

The Zoom Interface

The screenshot displays the Zoom Webinar interface. At the top, a status bar indicates "You are viewing David Terry's screen" and provides a "View Options" dropdown. Below this, a banner for "TTC Technology Transfer Centers" is visible, followed by a large "Thank you for joining us today!" message and a note: "You will not be on video during today's session".

On the left, a "Select a Speaker" menu is open, showing options: "Speakers (Realtek(R) Audio)", "Same as System", "Test Speaker & Microphone...", "Leave Computer Audio", and "Audio Settings...".

In the center, a "Question and Answer" window is open, showing a test question: "This is a test question!". Annotations explain the "All questions (1)" and "My questions (1)" tabs, and the text input field "Type your question here...".

On the right, the "Zoom Webinar Chat" window is open, showing a message: "The chat feature will allow you to talk with other people in today's webinar." and a "To: All panelists" field. An annotation explains that the "To" field tells who will receive the message.

At the bottom, a toolbar contains icons for "Audio Settings", "Chat", "Raise Hand", and "Q&A". Annotations point to these icons, explaining their functions: "Click Here to adjust your audio settings", "Click here to leave the session", and "Leave".

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

Enhancing Mental Health Services for the Hispanic and Latinx Community

Session 2:

Intersecting Realities and the Diversity within the Hispanic/Latinx
Community: Implications for Research and Practice in Mental Health

Azara Santiago Rivera, PhD, NCC

Latino Mental Health Association of New Jersey

April 13, 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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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!

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.

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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.



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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



Azara Santiago Rivera, PhD, NCC



Intersecting Realities and the Diversity within the Hispanic/Latinx Community: Implications for Research and Practice in Mental Health

APRIL 13, 2022

*CO-SPONSORS: NORTHEAST
AND CARIBBEAN MHTTC AND
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Objectives

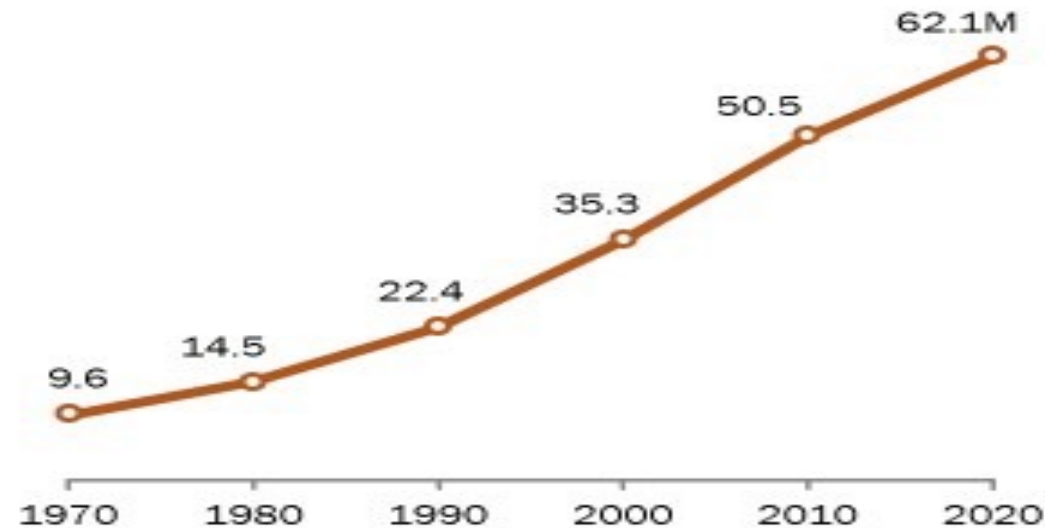
- Review demographics to highlight the diversity within the Latinx/Hispanic community.
- Discuss a variety of social determinants of health (SDOH) and their relationship to health and mental health.
- Illustrate their (SDOH) utility and potential limitations.
- Introduce *Intersectionality* as a framework for understanding and responding to health inequities.
- Discuss factors contributing to trauma and the importance of including trauma history in such a framework.
- Explore possible next steps.

