

Implementation Pilot Project (IPP) African American Hub

**Community-Defined Evidence Practice (CDEP)**

Community defined evidence practices include programs and interventions that are accepted and used by a group or culture, but is oftentimes not accepted, funded, or used in the mainstream mental health system. Within the California Reducing Disparities Projects, these are culturally and linguistically appropriate, as well as trauma-informed programs. They aim to improve the mental health of African American/ Black identified; Latino/x; Asian and Pacific Islander; Native American; and LGBTQ+ communities. These practices have been overlooked, erased, and underfunded by Western modalities of mental health treatment, leading to harm and stigma in these populations.

**California Black Women’s Health Project—Los Angeles County**

*Sisters Mentally Mobilized*

Sisters Mentally Mobilized (SMM) is a community defined practice and intervention of the California Black Women’s Health Project (CABWHP) that is designed to prevent and reduce mental illness severity in Black women. Sisters Mentally Mobilized incorporates the foundational advocacy and empowerment principles of CABWHP’s signature Advocate Training Program (ATP) while also building the ongoing capacity of Black women to address mental health conditions and barriers in their lives and communities. An additional component of Sisters Mentally Mobilized is the formation of mental-health focused “Sister Circles” that will be mobilized to employ culturally responsive community defined interventions that address mental health issues in the following areas: 1) identification of risk factors and symptoms, 2) stigma awareness and reduction, 3) prevention of early onset and deterioration, and 4) increased awareness, solicitation and access of care. This comprehensive and combined approach is a culturally responsive prevention and early intervention (PEI) strategy to mitigate multiple risk factors and limitations in interventions that contribute to and exacerbate mental health disparities in Black women, their families and communities.

Contact: Sonya Young Aadam | 310-412-1828| sonya@cabwhp.org | [WEBSITE](https://www.cabwhp.org/)

**Catholic Charities of the East Bay—Alameda County**

*Experience Hope for Teens*

Catholic Charities of the East Bay (CCEB) will expand and evaluate its school-based Experience Hope for Teens program to develop a better understanding of how to serve African American (AA) youth living in urban environments, such as the Cities of Richmond and Oakland, CA. Experience Hope for Teens addresses traumatic stress as a result of exposure to violence among AA youth – a need specifically described in the CRDP African American Population Report. Adolescents confronted with chronic exposure to violence face serious risks to their mental health and, if left untreated, traumatic experiences can lead to the onset or worsening of debilitating mental illness and other mental health consequences. High levels of community violence, poverty, and trauma exposure are distressingly commonplace among both Oakland’s and Richmond’s AA populations. According to recent congressional briefings by the CDC Director of the Division of Violence Prevention, low income youth living in inner cities show a higher prevalence of post-traumatic stress disorder (PTSD) than soldiers in combat zones. These children are in fact “living in combat zones,” where exposure to violence may be prolonged and repeated in multiple environments (Spivak, 2012). Ongoing, repeated exposure to trauma has extremely negative effects on both individual students and the overall academic environments at local schools.

*Experience Hope for Teens Outcome Data*

* Populations served: 120 African American participants ages 11-14
* Hours of service: 711 hours
* Outcome Data
  + 86% of students participating in Experience Hope groups or one-on-one supports show overall gains in social-emotional skills (e.g., emotional self-regulation, help-seeking, empathy, and dealing with interpersonal conflict)
  + 84% of students participating in trauma-informed mental health services showed reductions in trauma symptoms
* Programmatic Solutions: Our work supports relationship building & engagement in Black youth & teaches survival skills in response to the trauma of pervasive oppression they are subjected to. Black youth are failed by schools that should teach & heal; they become entrapped in systems of management and control that are our social service/justice systems.
* COVID-19 Accommodation: We have been successful in pivoting to virtual platforms with our youth. Our clinician and Restorative Practices Specialist were so well integrated into the school and such a pivotal part of the Coordination of Services Team that they were able to continue services with our youth seamlessly. Our youth were truly engaged in services and continued to meet virtually with our providers. As the 20-21 school year has progressed our staff have been able to join administrators, teachers, and youth in their virtual classroom experiences. Individual services are well underway, and groups began the week of October 5th 2020.
* Other outcomes? Most importantly, success is defined by the IPP! It is not necessary to include local evaluation data, although that is welcome. We know that each CDEP is different and the information that each IPP feels comfortable sharing broadly is also different. It is important that we tell the story of success in the voice and with the approval of each IPP.

Contact: Michelle La Place-Watts| 510-867-0358 | [mwatts@cceb.org](mailto:mwatts@cceb.org) | [WEBSITE](https://www.cceb.org/)

**Healthy Heritage Movement—Riverside County**

*Broken Crayons... Still Color Project*

The Broken Crayons...Still Color Project (BCSCP) is a prevention program, which aims to limit and reduce depression, anxiety, post-traumatic stress disorder (PTSD), and substance abuse. The program is designed to assist African-American women ages 18 and older to become more knowledgeable about mental illness, reduce stigma, understand what constitutes good mental health, root causes of mental illness, and strategies for the treatment and prevention of mental illness.

