

The Zoom Interface

The screenshot displays the Zoom Webinar interface with several key elements and annotations:

- Header:** "Zoom Webinar" title bar, "You are viewing David Terry's screen", and "View Options" dropdown.
- Main Content:** TTC Technology Transfer Centers logo, "Thank you for joining us today!", and "You will not be on video during today's session".
- Q&A Window:** A "Question and Answer" window showing a test question: "This is a test question!". It includes tabs for "All questions (1)" and "My questions (1)", and a text input field "Type your question here...". Annotations explain that users can switch between questions and use the Q&A feature to ask questions of the host and presenters.
- Chat Window:** A "Zoom Webinar Chat" window on the right. Annotations explain that the chat feature allows users to talk with other people in the webinar. A message is shown with a "To: All panelists" field, and a note states "Your text can only be seen by panelists".
- Bottom Bar:** Contains "Audio Settings", "Chat", "Raise Hand", "Q&A", and "Leave" buttons. Annotations include "Click here to maximize your session view", "Click here to adjust your audio settings", and "Click here to leave the session".
- Speaker Selection:** A "Select a Speaker" menu is visible, showing "Speakers (Realtek(R) Audio)" selected.

All attendees are muted. Today's session will be recorded.

Enhancing Mental Health Services for the Hispanic and Latinx Community

Session 1: Pa'Lante: Fostering Resilience In Latina/o/x Mental Health

Jesselley De La Cruz, DSW, LCSW

Latino Mental Health Association of New Jersey

March 11, 2022



About Us

The Northeast and Caribbean MHTTC received 5 years (2018 – 2023) of funding to:

- Enhance capacity of behavioral health workforce to deliver evidence-based and promising practices to individuals with mental illnesses.
- Address full continuum of services spanning mental illness prevention, treatment, and recovery supports.
- Train related workforces (police/first responders, primary care providers, vocational services, etc.) to provide effective services to people with mental illnesses.

Supplemental funding to:

- Support schoolteachers and staff to address student mental health
- Support healthcare providers in wellness and self-care activities



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<https://bit.ly/3IU0xF4>



We Want Your Feedback

Our funding comes from the Substance Abuse and Mental Health Services Administration (SAMHSA), which requires us to evaluate our services. We appreciate your honest, ANONYMOUS feedback about this event, which will provide information to SAMHSA, AND assist us in planning future meetings and programs.

Feedback about this training will assist us in developing future trainings that are relevant to your professional needs. Therefore, your feedback counts!



Northeast and Caribbean (HHS Region 2)

MHTTC

Mental Health Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration

Video Recording Information

Please Note:

We will be recording this webinar and posting it to our website along with the presentation slides and any relevant resources.

Disclaimer

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At the time of this presentation, Miriam Delphin-Rittmon served as Assistant Secretary for Mental Health and Substance Use at SAMHSA. The opinions expressed herein are the views of the speakers, and do not reflect the official position of the Department of Health and Human Services (DHHS), or SAMHSA. No official support or endorsement of DHHS, SAMHSA, for the opinions described in this presentation is intended or should be inferred.

This work is supported by grant H79SM081783 from the DHHS, SAMHSA.



Your Interactions With Us

Question and Answers

- Q & A will occur at the end of the call.
- Type your questions in the Q & A feature in Zoom located on the task bar (hover over task bar).
- Note: your question is visible to all participants.

Chat and Polls

- Throughout the webinar, we will be asking for your input.
- Use the Chat or Poll features in Zoom located on the task bar.
- You can control who can see your chat comments.

The MHTTC Network uses affirming, respectful and recovery-oriented language in all activities. That language is:

STRENGTHS-BASED
AND HOPEFUL

INCLUSIVE AND
ACCEPTING OF
DIVERSE CULTURES,
GENDERS,
PERSPECTIVES,
AND EXPERIENCES

HEALING-CENTERED AND
TRAUMA-RESPONSIVE

INVITING TO INDIVIDUALS
PARTICIPATING IN THEIR
OWN JOURNEYS

PERSON-FIRST AND
FREE OF LABELS

NON-JUDGMENTAL AND
AVOIDING ASSUMPTIONS

RESPECTFUL, CLEAR
AND UNDERSTANDABLE

CONSISTENT WITH
OUR ACTIONS,
POLICIES, AND PRODUCTS

Reminder:



All participants will receive a certificate of completion, a link to access the Zoom recording and presenter's slides, within 7 days of this webinar broadcast.

Latino Mental Health Association *of New Jersey*

Founded in 1999, the Latino Mental Health Association of New Jersey is committed to addressing the mental health needs and wellbeing of Latina/o/x communities by supporting mental health professionals across all disciplines through the advancement of training, treatment, research, mentorship, and advocacy. To this end, the Association will promote, provide, and participate in ongoing interprofessional competence, inter-agency collaboration, and community engagement.



Social Media Handles

Instagram: @lmha.nj

Twitter: @lmhanj

YouTube

<https://www.youtube.com/channel/UCRuWakYr83B3LaHoi5vQK4w>

Facebook & LinkedIn: Latino Mental Health Association of New Jersey

Not yet a member? Hurry up and join!

Perks of membership include:

- Access to our listserv
- Discounted rate to programs and annual conference
- Networking opportunities
- Sense of community





UPCOMING EVENTS

- **Webinar series with MHTTC**
 - **Networking Event**
- **Annual Conference February 2023**

and

Additional webinars to be announced!

