



Centro SOL

Annual Report
2023

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Executive Summary

Centro SOL was founded in late 2013 by physicians and clinical providers to respond to the needs of Latinos to access high-quality and equitable healthcare. Our inaugural multidisciplinary advisors provided insights on critical components of our center, including the mission and the five core areas: research, clinical innovations, advocacy, education, and community outreach. Over the years, our core areas have been shaped and adjusted based on scientific evidence that included the voices and perspectives of Latinos. Centro SOL's driving mission of promoting equity in health and opportunity for Latinos in partnership with organizations in and outside Johns Hopkins has intentionally been centered on individuals from a socioecological perspective.

In 2024, the Latino population has been growing and represents almost 8% of the Baltimore City population, which is our motivation to wholeheartedly continue our work. This year, we will celebrate a decade of work to achieve our mission. In this annual report, we summarize key areas of work and our accomplishments. Our efforts in 2023 have been focused on the promotion of evidence to inform programs, policies and research that is more inclusive and diverse, representing the growing Latino community in Baltimore and in Maryland.

We have strengthened the work on mental health during a time where there is a call to action to address the consequences of the pandemic on an already challenged mental healthcare landscape with limited culturally and linguistically appropriate services. We are piloting innovative community-based intervention treatments in partnership with community clinics, community leaders and schools to end stigma around mental health, tackle depression among adults and reduce the risk of suicide thoughts and behavior among adolescents.

In addition, to promote behavior change around healthy habits for healthy children, we have been working with families and their children. A research-based program that has a three-arm structure including clinicians, community health workers and families is making a difference reducing the risk of obesity and building evidence for future evidence-based clinical weight management programs.

We cannot do our work without a strong, passionate, and collaborative team. Operationally, our team has been malleable and continually evolved, guided by the Johns Hopkins strategic pillars. Currently, our community health workers are members of the local community who directly administer interventions and programs. Our research coordinators are bilingual experienced staff members working with immigrant populations. Two new managers joined our team leading our critical work to serve and advocate for more equitable healthcare. In addition, we count on the support of independent contractors, local vendors, graduate students, and casual staff to support our work.

Furthermore, we rely on faculty from across Johns Hopkins Institutions and have partnered with universities such as the University of Denver, Massachusetts General Hospital, and George Washington University among others to plan and conduct research that informs our advocacy work, where we count with members from diverse public and private organizations dedicated to care for Latinos. We have testified to support policies that expand healthcare for all, and our language access report developed in partnership with the Public Justice Center has become key to achieving our mission.

We have reached thousands of people in 2023 through our research, programs, and social media with culturally appropriate content both in Spanish and English. Our strategy has been expanded with the goal of continuing being a reference for Latino health.

We look forward to promoting equitable healthcare access and opportunity for Latinos anywhere in Baltimore.

Letter from Directors

The conversation of our work has centered on the resilience and challenges faced by the Latino community, particularly in the context of health equity and inclusion. It is critical to overcome the infrastructural obstacles to build a more resilient and empowered Latino community. Resilience is part of our community's culture. Our community has a long history of overcoming adversity, and resilience is a powerful asset as we tackle the challenges to achieve better health and more equitable healthcare access. Achieving health equity is not just a matter of providing equal access to healthcare services, but also addressing the underlying social, structural and economic factors that contribute to health disparities within our community.

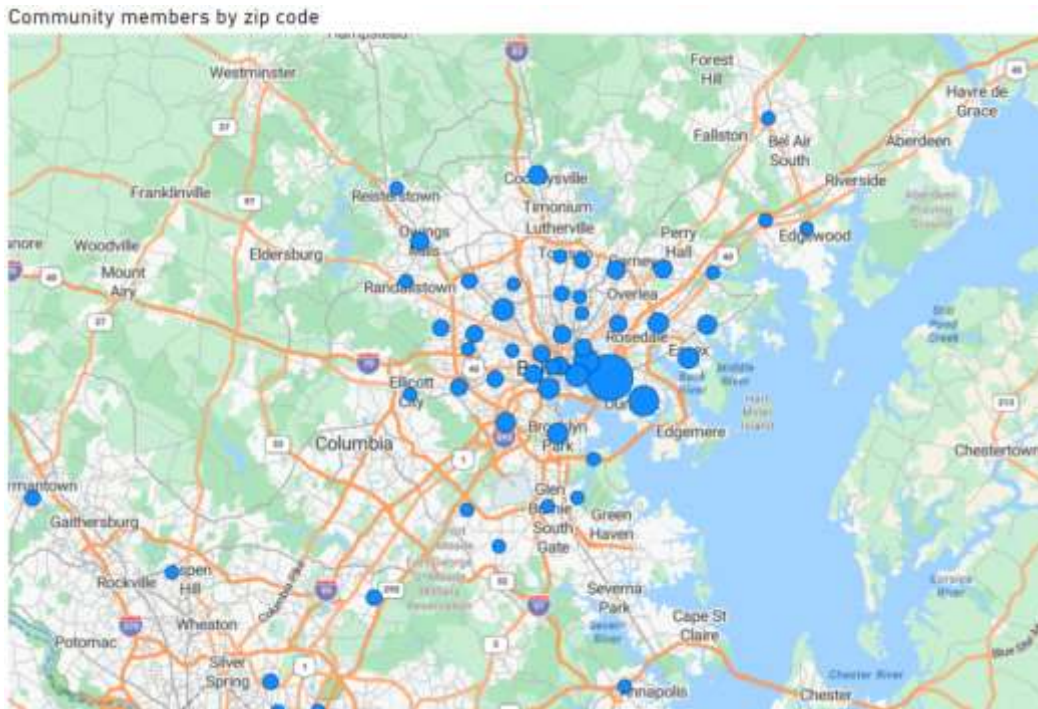
We collectively must advocate for a more inclusive approach to healthcare, one that not only acknowledges the unique needs of the Latino community but actively works to address them. Inclusion goes beyond just providing services; it's about creating a healthcare environment that respects and understands the cultural, linguistic, and socioeconomic diversity within our community. We need more Latino healthcare professionals, researchers, and policymakers that actively participate in decision-making processes. Having diverse voices and perspectives in leadership roles is crucial for driving meaningful change and ensuring that the unique needs of our community are not overlooked.

Community engagement also plays a significant role in achieving equitable healthcare. Empowering our community means actively involving them in the decision-making processes that affect their health and well-being. We need to create opportunities for education, advocacy, and leadership development within our community to ensure that their voices are heard and valued. Centro SOL's examples of success range from participatory-action research methods, grassroots outreach programs to collaborations with healthcare providers and policymakers, all with the common goal of addressing underlying social determinants of health and improving access to high-quality care. We have seen the impact of community-driven initiatives in promoting preventive care and addressing chronic health conditions. By engaging with community members directly and tailoring our programs to meet their specific needs, we have been able to make meaningful strides in improving health outcomes.

To make this work, it is critically important to forge partnerships with other communities and organizations to leverage resources, share best practices, and advocate for policies that benefit all underserved populations. Solidarity and collaboration are essential for creating sustainable change. We are committed to advancing health equity and inclusion within the resilient Latino community. We have made progress, but there is still much work to be done. By continuing to collaborate, innovate, and advocate for our community, we can build a healthier, more inclusive future for all. We look forward to continuing our focus on addressing the challenges ahead and building a more equitable and inclusive healthcare landscape for the Latino community.

