

# Disparities and Cultural Competency Advisory Committee (DACC) LEARNING COMMUNITY TRAINING: THE AMISH CULTURE & CONTINUITY OF CARE

## DISPARITIES AND CULTURAL COMPETENCY (DACC) LEARNING COMMUNITY

### Featured Speakers



Heng Wang, MD, Ph.D.  
CEO/Medical Director  
DDC Clinic, Center for  
Special Needs Children



Jim Adams, CEO  
Geauga County Board  
of Mental Health and  
Recovery Services



Michelle Warren, Amish  
Support Specialist  
Ravenwood Mental  
Health Center

**DATE:** Thursday, October 22, 2015

**TIME:** 9:00 AM – 12:15 PM

Contact Anna Labya at [dacc.learningseries@mha.ohio.gov](mailto:dacc.learningseries@mha.ohio.gov) for information about contact hours in the following disciplines:

Registered Nurse, Licensed Practical Nurse, Counselor, Psychologist, Social Worker, and Chemical Dependency Counselors & Prevention Professionals.

## TRAINING OVERVIEW

The speakers will share experiences from the provider perspective and consumer voice on current efforts to reduce disparities. They will discuss existing service gaps, emerging access barriers, and current strategies underway to achieve health equity. Participants will have the opportunity to interact with panelists and learn about Best and Promising Practices as it relates to engagement, retention, and outcomes.

**Upon attending the *Learning Series*, participants will be able to:**

1. Understand common beliefs, customs, and traditions central to Amish culture.
2. Understand Amish culture views on seeking health care and treatment.
3. Identify strategies necessary to establish a relationship with the Amish community for the purpose of promoting treatment services (i.e.; behavioral health, health, etc.) and continuity of care.

REGISTER AT <http://mha.ohio.gov/Default.aspx?tabid=173>

## ABOUT SERVICE DISPARITIES

Due to cultural differences, Amish communities experience great barriers to accessing care. Most Amish willingly isolate themselves from mainstream American society in an effort to maintain their culture. As such, they do not typically use western medicine unless it is absolutely necessary or if an illness is in an advanced state. The Amish do not have medical insurance. They pay for their care in cash. Large medical bills are usually covered communally through Amish financial cooperatives. As the Amish are rural dwellers, most also do not live near any health facilities and require transportation for medical care. The Amish generally avoid going to the doctor unless it is absolutely necessary. Given the Amish belief systems about health, continuity of care can be a major challenge. Conditions associated behavioral health disorders and diseases usually involve stigma and can result in social isolation. Implementation of engagement strategies must be a priority for health systems to improve the delivery of care over time.

For more information and resources please visit the Ohio Department of Mental Health and Addiction Services online resource bank at [www.mha.ohio.gov](http://www.mha.ohio.gov).