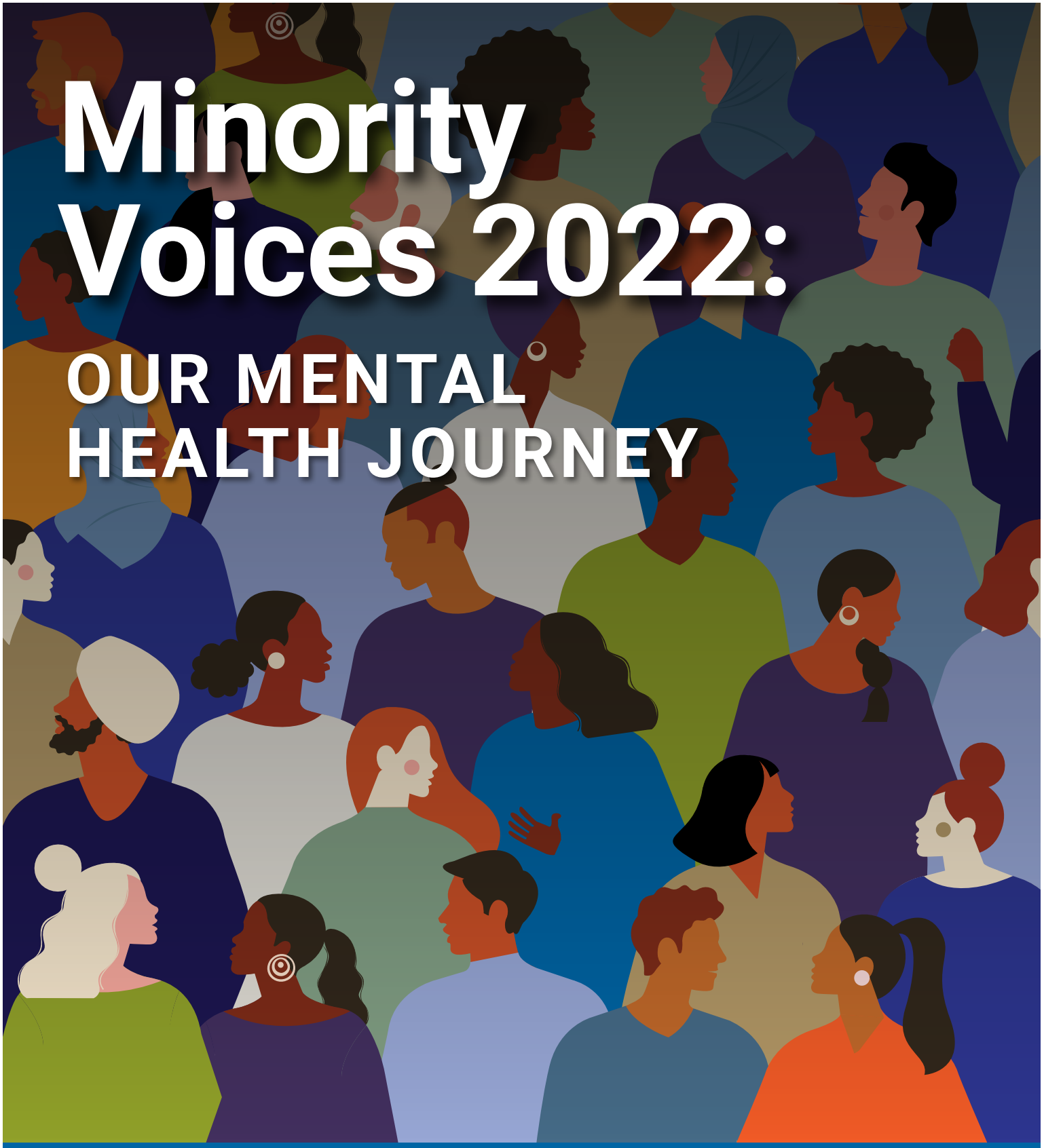

Minority Voices 2022:

OUR MENTAL HEALTH JOURNEY

Office of Community Affairs

Montgomery County, Maryland
Department of Health and Human Services

African American Health Program

AMA TU VIDA Latino Health Initiative
MONTGOMERY COUNTY, MD

Asian American Health Initiative
Together To Build A Healthy Community

Montgomery County Maryland

ACKNOWLEDGMENT

Montgomery County's Minority Health Initiatives/Program (MHIP) would like to express its sincerest thanks to the community members for sharing their personal stories through their mental health and wellness journey. Thank you for sharing how deeply your own experiences have motivated you to want to help others in the community. Your stories have inspired us, and we know they will inspire others as well. Thank you for engaging with us to amplify the voices of your community.

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Health Promoters from Health Pro

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Message from the Director

Montgomery County's Department of Health and Human Services, with the assistance of community-based partners, continues to drive efforts to achieve health equity among underserved populations. We are committed to our mission and goals to improve health outcomes and eliminate health disparities to ensure the quality of life of all our residents, including the minority groups within our county. We strive to enhance access to linguistically and culturally competent healthcare services.

To best deliver on our commitment, the Minority Health Initiative's/Program's (MHIP) **Minority Voices 2022: Our Mental Health Journey** was launched. It was important to hear the voices of those we serve. The stories shared underscored the prevailing stigma and longstanding stereotypes around mental health that still exist. The misconception about Asian Americans and Pacific Islanders being more resilient continues because of their culturally engrained behavior of not openly sharing negative emotions or challenges. The fear of being judged and defined by their mental illness continues in the Black/African American community and perpetuates their suffering in silence for some, for others it's the larger social context of injustice, inequity, and lack of culturally congruent services. This has often led to a delay or avoidance of seeking proactive help, leading to greater rates of ER care in times of emergency, and hospital admissions in Montgomery County. For the Hispanic/Latino community, the immense gratitude to be in greener pastures and the fear of losing the opportunity of giving their family a better life keep them muted.

This reluctance to speak up has led to often overlooked needs and insufficient support for the different ethnic minority groups. The stories also highlighted how language barriers remain a factor, even when community members try to find their "voice" to share their challenges while seeking resources. Hearing and illuminating these stories are good first steps in minimizing mental healthcare disparities.

Learnings from these stories will enable us to assess existing resources for effectiveness in addressing the cultural sensitivities that are essential to reach this population. Until all County residents can "safely" access County health services, health inequity will remain. We plan to utilize the information we gain from this project to continue to build on the advances we've already made and explore other innovative solutions. We hope you will join us in our mission to take more intentional steps in addressing the health disparities that remain prevalent in our society.

James C. Bridgers, Jr., Ph.D., MBA
Acting Director
Montgomery County Department of Health and Human Services

INTRODUCTION

Minority Voices 2022: Our Mental Health Journey

Minority groups represented by the Asian American and Pacific Islanders, Black/African American, and Hispanic/Latino are considered the fastest growing communities nationally and in Montgomery County. The United States (U.S.) has become increasingly diverse. In 2021, the White (non-Hispanic) group made up 59.3% of the total population compared with 63.8% in 2010. Between 2010 and 2021, the Hispanic/Latino community grew the most, now representing 18.9% of the U.S. compared with 16.4% in 2010. The Asian American community had comparable growth, increasing from 4.8% in 2010 to 5.9% in 2021 and the Black/African American increasing from 12.3% to 12.6%[1].

Similarly, Montgomery County has become increasingly diverse. In 2021, the ethnic groups in the county collectively represented more than half of its total population (1,054,827) and increased to 57.8% compared to 51.7% in 2010. Representation of Asian Americans increased to 15.7% compared to 14.1% in 2010, almost double from what it was in 1990. Blacks/African Americans have also increased to 18.9% in 2021 from 16.8% in 2010; and Hispanics/Latinos to 20.1% in 2021 from 17.1% in 2010, almost tripled from 1990[2]. It is expected that the ethnic groups in the county will continue to grow. In fact, the Maryland State Data Center predicts that in 2030, Hispanics/Latinos, Blacks, Asian Americans, and multi-racial residents will represent 67% of the County's total population[3].

Each ethnic group presents unique cultural factors, beliefs, traditions, and idiosyncratic tendencies. When not carefully considered in the planning of healthcare services offered, utilization of such resources is impacted and exacerbates health disparities that already exist. This is markedly evident when it comes to mental health. The longstanding stigma and stereotypes still result in a hesitancy to share mental struggles and seek help within these racial and ethnic minority communities.

The Minority Voices 2022: Our Mental Health Journey project was launched by Montgomery County's Minority Health Initiative/Programs (MHIP) to encourage sharing and to bring awareness to the mental health struggles faced by Asian American and Pacific Islanders, Black/African American, and Hispanic/Latino communities. This project aimed to collect stories from these three communities, to bring light to their experiences and mental health journey. Increasing awareness will help identify more effective ways to reach constituents that represent more than half of the county, take actionable steps to mitigate and eventually eliminate mental health disparities and improve the overall health of the community.

Minority Health Initiatives/ Program (MHIP) Overview

Montgomery County's Department of Health and Human Services (MCDHHS), Office of Community Affairs established the Minority Health Initiatives/Programs (MHIP) which is comprised of the Asian American Health Initiative (AAHI), African American Health Program (AAHP), and Latino Health Initiative (LHI). The Minority Health Initiatives/Programs (MHIP) aims to develop effective, culturally, and linguistically appropriate policies and programs to improve the health and well-being of racial ethnic, and other underserved communities in Montgomery County.

To commemorate National Minority Mental Health Awareness Month in July 2022, the three initiatives/programs collaborated and launched the **Minority Voices 2022: Our Mental Health Journey** project to bring awareness to the unique and similar mental health struggles of their respective communities. County residents who identify as Asian American and Pacific Islander, Black/African American, or Hispanic/ Latino were encouraged to share and submit stories in the language they were most comfortable in through an online submission form. Submission forms were made available in English, Chinese, French, Korean, Hindi, Spanish, and Vietnamese. To address any digital barrier and access issues, community navigators and health promoters were coordinated to support the community members with story submissions. Personal stories were collected from the National Minority Mental Health Awareness Month in July 2022 to the end of National Suicide Awareness Month in September 2022.

Giving voices to minority groups' personal stories was important to heighten awareness, reduce the negative stereotypes and stigma around mental health, and spark a much-needed dialogue that would encourage others to speak up and seek help. This report synthesizes their stories and identifies emerging themes of the mental health needs of Montgomery County's minority residents. Protecting their mental wellbeing is of utmost importance; therefore, a resource list that highlights Montgomery County's Mental Health Resources is also included in this report. We hope that the results of this analysis can be used to help guide future work of MHIP, MCDHHS, and any organizations working with the minority population in the county and across the U.S.

