

The slide features a dark green background with decorative botanical illustrations. In the top right corner, there is a branch with several green leaves and a small red asterisk-like flower. In the bottom left corner, there are several large, detailed red flowers with green stems and leaves. The main text is centered in a white serif font.

Community-centered healing methodologies

Partnering with communities to expand
culturally relevant prevention and care for
African immigrant and Latinx communities

A partnership between the University of
Washington, African Leaders Health Board,
and Latinx Health Board



Tina Abdul-Aziz
Community Health Worker
African Leaders Health Board & Center for Multicultural Health



Melissa Resendiz Rivas
Latinx Health Board Executive & Community Resource Navigation
Supervisor
Latinx Health Board & FamilyWorks



Luis Aceves Rodríguez
Latinx Health Board Executive & Health and Environmental
Investigator
Latinx Health Board & PHSKC



Theresa Hoeft
Research Assistant Professor
University of Washington School of Medicine

Learning objectives

1. Understand how community partnered methods grounded in healing methodologies improve work with underserved communities
2. Describe the innovative findings and resulting recommendations to advance mental health and wellbeing that sprang from partnerships with African immigrant and Latinx communities in Washington
3. Explore future promising innovations that can impact prevention and improve access to behavioral health care in health systems and broader community spaces

Agenda

- Background
 - Larger partnership toolkit development project
 - Healing Research Methodologies
- Partnerships shaping and guiding our work
- Our methods and some pilot findings
- Recommendations stemming from our pilot findings
- Closing thoughts/reflections

Background

Original partnership toolkit development project started in 2021

- Community Partnered Mixed Methods Toolkit
 - Developing using a community-based participatory approach
 - Mixed methods integrates quantitative and qualitative

Pilot funding in 2023

- Refining the toolkit through pilot mixed methods data collection
 - Mental health and wellbeing focus of data collection driven by community priorities



Background



Healing Research Methodologies

- Andi Lee et. al, 2023 developed a framework coming from diversity science trends and a long history of healing approaches in communities
- Their framework includes six components outlined in the flower petals
- Can be useful in research, evaluation, and any partnered inquiry with community
- Examples in practice in Washington and California

Lee et al. (2023), Cultural Diversity and Ethnic Minority Psychology, 29(1), 6 – 14.

Partnerships shaping and guiding our work

Partners

- Community Health Board Coalition (CHBC)
 - Collaboration of 15 health boards in Washington state
- Latinx Health Board (LxHB)
- African Leaders Health Board (ALHB)

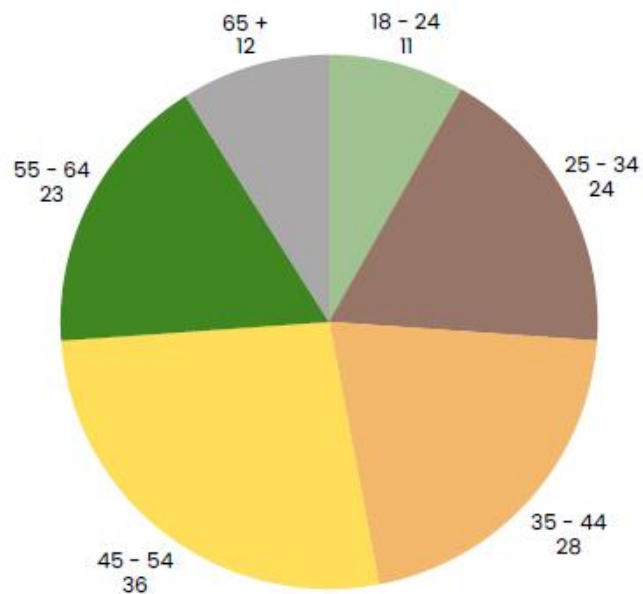
ALHB Methods

- Data collected May – November 2024
- 23 question survey for adults in African refugee and immigrant community
- Survey covered:
 - mental health and wellbeing experiences
 - emotional support systems
 - awareness of mental health resources
- Series of 3 mazungumzo (Swahili for conversations) with leaders and health providers/outreach workers
 - One recorded and 2 others used only notetakers due to community preferences

