



WEST MOUNTAIN REGIONAL
HEALTH ALLIANCE

**Mental Health
Convenings
with Latina Mothers**

March 2023

Roaring Fork Valley Region, Colorado

With Gratitude

We are grateful to all Latina mothers who shared their time and their private thoughts on these issues. We also appreciate the group of Latino providers who supported us in executing this project, beyond their busy schedules, to engage with West Mountain Regional Health Alliance (WRHA) to give priority to the mental health of the Latino Community. They represent what WMRHA calls trusted providers or individual Latinos who feel comfortable and open to discuss their significant issues and who can make an impact in their clients' lives by providing equitable advocacy and services. Mothers and trusted partners include:

Michelle Dibos
Olga Wilkins
Iliana Renteria
Soira Ceja
Brenda Kaiser
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Emergencias y Recursos Aspen a Paracute
Early Childhood Network
Garfield County Schools
Speak Up
Colorado Trust
Your Hope Center
Eagle County Health
Vail Health



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In This Report

Summary	1
Conclusions	2
Recommendations	3
Latina Mothers' Voices	4
Research & Supporting Documents	7

A Note on Language

Throughout this report, the terms Latino and Latina will be used as this is how the participants referred to themselves and their community. However, we also want to recognize and honor individuals who may not identify with these gendered terms and may identify more closely with Latinx or other language.

Summary

In 2021, [West Mountain Regional Health Alliance](#) (WMHRA) received funding from Senate Bill 137, the Behavioral Health Recovery Act (BHRA), to build connections between mental health systems and Latina mothers through the work of WMRHA Regional Health Connector. The [Regional Health Connector Program](#) is an innovative, statewide workforce and program supported by Trailhead Institute, University of Colorado Anschutz Department of Family Medicine, and the Colorado Health Institute.

WMRHA executed two strategies to fulfill the organization's mission, which is to provide equitable actions that will support health care to all residents of the Roaring Fork Valley region:

- 1 The first strategic effort delivered a culturally competent space for Latina mothers to confidentially share information about their mental health in a safe, kind and judgement-free space.
- 2 The second strategy was a convening of Latino leaders who serve Latina mothers in areas of general health, mental health, school, and general services supporting social determinants of health. These Latino professionals work on government and private sectors across Pitkin, Garfield, and Eagle counties.

Here's an overview of the process in the words of Mari Munet-Plaza, the project lead and interviewer:

We conducted individual conversations with 11 Latina mothers and Latino leaders in Garfield County from April to June 2021. In Eagle County, we convened 14 Latina mothers and individuals working for Latinos on August 25, 2021. These interviews were culturally-driven, which is highlighted in the box to the right.

Choosing the Latina mother was a key factor for the success of this effort. From our three previous Latino community projects it became clear Latina mothers are still the anchor and the axis of the entire family system, affecting the behavioral decisions of their children, spouses and relatives living at home. Our funding provided the opportunity to focus our efforts on the 'one' person that can serve as a behavioral example to the rest of the family, the mother.

We understand these results cannot be considered conclusive, as we need a larger a sample to support our recommendations. However, we can use this data to draw attention to the social determinants the Latino community are experiencing in a regular basis.

Throughout the report, first-person perspective is used to honor the person-centered nature of this work.

Highlight: Culturally-Driven Approaches

For this project and report, all interviews were conducted in Spanish as both the interviewer, Mari Munet-Plaza, and participants are native Spanish-speakers. Additionally, the organization where the conversations were held was a space trusted by the Latino community. During the events, it was important to take the time needed and to honor the humanity of all participants. In the words of Munet-Plaza, when taking a culturally-driven approach:

"It's not just that you speak Spanish, it's that you create an environment of organic trust and love."

Conclusions

The Latina mothers shared stress as their number one mental health condition followed by sentiment of anguish, worry and anxiety. Other conditions they are experiencing are paralysis*, isolation, attention deficit, crying, sadness, sorrow, and depression.

*Latina mothers who shared mental health behaviors such as paralysis explained they experience episodes where they were not able to move or think within their normal pacing.

