forward with more effective implementation of the cultural competence approach. This approach integrates a disciplined process with a set of principles, identified in cultural competence guidelines, that will enhance the given intervention models and approaches. It is hoped that this approach, based on literature and multiple response experiences by the authors, will lead to significant reductions and/or elimination of outcome disparities for racial, ethnic, and cultural minority groups.

**Project Number:** H133B090014.

Can this document be ordered through NARIC's document delivery service?: N

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**Parents taking action: A psycho-educational intervention for Latino parents of children with autism spectrum disorder.** Family Process

**NARIC Accession Number:** J73925.

**Author(s):** Magana, Sandra; Lopez, Kristina; Machalicek, Wendy.

**Publication Year:** 2012.

**Number of Pages:** 16.

**Abstract:** Study examined the feasibility, acceptability, and preliminary outcomes of a culturally derived psycho-educational parent education intervention, Parents Taking Action (PTA), for 19 Spanish-speaking mothers of children with autism spectrum disorder. This study introduces the Community Health Worker Model, or as it is known in Spanish, the Promotora de Salud Model of intervention delivery to the autism field. A promotora is a lay health educator or peer leader who is indigenous to the Latino community and receives training to provide education to encourage behavioral changes in a culturally informed way. A mixed-methods design including one group pre- and posttest design and focus groups was used to evaluate the outcomes of PTA. To assess the feasibility of PTA the number of weeks participants were involved in the intervention and the retention rates for each module were calculated. The results indicated that the intervention was both feasible to implement and acceptable to participants. Findings also demonstrated significant increases in empowerment oriented outcomes for parents between pre- and posttest suggesting that the intervention is promising. Suggestions for future research and practice are offered.

**Project Number:** H133B130007; H133B140046; H133G140128.

Can this document be ordered through NARIC's document delivery service?: Y

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**Intersectionality and disability harassment: The interactive effects of disability, race, age, and gender.** Rehabilitation Counseling Bulletin (RCB), Volume 55(2), Pgs. 82-91.

**NARIC Accession Number:** J62704.

**Author(s):** Shaw, Linda R.; Chan, Fong; McMahon, Brian T..

**Publication Year:** 2012.

**Number of Pages:** 10.
Abstract: Study examined whether there was an interaction among disability, gender, age, race, and employer characteristics when considering the proportion of harassment versus other forms of discrimination allegations. Using exhaustive chi-squared automatic interaction detector technique to analyze data from the Americans with Disabilities Act (ADA) Research Project, the authors detected several interaction effects. They discovered unique clusters of characteristics that place certain groups at a very high and very low risk for experiencing disability harassment. Generally speaking, various combinations of specific characteristics, that is, being female, being older, having a behavioral disability, racial minority status, and working for either a small or very large company seem to place individuals at higher risk of experiencing disability harassment. The findings are discussed in the context of past and future research on intersectionality and workplace implications.

Project Number: H133A060087.
Can this document be ordered through NARIC's document delivery service?: Y

Health disparities chart book on disability and racial and ethnic status in the United States.

NARIC Accession Number: O18534.
Author(s): Drum, Charles; McClain, Monica R.; Horner-Johnson, Willi; Taitano, Genia.
Publication Year: 2011.
Number of Pages: 12.
Abstract: This report examines the health status of working-age (18 to 64 years) people with disabilities, as reported to the Behavioral Risk Factor Surveillance System, the nation’s premier public health survey. The basic purpose of this chart book is to answer the question of whether working age people with disabilities in the United States (US) experience health disparities similar to those experienced by members of racial and ethnic minority groups in the US. Among the key findings in the report: (1) if people with disabilities were a formally recognized minority group, at 19 percent of the population, they would be the largest minority group in the US; (2) the highest proportion of people who say their health is fair or poor is found in people with disabilities (40 percent, compared to 23 percent of Hispanics, 22 percent of American Indian/Alaska Natives, 18 percent of Blacks, and 8 percent of Asians); and (3) people with disabilities have the least desirable prevalence rates for ten of the fourteen selected health indicators including cardiovascular disease and diabetes.

