
FINAL SUMMARY REPORT

Latino Resiliency Workshops Project for Young Men
SERVE California

Project Purpose

The Latino Resiliency Workshops Project for Young Men were designed to foster open dialogue, reduce stigma, and integrate mental wellness into the overall health and well-being of Latino young men ages 16 to 25 in Los Angeles County. The program aimed to increase awareness of mental health services, improve access to culturally competent care, and strengthen the capacity of participants to support their own mental health and that of their peers, families, and communities. Grounded in culturally responsive and trauma-informed principles, the workshops created safe, inclusive spaces where participants could engage openly with mental health topics often considered taboo within traditional Latino cultural contexts. The initiative was developed in direct response to the documented disparities in mental health service access and utilization among Latino males in high-density service areas across Los Angeles County.

Program Goals

The Latino Resiliency Workshops Project for Young Men were developed to address the mental health needs of Latino young men ages 16 to 25 in Los Angeles County through a structured, culturally responsive framework. The program was built around four core goals that guided all aspects of curriculum design, facilitation, and participant support. Each goal reflects the priorities identified in the Scope of Work and the broader objectives of the Underserved Cultural Communities initiative. The following goals shaped the program's implementation from planning through completion.

- Reduce stigma associated with mental health through culturally responsive discussions that encouraged emotional expression, self-awareness, and help-seeking behaviors.
- Promote access to culturally competent mental health services by increasing awareness, providing resource linkage, and equipping participants with practical wellness tools.

- Build resiliency through interactive workshops addressing trauma, discrimination, environmental stressors, substance use, suicide prevention, and intergenerational stress.
- Develop and disseminate a Latino-specific mental health resource list to enhance cultural competence and improve community access to appropriate services.

Program Implementation

The workshop series was delivered across three Service Areas through a structured seven-session model grounded in trauma-informed, evidence-based practices. Each location hosted four meeting dates covering all seven sessions. Sessions were facilitated by bilingual clinical staff and incorporated interactive discussions, peer engagement, and practical skill-building exercises. Translation services were not required across any of the three locations.

Implementation followed the approved curriculum structure and addressed mental health awareness and the influence of cultural norms and gender roles, mental health stigma reduction and help-seeking behaviors, trauma and intergenerational stress, environmental and societal stressors including racism, discrimination, substance use, and suicide prevention, resiliency development and practical skill-building, effective coping strategies and personalized implementation, and community healing, resource linkage, and program completion. Each session was designed to build upon the previous, creating a progressive learning experience that reinforced prior content while introducing new concepts. Facilitators were given flexibility to adapt delivery in real time based on participant needs while maintaining fidelity to the approved curriculum. All content was administered in a culturally and linguistically appropriate manner consistent with the communities served.

The program maintained consistent delivery across all sites while allowing for culturally relevant dialogue and participant-driven engagement. All sessions were held in person and free of charge to participants, with food and light refreshments provided throughout. Detailed spending logs and receipts were maintained in accordance with County requirements. Consent was obtained from all participants for data collection, photography, and use of personal information, with forms retained for LACDMH review.

Participation and Engagement

Attendance tracking documented a total of 132 participation entries across all sessions and locations, reflecting a combination of repeat and partial participation. Of those entries, 22

participants completed all seven sessions, while 110 participants attended a four-session sequence, either covering Sessions 1 and 2 or Sessions 3 and 4 at their respective site. A total of 42 unique participants attended Session 7, the Community Healing and Resources completion session, held on January 31, February 28, and April 18 across all three locations, each receiving their stipend and wellness kit at that session. Unique identifier codes were used in place of participant names on all sign-in sheets, consistent with the confidentiality requirements of the Scope of Work, ensuring accurate documentation while protecting participant privacy throughout the program.

Incentives and Participant Support

Incentives were distributed in alignment with the Scope of Work and tracked through documented sign-in sheets using unique identifier codes to maintain participant confidentiality. Stipends were issued based on documented attendance, with full completion incentives provided to participants who attended all seven sessions and partial stipends issued to those who completed a four-session sequence. All distributions were documented and maintained in compliance with County audit requirements. SERVE California retains the original sign-in sheets with participant names, phone numbers, and email addresses as required by the Scope of Work.

