



Year Two *Annual Report*



New England (HHS Region 1)

MHTTC

Mental Health Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

We began Year 2 by deepening our relationships around the region, forging new connections, and continuing our training and technical assistance efforts. When the COVID-19 pandemic began, we rapidly shifted our work to focus on supporting people's mental health and well-being during a time of fear, loss, uncertainty, and social isolation. Descriptions of these efforts and others appear on the following pages.

Our Principles



During Year 2, we updated our principles to focus more intentionally on the impact that racism has on mental health and articulate more clearly the need for recovery-oriented practices that center on social justice. To read the full document, please visit our [website](#).

Responding to COVID-19

The coronavirus pandemic took hold in our region midway through Year 2 of our grant cycle and required that we quickly adapt our work. All in-person meetings were suspended, so we reimagined site visits, training and technical assistance, and networking to reflect the new reality. We also recognized the deep impact that the pandemic was having on New Englanders. People struggled financially, families lost loved ones, and every aspect of our lives was shaken by social distancing precautions. To support recovery, we compiled a variety of resources for mental health professionals as well as members of the community, such as:

- state-by-state infographics of compiled resources focused on recovery and well-being;
- webinars that addressed self-care and the support of staff in overwhelming times;
- an eight-part yoga series focused on relaxation and restoration of the mind and spirit;
- multilingual resources from the World Health Organization; and
- resources developed by MHTTC partners in other regions.

These resources and others are available on our [website](#).

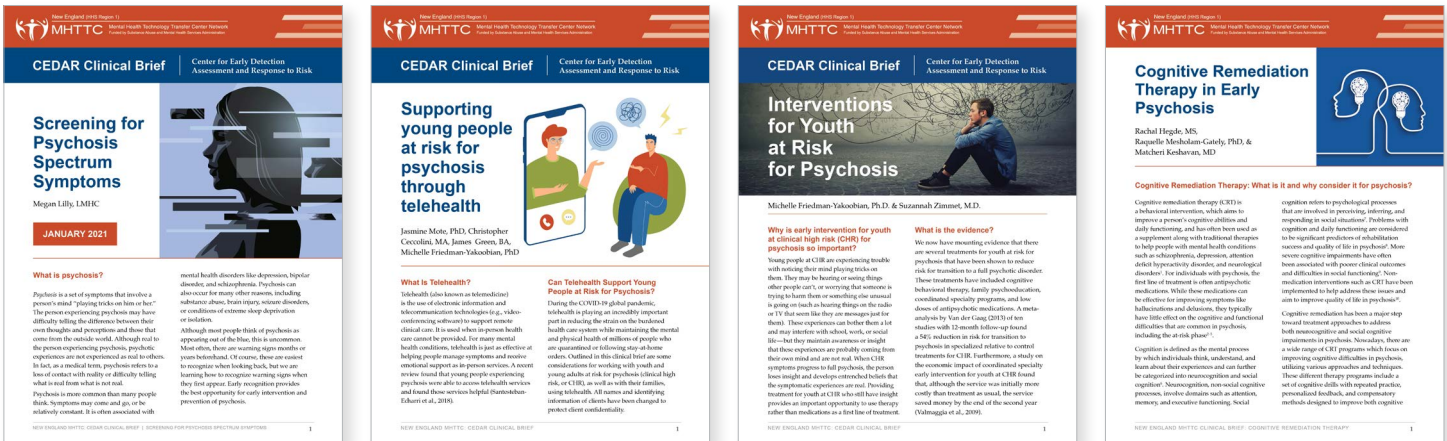
Strengthening Existing Initiatives and Growing New Ones

We have forged new partnerships and strengthened existing ones by:

- conducting webcasts with the International Association of Peer Supporters (iNAPS) and the Chicago Health Disparities Center (CHDC) on peer support services;
- partnering with the University of Massachusetts Boston to host *Conversations with Millennials of Color*, a forum that sought to dispel stereotypes about accessing behavioral health services for youth and students of color;
- participating in the Connecticut Association of People Supporting Employment First (APSE) conference, focusing on the full inclusion of people with disabilities in the workplace and community;
- attending the International Society for Psychological and Social Approaches to Psychosis (ISPS-US) conference, presenting a session entitled *Psychosis, Citizenship, and Belonging: Forging Pathways toward Inclusion and Healing*;
- hosting a series of virtual conversations in English, Spanish, and Portuguese to support Hispanic/Latinx communities by enhancing cultural competence on mental health; and
- working with the Maine Office of Child and Family Services on intensive technical assistance.



Top: Flyer from *conversations with Millennials of Color*; Bottom: Flyer from *virtual conversations to support Hispanic/Latinx communities*.



Four clinical briefs, based on the needs of EPLC members, from left to right: Screening for Psychosis Spectrum Symptoms, Supporting Young People at Risk for Psychosis Through Telehealth, Interventions for Youth at Risk for Psychosis, and Cognitive Remediation Therapy in Early Psychosis.

Specific Initiatives

Early Psychosis Learning Collaborative (EPLC)

Our EPLC efforts in Year 2 continued to be robust. We hosted a variety of webcasts and online discussion series on early-episode psychosis treatment, including payments and process improvement. The team created four clinical briefs and offered psychopharmacology consultation based on the needs of EPLC members.

