

Moving Beyond Survival Mode:

Promoting Mental Wellness
and Resiliency as a Way to
Cope with Urban Trauma



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Official Media Release

Moving Beyond Survival Mode Report Preface

Toolkit Components

Ivan J. Juzang Bio





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New Report Details Living in “Survival Mode:” Why Some African Americans Thrive, While Others Merely Survive Emotional Challenges

(Philadelphia, PA) — In spite of their challenging environments and life situations, positive coping behaviors and protective factors may explain why some low-income urban youth who experience ongoing stress and trauma in their lives thrive, while others crumble, according to a new report released today by MEE (Motivational Educational Entertainment) Productions, Inc., in partnership with the Washington DC Department of Mental Health.

“Modern developmental neuroscience tells us teenagers are like cars with all ‘gasoline’ and no brakes,” said Dr. Carl Bell, a leading psychiatrist who served on the expert panel for the research. “Parents and society need to provide young people with ‘brakes and a steering wheel’— the protective factors they need to keep these teen risk factors from causing bad future outcomes.”

An extraordinarily frank report, *Moving Beyond Survival Mode: Promoting Mental Wellness and Resilience as a Way to Cope with Urban Trauma*, summarizes findings from 14 focus groups conducted with low-income Black mothers and young urban adults in four American cities in 2009. The report offers sobering insights on the stresses and traumas of unrelenting poverty and violence; what it’s like to live in “survival mode;” and the major barriers that inhibit access to community mental health services. A consortium of healthcare foundations, mental health agencies and violence-prevention organizations sponsored this research project and report.

“Because mental and emotional issues impact behaviors in so many areas—including, substance abuse, interpersonal violence and sexual health—this research is of direct relevance to a wide cross-section of organizations and agencies,” said MEE Founder and President Ivan Juzang. “It is critical to helping people think and talk about the issue of mental wellness in the Black community, and to helping create a common language and framework that can be used to educate the community on this issue.”

The report recommends intensive, sustained and culturally community outreach to engage African American families who are most at-risk. Mental health service providers need to build a bridge between their own professional knowledge and perspectives and an individual youth’s feelings, needs

and interests, by developing communications strategies that “meet people where they are.” At the same time, the report asserts, low-income African Americans need to understand that they have choices in the way they go about seeking mental wellness for themselves and their family. Finally, “Moving Beyond Survival Mode” calls for using protective factors as a framework that would lead a shift from mental health treatment as a focus of funding and programs to a prevention focus – one that helps “inoculate” young people against traumas they will face.

Key findings of the report include:

- **Stress and trauma are constants in the lives of today’s low-income, urban African Americans, and continue to take a devastating toll on their psyche.** Many causes of stress were named by the young people in this study, spanning a wide range of urban issues that make “just trying to live” a major challenge — from finding jobs, to interactions with the criminal justice system, to household/familial problems. Not having money and finding ways of acquiring it were enormous causes of stress for this segment of the American population. While young Black men spoke regularly about the trauma of surviving the streets, young Black women more often cited stressors related to interpersonal relationships
- **Positive coping behaviors and protective factors can act as a foundation for building toward increased resilience and mental wellness.** Young people said having internal goals and a strong support system, believing in a higher power (faith/spirituality), and being able to see beyond one’s immediate circumstances all help them “bounce back” from life’s challenges. By better understanding the positive coping mechanisms young people use to respond to stress, communities can help promote the prevention of mental illness and reinforce protective factors that help low-income Black youth thrive.
- **Stigma remains a major barrier to accessing community mental health services.** Young adults reported that people aren’t getting help for mental health issues because “*who wants to be viewed as crazy?*” Many believed that asking for help for an emotional problem is a sign of weakness. Other participants said some people are in denial about their own mental health issues, or that they aren’t seeking help for violence or depression because they consider the things around them to be “normal.”
- **A lack of diversity among mental health professionals is also contributing to under-use of behavioral health services and programs.** Participants consistently commented about not having mental health service providers who “look like them” and share their backgrounds and experiences. While providers in our focus groups pointed out that many of their mainstream peers try to be culturally sensitive, they said that they often fall short.

