THE THINGS THAT MAKE MEN CRY

DATE & TIME: March 19, 2020 9:00 AM – 4:00 PM

All registration is completed on the Learning Net prior to the training. Sign-in begins 30 minutes prior to the training time. All participants must arrive during the sign-in period. Late arrivals will not be admitted.

PLACE: Rancho Los Amigos
7601 E. Imperial Highway
Outpatient Building 1st fl., Rm 1088 (Auditorium)
Downey Ca, 90241

PARKING: Free parking on site: Participants can park in the parking structure directly across from the training building.

African American men are crying on the inside for a variety of reasons, causing them to suffer from depression, anxiety, and other mental illnesses in silence. The inability for some men to express their feelings with ease has also contributed to poor interpersonal relationships with those they love and care about the most, their spouses/partners and children. This workshop is based on the book by Dr. Gloria Morrow, “The Things That Make Men Cry.” Participants will be introduced to some of the factors that contribute to men’s silent and sometimes open tears, based on in depth interviews with 13 primarily African American men between the ages of 18 and 86. Participants will be introduced to the cultural and emotional world of African American men, and learn strategies to assess, treat, educate and empower them in a culturally responsive manner.

TARGET AUDIENCE: Licensed DMH Clinicians

OBJECTIVES: As a result of attending this training, participants should be able to:

1. Describe what constitutes manhood.
2. Identify mental health disparities that exist for African American males.
3. Discuss the major factors that contribute to African American male help seeking behaviors.
4. Identify the cultural world of the African American males they serve.
5. Identify some of the issues that impact African American men, and the variety of ways (both positive and negative) they are coping with these issues.
6. Discuss the psychological impact of past trauma, divorce and separation from children, absent fathers, and societal issues (i.e., racism) on African American men.

CONDUCTED BY: Gloria Morrow, Ph.D

COORDINATED BY: Lucious Wilson, MA, MPA Training Coordinator
ltwilson@dmh.lacounty.gov

DEADLINE: When maximum capacity is reached

CONTINUING EDUCATION: 6 CEU hours for BBS, BRN, CCAPP-EI 
6 CEU hours for psychologists

COST: NONE

DMH Employees register at: http://learningnet.lacounty.gov
Contract Providers complete attached training application
**Instructions**

Each individual must complete a separate application form for each training he/she wishes to attend. Please complete the application in full. Applications will not be processed with incomplete or inaccurate information. Notification of registration confirmation for a training will be provided by the training coordinator.

If this training is CGF funded, Jail MH staff may submit an application to attend this training and will be notified one week prior to the training date, if openings are available. Refer to the training bulletin for CGF designation.

For trainings, sign-in begins 30 minutes prior to the training time. All participants must arrive during the sign-in period. Unless otherwise specified, walk-in registrations will not be admitted. Late arrivals will not be permitted.

**Training Title:** **THE THINGS THAT MAKE MEN CRY**

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<th>Date(s)</th>
<th>March 19, 2020</th>
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**County Employee Number**

*non-county employees supply the last four digits of the SSN*

**Name (Print clearly or type)**

**Program, Service or Agency**

**Job Title**

**Address**

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**Telephone**

**Email (Print clearly or type)**

**License or Credential Number(s) (complete as many as applicable)**

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<td>Psychologist</td>
<td>RN</td>
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**Supervisor’s Approval (Applications will not be processed if not signed by supervisor)**

For processing, please return Application to:

**County of Los Angeles – Dept. of Mental Health**

**PSB – Workforce Education & Training (WET)**

695 S. Vermont Ave., 15th Floor

Los Angeles, CA 90005

Fax: (213) 252-8776

Phone (213) 251-6872

Email: Itwilson@dmh.lacounty.gov

**Print Supervisor Name**

**Supervisor’s Signature**

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