Our Presenter



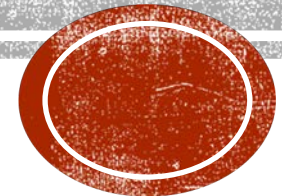
Jesselley De La Cruz, DSW, LCSW



PA'LANTE: FOSTERING RESILIENCE IN LATINA/O/X MENTAL HEALTH

Northeast and Caribbean Mental Health Technology Transfer
Center (MHTTC) – Rutgers University

Friday, March 11th, 2022



Dr. Jesselly De La Cruz, D.S.W., L.C.S.W.
Executive Director, Latino Action Network Foundation
Lifetime Member, Latino Mental Health Association of NJ

WORKSHOP DESCRIPTION

- Identify and discuss the barriers that prevent members of the Hispanic and Latino/a/x community from seeking and accessing mental health services.



THEMES IN TODAY'S DISCUSSION

- What are some immediate free word/thought associations with these bullet points *as it relates your experience and current/future work with mental health in Latinx communities* (*chat)
 - Barriers
 - Prevention
 - Seeking
 - Accessing



GRASSROOTS ORGANIZING TOOL: GROUP MEDITATION & TAPPING EXERCISE

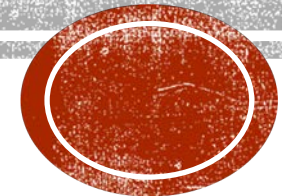
- How do these thoughts and idea shape the way that you practice?
- What resources and supports do you as a mental health professional need or could utilize to better address the systemic needs of Latinx clients in mental health practice?



Social Work Code of Ethics

1.05 Cultural Awareness and Social Diversity

- (a) Social workers should understand culture and its function in human behavior and society, recognizing the strengths that exist in all cultures.
- (b) Social workers should have a knowledge base of their clients' cultures and be able to demonstrate competence in the provision of services that are sensitive to clients' cultures and to differences among people and cultural groups.
- (c) Social workers should obtain education about and seek to understand the nature of social diversity and oppression with respect to race, ethnicity, national origin, color, sex, sexual orientation, gender identity or expression, age, marital status, political belief, religion, immigration status, and mental or physical ability.
- (d) Social workers who provide electronic social work services should be aware of cultural and socioeconomic differences among clients and how they may use electronic technology. Social workers should assess cultural, environmental, economic, mental or physical ability, linguistic, and other issues that may affect the delivery or use of these services.



National Association of Social Workers - NJ Chapter. (2017). Code of Ethics.

<https://www.socialworkers.org/About/Ethics/Code-of-Ethics/Code-of-Ethics-English>

UNDOING THE IMPACT OF RACISM AND OPPRESSION

- What I am open to talking about:
 - Structures and their impact (or lack of) on people
 - The people's impact (or lack of) on systems
 - Etc. includes complex ideas and questions about community-based and equity-informed solutions
- What I believe is unproductive to talk about:
 - Discussions that place responsibility on those most marginalized for why they do not access services.



LEARNING OBJECTIVES

- At the conclusions of this presentation, participants will be able to describe resilience theory, its components, and relevance to mental health practice with Latino/a/x clients
- Continue to integrate contemporary psychosocial challenges for Latino communities and its implications on their mental health
- Learn practical applications of resilience theory in direct clinical services with Latino clients to combat minority stress and improve the mental health trajectory of Latino clients over time
- Critically evaluate our role as mental health professionals in understanding the meaning and effectiveness of clinical theories and research
- Identify ways to work together towards challenging and resisting against reductionist narratives in clinical practice with Latinx mental health



BARRIERS:

**(LACK OF) DESCRIPTIVE
COMMUNITY-INFORMED
DATA, STATS, AND
CONNECTIONS**



LATINA/O/X MENTAL HEALTH

- ***How do we stay attuned*** to Latino/a/x demographics given the DYNAMIC and MULTIFACETED dynamics (i.e. politics) versus static/fix ideas, research, stigma, etc.
- Heterogeneity within the Latino/a/x experience
 - Latinos are U.S.-born vs. Foreign-born (*and the proportions that exist in your local communities*)

***Resources – Census data/American Community Surveys, Center for Migration Policy <https://www.migrationpolicy.org>*



LATINX MENTAL HEALTH

Pre COVID-19 Pandemic

Leading causes of death among Hispanics in NJ (2017)

1. Heart Disease
2. Cancer
3. Unintentional Injuries

COVID-19 Pandemic

Almost half of the deaths among people under 50 in NJ were Latino men.

<https://gothamist.com/news/whole-generations-of-fathers-lost-as-covid-19-kills-young-latino-men-in-nj>



LATINO/A/X MENTAL HEALTH IN NJ

- Latinx communities are 22% of the total state population (2020 Census)
- NJ Latinos are a generally young population
 - Median age for all NJ Hispanic pop. is 31 years old
 - U.S. born Hispanics median age is 19 years old
 - Foreign born Hispanics median age is 41 years old
 - 26% of births in NJ are to Hispanic women



LATINO/A/X MENTAL HEALTH

- Language Access as a Human/Constitutional Right
 - 80% of NJ Latinos speak another language at home other than English
- Access to Health Coverage among NJ Latinos
 - <https://www.njpp.org/issues/health/>
 - Latinos make up 24% of NJ's uninsured
 - 11% of U.S. born Hispanics are uninsured
 - 42% of foreign-born Hispanics are uninsured

GRASSROOTS QUESTION PROMPTS: Does CMS or your local mental health budgeting/governing board provide pay parity for additional languages spoken as a provider?