Facts & Statistics

Prevalence of Mental Health Conditions and Health Disparities in the Asian American and Pacific Islander, Black/African American, and Hispanic/ Latino Community

In 2020, 21% of all U.S. adults live with a mental illness (52.9 million). Prevalence of mental illness was highest among the adults reporting two or more races (35.8%), compared to White adults (22.6%).[4]

Asian American and Pacific Islander Community

- In 2020, of the 52.9 million adults aged 18 or older in the U.S. with mental disorder, the prevalence in **Asians was 13.9%**.[4]
- Of the Asian Americans with a mental disorder, **20.8% received mental health services** compared to 51.8 of Whites receiving help.[4]
- Suicide was the **leading** cause of death for Asian/Pacific Islanders, ages **15 to 24**, in 2019.[9]
- Asian American males, in grades 9-12, were **30 percent** more likely to consider attempting suicide as compared to non-Hispanic white male students, in 2019.[10]
- In 2018, Asians were **60% less likely** to have received mental health treatment as compared to non-Hispanic whites.[10]
- Asian Americans, alone, report **fewer mental health conditions** when compared with non-Hispanic whites and other racial and ethnic groups.[13]

Black/African American Community

- When Black/African Americans seek care, they often **receive poorer quality of care** and experience a lack of access to culturally competent care.[12]
- In 2021 of the African Americans with a mental illness **only 39.4% received mental health treatment** compared to 52.4% of whites receiving services.[4]
- In 2021 **21.4% of Black/African** Americans reported having a mental illness, and **4.3% reported a serious mental illness** over the past year.[6]
- Major depressive episodes increased from **9%-10.3%** in Black/African American youth ages **12-17; 6.1% to 9.4%** in young adults **18-25; and 5.7%** to **6.3% in the 26-49** age range between 2015 and 2018.[7]

Hispanic/Latino Community

- In 2020, of the 52.9 million adults aged 18 or older in the U.S. with a mental disorder, the prevalence in **Hispanics/ Latinos was 18.4%**.[4]
- Of the Hispanics with a mental disorder, **35.1% received mental health services** compared to 51.8 of Whites receiving help.[4]
- Although rates of depression are lower in Hispanics **(19.6%)** than in Whites **(34.7%)**, depression in Hispanics is likely to be more persistent.[7]

It is important to note that in the search for vital statistics about the mental health of the three minority groups, there was less information found on the Hispanic/Latinos and Asian American and Pacific Islander communities, which indicates the need for further studies to better understand mental health needs in these communities.

What We've Learned

Twenty-seven generationally diverse individuals with equal representation from the Black/African-American, Asian American and Pacific Islander, and Hispanic/Latino communities participated in sharing their stories. The age of community members who participated ranged from under 17 to over 65, with the majority (n=16) being in the 35 to 54 age group.

Participants provided consent for their stories to be shared. Through content analysis, emerging themes of factors that negatively and positively impact mental health were identified. Barriers to seeking mental help were also abstracted from the narratives. The following is what we've learned.

Factors that Negatively Impact Mental Health

A spectrum of themes emerged from the participants' stories. In the Black/African American community, the top three factors that were identified to negatively impact mental health were clinical depression, anxiety, and substance abuse due to an abundance of negative historical, societal, and economic factors at play mentally and physically but not being discussed on a grand scale for this paper. Others also stated that side effects from medications limited them further and others judging or minimizing their feelings exacerbated or worsened their mental well-being.

> *"Nobody understood or wanted to understand; in fact, they called me names and passed judgment before they even knew what I was going through. It made me so afraid to speak up and speak out about it that it completely silenced me for years."*
>
> *—Female, Black/African American, 35-54 years*

Factors that emerged from the Asian American participants were different and highlighted the uniqueness of each ethnic group. Equal to the loss of a loved one, varying forms of Asian American bias and stereotypes that ranged from xenophobia and the "model minority" stereotype were shared as the most common reasons for distress. One expressed the harmful effects of Asian Americans being assumed by society to be innately intelligent and perfect (model minority myth). Asian Americans, as part of their culture, are also taught growing up to not speak out; thus, are more reluctant to openly express their opinions or emotions.

> *"My grandparents often said, 'Keep your head down and work hard. If you do your best, it does not matter what others think or says about you'."*
>
> *—Female, Chinese, 35-54 years*

As a result, even as they get older, Asian Americans find it difficult to share their emotions.

> *"As an Asian woman, I find it difficult to show my weaknesses or emotions to my family or friends."*
>
> *—Female, Korean, Over 65 years*

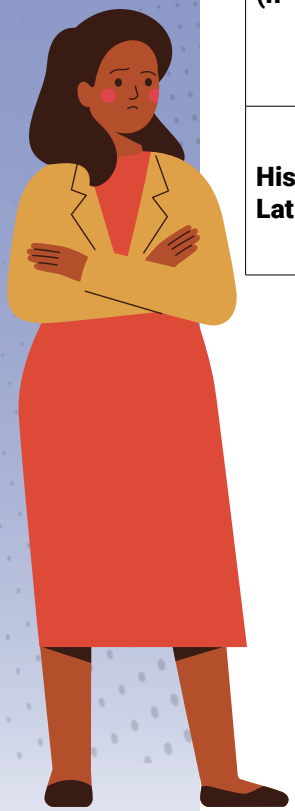
Participants also shared about intergenerational trauma from having emotionally unavailable and abusive parents or spouses which made sharing their feelings even more difficult.

From the Hispanic/Latino participants, the most

What We've Learned

continued

> *Our parents though they fended to clothe and house us, deprived us of emotional support. They were emotionally unavailable to us.*
>
> *—Female, Asian Indian, 35-54 years*



overwhelming cause of anxiety and clinical or situational depression is from leaving everything and their entire family behind when they moved to the U.S. Feeling alone and the nostalgia for everything left back home have been the source of overwhelming sadness and worry for many.

> *"I left my job from my university career, and here it was like starting all over again".*
>
> *—Female, Hispanic, 55-64 years*

In addition, those who experienced the loss of a loved one and the social isolation from the pandemic intensified loneliness.

FACTORS THAT NEGATIVELY IMPACT MENTAL WELL-BEING	
Blacks/African Americans (n=9)	• Depression (7) • Anxiety (5) • Substance Abuse (3) (Drugs/Alcohol) • Medication side effects (2) • Others minimize feelings expressed (2) • Eating disorder (1) • Overwhelmed with work (1)
Asian Americans (n=9)	• Loss of a loved one (3) • Asian bias and stereotype/model minority and COVID (3) • Taught to not speak out; reluctance to openly express opinions (2) • Emotionally unavailable and abusive parents/husband (2) • Limited mobility and social isolation due to medical condition (2) • Aging (1)
Hispanic/ Latinos (n=9)	• Leaving family and everything behind (4) • Clinical depression (2) • Loss of a loved one (1) • Pandemic (1)

Barriers to Seeking Mental Help

When identifying barriers to seeking mental health support, a common theme emerged across all three ethnic and racial communities. The remaining stigma surrounding mental health makes minority communities less likely to openly share negative emotions or seek mental health services. Participants shared the fear of being judged and perceived as weak or unreliable if they express any symptoms of mental suffering. In the Hispanic/Latino culture,

> *"There is stigma about asking for psychological help. We bring those beliefs or perpetuate a mentality that only crazy people go to the psychologist."*
>
> *—Female, Hispanic, 35-54 years*

The stigma, and lack of education on mental health results, make some people unaware of symptoms to look out for. In fact, one of the respondents shared,

> *"I did not know that I was going through a depression."*
>
> *—Female, Hispanic, 55-64 years*

Furthermore, the fear of being labeled as crazy or judged makes some hesitant to seek services even when they recognize needing assistance. And often because communities may not be educated on mental health and mental health resources within the community let alone minority mental health providers, even when resources exist, there is a perceived lack of availability and access to those services in both the Black/African American and Hispanic/Latino communities.

For Asian Americans, the additional "*expectations of perfect mental health*", prevents them from seeking assistance even when they are aware of resources that are readily available. In fact, one of the respondents shared data collected from the National Latino and Asian American Study (NLAAS) which found 17.3% of Asian Americans reporting poor mental health, yet they are three times less likely to seek mental health services compared to the general population. This statement is supported by other studies, including that conducted by the Substance Abuse and Mental Health Services Administration (SAMHSA).[13]

Additional roadblocks identified include language barriers (inability to speak English), difficulty to locate a therapist (especially one that is linguistically and culturally responsive), and the assumed cost of therapy. The stories shared suggest a need for more bilingual services and education about resources that are translated into multiple languages. Although mental health providers that speak their language may be available, people in the communities might not necessarily be aware; thus, having information about resources also available in different languages is essential.

> *"I did not know that I was going through a depression."*
>
> *—Female, Hispanic, 55-64 years*

What We've Learned *continued*

> *Since it is a mental illness, they had an 'it's all in your head,' mentality.*
>
> *–Male, Black/African American, 35-54 years*

Another message of importance for all of us to be aware of is that of listening to hear and not listening to respond. Motivational Interviewing (MI) is often recommended as an evidence-based approach to behavior change. It is an approach designed to help the person sharing find the motivation to make a positive behavior change, instead of the change being imposed on them.[14] It is important to educate everyone in the community about the basic principles of motivational interviewing because some of the participants felt when they shared, that their feelings were minimized or the persons they were sharing with immediately wanted to offer solutions rather than listen and understand what they are truly feeling.

> *"When I tried to explain my depression to people close to me, they wanted to help right away. They said things like 'just stop being sad.'"*
>
> *–Male, Black/African American, 35-54 years*

Some of these stories also bring light to what mental health experts have been cautioning us about, "toxic positivity." Toxic positivity is a behavior most of us have been guilty of. We tend to put a positive spin when others share their struggle. Although practicing with the greatest intent, toxic positivity, minimizing what is shared, or immediately offering solutions, can silence negative emotions, demean grief, and make people feel under pressure to pretend to be happy even when they are struggling. The comments also sometimes assumed that what participants were feeling is something they can control.

In addition to making them shut down, these comments make what they are already going through worse.

> *"I already had very low self-esteem and hearing these things (criticism from people who don't understand mental illness) brought me into a deeper state of anxiety and depression. I felt like I was defined by my mental illnesses."*
>
> *–Female, Black or African American, 18-34 years*

What participants would rather hear is affirmation and validation of their feelings, rather than solutions.

BARRIERS TO SEEKING MENTAL HELP	
Blacks/African Americans (n=9)	• Stigma (3) • Fear of being judged (2) • Cultural factors; mental health never discussed in the black community (2) • Difficult to locate a therapist (1) • Cost of therapy (1) • Perceived lack of availability and access to resources (1)
Asian Americans (n=9)	• Cultural expected behavior to stay silent and/or expectation to have perfect mental health (3) • Having a small social circle and the US was a completely alien place (2) • Spoke no English (1)
Hispanic/ Latinos (n=9)	• Stigma; mentality that only crazy people go to the psychologist (1) • Unaware of depression symptoms (1)

Factors that Positively Impact Mental Health

When asked about strategies that helped improve their mental health and break the stigma associated with mental health topics in the minority community, having a non-judgmental support system was top on the list for all groups. Having unconditional love and support from family and friends was critical. As they began to trust and be more open, a widening of the support system typically occurred. Therapy, both individual and group, was extremely helpful. Sharing their stories and being able to hear others' stories made them realize that they are not alone and that others around them dealt with the same issues.

Finding mental health provider(s) that looked like them (either the same culture or gender) increased their willingness and openness to share. It is evident from Minority Voices 2022: Our Mental Health Journey that offering culturally sensitive resources is paramount to minimize and eventually eradicate the stigma surrounding mental health. By providing resources and mental health providers who can relate to their struggles, understand, and serve as role models, the notion that "it's ok not to be ok" can be normalized in minority communities where mental health is typically not discussed.

Being more informed and getting therapy has also helped others acknowledge their mental health struggles, accept their illness, and realize that they CAN overcome difficulties.

"Being able to express my feelings and help my loved ones with the advice and experience of those who were going through the same situation is priceless."