Project Number: H133A100031.
Can this document be ordered through NARIC's document delivery service?: Y


NARIC Accession Number: J62277.
Author(s): Lunn, Laurel M.; Hellfinger, Craig A.; Wang, Wei; Greenbaum, Paul E.; Kutash, Krista; Boothroyd, Roger; Friedman, Robert M..
Publication Year: 2011.
Number of Pages: 15.
Abstract: Study examined the relationships between community characteristics and implementation factors associated with effective mental health systems of care (SOCs). Multilevel modeling was conducted with a stratified random sample of 225 counties to explore community-level predictors of the implementation factors of the System of Care Implementation Survey (SOCIS). The SOCIS consists of 14 factors believed to be associated with effective systems of care: (1) family voice and choice; (2) individualized, comprehensive, and culturally competent treatment; (3) outreach and access to care; (4) transformational leadership; (5) theory of change; (6) implementation plan; (7) local population of concern; (8) interagency and cross-sector collaboration; (9) values and principles; (10) comprehensive financing plan; (11) skilled provider network; (12) performance measurement system; (13) provider accountability; and (14) management and governance. A model composed of community-level social indicators fit well with 5 of 14 factors identified as relevant for effective SOCs. Community disadvantage was negatively and residential stability positively associated with the implementation of SOC principles. Designation as a mental health professional shortage area was positively related to some implementation scores, as was the percentage of minority residents, while rurality was not significantly associated with any of the factors.

Project Number: H133B040024; H133B900004.
Can this document be ordered through NARIC's document delivery service?: Y


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### Study on Predictors of Vocational Rehabilitation Use among Ethnic Minority Groups

**NARIC Accession Number:** J59655.  
**Author(s):** Datti, Paul A.; Conyers, Liza M.  
**Publication Year:** 2010.  
**Number of Pages:** 11.  
**Abstract:** Study identified factors that predict the use of vocational rehabilitation (VR) services among ethnic minority groups in the United States. The Andersen Behavioral Model of Service Utilization was used as a theoretical framework to identify predisposing (sexual orientation, ethnicity, racial identification), enabling (poverty, knowledge of VR, receipt of public benefits), and need (health perception, confidence with job seeking, confidence with job maintenance) variables associated with the use of VR services among 168 Latino men with HIV/AIDS from New York State. Participants completed the National Working Positive Coalition-Vocational Development and Employment Needs Survey and key predictor variables were analyzed using a hierarchical logistic regression. Results indicated that Puerto Rican ethnicity, having knowledge of VR, and having received public benefits increased odds of VR use. As confidence in ability to maintain a job increased, so did odds of VR use. Study limitations, practical implications, and future research recommendations are discussed.  
**Project Number:** H133F060045.  
**Can this document be ordered through NARIC’s document delivery service?:** Y

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### Multicultural Challenges in Employment of People with Disabilities

Multicultural challenges in employment of people with disabilities.  
**NARIC Accession Number:** J59653.  
**Author(s):** Lewis, Allen N.; Arango-Lasprilla, Juan C.  
**Publication Year:** 2010.  
**Number of Pages:** 2.  
**Abstract:** Article introduces this special journal issue focusing on multicultural challenges in employment of people with disabilities. Subsequent articles address: (1) the engagement of ethnically diverse individuals with disabilities in the vocational rehabilitation system, (2) application of the behavioral model of service utilization to predict factors associated with vocational rehabilitation use among Latino men with HIV/AIDS, (3) predicting outcomes among women of color with psychiatric disabilities, (4) evaluation and follow-up of supported employment initiatives in Spain from 1995 to 2008, (5) employment and vocational rehabilitation experiences among Latinos with different patterns of acculturation, and (6) employment outcomes after traumatic brain injury among racial and ethnic minority groups.  
**Project Number:** H133A080060.  
**Can this document be ordered through NARIC’s document delivery service?:** Y