Centro SOL's Broad Community Outreach

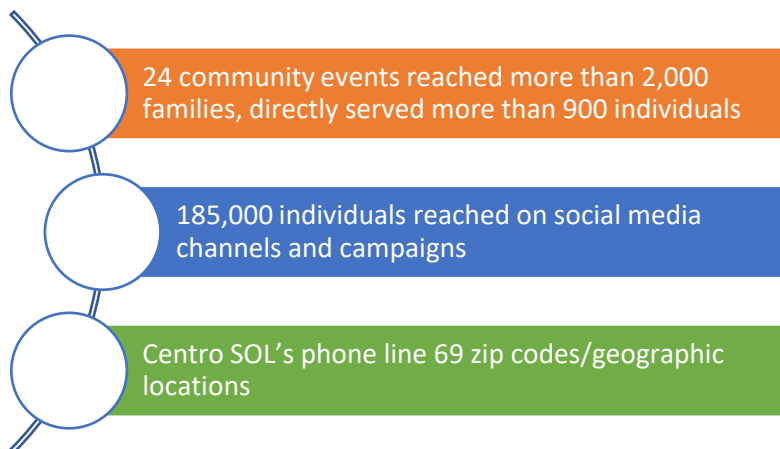
Since January 2022, Centro SOL has assisted more than 570 community members calling in to our main phone line with referrals and information for community resources, including to Maryland's 211 line for general social services. The map below shows the distribution of callers by zip code, with 60% of callers in the zip codes comprising southeast Baltimore and neighboring Dundalk (21224, 21222, 21205, and 21231.)



To connect community members with the resources they need, Centro SOL has built a clearinghouse of resources to share with the community. The resources available on our website at

<http://jhcentrosol.org>, include community health centers, mental healthcare, legal and social support, among others.

The resources are vetted by our team for cultural appropriateness, language access, financial and sliding scale availability, insurance requirements, and other factors to reduce barriers for the community.



The chart below depicts the types of information we provide to our callers: with one third of our callers receiving information from us about access to health care or health insurance.

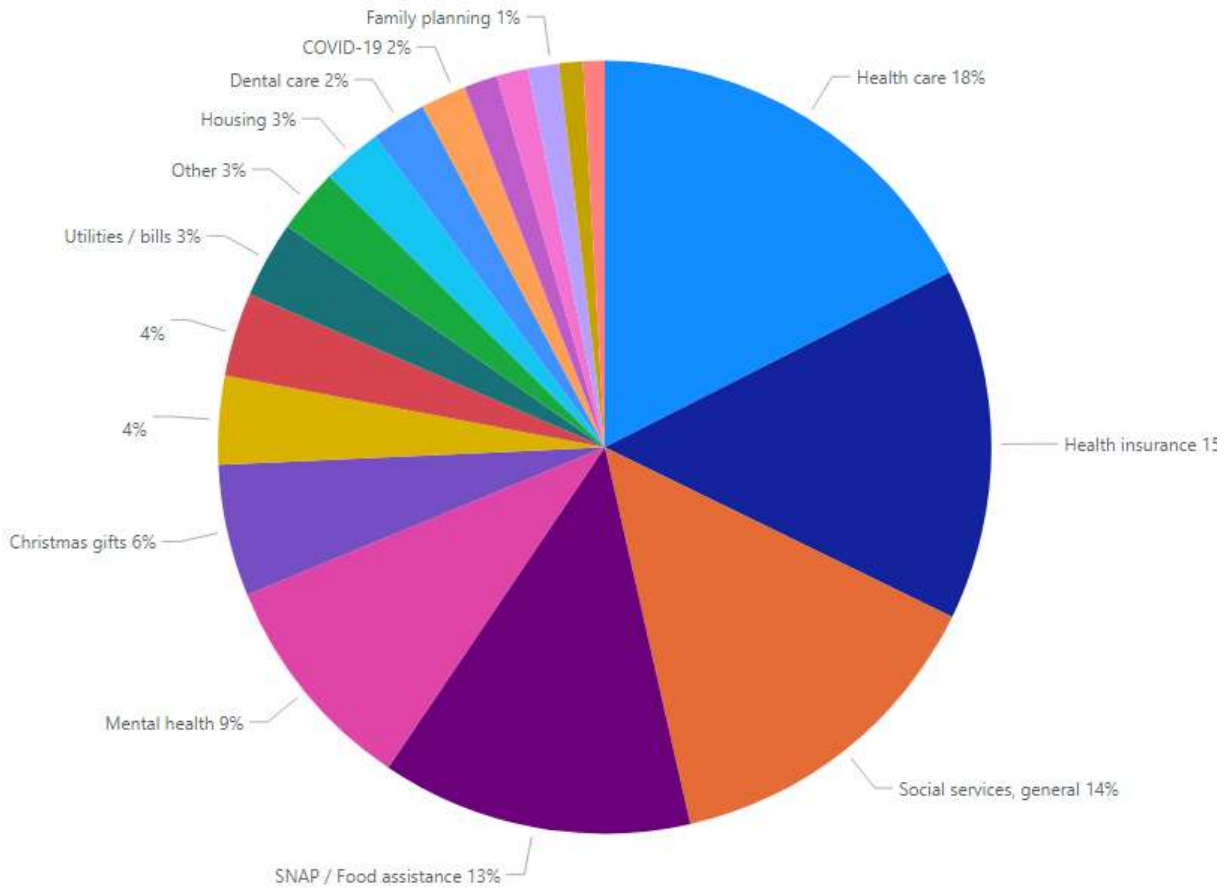


Figure 1. Categories of Information requested by community callers

Promoting Clinical Innovations and Community Health

To bridge the gap between lack of equitable healthcare access and needs of our community, our center offers educational programs to address mental health challenges, lifestyle change and physical activity with primary and secondary prevention and treatment programs. Our community health programs are informed by evidence and community participation and support translational research delivered in the community.

Community Mental Health

Support groups

TESTIMONIOS

Testimonios is a mental health support group open to uninsured Latino adults in Baltimore experiencing stress or psychosomatic symptoms due to stress. Weekly sessions are moderated by mental health expert with the goal of creating a safe space for Latino immigrants to share experiences and promote culturally appropriate approaches to stress reduction. These sessions provide stress relief and supports participants to recognize their symptoms of depression.

RADIANTE

Radiante is an educational program promoting culturally appropriate approaches to stress reduction, based on cognitive behavioral therapy (CBT). An instructor delivers the Radiante program online in Spanish through four live 1-hour sessions that include introduction to mindfulness, breathing exercises, types of communications and management of emotions. Sessions take place during a weekday. To reach different audiences two of the cycles were delivered in the evening hours and two of the cycles were delivered in the morning hours.

Key Outcomes

170 registrants
in Testimonios

90 registrants
in Radiante

More than 50
group sessions

Testimonios has about 170 uninsured Latino adults in Baltimore City and County.

- 46 sessions
- Average attendance 11 women and 4 men per session

Radiante had 90 registered participants

- 4 cycles (16 sessions)
- Average attendance of 14 participants per session

Perceived stress, anxiety and depression decreased at course completion. Participants reported an increased feeling of calmness, relaxation, and self-acceptance. Using the Perceived Stress Scale (PSS) a self-administered instrument used pre and post program showed that the groups started with high levels of stress (ranging 24-27) and reported an increased feeling of calmness, relaxation, and self-acceptance (ranging 10-15) measured by PSS.

Educational campaigns

“FORTALECE TU BIENESTAR” ANTI-STIGMA CAMPAIGN



Fortalece tu bienestar

A Centro SOL survey conducted in 2019 revealed that some Latinos in Baltimore thought that:

- × *“depression was a sign of a personal weakness”* and half of the respondents believed that *“people with depression can just snap out of the depression if they want to.”*
- × Seventy-five percent of respondents believed that people with depression *“will get better on their own without professional help”* or that *“people with depression were unpredictable and dangerous.”*
- × Others did see that depression was a real medical condition and even more believed that medical care including talking to a therapist or taking medications can help someone with depression. Some, however, would not tell anyone if they were experiencing depression or would not want to receive medical treatment because of fears of what other people, including family members, would think.

Fortalece tu bienestar (Strengthening your wellbeing) is an evidence-based JH Centro SOL public awareness educational campaign to improve knowledge about depression and its treatment to reduce stigma around depression, promote prevention and encourage care seeking among uninsured Latinos in Baltimore. The cultural and language appropriate campaign was launched in 2021.

Dissemination Components

The campaign is distributed primarily online through social media posts, stories, advertisements, and blogs. All channels and methods direct viewers to the campaign website: www.fortalecebaltimore.org that was launched in June 2021.

