

SUD Stigma, Treatment and Recovery for Hispanic/Latinos Webinar 1 Focus opioids misuse/Latino community

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Overdose Rapid Response and Prevention
Program

El Paso, Texas

UTHSC San Antonio/ Project Vida

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ATTCnetwork.org/hispaniclatino

PTTCnetwork.org/hispaniclatino

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At the time of this publication, Miriam E. Delphin-Rittmon, Ph.D, served as Assistant Secretary for Mental Health and Substance Use in the U.S. Department of Health and Human Services and the Administrator of the Substance Abuse and Mental Health Services Administration.

The opinions expressed herein are the view of the National Hispanic and Latino Addiction Technology Transfer Center (ATTC), and the Hispanic and Latino Prevention Technology Transfer Center (PTTC), and do not reflect the official position of the Department of Health and Human Services (DHHS), SAMHSA. No official support or endorsement of DHHS, SAMHSA, for the opinions described in this document is intended or should be inferred.

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Presented 2022

HOUSEKEEPING

- Copy of presentation
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- Certificate of Completion





Dr. Fernando
Gonzalez

Learning Series in Spanish Objectives

- ❖ Identify the impact of Opioids and Fentanyl among Hispanic /Latino adults in the U.S
- ❖ Recognize the impact of treatment for an SUD
- ❖ Understand Stigma and how it manifests
- ❖ Recognize the importance of using non-stigmatizing language for people who have an SUD

Substance Use Disorders/Opioids Epidemic

1991 First Wave

Prescription Opioids and opioid combination

2010 Second Wave

The second wave of the opioid epidemic started around 2010 with a rapid increase in deaths from heroin abuse.

Deaths due to heroin-related overdose increased by 286% from 2002 to 2013

2013 Third Wave

The third wave of the epidemic began in 2013 as an increase in deaths related to synthetic opioids like fentanyl.

2017

Was declared the opioid crisis a “public health emergency.”

<https://www.cdc.gov/opioids/basics/epidemic.html>

Substance Use Disorders

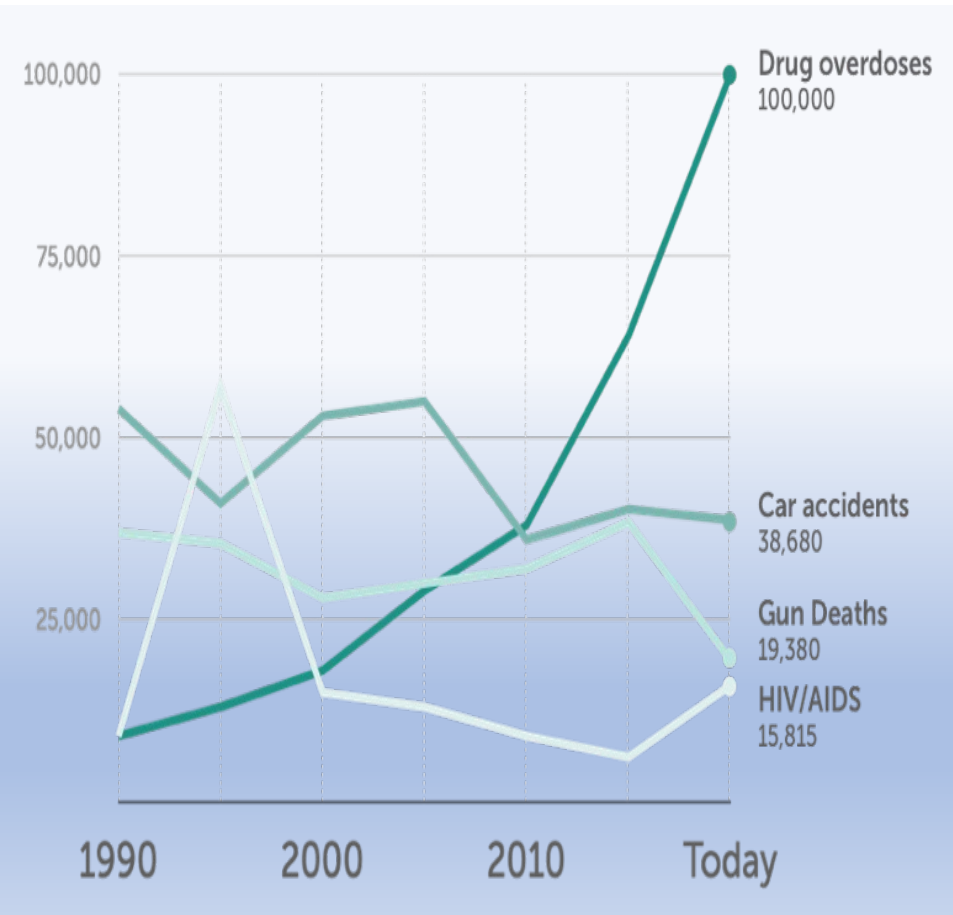
SUD's

Key Facts

- SUDs are treatable, chronic diseases that can affect anyone – regardless of race, gender, income level, or social class.
- One in seven Americans aged 12 or older reports experiencing a SUD.
- SUD diagnosis can be applied to the following classes of drugs: alcohol; cannabis; hallucinogens; inhalants; opioids; sedatives, hypnotics, or anxiolytics; stimulants; tobacco (nicotine); and other (or unknown) substances.
- SUDs can lead to significant problems in all aspects of a person's life including in their work, school, or home life
- Coordinated care is critical in treating anyone with a SUD to achieve positive outcomes. Coordinating treatment for comorbidities, including mental health conditions, is an important part of treating a SUD.

<https://www.cdc.gov/dotw/substance-use-disorders/index.html>

The Facts of the epidemic



Provisional data from CDC's National Center indicate there were an estimated 107,622 drug overdose deaths during 2021, an increase of nearly 15% from the 93,655 deaths estimated in 2020.

