

Tropical Texas Behavioral Health: Improving Access to Integrated Care for Rio Grande Valley Residents with Severe & Persistent Mental Illness

What is the community challenge?

Individuals with Severe and Persistent Mental Illness (SPMI)—including schizophrenia, psychotic disorders, and mood disorders such as major depression and bipolar disorders—are among the most vulnerable populations in the United States. The SPMI population in the Rio Grande Valley (RGV) faces many challenges in obtaining primary care due in large part to the nature of their mental illness. The lack of primary care services in the RGV exacerbates these disparities.

Program At-a-Glance

CNCS Program: Social Innovation Fund

Intervention: Sí Texas: Improving Access to Integrated Care for Rio Grande Valley Residents with Severe & Persistent Mental Illness

Subgrantee: Tropical Texas Behavioral Health (TTBH)

Intermediary: Methodist Healthcare Ministries of South Texas, Inc. (MHM)

Focus Area: Healthy Futures

Focus Population: Individuals with Severe and Persistent Mental Illness

Community Served: The Rio Grande Valley, Texas

What is the promising solution?

The Tropical Texas Behavioral Health (TTBH) Improving Access to Integrated Care for Rio Grande Valley Residents with Severe & Persistent Mental Illness initiative aimed to remove barriers between behavioral and primary care by implementing reverse co-location of these services supported by care coordination. Without effective intervention, it is likely SPMI individuals would not receive timely integrated care due to regional health care disparities, barriers to care due to the symptoms of their mental illness, the reluctance of many physicians to treat people with mental illness, and provider resource limitations.

What was the purpose of evaluation?

The evaluation of Methodist Health Ministries of South Texas, Inc. (MHM) TTBH Improving Access to Integrated Care for Rio Grande Valley Residents with Severe & Persistent Mental Illness in their Brownsville, TX clinic began in November, 2015 and finished reporting in May, 2018. The impact evaluation study used a randomized control trial (RCT) design to compare intervention participants receiving the delivery of integrated behavioral health with comparison participants receiving the usual care provided within a behavioral health clinic for patients with SPMI. It is the first study on reverse co-located integrated care among an SPMI population that is primarily Hispanic and low income. The study sought to find if intervention participants experienced improved health outcomes such as blood pressure, HbA1c, BMI, depression, and quality of life. TTBH's program enrolled a total of 416 participants, including 249 in the intervention group and 167 participants in the control group.

What did the evaluation find?

As a grantee of the Social Innovation Fund, MHM engaged an independent evaluator to evaluate TTBH. The evaluation included both an impact and an implementation study, and found the following:

- After 12 months in the program, intervention participants were more likely than control participants to see significant improvements in their systolic blood pressure.
- After 12 months in the program, intervention participants were more likely than control participants to see significant improvements in their HbA1c levels. Findings were also significant in additional stratified analyses for individuals with diabetes, those over 40, and those considered obese.

Notes on the evaluation

The initiative was implemented with high fidelity, and Tropical Texas Behavioral Health’s evaluation employed a high quality, rigorous RCT design. Statistically significant benefits were found with regard to the study’s main confirmatory outcome, as well as one of the exploratory outcomes. This study thus demonstrates significant program impacts. However, the evaluation did not find any changes in other health outcomes such as obesity, depression, or life function. The evaluation also did not conduct analyses based on particular diagnoses or effects of medication.



How is Tropical Texas Behavioral Health using the evaluation findings to improve?

This evaluation contributes to our understanding of the impact of the integration of primary care services within a behavioral health service context on the health status of individuals with SPMI. Lessons learned include: operational facilitators such as leadership support, strong communication, and training were critical for program implementation; while strong planning, data collection practices, and frequent communication with participants were important facilitators for implementing the evaluation. As TTBH moves forward in its service implementation after the study, it is planning to continue the primary care model in its facility and is examining these findings and their operational plans to determine how to modify the model so that it is financially sustainable.

Evaluation At-a-Glance

Evaluation Design: Randomized controlled trial (RCT) impact evaluation

Study Population: SPMI population in the Rio Grande Valley

Independent Evaluator: Health Resources in Action (HRiA)

This Evaluation’s Level of Evidence*: Moderate

*SIF and AmeriCorps currently use different definitions of levels of evidence.

The content of this brief was drawn from the full evaluation report submitted to CNCS by the grantee/subgrantee. The section of the brief that discusses evaluation use includes contribution of the grantee/subgrantee. All original content from the report is attributable to its authors.

To access the full evaluation report and learn more about CNCS, please visit <http://www.nationalservice.gov/research>.

The Social Innovation Fund (SIF), a program of the Corporation for National and Community Service (CNCS), combines public and private resources to grow the impact of innovative, community-based solutions that have compelling evidence of improving the lives of people in low-income communities throughout the U.S. The SIF invests in three priority areas: economic opportunity, healthy futures, and youth development.