

## Adapting Mental Health Programs for Underserved Communities

### Spotlight on: Earlise Ward

When Earlise Ward, PhD, worked at a local community mental health clinic in 2002, she noted serious problems with patient dropout rates among Hmong, African American and Latino clients. She also knew that research examining mental health issues in diverse, underserved communities was hindered by the stigma of mental illness and continued negative perceptions about participating in research.



Earlise Ward in South Africa wearing cultural face art.

Fast forward 12 years, and Ward is a tenured faculty member in the UW School of Nursing and the PI of a \$1.8 million NIH-funded depression intervention for African Americans, *The Oh Happy Day Depression Intervention* (OHDC). She used quantitative and qualitative data from African American research participants to develop and test a culturally-relevant intervention for treating depression among African American adults.

Ward's research relies on partnerships with African American churches and community centers in Madison and Milwaukee as part of its recruitment strategy. African American adults are the source of information about how to overcome barriers that racial and ethnic minorities experience in seeking mental health services and/or in receiving proper diagnosis and treatment. Now in its fourth year, the research represents a significant and novel contribution to evidence-based strategies for community-based provision of mental health services in underserved populations.

#### ICTR resources and training help an emerging scholar

After earning her PhD in Counseling Psychology from UW Madison in 2002, Ward was a clinical post-doctoral scholar through UW Counseling and Consultation Services, followed by a research post-doctoral fellowship at the UW Center for Women's Health. As a TEAM K12 Scholar, Ward was a member of one of the first cohorts of ICTR KL2 scholars in 2007.

Ward's association with ICTR was multi-faceted over the next few years. She received a key pilot research award of \$50,000 through the ICTR Type 2 Translational Research Pilot

program in 2008. This support, together with small funding awards from the UW School of Nursing and the UW Graduate School, allowed Ward to obtain the key preliminary data for her ultimately successful R01 application to the NIH (2011).

ICTR also provided Ward with access to mentoring and other research resources that contributed to her emergence as a funded investigator, including ongoing study design and analysis from the ICTR Community Academic Partnerships Program; assistance with finding collaborators in Milwaukee via the Collaborative Center for Health Equity (CCHE) and Community Health Connections; study design consultations from ICTR biostatistics, the Scientific Review Committee, and the Health Innovation Program; and scientific editing.

#### Transition to mentoring other junior investigators

Ward was chosen as a CCHE Health Equity Leadership Institute ([heliuw.wordpress.com/](http://heliuw.wordpress.com/)) scholar in 2010. Participation in HELI included a mock study section review of her revised R01 grant application.



Ward's participation in HELI was so pivotal that when she joined CCHE as a faculty researcher in 2013, she became one of the HELI faculty directors charged with planning and prioritizing content for future sessions. Other ways that Ward gives back both to ICTR and the broader health equity research infrastructure include teaching research methods courses in the School of Nursing and mentoring new health equity investigators.

#### Ward's passion for her work

Ward reflects, "My passion for this work started with a critical incident one day on the Metro Bus. An African American woman initiated a conversation with me. When I told her I was studying counseling psychology and cultural issues, she responded, 'That's good, we really need people like you to study that stuff. Let me tell you what happened to me recently. Sometimes I have mood swings. When the weather gets cold, I sometimes get depressed and unhappy, you know. Part of my unhappiness is related to being a Black woman living in a White city. Anyway, I decided to tell my doctor about my mood swings. He recommended counseling. At first I did not want to go, because you know how us Black folks feel about counseling. Plus, I don't want anyone to think I am 'crazy.' When I finally got the courage to go to counseling, in the first 30 minutes the counselor tells me I need to see a psychiatrist for medication. What's wrong with him, he didn't even spend any time getting to know me? I just needed someone to talk too, but instead he is talking about medication. Well girl, I never went back.'"

Ward continues, "I was emotionally moved by this woman's story, and thought, 'This cannot continue. Something needs to be done, somebody needs to do something about these issues.' After a few days of reflection, I realized that 'I' was the 'someone' that needed to do something to create change. My program of research is my effort to 'do something' to create change."

#### Learn more about Earlise Ward:

Earlise Ward Receives Tenure (April 18, 2013) [www.son.wisc.edu/earlise-ward-receives-tenure.htm](http://www.son.wisc.edu/earlise-ward-receives-tenure.htm)

African American Depression Intervention Project: Searching for Solutions (April 18, 2013) [capitalcityhues.com/041813DepressionInterventionProject.html](http://capitalcityhues.com/041813DepressionInterventionProject.html)

There is no health without mental health (April 12, 2013) [legacy.themadisontimes.com/news\\_details.php?news\\_id=2740](http://legacy.themadisontimes.com/news_details.php?news_id=2740)