—Female, Hispanic, 35-54 years

What We've Learned

continued

> *"stopped caring about what people thought and started caring more about getting better"*
>
> *—Female, Black/African American, 35-54 years*

> *"I am grateful that I've weathered more than one dark night. My experience of depression is that it's a cycle. Remember on the tough days that life will have meaning again. And on the easy days be grateful for the synchronicity you're experiencing."*
>
> *—Male, Black/African American, 35-54 years*

As participants gained more acceptance and internal strength, they also

> *"stopped caring about what people thought and started caring more about getting better'"*
>
> *—Female, Black/African American, 35-54 years*

As they felt more empowered, volunteering and giving back to the community has not only helped them improve their resilience but the ability to help others also made them feel more fulfilled. Being able to help others who are struggling and sharing the knowledge they've learned has helped with their own healing.

In addition to medications, participants shared other non-pharmacological strategies that helped improve and sustain their mental well-being. Their faith and belief in God being with them has been a source of hope. Practicing gratitude and striving to have a more positive mindset were also effective. In addition, being more active, whether it was increasing their physical activity or being more socially active helped. Offering activities in the county that provide residents the opportunity to network, socialize, be more active, practice their faith, and give back to the community are great ways to increase resilience and improve their mental well-being.

These stories help bring light to the mental struggles of minority groups in Montgomery County. The more we know about their unique challenges, the better we can support them.

minority myth in school

> *"More must be done to sensitize and train school counselors and teachers in addressing cultural-specific factors, such as the model minority myth, when working with Asian American students."*
>
> *—Female, Asian Indian, 17 and under*

Lack of cultural understanding may contribute to a lack of sensitivity, inaction, underdiagnosis, and/or misdiagnosis of mental struggle in people from racially/ethnically diverse populations. The stories also highlighted the need for healthcare providers and the community at large to be educated and provided strategies on how to better respond to those who eventually muster the courage to share. Education about the principles of motivational

What We've Learned

continued

FACTORS THAT POSITIVELY IMPACT MENTAL WELL-BEING	
Blacks/African Americans (n=9)	• Unconditional love and non-judgmental support system; including affirmation and validation of feelings (6) • Recognizing that he/she is not alone (4) • Providers who look like me – race and gender (3) • Sharing and listening to other people's experiences (3) • Acknowledging struggles/acceptance of illness (2) • Faith/religion (2) • Exercising (2) • Availability of free resource (1) • Stopped caring about what people thought and started caring more about getting better (1) • Helping others (1) • Anti-depressants (1) • Journaling (1) • Meditating (1)
Asian Americans (n=9)	• Support from family and friends (3) • Therapy (2) • Patient Navigator Program (2) • Volunteering, contributing back to the community, and sharing awareness (2) • Medication (2) • Religion (2) • Practicing Gratitude (1) • Exercise (1) • Writing (1)
Hispanic/ Latinos (n=9)	• Not to isolate myself; volunteering and getting more involved with different communities (5) • Looked for information (3) • Sharing and listening to other's stories (2) • Working at Identity and being able to help others heal (2) • Positive thinking (2) • Learn new things, such as language, painting, crafts, cooking • Being active (3) • Eating healthy (1) • Talking with a therapist (1) • Watching funny videos (1)

interviewing and the negative consequences of positive toxicity will be valuable. Increasing awareness, uplifting minority voices about their mental health journey, and equipping others on how to best support those who are struggling will help narrow the wide gap in health disparity, remove the stigma around mental health, and consequently strengthen the culture of health within different minority communities.

Call to Action

We Can Take Action

There is much more to be done, and each of us has a role to play. Supporting the mental health needs of the community requires a whole-of-society effort to address the longstanding disparities, strengthen systems of care to welcome ethnically diverse communities, and ensure linguistic and culturally responsive services and resources for a healthy community. Our goal is to stop and reverse the increasing prevalence of community members suffering in silence—a goal that can be accomplished through the collective action of all stakeholders.

Here are some actions to consider:

Ensure Access to High-Quality, Affordable, and Accessible Mental Health Care

- Expand access, programs, initiatives, and screenings services for minority mental health providers in Montgomery County to minority communities.
- Require that all health programs and entities receiving funds provide clients with multilingual interpretation services that are representative of the county's diverse population.
- Create positive, safe, and affirming environments that provide a continuum of support to meet the social, emotional, behavioral, and mental health needs of ethnically diverse communities.

Build Capacity for Programs and Systems

- Expand the capacity of Safety Net Providers to offer culturally and linguistically appropriate mental health services to minority populations.
- Expand the capacity of the Department of Recreation to offer recreational services for ethnically diverse youth.
- Create internship opportunities to help unlicensed immigrants and health professionals to reenter their careers.
- Expand the capacity of the Welcome Back Center to assist foreign-trained health professionals to obtain their licenses in Maryland.

Advocate for Data Collection and Research

- Ensure that reliable data at the subgroup level is collected within Montgomery County to fully understand the health concerns and unmet needs within ethnically diverse communities.
- Increase timely data collection and research to identify and respond to the mental health needs of the diverse population more rapidly.

Call to Action

continued

Ensure Access to Culturally Responsive Mental Health Care

- Increase the number of bilingual and bicultural health care practitioners working in programs administered or funded by the County.
- Expand the culturally responsive training opportunities to all service staff, teachers, therapists, and mental health providers to enable a more effective response in cross-cultural situations.
- Conduct culturally and linguistically appropriate outreach activities to increase awareness and use of available programs.
- Provide ongoing awareness training on the need for culturally and linguistically appropriate services and on applicable Federal mandates and standards for Culturally and Linguistically Appropriate Services in Health Care.

Provide Funding to Support Mental and Behavioral Health Programs That Serve Diverse Population

- Ensure an increase in funding levels for programs offering behavioral health services.
- Create opportunities such as internships, volunteer placements, mentoring, and scholarship programs whereby interested bilingual and bicultural ethnically diverse populations gain the experience and encouragement they need to pursue studies in behavioral health.
- Elevate and amplify the voices of diverse families in all stages of funding to identify communities' mental health needs to inform grantmaking strategies and decision-making.
- Support workforce training for Peer Recovery Specialists from diverse backgrounds to help individuals in crisis.

Provide Resources and Technical Assistance to Strengthen Mental Health Programs

- Increase public information efforts to increase awareness of mental illness and fight stigma to encourage people of all backgrounds to speak up and ask for help.
- Expand culturally responsive programs to educate the minority population on the importance of seeking and obtaining mental health services. This includes marketing and expansion of mental health and wellness services and non-clinical trauma-informed emotional support groups.

Join us in our commitment to normalize the dialogue about mental health, minimize the stigma, and remove barriers to seeking services that currently exist for different ethnic groups.

Montgomery County Mental Health Resources

Montgomery County Crisis Center (24/7)

1301 Piccard Dr.
Rockville, MD 20850

Provides free crisis services 24 hours a day/ 365 days a year, which includes full crisis assessments and treatment referrals for all crises, both psychiatric and situational.

(240) 777-4000

The National Suicide Prevention Lifeline

The Lifeline provides 24/7, free and confidential support for people in distress, prevention and crisis resources for you or your loved ones, and best practices for professionals in the United States.

988

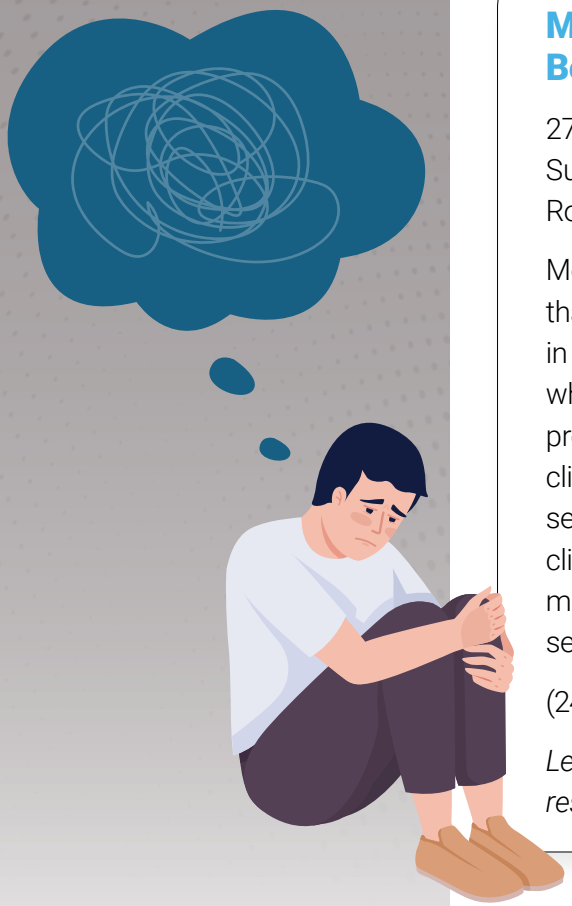
Montgomery County Access to Behavioral Health Services

27 Courthouse Square
Suite 101
Rockville, 20850

Mental health/substance misuse screening and referral program, that provides assessment and linkages for low-income adults living in Montgomery County who have no commercial insurance, and who need services for major mental health and/or substance misuse problems. The program provides telephone, in-person, or telehealth clinical assessment and financial screening and referral for public services; consultation to assist agencies/programs in planning for clients with mental health and/or substance misuse needs (including medications and prescriptions); and information about mental health services in Montgomery County.

(240) 777-1770

Leave a message as needed for a return call. A representative will respond within one business day.



Montgomery County Mental Health Resources

continued

Montgomery County Mental Health Services for Seniors and Persons with Disabilities

Outreach mental health services for seniors who cannot or will not go to office-based services; mental health consultation to assisted living providers, senior center directors, Housing Opportunities Commission resident counselors; psychoeducation (education to the public about mental health issues); drop-in groups at senior centers; senior mental health education and consultation to DHHS staff.

(240) 777-3962

Child and Adolescent Assessment Services (CAAS)- formerly Substance Abuse Services for Children & Adolescents (SASCA)

Child and Adolescent Assessment Services (CAAS) located at the Crisis Center, provides confidential mental health assessments and screening for substance abuse for youth up to age 18 who live in Montgomery County. Referrals are made for mental health and substance use treatment, substance use education and classes.

240-777-4000

Asian American Health Initiative (AAHI)

Provides multilingual mental health resources to support community members. Mental Health resources are available in Chinese, Korean, Hindi, and Vietnamese. Connects community members to various county resources. Provides a list of Asian American mental health provider database.

(240) 777-4517

Montgomery County Mental Health Resources

continued

African American Health Program (AAHP)

AAHP's Mental Health focus area provides resources and education to promote understanding of and treatment for mental health. AAHP provides a mental health screening tool for individuals to make an informal personal assessment of their mental health and to receive referrals for local mental health. Receive FREE mental health screenings here.

(240) 777-1833

Latino Health Initiative (LHI)

Latino Health Initiative (LHI) partners with Identity, Inc. to deliver health and wellness programs for high-risk Latino youth and their families. Youth and families participating in these wellness programs may benefit from services including case management services, individual wellness plans, curriculum-based group interventions, and more.

(240) 777-3221

Black Physicians and Health Care Network

The Black Physicians & Healthcare Network (BPHN) providers are a multi-disciplined, multi-specialty group of physicians & healthcare providers. The mission of BPHN is to improve the overall health of Black people in Montgomery County, MD.