This two-year research project examined the mental and emotional needs that lead to disastrous choices and behavioral consequences among youth. The research design included expert interviews with top experts on psychology, mental health and urban youth issues; focus groups; and an extensive data coding process. At the project’s core, we collected qualitative data from low-income African American mothers/caregivers (ages 35+ who had adolescent sons ages 14-17) and from African-American young adults (ages 19-22, separated by gender), along with community-based service providers in four cities: Washington, DC; Oakland/Richmond, CA; Chicago, IL; and Philadelphia, PA.

The comprehensive MEE report is accompanied by a video documentary featuring excerpts from the focus groups and expert interviews. In addition, as a result of the findings in the report, MEE has developed a multi-component toolkit that includes the kind of culturally relevant materials that are needed in order to begin a community-wide dialogue with African American young adults and parents about the importance of mental wellness—and how to achieve it. It also provides CBOs, service providers, public agencies and institutions with methods (tools and communication strategies) to effectively address the identified provider-client cultural gap in the delivery of behavioral health services. Chicago and Philadelphia will serve as two of the first cities to implement some of the recommendations in the report, using the Community Mental Wellness Toolkit to inform the work of their behavioral health providers.

“*Moving Beyond Survival Mode* is critically important reading,” said Dr. Joe White, Professor Emeritus of Psychology and Psychiatry at University of California Irvine, and a nationally renowned expert on psychological trends within Black and urban communities. “The report hits all the major points with respect to coping strategies, community reluctance to use existing mental health resources, and the whole movement toward prevention and wellness, as opposed to illness.”

For more information:

To download the online press kit, including an overview outlining key findings and recommendations, go to www.meeproductions.com/PDF/mhmediakit.pdf.

About MEE and the Partnering Organization

MEE Productions Inc. (www.meeproductions.com) is an internationally recognized research, communications and marketing firm that develops research-based, market-driven solutions for issues facing urban and low-income populations living in at-risk environments. MEE specializes in developing cost-effective and culturally relevant messages for hard-to-reach urban and ethnic audiences. The company is headquartered in Philadelphia, with satellite offices in Washington DC and Los Angeles. MEE’s proprietary research methodologies, award-winning media productions and innovative campaigns are designed to meet the changing needs of underserved, low income and urban populations around the world.

For more than 30 years, the **Community Mental Health Council, Inc.** (CMHC), a multi-million dollar comprehensive community mental health center headquartered on Chicago’s South Side that has helped tens of thousands of individuals and families who struggle with the challenges of mental illness. CMHC focuses on placing clients and their families on a lifelong path to mental, emotional and physical wellness. The President and CEO is internationally renowned psychiatrist, author and educator, Carl C. Bell, M.D., who has conducted groundbreaking research that examines the effects of race, culture and ethnicity on behavioral healthcare issues. Dr. Bell is also Director of the Institute for Juvenile Research; Director of Public and Community Psychiatry; and Clinical Professor of Psychiatry and Public Health at the University of Illinois at Chicago.

Other sponsors included The California Endowment; the Division of Behavioral Health of the City of Philadelphia Department of Public Health; the Blueprint for a Safer Philadelphia; the Illinois Violence Prevention Authority; the Illinois Children’s Mental Health Partnership and MEE Productions Inc.

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The research team is very grateful for the assistance we received from a number of sources in carrying out this project. The findings and recommendations in this report are those of the authors and do not necessarily reflect the views of the sponsors.

MEE dedicates this primary research to the late Dr. Asa G. Hilliard, III, an extraordinary educator and psychologist, whose visionary spirit and expertise on African history and culture has informed much of MEE's work as socially-conscious researchers.

