

Unstoppable: The Power of Healing & Growth Workshop
Participant Evaluation Summary | Final Report
Presented to the Los Angeles County Department of Mental Health
Health Matters Clinic | 2025

Overview

Unstoppable: The Power of Healing & Growth was a five-module, healing-centered workshop rooted in the lived experiences of Black communities impacted by disability. The program aimed to reduce stigma, increase awareness, and empower participants to explore the intersections of mental health, race, and disability in a culturally affirming space.

Using a retrospective post-then-pre evaluation method, this report assesses shifts in knowledge, attitudes, and confidence. The goal was to measure the workshop's impact on participants' mental health literacy, self-efficacy, and community readiness—while honoring the emotional and cultural context in which these conversations took place.

Key Findings

Mental Health Perception & Knowledge (Before vs. After)

- Comfort Discussing Mental Health in the Black Community: Strongly Agree responses increased from 28% to 69%, reflecting a significant rise in participants' confidence and willingness to engage openly on mental health topics within the Black community.
- Understanding Systemic Challenges: Strongly Agree responses increased from 28% to 69%, reflecting greater awareness of how racism and systemic barriers impact mental health access.
- **Awareness of Community Resources:** Only 21% strongly agreed before the session; that number nearly tripled to 58% after.
- Feeling Equipped to Support Others: Strongly Agree responses more than doubled (22% → 53%), showing increased confidence in helping others.



• **Identifying Symptoms in Black Youth/Adults:** Strongly Agree jumped from 15% to 57%, indicating significant growth in mental health literacy.

Participant Reflections

What They Learned

Participants valued:

- Understanding types and symptoms of depression and anxiety
- Exploring cultural stigma, implicit bias, and intersectionality
- Gaining emotional validation and connection in a safe space
- Practical tools like mindfulness, self-compassion, and stress management

"Recognizing and challenging stigmas... creating supportive communities." "Understanding symptoms of major depression in Black women."

How They Plan to Apply It

Attendees plan to:

- Incorporate self-care, journaling, and mindfulness
- Share resources, start peer support groups, and check in with others
- Advocate for mental health equity at work, school, and in policy

"Attend events. Run for Congress. Keep this on the top of my platform." "I'll recommend therapy to loved ones without judgment."

Requested Support & Resources

Participants asked for:

Free/affordable therapy and more Black mental health professionals



- Support groups, workshops, resource lists, and faith-based initiatives
- Culturally rooted tools like sound baths, journaling spaces, and nontraditional healing
- Grants, gift cards, and structural investment in underserved communities

"We need mental health services for teachers, youth, and families." "More mental health professionals who look like us."

Recommendations to LACDMH

- Increase Funding for Community-Based Mental Health Services
 Participants expressed a clear need for expanded, culturally responsive mental health services, including more accessible therapy, group sessions, and outreach tailored to Black communities.
- Expand Education and Awareness Campaigns

 Many participants highlighted the importance of ongoing education about mental health symptoms, systemic barriers, and self-care strategies. Continued workshops and public awareness initiatives can sustain and deepen this knowledge.
- Develop and Support Peer Support and Safe Spaces
 Feedback emphasized the value of safe, judgment-free environments for sharing experiences. LACDMH should support the creation and maintenance of peer-led support groups and community healing spaces.
- Improve Access to Mental Health Resources
 A common request was for practical tools, printed and digital resource lists, and increased availability of mental health professionals who understand cultural and disability intersections.
- Address Systemic Barriers with Intersectional Approaches
 Participants gained awareness of systemic racism and disability-related barriers.
 LACDMH should prioritize intersectional frameworks in policy, training, and program design to dismantle these obstacles.



Support Advocacy and Leadership Development
 Encourage and fund initiatives that empower community members to become advocates, educators, and leaders in mental health equity and racial justice.

Conclusion

The *Unstoppable* workshop created a powerful space for learning, healing, and connection. Participants left with a deeper understanding of mental health, greater confidence to support themselves and others, and a strong desire to take action within their communities. The data shows clear growth in awareness, self-efficacy, and engagement—especially around systemic barriers, stigma, and the unique needs of Black individuals impacted by disability.

More than just a workshop, *Unstoppable* served as a listening session and catalyst for change. The feedback reveals a growing call for culturally responsive care, sustained mental health investment, and safe spaces for collective healing. These findings will continue to inform future programming and partnerships aimed at advancing health equity and community resilience.