Wellness kits were distributed during the final session and included practical items designed to support daily functioning and mental wellness. Each kit was packaged in a reusable nylon sports drawstring bag with an inspirational message. All kit items were selected to be practical, stigma-free, and directly relevant to the program's wellness objectives. Distribution was limited to the final session and documented accordingly for submission to LACDMH.

- Levi's Men's trifold leather wallet
- Men's 11-piece grooming kit with oral care
- Rubik's cube for mental focus and stress redirection
- Earbuds to support access to calming audio and private listening
- Bilingual mental health resource guide (English and Spanish)

Each item in the wellness kit was selected to reinforce the program's core themes of mental wellness, self-care, and daily functioning. The leather wallet supports personal organization and a sense of independence, which are foundational to self-efficacy and healthy identity development. The grooming kit addresses personal hygiene as a direct component of self-esteem and daily routine, both of which are closely linked to emotional well-being. The Rubik's cube serves as a healthy outlet for stress, supporting focus, cognitive engagement,

and redirection away from anxiety or rumination. Earbuds provide access to calming audio content, guided meditation, or mental health resources in a private and stigma-free format. The bilingual resource guide ensures that participants leave with tangible connections to culturally and linguistically appropriate mental health services, extending the program's impact beyond the final session.

Evaluation Outcomes

A retrospective post-then-pre questionnaire was administered before and after each meeting day to assess shifts in participant knowledge, attitudes, and behaviors across the program's core content areas. Evaluation findings indicate measurable increases in knowledge and awareness across all topics addressed, with more nuanced outcomes related to behavioral change and help-seeking. The questionnaire utilized a Likert scale and included open-ended questions to capture narrative responses from participants. The findings presented in the sections below reflect the aggregate outcomes observed across all three locations and all seven sessions.

Mental Health Awareness

Participants demonstrated a clear understanding of mental health concepts and were able to identify signs and symptoms following the first session. However, responses reflected neutrality when applying these concepts to themselves and when assessing personal comfort with discussing mental health, indicating that stigma remained a persistent factor even as foundational knowledge increased. This pattern is consistent with populations for whom mental health awareness is newly introduced in a structured educational setting. Continued engagement and reinforcement will be necessary to shift attitudes from awareness to active help-seeking behavior.

Trauma Awareness

Participants showed strong comprehension of trauma and its effects on mental, emotional, and behavioral health. Despite this, many participants expressed discomfort with discussing traumatic experiences with others, reflecting the deeply personal and culturally sensitive nature of trauma disclosure within this population. A key outcome of Session 3 was the identification of at least two coping strategies by all participants by the session's conclusion. This baseline skill development provides a foundation for continued growth in trauma processing and resilience-building.

Environmental and Societal Stressors

Initial assessments indicated limited awareness of environmental and systemic stressors prior to Sessions 3 and 4. By the conclusion of those sessions, participants demonstrated the ability to recognize these stressors, connect them to mental health outcomes, and reported increased confidence in applying coping strategies to manage their effects. The session content on racism, discrimination, financial stress, and suicide prevention was particularly impactful, generating meaningful discussion and personal reflection among participants. Facilitators noted that this content area produced some of the most engaged and emotionally present responses across all sessions.

Resiliency Development

Participants initially lacked a working understanding of the relationship between mental health and resilience. Post-session responses indicated improved comprehension, with participants able to articulate how resilience is influenced by mental health and vice versa. By the end of Session 5, participants could identify personal strengths and community resources that support resilience in their daily lives. The shift from a deficit-focused perspective to a strengths-based framework was one of the most notable outcomes of this content area.

Coping Strategies and Implementation

Baseline data indicated that a significant portion of participants lacked knowledge of healthy versus unhealthy coping mechanisms prior to Session 6. While most demonstrated improved knowledge following the session, a subset continued to report difficulty implementing healthy coping strategies consistently. This finding identifies an area warranting continued intervention and reinforcement in future programming. The development of personalized coping plans during Session 6 was a meaningful step toward translating knowledge into sustained behavioral change.

Community Healing and Resources

Session 7 served as the program's culminating session, bringing together all content areas addressed throughout the workshop series into a final reflection and celebration of participant growth. Participants engaged in resource mapping activities, identifying local mental health services, peer support networks, and community organizations available to them beyond the program. The session closed with a resilience ceremony that honored participants' commitment, reinforced the skills developed throughout the program, and encouraged continued engagement with mental health resources and peer support. Each participant who attended received their completion stipend and wellness kit, marking the formal conclusion of the workshop series.