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Preface

Revisiting America's Inner Cities

"You're never the same after...violence or the death of a loved one. But the question is, can you incorporate that and become stronger in the broken places?"

Those words from Dr. Joseph White, a "founding father" of Black psychology, have poignant relevance in much of MEE's work over the past two decades. Whether it's in the voices of the young adults who shared their stories in our *This Is My Reality* sexuality research, or in developing and implementing a multi-year violence prevention campaign for the *Blueprint For a Safer Philadelphia* initiative, or in witnessing power struggles between the sexes in our dating violence research (*In Search of Love*), or in talking to parents interested in advocating for environmental and policy change to reduce childhood obesity – it's clear that being poor and Black in America corresponds with unremitting trauma and stress.

MEE has conducted focus groups in some of the hardest-hit neighborhoods in America – from the South Side of Chicago to South Central LA, from North Philadelphia to Southeast DC, in post-Katrina Louisiana and many more. When we talk to people living in these communities, two factors constantly come up – stress and trauma (often preceded by violence). Trying to make do with less, feeling that America has no seat left for you at the table, dealing with poverty and confronting all of the various "-isms" in our society – all of them converge together to render poor Black people angrier, more depressed and living in fear. Many of the young people have low self-esteem and few positive role models. At the same time, we observe incidents in major urban cities that are bleak manifestations of dysfunction, anger and more. These include gang rapes, fatal beatings



because an adolescent was in the wrong part of the city and chart-topping hip-hop singers involved in brutal dating violence incidents.

Why is This Happening?

Over the years, MEE has done much of its work in urban communities dealing with the “effects” side of the equation. We have seen the devastating impact of obesity; street, dating and domestic violence; risky sexual behaviors; HIV/AIDS; and dropping out of school – all of them both responsible for and manifestations of underlying emotional and psychological problems that are disproportionately impacting low-income populations.

For the past 17 years, MEE has been searching for the common thread, looking for insights that would help identify the cause—the “why.” What we have learned over this time is that poverty, the generational cycle of family dysfunction, and feelings of abandonment and anger at an oppressing “system” lead people to negative behaviors that have profound consequences at the individual and community level.

How does one’s state of mind and overall mental health play out in interpersonal relationships? In one’s ability to focus at work and school? In making life choices? These are the kinds of questions that have led us to the current research.

In the heart of today’s inner cities, hopelessness and resilience co-exist. But it’s clear that the day-to-day toll of poverty, racism, child maltreatment, violence, fatherlessness and more, has had a devastating impact on our community. That’s why MEE has gone back to the source, conducting community-participatory research to explore how to best improve mental wellness among the people who need it most. At the same time, we are trying to increase the overall knowledge base



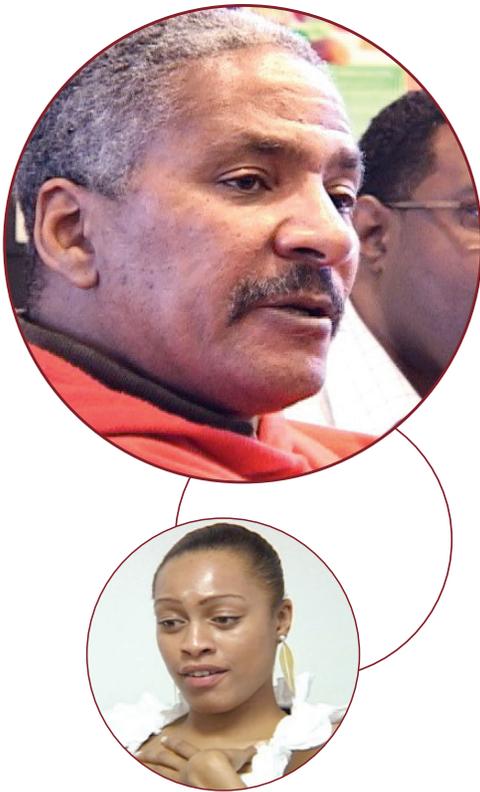
and facilitate a dialogue that will help educate the African-American community, national policymakers and local service providers about the need for culturally-relevant strategies to promote mental wellness.