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### Training for Peer Healthcare Providers

Entrecruzando nuestros caminos: Entrenamiento para compañeros-promotores de recuperación y rehabilitación.  
**NARIC Accession Number:** O17861.  
**Author(s):** Restrepo-Toro, Maria E.  
**Publication Year:** 2010.  
**Number of Pages:** 24.  
**Abstract:** This Spanish-language document provides a detailed lesson plan for those training peer healthcare providers for people with mental illnesses. The plan is made up of three lessons covering: (1) communication skills, (2) promoting recovery, and (3) preparation for rehabilitation. These lessons have several components: (1) discussion, (2) lecture, (3) questions and answers, (4) demonstration, and (5) small group interactions. The plan also includes a training-session orientation that includes the history of the peer-provider movement and the self-reliance movement within the community of people with disabilities. Recommendations for further study and training are provided, including Latino BestNOW and Contac, Leadership Academy.  
**Project Number:** H133B040026.  
**Can this document be ordered through NARIC’s document delivery service?:** Y

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### Participatory Action Research with Colombian Immigrants

Participatory action research with Colombian immigrants.  
Hispanic Journal of Behavioral Sciences, Volume 31(1), Pgs. 112-127.  
**NARIC Accession Number:** J60909.  
**Author(s):** Balcazar, Fabricio E.; Garcia-Iriarte, Edurne; Suarez-Balcazar, Yolanda.  
**Publication Year:** 2009.  
**Number of Pages:** 16.
Abstract: Article describes a participatory needs assessment process in which Colombian immigrants in Chicago collaborated with university researchers to identify their common concerns and implement self-help efforts to address some of their most pressing needs. A total of 261 Colombians completed a needs assessment survey, and 46 attended a public forum in which the issues were discussed and groups of volunteers were organized to coordinate and plan actions to address identified needs. Groups of volunteers conducted the research and developed a guide to health care and a guide to social services in the state of Illinois, which were widely distributed in the community. The participatory methodology appears to have effectively mobilized individuals who volunteered their time to help others and improve the quality of life for new or recent Colombian immigrants. Implications for future research are discussed.

Project Number: H133A040007.
Can this document be ordered through NARIC's document delivery service?: Y

Accessibility of mental health services issue brief #1: Identifying organizational factors associated with reducing mental health disparities: A conceptual framework.

NARIC Accession Number: O17617.
Author(s): Nesman, Teresa; Hernandez, Mario; Callejas, Linda M..
Publication Year: 2008.
Number of Pages: 4.
Abstract: This issue brief presents a conceptual model developed by the Accessibility of Mental Health Services study that defines organizational cultural competence in terms of increased access and reduced disparities. The study was designed to identify and describe culturally-competent organizational practices that can be implemented within systems of care to improve access to mental health services for ethnically/racially diverse children with serious emotional/behavioral disorders and their families. The model is based on a literature review of strategies for serving diverse children and their families, a review of organizational assessment instruments, and field-based research with exemplary organizations. The organizational cultural competence conceptual model can be used as a guide for adapting key components of an organization to serving specific target populations.

Project Number: H133B040024.
Can this document be ordered through NARIC's document delivery service?: Y


NARIC Accession Number: J56517.
Author(s): Wong, Yin-Ling; Nath, Sara B.; Solomon, Phyllis L..
Number of Pages: 17.
Abstract: Study examined patterns of organizational involvement among consumers of mental health services residing in supported independent housing (SIH) and indentified the correlates of organizational membership. SIH refers to an independent community living arrangement that is coupled with the provision of flexible and individualized support services. Data regarding group and organizational involvement, social and demographic variables, clinical characteristics, and service use patterns were obtained from 252 participants. Groups and organizations were classified according to whether or not they have a behavioral health focus. Demographic, clinical, and service use characteristics were examined as potential predictors of membership. Results indicated that 60 percent of the sample was involved in some kind of behavioral or non-behavioral health organization. Higher rates of membership were found among older adults, African Americans, those with more years of education, and those with higher incomes. Other correlates specific to SIH included prior homelessness, perceived discrimination, substance abuse history, psychiatric symptoms, psychiatric diagnosis, and contact with service providers.