(301) 365-4480 ext 181

EveryMind

Offers a host of mental health services including a free 24/7 hotline with phone, text, and chat specialists.

(301) 738-2255

Montgomery County Mental Health Resources

continued

Identity, Inc. "Encuentros" (support groups)

Identity teaches and models for young people, ages 7-25, the social-emotional, academic and workforce skills they need to thrive in the modern world.

Monica Wainbarg: (240) 750-3101 / mwainberg@identity-youth.org

Anali Torres: (240) 477-3227 / atorres@identity-youth.org

(301) 963-5900

Mary's Center

Specializes in helping people who have experienced trauma and those struggling with anxiety, depression, post-traumatic stress disorder (PTSD), substance abuse, and many other mental health concerns. Accepts most insurance plans including Medicaid and Medicare. For people who don't have health insurance, will help apply for public benefits or provide care at a discount.

(844) 796-2797

Thank You

to the 27 brave and courageous members of our community who shared their mental health journey with us, and who made this report possible.

THESE ARE THEIR STORIES.

Asian American & Pacific Islander Stories

I have never Voiced my opinion publicly out of fear that an American might ask me to leave this country.

In December 2008, I came to the US with my family to pursue my own American dream. I used to live in Thailand, Singapore, and the UK before moving to the Untested States. This was thirteen years ago. I remember clearly because Jan. 2009 was the year Barack Obama became the first African American president of the United States. Soon after we arrived, we were invited to a neighborhood party for President Obama's inauguration. In 2015, I became a US citizen, and I was able to go back to school and get my college degree.

I grew up in Southern China during the years when China was beginning to open its doors to foreign investments. China was planning to advance its economy for the welfare of its citizens. Both my parents had stable government jobs, but we were not well-off. I was taught to be polite, courteous, and work hard. My grandparents often said: " Keep your head down and work hard. If you do your best, it does not matter what others think or says about you".

In the thirteen years of living in the Washington DC area, I stayed quiet at the occasional strange looks. I have never Voiced my opinion publicly out of fear that an American might ask me to leave this country I love. An American might ask me to go back to where I came from. In a scout troop meeting with my son 2 years ago. A parent who realized that I was from China and called me Wuhan Virus in front of others. I was hurt, but I was speechless. Once my doctor for digestive care asked me to take a blood test for hepatitis B. She said," Many Chinese people have hepatitis b."

Activism is new to me. Activism is new to Asian Americans. For a variety of cultural reasons, we are not taught to speak out. We are reluctant to express opinions openly. Asians in the united states have as a "model minority" Asian are assumed to be doing they have the highest educational achievements and and one of the lowest crime rates. Hence, Asian easy targets for racists. They have been left out the racial conversation in the United States. Asian treated as the "invisible minority."

Since the beginning of the COVID-19 pandemic, have been terrified by the alarming surge in violence due to misinformation and stigma. Anti-Asian hate crimes increased by nearly 150% in 2020.

But what started out as dirty looks and verbal attacks has escalated to physical attacks and violence against Asian Americans.

Unfortunately, Asian American history is not taught in our schools. Excluding Asian Americans from American history makes us invisible and regards us as perpetual foreigners.

These incidents of xenophobia and racism have damaging effects on immigrants' mental and physical health. In a recent Washington post article, the CDC director names racism a public health threat that affects the health of our entire nation.

Thanks to the scientists and the Biden administration, the American people are able to get vaccinated against Covid-19. Our lives have returned to what is close to normal. Students are back to school. Workers are back in offices.

In May 2021, President Joe Biden signed into law the Covid-19 Hate Crimes Act which received bipartisan support. President Biden said (P) "For centuries, Asian Americans, Native Hawaiians, Pacific Islanders, diverse and vibrant communities have helped build this nation only to be often stepped over, forgotten, or ignored," He added: "My message to all of those who are hurting is, we see you. And Congress has said, we see you. And we are committed to stopping the hatred and the bias."

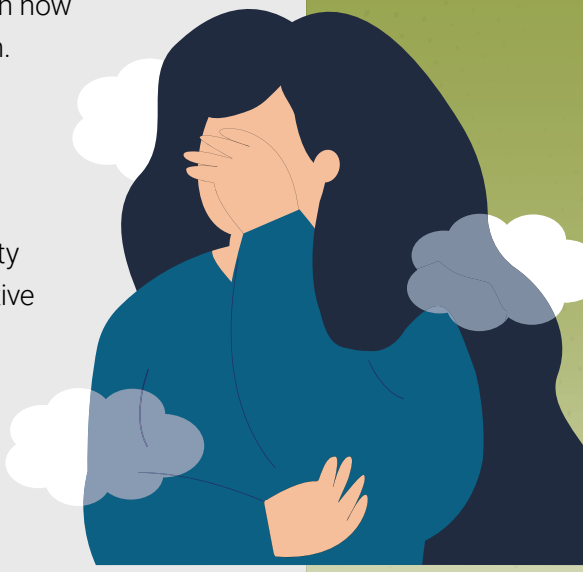
In 2022, My family and I are volunteering in Buring Tree Village, Bethesda Care, and Washington School of International Education to contribute back to my beloved country, the United State of America. I am proud to be an American citizen.

—Female, Chinese, 35-54 years

I saw myself repeating the patterns of my emotionally unavailable parents.

I grew up knowing I was hyper sensitive. And I was very servile and self less too. I was good at taking care of people who were sick and also very good at 'reading the room' or 'reading people.' I thought it was cool that I was an empath and had 'good' instincts. Only later after I crossed 50 years of age and having lost one parent, I realized I was reacting like a typical trauma victim. I started questioning about why we are they way we are, what do dysfunctional families look and behave like? Why did all the children in my family abandon the parents and went to live in foreign countries, far flung from each other. I realized I came from an abusive household, were one parent was very authoritarian and the other a victim of abuse. Our parents though they fended to clothe and house us, deprived us of emotional support. They were emotionally unavailable to us. Everyone walked on eggshells around our strict and disciplinarian father. Our Mother too tended to be harsh, sometimes physically just to protect us from the wrath of our father. Now I realize each one of us responded to the trauma by either freezing, fleeing, fighting and in my case 'by fawning.' The fawn response involves praising the abuser, being servile and submissive, just so that the abuser doesn't explode. Unfortunately, humans tend to parent their own offspring based on how they themselves were raised, unless they do some serious soul searching and therapy. I saw myself repeating the patterns of my emotionally unavailable parents, reacting anxiously and panicking, as my mother, to minor infarctions by my own kids, always expecting the 'worst case scenario' and that it would be blamed on me. As my teenager was diagnosed with severe depression and her minor panic attacks increased to anxiety and blacking out, I realized that the chain of generational trauma had to end with me. I sought treatment and therapy for me and my daughter. It has taken several years of medication and therapy to reach a stage of clarity and shared understanding. I have apologized multiple times to each of my kids on how clueless I was about parenting, that I was operating only by what I knew then. Now I know better, I am deep into doing 'shadow work by Carl Jung.' I have learnt about the mother wound, the inner child, individuation and healthy parenting. As parents we must understand that though we may have been victims of traumatized parents themselves, we can break that chain of inter generational trauma by learning the early warning signs of depression, anxiety and other mood disorders in our children. We should learn to detect destructive parenting and cultural patterns that can cause irreparable damage to our innocent kids. Speak up about trauma, about therapy and treatment. And call out other parents in your family and friends when you see abuse. We have to care about our children, our community to keep everyone safe and healthy.

—Female, Asian Indian, 35-54 years



I filed for divorce, my husband accused me of mental illness.

I came to the USA as a new wife to a much older Pakistani man, who mistreated me physically, mentally, verbally and financially from day one. In Pakistan I was a graduate school teacher. I was a working woman when I had to move to a new country. Though we had a tumultuous marriage, we had three children in quick succession. My husband punished me by denying my children any comforts. There were days when there was no milk in the house to feed my babies. I was in a lot of mental and physical anguish. I had few friends in the US and they could only help so much. My friend referred me to the Patient Navigator Program. I learnt about domestic violence and that there were other options than just staying in an abusive marriage. I filed for divorce, my husband accused me of mental illness. The court ordered a mental health evaluation. The behavioral health vendor wouldn't see me with an interpreter. The PNP filed a complaint with the Office of Civil Rights. I testified with them, I knew I had rights and stood up for them. The vendor was ordered to comply with all guidelines that had been violated. The PNP referred me to the Abuse victims unit, the Crisis center, DVRP and Legal Aid. With support from friends and County and other organizations, today I am a divorced, working single Mom, raising my three children in a violence free household. Life is still full of challenges but I know that there are programs out there that can help us, even when we think all is lost.

—Female, Pakistani, 35-54 years

I was shattered, I was left alone to fend for my teenage kids.

I had come to the US from a small village in India, to join my husband who had worked for decades here. I spoke no English and the US was a completely alien place. My husband was a hard working man and we seemed to settle well initially. However, soon after wards, my husband succumbed to the illness during the H1N1 epidemic. I was shattered, I was left alone to fend for my teenage kids. How could I possibly become the sole care giver in a new country? I was in a state of complete panic. I was already acquainted with the Patient Navigator Program, they had assisted with health check ups and even ER visits for me and my husband. Now I relied totally on them to help resolve issues involving Probate, Life insurance, banking, buying a small house, naturalization and setting up of a small business. I was lucky to find good people in the community, who helped with counsel, and support.

I started my own business, got Pell Grants and studied part time and started paying all my bills. Work and my children's needs kept me from falling into depression. Support from the PNP, my friends helped me sort through my problems, one by one. Now I am well settled, speak English fairly, have my own business with very loyal customers and am comfortable with life. I cannot imagine the progress I have made in the last 12 years, when that shy woman came from a small village in India.

—Female, Asian Indian, 35-54 years

It is very important that family supports the person having mental health issues.

We lived in a small town in India and my children grew up in a large joint household. Things didn't seem out of the ordinary with my younger son. However, soon after immigrating to the USA, we had a personal tragedy in the family, my husband died of an infection suddenly. This trauma shattered me and my young teenage kids. As we tried to build a new life, things however turned more challenging. My son had a psychotic episode in Highschool. Initially we though it was depression and we started him on some meds. However, his condition did not improve. We changed the doctor, who changed the medicine and started counseling too. It took us several years of various medicines, dosing, multiple doctors and ER visits to figure out what ultimately was his correct diagnosis. Once that was settled, comprehensive medication treatment was started, with regular talk therapy. My son is stable now, with the help from the Patient Navigator Program, we applied for disability and were approved, now his depression and psychiatric illness is well controlled with medication. Our family also learned to adjust to mental illness within the family. It is very important that family support the person having mental health issues. I feel we are all on the same page, where care is taken for all members of the family. Mental illness can be managed with a good support system and the right medications.

—Male, Asian Indian, 18-34 years

I realized connecting and interacting with others was the most important part of my life.

I am seventy five years old and a long time diabetic patient. As an asian woman, I find it difficult to show my weaknesses or emotions to my family or friends. My diabetes symptoms have gotten worse during the pandemic as I could no longer go to the local gym that I loved going. My sugar level was not controlled and the doctor had to increase the medication dosage. I was sad and depressed at home. I didn't feel like managing my diet or exercise since I was home alone most of the time. Seeing my close friends passing away made me feel even more depressed. Aging is depressing and if you age with chronic illnesses it is even more difficult. I was losing hope for life but I read this religious book on dying gracefully and decided to live each day with gratitude. I decided to reach out to my family and friends actively by sending them text messages and slowly going to local gym and church like before. I realized connecting and interacting with others was the most important part of my life. I battle with chronic diseases but as long as I know that I am valuable to my loved ones I can get by each day with good spirit.