Why a Study on Black Mental Health is Needed

What so many at-risk populations experience in their daily lives leads to stress, trauma, serious depression, and other mental health problems including suicidal behavior and even schizophrenia. Many low-income people who are exposed to ongoing trauma may not fit the classic designation of “mentally ill,” but they are emotionally injured and “beaten down” from the constant struggle to survive poverty, broken homes, child abuse, violent communities, poor schools, institutional racism, police harassment and other social ills.

The overwhelming stress and trauma can also lead to serious physical illnesses like diabetes, hypertension, heart and liver disease. Moreover, it leads to inner city death rates that are far greater than those of mainstream society.

While poor people of color need multiple levels of emotional support, historically, far too many have fallen “through the cracks.” Many low-income African Americans who need mental health support have simply opted out of seeking help. Compounding the issue, those in the “inner circle” – family members, peers and others around them who are often struggling themselves – often don’t recognize the signs and symptoms of mental or emotional issues, and can’t make referrals for assistance. At the individual and organizational level, many in the community are uninformed or confused about what they can do to help.



Nonetheless, effective outreach to families who need prevention and treatment options most may mean the difference between success and failure for generations of low-income residents.

Mental illness continues to be overlooked and misdiagnosed in poor Black communities. It is critical to get people to begin thinking and talking about the issue of mental wellness in the Black community, and to create a common language and framework.

But we also need to understand how mental wellness and mental health services are currently viewed. Thus we have embarked on this community participatory research with African American mothers and young adults to explore the causes, barriers, attitudes and behaviors related to mental health and wellness.

Getting to the Core Issues: The Research

This two-year research project was designed to examine the mental and emotional needs that lead to disastrous behaviors and choices among youth. Starting in 2008, we began developing a research design that includes expert interviews, focus groups, and an extensive data coding process. At the project's core, we have collected qualitative data from African American mothers/caregivers (ages 35+ who have adolescent sons ages 14-17) and from African-American young adults (ages 19-22), along with community-based service providers in four cities: Philadelphia, PA; Chicago, IL; Washington, DC; and Oakland/Richmond, CA.

We have augmented the focus group research with a series of expert interviews with three of the top minds in the field. Drs. Carl Bell, Howard Mabry and Joseph White are among the most respected names in public and mental health; they reflect a wide range of experiences



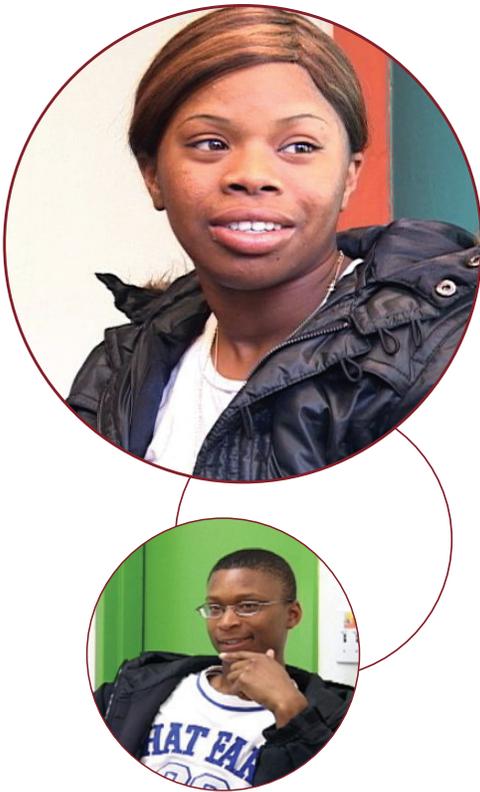
and backgrounds. Their insights and feedback on our initial research design have also helped us determine the most relevant areas of focus and inquiry.