Depression is an illness not a weakness

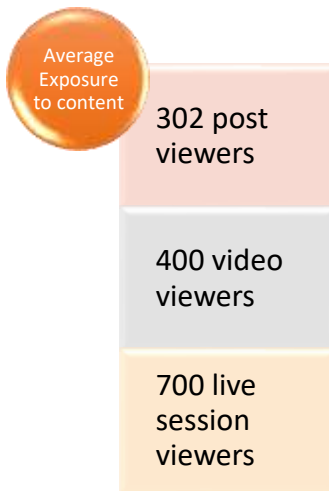
We have used several types of exposure on the campaign (campaign website, social media) and we focus on the clarity and specificity of the messages. Social media activities for the campaign go through Centro SOL social media platforms to capitalize on organizational trust and reach in the local Latinx community.

See the person, not the condition

Printed dissemination – we have collaborated with trusted Spanish-language outlets that collaborated with our team in disseminating information about mental health. Print materials featuring our key campaign messages were posted in beauty salons, laundromats, food stores, schools and churches we distributed in the Latino community during the local events. We also printed swag like tote bags and T-shirts featuring our logo and the campaign name.

Depression can affect anyone

Key outcomes



Key performance indicator data for the campaign were extracted from Facebook Insights. Exposure, reach, and engagement are three key performance indicators commonly used in understanding social media in the context of health promotion.

Twenty-three new newspaper articles written by a multidisciplinary group of mental health experts were published in Mundo Latino newspaper and our **Centro SOL website blog** and promoted on both social media platforms Facebook and Instagram each month. The articles targeted different groups of Latinos: young moms (post-partum depression), men (depression and use of alcohol), caregivers, and the LGBTQ community.

Each article explored different aspects of depression, for example; pain and depression, sexuality, intimacy and depression.

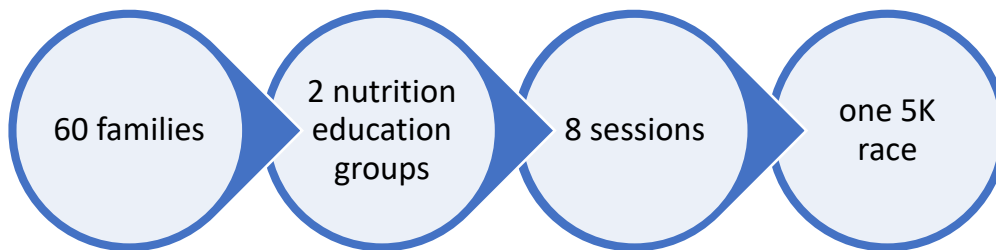
5,000 printed copies of newspaper articles reaching: Baltimore City, Baltimore County, Anne Arundel County, Howard County, Carroll County, Montgomery County and Prince George's County. In Baltimore City printed copies are distributed in Southeast and Southwest Baltimore and in Baltimore County distribution takes place in Halethorpe, Essex and Middle River.



Community Physical Health

Embajadores de Salud

Embajadores de Salud is a health education program that uses the Your Heart, Your Life curriculum, an NIH culturally appropriate manual to promote healthy lifestyles and to prevent heart disease. All levels are welcome in the program, which meets participants' needs and restrictions through participant-centered sessions that include presentations, workshops, and physical activities. This year one of the long-term participants who started in 2015 has transitioned to become the community health worker and lead physical health facilitator. In addition, we partnered with the University of Maryland Expanded Food and Nutrition Education Program to host two nutrition education sessions.



Advocating for Diversifying the Workforce and Education

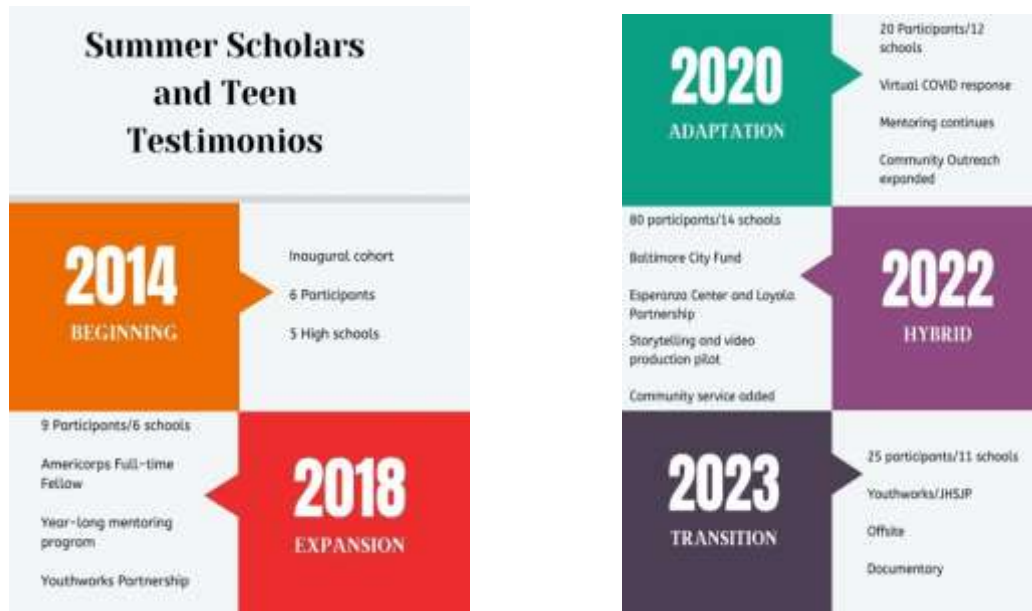
Centro SOL advocates to ensure equitable access to educational and workforce development opportunities not only for Latino youth, but also for college and graduate school students as well as community members and colleagues in the professional community.

Youth Programs

The Centro Sol Summer Scholars 2023 program offered a five-week bilingual experience for high school students to explore the fields of medicine, research, and healthcare. As part of the summer program, students engaged in research projects focused on addressing public health issues within the community.

How it all started

The Centro SOL Summer Scholars Program was launched in 2014 to provide bilingual students with insight into careers in medicine, research, and healthcare. The program aims to equip students with the information they need to make informed academic and career choices.



In 2023, our program received 35 applications, 25 were accepted, including 7 returning students. Two interns who are Latinos and first-generation college students were counted as part of the cohort, and their role was to be instructors or assistant coordinators. The interns had a leadership role, assisting with daily operations oversight and supporting participants’ engagement. Participants and interns were guided by a program manager who monitored and lead all program goals, activities, schedules, parent engagement, and administrative support.

The future of healthcare starts with youth engagement today

Our summer curriculum is designed to enhance academic proficiency and provide youth with the knowledge and skills they need to make informed decisions about their education and career. The following key areas were the focus of the program this year:

- College Readiness
- Healthcare
- Research
- Community Outreach

In addition, across all core areas, the program includes two key learning aspects for successful career development:

- Wellbeing and Soft skills
- Professionalism

Hands-on public health through videos

To practice their skills and get exposure to careers in the health field, participants in the program are coached to identify public health issues that they are concerned about and affect their community. In addition, they analyzed the impact of public policies on these matters and proposed solutions to improve the wellness of the community.

Youth identified the following issues:



Figure 2. Topics elaborated by youth during the summer program

In addition to learning about the scientific method including literature review, students received training on documentary production from script development, camera use, and film direction. They created, in collaboration with a videographer, a short documentary related to the public health issues they selected. The purpose of this short documentary was to show through a visual how these public health issues can affect the daily life of individuals, and advocate for solutions that would be appropriate for them and their communities.

Sponsors and Partner Venues

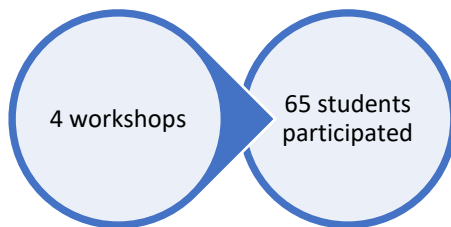
- Summer Founding Collaborative
- Bloomberg Philanthropies
- France Merrick Foundation
- Johns Hopkins Medicine
- Youthworks
- Enoch Pratt Free Library
- Research Studies Founded by the NIH
- Lady of Pompei Church
- Johns Hopkins Bayview Medical Center
- Johns Hopkins Bayview Medical Center Geriatrics and Pediatrics Department
- Johns Hopkins School of Medicine, School of Public Health
- Baltimore Museum of Art



Youth with members from MIMA and the Maryland Legislative Latino Caucus

College and Graduate Education Programs

In an effort to build the next generation of culturally informed healthcare professionals, Centro SOL partners with student groups at Johns Hopkins and local organizations and educational institutions to facilitate workshops about the work in progress at Centro SOL.