The Diversity of the Latinx/Hispanic Community- Demographics

Source: <https://www.pewresearch.org/fact-tank/2021/09/09/key-facts-about-u-s-latinos-for-national-hispanic-heritage-month/>

U.S. Hispanic population reached more than 62 million in 2020

In millions



Note: Population totals are as of April 1 for each year. Hispanics are of any race.

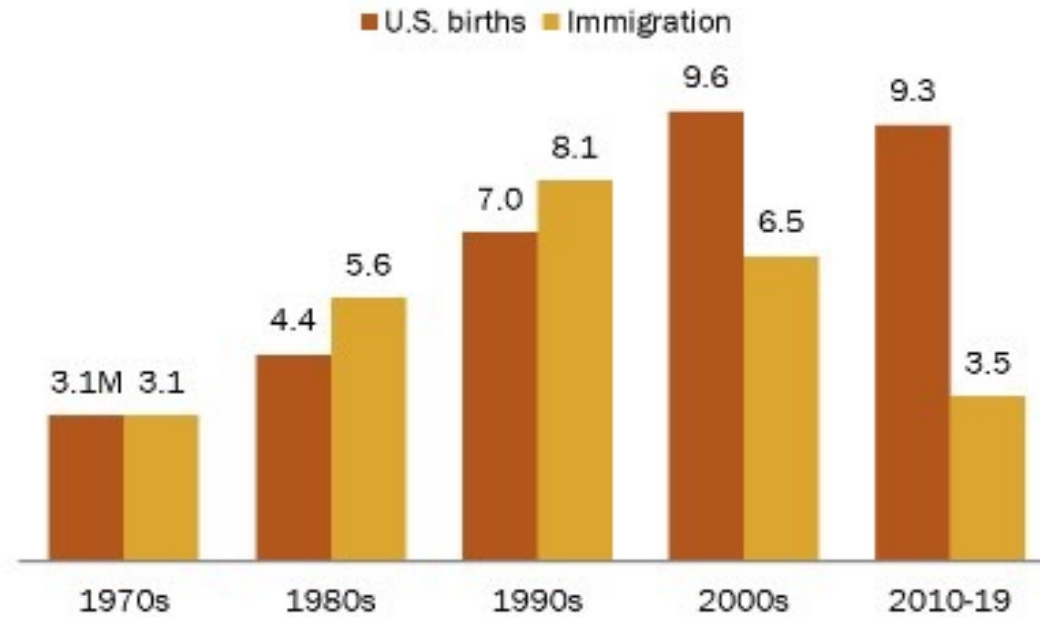
Source: Pew Research Center analysis of 1970-1980 estimates based on decennial censuses (see 2008 report "U.S. Population Projections: 2005-2050"), 1990-2020 PL94-171 census data.

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Diversity in the Latinx Population

Newborns have driven U.S. Hispanic population growth in recent decades, while immigration has slowed

In millions



Note: U.S. birth and immigration figures reflect additions to the U.S. Hispanic population. Deaths and emigration not shown. Hispanics are of any race.

Source: Based on Pew Research Center tabulations of 2010-2019 American Community Survey (1% IPUMS) and U.S. Census Bureau Vintage 2019 estimates for 2010-2019; and 2000-2010 American Community Survey (1% IPUMS) for 2000s. Data for 1970s, 1980s and 1990s drawn from Pew Research Center historical projections (Passel and Cohn, 2008).