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UNSTOPPABLE

The Power of Healing & Growth

Presented By:

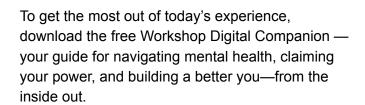






Welcome to the Unstoppable Workshop

Scan to Download Your Digital Workshop Companion



This guide grows with you. We'll let you know when the next version drops.





One Good Thing

Let's go around and share our name, why you showed up today and one good thing that happened to you recently or something you're grateful for.





About Us

Health Matters Clinic (HMC) is a 501c3 nonprofit organization dedicated to advancing health equity across Los Angeles County.

We provide mobile health outreach, mental health education, pop-up clinics, and wellness programs that bring care directly to under-resourced communities.

OUR MISSION IS ROOTED IN ONE PURPOSE: HELPING + HEALING.

Through volunteer-driven services and trusted community partnerships, we meet people where they are — on the streets, in schools, and beyond.



Dr. Leon Maultsby, DBH

Faculty Instructor, Dept. of Pediatrics, Charles R.
Drew University of Medicine and Science
Associate Director, Drew Cares
Founder, Maultsby and Co

Dr. Maultsby

Leon Maultsby, DBH, is a healthcare executive and educator with over 10 years of experience advancing health equity in mental health, HIV prevention, and public health. He serves as Associate Director at Drew CARES, where he leads training programs in HIV, STI, PrEP, and PEP, and directs health equity initiatives across domestic and international platforms. Dr. Maultsby holds a Doctorate in Behavioral Health from Arizona State University, along with degrees in Psychology and Healthcare Administration. His global work includes technical assistance and capacity building in Zambia. As Co-Chair of the Black Caucus on the LA County Commission on HIV, Dr. Maultsby leads community engagement and policy advocacy to address disparities among Black communities, LGBTQ+ populations, and immigrants. A Lean Six Sigma Black Belt, he brings a strong foundation in operational excellence and program leadership to all his work.











Resource Media's

Community Agreements



BE PRESENT!

Be on time and participate. Try to refrain from checking email and doing other tasks as much as possible.



STEP UP, STEP BACK.

Be mindful of taking too much or too little space.



CALL EACH OTHER IN AS WE CALL EACH OTHER OUT.

When challenging someone's ideas or behavior, give feedback respectfully. When your own ideas or behavior are challenged, receive feedback respectfully.



SHARE GRATITUDE FOR FEEDBACK.

It is a gift when someone takes the time and risk to give feedback. Thank them for the learning opportunity and recognize you may have work to do.



CREATE A SPACE FOR **MULTIPLE TRUTHS.**

Speak your truth and seek understanding of truths that differ from yours. Celebrate and embrace different perspectives.



NOTICE POWER DYNAMICS.

Power shows up in many different ways-be aware of how you might be unconsciously using your privilege and power.



ASSUME BEST INTENTIONS.

Everyone comes in with a different set of experiences and knowledge. Seek first to understand and assume best intentions in all interactions.



RECOGNIZE THAT INTENT IS DIFFERENT FROM IMPACT.

The things we say or do may have a negative impact on others, despite our intent. Be accountable for the impact of your actions and words.



CENTER LEARNING AND GROWTH.

This work is sometimes uncomfortable and uncertain. We may not always know the answers nor arrive at neat, tidy resolutions. We will make mistakes along the way. Remember we are all here to learn and grow, both individually and collectively. We won't "fix" it all in one meeting, but we will get closer if we are willing to be uncomfortable.



Curriculum Overview

Deliver culturally responsive, evidence-based mental health education

Support stigma reduction in Black communities impacted by disability and mental health challenges

Understand the intersections of race, disability, and mental health challenges

Lead healing-centered, empowering conversations within community settings

Modules

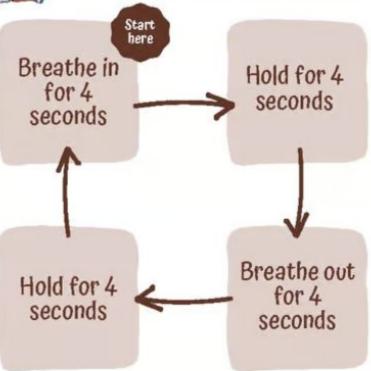
- **Module 1:** Understanding Mental Health in Black Individuals with Disabilities
- **Module 2:** The Intersectionality of Race, Disability, and Mental Health
- **Module 3:** Systemic Barriers to Mental Health Care for Black Disabled Individuals