We concluded that the following factors affect Latina mothers' mental health:

- poverty
- psychological challenges of living in a self-contained affluent community
- limited transportation routes
- the high cost of fresh food, housing, and gasoline
- the traumatic experience of being an immigrant and experiencing mistreatment

When we asked about how Latina mothers addressed their mental health issues through available services, we received a significant number of responses describing specific service providers in clinics, hospitals, and nonprofits with whom they feel confident to address their mental health. Usually, these providers refer them to mental health support organizations directly. The challenge in Pitkin, Garfield and Eagle counties is that there are not enough Latino mental health providers.

Generally, the community calls 911 when there is an emergency, use behavioral health services from local hospitals and clinics, or are supported by organizations that offer mental health programs in the community.

Recommendations

Through this feedback we gathered suggestions for Latino and Latina mental health program design, client identification, and informal and formal activities they do to stay mentally well. Latina mothers and Latino providers recommended the following strategies to be more efficient in addressing mental health needs.

Use trusted local providers and influencers as a bridge between the Latino community and mental health services. Local providers include nonprofit organizations, school leaders, and clinical and hospital providers Latinos trust because these individuals earned that trust with their actions and personalities.

Offer follow-up and emotional support throughout the entire mental health process. We recommend offering follow-up support when people in the community are referred to behavioral health providers and as treatment is executed. It is important to follow up until the individual feels that the support tools they are using are effective. In other words, it is showing care for Latino people from start to finish.

Promote supportive mental health activities, such as walking and body movement, healthy relationship engagement, and positive thinking activities to alleviate and eliminate accumulative stress that can worsen if not addressed over time.

Strengthen and deliver a higher frequency of cultural messages redefining the following aspects of immigrants' mindsets: self-esteem/equity/deserving; mental health/minor issues; and program safety/trusted providers. These messages can be delivered to the community to reduce trauma and belief patterns coming from a culture that can mentally block or paralyze Latinos from seeking mental health services. Messages can be delivered through media, as well as through all Latino providers as a unified message to their clients. There is a Latino Coalition group which includes a group of Latino providers who address social determinants of health. Mental health trainings can be executed by trained mental health professionals and key Latino experts working in nonprofit organizations.

Use social media to promote new cultural belief systems through a 'peer support' concept.

Latina Mothers' Voices

We have summarized the key results of these convenings in other sections, but we wish to include the mothers' voices as they share their opinions and experiences.

We asked five main questions and from there a full discussion was developed, sometimes lasting more than one hour per individual interview.

The five main questions asked were:

1. What mental health conditions are prevalent in the Latina mother community?
2. What services Latina mothers have used successfully to support their mental health?
3. What activities, services and concepts should be promoted and are needed?
4. What do you do to feel better?
5. What internal/ external barriers and obstacles Latina mothers experience that challenge them to act?

Question: How can behavioral health providers support women to complete treatment?

Answer: Follow-up is important, in particular 'calling them, motivating them' to continue treatment.

Question: Describe the type of fear that older or more traditional mothers experience?

Answer: Yes, regularly, they are afraid to speak up because asking for help is stigmatized as one being defective or insufficient, a reflection of self-esteem. Today we value a person who asks for help more than one who does not ask for help. It is a generational situation, asking used to show weakness, but now it is the opposite.

Question: Where do you go to get alternative support to balance yourself?

Answer: In a combination of many voices, mothers shared: 'We find friends to talk with, we play with our children, go for a walk, and we connect with God and go to church.' For more examples, see the Things Latina Mothers Do to Feel Better section (pg. 6).

Question: What kind of fear related to seeking mental health treatment do you experience?

Answer: To have your children taken away, the system proves that it is broken, like talking about your difficult situations can lead to your children to be taken. Many mothers who suffer domestic violence do not say it so that they do not take away their children-emotional blows and manipulations, mothers at home who not working, and mothers who work and must do housework too, it is a lot.

Mothers shared that they often delay seeking help or getting support, and they can feel afraid of talking about their mental health because of real and perceived consequences and fears of doing so.

Latina Mothers' Voices

Question: Why there is fear of trying something new?

Answer: Yes, our community has been used in a thousand ways, and it is hard to believe that someone is going to help us, because they make promises- Latino organizations, including the Salvation Army and social services. They see us as numbers, not as individuals.

Question: Why do you mean with 'you would be outraged if you agree to have a condition'?

Answer: One mother mentioned wanting to avoid a label, because it might put the family at risk, saying 'Yes, I think so, before I placed a label on myself, I say no [I do not have a mental health problem]'.

Question: Why don't mothers have self-care practices?