Project Number: H133B031109.
Can this document be ordered through NARIC's document delivery service?: Y

Tapestry: A wraparound program for families of color facilitated by parent partners. Focal Point, Volume 17(2), Pgs. 26-68.

NARIC Accession Number: J48181.
Author(s): Becker, Julie; Kennedy, Mark.
Publication Year: 2003.
Number of Pages: 3.
Abstract: Article describes a successful warparound program in southeast San Diego, CA for ethnic and racial
minority families in need of mental health services. Wraparound involves the use of collaborative family-provider teams to create and implement individualized service plans for children with severe emotional and behavioral disorders. Authors describe the program’s development and outcomes. This document is included in NCDDR’s Guide to Resources Produced by NIDRR Grantees: Infants, Children, and Youth with Disabilities as F.45.

**Project Number:** H133B990025.
Can this document be ordered through NARIC’s document delivery service?: Y

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**Assessing behavioral and emotional strengths in Black children: A measure designed by and for Blacks.** Focal Point , Volume 17(1) , Pgs. 17-20.

**NARIC Accession Number:** J48184.
**Author(s):** Lambert, Michael C.; Rowan, George T.
**Publication Year:** 2003.
**Number of Pages:** 4.
**Abstract:** Article describes the development of the Behavior Assessment for Children of African Heritage, an instrument designed to measure the behavioral and emotional strengths of Black children. The strengths-based measure can be used as the basis for developing culturally sensitive and effective interventions. This document is included in the NCDDR Guide to Resources Produced by NIDRR Grantees: Infants, Children, and Youth with Disabilities as F.3.

**Project Number:** H133B990025.
Can this document be ordered through NARIC’s document delivery service?: Y

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**An examination of the vocational rehabilitation needs of American Indians with behavioral health diagnoses in New York.** AIRRTC Report Fact Sheet

**NARIC Accession Number:** O15162.
**Author(s):** Marshall, Catherine; Bruyere, Susanne; Shern, David; Jircitano, Lois.
**Publication Year:** 2003.
**Number of Pages:** 2.
**Abstract:** Study examined the level of vocational rehabilitation (VR) and mental health services being provided in New York State for American Indians with behavioral health diagnoses. Results showed that of the 81 American Indians who applied for VR services in 1991, 43 (51 percent) were accepted for services. Of the 43 individuals, 16 (37 percent) had a behavioral health diagnosis. Eight of these 16 (50 percent) were closed rehabilitated. In the same year, the New York Office of Mental Health indicated that 179 American Indians were served who had severe and persistent mental illness. Findings suggest that the level of VR service delivery falls well below the need. Recommendations included the need for cultural sensitivity training for VR administrators and counselors, and aggressive outreach within American Indian communities.

**Project Number:** H133B30068.
Can this document be ordered through NARIC’s document delivery service?: Y

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**Focal point: Cultural competence, strengths, and outcomes.** Focal Point , Volume 17(1) , Pgs. 1-23.

**NARIC Accession Number:** O15491.
**Author(s):** Walker, Janet (Ed.).
**Publication Year:** 2003.
**Number of Pages:** 23.
**Abstract:** Issue reviews research on the level of cultural competence in the children's mental health care system. Topics include: facilitating culturally reciprocal interactions in educational settings, the impact of race/ethnicity on service utilization and clinical outcomes, implementing culturally competent research practices, assessing behavioral and emotional strengths in African American children, and cultural competence in services to children and families. Four of the articles are included separately in the NARIC collection under accession number J48182 through J48185.