It addresses the Phase 1 priority population strategy: providing insight into mental health topics among African-American women in selected faith-based churches.

Contact: Phyllis Clark| 951-229-7845 | [pyclark@healthyheritage.org|](mailto:pyclark@healthyheritage.org|) [WEBSITE](https://healthyheritage.org/)

**Whole Systems Learning—Riverside and Los Angeles Counties**

*Turning Resilience Into Brilliance for Eternity (TRIBE) Program*

The Turning Resilience Into Brilliance for Eternity (TRIBE) Program is a prevention and early intervention program that aims to prevent or intervene in the early onset of the effects of posttraumatic stress disorder (PTSD) and complex post-traumatic stress disorder (C-PTSD) for foster and adjudicated AA male youth. The CDEP does this by increasing resiliency through skills building, identity development, peer support and mentoring, opening the aperture to higher education, and widening the access to mental health services. Utilizing an ecological approach and brain-based learning, the TRIBE CDEP is designed to address Phase 1 priority population strategy of building on community strengths and demonstrably improving the quality of mental health services by providing services that are culturally congruent, sensitive and competent. The program outcome measures will be, decrease the risks for skid row and homelessness, prison, drug addiction, educational failure, and mental illness, including Complex Post Traumatic Stress Disorder (C-PTSD), depression, suicide, anxiety, and reactivity. Additionally, the CDEP anticipates increases in adaptability, self-efficacy, and social connectivity.

*Turning Resilience Into Brilliance for Eternity (TRIBE) Program Outcome Data*

* Populations served: 50 African American participants ages 18-29
* Outcome of participants: Decrease in depression, increase in life satisfaction and sense of coherence.
* Programmatic Solutions: Addressing issues of identity, power, purpose, and trauma
* COVID-19 Accommodations: We almost immediately took all of our in-person workshops and classes online. We added additional classes that allowed the participants to tell their stories as a way to reduce trauma. These classes included digital media marketing, and broadcasting/podcasting, which is in addition to our professional level music production studio. We have three primary workshops: “Know Thyself”, which uses culture, history, and personal history reframing to empower gang-involved or street life involved African American youth to discover the endless possibilities for their lives. “Technopreneurship”, which allows the youth to identify their purpose and take concrete steps to implement that, creating money out of nothing. The third workshop is “Hip Hop Heals” which creates a sacred space where participants share their trauma healing with a hip-hop flavor contributed by the "Godfather" of West Coast Hip-Hop. We have also implemented an online case management system that allows us to do pre and post testing, and case management online, and have been able to access additional funding sources because of our success in recruiting participants.
* Other outcomes? We take gang involved youth who have had multiple prison sentences, and create pathways and opportunities for lifestyle, mental models, and world views to change. We use music as a way of engaging youth.

Contact: Eba Laye | 310-710-1822 | [eba@wholesystemslearning.org](mailto:eba@wholesystemslearning.org) | [WEBSITE](https://www.wholesystemslearning.org/)

**Safe Passages—Alameda County**

*Law and Social Justice Life Coaching*

The Safe Passages Law and Social Justice Life Coaching Project (LSJ Life Coaching Project) is a prevention and early intervention program that aims to prevent and/or reduce exposure to chronic stress, including trauma from their experiences growing up in poverty, exposure to racism, being disenfranchised from the education system, and being subjected to the Juvenile Justice system, including incarceration, for African American adjudicated youth ages 16 to 21 by decreasing: mental illness or the severity of symptoms associated with trauma or mental illness, suicide, toxic stress on youth and their families, school failure or drop out, unemployment, incarcerations/ recidivism, homelessness, and increasing/improving: seamless coordination among programs and systems, exposure of community to the program and its resources, streamlined access to services, local infrastructure to support the reduction of mental health disparities, program enrollment, relationships with caring adults, healthy relationships, happiness, mental health, family stability, family strength, engagement in learning, academic outcomes, likelihood of high school graduation, enrollment in post-secondary educational and training programs, access to trauma informed care, access to mental health services, financial literacy, economic stability, employment stability, resiliency and pro-social/resiliency/ protective factors, life skills, coping strategies, ability to navigate education and juvenile justice systems, and family engagement. It is designed to address the following Phase 1 priority population strategies: Life Coaching and Case Management Services; Life Skills/Know Your Rights, and Family Engagement/Coaching as a means to attain the aforementioned outcomes.