Our team presented workshops and hosted students from the various organizations and universities. Students attended a one-hour workshop about the challenges faced by community members and discussed current and future solutions from a socioecological perspective.

More than 40 volunteers, many of them undergraduate or graduate students, **contributed more than 450 hours** of their time supporting Centro SOL’s community programs and events. In addition, participants in our programs become ambassadors or community health workers taking lead roles in the programs we offer.

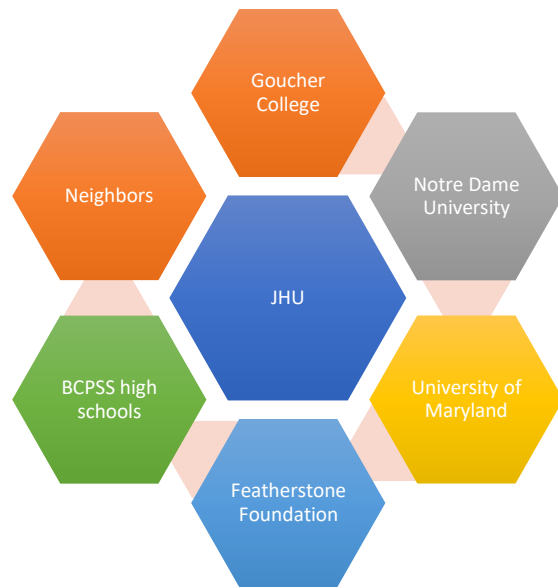


Figure 3. Where do Volunteers come from?

Conferences

In 2023, our team was present in community and scientific national and international dissemination events.

- At the annual American Association of Suicidology conference in **Oregon**, Centro SOL’s Executive Director presented about suicide prevention with the Latino community and advancing cultural and racial equity in suicide prevention.
- Our team was invited to the National Hispanic Medical Association Annual Conference in **Georgia** to discuss mental health innovations to reduce disparities in access to healthcare.
- During the Baltimore Immigration Summit in **Maryland** our team made two presentations addressing issues on equity and social justice pertaining to healthcare access for Latino populations.
- At the Rite Aid Healthy Futures Strengthening Cities Summit in **Pennsylvania**, we got connected with organizations across the US doing work on addressing food insecurity and promoting healthy lifestyles. Our team was one of the few groups represented that works with Latinos.
- During the International Association of Suicide Research / American Foundation of Suicide Prevention, international conference in Barcelona (**Spain**), our team presented innovative approaches to prevention and detection of suicide thoughts and behaviors among Latinx youth.
- The National Association of Mental Illness Annual conference in **Maryland** provided the space for our team to present two of our projects addressing mental health: depression treatment for adult immigrants and innovative approaches to suicide prevention in primary-care- and school-based settings.
- Our workshop at the American Association of Case Management Maryland Chapter in **Maryland** covered cultural humility, social services need for immigrants and Latino communities in Maryland and best practices to provide compassionate support.

Promoting Innovative Research Practices Based on Community Participation

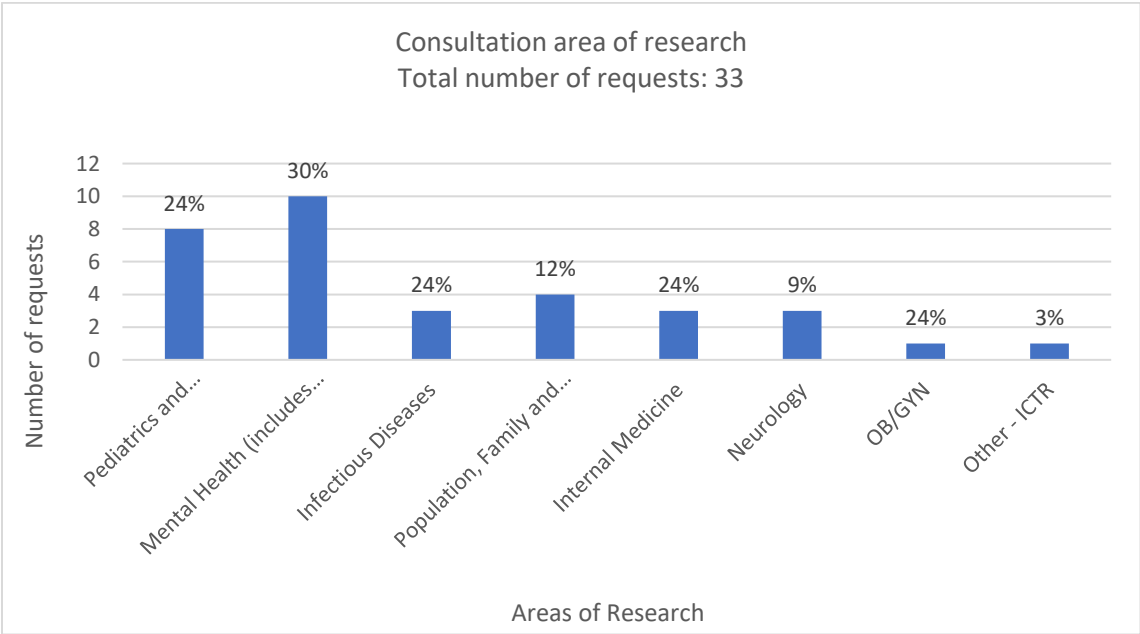
Cultural Awareness in Research: Research Consultation Services

We offer a variety of research services to support researchers in conducting high quality health research inclusive of Latino populations, especially those with limited English proficiency (LEP). These services are provided by the Centro SOL team and through consultation with our community advisory boards. Our services include study planning, material review, recruitment strategies, and study dissemination with our networks.

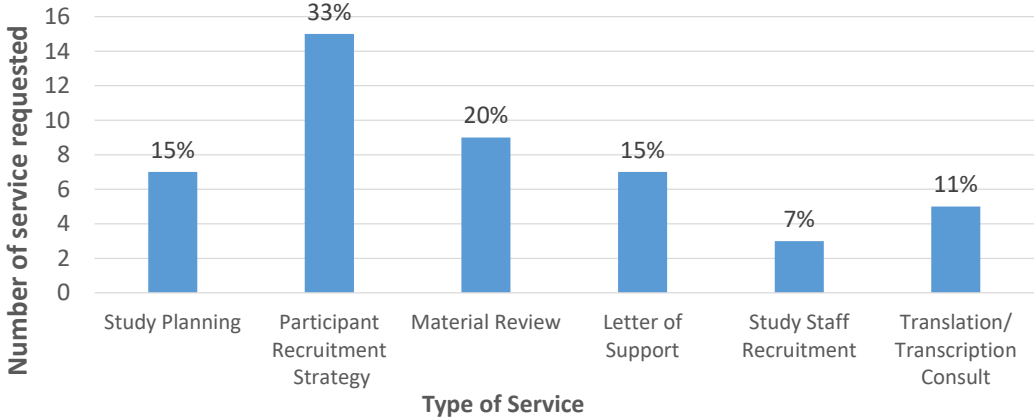
In 2023, we built capacity for these services by establishing a Research Core faculty lead of Tania Maria Caballero, MD, MHS, who is an Assistant Professor of Pediatrics within the School of Medicine. We also redesigned both of our community advisory boards to include new members. Looking ahead to 2024, will start systematically collecting data about our research services through a post-consultation meeting feedback survey we developed this year.