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Diversity within the Latinx population

Hispanic origin groups in the U.S., 2019

Origin	U.S. population	% among all U.S. Hispanics	% change, 2010-19
Mexican	37,185,000	61.5	13
Puerto Rican	5,845,000	9.7	25
Cuban	2,380,000	3.9	26
Salvadoran	2,345,000	3.9	28
Dominican	2,085,000	3.4	38
Guatemalan	1,655,000	2.7	49
Colombian	1,240,000	2	27
Honduran	1,075,000	1.8	47
Spaniard	845,000	1.4	20
Ecuadorian	710,000	1.2	6
Peruvian	650,000	1.1	7
Venezuelan	540,000	0.9	126
Nicaraguan	435,000	0.7	15
Argentinean	310,000	0.5	29
Panamanian	195,000	0.3	11
Costa Rican	170,000	0.3	33
Chilean	160,000	0.3	14
Bolivian	135,000	0.2	21
Uruguayan	75,000	0.1	15
Paraguayan	30,000	0.05	41
Other Central American	60,000	0.1	90
Other South American	25,000	0.04	-9
All other Latinos	2,345,000	3.9	50
Total	60,485,000	100%	19%

Notes: Hispanic origin group populations rounded to nearest 5,000; listed in descending order of population size. Hispanic origin is based on self-described ancestry, lineage, heritage, nationality group or country of birth. Total may not add to 100% due to rounding. Source: Pew Research Center tabulations of the 2010 and 2019 American Community Surveys (IPUMS).

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Fastest population growth(2010 to 2019)

Largest Growth occurred in Venezuela, Guatemala and Honduras:

- Venezuelan population in the U.S. increased 126% to 540,000 (the largest)
- Guatemalans increase of 49%
- Honduran population increased by 47%

Individuals of Mexican origin grew by only 13% from 2010 to 2019.

Ecuadorian population had the slowest growth rate at 6%.

- The number of Latinos who identify as multiracial has also increased, from 3 million in 2010 to more than 20 million in 2020

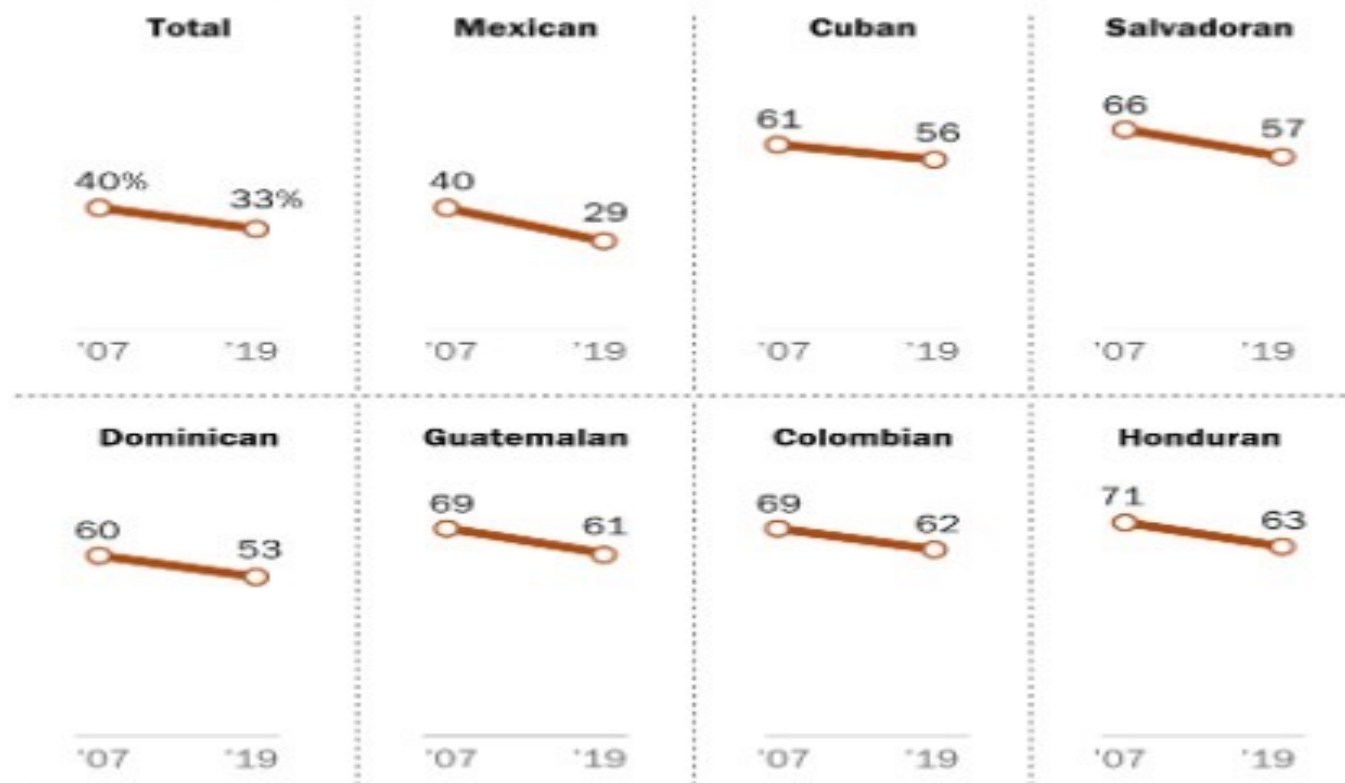
Citizenship: Four-in-five Latinos are U.S. citizens (As of 2019)