LATINOS & EDUCATION

- 24% of NJ students K-12 are Hispanic
 - About 62 percent its Latino students (and 66 percent of New Jersey's African American students) attend schools that are more than 75 percent non-white
- Latino Action Network v. The State of NJ (May 17, 2018)
 - De Facto Segregation in NJ Schools (Google/The Rutgers Inclusion Project)

Clark, A. (2019, Jan 20). N.J. schools are among the most segregated in U.S. This lawsuit could change that, NJ.Com. https://www.nj.com/education/2018/05/lawsuit_calls_for_statewide_desegregation_of_nj_sc.html

Pew Hispanic Center. (2014). Demographic and Economic Profiles of Hispanics by State and County. <https://www.pewresearch.org/hispanic/states/state/nj>



LATINO/A/X HIGHER EDUCATION & MENTAL HEALTH PROFESSIONALS

- Increased enrollment in colleges and represent the largest minority group on college campuses
 - Less likely to have bachelor degrees and higher

❑ 11% of psychologists (*89% White males, 75% White females*)²

❑ 13% of social workers (*68% White males, 81% White females*)

❑ 12% of counselors (*70% White males, 72% White females*)

Grassroots Advocacy Question Prompt:

What are the best pathways to strengthen workforce development in Latinx communities to foster resilience in mental health outcomes?



PREVENTION:

(LACK OF) \$\$\$\$\$ TOWARDS
COMMUNITY-BASED MENTAL
HEALTH PROGRAMS AND
INITIATIVES THAT ADDRESS THE
UNIQUE MENTAL HEALTH
NEEDS OF LATINA/O/X
COMMUNITIES



***I can be changed by what happens to me. But I
refuse to be reduced by it.***

-Maya Angelou



FOSTERING RESILIENCE



WHAT IS RESILIENCE?

What is NOT:

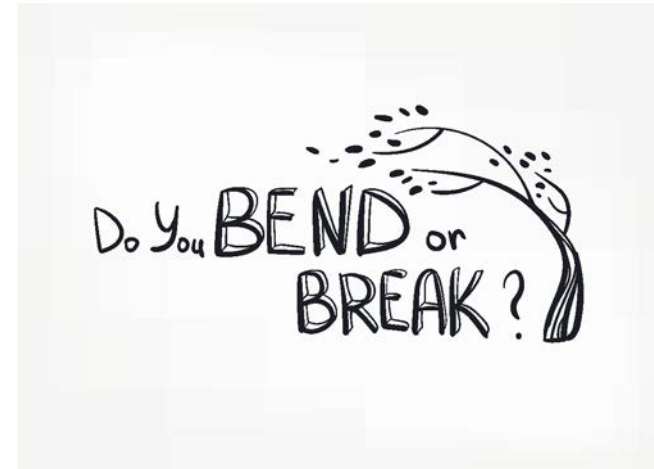
- Not the absence or opposite of psychopathology
- Not nature BUT **nurture**
- Not a static outcome but is a process - the everyday steps
- Not synonymous with coping skills
- Does NOT involve paternalism or moral judgment about a client's presenting problems without knowledge, curiosity, self-awareness, & humility



WHAT IS RESILIENCE?

Current research definitions (2015 and on):

- “to leap back”
- “an **ability** to withstand or recover quickly from **difficult** conditions”



WHAT IS RESILIENCE?



- “role of **mental processes and behavior** in promoting personal assets and **protecting** an individual from the potential negative effect of stressors”
- **Stable** trajectory of **healthy functioning** after a highly **adverse** event”

Fletcher, D. & Sarkar, M. (2017). Psychological resilience: A review and critique of definitions, concepts, and theory. *European Psychologist*, 18(1): 12-23.

Southwick, S. Bonanno, G., Masten, A., Panter-Brick, C. & Yehuda, R. (2014). Resilience definitions, theory, and challenges: Interdisciplinary perspectives. *European Journal of Psychotraumatology*, 5(1). DPO:10.3402/ejpt.v5.25338



WHAT IS RESILIENCE?

- “**Reintegration** of self that includes a conscious effort to **move forward** in an insightful integrated **positive manner** as a result of lessons learned from an **adverse experience**”
- “**Emergent** trait or personal attribute that is developed by an active **process** of moving forward and not returning back”



Southwick, S. Bonanno, G., Masten, A., Panter-Brick, C. & Yehuda, R. (2014). Resilience definitions, theory, and challenges: Interdisciplinary perspectives. *European Journal of Psychotraumatology*, 5(1). DPO:10.3402/ejpt.v5.25338



FOSTERING RESILIENCE

**PROTECTIVE
FACTORS**



**PROMOTIVE
FACTORS**

Southwick, S. Bonanno, G., Masten, A., Panter-Brick, C. & Yehuda, R. (2014). Resilience definitions, theory, and challenges: Interdisciplinary perspectives. *European Journal of Psychotraumatology*, 5(1). DPO:10.3402/ejpt.v5.25338



COMPONENTS OF RESILIENCE

THEORY

PROTECTIVE factors

- Factors that decrease risk of exposure to stress
- Can help buffer the potential negative impact when facing adversity or are in crisis (when risk is highest)



Southwick, S. Bonanno, G., Masten, A., Panter-Brick, C. & Yehuda, R. (2014). Resilience definitions, theory, and challenges: Interdisciplinary perspectives. *European Journal of Psychotraumatology*, 5(1). DPO:10.3402/ejpt.v5.25338