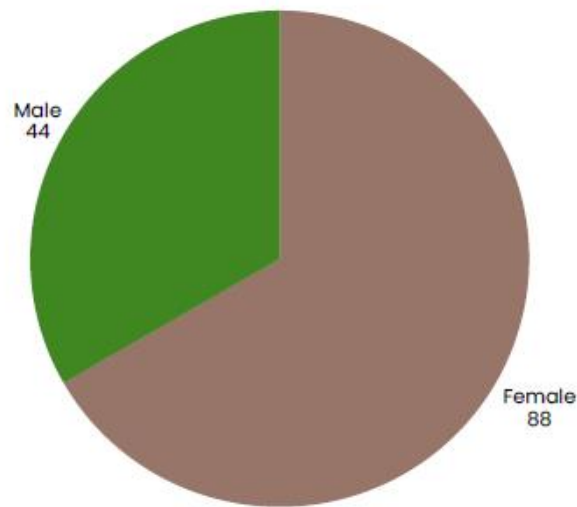
ALHB Survey Key Findings

- 135 adults completed surveys among African immigrant and refugee community

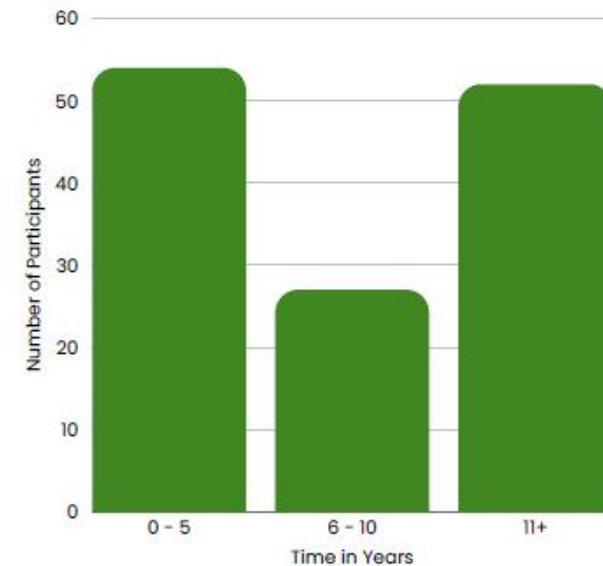
Ages of Survey Participants



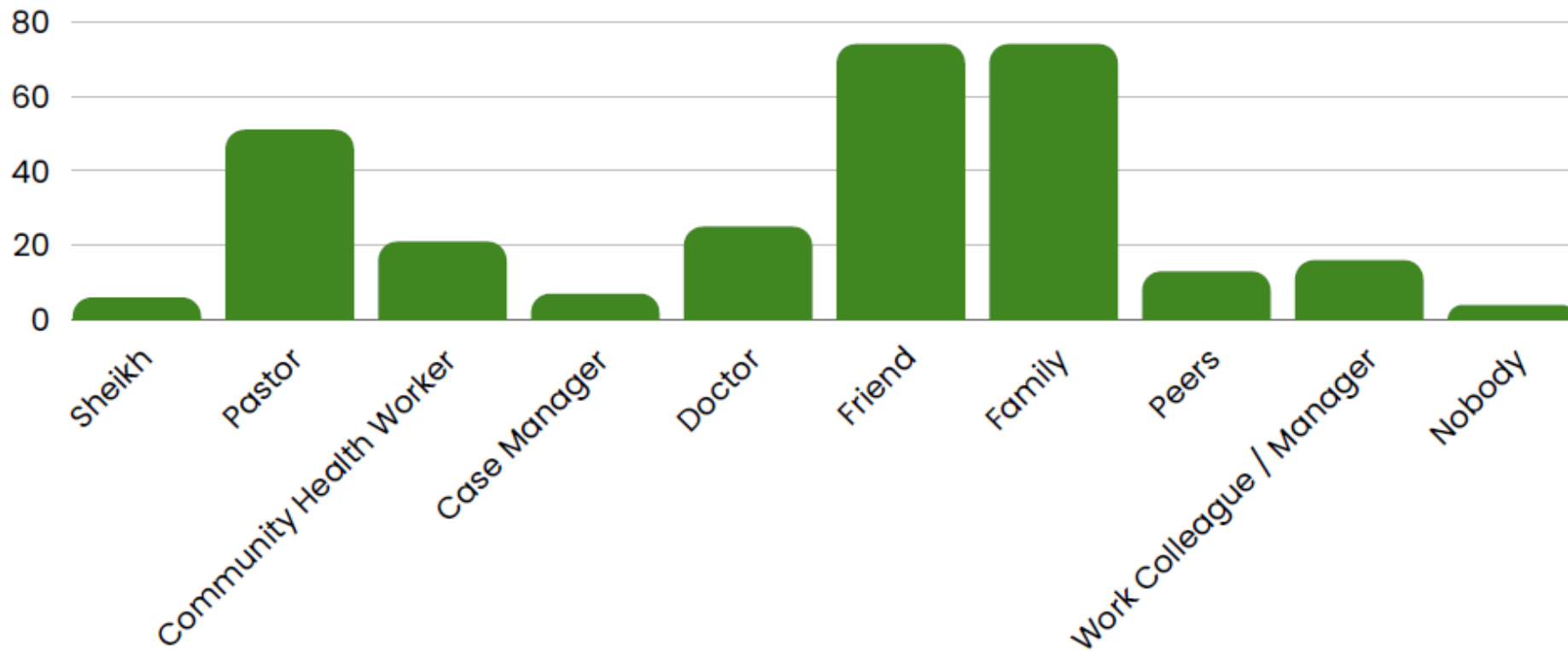
Gender



Duration of Residency in the U.S.



Who Talk to When Experiencing a Challenging Time

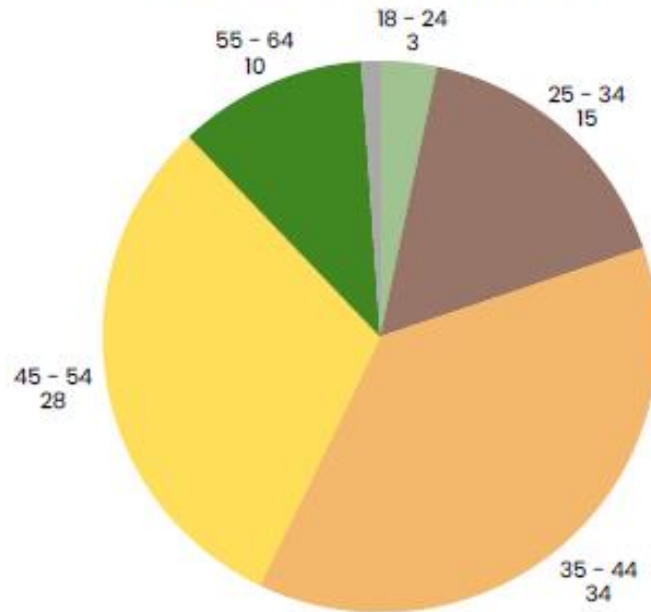


LxHB Methods

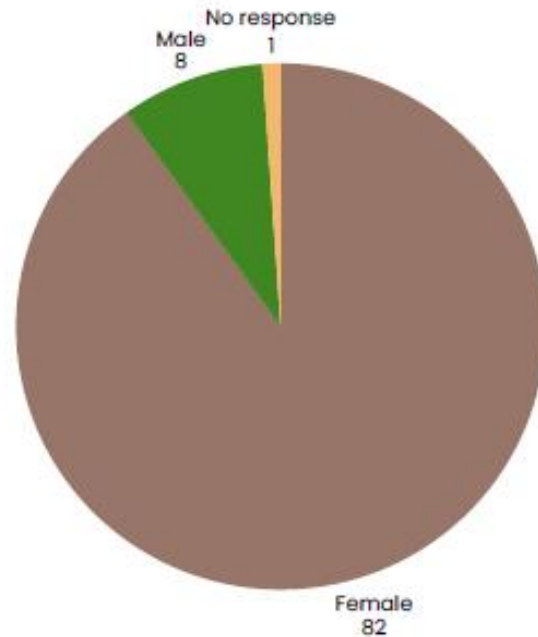
- Data collected April – November 2024
- 50 question survey for parents in Latinx community with children under age 26
- Survey covered:
 - mental health, wellbeing, and belonging experiences for parents and their kids
 - emotional support systems
 - sources of mental health support
- 19 oral history interviews with young adults age 18 – 26 now archived in the WA State History Museum
 - Young adults had the option to archive or not archive their interview