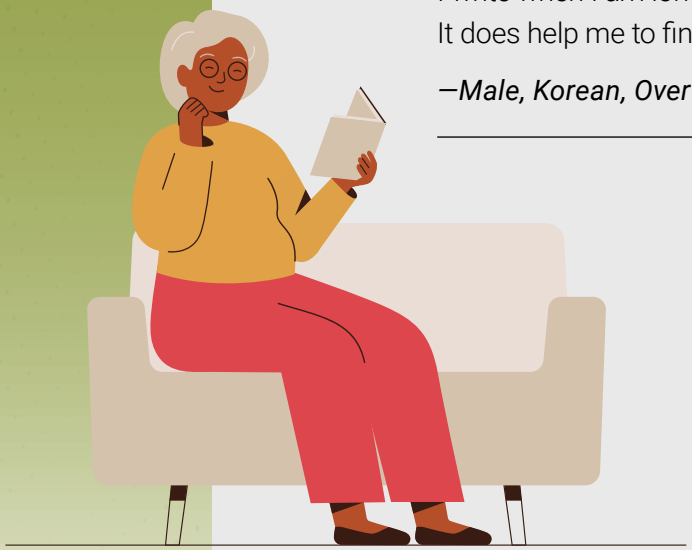
—Female, Korean, Over 65 years

I write when I am lonely and when I feel sad.

I write. I write to kill time and I write to be honest with me. Writing has helped me to face my emotions. My family discourages me from me going to writing clubs or submitting to my pieces to local contests. They think I write bad since I am not properly educated. I still keep on writing because writing makes me feel happy and energized.

I write when I am lonely and when I feel sad. It does help me to find peace in me.

—Male, Korean, Over 65 years



I had to find a way to pull myself up and I chose religious faith as my helper.

I suffered from a brain tumor for a long time. I underwent three open brain surgeries and the recoveries were pretty tough. With such physical ailments, I was alone in bed most of the time and felt miserable and depressed. But I had to find a way to pull myself up and I chose religious faith as my helper. I believed there was a reason for all the pains and suffering in my life and decided to look at life differently. I decided to think positively and be grateful for everything in all circumstances. I have many friends that share the same religion and we have strong bond and connection. I meet with my church people regularly and share our struggles together. I have a physical disability from the past surgeries and my health is still quite poor, but I can confidently say that I have a good mental health because of my faith in God.

—Female, Korean, Over 65 years

Society expects only perfection from you.

I want you to imagine a world in which your teachers are baffled if you get anything less than a perfect score on a test; your friends look at you confused if you don't know the answer to a math problem; you even get judgemental stares from classmates if you ask for help. Society expects only perfection from you. This is the reality of the model minority myth, and this is how Asian American students are treated across schools in America. The model minority myth refers to the harmful and dangerous stereotype of Asian Americans being innately intelligent and perfect - a model minority. I have been in magnet schools with predominantly Asian American students all my life, and I have noticed that this stereotype has put immense pressure on my peers and I to achieve perfection, with no room for errors.

This overburdening pressure leads to immense stress and poor mental health for Asian American students. Unfortunately, the model minority myth extends beyond the classroom to expectations of perfect mental health, preventing Asian American students from seeking mental health assistance through the existing avenues such as school counselors, therapists, or even just self-care. Every pathway for mental health improvement is frowned upon by parents and friends and clouded with stigma.

The American Psychological Association finds that 17.3% of Asian Americans reported poor mental health, yet Asian Americans are three times less likely to seek mental health services than the general population. This is why it's crucial that we create a pathway for Asian American students to receive help with mental health in schools without fear of judgment.

It's crucial that we counter the model minority myth by spreading awareness of the issue. If all students understand the consequences of the judgment they impose, even just the confused glances, then we can begin to reduce the stigma surrounding mental health, and allow Asian American students to access mental health services.

Secondly, more must be done to sensitize and train school counselors and teachers in addressing cultural-specific factors, such as the model minority myth, when working with Asian American students. If counselors are able to address the root of the issue in the community, it would encourage Asian American students to seek help with mental health.

It's critical we address this problem urgently. I believe that utilizing the 2-part solution - spreading awareness as well as sensitizing counselors, we can begin to heal as a community.

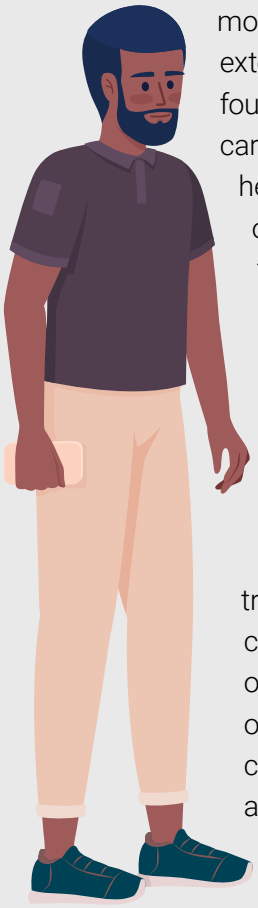
—Female, Asian Indian, 17 and under

Black or African American Stories

A glimpse into the struggles and triumphs of an African American mental health Veteran.

Mr. Frazier as he is lovingly called is a fifty-six-year-old African-American male from Washington D.C. living in Silver Spring who is a mental health survivor activist. In his interview, Mr. Frazier described the impact of a one-year tour of duty in Vietnam in1965–66 and the drug use and depression that followed upon his return to his family. His story highlights the unique challenges faced by African-American males within the mental health system and American society. How does American society's lack of permission for men, especially African-

American men, to express feelings of sadness, helplessness and loss, contribute to the mental distress in men daily confronted with oppression and pain? Mr. Frazier's first contact with the mental health system was at the age of forty-six when he was picked up on the street and held in a psychiatric ward for three months. He recounts his anger at the friend who arranged for his extended incarceration until a community-based placement could be found for him. Mr. Frazier described the hospitalization and the after-care as a significant turning point that broke the cycle of twenty years of heroin abuse. He raised important questions about the misdiagnosis of African-Americans, especially males with substance abuse and trauma backgrounds, as having schizophrenia and embarking on often debilitating and useless treatment. Mr. Frazier also raised crucial questions regarding the silence and shunning of individuals with mental illness within African-American families—even families that are otherwise loving and supportive. He appreciates The Black Physicians Healthcare Network and AAHP for providing free services and screenings. He speaks with pride about maintaining his relationship with his own children in spite of his drug abuse and trauma and makes visible the reality of survivors as parents, husbands, children and activist. In his interview, Mr. Frazier talks about the impact of his civil rights activism in the late sixties and the cultural depression of lost dreams. His story provides a rare glimpse into the trauma created by a crushed and compromised revolution for black liberation and wide-scale societal transformation.



—Male, Black/African American, 55-64 years

I'm doing OK now–Ms. James.

My name is Ms. James. I'm a School Counselor and I experienced anxiety and depression during my first year on my current job.

I had a breakdown, mental illness, and I was hospitalized and dealt with many disorders. It took years before finding a psychiatrist. Even more years before finding therapy.

I've been diagnosed with Generalized Anxiety Disorder (GAD). I often get panic attacks, I suffer from depression as well and I'm currently on medication.

It took years before I felt better. I had health problems that lead to removing my gallbladder. I had difficulty getting out of bed and showering. There were times when I couldn't be in groups with people due to social anxiety disorder. I had to take time off of work.

The reason I reached out to the The Black Physicians Healthcare Network is because I was looking for another mental health provider that looked like me and I started doing my research on resources in the area for depression and anxiety as a few years ago I was diagnosed with both.

I really enjoyed reading the website. I work in a school where many girls are suffering from depression and anxiety as well as other co-occurring disorders. I educate my students on the importance of wellness.

I'm doing ok now. I recently just started my own non-profit. It's in the early stages. Girls, Anxiety & Depression. The website will be completed soon.

—Female, Black/African American, 35-54 years

ENOUGH IS ENOUGH!

My name is Kelly and I used to struggle with anxiety and depression. Nobody understood or wanted to understand; in fact they called me names and passed judgment before they even knew what I was going through. It made me so afraid to speak up and speak out about it that it completely silenced me for years.

For a very long time I was full of anxiety, depression, fear, anger, self-doubt, low self-esteem and alcohol. Everything was hurting me emotionally, mentally and physically!

But, as scary as it was, I took a stand and put up a serious fight for my soul, my health, my spirit and everything that matters in this life! I stopped caring about what people thought and started caring more about getting better.

I got so tired of the panic attacks, the constant tears, the "what ifs," the fears, the lack of self-confidence and the hangovers! I knew in my heart that there was so much more for me! So, one day I made a conscious decision and I said out loud "ENOUGH IS ENOUGH"! It is time to fight for the Kelly that I knew was on the inside waiting for an invitation to show her greatness.

First, I acknowledged my struggles, and then I immediately got into contact with BPHN, AAHP and other resources and made an appointment to see a therapist. I started journaling, praying, meditating, exercising and speaking life and love over myself every SINGLE day!

Because of my commitment to my healing, nowadays when I look in the mirror, I feel a different kind of love for myself that goes far beyond my outfit, my red lipstick and my mascara! I now see my will, determination, resilience, and that I'm a fighter, a survivor, a queen, a warrior, a healer, a leader and a person who stopped using circumstances as an excuse to stay stuck!

The more I started to heal the more and more I saw my potential and what I was capable of and due to my intentional fight, hard work and my determination to be my greatest, I am proud to say that I am now the CEO of my own company, a Best Selling Author and a Survivor of Mental Illness!

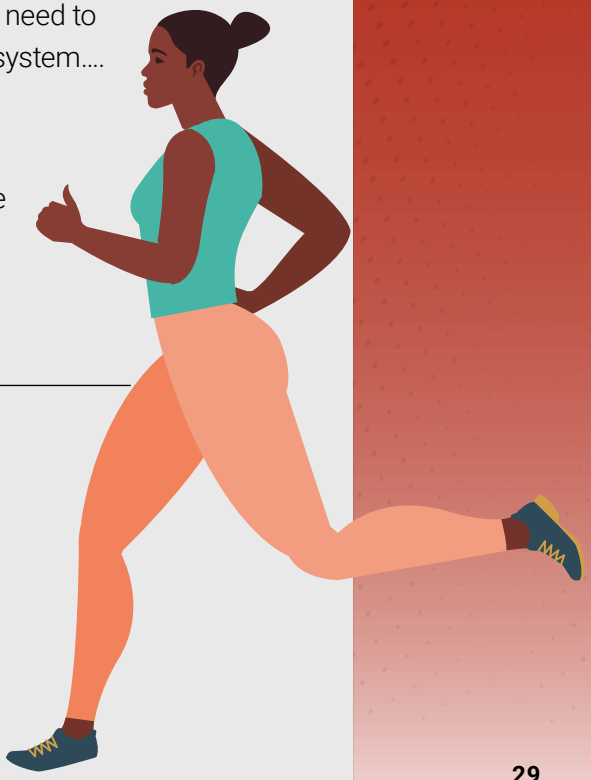
This story is to simply show you that if I can beat anxiety and depression and all the other things that I have battled that tried to take me out, so can you!