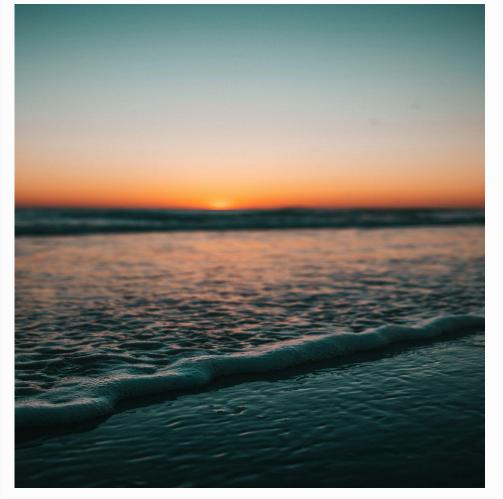
- Module 4: Building Family and Community Support Systems
- Module 5: Community Resources and Advocacy

Workshop Learning Objectives

- Recognize the signs and symptoms of depression and anxiety in Black individuals with disabilities.
- Understand the intersectionality of race, disability, and mental health, particularly in the context of Black communities.
- Identify systemic challenges affecting Black disabled individuals in accessing mental health care.
- Develop strategies for providing family and community support that promote healing and well-being.
- Identify local and national resources for mental health support within the Black disabled community.

BOX BREATHING





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Check In With Yourself

Scan the QR code below to use our "Check Your Self" tool



After grounding ourselves with a breathing exercise, let's take a moment to go deeper. Our quick self-screening tool is designed to help you identify signs of anxiety, depression, or stress. Tuning into your mental health builds self-awareness — a key part of becoming unstoppable.

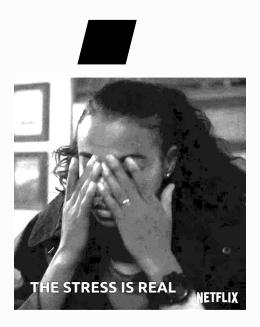
Your responses are private and not shared. This is just for you to better understand how you're doing — because being unstoppable means knowing when to ask for support.

Module 1: **Understanding Mental** Health in Black Individuals with Disabilities

Mental Health

Stress & Coping

Recognizing Depression & Anxiety



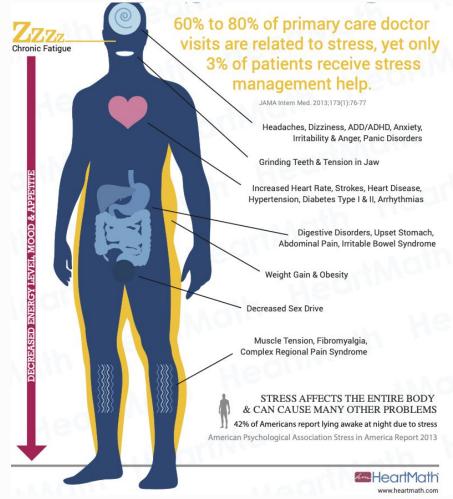




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How stress affects our body

"Understanding how stress
works gives you the
advantage of being aware of
your own stress and knowing
how to take action when
needed."

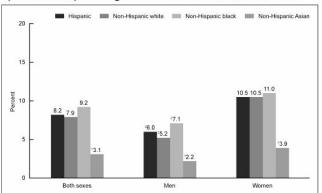


Mental Health Stats in the Black community

The CDC estimates In 2019, 2.8% of adults experienced severe symptoms of depression, 4.2% experienced moderate symptoms, and 11.5% experienced mild symptoms in the past 2 weeks.

• The percentage of adults who experienced any symptoms of depression was highest among those aged 18–29 (21.0%), followed by those aged 45–64 (18.4%) and 65 and over (18.4%), and lastly, by those aged 30–44 (16.8%)

Figure 2. Percentage of persons aged 20 and over with depression, by race and Hispanic origin and sex: United States, 2013–2016

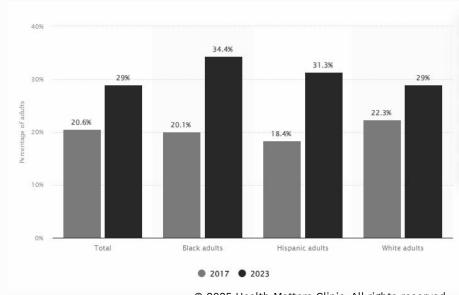


¹Significantly lower than Hispanic, non-Hispanic white, and non-Hispanic black.

NOTES: Depression was defined as a score greater than or equal to 10 on the Patient He table for Figure 2 \blacksquare .