Answer: Generations of older people are like that, they do not see themselves and there is a lack of self-reflection [in their mothers' habits] and they worry. Younger generations of mothers are different, addressing mental health is more accepted and encouraged.

A key point made by mothers was they experience a lack of time and that organizations do not have availability outside of typical (9-5) office hours.

Yo no
estoy loca

I am not
crazy

A Note on Language

Terms like "crazy" are normalized in many languages and cultures, but [these terms can be stigmatizing](#). We wanted to honor the original words, experiences, and feelings of the mothers, while highlighting areas of opportunity and growth for all.

Things Latina Mothers do to Feel Better

The following activities are ways Latina mothers comfort themselves (in no particular order).

Be Alone

Watch a Movie

Cook

Drink Wine or Coffee with Friends

Cry

Go Dancing or Dance at Home

Drive

Play Board Games

Listen to a Book on Tape

Stretch

Go to Therapy

Walk Barefoot

Stretch

Listen to Relaxing Sounds

Find Someone to Listen

Run

Color, Do Crafts

Play with a Pet

Be in Nature

Play with Children

Smell Essential Oils

Get a Hug

Go to the Beach

Take a nap

Paint

Spend time with Family/Friends

Listen to the Rain

Take a Bath or Shower

Journal

Take a Vacation

Listen to Music

Meditate

Go Shopping

Manicure, Pedicure, Spa

Book Club/Read

Skiing/Snowboarding

Go on a Date

Kiss

Pray, Be Closer to God

Organize Things

Dress Up, Put Make-Up On

Go Shopping



Research & Supporting Documents

These are recommended readings found during the formative process of this project. Key citations from those research and organizations' work are summarized in the next two pages.

Recommendations for Cultural-Driven Approaches ¹

- Most common barriers to receiving mental health care services are lack of knowledge of where to seek treatment; lack of proximity to treatment centers; transportation problems; and lack of available Spanish speaking providers who are culturally and linguistically trained to meet the needs of Latinos.
- Train health providers to better understand and identify Latino specific symptoms.
- Providers should be trained to understand the stigma related to mental health problems among the Latino community.
- Develop instrumentation specific to Latinos.
- Develop a sense of “confianza” (confidence, trust) between the health provider and Latino patient.
- Utilization of an outreach program to educate Latinos on mental health issues.
- Providers and outreach can be linked to provide a better experience regarding health care.
- Alleviate the transportation barrier as outreach is closely linked to the patient's community.
- More close-knit work with Spanish language media to spread outreach and education as much as possible.
- Develop treatment programs, such as rehabs, to have culturally relevant treatment programs as well as staff designed for Latinos and their needs.
- Mental health diagnostic scales should be adapted to meet the needs of Latinos.

An Example of Culturally-driven Approaches ²

A provider who understands a patient's culture and needs will know culturally specific information. For example, someone might describe what they are feeling with a phrase like “Me duele el corazón.” While this literally means “my heart hurts,” it is an expression of emotional distress — not a sign of chest pain. A culturally sensitive doctor would be aware of this interpretation and would ask for more information instead of assuming the problem is purely physical.

Types of Stigmas Experienced By Latino Communities ³

- **Public stigma** involves the negative or discriminatory attitudes that others have about mental illness.
- **Self-stigma** refers to the negative attitudes, including internalized shame, that people with mental illness have about their own condition.
- **Institutional stigma**, is more systemic, involving policies of government and private organizations that intentionally or unintentionally limit opportunities for people with mental illness. Examples include lower funding for mental illness research or fewer mental health services relative to other health care.

Research & Supporting Documents

EQUITY & MENTAL HEALTH

The immigration experience and the process of integrating with a new society or culture can be stressful, to say the least. Day-in, day-out [fears and concerns regarding one's national identity and sense of belonging can easily give rise to mental health issues](#) for people in the Hispanic community. As with minority populations, in general, ongoing discrimination and exclusion from employment and economic opportunities take a toll on a person's ability to cope with daily life. These conditions place Hispanic immigrants and second-generation Latinos at greater risk of developing conditions like depression and PTSD.

Substance Use Issues ⁵

Results from the Substance Abuse and Mental Health Services Administration's (SAMHSA) [2019 National Survey on Drug Use and Health](#) highlight that 7% of Hispanic adults in the U.S., or 2.9 million, had a substance use disorder (SUD). Among those, 1.4 million had both a SUD and a mental health condition.