Researchers found a staggering 110,236 people died in a single 12-month period, a stunning new record. Dec 31, 2022

The 2021 increase was half of what it was a year ago, when overdose deaths rose 30% from 2019 to 2020.

Drug overdose death rates increased for each race and Hispanic-origin group except non-Hispanic Asian people between 2020 and 2021.

<https://www.cdc.gov/opioids/basics/epidemic.html>

Substance Use Disorders/Opioids Epidemic

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Leading Causes of Death in the USA- 2022

- Heart disease: 695,547.
- Cancer: 605,213.
- COVID-19: 416,893.
- **Accidents (unintentional injuries): 224,935.**
- Stroke (cerebrovascular diseases): 162,890.
- Chronic lower respiratory diseases: 142,342.
- Alzheimer's disease: 119,399.
- Diabetes: 103,294.



187
PEOPLE

die every day from
an opioid overdose
(including Rx and illicit opioids).

www.cdc.gov



Overdoses kill more of us
than breast cancer, guns,
and car crashes combined.

More than 932,000 people have died since 1999 from a drug overdose.

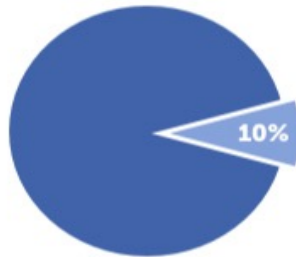
The leading causes of death for unintentional injury include unintentional poisoning, unintentional motor vehicle (m.v.) traffic, unintentional drowning, and unintentional falls.

<https://www.cdc.gov/nchs/fastats/leading-causes-of-death.htm>

Public Health Crisis



80% of us don't want a friend, colleague or neighbor with addiction.



Only 1 in 10 who need addiction treatment ever receive it.

\$740
BILLION

Each year, addiction costs Americans over \$740 billion.

Commonly cited drivers of the epidemic

- overprescribing
- increased access to heroin and fentanyl
- Insufficient treatment capacity
- gaps in evidence-based treatments
- criminalization of SUD
- insurance coverage disparities
- social isolation
- lack of help-seeking
- societal barriers to recovery

Seven of the nine drivers of the opioid epidemic are either partially or entirely driven by stigma.

Why People Take Drugs

- **To feel good.** Drugs can produce intense feelings of pleasure. This initial euphoria is followed by other effects, which differ with the type of drug used. Cocaine, the high is followed by feelings of power, self-confidence, and increased energy. In contrast, the euphoria caused by opioids such as heroin is followed by feelings of relaxation and satisfaction.
- **To feel better.** Some people who suffer from social anxiety, stress, and depression start using drugs to try to feel less anxious. Stress can play a major role in starting and continuing drug use as well as relapse (return to drug use) in patients recovering from addiction.
- **To do better.** Some people feel pressure to improve their focus in school or at work or their abilities in sports. This can play a role in trying or continuing to use drugs, such as prescription stimulants or cocaine.
- **Curiosity and social pressure.** In this respect, teens are particularly at risk because peer pressure can be very strong. Adolescence is a developmental period during which the presence of risk factors, such as peers who use drugs, may lead to substance use.


<https://nida.nih.gov/publications/drugs-brains-behavior-science-addiction/drug-misuse-addiction>

Physiological Effects

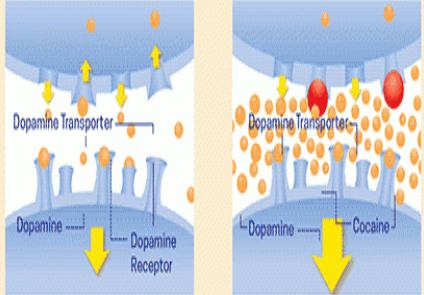
Substance use disorders result from changes in the brain that can occur with repeated use of alcohol or drugs. The most severe expression of the disorder, addiction, is associated with changes in the function of brain circuits involved in pleasure (the reward system), learning, stress, decision making, and self-control.

Some drugs target the brain's pleasure center

Brain reward (dopamine pathways)



How drugs can increase dopamine

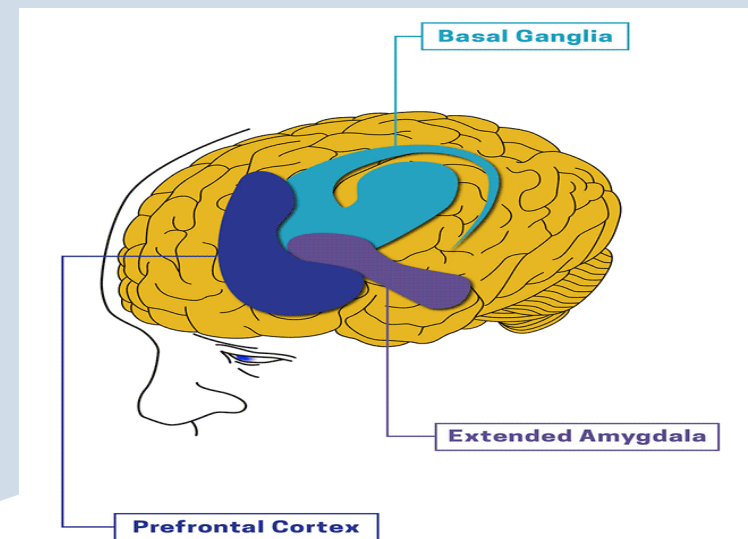


While eating food

While using cocaine

These brain circuits are important for natural rewards such as food, music, and sex.

Typically, dopamine increases in response to natural rewards such as food. When cocaine is taken, dopamine increases are exaggerated, and communication is denied.