SOURCE: NCHS, National Health and Nutrition Examination Survey, 2013-2016.

Percentage of adults in the United States who had been diagnosed with depression in their lifetime in 2017 and 2023, by race/ethnicity



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²Significantly lower than women of the same race and Hispanic-origin group.

Mood Disorders

- Disruptive Mood Dysregulation
 Disorder
- Major Depressive Disorder
- Persistent Depressive Disorder (Dysthymia)
- Premenstrual Dysphoric Disorder
- Substance/Medication-Induced
 Depressive Disorder
- Depressive Disorder Due to Another Medical Condition
- Unspecified Depressive Disorder



Major Depressive Disorder (DSM 5)

Five (or more) of the following symptoms have been present during the **same 2-week period** and represent a change from previous functioning; at least one of the symptoms is either (1) depressed mood or (2) loss of interest or pleasure.

°Depressed mood most of the day, nearly every day, as indicated by either subjective report (e.g., feels sad, empty, hopeless) or observation made by others (e.g., appears tearful). (**Note:** In children and adolescents, can be irritable mood.)

°Markedly diminished interest or pleasure in all, or almost all, activities most of the day, nearly every day (as indicated by either subjective account or observation).

°Significant weight loss when not dieting or weight gain (e.g., a change of more than 5% of body weight in a month), or decrease or increase in appetite nearly every day. (**Note:** In children, consider failure to make expected weight gain.)

°Insomnia or hypersomnia nearly every day.

°Psychomotor agitation or retardation nearly every day (observable by others, not merely subjective feelings of restlessness or being slowed down).

°Fatigue or loss of energy nearly every day.

°Feelings of worthlessness or excessive or inappropriate guilt (which may be delusional) nearly every day (not merely self-reproach or guilt about being sick).

°Diminished ability to think or concentrate, or indecisiveness, nearly every day (either by subjective account or as observed by others).

°Recurrent thoughts of death (not just fear of dying), recurrent suicidal ideation without a specific plan, or a suicide attempt or a specific plan for committing suicide.

What depression might look like...



What depression might look like...



Anxiety Disorders

Separation Anxiety
Disorder

Specific Phobia

Social Anxiety Disorder (Social Phobia)

Panic Disorder

Generalized Anxiety
Disorder

Substance/Medication-Induced Anxiety Disorder Anxiety Disorder Due to Another Medical Condition

Unspecified Anxiety
Disorder

Generalized Anxiety Disorder

Excessive anxiety and worry (apprehensive expectation), occurring more days than not for at least 6 months, about a number of events or activities (such as work or school performance).

- _±The individual finds it difficult to control the worry.
- _±The anxiety and worry are associated with **three (or more)** of the following six symptoms (with at least some symptoms having been present for more days than not for the **past 6 months**):

Note: Only one item is required in children.

- •Restlessness or feeling keyed up or on edge.
- Being easily fatigued.
- •Difficulty concentrating or mind going blank.
- •Irritability.
- Muscle tension.
- •Sleep disturbance (difficulty falling or staying asleep, or restless, unsatisfying sleep).





Somatic Symptoms

- Symptoms may present physically (eg. headaches, fatigue) rather than emotionally, leading to missed diagnoses (eg., somatic symptoms accounted for 70% of depression scores in Black individuals)
- Symptoms may be misread due to cultural differences



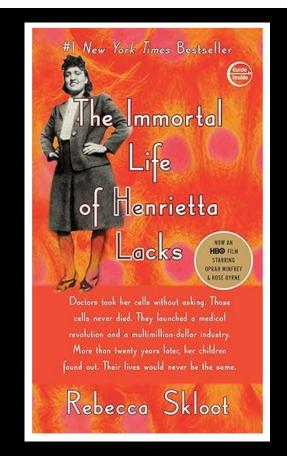
- Somatic expressions of mental health are often misunderstood by providers lacking cultural competence
- Culturally insensitive care can lead to a health misdiagnosis
 - "Black individuals are more likely to receive a misdiagnosis of schizophrenia when expressing symptoms related to mood disorders"
 - -National Alliance on Mental Illness (NAMI)



Module 2: The Intersectionality of Race, Disability, and Mental Health

Historical Context





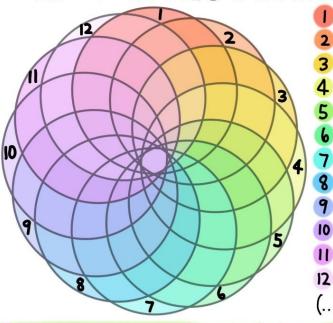
https://www.npr.org/2021/02/16/967011614/in-tuskegee-painful-history-shadows-efforts-to-vaccinate-african-americans

The mistrust is rooted in history, including the infamous U.S. study of syphilis that left Black men in Tuskegee, Ala., to suffer from the disease.