**Project Number:** H133B990025.
Can this document be ordered through NARIC’s document delivery service?: Y

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NARIC Accession Number: O15299.
Author(s): Zawaiza, Theda; Walker, Sylvia; Ball, Shirley; McQueen, Maima F..
Publication Year: 2003.
Number of Pages: 36.
Abstract: Report identifies gaps in the behavioral and social sciences research agenda pertaining to people with disabilities from underserved communities. Paper outlines the findings of 9 focus groups that explored how the behavioral and social sciences research agenda can effectively address issues related to barriers to successful outcomes for people with disabilities from culturally and linguistically diverse communities and low-income groups. The report is divided into 5 major categories: cultural competence, employment, resources, community participation, and well-being. Each category contains relevant literature, and recommendations and research questions.
Project Number: H133B000903; H133B30093.
Can this document be ordered through NARIC's document delivery service?: Y

NARIC Accession Number: J42677.
Author(s): Wolman, C; Garwick, A; Kohrman, C; Blum, R.
Number of Pages: 17.
Abstract: Qualitative study investigating the wishes and expectations of parents for their children with chronic physical health conditions. Participants were parents of 21 African American, 20 Hispanic, and 22 European American children. Results indicated that many parents' wishes were specifically related to the child's chronic condition, including wishes that the condition would not exist, would be cured, or would improve. Other wishes focused on the psychosocial well-being of the child, independent living skills, education, having a family, behavioral issues, and religion. All of the wishes were positive, but some of the expectations were negative. Expectations concerned the child's condition, the child's psychosocial well-being, independent living skills, education, and social concerns. Two types of chronic conditions, mental retardation and mobility impairments, affected the types of wishes parents had. Differences among the three ethnic groups were noted in wishes regarding education and behavioral issues, as well as in parents' expectations about social problems.
Project Number: H133G30005.
Can this document be ordered through NARIC's document delivery service?: Y

NARIC Accession Number: J39881.
Author(s): Krause, J S; Coker, J L; Charlifue, S; Whiteneck, G G.
Number of Pages: 8.
Abstract: Study to identify risk factors for poor health outcomes and secondary conditions among Native Americans with spinal cord injury (SCI). Data are from comprehensive telephone interviews with 97 Native Americans with traumatic SCI at least 1 year post-injury. Seven outcome variables were examined: self-rated health; health status compared with 1 year ago; number of poor health days in the past month; number of poor mental health days in the past month; number of days in the past month in which poor health disrupted normal activities; number of pressure sores in the past year; and number of post-SCI injuries in the past year. These were related to biographical, injury-related, psychosocial, and behavioral predictors, including selected items from the Behavioral Risk Factor Surveillance Survey (BRFSS). Results indicated that depressive symptoms, post-SCI injuries, alcohol abuse, and older age were predictors of poorer health outcomes.
Project Number: H133N00023; H133N50001.
Can this document be ordered through NARIC's document delivery service?: Y

Caregivers speak about the cultural appropriateness of services for children with emotional and behavioral disabilities.
NARIC Accession Number: O15324.
Author(s): Walker, Janet S.
Number of Pages: 20.
Abstract: Report presents results of a study about caregivers' views on the cultural appropriateness of services for their children with emotional and behavioral disabilities. Caregivers were asked to describe specific occasions when they were particularly satisfied or dissatisfied with the extent to which service providers respected their cultural beliefs and values. Among the findings reported, caregivers felt that providing culturally appropriated services is more difficult than just following a recipe, providers need to work with caregivers more flexibly around issues of discipline, and providers need to be more sensitive to the additional burdens that come with having limited income.
Project Number: H133B990025.
Can this document be ordered through NARIC's document delivery service?: Y

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NARIC Accession Number: J37953.
Author(s): Krause, J S; Coker, J; Charlifue, S; Whiteneck, G G.
Publication Year: 1999.
Number of Pages: 6.
Abstract: Study of health behaviors and health outcomes among a sample of Native American men with spinal cord injury (SCI). Data are from telephone interviews or mail surveys of 76 Native American men with traumatic SCI at least 1 year in duration. Comparisons were made to Native American men without SCI based on national BRFSS data. Differences between the 2 groups were found in reported health status, satisfaction with health care, health behaviors such as receipt of inoculations and screening tests, and alcohol use.
Project Number: H133N00023; H133N50001.
Can this document be ordered through NARIC's document delivery service?: Y

34 of 41.