Key Outcomes

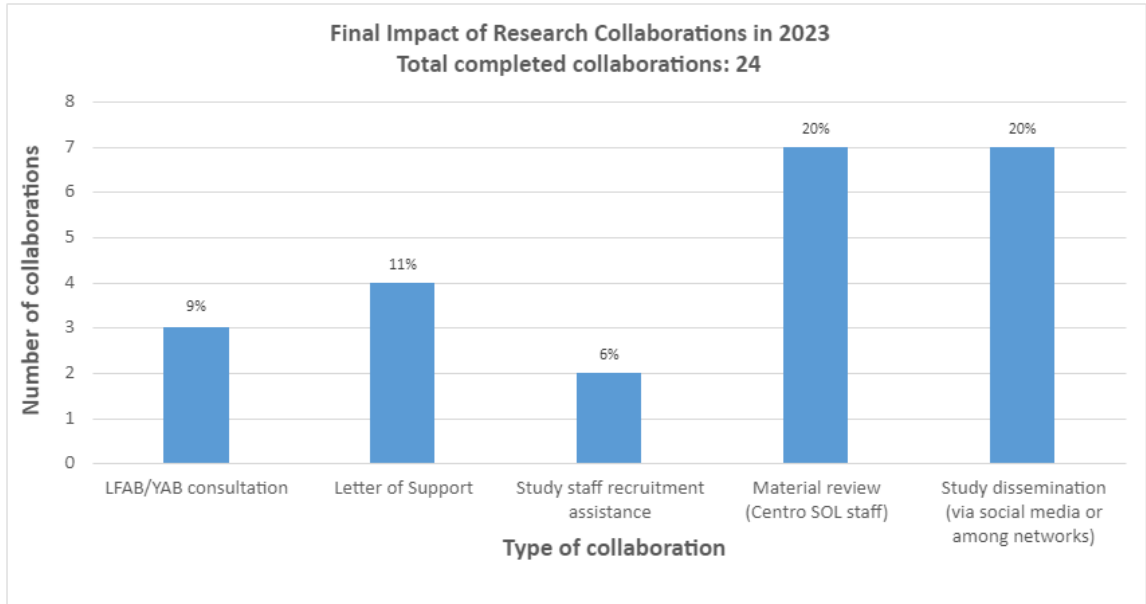
We received 33 requests in 2023, with over half of them in the areas of pediatrics or mental health and over half of requested services falling into the categories of Participant Recruitment Strategy or Materials Review, as shown in the following two charts.



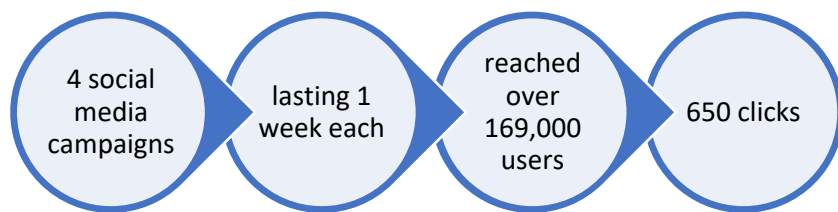
Types of Research Services Requested
(multiple services selected per individual request form)
Total requests: 46



As shown in the charts below, **of the 33 Research Service Request forms we received in 2023, 24 (73%) resulted in further collaboration**, with Material Review and Study Dissemination, including via social media, comprising the primary types of further collaboration. Out of five social media dissemination requests, four were approved by the platform and posted to run on Facebook, Facebook Messenger and Instagram for one week each, in the areas of youth mental health, reproductive health, and intimate partner violence prevention.



Total reach across all four approved social media campaigns:



Stories of Success

Youth Advisory Board (YAB) members participated in and helped with recruitment efforts for a focus group to provide feedback on a mobile app providing information about sexual and reproductive health and care. Latino Family Advisory Board (LFAB) members reviewed study measures for a research study evaluating the effects of a parenting program on infant and toddler health outcomes. The LFAB also reviewed educational materials for a study testing a web-based audio communication tool to be used by

families being discharged from the NICU. These are just a few examples from Centro SOL's research collaborations in 2023.

In addition, in 2023, Centro SOL supported the Recruitment Innovation Unit and other projects under the JH Institute for Clinical and Translational Research to promote diversity of clinical trials. Community Engagement Alliance Against COVID-19 Disparities (CEAL), Building Trust in Science and Developing a learning COMMunity to increase eNgagemeNt and Enrollment in cardiovascular Clinical Trials (CONNECT) are three of the major projects we supported this year to bring representation of Latinos in research by:

- including recruiting participants
- facilitating focus groups
- reviewing the study materials to be culturally relevant for the Latino populations

Child Health

Childhood Obesity Management: Community Active and Healthy Families (AHF)

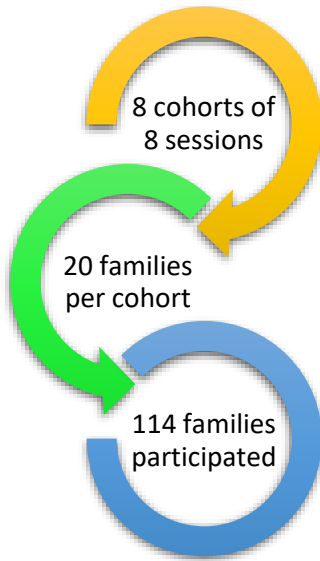
Active and Healthy Families (AHF) is a behavioral-theory based, culturally tailored, Spanish-language weight management program for overweight/obese Latino children and their families. AHF retains key components of the original intervention based in clinic and responds to feedback from Latino immigrant families that delivery in a community setting is preferable to a clinic due to easier access to and greater trust and familiarity with community organizations.



The program consists of 8 educational sessions in Spanish that last 2 hours and take place in a community space. During educational sessions there is teaching time, time to prepare healthy food and time when the parent and/or the child are physically active. As part of the program, households receive 4 coaching phone calls from one of the program facilitators to talk about what they learned during the educational sessions and what changes households may be making.

We built capacity in this program in 2023 by cross training additional medical facilitators and encouraged graduated AHF families to continue improving their physical health through participating in Centro SOL's [Embajadores](#) program.

Key Outcomes



The average age of participating children was 9.7 years old

Families attended a mean of 4.5/8 sessions

Stories of Success

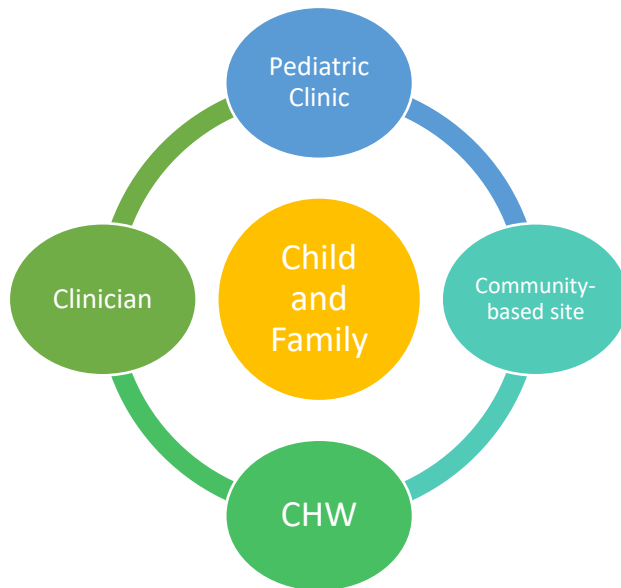


Parents and children making guacamole together during an AHF session

○ Parent participant: *“Bueno, ha sido un poco difícil, pero lo hemos logrado. Como le dije a <Name> casi el arroz no lo puedo dejar, pero lo que es el jugo—como nosotros tenemos costumbre de cada que vamos a cenar, o siempre, nosotros siempre es un jugo, ahí en la mesa; o es soda, o es esas cosas. Y fue un poquito difícil, pero lo cambiamos por agua.”* (Well, it’s been a little difficult, but we are improving. As my child said, we aren’t able to stop eating rice but with the juice – we were used to having juice every time we ate dinner – always it was juice on the table or soda or drinks like that. It was a little difficult but we changed to water).

○ What did you like most about the program?