Suicide Prevention

Our suicide prevention efforts grew in several ways over the course of Year 2. We convened a gathering of 17 representatives from Zero Suicide initiatives across the region, participated in the Vermont Suicide Prevention Symposium, and continued to expand our network through a series of virtual conversations, in-person convenings, and webcasts. Notably, we hosted a webinar on the topic of trauma and suicide, led by Sera Davidow and Caroline Mazel-Carlton from the Wildflower Alliance, home to the Western Mass Recovery Learning Community (RLC). The “alternatives to suicide” approach, which was pioneered and led by the members of Western Mass RLC, was introduced to the network in a previous webinar.

Childhood Trauma Learning Community (C-TLC)

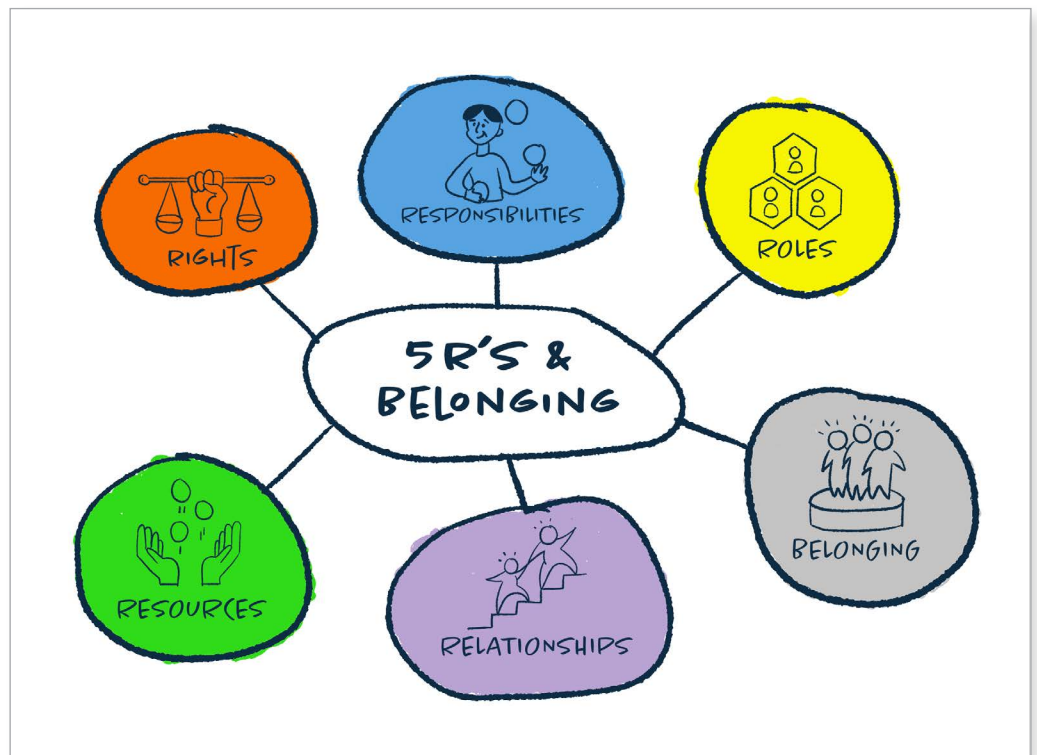
Our C-TLC team conducted 23 webinars on mental health and school. One major highlight was the “Visioning for the Future of Education” webinar series. The team continued to be prolific in its development of free products, including but not limited to webinars, toolkits, and meetings. Our fellowship program engaged 24 educators as C-TLC Fellows to support the development and dissemination of training materials.

Podcast Series

In the interest of disseminating information and continuing conversations across the region during a time of social distancing and virtual events, we launched a podcast series focused on resilience and recovery. To listen, visit thinkt3.libsyn.com/category/Recovery+and+Resilience.

Citizenship Videos

We created a series of innovative videos to highlight the concept of Citizenship that was first articulated by Michael Rowe, Professor of Psychiatry and Director of the Citizens Community Collaborative at Yale Program for Recovery and Community Health. These videos discuss the concept of Citizenship, which is “an applied theoretical framework for the social inclusion and participation of people with mental illnesses.” The video, [“Meeting Jim: The Origins of Citizenship,”](#) introduces viewers to Jim, an individual dealing with mental illness, which led to the inception of the Citizenship program. In the other video, [“Citizenship: The 5 Rs and Belonging,”](#) Michael Rowe conceptualizes the 5 Rs of Citizenship and Belonging—rights, responsibilities, roles, resources, and relationships. The 5 Rs are what “society offers its recognized members, along with a sense of belonging that is validated by others.”