- 80% of Latinos living in the country are U.S. citizens (increase by 74% in 2010 and includes people born in the U.S. , Puerto Rico, abroad to parents who are US citizens, and immigrants who are naturalized citizens).
- Spaniards (93%), Panamanians (88%) and Mexicans (81%) have the highest citizenship rates.
- Hondurans (51%) and Venezuelans (48%) have the lowest rates.

Immigration trends

Immigrant share has fallen in largest Latino origin groups since 2007

% born outside of the U.S., by origin group



Note: Hispanics are of any race.

Source: Pew Research Center tabulations of 2007 and 2019 American Community Surveys (IPUMS).

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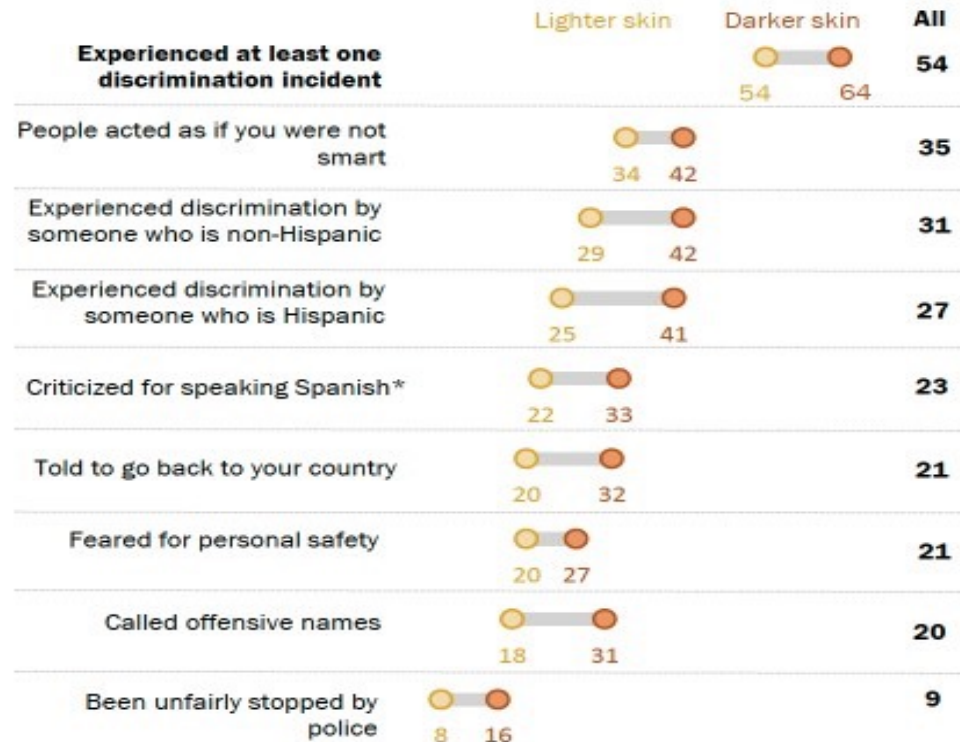
Diversity and the Latinx/Hispanic Community what comes to mind? Let's take a poll!