Overall Program Impact

Qualitative feedback revealed recurring themes of emotional suppression, reliance on self-regulation without external support, and uncertainty about initiating conversations about mental health. Participants consistently expressed a desire for trusted individuals to speak with but reported lacking the communication tools to do so. Final session data indicated that all respondents reported positive outcomes. Participants agreed or strongly agreed that they experienced personal growth, increased support, and overall improvement in their well-being as a result of the program.

Clinical Observations

Clinical consultation was provided to eight participants across the three locations, indicating the presence of higher-acuity needs within the participant population. At one location, six participants were identified as residing in a homeless shelter, and one participant identified as transgender. These factors highlighted the presence of intersecting vulnerabilities within the population served and underscored the importance of culturally competent, inclusive, and trauma-responsive programming. SERVE California's licensed clinical staff were available on-site at each session to provide consultation and referrals for participants experiencing emotional distress, ensuring that higher-acuity needs were addressed in a timely and appropriate manner.

Strengths and Program Impact

The program demonstrated strong engagement, high survey completion rates, and measurable increases in knowledge across all content areas. Participants showed clear gains in understanding mental health, trauma, environmental stressors, and coping strategies. The

culturally responsive approach contributed to meaningful participant engagement and created a space where individuals felt comfortable reflecting on personal experiences. The consistent presence of bilingual, bicultural clinical staff was a key factor in building trust and sustaining participation across all three service areas.

The bilingual delivery model and culturally grounded curriculum were particularly effective in establishing trust and sustaining participation across all three locations. The program successfully established a foundation for mental health awareness and normalized initial conversations around stigma within a population where such dialogue is historically limited. Participant feedback indicated a high degree of satisfaction with both the content and the delivery of the workshop series. These outcomes reflect the strength of SERVE California's approach to community-based mental health programming and its capacity to serve underserved Latino populations effectively.

Challenges and Barriers

Despite documented gains in knowledge, persistent barriers remain. Stigma related to mental health continued to affect participants' willingness to discuss personal experiences and seek support, even after completing all seven sessions. While participants demonstrated improved understanding of coping strategies, some reported difficulty translating that knowledge into consistent behavioral change. The brief duration of the program, while structured to maximize engagement, necessarily limits the depth of behavioral reinforcement that can be achieved within a single series.

These findings are consistent with early-stage community interventions, where awareness typically precedes behavioral change. They indicate the need for extended engagement, ongoing reinforcement, and structured follow-up to support long-term outcomes. Attendance patterns also reflected the real-world constraints faced by the target population, including work schedules, family obligations, and transportation barriers. Future programming should account for these factors in scheduling and session design.

Recommendations

Future programming should prioritize extended engagement models that allow for deeper skill development and sustained behavioral reinforcement beyond the initial workshop series. Additional focus should be placed on communication skill-building, specifically supporting participants in initiating conversations about mental health with trusted individuals in their personal and professional lives. Programming that incorporates structured follow-up sessions

or alumni engagement components would strengthen long-term outcomes and help bridge the gap between awareness and behavioral change. LACDMH should also consider the value of multi-cycle programming that allows participants to re-engage with content across successive cohorts.

Targeted outreach to high-risk populations, including unhoused youth and LGBTQ+ identifying individuals, should be expanded as a deliberate component of program design. Incorporating structured peer support components into future iterations may further reduce stigma and increase help-seeking behaviors over time. Partnerships with community organizations serving these populations would strengthen recruitment and retention efforts. Investment in peer mentor training and integration would also enhance the program's capacity to reach individuals who are most reluctant to engage with formal mental health services.

Conclusion

The Latino Resiliency Workshops Project for Young Men successfully achieved their primary objective of increasing mental health awareness and establishing a foundation for stigma reduction within a culturally specific population. Participants demonstrated measurable gains in knowledge across all content areas and reported meaningful improvements in their sense of well-being and personal growth by the program's conclusion. While continued efforts are needed to support long-term behavioral change and community integration, the program demonstrated meaningful impact and strong alignment with the goals of the Underserved Cultural Communities initiative. SERVE California remains committed to building on this foundation in future programming phases and to advancing equitable access to mental health resources for Latino communities across Los Angeles County.

Certification

I certify that the information presented in this report accurately reflects the implementation and outcomes of the Latino Resiliency Workshops Project for Young Men.



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