Source: Facing Addiction in America: The Surgeon General's Report on Alcohol, Drugs, and Health

<https://addiction.surgeongeneral.gov/executive-summary/report/neurobiology-substance-use-misuse-and-addiction>
<https://nida.nih.gov/publications/drugs-brains-behavior-science-addiction/drugs-brain>
<https://nida.nih.gov/publications/drugs-brains-behavior-science-addiction/drugs-brain>

Substance Use Disorders

SUD's

According to the 2020 National Survey on Drug Use and Health (NSDUH), 40.3 million Americans, aged 12 or older, had a substance use disorder (SUD) in the past year. Substance use disorders continue to be an important health issue in our country.

<https://www.cdc.gov/dotw/substance-use-disorders/index.html>

Contextual Issues Related To Opioid Misuse And Overdose Use Disorders Highlights of the National Data

In Hispanic/Latino Communities Opioid misuse.(3) According to the SAMHSA NSDUH, the opioid misuse (heroin use and prescription opioid misuse) rate among Hispanic/ Latinos is similar to the national population rate, about 4 percent.

In 2018, 1.7 million Hispanic/ Latinos and 10.3 million people nationally, aged 12 and older, were estimated to have engaged in opioid misuse in the past year.

Opioid (heroin and prescription) misuse in Hispanics eight and tenth grade youth was reported in 2018 to be higher than in Whites and African Americans.

<https://store.samhsa.gov/product/The-Opioid-Crisis-and-the-Hispanic-Latino-Population-An-Urgent-Issue/PEP20-05-02-002>

Opioid Use Disorder in Past Year: Among Hispanic People Aged 12+

Opioid misuse is primarily driven by prescription pain reliever misuse.

Among Hispanics aged 12 to 17 in 2020:

2.3 percent (or 148,000 people) misused opioids in the past year
0.5 percent (or 35,000 people) had an opioid use disorder

Among Hispanics aged 18 to 25 in 2020:

3.5 percent (or 274,000 people) misused opioids in the past year
0.4 percent (or 31,000 people) had an opioid use disorder

Among Hispanics aged 26 or older in 2020:

3.9 percent (or 1.4 million people) misused opioids in the past year
0.8 percent (or 280,000 people) had an opioid use disorder

The Opioid Crisis and the Hispanic/Latino Population: An Urgent Issue (Spanish version) - La crisis de los opioides en la población Hispana/Latina: un asunto urgente



Table 1. Annual prevalence of use of various drugs by race/ethnicity for 8th, 10th, and 12th graders—United States, 2018

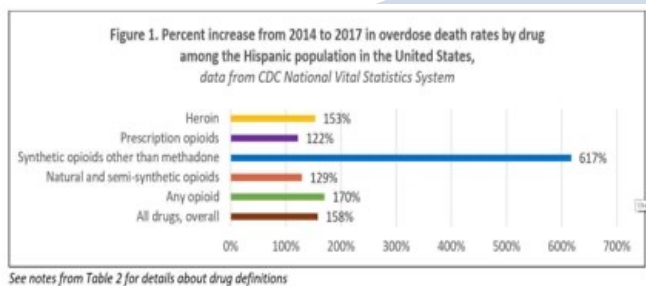
Race/ Ethnicity	Heroin, Any Use ^a			Heroin with a Needle ^{a,b}			Heroin without a Needle ^{a,b}			OxyContin ^{b,c,d}			Vicodin ^{b,c,d}		
	8 th	10 th	12 th	8 th	10 th	12 th	8 th	10 th	12 th	8 th	10 th	12 th	8 th	10 th	12 th
Total	0.3	0.2	0.4	0.2	0.1	0.1	0.2	0.1	0.2	0.8	2.2	2.3	0.6	1.1	1.7
White	0.2	0.1	0.2	0.1	0.1	0.1	0.1	0.1	0.1	0.6	1.7	2.5	0.4	1.2	1.9
African American	0.2	0.2	0.6	0.2	0.2	0.2	0.1	0.1	0.4	1.4	1.6	1.7	1.5	0.9	1.1
Hispanic	0.6	0.3	0.4	0.3	0.2	0.2	0.5	0.2	0.2	0.7	4.0	2.1	0.5	1.8	1.7

Source: Monitoring the Future survey, the University of Michigan
^a8th and 10th grades only: Data based on three of four forms; N is four sixths of N indicated.
^b12th grade only: Data based on three of six forms; N is three sixths of N indicated.
^cOnly drug use not under a doctor's orders is included here.
^d8th and 10th grades only: Data based on one of four forms; N is one third of N indicated

Table 2. Number and age-adjusted rates^a of drug overdose deaths^b involving selected drugs by race/ethnicity—United States, 2017