Prior to the focus groups, MEE held a series of Chat & Chew information sessions as part of our project planning activities. We invited local community leaders, grassroots organizations, outreach workers and gatekeepers to hear about our planned research. The critical importance of incorporating community leadership and their input had us bring them to the table early on in the planning process – both to explain our motives for the research and to get their buy-in and agreement to provide access to the community members they serve. In return, we have promised to share what we learned in our research in order to improve the health and life outcomes of underserved communities.

At the “Chat & Chews,” people from the community asked us to go beyond merely doing research and reporting findings. Because they already know that mental health issues are negatively impacting communities, they wanted a focus on *solutions*. They asked for easy-to-use tools that would work within their “frontline” community settings.

MEE used proprietary data collection and technology-driven data coding and analysis methodologies to:

- Uncover the attitudes and beliefs of low-income African Americans regarding mental health and wellness;
- “Get under the surface” of the negative myths or misconceptions about mental illness and its treatment;
- Explore the social, cultural and environmental barriers that impact the decision-making process for seeking mental health services;
- Identify arguments that people of color express against seeking help for mental or emotional issues;



- Uncover protective factors that strengthen coping and survival strategies and thereby help prevent mental health issues;
- Find out how to better prepare schools, youth service providers and mental healthcare organizations across the country to develop effective, culturally-relevant and user-friendly service delivery models, programs and outreach; and
- Identify the message concepts that can be used as counter-arguments to the reasons people use to justify not accessing mental health services. This includes developing persuasive appeals that can begin to de-stigmatize the use of mental health services.



Deliverables, Outcomes and Uses of the Research

Our research findings have a number of applications, and are being presented in this executive summary, a full research report and in a video documentary that starkly presents the voices of inner city residents. By honestly illustrating the emotional trauma – much of it chronic – that underserved populations experience in their daily lives, we hope readers and viewers will be spurred to think and talk more deeply about mental wellness issues in the Black community.

Living in “survival mode” spans a breadth of issues that make “just trying to live” challenging, from finding jobs and getting money to interactions with police and the criminal justice system to navigating dysfunctional relationships and home lives. Participants in this community-participatory research spoke poignantly about what it takes to survive the streets and about how dealing with kids, family members and intimate relationships is stressful. Money issues (not having any or enough) consumed much of their thoughts.

Most of the young adults in these focus groups were raised in single-parent homes, had lost a family member, were exposed to violence in

the home, grew up in poverty and had witnessed street violence. Participants said there is constant pressure to be strong, angry or tough in order not to seem weak in the eyes of others, because they will try to hurt or take advantage of you. As one young man in Chicago shared, “mental health care is a small problem in comparison to the other things they are dealing with.”

African American youth and families living in poor and at-risk communities need a strong mental wellness support system. It is our hope that these findings and recommendations can help serve as a foundation for such a system, one that promotes and utilizes culturally-relevant messages that de-stigmatize the seeking of mental health support as a “sane” response to trauma and constant stress.

We believe that our multi-city focus group research findings can help agencies, CBOs, churches, foundations and policymakers reach out to the broader community about the importance of culturally-relevant mental health services and programs, both for prevention and treatment. This research also can help service providers gain a better understanding of the worldview of youth and families who require mental health support, and assist providers in more effectively conducting outreach and the provision of services to them. The research provides parents and school-based staff with information about potential indicators of emotional and psychological issues, along with protective factors that can support young people in dealing with such issues. In addition, we provide emergency room personnel with guidance on how to support people who have been victims of or witnesses to serious violence.

To support these various applications, we have also created a CBO/provider “Toolkit” that can help persons working in low-income communities better understand how issues related to mental wellness impact a myriad of social and



public health issues. We present the connection between “cause and effect,” and provide tips for dialogue with young people who exhibit signs of withdrawal, anger or low self-esteem. The Community Wellness Toolkit can also help CBOs more effectively engage in community outreach to promote mental wellness.