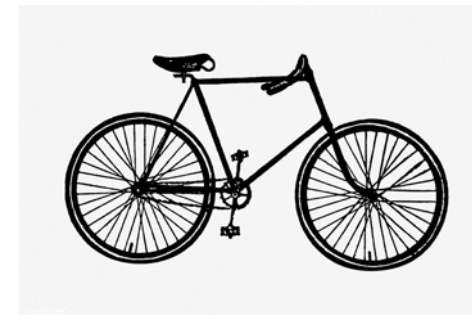
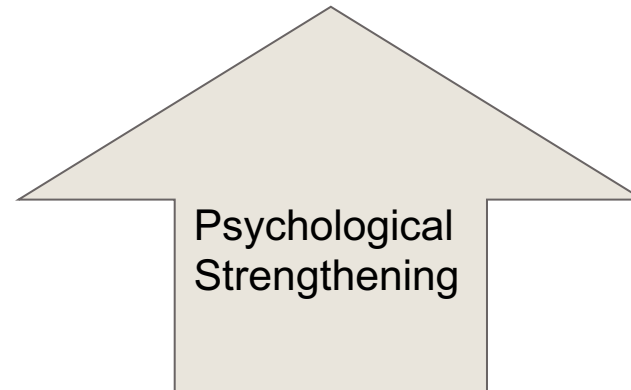


COMPONENTS OF RESILIENCE

THEORY

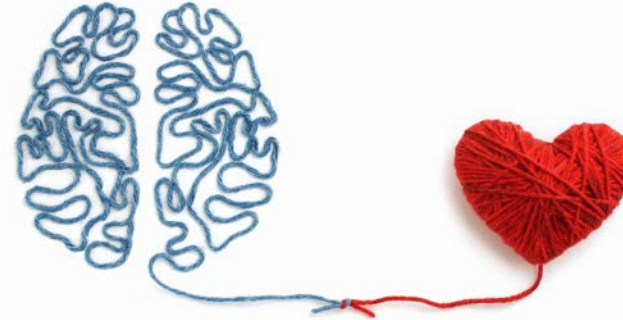
PROMOTIVE factors

- Factors that enhance ability to manage everyday stressors
- Assets and resources associated with desirable outcomes at nearly all levels of risk (GAME CHANGER)



5 THEMES IN RESILIENCE BUILDING TECHNIQUES

- Muscle memory (‘practice makes perfect’)
- Recognition (that you matter)
- Companionship (walking alongside)
- Undivided attention (connection)
- Talking about the past (stronger sense of belonging)



RESILIENCY FOR GENERATIONS

Parents who promote a positive ethnic identity can better prepare children for discrimination & potentially buffer the impact.



Southwick, S. Bonanno, G., Masten, A., Panter-Brick, C. & Yehuda, R. (2014). Resilience definitions, theory, and challenges: Interdisciplinary perspectives. *European Journal of Psychotraumatology*, 5(1).
DPO:10.3402/ejpt.v5.25338



PERSONAL NOTES FROM CLINICAL PRACTICE

- The growing theme of criminalizing immigration (i.e. immigrants are bad)
- The challenges and anxieties facing mixed-status families
- Acculturative stress on intergenerational and transnational relationships (family systems and developmental perspectives)
- Diverse cultural perspectives and experiences of Latinx clients of mental health/salud mental
- Language access to explore their individual and relationship psychological experiences with an informed, trained, and empathic professional (at various points in mental health interventions and settings)



INTERVENTIONS WITH LATINO/A/X IMMIGRANT CLIENTS

- Have community resources and information available for Immigrant clients in visible spaces in your office or incorporate in treatment provision

(PROTECTIVE & PROMOTIVE)

- Educate clients on their rights but be mindful that make efforts to address language access to court process, integrate implicit bias training in staff development, and bridge service disparities.

(PROTECTIVE & PROMOTIVE)



- **SEEKING AND ACCESS ISSUES:**
 - Decolonizing Therapy: If you construct systems and practices that are welcoming to Latinx immigrants, they will engage in mental health services at **their** levels of readiness.
 - Individual therapy versus Healing Centered Engagement



MENTAL HEALTH PROFESSIONAL POSTURE



- Challenging myths in dialogue with peers, students, colleagues at all levels, friends, and family

- **EMBRACING CULTURAL HUMILITY**
 - You don't know what you don't know (the potential impact of our assumptions)
 - Acknowledging difference
 - Openness to learning about and supporting a healthy, integrated narrative for a Latinx client



IMMIGRANT MENTAL HEALTH

- The role of immigration status, mixed-status families, social determinants of health, and interactions with government and social service agencies

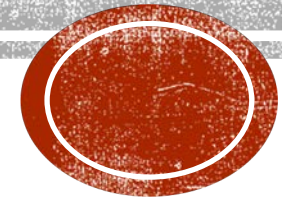


“When people in America are forced to live in fear because of their immigration status, their health and the health of our nation suffers.”

(Office of Minority and Multicultural Health, 2017)



A SOCIAL WORK PERSPECTIVE ON MENTAL HEALTH



De La Cruz, J., Mayers, T., Rios, J. & Rosen, D. (2020, April 27). *Navigating ethical courses of action in a complex world using Maslow's hierarchy of need pyramid*. NASW-NJ virtual conference.