LxHB Survey Key Findings

Ages of Survey Participants



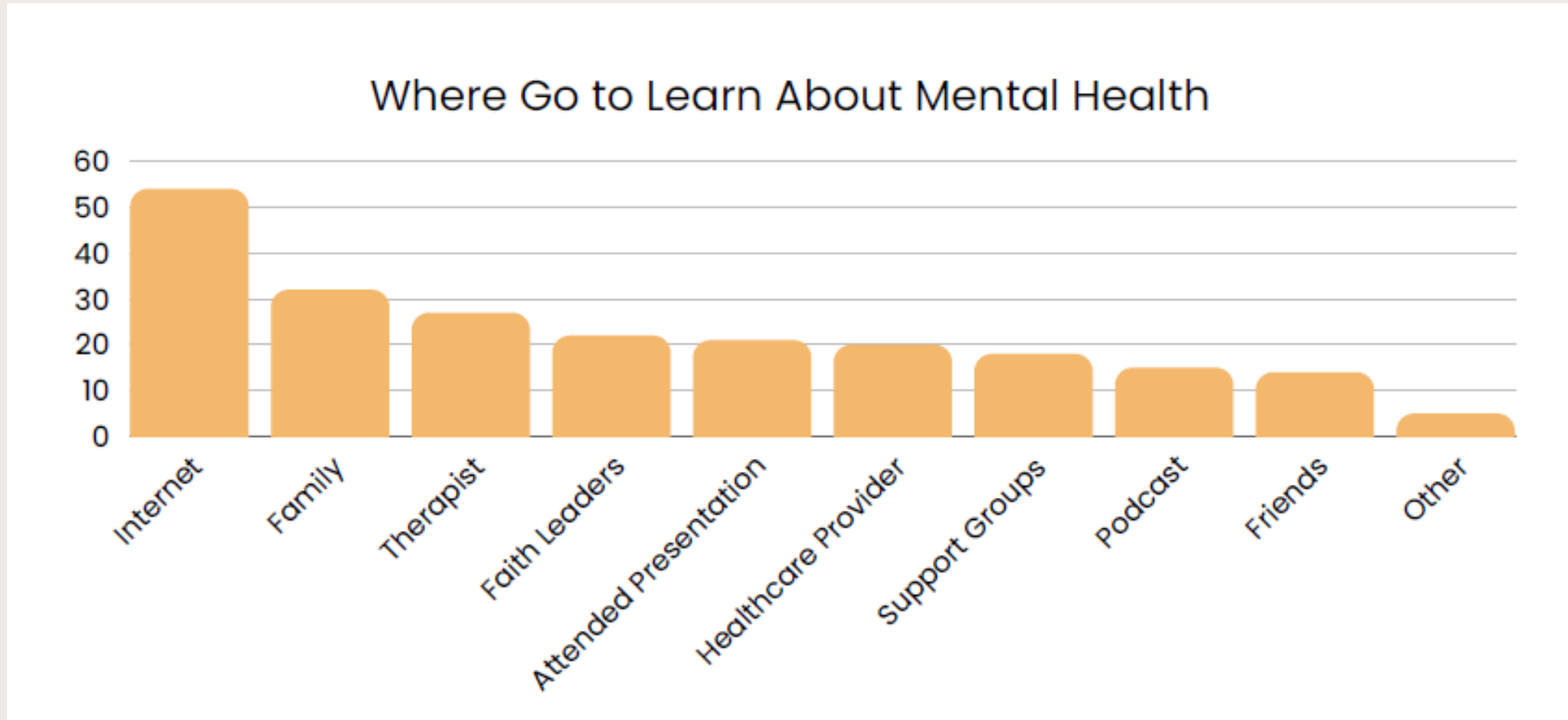
Gender



- 91 Latinx parents completed surveys
- 84% were completed in Spanish
- 47% had health insurance
- 63% had a regular healthcare provider