No more excuses…no more waiting! It is time to give yourself that invitation to step into your greatness just like I did.

Now, I'm no therapist and nor do I claim to have all the answers but one thing that I do know is that whatever dream is in your heart, whatever goal you need to achieve, with a fight, determination and a solid non-judgmental support system.... you too can triumph over anxiety and depression.

I' have even began a Facebook Community called "I BEAT ANXIETY DEPRESSION, now what?" It is a very engaged group of warriors who are ready to heal and share their journey and their story for ongoing healing and support!

—Female, Black/African American, 35-54 years



Just stop being sad.

The stigma I experience was close to home and came even when I tried to explain my depression to people close to me, they wanted to help right away. They said things like "just stop being sad," or "get up and do something. You can't just be upset and not change anything." They didn't understand how my illness works and what kind of language to use when talking about it. Since it is a mental illness, they had an "it's all in your head," mentality. I overcame the experience by educating my close friends and family about my illness, and told them that sometimes I need to hear affirmation and validation of my feelings, rather than solutions. It took courage, but I told them I need others around me to be gentle with me when I'm depressed. I also explained that I need someone to ask me how I'm doing, otherwise I might not tell anyone because I have a hard time reaching out for help. As a high note....There are times when I thought I would never feel better, and now I know that isn't true. I still struggle with depression, but I know how to manage it better by seeking help. There is always someone out there who cares.

—Male, Black/African American, 35-54 years

I am not alone in dealing with mental health issues.

Mental health, esp. for men, is of keen interest to me. I have contended with anxiety/depression for much of my adult life. The stigma I have experienced as a result of my illness has been primarily self-imposed. Low self-esteem, a failed marriage and minimum wage employment despite having a Master's Degree have all contributed to seeing myself as a loser for many years. The most painful part has been as a father to my daughter. I have found help by participating in various men's support groups and with the efforts by AAHP and Black Physicians Health Network to help me with resources to find a therapist. In the groups I have learned I am not alone in dealing with mental health issues. These groups have given me an opportunity to be supportive by telling my story, actively listening to other people's experiences, and share the humor and horror of our journey as people with mental illness. Add in the daily use of anti-depressants and the unconditional support of family/ friends and I am grateful that I've weathered more than one dark night. My experience of depression is that it's a cycle. Remember on the tough days that life will have meaning again. And on the easy days be grateful for the synchronicity you're experiencing. You will be a stronger, more empathetic and compassionate person as a result of your seeking balance.

—Male, Black/African American, 35-54 years

Remember you are not alone.

My name is Jessica. As a student leader, I feel as if I will look weak and unreliable if I show my mental sufferings. For example, when I was in undergrad at Howard University, I really felt overwhelmed by the excessive amount of work that I was doing, and I felt that my work was not being noticed or recognized at a meeting. I felt as if everything that I was doing was wrong, and I wanted to cry, so I went to the bathroom so that people would not see me cry. One of the ways that I am able to overcome this experience was talking to adults about my issue. In undergrad, I was really close to two of my teachers, one was an advisor or mentor and one was my class teacher, and I would always tell them whenever I am struggling with an issue, and they were always able to walk me through my experience. I would just like to say that if you ever think you're alone or you feel as if you can't talk to people about your issues, remember that you are not alone.

—Female, Black/African American, 18-34 years

You can heal in the same environment you got sick.

My name is Aisha. I felt like I can't tell anyone I suffer from depression, anxiety and an eating disorder because everyone automatically start assuming I'm lying and overeating about my situation. No one has taken my illness serious because I look normal. Being a black woman adds an extra layer of stigma because mental health isn't something that is discussed or understood in our culture. I have taken acceptance that I have an illness and knowing that God is there for me even when I'm not there for myself has helped me push through. I also know you can't heal in the same environment where you got sick. Ive moved forward by not trying to find solutions in people that prevent me from growing and healing. You are not alone. Just go out there in search of people who understand and make you a better person.

—Female, Black/African American, 35-54 years

You have no reason to be sad, your life is great.

About 5 years ago, I started to develop clinical depression and anxiety that really affected my ability to function. I had to take the last two months of my senior year in college off due to my mental health issues and side effects from my antidepressants, which made me wonder why I wasn't normal like my other peers. It was hard for me to do even the things that I used to be passionate about. I had internalized disdain for my condition and I beat myself up even more for feeling the way I did. I eventually realized that there were many people around me who dealt with the same issues I did and I questioned why I ever thought I deserved any less for having mental illnesses. I still deal with people every now and then telling me "you have no reason to be sad, your life is great!", which goes to show the ignorance that people have against mental health. It's not their fault, either. It's the expectation that society has created for us to disregard the seriousness of mental health issues. In all honesty, the criticism from people who don't understand mental illness has brought me down on occasion. I felt like my problems were invalidated and they didn't matter just because they were primarily manifested mentally rather than physically. I already had very low self-esteem and hearing these things brought me into a deeper state of anxiety and depression. I felt like I was defined by my mental illnesses and people would never accept me for who I am because of it. Despite all of this adversity that I've faced, I found that I had an amazing support system that accepted me and were willing to help me in any way they could. For me, that far outweighed any of the negative consequences I felt from society and my mental illnesses was very lucky to have a strong support system that helped me overcome the stigma that society has associated with my conditions. I decided to reach out to receive treatment for my mental illnesses from AAHP and other organizations who really helped me locate a therapist and psychiatrist. Both my therapist and psychiatrist reminded me that it's okay to feel the way that I do. Overall, the people in my life have given me the strength that I didn't think I could achieve on my own. In fact, I was able to realize my own internal strength with their assistance. Just remember you are not defined by your mental illness. Your feelings are valid and you deserve all the love and care in the world. Remember to take care of yourself and don't let others tell you how you should feel. Only you can do that.

—Female, Black/African American, 18-34 years

Removing some of the the walls and anxieties to getting help I had which were barriers themselves.

I've suffered from anxiety, depression, and substance abuse issues for the majority of my teenage and adult life as I look back as a African American middle aged adult male. It has been a constant struggle of the best ways to manage my issues over time. Seeking help was not one of those options however until I got much older. Growing up a young black male mental health was never discussed. We saw it on tv shows with psychiatrists sitting in chairs speaking across from people of other cultures but never us. As a result of what I perceived as a lack of availability and access went back and forth between self medicating and at one point seeing a psychiatrist as part of a program and being prescribed medication only for the medication to have worse side effects than the mental health issues I was facing. For me it became clear that exercise, investing in self-care, and finding someone to talk to about what was going on in my head was going to be the only way to find peace. of mind. As I got into the professional working environment and obtained insurance even still I found it difficult to locate a therapist. If it wasn't anxiety about where to look, it was followed up with other anxious questions like: How much am I going to have to pay? Will they take my insurance? Will they be someone I am comfortable talking to? Will they be black? This only prolonged the process of finding a therapist and further bouts of self medication and at times exercising and self-care. Eventually from a close friend of mine I was able to locate services through the Black Physicians Healthcare Network and their services that helped to connect me to a mental health provider for free at Hearts in Mind Counseling to at least get the ball rolling which really helped. It was definitely the push I needed to get started toward healing. Just helping to remove some of the walls and anxieties to getting help I had which were barriers themselves.

—Male, Black/African American, 35-54 years

Hispanic or Latino Stories

Some of the stories below are in Spanish and translated in English.

Bienestar: sentirse feliz y en paz.

El estar bien es el sentirse feliz y en Paz consigo mismo.

—Mujer, Hispana, 35-54 años

Translation

Wellbeing: feeling happy and at peace.

Being well is feeling happy and at peace with yourself.

—Female, Hispanic, 35-54 years

Superando la ansiedad y depresión.

Cuando vine a este país sufrí de ansiedad y depresión por haber dejado a mi familia, solo tenía a mi esposo ya que por que me casé por ese motivo es que vine, dejé mi trabajo de mi carrera Universitaria y aquí era como de comenzar todo de nuevo, en ese entonces no sabía que estaba pasando por una depresión eso porque en nuestros países latinos no en todos pero en algunos no se educa mucho sobre estos temas. Pero en lo personal en ese entonces busqué información y una de las cosas que me ayudó mucho fue no aislarme, buscar aprender nuevas cosas, como el Idioma, pintar, manualidades , cocinar etc. El estar involucrada en la escuela de mi niño cuando empezó a estudiar cuando fue creciendo, me ayudó mucho a salir de la depresión y ansiedad; estar activa es muy importante para la vida. Y a seguir adelante.

—Mujer, Hispana, 55-64 años

Translation

Overcoming anxiety and depression.

When I came to this country I suffered from anxiety and depression for having left my family, I only had my husband because I got married, that's why I came, I left my job from my university career, and here it was like starting all over again.

At that time, I did not know that I was going through a depression, because in our Latin countries, not in all of them, but in some, there is not much education on these issues, but personally, at that time, I looked for information and one of the things that helped me a lot was not to isolate myself to seek to learn new things, such as language, painting, crafts, cooking, etc.

Being involved in my child's school when he started school as he started growing up, helped me a lot to get out of depression and anxiety, being active is very important in life; And to move on.

—Female, Hispanic, 55-64 years

La importancia de cuidar nuestra salud mental.

En mi proceso de salud mental me he dado cuenta que como cultura latina tenemos un estigma sobre pedir ayuda psicológica. Traemos esas creencias o esa mentalidad creada de que sólo los locos van al psicólogo. Tenemos que ir cambiando esa manera de pensar y buscar ayuda si sentimos que no podemos salir de un momento difícil en nuestra vida. Si vamos al cardiólogo para el corazón y al gastroenterólogo para el estómago porqué no ir también al psicólogo. Es necesario cuidar no sólo de nuestra salud física, también es necesario que cuidemos nuestra salud mental. Yo pasé por el túnel de la depresión y no es fácil salir de ahí pero no es imposible. Lo que me ayudó fue leer historias de superación, escuchar presentaciones de psicólogos, ir haciendo cambios pequeños en mi estilo de vida, hablar con un terapeuta, escribir las cosas positivas y también las negativas, ver videos cómicos, etc.

Para mí estar bien significa estar consciente de mis emociones, disfrutar el día a día, saber aceptar las cosas positivas y negativas porque de todas esas cosas siempre hay un aprendizaje.

No estamos solos, es importante saber que no sólo nosotros pasamos por momentos difíciles, todos los seres humanos pasamos etapas difíciles en nuestra vida, lo importante es conocernos y saber navegar nuestros sentimientos.

Pongamos en práctica un estilo de vida saludable en todos los aspectos, en comer saludable, salir a caminar al aire libre, hacer ejercicios de respiración o relajación, tomar más agua, etc. Recordemos que pedir ayuda no es debilidad, es valentía.

—Mujer, Hispana, 35-54 años

Translation

The importance of taking care of our mental health.

Through my mental health process, I have realized that as a Latin culture there is stigma about asking for psychological help. We bring those beliefs or perpetuate a mentality that only crazy people go to the psychologist. We have to change that way of thinking and seek help if we feel that we cannot get out of a difficult moment in our lives.