Parent participant: *“Me gusto, como le dije, ser un poco activa. Saber, cuando se va a la marqueta, agarrar cosas— porque uno va por ir y uno agarra las cosas; nunca chequeamos las etiquetas o las cosas que están por atrás.”* (I like to be a little active. To know that when I go to the market to grab things -- we never looked at the labels before [the program]).



○ Pediatric practice referring families: Yard 56 clinic

○ Community-based sites: Our Lady of Pompei Church, Sacred Heart of Jesus Church, Salem Methodist Church, Southeast Anchor Enoch Pratt Library and Mora Crossman Recreation Center

Opportunities for collaborations: our team will be exploring partnership to expand this work with support from federal grants and collaborations with additional pediatric practices where there is a high prevalence of overweight and obesity among underinsured families. Some potential partnership includes KIPP School in West Baltimore where JHU Medical Students are working to implement a similar program for families at the school.

Adolescent Mental Health

Partnering with Parents of Adolescent Latinos on Mental Health Assistance (PALOMA)

PALOMA is a clinic-based intervention with the goal of integrating community health workers (CHW's) into suicidal ideation/behavior screening and safety planning for Latinx youth and their families. The program will be piloted in pediatric primary care practices in Baltimore City and will focus on Spanish-speaking families.

If a child's primary care doctor recognizes them as having suicidal ideation or behavior, the doctor will refer them to this intervention. If the parent(s) agree to participate, they will be connected with a Spanish-speaking CHW trained in mental health support whose role is to assist parent(s) in navigating the mental health services system in order to support their child. The CHW will hold several phone sessions with the parents focused on problem solving and resource coordination, mental health education, safety planning and means restriction and parent support and connection. The intervention continues for 2 months after which parents will "graduate" and hopefully feel empowered to continue supporting their child using the skills they have learned through this program.

We built capacity in this program in 2023 by cross training several community health workers in mental health support skills to ensure we have back up staff and to ensure staff have support given the sensitive

and difficult topic they are addressing within the community. We also plan to submit an R01 grant application in February 2024.

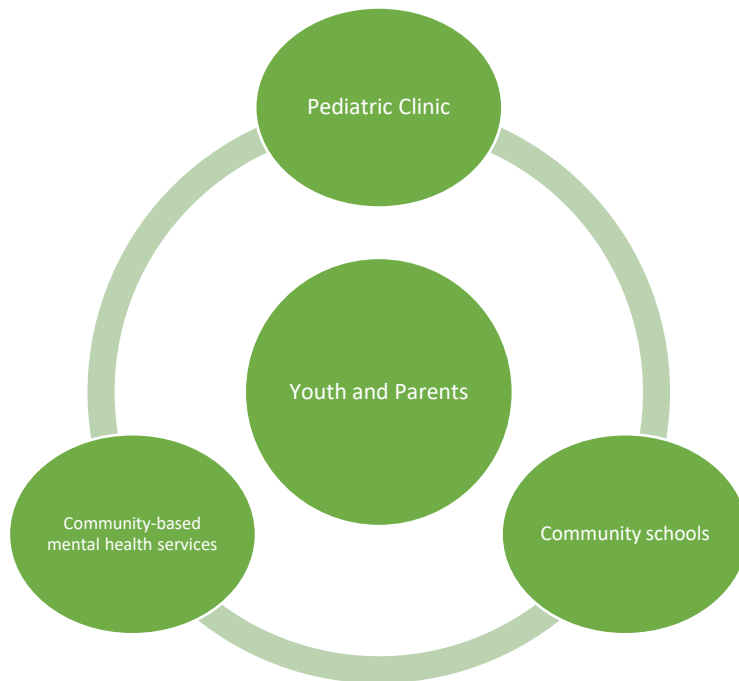
Key Outcomes and Challenges

Although a National Institute of Mental Health (NIMH) Grant (R34) has provided the funding to establish a goal of recruiting and completing the PALMOA intervention with 125 parent / youth dyads by the end of 2024, we must overcome not only the challenge of hiring and retaining bilingual CHW's, but also the challenge to implementation presented by the myriad barriers to mental health care that Latinx families face in the United States.

Structural barriers to care include high levels of uninsurance, high levels of poverty, decreased healthcare utilization in the setting of chilling effects of immigration policies and lower likelihood of having a medical home, particularly among limited English proficient (LEP) families. Latinx youth have higher levels of uninsurance than White and Black youth, even after gains in coverage post-ACA implementation. One reason for this disparity is that undocumented immigrants and permanent residents in the country less than 5 years are not eligible for Medicaid or marketplace subsidies. Yet in mixed status Latinx families, most typically in which a parent is undocumented and a child is a U.S. citizen, the insurance-eligible citizen children are particularly likely not to enroll in insurance.

Sociocultural barriers to care include self- and public-stigma against people with mental illness, low mental health literacy and mistrust of healthcare providers and systems. These barriers highlight the importance of assisting Latinx families in accessing information about mental health care, identifying available care and navigating healthcare systems.

Partnerships and Relationships Building



Key partners are the Yard 56 clinic, community schools, and mental health services in the community, and we have opportunities for collaboration also with the EBMC, Harriett Lane, Esperanza Center, Healthcare for the Homeless, Choptank, and Nemours (Delaware.)

Adult Mental Health

Depression Treatment Intervention - Strong Minds-Mentes Fuertes

Strong Minds is an evidence-based, community-based psychoeducational intervention adapted from Cognitive Behavioral Therapy (CBT) for adults with moderate depression. The intervention is designed to (1) increase knowledge about mental health disorders, and their management and treatment, (2) provide strategies for behavioral activation and thought regulation, self-care, assertiveness and communication with healthcare providers, and (3) help the patient to develop a personalized self-care plan. The program was designed to be delivered in person but was delivered remotely due to the COVID-19 pandemic.

We built capacity in this program in 2023 by improving the usability of the materials for training CHW's who come from the community and do not necessarily have a background in mental health so that they can feel confident in delivering the program. We invited participants who finished the program to join Centro SOL's other mental health support groups, such as Testimonios and Radiante.

Key Outcomes

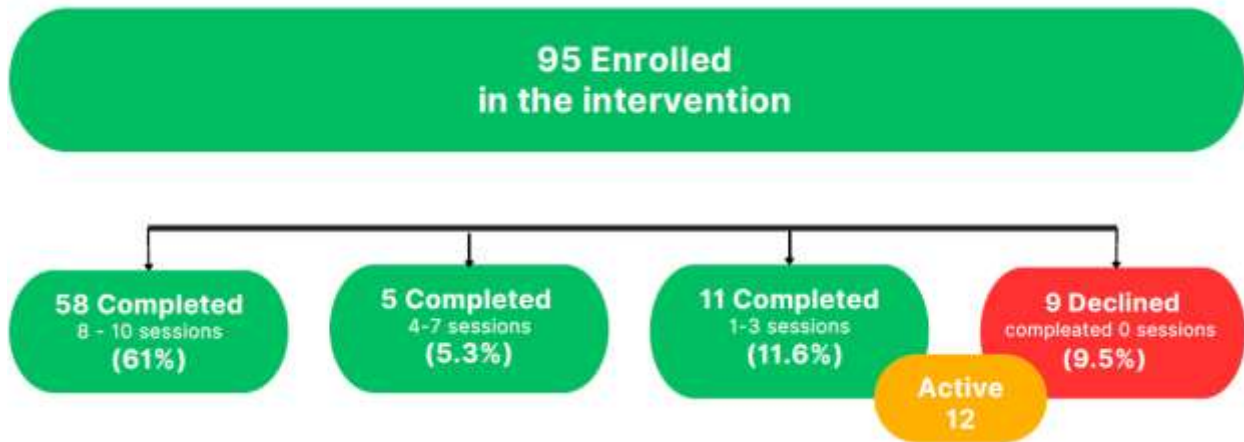
Strong minds is a 10-session individual intervention treatment for adult patients with mild-moderate depression.

- Of 193 who were referred to the program 83.6% were eligible to participate in the program. 16.4% were unable to contact, declined to be screened or excluded due to ineligibility.