LxHB Findings

- 81% of those with worries had someone to confide in
- 81% talked about mental health with their children



Oral History Interview Themes

- 19 oral history interviews with young adults age 18 – 26
- College students in Western and Eastern WA

1. What Mental Health and Wellbeing Means to Latinx Young Adults
2. Systemic Challenges and Reimagining Mental Health Systems for Latinx Communities
 - challenges in accessing mental health resources, driven by structural barriers such as time, cost, and cultural disconnects.
3. Family, Peers, and Cultural Connection as a Source of Support & Coping Mechanisms
 - student centers, cultural organizations, school-based counselors, and peer support groups could offer spaces for people to connect with peers in the community
4. Stress, Responsibility & the Weight of Adulting Early
 - participants shared experiences of anxiety, stress, and self-doubt as they juggle responsibilities
5. Cultural Stigma and Generational Silence Around Mental Health
 - silence and stigma surrounding mental health and wellbeing within families and communities

Recommendations stemming from our findings





ALHB Recommendations

- Develop education campaigns with the community on how to destigmatize and increase acceptance of mental health and also talk about mental wellbeing
- Develop intergenerational support groups to help with education about mental health and mental wellbeing while also creating a safe space for conversations about distress and connect those who are interested to specialty mental health resources
- Create spaces to bring people together for cultural activities that benefit mental health and wellbeing (e.g., farming, dancing, singing, listening to music, performing, gathering, weaving, art, sports). Spaces might include religious spaces, recreational centers, and community centers. These spaces can help create feelings of belonging.
- Free, easy to access, and fast mental health resources that can benefit community members including at their workplaces and via telehealth
- Increase the cultural appropriateness of care in the community through African community-led health clinics initiated by African people, mental health hub for Africans, and training more providers and community health workers who can bridge the gap
- Build more spaces and support for those doing mental health support, caregivers, and health professionals including in their workplaces
- Find innovative ways for African community health workers to connect people to mental health resources, especially when resources are scarce in the community

LxHB Recommendations

- **Co-creation** – It is important that community is involved in the decision making around intervention development in an iterative manner throughout the process.
- **Culture** can be prevention but also healing to be in community and using resources common within the community (e.g., dancing, art, social support, family support, healing and celebratory ceremonies).
- Develop models that make mental health and wellbeing resources **more accessible**
 - Offer culturally and linguistically accessible resources outside traditional office hour times (e.g., weekends and evenings) and locations (e.g., schools, farms, community centers)
 - Offer low-cost or free interventions to reach parents, youth, and young adults
- Offer **intergenerational conversations** in English and Spanish as they are supportive of mental health and wellbeing as are conversations within peer groups (e.g., conversations with young men and fathers, parents, or youth peer groups)
- **Connect with middle school and high school** youth and young adults offers great potential for support and learning about mental health, wellbeing, and belonging (e.g., talks in schools, access to mental health services, parent workshops on mental health and wellbeing, mental health first aid training in multiple languages including Spanish)

Recommendations similarities and differences

ALHB

- Spaces and support for those doing mental health support, caregivers, and health professionals including in their workplaces
- Educational campaigns to help destigmatize mental health

Similarities

- Culture as a basis for lowering or preventing distress and increasing wellbeing
 - Space equity – spaces are needed for these enriching cultural activities
- Intergenerational groups to support education about mental health and wellbeing as well as understanding across generations
- Increase cultural appropriateness of care and make it more accessible in the community (e.g., hours and settings)

LxHB

- Outreach to middle schools and high schools

Closing thoughts

- We highlight healing methodologies from our work together
- Advise letting community partners guide what is most useful to them at the time of funding
- Identify a need for new infrastructure outside our typical community structures to further this work
 - e.g., space equity
- Highlight the importance of having support in schools for youth

Interest in hearing
about our toolkit?

Please email us
thoeft@uw.edu

Thank you

thoeft@uw.edu

latinxhealthboard@gmail.com

alhealthboard@gmail.com