If we go to the cardiologist for the heart and the gastroenterologist for the stomach, why not also go to the psychologist? It is necessary to take care not only of our physical health, but it is also necessary that we take care of our mental health.

I went through the tunnel of depression and it is not easy to get out of it but it is not impossible. What helped me was reading stories of overcoming [depression], listening to presentations by psychologists, making small changes in my lifestyle, talking with a therapist, writing down the positive things as well as the negative ones, watching funny videos, etc.

For me, being well means being aware of my emotions, enjoying everyday life, and knowing how to accept positive and negative things because there is always learning from all of these things.

We are not alone, it is important to know that not only do we go through difficult times, but all human beings also go through difficult times in our lives, the important thing is to know each other and know how to navigate our feelings.

Let's put into practice a healthy lifestyle in all aspects, eating healthy, going for a walk outdoors, doing breathing or relaxation exercises, drinking more water, etc. Let's remember that asking for help is not weakness, it's courage.

—Female, Hispanic, 35-54 years

Cuidando de mi salud mental mientras supero pérdidas familiares.

Mi nombre es Margarita Hernández Pecero, estoy casada y tengo dos hijos.

Estar bien para mí significa tener paz emocional y física. Nosotros estamos acostumbrados a visitar al Doctor si nos duele algo físicamente y no damos importancia que también cuando nos sentimos mal emocionalmente necesitamos ver a alguien que pueda ayudar en este proceso.

Las Charlas o Encuentros de Salud Mental han sido en mi vida y en la de mi familia un bálsamo para nuestro bienestar. Tuve varias pérdidas familiares pero la que más nos afectó fue la de mi madre, poder expresar mi sentir y ayudar a los míos con los consejos y la experiencia de los que estaban pasando la misma situación no tiene precio. Mis hijos reaccionaron de manera diferente en esta pérdida y tomar herramientas de las charlas ayudaron para que mis hijos y yo no cayéramos en depresión.

Con los consejos impartidos me fue fácil hacerlos hablar , expresar y así ir sanando su dolor.

Ahora como consultora de salud me siento más capaz, más fuerte. Me he empoderado a reaccionar de manera equitativa a las situaciones que se me van presentando.

Ver a mi comunidad que necesita de este recurso me ayuda a trabajar con más ánimo para tener una comunidad más sana.

Estoy infinitamente agradecida por todo lo logrado con estas charlas.

Atentamente.

—Mujer, Hispana, 35-54 años

Translation

Taking care of my mental health while overcoming family losses.

My name is Margarita Hernández Pecero, I am married and have two children.

Being well for me means having emotional and physical peace. We are used to visiting the doctor if something physically hurts us and we do not give importance that when we feel bad emotionally we need to see someone who can help in this process.

The Talks or Meetings of Mental Health [at Identity] have been in my life and in that of my family a balm for our well-being. I had several family losses but the one that affected us the most was my mother's. Being able to express my feelings and help my loved ones with the advice and experience of those who were going through the same situation is priceless. My children reacted differently to this loss and taking tools from the talks helped my children and me not fall into depression. With the advice given, it was easy for me to make them speak, express, and thus heal their pain.

Now as a Health Promoter, I feel more capable, and stronger. It has empowered me to react equitably to the situations that are presented to me. Seeing my community that needs this resource helps me to work with more courage to have a healthier community. I am infinitely grateful for everything achieved with these talks.

Sincerely.

—Female, Hispanic, 35-54 years

La importancia de la salud mental en nuestras vidas, en nuestras familias y, por supuesto, en nuestra sociedad.

Cuando llegué a los Estados Unidos hace 6 años realicé diferentes tipos de trabajos como limpieza de oficinas, baños, cuidado de ancianos, limpieza de casas, me llenó de ansiedad, tristeza y nostalgia por todo lo que había dejado atrás, que estaba afectando mi salud física, emocional, mental y por supuesto la de mi familia.

Decidí hacer cambios y comenzar a controlar mis emociones y ver lo positivo en las cosas y lo primero que aprendí fue que no importa lo que hagas y dónde lo hagas, siempre y cuando estén de acuerdo con tus valores como persona y hacerlo con amor y pasión siempre será un agente de cambio y el primero en cambiar fui yo.

No veas lo malo siempre, mira lo bueno y las oportunidades que te da la vida. Y en medio de tantos problemas comprendí la importancia de tener una menta más sana que no te domine sino que seas tú quien la controle y cómo eso se logra buscando información al respecto y poniéndola en práctica... Ahí comenzó mi aventura con esta apasionante área de la salud mental.

Luego tuve la oportunidad de trabajar en Identity y hoy quiero decirles que es una gran bendición trabajar ahí, en el Programa de Salud Mental Comunitario, por muchas razones, entre las cuales quiero mencionar:

1. He estado sanando y he contribuido a sanar a otros.
2. He aprendido que la felicidad es el hoy que nos dan. Y les enseño a mis queridos participantes a vivir cada día un día a la vez.
3. Que lo que alimentamos en nuestro corazón es [ya sea amor, ira, u odio] es lo que crecerá cada día.
4. Que vamos a tener dificultades en la vida pero siempre debemos ver la luz en el camino. Que lo que le mostremos al mundo siempre estará ahí, con sus alegrías y dificultades pero tenemos la oportunidad de quitar la pantalla gris que muchas veces colocamos y así podemos ver un mundo mejor.

Escuchar cada una de las historias de los participantes me ha hecho crecer y valorar lo que tengo y ver como toman información de cada una de las herramientas para manejar mejor las emociones, ansiedad, depresión, duelo, traumas etc.

Ver como cada una de ellos crece y se visualiza un mejor rostro con una hermosa sonrisa.

En mi grupo encontré a una mujer joven, que había perdido a su hijo; cuando entró [al grupo] lloraba mucho. En los dos meses que compartí con ella pude ver cómo las herramientas que le enseñamos para mejorar su salud emocional la hacían sobrellevar mejor su dolor. Hoy siente dolor, pero al menos sonríe más.

Les cuento que como consultora en salud mental de Identidad he tenido que estudiar mucho cada uno de los temas, y decirles que eso me encanta y entiendo como educarnos a nosotros mismos y a los demás en este tema de Salud Mental Comunitaria, contribuimos a que nuestra comunidad se sienta mejor y sea resiliente ante las dificultades.

He crecido como persona y he entendido más plenamente la importancia de la salud mental y cómo contribuye en las diferentes áreas de nuestras vidas, a nuestras familias y, por supuesto, a nuestra sociedad.

Gracias

—Mujer, Hispana, 35-54 años

Translation

The importance of mental health in our lives, our families and, of course, our society.

When I arrived in the United States 6 years ago, I did different tasks such as cleaning offices, bathrooms, taking care of the elderly, cleaning houses, I was filled with anxiety, sadness and nostalgia for everything I had left behind, that was affecting my physical, emotional, mental health and of course that of my family. I decided to make changes and begin to control my emotions and see the positive in things and you know I was the first to learn, no matter what you do and where you do it, as long as they are in accordance with your values that you have as a person and do it with love and passion will always be an agent of change and I repeat the first to change was me. Do not see the bad always look at the good and the opportunities that life gives you. And in the midst of many problems I understood the importance of having a healthier mint that does not dominate you but rather that you are the one who controls it and how that is achieved by searching for information about it and putting it into practice... That is where my adventure began with this exciting mental health area.

Then I had the opportunity to work at Identity and today I want to tell you that it is a great blessing to work there, in the Community Mental Health Program, for many reasons, among which I want to mention

1. I have been healing and have contributed to healing others.
2. I have learned that happiness is today that they give us. And I teach my beloved participants to live each day one day at a time.
3. That what we feed in our hearts is love, anger, hate that will grow every day
4. That we are going to have difficulties in life but we must always see the light on the road. That we show you the world will always be there, with its joys and difficulties but we have the opportunity to remove the gray screen that we often place and so we can see a better world.

Listening to each of the stories of the participants has made me grow and value what I have and see how they take information about each of the tools to better manage emotions, anxiety, depression, grief, traumas etc. See how each one of them grows and a better face is visualized with a beautiful smile

In my group I found a young woman, who had lost her son when she entered, she cried a lot. In the two months that I shared with her, I was able to see how the tools we taught her to improve her emotional health made her cope better with her pain. Today she feels pain, but at least she smiles more.

I tell you that as a mental health consultant for Identity I have had to study each of the topics a lot, and tell you that I love that and understand how to educate ourselves and others on this topic of Community Mental Health, we contribute to making our community feel better and be resilient in the face of difficulties

I have grown as a person and understood more fully the importance of mental health and how it contributes to the different areas of our lives, to our families and of course to our society.

Thank you

—Female, Hispanic, 35-54 years

El impacto de la pandemia a nuestra salud mental.

Mi nombre es Julia, soy una mujer migrante de 41 años de origen Salvadoreño. Llegué a este país hace 18 años y como migrante he tenido que enfrentar muchos retos: el primero ha sido aprender inglés al menos lo básico,y durante este momento difícil de la pandemia llegó un momento donde mi nivel de ansiedad aumentó más de lo normal, aumenté de peso, y en ese momento tenía un bebé de 4 meses, una niña de 10 años y un niño de 6 años y la estrategia que usé fue salir a caminar con ellos todos los días.

En el año 2021 fui envidada a un programa llamado encuentro de salud mental por parte de Identity y ahí me hablaron de 9 temas como cuidado personal y cómo aprender a manejar la ansiedad, comunicación y otros temas más pero admito que fueron de mucha ayuda para mí y mi familia, y fue tan gratificante la experiencia que hoy me convertí en promotora de esos grupos de Salud Mental Comunitaria. Y me siento tan llena de gratitud de poder ayudar a muchas mujeres de la comunidad latina en el condado de Montgomery y aparte a todos mis seres queridos.

—Mujer, Hispana, 35-54 años

Translation

The impact of the pandemic to our mental health.

My name is Julia. I am a 41-year-old migrant woman of Salvadoran origin. I came to this country 18 years ago and as a migrant I have had to face many challenges.

The first [challenge] was learning English, at least the basics, and during this difficult time of the pandemic. There came a time when my level of anxiety increased more than normal. I gained weight at that time. [I also] I had a 4-month-old baby, a 10-year-old girl and a 6-year-old boy and the strategy I used [to cope] was to go for a walk with them every day.

In the year 2021, I was sent to a program called mental health meeting by Identity and there they told me about 9 topics such as personal care and how to learn to manage anxiety, communication, and other topics. I admit that they were very helpful for me and my family. The experience was so gratifying that today I became a promoter of those Community Mental Health groups. I feel so full of gratitude to be able to help so many women in the Latino community in Montgomery County and all my loved ones.

—Female, Hispanic, 35-54 years

El impacto del trabajo comunitario liderado por mujeres.

Historias en honor al mes de la herencia hispana

Mi nombre es Milagro Flores, de nacionalidad Salvadoreña, llegué a este país en el año 2005.

Soy esposa y madre de tres hijos, como toda persona que llega a este país venimos con muchos sueños y esperanzas de un mejor futuro, como todas las dificultades se hacen presente y me encontré con grandes desafíos y eso generó en mí cierta frustración y desánimo.

Lo que me motivó de venir a este país fue buscar un mejor diagnóstico médico para mi hijo de 2 años, en ese tiempo a los tres días de haber venido él fue internado en el hospital con convulsiones severas, fueron dos semanas de estado de coma y 3 en cuidados intensivos, con el pasar del tiempo fue diagnosticado con epilepsia.