Sex of referred participants



- From them 95 were enrolled into the program. 61% of those enrolled into the program completed all the sessions. The project has 12 active participants at any given month.
- For all the participants referred in 2023, we observed that depressive symptoms decreased. There were some fluctuations presumably due to other social factors that may improve or exacerbate depressive symptoms.



Participating in Strong Minds intervention influenced participants in various ways.

“I thought that it was only me that was experiencing this situation, that my mind was not strong, then I understood that no, little by little in the sections I understood that it is not like that, that it is an illness and that it is not my fault”. [female, 36]

Participants identified many aspects of the program that were helpful for them, especially the relationship with the Community Health Worker and the support they received from them. They appreciated the flexible hours of the program, and the CHW response.

“She (CHW) let me know when we would start, she asked me my schedule, when we could talk, what time was the best time to talk. Sometimes I used to send her a message a few minutes before, asking her if she could wait a few minutes or change the time, and she was very understanding”. [female,33]

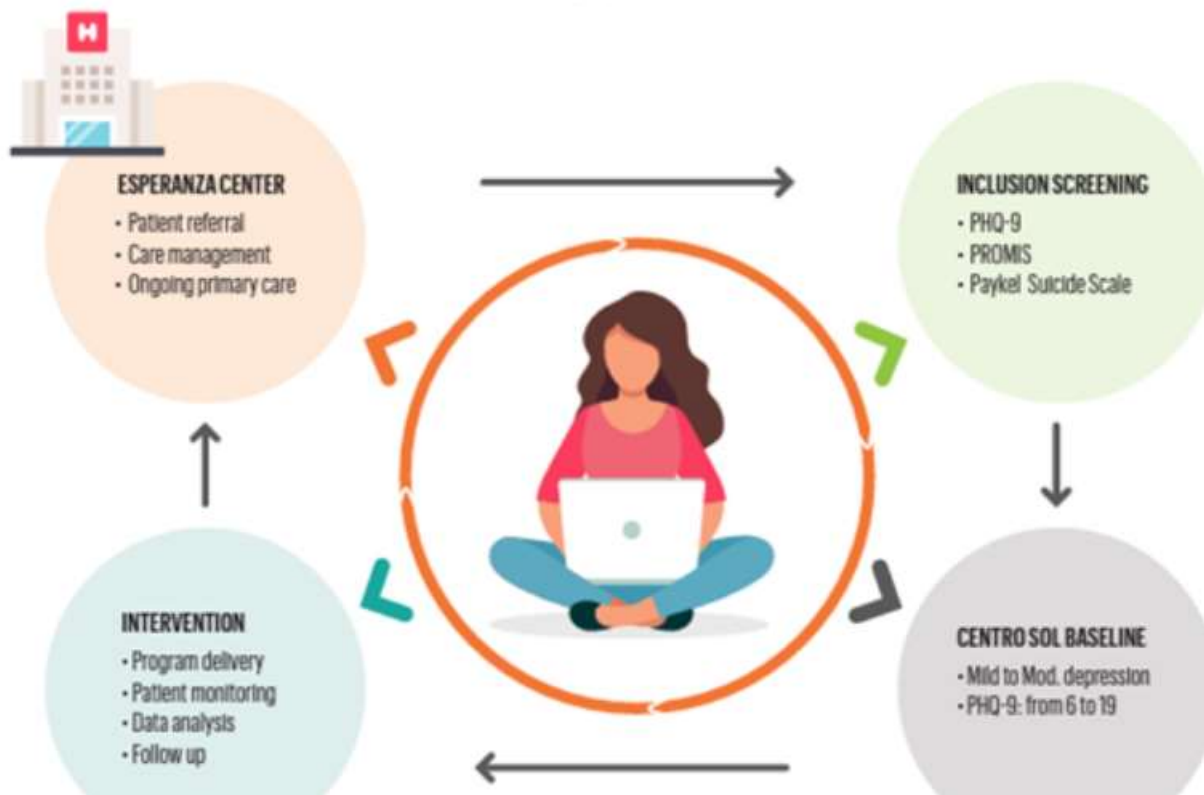
For a lot of participants, the CHW was the only person that they were able to talk to about their feelings and experiences.

“What has helped me is to be able to express myself, to express all my complications, my conflicts, and my worries. Sometimes you don't have a person with whom you can dedicate that time, that hour or half an hour to share what you feel”. [female,41]

They felt that they were not alone, and the support was available, as one participant said, “you know that you are not alone, if you need help there are people who can help you”.

Partnerships and Relationships Building

- Esperanza Center - a community-based clinic for referrals and primary care of participants in the intervention
- In 2023, we expanded the referrals to two new community-based clinics: OB/GYN at Johns Hopkins Bayview Medical Center and East Baltimore Medical Center
- Massachusetts General Hospital – a team that developed an evidence-based peer-based intervention to treat depression based on cognitive behavioral therapy targeting Spanish-speaking patients



Maternal Mental Health: Mothers & Babies

Mothers and Babies (MB) is an evidence-based intervention designed to teach mood regulation skills to women at risk for post-partum depression (PPD). Originally developed for Latina women, the United States Preventive Services Task Force recognized MB as one of the two most effective counseling interventions for PPD prevention. MB is built on cognitive behavioral therapy (CBT) and attachment theory with content specific to the perinatal period. Sessions cover three core domains: 1. Engaging in pleasant activities 2. Identifying/reframing unhelpful thought patterns 3. Building one's social support network.

Key Outcomes

During our **Mothers and Babies** pilot study our team directly delivered Mothers and Babies (MB) to 62 mothers, 4 fully virtual groups, from 3 Judy Centers in Baltimore City. Judy Centers are located at Title 1 schools across the state and provide family-centered childcare, school-readiness education and assessment for children 0-5 years.

We partnered with the MB team at George Washington to initially train 25 people at the start of the pilot and subsequently with the MB team at Northwestern University to train staff from 47 different Judy Centers.

The average maternal age of the pilot participants was 31.4 years, 94% had limited English proficiency, and 59% were either pregnant or had a child under the age of 1 year. Participants came from 7 different countries. At enrollment, 86% of participants reported concerns about food insecurity, but only 33% were enrolled in SNAP.

Participants attended approximately 70% of scheduled sessions. Satisfaction polls completed after each session indicated excellent session understanding, usefulness, and enjoyment of the material.

Forty-four of the 49 individuals who completed both pre-and post-intervention surveys showed a reduction in depressive symptoms from pre- to post-assessment as measured by the PHQ-9.

Participants valued the content delivered in the course:

“Before if I felt tired and had to play with the kids, I came and tried to play with them. Whether I was tired or angry, I did it. Now, with the program, I said to myself ‘No, that mindset has to change.’ If I’m tired, I lie down for 10-15 minutes so my mind relaxes and then I can go be in a better mood to play with my kids. I learned that during the program.”

“With the group I learned that everything has a balance. I have to have my own space. I can do pleasant activities with the kids. Even if it’s just a little bit in the evening. I know I needed to do that before the group, but I hadn’t focused on doing it.”

Partnerships and Relationship Building



Commodore John Rodgers, John Ruhrah, and Lakeland Elementary schools – a partnership with the Judy Centers to deliver a cognitive-behavioral intervention to mothers at risk of depression of youth children and babies

Sacred Heart Church – a faith-based partnership to work with immigrant parents and newly arrived youth who were separated and to deliver a suicide prevention educational session

Gallery Church - a faith-based partnership to continue delivering a support group to prevent the consequences of stress among immigrant adults

Building Collaboration and Promoting Equitable Systems Change

Advocacy Workgroup

Established in 2015, the purpose of the Advocacy Workgroup is to create a partnership between leaders in healthcare administration, public health, and health policy with providers working with the Latino community to identify challenges that impact Latino health and make health policy recommendations to improve health equity for Latinos at the local, state, and national level.

