



Southland Recovery Coalition ROSC Council Meeting Minutes

Date/Time: 3/26/2025 8:30 AM to 11:30 AM

LOCATION: Cornerstone CDC, 943 East Lincoln Highway, Ford Heights, IL 60411

PRESENTER(S): Felicia Houston, Chairman Dr. Fred Hampton, Jr., Myron Graham,
and Nasik Prince Yosef Ben Asiel

TOPIC: Navigating Mental Health Resources & Reducing Stigmas

ATTENDEES		AFFILIATION	ATTENDEES		AFFILIATION
1	Angelia F. Smith	Cornerstone Lead Fiscal Agency	30	April Thompson	Higher Heights Initiative, Cornerstone
2	Yvonne M. Orr-Blake	ICSC, Partner Agency	31	Neesha Stringfellow	HLM Recovery Will Grundy ROSC
3	Kathryn Straniero	Together We Cope, Partner Agency	32	Jordan Steward	ICSC; Cornerstone Comm Navigator
4	Mikiel Gadol	African Hebrew Israelite; PLE	33	Jasmine Atkins	ICSC; Cornerstone Comm Navigator
5	Fred Hampton, Jr.	Black Panther Cubs	34	Lamont Wallace, II	ICSC; Cornerstone Comm Navigator
6	Jamil Muhammad	C.R.O.E.; PLE	35	Latrina Silas	IL Family Resource Center
7	Consuelo Allen	C.R.O.E.; PLE	36	Felicia Houston	Mental Health/Wellness Consultant
8	Dion Catlett	C.R.O.E.; PLE	37	Marianne Bithos	NAMI South Suburbs
9	John D. Edwards, III	C.R.O.E.; PLE	38	Angel Marquez	PLE
10	Aaron Adenix	C.R.O.E.; PLE	39	Shawn Taylor	PLE
11	Marquitta Cross	C.R.O.E.; PLE	40	Robert Ross	PLE
12	Nasik Yosef Ben-Israel	C.R.O.E.; PLE	41	Ahriel Yasharel	PLE
13	Bahiyyah Talilala	Comm Outreach Coord, S-ROSC	42	Jermiah Wallace	PLE
14	Jaylen Smith	Cornerstone CDC	43	Jihad Nabawi	PLE; ICSC
15	Yolanda Johnson	Cornerstone CDC	44	Kenneth Brown	Proactive Community Services
16	Toni Alexander	Cornerstone CDC	45	Kenneth W. Bell	Region 1 TA
17	Ester Viverette	Cornerstone CDC	46	Carl Wolf	Respond NOW
18	Kaylon Vaughn	Cornerstone CDC	47	Myron Graham	So Suburban Council on Alcoholism
19	Leroy Williams	Cornerstone CDC	48	Juleen Johnson	South Suburban Council
20	Glenise Story	Cornerstone CDC	49	Deanna Watson	South Suburban Council
21	Elaine Roberson	Cornerstone CDC	50	Lori Dill	SSCA
22	Arnetta Vance	Cornerstone CDC	51	Kenneth Bell	SUPR
23	Kamil Walton	Cornerstone, Deputy Director	52	Denise Jones	Tender Touch, Executive Dir
24	Capucine Walls	Cornerstone, Workforce Coor	53	Souheir Rahman	Together We Cope
25	Leonard Noble	Cornerstone, Workforce Dev Dir	54	Andrea Coletta	Together We Cope
26	Jon D. Mooney, Jr.	D Money Tradings; PLE	55	Christine Cornacchia	Together We Cope
27	Prince Ben Asiel	Divine Underground Brotherhood	56	Yasmeen Hismeh	Together We Cope
28	Brandon Collymore	Elite House	57	Ryan T. Buckley	Together We Cope
29	Myron Westley	Elite House; PLE			

MEETING SUMMARY: Southland Recovery Coalition ROSC Council Meeting

The Southland Recovery Coalition held a monthly meeting with introductions from all attendees representing different organizations. Meeting was opened by Angelia F. Smith, Executive Director of Cornerstone Community Development Corporation/Lead Partner Agency - SRC. Yvonne M. Orr-Blake served as the facilitator and introduced the panelists following SRC ROSC business.