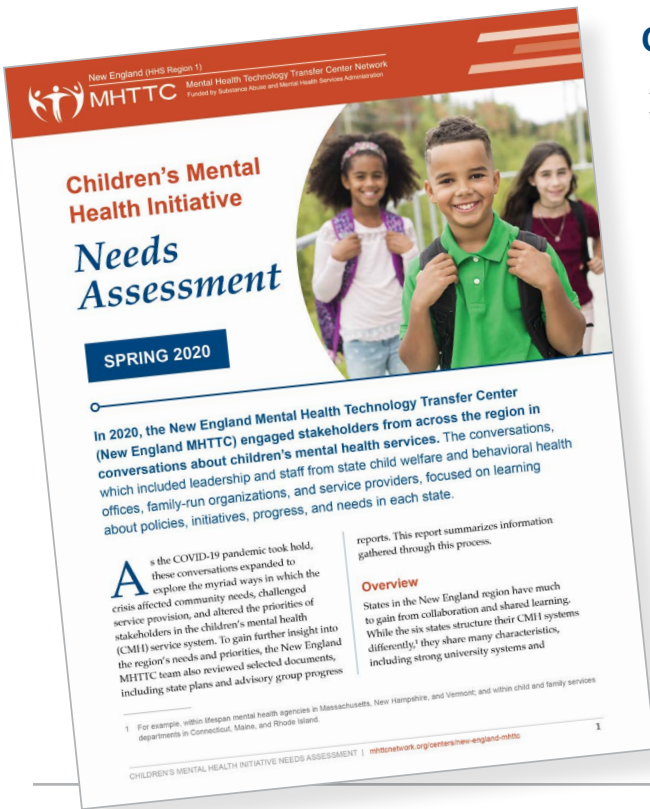
Screen shots from the two videos about Citizenship; Top: “Meeting Jim: The Origins of Citizenship” and bottom: “Citizenship: The 5 Rs and Belonging.”

Environmental Scans and Needs Assessments

In the interest of forging new connections and strengthening existing relationships, we conducted two environmental scans in Year 2.

Children’s Mental Health

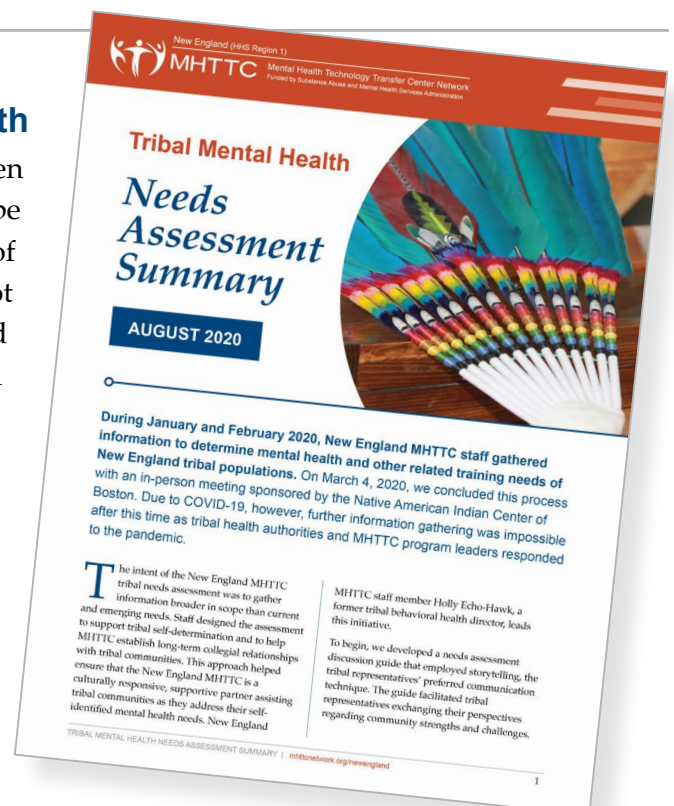
In 2020, our team carried out a [needs assessment](#) by reaching out to stakeholders in the six New England states who work with children’s mental health. We sought to identify some of the challenges that states have encountered and managed to overcome. These challenges ranged from financial matters to the scarcity of appropriate services, cultural responsiveness, and pandemic response. However, all six New England states have initiatives that focus on improving service quality, increasing the number of resources available for their communities, reducing the use of emergency services, expanding wraparound services, and much more. Our role as the New England MHTTC will be to continue connecting the states and stakeholders for the improvement of systems and implementation of initiatives that best serve the younger population.



Tribal Mental Health

Early in 2020, our team conducted outreach to seven federally recognized tribes: the Mashantucket Pequot Tribe and Mohegan Tribe of Connecticut, the Houlton Band of Maliseet Indians, the Passamaquoddy Tribe and Penobscot Nation of Maine, the Rhode Island Indian Council, and the North American Indian Center of Boston. The team facilitated an in-person tribal mental health convening to collect input from all tribes and [assess their needs](#). In-person convenings and face-to-face meetings have been put on hold for the duration of the COVID-19 pandemic; however, virtual connections are continuing and allowing us to collect information and maintain relationships.

To read the full documents for each of these efforts, please visit our [website](#).



By the Numbers

Hosted **66 EVENTS**
(14 meetings, 21 trainings, 31 TAs)
 with
4,300 PEOPLE



Granted
387.5
CEU CREDITS
 representing
49 contact hours



Engaged
24 C-TLC
FELLOWS



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