The highlights of this year's efforts include:

- Our team has joined the Johns Hopkins Medicine Latinx Community Diversity Equity and Inclusion Strategy Workgroup to inform objectives supporting quality access to healthcare for Latino patients in the Johns Hopkins Medicine surrounding communities.
- We partnered with the Maryland Legislative Latino Caucus and CASA to identify legislative priorities pertaining to supporting equitable access to healthcare for all Marylanders including Latinos. Our team members provided testimony to support proposed policies such as the Healthcare Access for All.
- We collaborated with the Johns Hopkins Public Safety Leadership to inform and to comment on the Policies to promote best practices for equitable, culturally appropriate, and inclusive of immigrant-origin Latino patients.

The Advocacy Workgroup is a multidisciplinary space for graduate students to connect with legislators and advocates to achieve our mission. Students work together with the workgroup leadership to develop policy recommendations, such as the report entitled "Speaking the Language: The Right to Interpretation & Translation Services for Children and Adolescents with Mental Health Needs in Maryland" that provided recommendations for language access for mental healthcare of children and adolescents. The report is available on [our website](https://jhcentrosol.org/health-policy/report-speaking-the-language/) <https://jhcentrosol.org/health-policy/report-speaking-the-language/>, and was developed by our workgroup with the critical support of our graduate student and the Public Justice Center.

The Workgroup is co-chaired by Dr. Sarah Polk, Associate Professor of Pediatrics and Dr. Kathleen Page, Associate Professor of Infectious Disease.

The workgroup is open to new members and more information can be found on our website at <https://jhcentrosol.org/expertise/advocacy/>

Latino Family Advisory Board (LFAB)

Our Latino Family Advisory Board (LFAB), El Consejo de Familias Latinas, is composed of Spanish speaking families from the community who are dedicated to helping promote and create better health services to meet Latino families' needs. Our meetings provide an opportunity for Johns Hopkins physicians, researchers, and staff to meet with families that receive care from Johns Hopkins Bayview's pediatric primary care providers and talk about the challenges Latinos face in receiving health care. In addition to providing research consultations for materials review and instrument design, LFAB members also make important contributions to clinical quality improvement at Johns Hopkins Bayview and throughout Johns Hopkins Medicine. This year, as we celebrated our 10th year of LFAB operations, LFAB members led an initiative to establish by-laws and governance and membership sub-committees for the board for the first time.

The LFAB is co-chaired by Dr. Sarah Polk, Associate Professor of Pediatrics, and Isabel Abaunza, Case Manager at Hopkins Health Care Connection. Leo Valadez is the LFAB coordinator.

More information about the Advisory Board can be found on our website at <https://jhcentrosol.org/who-we-are/our-boards/latino-family-advisory-board/>

Youth Advisory Board (YAB)

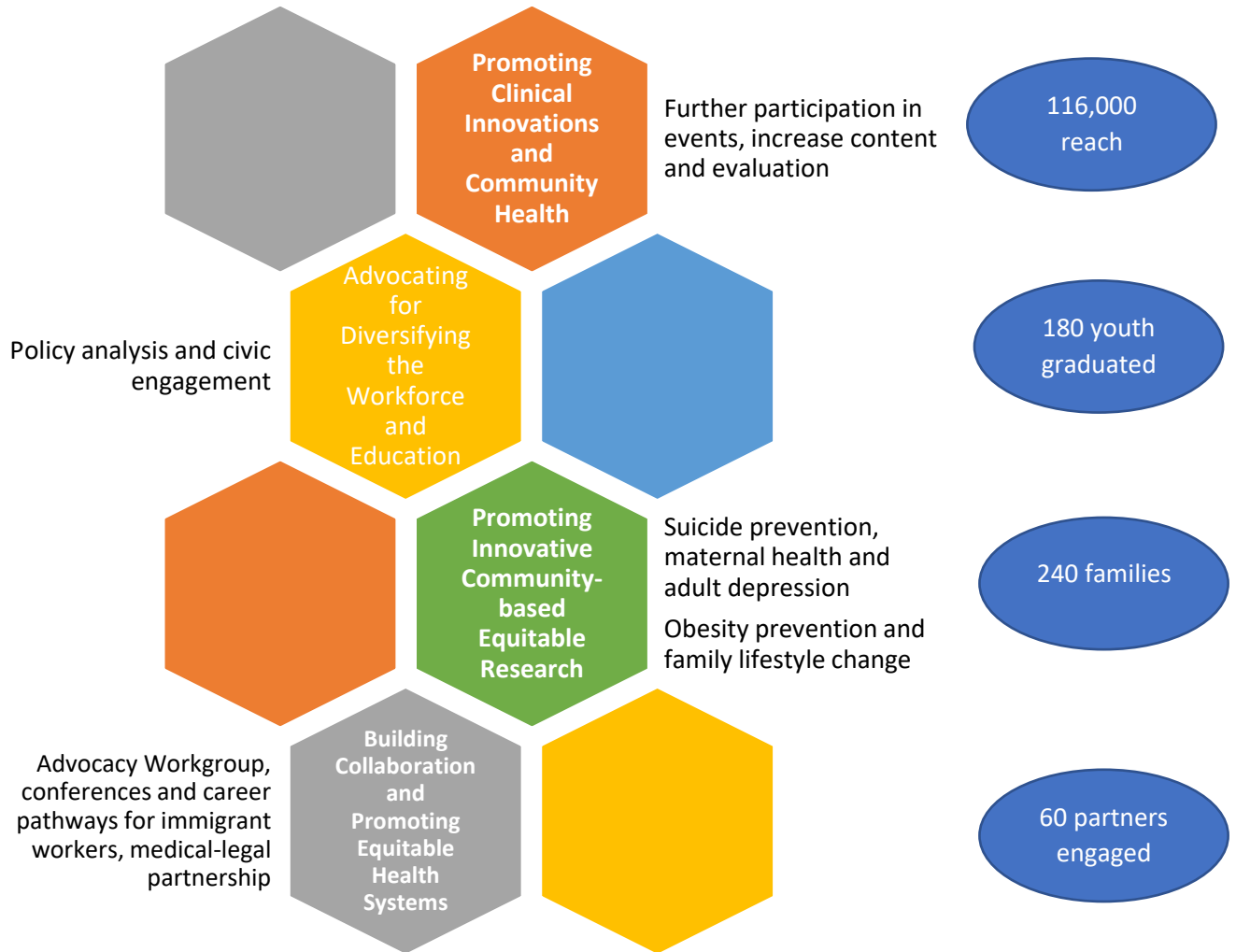
The purpose of the Youth Advisory Board (YAB) is to engage Latinx youth in community-based research and advocacy work. The YAB aims to provide a platform for Latinx youth to explore and understand how their ethnicity, immigration history, and resilience to immigration-related stress shape their health and social environment. The YAB was established in 2018 and relaunched in 2023 with a new cohort of participants and student coordinators.

The YAB is co-chaired by Dr. Keith Martin, Assistant Professor and Dr. Sarah Polk, Associate Professor at the Department of Pediatrics. Undergraduate students at Johns Hopkins University are the YAB coordinators.

More information about the Advisory Board can be found on our website at <https://jhcentrosol.org/who-we-are/our-boards/>

Vision for the Future

Our Mission is to Promote Equity in Health and Opportunity for Latinos in partnership with Latino serving organizations in and out Johns Hopkins. In the near future, we are committed to further our work in the core components to achieve our mission.



Appendix / Reference

Awards

Omaira Mejía - Johns Hopkins Medicine Hispanic Heritage Month Achievers Award

Josefa Nuñez - Johns Hopkins Medicine Hispanic Heritage Month Achievers Award

Kiara Alvarez, PhD, Professor of American Health

Publications

Guerrero Vazquez, M., Hui Joo, J, Grieb, S.M.D., Maksym, M., Suarez, C., Torres, V., ... Polk, S. (2023). Community health workers deliver CBT to uninsured Latinx in Baltimore: Evaluation and Lessons Learned in a Pilot Program. *Progress in Community Health Partnerships: Research, Education, and Action*. Pre-print <https://preprint.press.jhu.edu/pchp/preprints/community-health-workers-deliver-cbt-uninsured-latinx-baltimore-evaluation-and-lessons>

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The Johns Hopkins Institute for Clinical and Translational Research

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