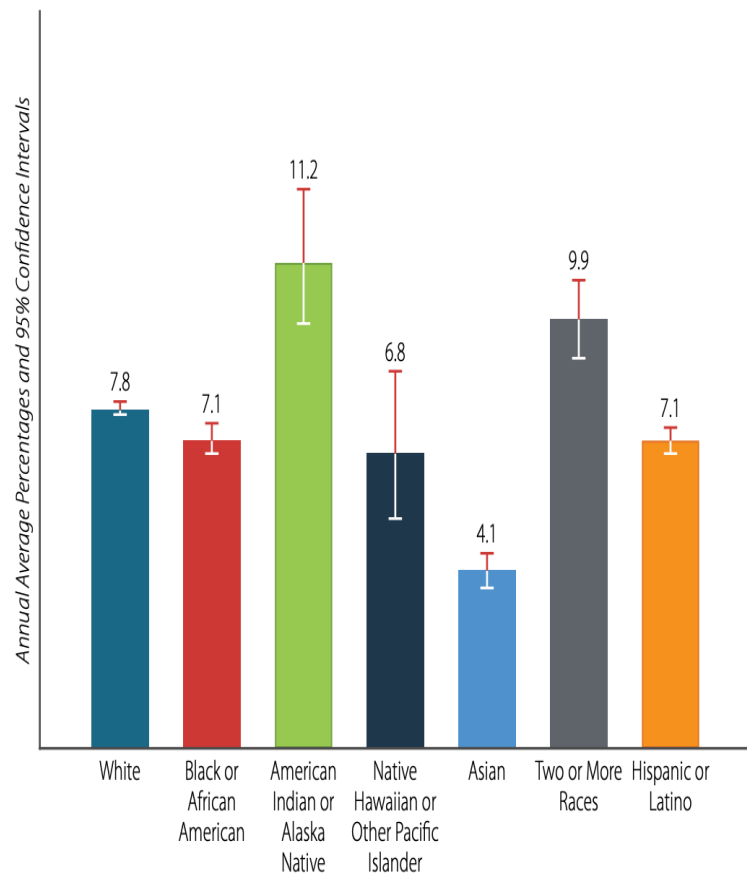
Race/Ethnicity	Drug overdose deaths ^b , overall		Any opioid ^c		Drug overdose deaths involving: Natural and semi-synthetic opioids ^d		Synthetic opioids other than methadone ^e		Prescription opioids ^f		Heroin ^g	
	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate
Total	70,237	21.7	47,600	14.9	14,495	4.4	28,466	9.0	17,029	5.2	15,482	4.9
White, non-Hispanic	53,516	27.5	37,113	19.4	11,921	5.9	21,956	11.9	13,900	6.9	11,293	6.1
Black, non-Hispanic	8,832	20.6	5,513	12.9	1,247	2.9	3,832	9.0	1,508	3.5	2,140	4.9
Asian/Pacific Islander, non-Hispanic	756	3.5	348	1.6	117	0.5	189	0.8	130	0.6	119	0.5
American Indian/Alaska Native, non-Hispanic	672	25.7	408	15.7	147	5.7	171	6.5	187	7.2	136	5.2
Hispanic	5,988	10.6	3,932	6.8	994	1.8	2,152	3.7	1,211	2.2	1,669	2.9

Source: National Vital Statistics System, Mortality File
^aRate per 100,000 population age-adjusted to the 2000 U.S. standard population using the vintage year population of the data year. Rates are suppressed when based on <20 deaths.
^bDeaths are classified using the International Classification of Diseases, Tenth Revision (ICD-10). Drug overdose deaths are identified using underlying cause-of-death codes X40–X44 (unintentional), X60–X64 (suicide), X85 (homicide), and Y10–Y14 (undetermined). Because deaths might involve more than one drug, some deaths are included in more than one category. On death certificates, the specificity of drugs involved with deaths varies over time. In 2016, approximately 15% of drug overdose deaths did not include information on the specific type of drug(s) involved.
^cDrug overdose deaths, as defined using ICD-10 codes, that involve opium (T40.0), heroin (T40.1), natural and semi-synthetic opioids (T40.2), methadone (T40.3), synthetic opioids other than methadone (T40.4) and other and unspecified narcotics (T40.6).
^dDrug overdose deaths, as defined, that involve natural and semi-synthetic opioids (T40.2).
^eDrug overdose deaths, as defined, that involve synthetic opioids other than methadone (T40.4).
^fDrug overdose deaths, as defined, that involve natural and semi-synthetic opioids (T40.2) and methadone (T40.3).
^gDrug overdose deaths, as defined, that involve heroin (T40.1).



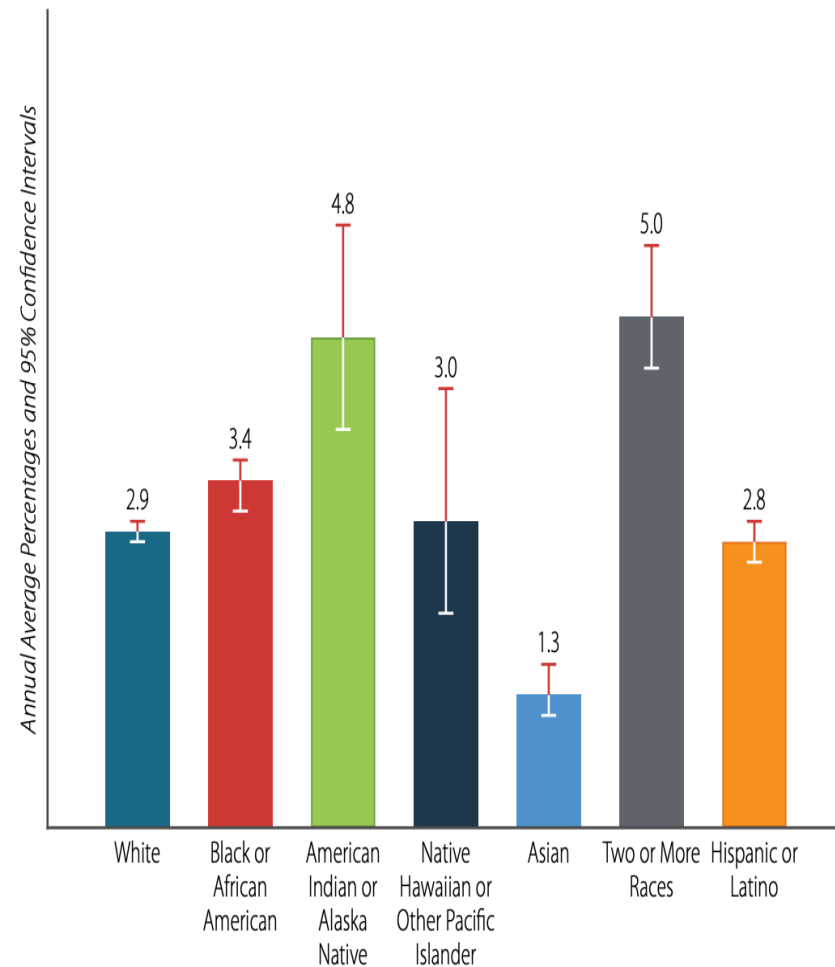
4.4 Racial/Ethnic Differences in Past Year SUD among People Aged 12 or Older

FIGURE 4.7 Substance Use Disorder in the Past Year among People Aged 12 or Older, by Race/Ethnicity: 2015–2019, Annual Averages



Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2015–2019.