Mistrust continues for good reason...



INTERSECTIONALITY



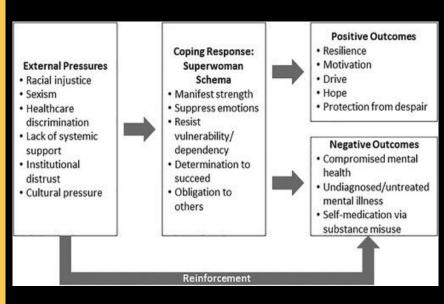
- 1) Race
- 2 Ethnicity
- 3 Gender identity
- 4 Class
- 5 Language
- 6 Religion
- 7 Abilitu
- 8 Sexuality
- 9 Mental health
- 10 Age
- 11 Education
- 12 Body size

(... and many more ...)

Intersectionality is a lens through which you can see where power comes and collides, where it locks and intersects. It is the acknowledgement that everyone has their own unique experiences of discrimination and privilege.

- Kimberlé Crenshaw -

Duckworth, S. (2020, Aug 19). Intersectionality [Infographic]. Flickr. https://flic.kr/p/2jy46K4. CC BY-NC-ND 2.0.





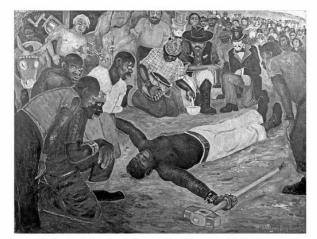
Coping strategy in Black Women often in response to stress & adversity

Key characteristics

- Obligation to Present an image of Strength
- Resistance to being vulnerable & dependent
- Deep drive to succeed despite limited resources
- Obligation to help others

Woods-Giscombe, Cheryl, et al. "Superwoman schema, stigma, spirituality, and culturally sensitive providers: Factors influencing African American women's use of mental health services." *Journal of best practices in health professions diversity: research, education and policy* 9.1 (2016): 1124 McDaniel, G., Akinwunmi, S., Brenya, V., Kidane, H., & Nydegger, L. (2023). Superwoman schema: Uncovering repercussions of coping strategies used among Black women at high risk for HIV. *Ethnicity & health*, 28(6), 874-894.

John Henryism: High Effort Coping & Its Impact On Mental Health



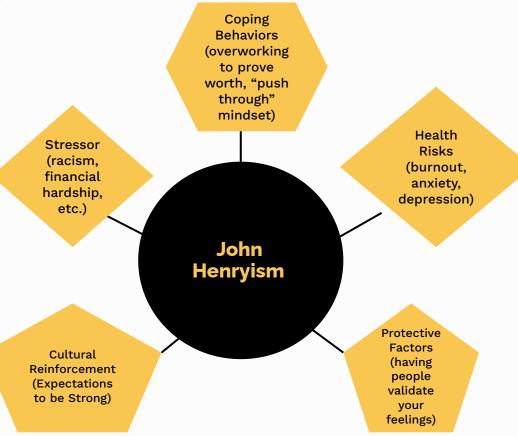
John Henry lies dead after beating the steam drill - painting by Palmer Hayden (Wikimedia)

+ Member-only story

John Henryism: Can black resilience have negative consequences for health and well-being?

Can racial discrimination turn character strength into a risk factor for poor physical health?





Activity: The Privilege Walk



Module 3: **Systemic Barriers to Mental Health Care for Black Disabled** Individuals

Barriers to Care



Interactive Discussion:

Module 4: **Building Family and Community Support** Systems



Understanding the Importance of Building a Strong Community



Fosters a sense of belonging, facilitates resource sharing and mutual support, celebrates individual and collective achievements, and strengthens emotional wellbeing

Creating Safe Spaces

Safe Space...

