

Mercy Ministries of Laredo: Sí Three Integration of 3-D Health Services

What is the community challenge?

Residents of Webb County, along the U.S.-Mexico border, suffer from health disparities which stem from extreme poverty, lower levels of educational attainment, and inadequate access to basic health care. As identified in numerous region-specific assessments and reports, the scarcity of primary care and behavioral health service providers is a key factor influencing higher-than-average disease prevalence and unfavorable disease management.

What is the promising solution?

Mercy Ministries of Laredo's Sí Three intervention provides integrated behavioral healthcare for this population with the advantages of optional spiritual-based care. The intervention services include: 1) the use of a care coordinator for patient follow-up; 2) integrated behavioral health services provided by an individual who is trained as an LPC and pastoral counselor; and 3) access to an exercise coach and nurse educator. After 12 months in the program, the study demonstrated that the Sí Three integrated care model with faith-based behavioral health services had a significant association with physical and behavioral health improvement among intervention participants.

Program At-a-Glance

CNCS Program: Social Innovation Fund

Intervention: Sí Three Integration of 3-D Health Services

Grantee: Methodist Healthcare Ministries of South Texas Inc.

Subgrantee: Mercy Ministries of Laredo

Focus Area: Healthy Futures

Focus Population: Low-income, primarily Hispanic adult clinic patients

Community Served: Webb County, TX

What was the purpose of evaluation?

The evaluation of Mercy Ministries of Laredo's Sí Three Program by Health Resources in Action Inc. (HRiA), an independent evaluator, began in 2016 and finished reporting in 2017. The study evaluated the Sí Three program's impact by comparing program participants to patients who did not participate in the program, using two different comparison groups. A primary clinic comparison group of potentially similar patients who chose not to participate in the Sí Three program was recruited from Mercy's clinic population and enrolled in the study, and a secondary comparison group was recruited from two nearby similar clinics. Regression analyses were conducted on these samples, controlling for differences in baseline demographic and outcome measures.

What did the evaluation find?

In addition to significant patient outcomes, implementation evaluation results from surveys, interviews and administrative records showed that the program was implemented with high fidelity, and the patients and providers were very satisfied with the care that was provided. Mercy Ministries of Laredo also improved work flow between primary care and behavioral health, and improved staff understanding of roles and integrated behavioral health culture.

Notes on the evaluation

Propensity score matching was not conducted in this QED evaluation. This limits the internal validity of the study because baseline equivalence between treatment and comparison groups was not achieved. Compared to the primary and secondary comparison groups, intervention group participants were more likely to have higher scores on depression and anxiety measures and lower scores on quality of life measures at baseline. They were also less likely to be employed, and they scored lower on the Spirituality Index. Combined with the fact that participants self-selected into the intervention, the evaluation design is therefore limited by selection bias and other threats to internal validity.

How is Mercy Ministries of Laredo using the evaluation findings to improve patient outcomes?

Upon completion of the evaluation study Mercy Ministries of Laredo expanded integrated Sí Three services to all clinic patients. Mercy also has enhanced training for healthcare professionals to help them understand their role in a holistic behavioral healthcare integrated team. This 12-month study contributes to understanding the impact of integrated behavioral health services with an option of faith-based counseling with a primarily Hispanic population. However, Mercy clinic will continue to monitor and record health outcomes over time to measure the effect of integrated services on changing patient health behaviors.



Evaluation At-a-Glance

Evaluation Design: Quasi-Experimental Design with Linear Regression

Study Population: Low-income, primarily Hispanic, adult clinic patients in Webb County, Texas

Independent Evaluator: Health Resources in Action Inc.

This Evaluation's Level of Evidence*: Preliminary

*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 contributions from the grantee and 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.