Our Mission
The South Southwest MHTTC serves U.S. Department of Health and Human Services Region 6, including Arkansas, Louisiana, New Mexico, Oklahoma, and Texas. Our population of focus is mental health clinicians, supervisors, and program managers serving individuals with or at risk of serious emotional disturbances (SED) or severe mental illness (SMI); peer support providers; community mental health, health, or peer-run organizations; and single state agency administrators focused on comprehensive state public mental health systems.

MHTTC REACH BREAKDOWN

8,196 participants

PARTICIPANT RESPONSES

96.0% of participants reported satisfied or very satisfied with the quality of the event.

95.4% of participants strongly agree or agree that the event will benefit their professional development or practice.

91.4% of participants strongly agree or agree information gained [from the event] will change their current practice.
Event Outcomes: Demographic Breakdown

ETHNICITY BREAKDOWN

- Native Hawaiian/Pacific Islander (0.3%)
- Asian (2.7%)
- American Indian/Alaskan Native (4.5%)
- Black (17.8%)
- Latinx/Hispanic (21.2%)
- White (55.3%)

GENDER BREAKDOWN

- 84.2% Women
- 15.2% Men
- 0.3% Transgender

PROFESSION BREAKDOWN

- Peer Professional: 17.1%
- Social Worker: 16.9%
- Counselor: 14.9%
- Recovery Specialist: 9.2%
- Educator: 6.1%
- Student: 4.2%
- Other Profession: 2.0%

EDUCATION BREAKDOWN

- Master's Degree: 27.9%
- Bachelor's Degree: 36.5%
- Some College: 16.1%
- Associate's Degree: 6.1%
- High School Diploma or GED: 6.1%
- PhD, EdD, DPT: 4.6%
- Other: 2.0%
Event Outcomes: Highlights

REGION 6 PEER CONFERENCE: IGNITING THE SPARK OF HOPE

The Region 6 Peer Support Conference was hosted June 22 - June 24, 2021. The virtual three-day agenda featured nationally-recognized plenary speakers, interactive panel discussions, and opportunities to learn from and network with peer support professionals from across the region.

530 unique attendees

2,140 participants

95.4% of participants were very satisfied or satisfied with the quality of the event.

98% of participants would recommend this event to a colleague.

95.4% of participants strongly agree or agree that this event benefits their professional development.

“I didn’t know it was possible for me to reimagine peer support but when Yolo talked about how his perspective on the history of peer support … I began to imagine it differently. The statistics shared showed the need for [peer] services versus the current capacity … an incredible opportunity for growth.”

REFLECTIVE SUPERVISION FOR EARLY CHILDHOOD PROVIDERS

Reflective Supervision was divided into one training event for supervisors and one for home visitors. Training was followed up by monthly coaching calls for supervisors. These trainings targeted evidence-based early childhood mental health prevention and promotion programs.

84 supervisors

293 home visitors

100% of respondents strongly agree or agree that they have continued to use what they learned in their practice.

“Being more aware of what feels challenging or uncomfortable and being able to be more intentional when reflecting on these challenges. It has helped me face it and work through it rather than avoid it. It has also made me be able to reflect on what support I need to be able to effectively address these challenges.”
School Mental Health and Provider Wellbeing Highlights

### SCHOOL MENTAL HEALTH

- **Regional Events**: 21
- **Regional Participants**: 734

#### HIGHLIGHTED EVENT:
**DEMYSTIFYING THE USE OF DATA TO UNDERSTAND SCHOOL MENTAL HEALTH**

- **Participants**: 22
- **100%** of respondents would recommend this training to others.

#### CHANGE IN PRACTICE:
“I was able to share this content with practitioners working with schools and MTSS teams.”

### PROVIDER WELLBEING

- **Events**: 39
- **Participants**: 4,624

#### HIGHLIGHTED EVENT:
**STRESS MANAGEMENT AND RESILIENCY TRAINING (SMART)**

- **Participants**: 167
- **100%** of respondents strongly agree that this event benefitted their professional development.

#### CHANGE IN PRACTICE:
“Going into difficult meetings with firm compassion. Keeping the concept of ‘this person struggles and is special’ top of mind. Behavior isn’t personal.”