NARIC Accession Number: J34353.
Author(s): Blum, R W; Potthoff, S J; Resnick, M D.
Publication Year: 1997.
Number of Pages: 8.
Abstract: Reports an analysis of a survey of 13,457 Native American youths, ages 12 to 18 years, administered through reservation schools in 1990. Participants were from 50 tribes and 37 service units in 8 Indian Health Service areas. The survey instrument contained 162 items covering physical health status and practices, emotional health, family and peer relationships, school, substance use, antisocial behaviors, dietary intake and eating behaviors, sexual orientation and behaviors, and health services utilization. The analysis contrasted responses from children and youth with physical conditions; learning, behavioral, or emotional conditions; or both physical and psychological conditions to controls who did not report those conditions.
Project Number: H133B40019.
Can this document be ordered through NARIC's document delivery service?: Y

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BEHAVIORAL TREATMENT OF DEPRESSION IN PREDOMINANTLY AFRICAN-AMERICAN MEDICAL PATIENTS. Clinical Gerontologist, Volume 17(2)

NARIC Accession Number: J34160.
Author(s): Lichtenberg, P. A.; Kimbarow, M. L.; Morris, P.; Vangel, S. J.
Publication Year: 1996.
Number of Pages: 19.
Abstract: Reports the results of a study of the efficacy of behavioral treatment for depression in older adult medical rehabilitation inpatients. In one group an experienced geropsychologist provided behavioral treatment and in another group occupational therapists provided the behavioral treatment. Depression was significantly reduced in both groups relative to the no-treatment group. Furthermore, Functional Independence Measure (FIM) scores of activities of daily living (ADL) showed significant improvement in the occupational therapist led group compared to the control group.
Project Number: H133A20016.
Can this document be ordered through NARIC's document delivery service?: Y
AN EXAMINATION OF THE VOCATIONAL REHABILITATION NEEDS OF AMERICAN INDIANS WITH BEHAVIORAL HEALTH DIAGNOSIS IN NEW YORK STATE, FINAL REPORT.

NARIC Accession Number: O12160.
Author(s): Marshall, C. A.; Bruyere, S.; Shern, D.; Jircitano, L.
Publication Year: 1996.
Number of Pages: 111.
Abstract: Examines the level of Vocational Rehabilitation (VR) and mental health services being provided in New York State to American Indians with Behavioral health diagnosis, including those with dual diagnosis involving substance abuse. Addresses the extent to which American Indians with severe mental illnesses have successfully accessed the public VR system, and the difficulties American Indians with a dual diagnosis face when seeking rehabilitation services. Provides recommendations to ensure VR agency responsiveness to the diverse needs of Native People. This document is included in NCDDR's Guide to Substance Abuse and Disability Resources Produced by NIDRR Grantees, number F.3. This document is included in NCDDR's Guide to Substance Abuse and Disability Resources Produced by NIDRR Grantees, 2nd Ed., number F.4.
Project Number: H133B30068.
Can this document be ordered through NARIC's document delivery service?: Y

THE INFLUENCE OF SOCIAL SUPPORT AND ACTIVE COPING ON DEPRESSION AMONG AFRICAN AMERICANS AND LATINOS WITH DISABILITIES. Rehabilitation Psychology, Volume 41(3)