Southland Recovery Coalition ROSC Council Meeting Minutes

Date/Time: 3/26/2025 8:30 AM to 11:30 AM

Southland Recovery Coalition Meeting Recap

The monthly meeting of the Southland Recovery Coalition begins with introductions from attendees representing various organizations, including Cornerstone, Together We Cope, and Indigenous Community Service Center. Angela Smith, the Executive Director of Cornerstone CDC, leads the introductions and introduces Yvonne Orr-Blake and Kathy Straniero as partner agencies of SRC. Angela sets the tone for the day about how recovery awareness intersects with social justice causes, health and wellness/nutrition, and self-care practices for practitioners.

The facilitator led the discussion to garner the panelist's perspective on the questions, focusing on mental health, healthcare systems, social injustices, and recovery awareness.

Responses from Panelists' Perspectives

Mental Health & Illness

Chairman Dr. Fred Hampton, Jr.: The biggest barriers preventing people from seeking mental health care are deeply rooted in historical distrust of systems that have pathologized our natural responses to oppression. When we speak about mental health in our communities, we must acknowledge that what's often labeled as 'illness' can be a natural response to unnatural conditions. To dismantle these barriers, we need mental health services that recognize the impact of systemic racism and generational trauma. Recovery and healing must be defined by our communities, not imposed upon us.

Felicia M. Houston, MA, LCPC, CWA: Stigma remains one of our greatest barriers to seeking mental health care, particularly in Black communities where strength and resilience are highly valued. Many see seeking help as a sign of weakness rather than strength. To dismantle these barriers, we need culturally responsive mental health providers who understand our experiences and community-based approaches that normalize mental wellness conversations. Community organizations can better support mental wellness by meeting people where they are—in churches, community centers, and schools—and by training community members as mental health advocates.

Nasik Yosef Ben-Israel: The disconnect between our cultural understanding of wellness and Western mental health paradigms creates significant barriers. Many in our communities don't see themselves represented in therapeutic approaches or don't have access to providers who understand their cultural context. Trauma—especially generational and community trauma—is often the foundation of mental health disparities, yet it's rarely addressed holistically. Recovery must include reconnection to cultural practices that have sustained our communities through centuries of adversity.

Myron Graham, LCSW: Accessibility is a major barrier—both in terms of financial resources and physical proximity to quality care. In many underserved communities, people simply don't have providers nearby or can't afford services. Community organizations can better support mental wellness by advocating for increased resources, creating sliding-scale services, and developing peer support networks. Trauma-informed approaches are essential because they recognize that behaviors often labeled as symptoms are actually survival strategies in response to historical and ongoing trauma.

Health & Healthcare Systems

Chairman Dr. Fred Hampton, Jr.: The most pressing public health issue in our communities today is the ongoing impact of structural violence—from environmental racism to food apartheid—all of which affect both physical and mental health. Healthcare systems have historically been tools of oppression in Black communities, from the



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Tuskegee experiments to current disparities in pain management. Building trust requires acknowledging this history, providing reparative justice, and ensuring community control over health resources. Recovery means healing not just individuals but entire systems.

Felicia M. Houston, MA, LCPC, CWA: Chronic stress related to economic insecurity is perhaps our most pressing health issue, as it underlies so many physical and mental health conditions. To build trust, healthcare providers must commit to cultural humility— recognizing their biases and actively working to address them. Integrating mental and physical health services can look like having therapists in primary care offices, conducting mental health screenings during regular check-ups, and training all healthcare staff in trauma-informed approaches.

Nasik Yosef Ben-Israel: Historical trauma manifests in our bodies as chronic illness. We see higher rates of hypertension, diabetes, and heart disease in communities that have experienced generational oppression. Healthcare providers can build trust by honoring traditional healing practices alongside Western medicine and by genuinely listening to patients' experiences without dismissal. In my work, I've seen powerful healing when we integrate spiritual practices with contemporary therapeutic approaches.

Myron Graham, LCSW: The disconnect between different parts of the healthcare system creates gaps that vulnerable community members fall through. We need models where recovery support for substance use, mental health services, and physical healthcare are seamlessly connected. Community health workers who come from the neighborhoods they serve can play a crucial role in building trust. Holistic care means addressing all determinants of health—housing, employment, social connection, and spiritual wellbeing—not just symptoms.