- It is often the case that demographic data focuses on such factors as level of education, geographic residence, length of residency in the U.S., religious affiliation, bilingualism, age, SES, and self-identified country of origin.
- What else might we consider?
 - Language dialect
 - Gender identity
 - Skin color
 - Generational status in the U.S.
 - Degree of bilingualism
 - Identity based on country of origin and/or identity as an “American”
 - Adherence to specific cultural values and traditions
 - Length of residency in the U.S.
 - Economic conditions

Impact of Skin Color

Hispanics with darker skin more likely to experience discrimination incidents than those with lighter skin

% of Hispanic adults who say each of the following has happened to them in the 12 months prior to March 2021



*Asked only of those who spoke Spanish at least a little.

Note: Skin color is self-assessed based on a 10-step color scale, ranging from lightest (1) to darkest (10). Respondents with lighter skin selected 1-4 on the scale when identifying their skin color while respondents with darker skin selected 5-10. Share of respondents who did not offer an answer not shown.

Source: National Survey of Latinos conducted March 15-28, 2021.

"Majority of Latinos Say Skin Color Impacts Opportunity in America and Shapes Daily Life"

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Latinx Mental and Behavioral Health

Suicide Rate:

- Latinx men suicide death rate was four times the rate for women*
- However, the rate is less than half that of the non-Latinx white population.
- Suicide was the second leading cause of death for ages 15 to 34**.
- Suicide attempts for Latinx girls, grades 9-12, were 30 percent higher than for non-Latinx white girls. **
- Latinx individuals, 18 years of age or older, were 50% less likely to have received mental health treatment compared to non-Latinx whites.**
- Those living below the poverty level are twice as likely to report mental health issues compared to those over twice the poverty level.

* Based on 2018 data; ** Based on 2019 data

- Source: <https://www.minorityhealth.hhs.gov/omh/browse.aspx?lvl=4&lvlid=69> US Department of Health and Human Services

Social Determinants of Latinx Health

Social determinants of health (SDOH) are the conditions in the environments where people live, work, learn, play, and worship that affect a wide range of health and quality-of-life outcomes. SDOH are also related to health risk factors and may be associated with disparity. Examples are:

- Immigration status
- Employment conditions
- Income
- Education
- Neighborhood Safety
- Health Access
- Relationship status
- Others?

Social determinants of health and mental among Latinx:

LGBTQ+

Diabetes, Cardiovascular disease

Obesity

Depression

Adolescents and mental health

HIV

COVID

Mental Health Stigma

Research study outcomes

Valderrama, S. M. (2021). Social determinants of health and health behaviors of Hispanics [ProQuest Information & Learning]. In *Dissertation Abstracts International: Section B: The Sciences and Engineering* (Vol. 82, Issue 6-B).

- Higher Income, education and neighborhood safety related to healthier diet.
- Higher Income and education related to greater physical activity.

De Oliveira et al. (2017). Social determinants of depression among Hispanic women. *Journal of the American Psychiatric Nurses Association*, 23, 28-36.

- Examined Intrapersonal level factors: income, education, health status, health insurance, employment status, acculturation) and Interpersonal level factors: relationship status, living with a partner, living with children and their relationship to depression.
- Women with more than a high school education had lower levels of depression.
- Women living with their partners had lower levels of depression
- Women reporting “good to very good health” had lower levels of depression.