McLeod, S. (2018, May 21). Maslow's hierarchy of needs. Simply Psychology. <https://canadacollegeedu/dreamers/docs/Maslows-Hierarchy-of-Needs.pdf>

Abraham Maslow's Hierarchy of Need (& Strengths/Protective Factors)

(D:1) Physiological needs

- Air
- Water
- Food
- Shelter
- Sleep
- Clothing
- Reproduction

(D:4) Esteem

- Respect, self-esteem
- Status
- Recognition
- Strength
- Freedom

(D:2) Safety needs

- Personal security
- employment
- resources
- health
- property

(B:5) Self-actualization

- Desire to become the most one can be

(B:6) Self-transcendence

- Ability to obtain a unitive consciousness with other humans
- Able to view the world and their purpose in the world in relation to other beings

(D:3) Love and belonging

- Friendship
- Intimacy
- family,
- Sense of connection

De La Cruz, J., Mayers, T., Rios, J. & Rosen, D. (2020, April 27). *Navigating ethical courses of action in a complex world using Maslow's hierarchy of need pyramid*. NASW-NJ virtual conference.

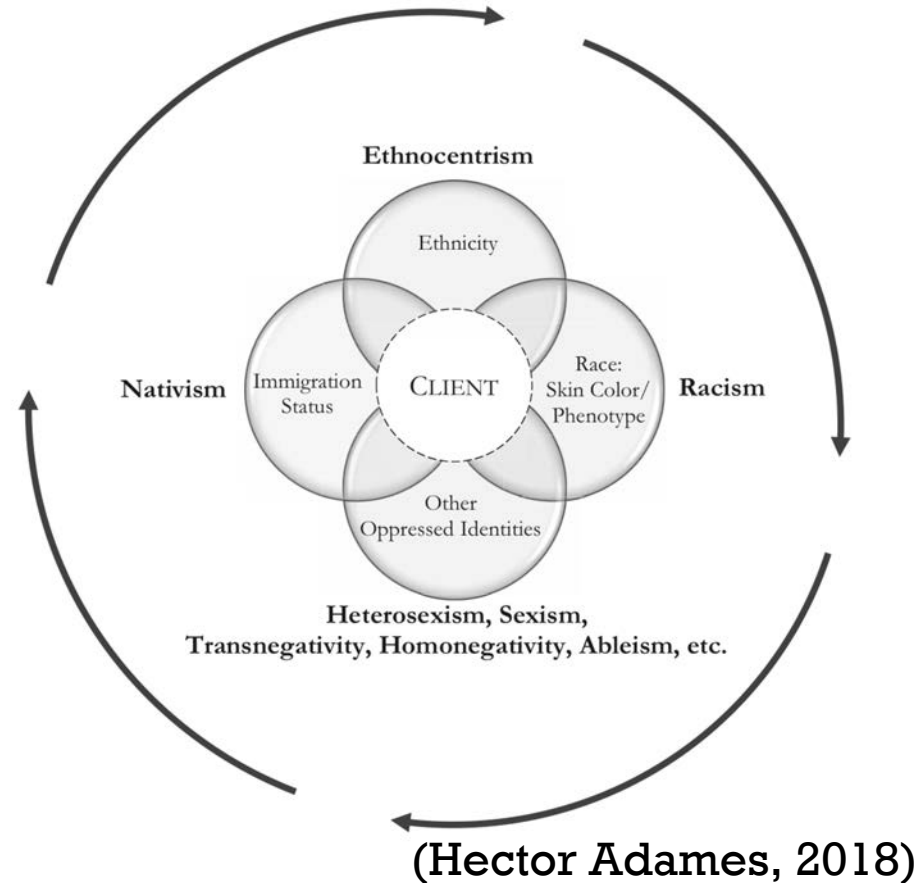
McLeod, S. (2018, May 21). Maslow's hierarchy of needs. Simply Psychology. <https://canadacollegeedu/dreamers/docs/Maslows-Hierarchy-of-Needs.pdf>



INTERSECTIONAL MENTAL HEALTH PERSPECTIVES

“Just as one cannot separate one’s identity from the identity of one’s family, it is also true, therefore, that one cannot separate one’s identity from the identity of one’s society, for it is as an appropriation of one’s society’s narratives that one develops a sense of who one is.”

(John Russon, 2003)



Adames HY, Chavez-Dueñas NY, Sharma S, La Roche MJ. (2018). Intersectionality in psychotherapy: The experiences of an AfroLatinx queer immigrant. *Psychotherapy (Chic)*, 55(1):73-79. Doi: 10.1037/pst0000152. PMID: 29565624.

Russon, J. (2003). *Human experience: Philosophy, nuerosis, and the elements of everyday life*. SUNY Press: Albany.



RESISTANCE AND RADICAL HEALING

- How do we collectively organize to inform the best ways that Latinx immigrant communities can access and seek out mental health services?
 - Everyday practice (how we show up)
 - In clinical supervision, research, and education
 - In local and state initiatives and BUDGETS



GRASSROOTS ORGANIZING QUESTION PROMPTS?

- Do the mental health licensing boards in your state gather information as to languages spoken and/or race/ethnicity among licensed mental health professionals?
- Is licensing accessible to potential candidates who represent historically marginalized communities in your region – why/why not?
- How can you facilitate a pathway for more BIPOC mental health clinicians, specifically clinicians who are linguistically, ethically, and culturally trained to work with Latinx immigrant populations (and those who love them)?