[Evidence](#) notes that [alcohol use disorder](#) is a common mental health condition among Latinx, with some sources noting that [Hispanic adolescents are more likely to start using alcohol](#) than Black and Asian youth. However, despite this, [nearly 90% of Latinx people over the age of 12 years with a SUD did not receive treatment](#).

Latina Mental Health ^{6,7}

The prevalence of depression in Latino women is higher (46%) than Latino men (19.6%) by 2016, according to the National Alliance on Mental Health.

Religion can be a protective factor for mental health in Latinx/Hispanic communities (faith, prayer) but can also contribute to the stigma against mental illness and treatment (demons, lack of faith, sinful behavior), so targeting religious institutions to help encourage good mental health and treatment-seeking is important.

There is a perception in Latinx/Hispanic communities, especially among older people, that discussing problems with mental health can create embarrassment and shame for the family, resulting in fewer people seeking treatment.

“Why don't we talk about the elephants in the room: substance use? Domestic abuse? These are two big problems existing within the privacy of the Latino family. It is very difficult to talk with Latina women about it. They are afraid of making things worse at home for them and the children. They fear that their man can be taken away, and then there is not food on the table. Issues of substance use/alcoholism, and domestic violence are a big problem.

We need to address substance use and domestic violence in every project focusing on Latino health. These two behaviors influence many aspects of family life.

-Mari Plaza-Munet

Research & Supporting Documents

Acute Versus Chronic Stress

The experience of stress can be either acute or chronic. Acute stress usually occurs in response to a short-term stressor, like a car accident or an argument with your spouse. Acute stress can be very distressing, but it passes quickly and typically responds well to coping techniques like calming breathing or brisk physical activity.

Chronic stress occurs when stressors don't let up. The roots of chronic stress can vary widely, from situations people can control or avoid (such as having a toxic friendship) to difficulties that are hard to escape (poverty, racism, or other discrimination). Because people respond differently to stressful circumstances, a situation that one person might find tolerable can become a source of chronic stress for another.

Chronic stress can damage both mental and physical health. Being chronically stressed may leave you feeling fatigued, sap your ability to concentrate, and cause headaches and digestive difficulties. People prone to irritable bowel syndrome often find that their [symptoms spike with psychological stress](#).

Though acute stress can heighten certain immune responses, the wear-and-tear of [chronic stress is bad for the immune system](#). Chronic stress can also affect cardiac health, with multiple studies finding a link between [chronic stress and the development of coronary artery disease](#).

Addressing Spirituality

Many Latinos choose to align with their spirituality as a source of balance, strength, and peace. Those connecting to faith, follow Christianity, Native spirituality, and folk medicine, pass through generations, and anchored deep within their indigenous roots. This is part of their ancestral lineages. The following is a video, directed specifically at native roots but it is an example of practices that can be developed in the region. We also recommend addressing Christian faith communities when seeking program design.

Being Brave: Grounding Ourselves in Our Ancestors' Resilience - <https://youtu.be/HZuF2eBCM-s>

Evidence-Based Tools: Combatting Stress ⁸

- Try to eliminate the stressors
- Cultivate social support
- Seek good nutrition
- Relax your muscles
- Meditate
- Protect your sleep
- Physical activity
- Take a moment in nature
- Keep your pleasurable activities
- Reframe your thinking
- Seek help

Research & Citations

1. Latino Mental Health — No Stigmas <https://www.nostigmas.org/learn/latino-mental-health>
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4. Mental Health Issues Facing the Hispanic-Latino Community - Sunshine Behavioral Health <https://www.sunshinebehavioralhealth.com/resources/mental-health-issues-facing-the-hispanic-latino-community/>
5. How prevalent are mental health conditions in Latinx people? <https://www.medicalnewstoday.com/articles/latino-mental-health>
6. Facts About Latinos & Mental Health That You Need to Know | HuffPost Voices https://www.huffpost.com/entry/8-facts-about-latinos-men_b_8306396
7. Latinx/Hispanic Communities and Mental Health | Mental Health America <https://www.mhanational.org/issues/latinxhispanic-communities-and-mental-health>
8. American Psychological Association: Healthy ways to handle life's stressors <https://www.apa.org/topics/stress/tips>



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For additional resources and information in the Roaring Fork Valley, please get in touch with West Mountain Regional Health Alliance.

westmountainhealthalliance.org