Trauma and Latinx: Experiences and Factors Contributing to Trauma

Poverty

Experiences with different forms of violence (e.g., recent shootings)

Experiences with racism, sexism, homophobia, transphobia, ageism, and other forms of discrimination

Verbal, physical, sexual, mental and spiritual abuse

Colonialism

Undocumented status

Immigration and separation from family

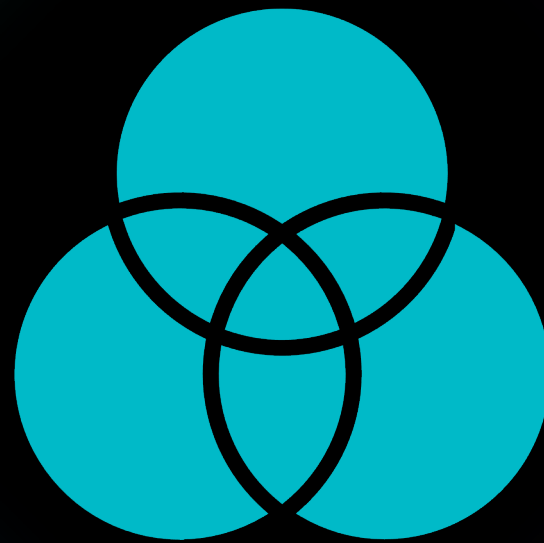
Negative experiences with law enforcement and the criminal justice system

Pandemics (COVID-19)

Other events such as natural disasters

Intersectionality

- What is it?
- Why the shift?



Kimberlé Crenshaw:

<https://www.youtube.com/watch?v=JRci2V8PxW4>



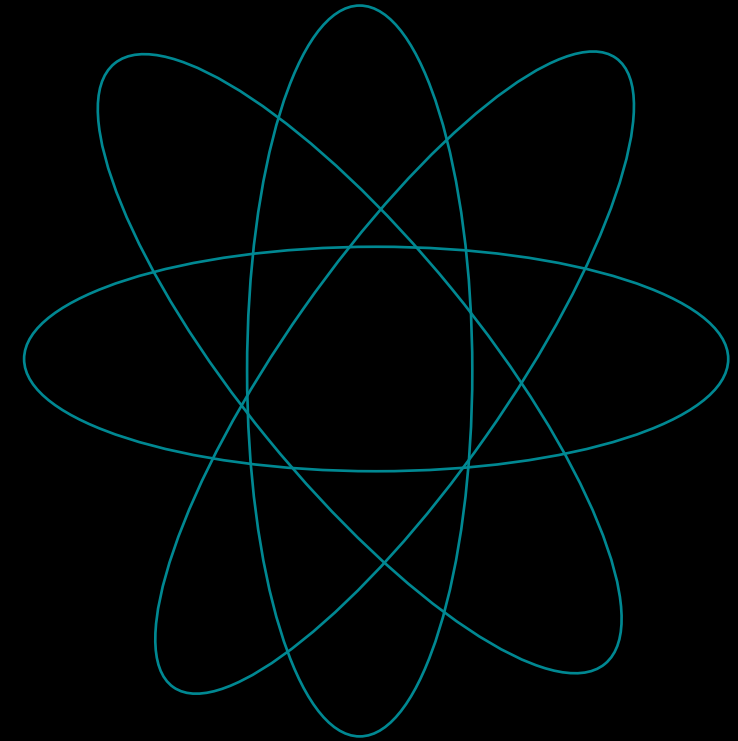
Another way of understanding intersectionality
https://www.youtube.com/watch?v=rwqnC1fy_zc



Kimberlé Crenshaw: What is Intersectionality?



A framework that focuses on ways that institutional and social forces such as racism, sexism, classism, gender binarism, and transphobia interact with individual dimensions of identity (e.g., gender identity, class, ethnicity, race, physical and intellectual abilities)
“...afford privilege and disadvantage differently for people at different social locations” (Hull, Stevens & Cobb, 2020,p. 1740)



Simpson J. 2009. *Everyone Belongs: A Toolkit for Applying Intersectionality*. Ottawa, Ontario.



Figure 1 Intersectionality wheel (Simpson, 2009).

The Growing Interest of Intersectionality for Latinx

Let's explore!

Poll question

Why is it important to use this framework for the Latinx/Hispanic communities?