FIGURE 4.1 Illicit Drug Use Disorder in the Past Year among People Aged 12 or Older, by Race/Ethnicity: 2015–2019, Annual Averages



Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2015–2019.

FENTANYL XYLAZINE

Fentanyl is up to 50 times stronger than heroin and 100 times stronger than morphine.

In 2020, 76% of drug deaths in people ages 14-23 involved fentanyl.

The DEA Laboratory has found that, of the fentanyl-laced fake prescription pills analyzed in 2022, 60% now contain a potentially lethal dose of fentanyl. Fentanyl clumps together, so it's not evenly distributed in a batch of drugs. If you have four pills, one can be fatal even if the others aren't.

Xylazine is a non-opioid sedative, analgesic, and muscle relaxant used in veterinary medicine. Human use of xylazine among people who take drugs has been well documented in Puerto Rico since the early 2000s, where it is known as 'anestesia de caballo' (horse anesthetic). In the United States, xylazine is not a scheduled medication, and although it is approved for use in large animal veterinary medicine, the FDA has not approved it for human use.

<https://realdealonfentanyl.com/>

Rainbow FENTANYL



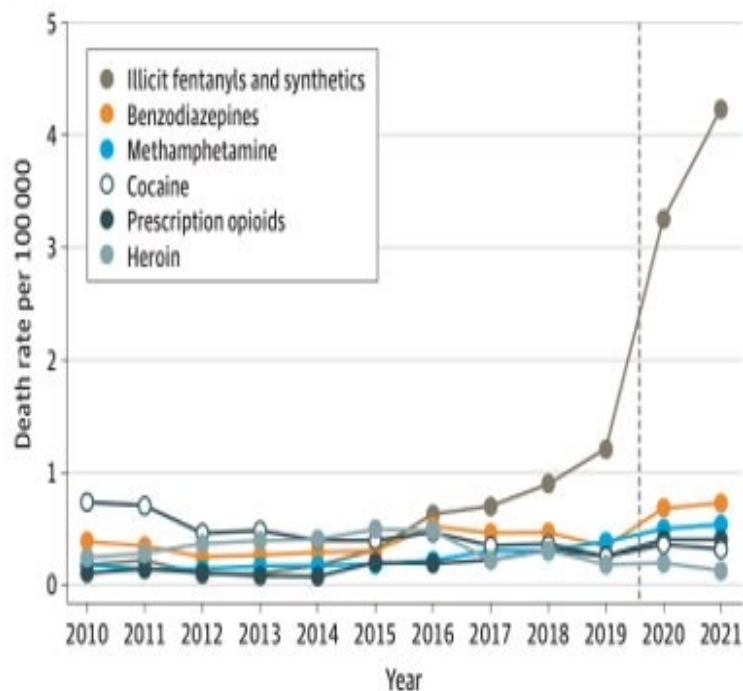
In August 2022, the Drug Enforcement Administration and law enforcement partners seized brightly colored rainbow fentanyl pills in 18 states. *Drug Enforcement Administration*

CDC-National Center for Health Statistics May 11, 2022

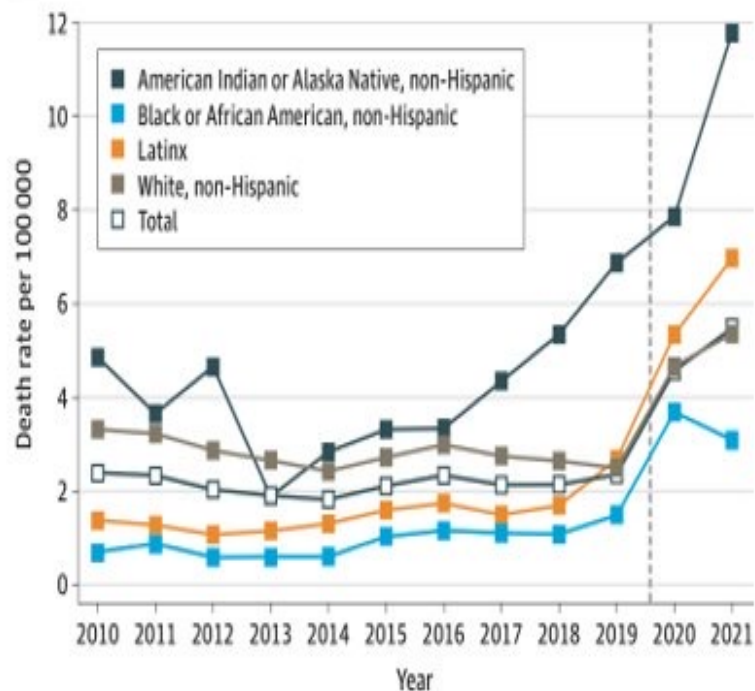
DRUG TYPE	(DEATHS 2021)	(DEATHS 2020)
Synthetic Opioids (fentanyl)	71,238	57,834
Psychostimulants (meth)	32,856	24,576
Cocaine	24,538	19,927
Natural/semi-synthetic (prescription)	13,503	13,722

Figure. Adolescent Overdose Deaths, 2010-2021

A Overdose mortality among adolescents by substance type



B Overdose mortality among adolescents by race and ethnicity



Drug overdose rates per 100 000 adolescents are shown by (A) substance involved and (B) race and ethnicity. The year 2021 refers to January to June 2021, and rates have been annualized. The vertical dashed lines delineate the prepandemic and pandemic periods of observed data.