NARIC Accession Number: J33200.
Author(s): Zea, Maria Cecilia; Belgrave, Faye Z.; Townsend, Tiffany G.; Jarama, S. Lisbeth; Banks, Sonia R.
Publication Year: 1996.
Number of Pages: 18.
Abstract: Study examining relationships among depression, active coping, and social support in a sample of 109 African Americans and 57 Latinos with disabilities. Measures included the Beck Depression Inventory, the Brandt and Weinert Personal Resources Questionnaire (PRQ), and the condensed version of Tyler's Behavioral Attributes of Psychosocial Competence Scale (BAPCS). Findings indicate that active coping, satisfaction with social support, and type of disability were significant predictors of depression for African Americans, while active coping, perception of severity of disability, and social support were significant predictors of depression for Latinos. These findings underscore the importance of testing separate models for African Americans and Latinos.
Project Number: H133G20117.
Can this document be ordered through NARIC's document delivery service?:

An introduction to cultural competence principles and elements: An annotated bibliography.

NARIC Accession Number: O17963.
Author(s): Mason, James L.; Braker, Kathie; Williams-Murphy, Tracy.
Publication Year: 1995.
Number of Pages: 84.
Abstract: This annotated bibliography focuses on principles of culturally competent systems of care for children and youth with serious emotional disabilities and their families. A primary concern is the application and comprehension of a cultural competence model developed by the Child and Adolescent Service System Program (CASSP). The CASSP model requires that behavioral and programmatic changes be manifested in professional and agency attitudes, practices, policies, or structures. The bibliography is divided into five sections that correspond to basic principles of the model: self-assessing one's own cultural behavior, understanding the dynamics of difference, valuing diversity, adapting to diversity, and incorporating cultural knowledge. For each journal article, book, or monograph listed, an abstract and bibliographic documentation are provided, along with information on applicable principles of the model, the target population or audience, and applicable disciplines.
Project Number: H133B90007.
Can this document be ordered through NARIC's document delivery service?: Y
Abstract: Newsletter of the American Indian Rehabilitation Research and Training Center (AIRRTC), reporting on research and training activities related to vocational rehabilitation (VR) services for Native Americans with disabilities. Topics of issues in the NARIC collection;|V10, N1 (Spring 1994): Needs assessment survey of state VR agencies; VR needs of Native Americans with behavioral health diagnoses in New York; mental health needs; alcoholism; family support; national survey identifying work opportunities for Native Americans with disabilities; cultural diversity in the Rehabilitation Services Administration (RSA); benefits for persons with disabilities living on a reservation; the ADA and Indian tribes.|Fall 1997: Recommendations for the reauthorization process of the Rehabilitation Act of 1997; "Strategies on successful independent living services for American Indians with Disabilities" workshop training outcomes; IWWRP alternatives to competitive employment; technical assistance and capacity building; training counselors who work with Native Americans affected by alcoholism; VR services for Native Americans who have alcohol or drug abuse disorders; training and dissemination progress report; and results of a needs assessment survey.|Spring 1999: Why cultural competence is better than cultural sensitivity; workshop on person-centered planning; training programs for VR counselors and multicultural interpreters.

Project Number: H133B30068; H133B980049.

Can this document be ordered through NARIC's document delivery service?: Y

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Families and disability newsletter.  , Pgs. 8-32 (each).

NARIC Accession Number: O12232.
Number of Pages: 140 (total).

Project Number: H133B30070.
Can this document be ordered through NARIC's document delivery service?: Y

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Focal point.  , Volume 8(2)

NARIC Accession Number: O12426.
Author(s): McManus, Marilyn C. (Ed.).
Number of Pages: 28.
Abstract: Issue focuses on developing culturally competent health and human services organizations. Topics include: cultural competence self-assessment questionnaire, tips for accessing and involving minority families, the Pennsylvania and the South Carolina Department of Mental Health cultural competence plans; research reviews, cultural competence and the juvenile justice system, and outreach efforts for underserved families of children with neurobiological, emotional, or behavioral disorders.

Project Number: H133B40021.
Can this document be ordered through NARIC's document delivery service?: Y