- *Helps reduce health disparities.*
- *Identifies systems of inequality that perpetuate disadvantage.*
- *Captures the real- life complex circumstances of individuals.*
- *Helps clinicians better understand how psychological outcomes are influenced by experiences of inequality and discrimination. It is often the case that systems of inequality impact an individual in unique ways depending on the individual's social group membership (Adames et al., 2018)*

Intersectionality & Latinx as Digital Disruptions of Identity | Nathian Rodriguez | TEDxSDSU : <https://www.youtube.com/watch?v=nUqqgMkC2T8>



Scholarship on Intersectionality and Latinx

Intimate Partner Violence (IPV) and Latinas:

- Language barriers shape the way Latinas gain access or are denied access to services when seeking protection and support.
- Culture specific gender norms can affect the ways Latinas define abuse and as a result seek social services.
- Poverty and distribution of resources: Latinas are more likely to experience prolonged IPV because of limited access to resources.
- Fear of deportation
- Anti-immigration laws
- Law enforcement - inappropriate response to Latinas who experience IPV.

Source: O'Neal, E.N., & Beckman, L.O. (2017). Intersections of race, ethnicity, and gender: reframing knowledge surrounding barriers to social services among Latina Intimate Partner Violence victims. *Violence Against Women*, 23, 643-665.

Continuation..

LGBTQ+ and Transgender

- Increase understanding of how systems of inequality, power and privilege shape the experiences of individuals who share multiple oppressed identities (e.g., Abreu et al (2021). "We are our own community": Immigrant Latinx transgender people community experiences. *Journal of Counseling Psychology*, 68, 390-403

Immigrant Health

- Increase our understanding of how racism as a structural factor intersects with other dimensions of inequality, specifically gender and class, impacts immigrant health outcomes. It is not just acculturation or cultural beliefs about health (e.g., Viruell-Fuentes, E.A. et al. (2012). More than culture: Structural racism, intersectionality theory, and immigrant health. *Social Science & Medicine*, 75,2099-2106.

COVID-19 pandemic and mental health of Latinx

- Exploring the intersectional implications of the pandemic on the mental health of Latinx. Results of Gomez-Aguinaga et al (2021) . Immigration and gender as social determinants of mental health during the COVID-19 outbreak: The case of US Latina/os. *International Journal of Environmental Research and Public Health*, 18,2 1-14.
- Results: knowing someone ill with COVID and knowing an undocumented immigrant increased the likelihood of reporting worse mental health outcomes than Latinx men.

Intersectionality and therapy

- Adames, H. Y., Chavez-Dueñas, N. Y., Sharma, S., & La Roche, M. J. (2018). Intersectionality in psychotherapy: The experiences of an AfroLatinx queer immigrant. *Psychotherapy*, 55(1), 73–79. <https://doi-org.proxy3.noblenet.org/10.1037/pst0000152>

“...we posit that using a strong intersectional framework in culturally responsive psychotherapy can help therapists keep in mind that clients’ distress may be caused and/or exacerbated by experiences of oppression and discrimination resulting from different sources, which may shift depending on context. ” (p. 77)

Key take aways: Intersectionality ...

- Is an important framework for understanding and responding to health/mental health inequalities by identifying and addressing the structures of power that create them.
- Considers the interaction of different social indicators (i.e., race, class, ethnicity, indigeneity, sexuality, geography, disability/ability, migration status, language, religion,) and the power structures that reinforce inequality.
- Promotes a better understanding of privilege and disadvantage.
- “Intersectional thinking” can reframe our understanding of victimization , barriers to services, and social justice and advocacy work.
- Can guide us in developing **multilevel** interventions (Adames, et al., 2018)

What might be the next steps?

- Continue to expand and enhance research on intersectionality. So much more to explore!
- Include trauma history as part of the Intersectionality framework.
- Integrate an approach that shows how systems of inequality contribute to mental health problems and adverse life situations.

Questions?



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 Session:

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

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<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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