Mental Illness and Substance Use Disorders in America in the Past Year: among Hispanics Adults Age 18+

PAST YEAR, 2020 NSDUH, Hispanic 18+

Among Hispanics with a substance use disorder:
4 IN 9 (44.2% or 2.5M) struggled with illicit drugs
3 IN 4 (75.3% or 4.3M) struggled with alcohol use
1 IN 5 (19.5% or 1.1M) struggled with illicit drugs and alcohol

Among Hispanics with a mental illness:
1 IN 4 (24.4% or 1.9M) had a serious mental illness

13.5%
(5.7 MILLION)
People aged 18 or older had a substance use disorder (SUD)

5.8%
(2.4 MILLION)
People 18 or older had BOTH an SUD and a mental illness

18.4%
(7.7 MILLION)
People aged 18 or older had a mental illness

In 2020, **25.7% (10.8M)** Hispanic adults had a mental illness and/or substance use disorder.

Mental Health

- ❖ In 2020, Hispanic young adults aged 18 to 25 had the highest percentage of Severe Mental Illness (SMI), followed by Hispanic adults aged 26-49, then by Hispanic adults aged 50 or older.
- ❖ In 2020, the percentage of Hispanic adults who had a Major Depressive Disorder was highest among adults aged 18 to 25, followed by Hispanic adults aged 26 to 49, then by Hispanic adults aged 50 or older.
- ❖ In 2020, Hispanic females aged 18 to 25 reported higher rates of MDE with Severe Impairment than Hispanic adults aged 26 or older. Estimates of MDE with Severe Impairment are not compared between youths aged 12 to 17 and adults aged 18 or older

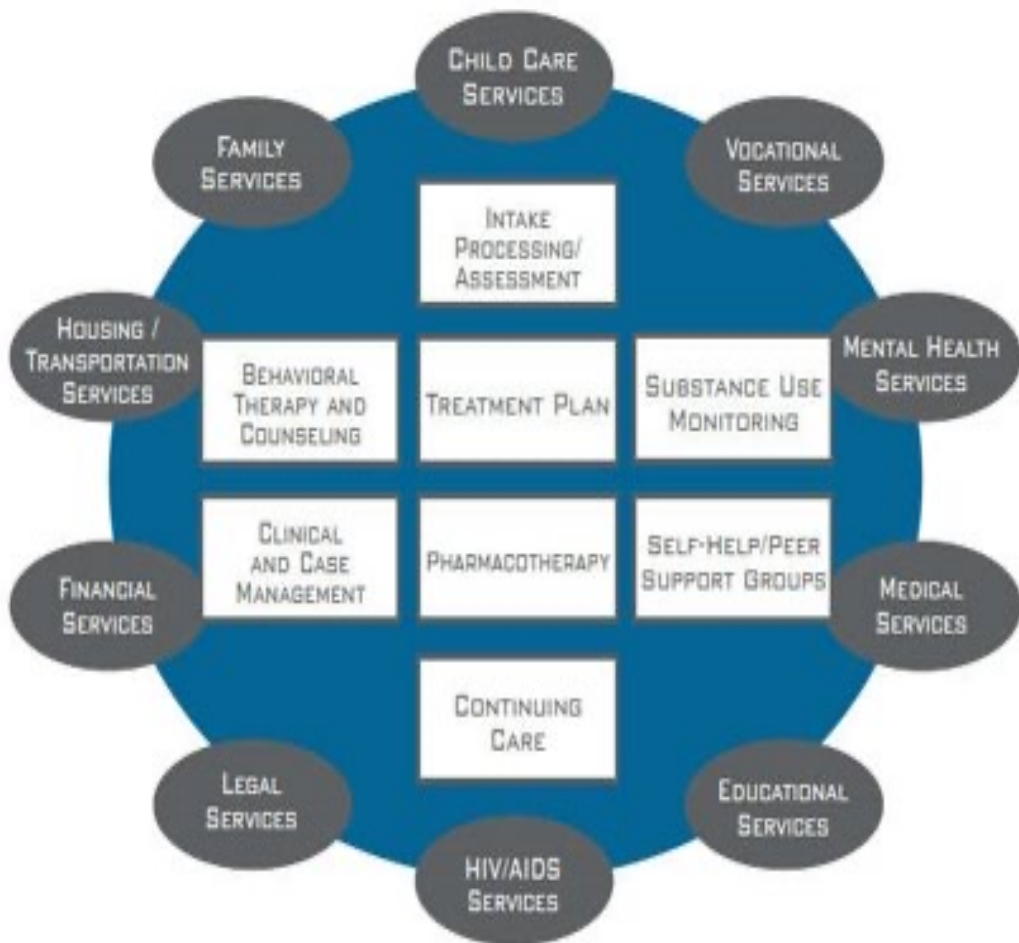
National Survey on Drug Use and Health

Co-Occurring Substance Use Disorder with Any Mental Illness

- 13.5 percent of young adults aged 18 to 25 had both a substance use disorder and any mental illness in the past year.
- The percentage of adults aged 18 or older who met criteria for both a mental illness and a substance use disorder in the past year was higher among Multiracial adults
- **Serious Thoughts of Suicide, Suicide Plans, and Suicide Attempts**
- 12.3 million adults aged 18 or older had serious thoughts of suicide in the past year, 3.5 million made suicide plans, and 1.7 million attempted suicide.
- **Hispanic or Latino adults were more likely than White or Asian adults to have attempted suicide in the past year, and Black adults were more likely than Asian adults to have they attempted to suicide in the past year.**