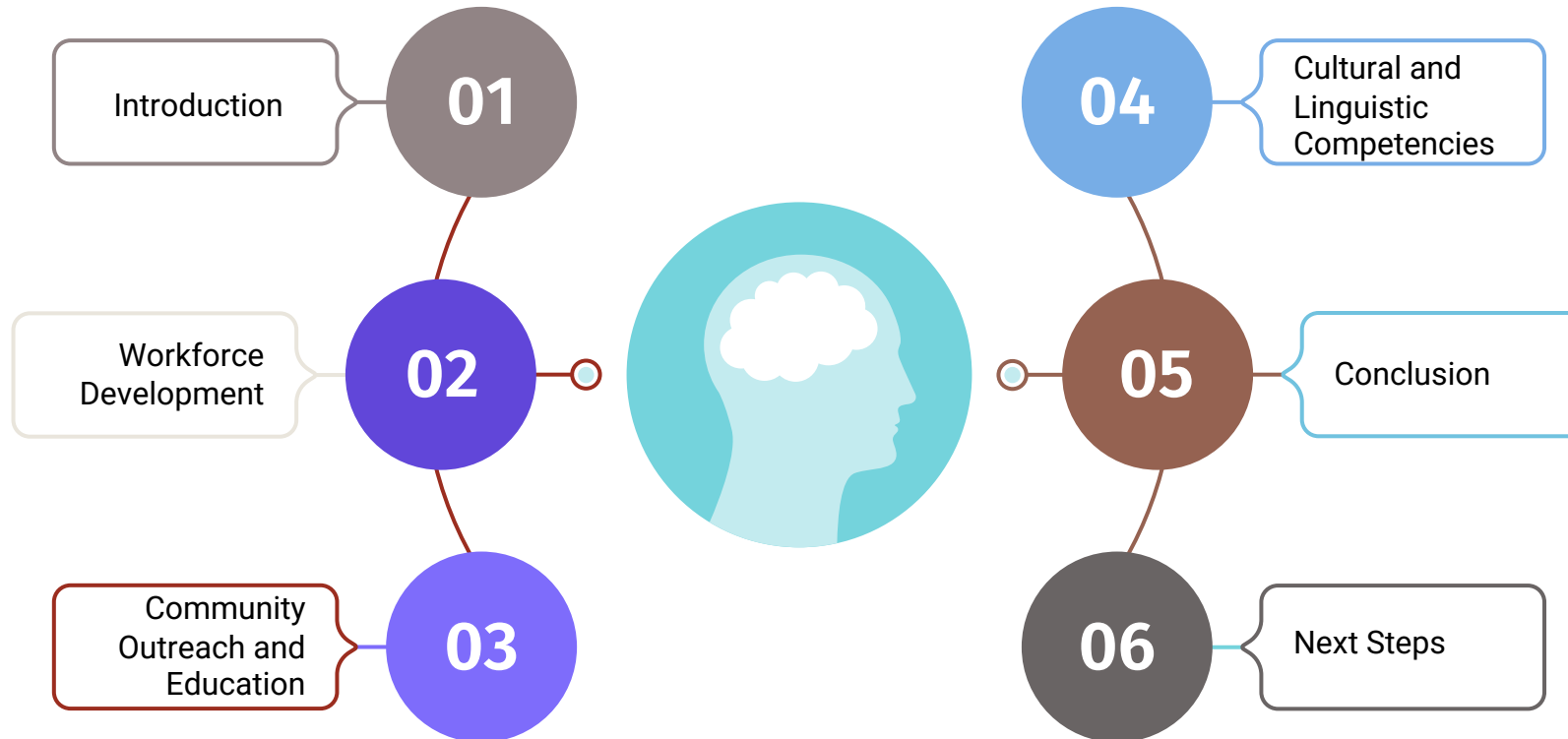




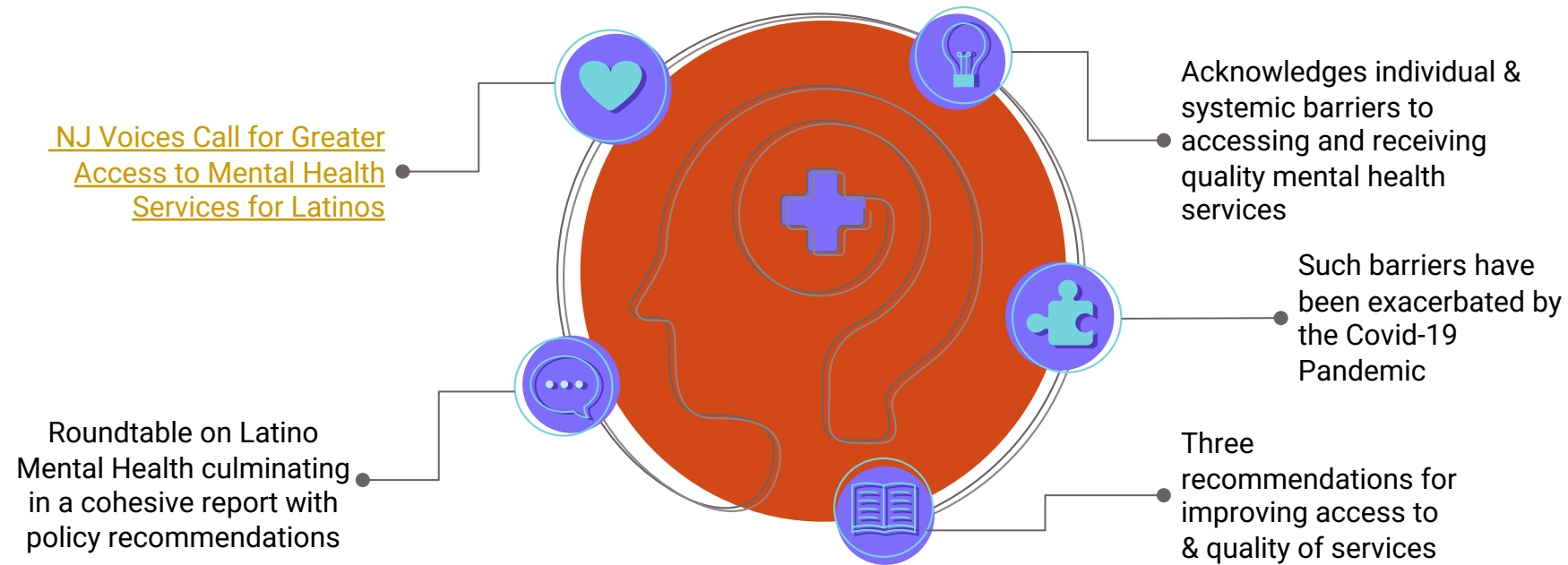
Latina/o/x Mental Health Report Findings