This audience research can be a foundation for future communication initiatives targeting low-income communities. Comprehensive intervention campaigns need to be developed that include social marketing activities and outcome evaluations. Such community education campaigns could raise awareness, reduce stigma and place critical mental health and wellness information directly into the hands of the families and individuals who need it most.

We know that communities of color are likely to respond to authentic, credible and action-oriented messages. Customized messages need to be developed that directly target teens and young adults – with separate but equally compelling messages for parents and other caregivers. By promoting mental wellness as a way to deal with many of the limitations society has placed upon low-income urban residents, we can help those with adverse life experiences to “become stronger in the broken places,” assist them in their recovery, and provide a positive means to cope, heal and thrive.

Ivan J. Juzang
Principal Investigator
MEE Productions Inc.

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How to Use this Toolkit

Moving Beyond Survival Mode: Promoting Mental Wellness and Resiliency as a Way to Cope with Urban Trauma

Below is an overview of the various components of the Toolkit package. They reflect various ways to get low-income communities talking about an issue that currently carries a lot of stigma. This way, you can quickly look at information aligned closest to your individual interests and needs, along with your organization's audience, program and objectives.

2 Stress and Trauma in Daily Life

What are the major stressors that young adults are dealing with on a daily basis? This sheet organizes them by gender, since there were differences in the stressors identified by males and females. This sheet can be used in informally assessing how many stressors a young person may be dealing with in his or her life.

3 Something is Wrong: How to Recognize Signs of a Mental or Emotional Issue

Indicators of mental or emotional issues in adolescents and young adults. These are parent/provider-noticed signs of a potential mental or emotional issue.

4 Using Oral Communications to Counter Arguments Against Mental Health Services

Holding a One-on-One Dialogue About Mental Health Services. Focus group participants articulated many reasons why they have not and will not access local mental health resources. In order to begin to change perceptions and behavior, providers and others must be able to “counter” these arguments with culturally relevant counter arguments that reflect oral communications culture. (See document for more background.) Both the arguments and counter arguments on this sheet came from focus group participants. This document provides some of the “raw materials” you need to begin communicating with youth and young adults in your community about mental wellness; feel free to customize them based on specific incidents, needs and interests. Understanding the arguments will help you be prepared for an open and honest dialogue that will start the process of behavior change.

5 What Is Mental Wellness?

This document compares provider vs. community terminology for mental health and mental wellness, i.e., academic/professional definitions vs. the community's view.

6 Mobilizing Your Community for Better Mental Health: How to Work with CBOs

MEE's “how-to” on grassroots community mobilization is based on nearly two decades of expertise in engaging and motivating urban communities to take action. This guide will help ensure that your overall approach to community mobilization is right on target. Keep the enclosed tips in mind to help to make the process as smooth and successful as possible.



7 **Let's Talk About Mental Wellness: How to Organize Community Events**

This tip sheet provides important pointers on how to kick-start a community dialogue about mental wellness. It will help you gather the community in town hall meetings, community forums or small group sessions in order to begin a much-needed examination and discussion of mental wellness.

8 **Using Creative Outlets to Talk About Tough Issues (Case Study of Youth Activity)**

Interactions with police and the criminal justice system was an ongoing stressor, particularly for young males. This Case Study shows the process MEE used to leverage media popular with youth to get young people to articulate their feelings and begin to work through a particular stressor. Creativity is one of the protective factors that can prevent or reduce the effects of stress and trauma. The case study shows how music, spoken word and poetry can be tools for mental wellness.

9 **What's Your Plan: A Goal-Oriented Activity to Support Thriving (vs. Merely Surviving)**

A deteriorated social fabric means there are often too few role models in low-income communities. Adult mentors, whether older relatives, coaches or parents, can have a tremendous impact on a young mind. Being paired with a mentor who is “walking the walk” can help guide the younger generation past merely surviving challenging circumstances to thriving. This tool helps adults assist young people with developing a realistic “game plan” for future success.