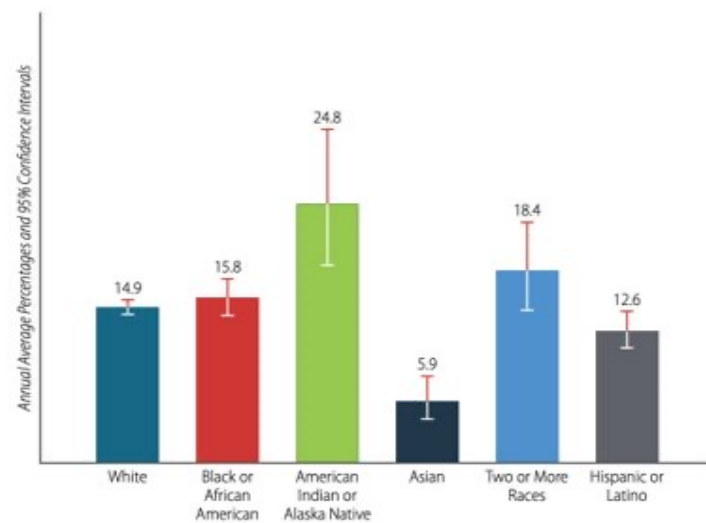
<https://www.samhsa.gov/data/release/2021-national-survey-drug-use-and-health-nsduh-releases>

Components of Comprehensive Drug Abuse Treatment



The best treatment programs provide a combination of therapies and other services to meet the needs of the individual patient.

FIGURE 7.1 Received Substance Use Treatment at Any Location in the Past Year among People Aged 12 or Older Who Needed Substance Use Treatment in the Past Year, by Race/Ethnicity: 2015–2019, Annual Averages



Note: Estimate of Native Hawaiian or Other Pacific Islander not reported due to low precision.
Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2015–2019.

Social Determinants of Health

Social determinants of health are the conditions in which people are born, grow, live, work and age that shape health.

<https://www.kff.org/racial-equity-and-health-policy/issue-brief/beyond-health-care-the-role-of-social-determinants-in-promoting-health-and-health-equity/>

Figure 1

Social Determinants of Health

Economic Stability	Neighborhood and Physical Environment	Education	Food	Community and Social Context	Health Care System
Employment	Housing	Literacy	Hunger	Social integration	Health coverage
Income	Transportation	Language	Access to healthy options	Support systems	Provider availability
Expenses	Safety	Early childhood education		Community engagement	Provider linguistic and cultural competency
Debt	Parks	Vocational training		Discrimination	Quality of care
Medical bills	Playgrounds	Higher education		Stress	
Support	Walkability				
	Zip code / geography				

Health Outcomes

Mortality, Morbidity, Life Expectancy, Health Care Expenditures, Health Status, Functional Limitations

SOCIOCULTURAL FACTORS ASSOCIATED WITH ACCESSING SERVICES

It is now recognized that the social determinants of health are critical contributing factors to major public health issues.

- ❖ **Familismo**
- ❖ **Religion, Faith and Spirituality**
- ❖ **Immigration**
- ❖ **Discrimination and trauma.**
- ❖ **Heterogeneity of the Hispanic/Latino population.**
- ❖ **Intergenerational substance use misuse and polysubstance use**

<https://www.samhsa.gov/behavioral-health-equity/hispanic-latino>

SOCIOCULTURAL FACTORS ASSOCIATED WITH ACCESSING SERVICES

- ❖ Risks for youth.
- ❖ Language barriers.
- ❖ Stigma, misperceptions, and negative narratives about SUD.
- ❖ Fear of seeking treatment and calling the usual first responders.
- ❖ Lack of culturally responsive prevention and treatment.
- ❖ Less access to Medication-Assisted Treatment (MAT).

<https://www.samhsa.gov/behavioral-health-equity/hispanic-latino>

COMMUNITY-INFORMED STRATEGIES TO ADDRESS OPIOID MISUSE AND OUD IN HISPANIC/LATINO COMMUNITIES

1. Implement a comprehensive, holistic approach
2. Create culturally tailored public awareness campaigns in native languages
3. Form diverse partnerships
4. Utilize schools

6. Build a bilingual, culturally aware and respectful workforce *
7. Develop culturally and linguistically appropriate prevention and treatment
8. Link to primary care

5.

<https://www.samhsa.gov/behavioral-health-equity/hispanic-latino>

COMMUNITY-INFORMED STRATEGIES TO ADDRESS OPIOID MISUSE AND OUD IN HISPANIC/LATINO COMMUNITIES

Community Snapshot: Building capacity through community health workers—Disparities Research Unit in Boston.

Another promising strategy for opioid prevention among Hispanic/Latino communities is the use of **community health workers (CHWs)** to lead psychosocial interventions.

CHWs can help people to learn and practice skills that are useful for addiction recovery, such as cognitive restructuring, mindfulness, behavioral activation, coping with cravings, and shifting negative thinking.

In Boston, the Disparities Research Unit at Massachusetts General Hospital is piloting a manualized Intervention for people with mental health and substance use disorders which is delivered by CHWs and available in English, Spanish, Mandarin, and Cantonese.

HISPANICS IN THE U.S. 2022



Hispanics are Critical to the Economy

WE ARE THE WORKFORCE

The future of America's workforce is Hispanic.

74 %

of US new workers are Hispanics.

40 %

of U.S. workforce growth is Hispanic.

+250 %

The growth of the latino workforce in the last 25 years.

WE ARE THE VOTERS & TAXPAYERS

An aging America is counting on Latino contributions to Social Security and Medicare.

31.5 M

Latinos were eligible to vote in 2020

\$102 B

to social security.

\$215 B

Federal, State and Local tax revenues come from Hispanics.