Desde ahí los retos y desafíos fueron mucho más grandes y difíciles, comencé a trabajar limpiando edificios, vendiendo comida, cuidando niños desde casa, etc.

Cuando mi hijo comenzó a estudiar yo me dediqué a ser voluntaria dentro de las escuelas y comencé a integrarme e involucrarme con diferentes comunidades.

Todos estos procesos me llevaron a poder ver la gran necesidad que tenemos como comunidad latina de recursos comunitarios y que sean en español y fue donde decidí hacer algo diferente e impactar la vida de miles de familias.

Por varios años fui voluntaria en diferentes programas locales, luego tomé la decisión de crear un grupo de apoyo comunitario enfocado en mujeres amas de casa donde fuése posible ayudar a las mujeres a tener una vida mas eficiente y activa en la comunidad y proveerles cualquier tipo de recurso que ellos necesiten tales como, ropa, pañales para bebés y adultos, comida, clases de inglés, clases conversacionales, apoyo emocional, trabajos, ayuda a navegar por todo el sistema escolar, seguros médicos y todo entrenamiento que sea de ayuda para ellas y de ahí se creó el grupo comunitario Mujer Fuerza y Coraje, donde impactamos a miles de mujeres anualmente y somos una fuerte de soporte para muchas familias, usamos plataformas digitales tales como Facebook e Instagram, ya el grupo tiene 14 años activamente en nuestra comunidad.

Crear este grupo me permite apoyar a mi comunidad e impactar positivamente a la sociedad y crecer como persona, actualmente trabajo con diferentes organizaciones locales entre ellas está incluida Identity, organización que me ha permitido llegar a cientos de mujeres latinas y ayudarles en el recorrido de sanación emocional.

Estoy muy orgullosa de ser latina y del gran impacto positivo que ha tenido mi vida en este país y mi aporte a este mundo, cabe mencionar que mi trabajo es 100% voluntario, esto mismo me ha permitido llegar a familias en mucha necesidad en todos los ámbitos.

Ser una líder comunitaria me ha enseñado lo importante que es al trabajo en equipo y crecer juntas y apoyarnos mutuamente.

Ser latina significa no darse por vencidos nunca porque lo mejor está por llegar.

Gracias por la oportunidad.

—Mujer, Hispana, 35-54 años

Translation

The impact of woman-led community service

Stories in Honor of Hispanic Heritage Month:

My name is Milagro Flores; [I am] of Salvadoran nationality and arrived in this country in 2005.

I am a wife and the mother of three children, like everyone who arrives in this country we come with many dreams and hopes for a better future, as [well as] many difficulties and I found great challenges which generated in my certain frustration and discouragement.

What motivated me to come to this country was to seek a better medical diagnosis for my 2-year-old son. At that time, three days after coming, he was admitted to the hospital with severe convulsions, he was in a coma for two weeks and three weeks in intensive care, over time he was diagnosed with Epilepsy.

From there the challenges and challenges were much bigger and more difficult, I started working cleaning buildings, selling food, taking care of children from home, etc.

When my son began to study, I dedicated myself to volunteering in schools and began to integrate myself and get involved with different communities.

This process led me to see the great need that we have as a Latino community for community resources in Spanish and it was when I decided to do something different and impact the lives of thousands of families.

For several years I was a volunteer in different local programs, then I made the decision to create a community support group focused on women homemakers where it was possible to help women to have a more efficient and active life in the community and provide them with any type of resource that they need such as clothing, diapers for babies and adults, food, English classes, conversational classes, emotional support, jobs, help navigating the entire school system, medical insurance and all training that is helpful for them.

From there, the community group Mujer Fuerza y Coraje was created, where we impact thousands of women annually and we are a strong support for many families, we use digital platforms such as Facebook and Instagram and the group has been active in our community for
14 years.

By creating this group, it allows me to support my community and positively impact society and grow as a person. I currently work with different local organizations, including Identity, an organization that has allowed me to reach hundreds of Latin women and help them in their journey of emotional healing.

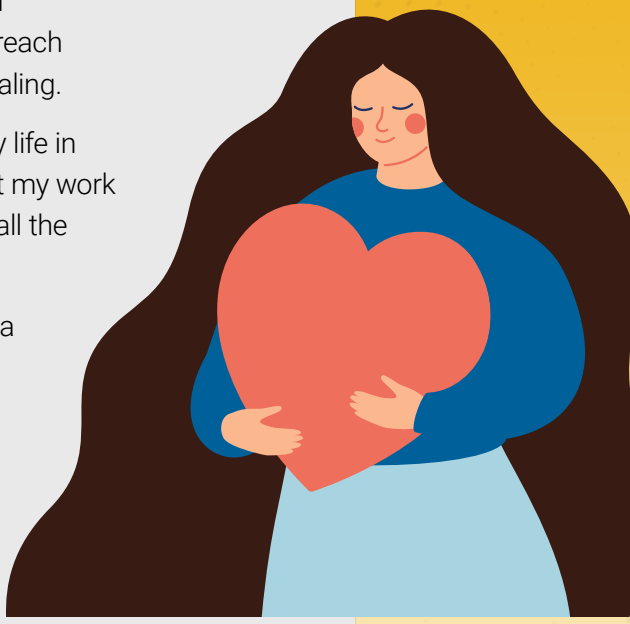
I am very proud to be Latina and it has had a great positive impact on my life in this country and my contribution to this world, it is worth mentioning that my work is 100% voluntary, this has allowed me to reach families in great need in all the scopes of life.

Being a community leader has taught me how important it is to work as a team and grow together and support each other.

Being Latina means never giving up because the best is yet to come.

Thank you for the opportunity.

—Female, Hispanic, 35-54 years



Mi salud mental es lo primero.

Mi salud es lo primero. Y para mí estar bien mentalmente es lo primero por que me ayuda a estar bien, con mi familia y a mí me ha ayudado mucho todo lo que he aprendido gracias a los consejos que he recibido y experiencias que han compartido las demás personas en los Grupos de apoyo para las familias.

—Mujer, Hispana, 55-64 años

Translation

My mental health comes first.

My health comes first. For me, being well mentally is the first thing because it helps me to be well, with my family and it has helped me a lot.

Everything I have learned is thanks to the advice I have received and the experiences that other people in the [mental health] groups have shared to support families.

—Female, Hispanic, 55-64 years

Como una persona me ayudó a superar la soledad y a mejorar mi salud mental.

Mi historia es triste pero al mismo tiempo me sirvió de experiencia porque me ayudó a superar traumas y situaciones de mi pasado.

Desde niña siempre me sentí sola. Yo creo que Yo tenía una soledad emocional porque aún cuando me casé y tuve hijos seguía sintiendo un vacío y una soledad interna. Soledad que se me acentuo en este país Porque si algo me impresionó mucho al llegar a este país fue la soledad y la vejez. Porque aunque se tenga dinero muchas personas terminan solas. Por lo mismo estaba decidida a regresarme a mi país. Un día orando y pidiéndole al todopoderoso que me iluminara para tomar la mejor decisión: Si quedarme o regresarme a mi país. Sucedió que conocí a una persona con la cual inicié una amistad sincera. No había ningún interés de parte de él o mía de ir más allá de una simple amistad. Por casualidades de la vida teníamos una diferencia de edad de solo 1 año. Eso contribuyó para entendernos mejor y a pesar de las diferencias que existen en los seres humanos, nos empezamos a dar cuenta de que teníamos gustos similares. Esta persona vino a cambiar mi vida completamente y a sacarme de la soledad en la que yo estaba hundida. Todos los días me contaba historias, cuentos o chistes. Él alegraba mis días como si fuése un encantador. Un año después, me propuso matrimonio. Desde ahí nos volvimos un complemento. Él me alegraba la vida y yo lo cuidaba porque su salud no era estable. Yo no entendía como él podía contarme tantas historias

que me hacían reír y transportarme a un mundo sin problemas cuando él mismo los tenía. Él había sufrido de un derrame cerebral y tenía el lado izquierdo de su cuerpo paralizado. Por su situación algunas veces se sentía desanimado y no quería hacer muchas cosas. Así que yo me propuse animarlo y motivarlo a que hiciéramos cosas diferentes. Servíamos a la comunidad, viajábamos, bailábamos, ¡que no hacíamos!, y con poco presupuesto porque tampoco teníamos abundancia. Este hombre vino a eliminar la soledad que yo había sentido por tantos años. Uno al otro nos motivábamos a divertirnos y ser felices.

Con él aprendí que la vida es muy linda y que uno puede ser feliz porque todo depende de nuestro positivismo, actitud, amor y comprensión. Lamentablemente él ya no está conmigo, el COVID-19 me lo arrebató mientras servíamos a la comunidad en el 2020, más sin embargo yo conservo de él los mejores recuerdos. Su alegría, su dedicación hacia mí me motivan cada día a continuar sirviendo a mi comunidad y a dejar atrás toda esa soledad que me acompañó por tanto tiempo. Actualmente disfruto convivir con mis hijos, con sus parejas y con mis nietos pero no puedo olvidar que en mis momentos difíciles estuvo él y muchas otras personas más que me han acompañado y lo siguen haciendo hasta el momento.

Mi historia es como mi fantasía hecha realidad.

—Mujer, Hispana, mayor de 65 años

Translation

How a person helped me overcome loneliness and improve my mental health.

My story is sad, but at the same time, it corresponds to my experience because it helped me overcome traumas and situations from my past.

Since I was a child, I always felt alone. I think I was emotionally lonely because even when I got married and had children, I still felt empty and internally lonely. This loneliness was amplified in this country. Something that impressed me a lot when I arrived in this country, was loneliness and aging because even if you have money, many people end up alone. For the same reason, I was determined to return to my country.

One day, [while I was] praying and asking the Almighty to enlighten me to make the best decision whether to stay or return to my country; It happened that I met a person with whom I started a sincere friendship. There was no interest on his part or mine to go beyond a simple friendship. By chance of life, we had an age difference of only 1 year, which contributed to understanding each other better and despite the differences that exist in human beings, we began to realize that we had similar tastes. This person came to change my life completely and to get me out of the loneliness where I was stuck.

Every day he told me stories and jokes. He brightened my days like a charmer. A year after maintaining a beautiful friendship he proposed to me. From there we complimented each other. He made my life happy, and I took care of him because his health was not stable. I did not understand how he could tell me so many stories that made me laugh and transport me to a world without problems when he himself had [problems]. He had suffered from a stroke and the left side of his body was paralyzed. Because of his situation, he sometimes felt discouraged and did not want to do many things. So, I decided to encourage him and motivate him to do different things.

We served the community, traveled, we danced, and did things with very little money. This man came to eliminate the loneliness that I had felt for so many years. We encouraged each other to have fun and be happy. With him, I learned that life is very beautiful and that one can be happy because everything depends on our positivism, attitude, love, and understanding.

Unfortunately, he is no longer with me, COVID-19 took him from me while we served the community in 2020, but I still have the best memories of him. His joy and his dedication motivate me every day to continue serving my community and to leave behind all that loneliness that accompanied me for so long. Currently, I enjoy spending time with my children, with their partners, and with my grandchildren, but I cannot forget that he and many other people who have accompanied me and continue to do so to this day were there during my difficult times.

My story is like my fantasy come true.

—Female, Hispanic, over 65 years

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