10 **Community Outreach Flyer Templates**

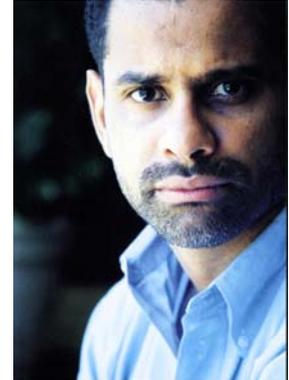
These MEE-developed flyers use culturally-relevant core messages to begin raising awareness in the community of the need for mental wellness. One is targeted specifically to young African-American males; the other can be used with females and/or the broader community. Both contain an educational message, a call-to-action slogan and a blank box that organizations can customize for use to publicize local activities and programs promoting community wellness. Sample Resource Flyer and Outreach Flyer templates contained in the Toolkit are included for your customization. You may add your own logo and event information to the template or use it as a model to develop a piece containing information specific to your event, needs or interests. You can download electronic PDF and JPEG files of the templates at www.meeproductions.com/mentalwellness.

11 **Resources for Mental Wellness**

This flyer lists relevant local resources in Chicago related to mental health and wellness. These resources are an important first step in getting people the help they need.

The Principal Investigator Biographical Sketch

The Principal Investigator for this research project, MEE Founder and President Ivan Juzang, along with his research team, are experts in primary prevention, social marketing and communications strategies targeting America's hardest-hit communities. MEE has its origins in 1990, when Juzang established the business while he was completing his degree at the University of Pennsylvania's Wharton Graduate School of Business. For the past two decades, Mr. Juzang and his team have tackled some of the toughest social and public health issues across America.



Moving Beyond Survival Mode is his sixth major research report on urban culture and behavior. Juzang has conducted hundreds of focus groups in some of the hardest-hit neighborhoods in America—from the South Side of Chicago to South Central LA, from North Philadelphia to Southeast DC, in post-Katrina Louisiana and many more. He is an innovative researcher and entrepreneur with two decades of practical, first-hand experience working in at-risk, minority communities across America. He has gained an extensive amount of experience in using community-based participatory research methods in a socially responsible manner.

Mr. Juzang has become a leading expert in the field of strategic communications, and has an exceptional knowledge of the public health, social and educational issues impacting underserved communities. He also serves as Officer-in-Charge for all of MEE's major communications research and public health projects. He provides quality assurance by overseeing the management and coordination of all community-based participatory research projects and social marketing campaigns. Mr. Juzang also provides technical expertise on the company's proprietary research methodologies. He specializes in conducting qualitative research that elicits informative, accurate and authentic responses, using proprietary focus group research and data analysis methodologies he designed in order to determine the motivation and persuasion techniques that best reach and influence any target population.

In conducting hundreds of hours of qualitative, grassroots research, Ivan Juzang has talked to thousands of adults and youth living in underserved communities impacted by violence, grinding poverty and other social issues. His long track record of grassroots community-based research began with MEE's first groundbreaking report on urban youth culture, *The MEE Report: Reaching the Hip-Hop Generation* (1992), funded by The Robert Wood Johnson Foundation. Mr. Juzang also served as Principal Investigator for a ten-city sexuality research study that explains how the hip-hop generation navigates its way through sexual situations and responds to today's sexually explicit media messages. Primarily funded by The Ford Foundation, The Centers for Disease Control and Prevention and The California Endowment, the research findings were published in 2004 as a comprehensive report and accompanying documentary, *This Is My Reality—The Price of Sex: An Inside Look at Black Urban Youth Sexuality and the Role of Media*.

Mr. Juzang received his MBA from The Wharton School of Business and his BS from Carnegie-Mellon University.