Social Injustices & Community Impact

Chairman Dr. Fred Hampton, Jr.: Systemic issues like racism aren't just social problems—they're public health crises that directly impact our mental and physical wellbeing. Housing instability creates constant stress that manifests as both physical symptoms and mental health challenges. Advocacy and activism are essential forms of collective healing; when we work together to change unjust systems, we reclaim our power and dignity. Youth engagement must be central to our work— they aren't just the future they're the present leaders who bring fresh perspectives to our struggle.

Felicia M. Houston, MA, LCPC, CWA: Food insecurity directly impacts brain development and mental health. Children who are hungry cannot learn effectively, which perpetuates educational disparities. Mothers struggling to feed their families experience anxiety and depression at higher rates. Advocacy must focus on policy changes that address root causes of inequality, while providing immediate support for those in need. To engage youth effectively, we must create spaces where they can lead conversations about their experiences and solutions, while providing the support they need to transform their insights into action.

Nasik Yosef Ben-Israel: Environmental racism— the placement of polluting industries in Black and Brown communities— creates physical health problems that further burden mental health. These are not separate issues but interconnected challenges that require holistic solutions. Effective advocacy connects personal healing with community transformation. Young people need to understand their cultural history of resistance and resilience as the foundation for creating new solutions. The strategic mindset shift we need is from seeing ourselves as victims to recognizing ourselves as powerful agents of change.



Southland Recovery Coalition ROSC Council Meeting Minutes

Date/Time: 3/26/2025 8:30 AM to 11:30 AM

Myron Graham, LCSW: Economic inequality undermines health at every level. When families are working multiple jobs just to survive, they have neither time nor resources for preventative healthcare or mental wellness. Advocacy must focus on economic justice as a health issue. To effectively engage youth, we need to recognize and support their leadership while providing mentorship that connects their experiences to broader historical contexts. Looking ahead, we need a strategic shift from crisis response to prevention and from focusing on individual behavior to addressing social determinants of health.

Strategic Mindset Shifts for Community Healing

All Panelists (Collective Perspective):

The strategic mindset shifts needed at the community level include:

1. Moving from shame to understanding— recognizing that substance use disorders and mental health challenges often stem from trauma and require compassion, not judgment.
2. Shifting from isolation to connection— building recovery-supportive communities where people feel seen, heard, and valued.
3. Transitioning from deficit-based to strength-based approaches— focusing on community assets and resilience rather than problems and pathologies.
4. Changing from reactive to proactive— investing in prevention and early intervention rather than waiting for crises.
5. Moving from fragmented services to coordinated care— ensuring that mental health, physical health, substance use treatment, and social services work together seamlessly.
6. Shifting from professional dominance to shared expertise— valuing lived experience alongside clinical knowledge.
7. Transforming from cultural erasure to cultural celebration— recognizing that connection to culture and identity is healing.
8. Evolving from silence to advocacy—speaking openly about recovery to challenge stigma and inspire hope.

Together, these mindset shifts can create communities where healing, equity, and long-term wellness become possible for all.

April Food Day Event Announcement

In the meeting, Maya announced the upcoming April Food Day event on April 23rd at the Tinley Park Convention Center, aiming to address food insecurity in the south suburban region. She mentioned that St. Irenaeus was replaced by Free Indeed in Dalton due to the former's late notice of closure. The event will recognize Meridian Healthcare, United Auto Workers, Local 551, and Reverend Larry Jackson as honorees. Maya also mentioned that CBS 2 and Power 92.3 will be covering the event. Angelia expressed her intention to attend the event to congratulate Reverend Dr. Jackson, who has been a significant supporter of United Way.

Next steps

- All attendees to share information on local resources for asset mapping with Yvonne or Angela.
- Yvonne to send out list of living rooms in south suburbs to attendees.
- Organizations to provide items for swag bags (60-75 count) for the May Recovery Awareness conference.

Meeting adjourned at 11:40 a.m.

Next meeting> April 30, 2025 at 9:30 a.m. via Zoom