- Start with empathy, not advice
 - Focus on listening without judgement or trying to "fix" someone immediately.
 - Sometimes, being heard is the healing
- Honor cultural values while challenging harmful norms
- Create dedicated spaces and times to talk (family dinners, walks, car rides, etc)



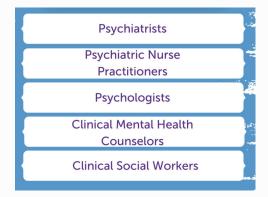


Safe Space in Mental Health



Identifying Trusted Support Networks

Mental Health Support



Health Care Providers





HELP
SUPPORT
ADVICE
GUIDANCE
GUIDANCE
Available

Employer Benefit Programs

Helplines



Support Groups



Community Mental Health Centers

- Churches serve as trusted safe havens in many Black communities
- Faith can play a central role in emotional relief
- Mental health stigma and distrust of traditional services remain major barriers in Black communities - but churches can reach people who may not otherwise seek treatment



Coping Strategie s for Families



Mindfulness: Techniques to encourage emotional regulation and reduce stress.

- Journaling: A reflective tool for individuals and families to process emotions and track mental health progress.
- Peer Support: The value of seeking out peer support groups and online forums for additional guidance.



Your niece was 27 years old when she found out she was pregnant. Although the pregnancy was unexpected, she was excited. She was even happier when she learned she was having a girl after being an aunt to seven boys. She sang to her daughter, wrote to her daily in a journal and felt overwhelming joy any time she kicked.

A few months after she delivered, she expressed starting to feel less like herself. She stopped putting effort into her appearance, she lost interest in things she normally enjoyed, and she started dropping off her child frequently because she didn't want to be around her. She expressed feeling guilty and anxious, and cried frequently.

Role play with a partner what you might say to your niece.

Module 5: Community Resources and Advocacy

National & Local Resources

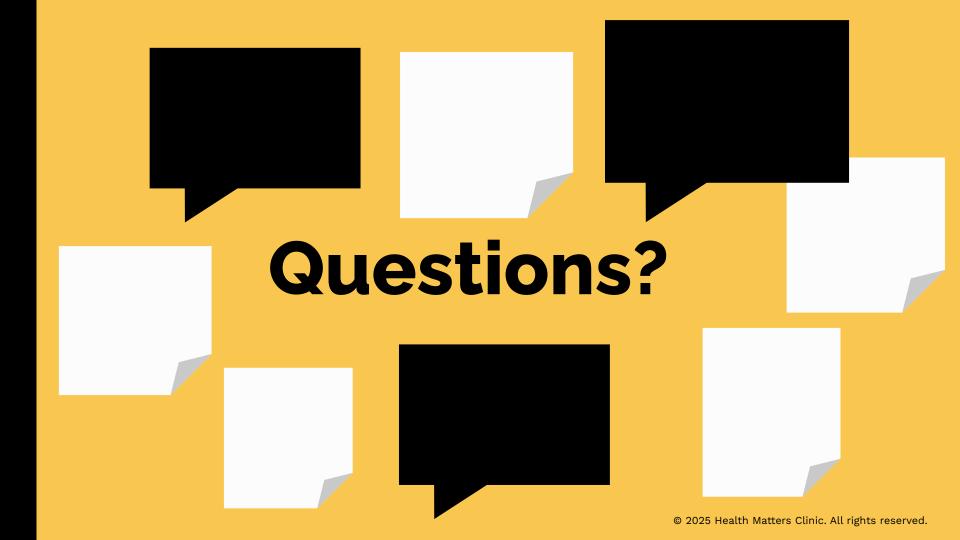
- NAMI (National Alliance on Mental Illness): Free peer-led support groups and educational programs.
- Mental Health America (MHA): Culturally tailored self-help resources.
- LACDMH (Los Angeles County Department of Mental Health): Services and programs available for Los Angeles County residents.
- Disability Rights California and NAACP Mental Health Initiative: Legal advocacy resources for Black disabled individuals facing discrimination.



- NAMI: SHARING HOPE
- Black Emotional and Mental Health Collective (BEAM)
- Black Men Heal
- Black Mental Health Alliance
- Brother You're on My Mind
- Ourselves Black
- Sista Afya
- The Steve Fund

Brainstorm: What mental health resources are you aware of in your community?

Activity: Create your personalized action plan



Your Voice Matters Pre/Post Test

Help us improve by Scan the QR code below to share your thou ghts!





Thank You for Joining Us

For follow-up materials, questions, or to get involved with future mental health workshops, please reach out to the **Education & Training Committee**:

E education@healthmatters.clinic

Together, we're building a healthier, more informed community.

WWW.HEALTHMATTERS.CLINIC

YOUR FREE GUIDE IS HERE



Packed with tools and a national + local mental health resource guide to help you go further—on your terms.

DOWNLOAD NOW

UNSTOPPABLE WORKSHOP DIGITAL COMPANION

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