*Law and Social Justice Life Coaching Outcome Data*

* Populations served: 76 African American participants ages 16-21
* Hours of service: 7,608 hours of service
* Outcome Data: 74% of participants experienced a positive change on one or more protective factors (such as connection to culture, balanced mind/body/spirit/soul, and less marginalization and isolation).
* Programmatic Solutions: Our CDEP provides a model of trauma-informed life coaching, systems navigation, and cultural historical awareness. The model is asset-driven and designed to empower young people through life coaching and youth development to build greater academic, career, personal, and relationship success to substantially reduce stress levels.
* COVID-19 Accommodation: Safe Passages migrated 90% of programmatic and evaluation activities to multiple, virtual platforms. As an agency, we leveraged our infrastructure to increase support to meet the critical urgent needs in the communities that we serve.
* Other outcomes? For school year 2019-2020, 94% advanced to the next grade level, and 100% did had no further systems involvement.

Contact: Nina Moreno | 718-751-6901| [nmoreno@safepassages.org](mailto:nmoreno@safepassages.org) | [WEBSITE](https://safepassages.org/)

**The Village Project, Inc. — Monterey County**

*Emanyatta Project*

The Village Project, Inc.’s Emanyatta Project is a prevention and early intervention program that is intended to prevent and/or reduce symptoms of clinical depression and anxiety in children from kindergarten to 4th grade. The project necessarily involves families of these children for the purposes of support in these efforts as well as to strengthen the resilience and internal strengths of the children. It is through this involvement that the Phase I priority of family psycho-education is achieved. An additional component to strengthen the internal resources of the children is the project’s focus on building pride in cultural and ethnic heritage as a means of achieving higher levels of academic achievement and self-esteem.

*Emanyatta Project Outcome Data*

* Populations served: Our CDEP has served 45 warriors participating in our Emanyatta Saturday School ages 5 -9.
* Hours of service: We have spent over 1,156 hours of service.
* Outcome Data: 100% of participants report feeling pride in their African ancestry.
* Programmatic Solutions: Programmatically, our CDEP’s solution to reducing mental health disparities has been stigma reduction which has allowed people of African ancestry, often for the first time, to seek treatment. We have an agency that provides mental health treatment in a culturally accommodating and welcoming way.
* COVID-19 Accommodation: Our CDEP has gone virtual and continues to provide our participants a forum to engage in our Emanyatta Saturday school, as well as our summer enrichment and after school programs. We continue to provide hardship support to the families of our CDEP as well as the greater community. In spite of COVID-19, we are providing our participants with a myriad of support services in order to help them cope with the pandemic, both mentally, spiritually and financially.
* Other outcomes? Yes, there is a power point presentation that we would like to share that captures the magnitude of our CDEP but it will not upload and I would request your support in order to upload the presentation.

Contact: Regina Mason| 951-229-7845| [regina@villageprojectinc.org](mailto:regina@villageprojectinc.org) | [WEBSITE](https://www.villageprojectinc.org/)

**West Fresno Health Care Coalition—Fresno County**

*Sweet Potato Project*

The Sweet Potato program at the West Fresno Family Resource Center is a prevention program that aims to prevent and/or reduce school drop-out, gang involvement, and substance use initiation for African American youth ages 12-15 by decreasing internalized oppression, hopelessness, and low collective efficacy, while increasing engagement in collective economic activity, college intentions, mentoring, and leadership development. It is designed to address the Phase I African American strategic recommendations to focus PEI (Prevention and Early Intervention) on community-based efforts specifically addressing African American culture and to address the co-occurrence of mental health conditions and socioeconomic challenges.

*Sweet Potato Project Outcome Data*

* Populations served: 105 Youth ages 12-16
* Hours of service: over 2,000 hours in one year
* Outcome Data: Compared to year one data, year two data indicate that after the program participants want to go further in their education not just by obtaining a professional or university degree, but also through other opportunities.
* Programmatic Solutions: The goal of a prevention program in the CRDP model is to reduce individual/family or community risk factors or stressors, build protective factors and skills, and increase support; promote positive cognitive, social and emotional development and encourage a state of well-being.
* COVID-19 Accommodation: We have pivoted to an on-line curriculum with weekly discussion through Zoom. Our curriculum includes, Self-Esteem, Leadership, Resiliency, African American History, games and weekly discussion on current affairs. For example, youth express concerns with on-line learning at home, some youth express challenges, lack of directions from teachers and feeling bored and isolated.
* Other outcomes? Participants were asked to answer how much they agreed with the statement about enjoying making plans for the future, by the end, most indicated that they agreed with this statement. The results indicate hope for the future.

Contact: Yolanda Randles | 559-621-2967| [yrandles@wfresnofrc.org](mailto:yrandles@wfresnofrc.org) | [WEBSITE](http://www.wfresnofrc.org/project-page)

**About California Reducing Disparities Project (CRDP)**

California Reducing Disparities Project (CRDP), under Prop 63 (Mental Health Services Act), funds 35 culturally responsive, innovative Implementation Pilot Projects (IPPs) across the state of California working in the five population groups: African American/ Black identified; Latino/x; Asian and Pacific Islander; Native American; and LGBTQ+. The goal of the CRDP is to simultaneously demonstrate that community derived mental health practices reduce mental health disparities across the five unserved, underserved, and inappropriately served population groups as opposed to traditionally funded mental health services based on Western clinical models.