<https://hispanicstar.org/wp-content/uploads/2022/04/2022-Hispanics-in-the-US-30-MIN-.pdf>



National Hispanic and Latino

PTTC

Prevention Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

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Substance Misuse Prevention with Hispanic and Latino Communities in the Southeast - What Cultural Dynamics are at Play?

Collaborating TTC: Southeast PTTC
Publication Date: June 10, 2021

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Campana de Prevención de Opioides

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Spanish

Acerca de la Campaña

View the English version of the campaign [here](#).

La Campaña de Prevención de Opioides es una campaña de salud pública en los medios de comunicación para ayudar a prevenir el uso de sustancias en los adolescentes.

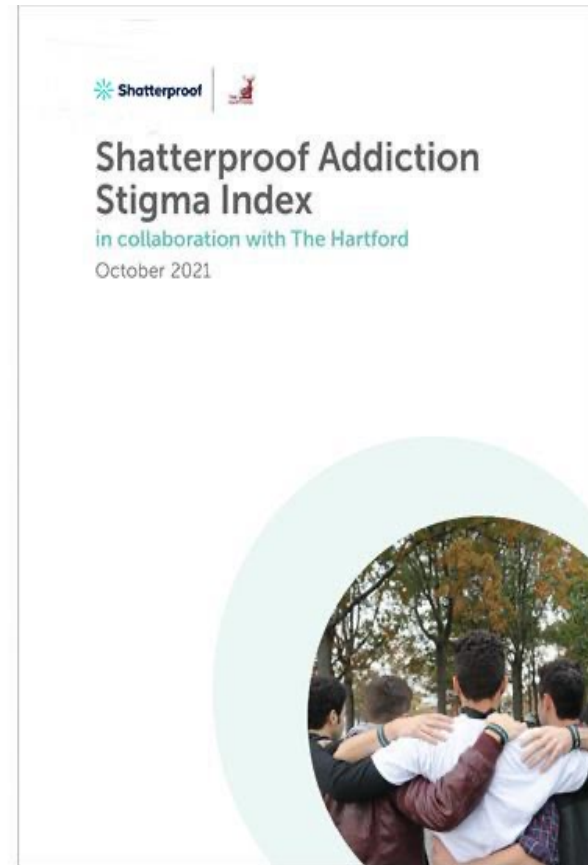
Las tasas de sobredosis han aumentado entre los jóvenes en las últimas décadas y la mayoría de las personas tratadas por el trastorno por uso de opioides (OUD) comenzaron a consumir antes de los 25 años. Según los Centros para Control y la Prevención de Enfermedades (CDC), 1 de cada 7 estudiantes de secundaria dice que han usado indebidamente medicamentos prescritos al menos una vez. La adolescencia sigue siendo un periodo crítico para el desarrollo del cerebro y un periodo vulnerable para el uso de sustancias.

12 Cosas que Los Padres Pueden Hacer



The Shatterproof Addiction Stigma Index

**The Shatterproof
Addiction Stigma
Index in
Collaboration with
The Hartford**
First-of-its-kind
research tool
confirms stigma,
discrimination
deepen addiction as
a public health crisis



The use of affirming language inspires hope and advances recovery.

LANGUAGE MATTERS.

Words have power.

PEOPLE FIRST.

The ATTC Network uses affirming language to promote the promises of recovery by advancing evidence-based and culturally informed practices.



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Q and A



Please complete the evaluation form to receive your attendance certificate!

Link is in the chat! Or use your phone to follow the Q code to the survey!

Thank you!



Resources



Opioid Use among Hispanic/Latino communities

<https://store.samhsa.gov/product/the-opioid-crisis-and-the-hispanic-latino-population-an-urgent-issue-spanish-version/PEP20-05-02-003>

<https://store.samhsa.gov/product/The-Opioid-Crisis-and-the-Hispanic-Latino-Population-An-Urgent-Issue/PEP20-05-02-002>

Opioid Overdose Prevention Toolkit

https://store.samhsa.gov/product/Opioid-Overdose-Prevention-Toolkit-Spanish-/SMA18-4742SPANISH?referer=from_search_result

Underage Drinking

<https://store.samhsa.gov/product/after-high-school-talking-your-young-adult-about-underage-drinking-spanish-version/PEP22-03-10-011>

Talk they Hear You

<https://www.samhsa.gov/hable-ellos-escuchan>

https://store.samhsa.gov/product/tthy-catalog-campaign-support-materials/PEP20-03-01-081?referer=from_search_result

Treatment Locator

<https://findtreatment.gov/locator>



National Hispanic and Latino

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Available in Spanish!

[Naloxone Guide and Resources | Technology Transfer Centers \(attcnetwork.org\)](#)

[Xylazine 101: Xylazine Use and its Impact on Communities Across the United States | Technology Transfer Centers \(attcnetwork.org\)](#)

[Fentanyl Resource Factsheet for Providers | Technology Transfer Centers \(attcnetwork.org\)](#)



<https://mhttcnetwork.org/centers/national-hispanic-and-latino-mhttc/product/caminando-en-recuperacion-espanol>

<https://mhttcnetwork.org/centers/national-hispanic-and-latino-mhttc/product/stressors-hispanic-and-latino-communities>





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The ATTC Network Mission & Vision

- Accelerate the adoption and implementation of evidence-based and promising addiction treatment and recovery-oriented practices and services;
- Heighten the awareness, knowledge, and skills of the workforce that addresses the needs of people with substance use or other behavioral health disorders; and
- Foster regional and national alliances among culturally diverse practitioners, researchers, policy makers, funders, and the recovery community.

CONNECT WITH US



<https://attcnetwork.org>



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[ATTC News](#)



SAMHSA
Substance Abuse and Mental Health
Services Administration