SUMMARY



LATINO/A/X MENTAL HEALTH REPORT



WORKFORCE DEVELOPMENT



1

Funding pathways and supports for bilingual, master's level, licensed practitioners



2

Residency and fellowship funding for bilingual psychiatrists



3

Enhanced rate in medicaid budget for bilingual mental health services

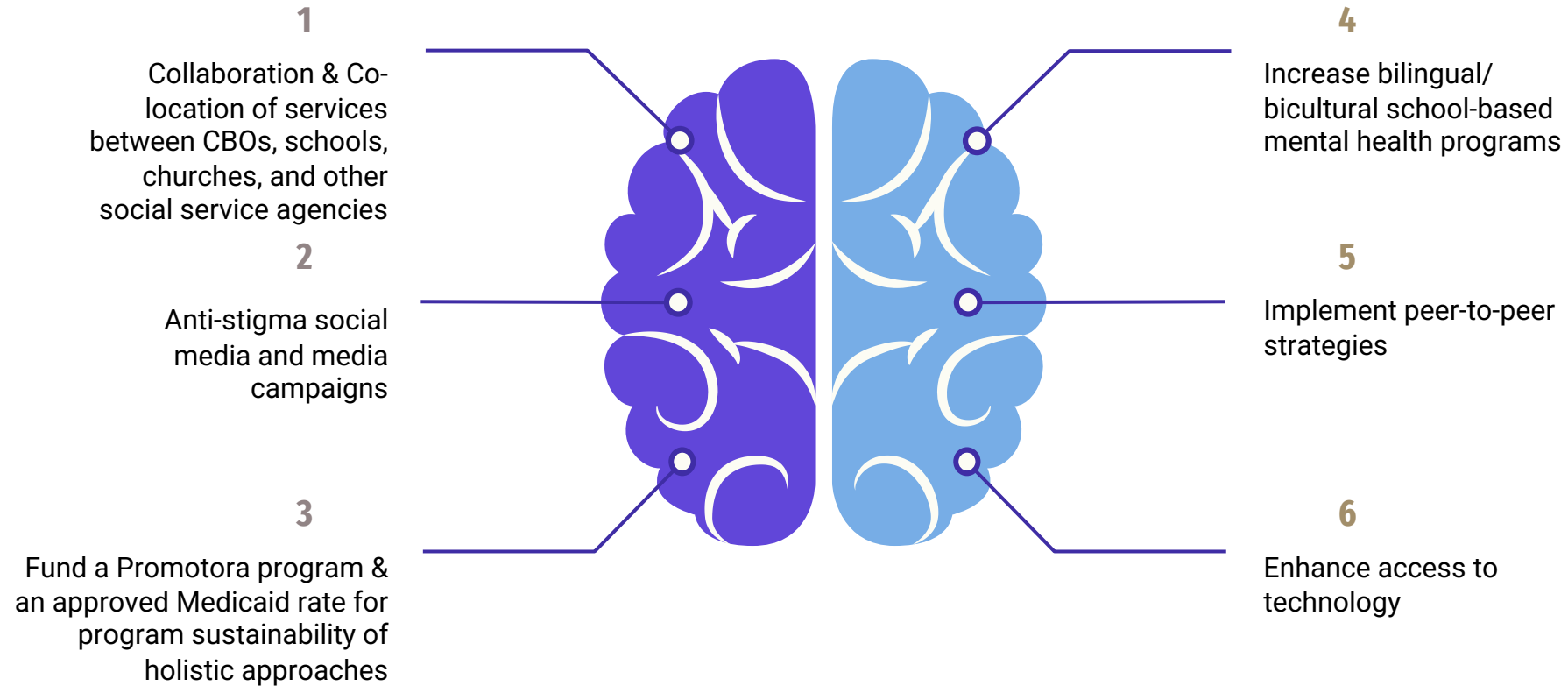


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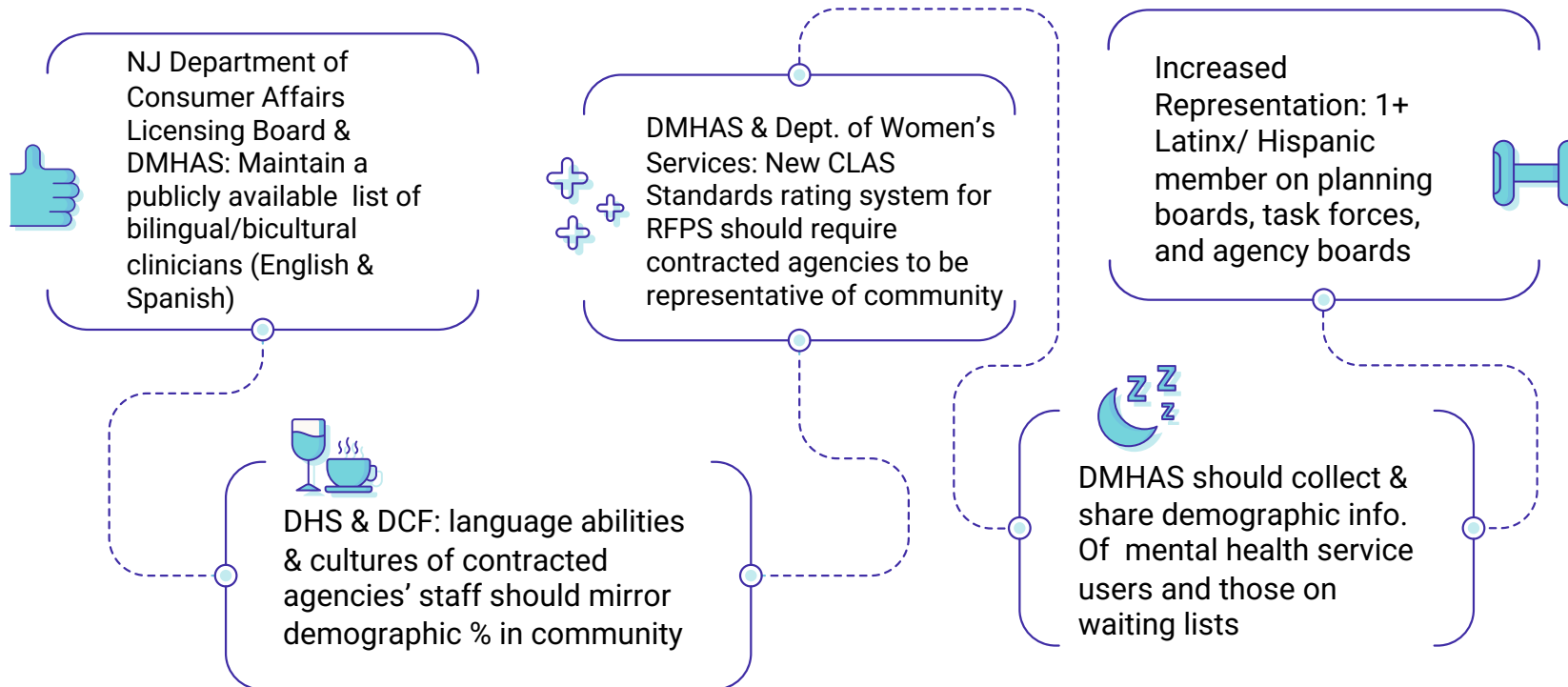
Train Latinx individuals as higher education educators for counseling professions



COMMUNITY OUTREACH AND EDUCATION







CULTURAL AND LINGUISTIC COMPETENCIES



CONCLUSION



-  Led to our participation in the 988 rollout & ATLAS workgroup
-  BIPOC Mental Health Coalition Workgroup
-  Next Steps - Budget Advocacy
-  Questions? Comments?



ADDITIONAL RESOURCES

- APA Guidelines for Diverse and Equitable Language (2021) <https://www.apa.org/about/apa/equity-diversity-inclusion/language-guidelines.pdf>
- APA Presidential Task Force on Immigration. (2013). Working with Immigrant-Origin Clients. An update for Mental Health Professionals.
- Know Your Rights as an Immigrant. American Friends Service Committee. <https://www.afsc.org/resource/know-your-rights-immigrant-english-and-spanish>



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THANK YOU!

Contact information:

Dr. Jesselly De La Cruz, D.S.W., L.C.S.W.

Executive Director, LAN Foundation

Past-President & Lifetime Member, Latino Mental
Health Association of NJ

Email:

drdelacruzlanf@gmail.com

drdelacruz@lanfoundation.org



Question and Answer



Evaluation Information

The MHTTC Network is funded through SAMHSA to provide this training. As part of receiving this funding we are required to submit data related to the quality of this event.

At the end of today's training please take a moment to complete a **brief** survey about today's training.





Upcoming Sessions:

Session 2

April 13, 2022

12:00 pm-1:30pm EST

Session 3

May 10, 2022

12:00 pm- 1:30 pm EST



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Northeast and Caribbean (HHS Region 2)

MHTTC

Mental Health Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration

Connect With Our Center

Phone: (908) 889-2552

Email: northeastcaribbean@mhttcnetwork.org

Website:

<https://mhttcnetwork.org/centers/northeast-caribbean-mhttc/home>

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MHTTC

Mental Health Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration

The purpose of the MHTTC Network is technology transfer - disseminating and implementing evidence-based practices for mental disorders into the field.

Funded by the Substance Abuse and Mental Health Services Administration (SAMHSA), the MHTTC Network includes 10 Regional Centers, a National American Indian and Alaska Native Center, a National Hispanic and Latino Center, and a Network Coordinating Office.

Our collaborative network supports resource development and dissemination, training and technical assistance, and workforce development for the mental health field. We work with systems, organizations, and treatment practitioners involved in the delivery of mental health services to strengthen their capacity to deliver effective evidence-based practices to individuals. Our services cover the full continuum spanning mental illness prevention, treatment, and recovery support.

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