Liu spurs collaboration, innovation in behavioral health care at UNMC

by Kristin Durbin

Aiming to see that Nebraska will equip and retain its future mental health care providers for the 21st century, Dr. Howard Liu describes common goals of his different responsibilities on the campus of the University of Nebraska Medical Center — from his recruiting and teaching of future providers, to his focus on workforce development in the state, to his work as director of faculty development at the medical school.

There is no health without mental health, said Liu, a board certified child and adolescent psychiatrist.

“Stigma affects not only patients but it is found toward providers in the current and future workforce in behavioral health fields. It is ‘discouragement even from within medical and health professions from going into and pursuing that — and that’s powerful — and I think we have to actively combat that,” Liu said.

While he was attending medical school, his plan was to go into internal medicine like his father, a pulmonologist. During his last rotation, his attending and resident psychiatrist he worked for at the Veterans Hospital provided him the opportunity to work in a high intensity substance abuse program in both group and individual therapy with veterans.

“But I still remember the stories from those veterans and the power of it,” Liu said. “Realizing their tremendous stories, their valor — some of the things they sacrificed — I realized this is an amazing job.”

In 2009, Liu completed a child and adolescent psychiatry fellowship at Massachusetts General Hospital/ McLean Hospital in Boston.

Another challenge Liu sees is behavioral health professionals retiring as half of Nebraska’s are older than 50, according to BEHCN’s analysis.

Additionally, the practice delivery model is a challenge even without coming shortages, and Liu said that more integration with primary care physicians will probably be the future. A new Nebraska law created three pilot sites to integrate child psychologists in pediatric clinics, two in rural Nebraska and one in Omaha. Finding more ways to triage care — understanding use of resources and priority based on condition of the patient — is needed, Liu said.

Twenty-first century care includes telehealth. Liu cited Dr. Thomas Magnuson’s work in geriatric psychiatry to address the challenge when patients may be hours from the hospital and patients could be injured in the interim. Child and Adolescent Psychiatrist Division Director Dr. Jennifer McWilliams is working in a related way on an outpatient basis.

This past year Liu became director of faculty development and continues the encouraging of interprofessional collaboration started by his predecessors, he said, including Dr. Myrna Newland.

Asked about working through stress and emotions of the fields, Liu said that taking care is cliché but it is reality. Liu said it is generative working with students who blossom, and it is also important to set boundaries to sustain yourself and find balance.

“For me that’s my family and my loved ones,” he said.