

# Capital Connection

A PUBLICATION OF THE CONSUMER LEADERSHIP FORUM

*Made possible by a grant from the DC Department of Mental Health Office of Consumer and Family Affairs*

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### Consumer Leadership Forum

#### STATEMENT OF PURPOSE

*The purpose of this meeting is to unite our best efforts as mental health consumers to reshape/reform/reinvent the D.C. mental health system.*

*We will not expect the meeting to be a place where we resolve our personal issues but will support each other and network as desirable / possible outside the meeting.*

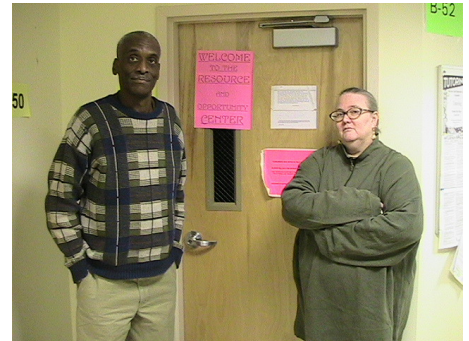
*While gathered as a group, we will focus on the vision of the type of mental health system we want to create and the process for getting there.*

## The Power of Peer Support: Interview with David Goodwin and Sherry McMahon

*Leah Harris interviewed David Goodwin and Sherry McMahon, who coordinate the Resource and Opportunity Center (ROC) at Anchor Mental Health.*

### How did you get involved with Anchor and the Resource and Opportunity Center?

DG: There had been some ongoing issues with Medicaid not covering certain types of activities that consumers needed. Then there was some space available at Anchor and someone asked me what to do with this space, I said, "We should start a resource center." We started to have some meetings to see if it was do-able. And that's how we got started. Some of our original plans didn't get off the ground, but the concept and the idea of the resource center was strong, regardless of what happened as far as location or equipment. The idea was more powerful than what we had and what we were able to obtain. The need was clearly there. A lot of the consumers here at Anchor were no longer "billable candidates," but they were still coming to Anchor because they didn't have anywhere else to go.



David and Sherry at the Resource and Opportunity Center at Anchor Mental Health.

I was at a meeting a year and a half ago, and the word was that [funding] for day programs was going to be cut, but there were going to be drop-in centers. So far I haven't seen any. Our original concept was to be a resource/drop-in center. But it all has evolved and changed according to need. (continued on p. 2)

## Making Recovery Real

By Leah Harris

I have been thinking a lot lately about the new and hopeful trends in mental health system transformation – the use of words like recovery, empowerment, self-determination, consumer-led, peer support, anti-stigma and so on and so forth. It's exciting that we are beginning to use such positive language and to think in such positive ways. I believe that our thoughts become action, and action creates change in the world. No one was talking about recovery twelve years ago when I was struggling to heal and live in the community. In retrospect, I realize that it was only when I stopped viewing myself as a helpless patient/victim and started to really believe in myself as a person who deserved all the good things that life has to offer, as a person who could recover, that my life really began to change. So I deeply believe in the power of words and the importance of reframing our language to support freedom and recovery. But at the same time I'm wary of these important concepts being watered (continued on p. 2)

## The Power of Peer Support, con't.

### What is the vision for the ROC as it's evolved over time?

SM: We provide an interim service between what Anchor supplies and what the consumers want and need. Anyone who has been within in the system knows that you can sometimes talk your brains out to your case manager, and they throw some by-the-book kinds of ideas at you. As I'm learning, this is not necessarily effective.

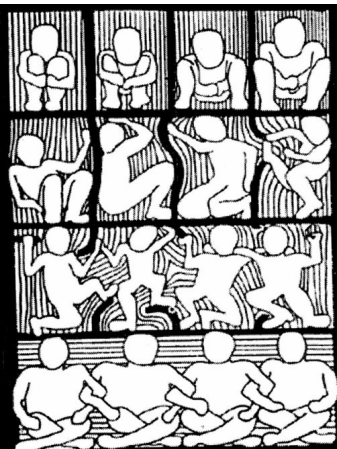
What we are focusing on at this point are getting computers and internet access for people. We have at this point two computers that are hooked to the internet, two that are connected to a printer, office things like that. Several people have provided tutorial services on basic computer skills. None of us is terribly trained, but some of us know enough to get the rest of us started. We have several people who are pursuing their GED's, and that is something that Anchor does focus on with their day program. We help with learning, reading, math—and we hope to evolve to more advanced levels of education. We're learning that what we offer has to be much more regular and less "seat of the pants." The idea of offering a class at a certain fixed time is important. We're learning "incubation" – we have given up some of the original ideas that we had, such as a drop-in center, but we may be able to recapture some of that. The building is being renovated, and the better part of this space will be available for consumer, and at that point, we may be able to expand. (continued on p. 3)

## Making Recovery Real, con't.

down or defined by people other than the consumers themselves. We have to keep evolving the definition of what recovery means to us, and we must not let anyone else impose a definition on us. That's why I really like the part in the National Consensus Statement on Mental Health Recovery that says "by definition, the recovery process must be self-directed by the individual, who defines his or her own life goals and designs a unique path towards those goals."

We have to tell the truth about the things that get in the way of people's recovery – one of the most important of these being overmedication and polypharmacy (the practice of prescribing multiple psychiatric medications). If someone is so overmedicated that they can barely put a thought together or move or communicate, how can he or she possibly taste the fruits of recovery? We have to give some serious thought as to how to approach this issue in a sensitive and effective manner. Certainly I am not saying that all people should go off their meds. I am saying that we should work with consumers to advocate with their doctors and treatment team about how being overmedicated negatively impacts their lives and their ability to function, and work

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together to find ways to alleviate the problem.

Secondly, we need to always be loud and outspoken about the issue of rights. How can people recover when they are facing issues like seclusion and restraint, or are being treated against their will? Could there be more disempowering and anti-recovery experiences than these? A basic minimum requirement for recovery is a sense of control over one's life and destiny, and if you are tied down in five-point restraints or shut away in the Quiet Room, it's pretty hard to feel like you have any control over anything. We need to constantly be speaking up against forced treatment and seclusion and restraint, and to support efforts to create a mental health system that is free of these spirit-crushing and ineffective practices.

As we head into the New Year, it is my prayer that each of us find peace and healing in our own recovery journeys, that we feel more and more empowered in our own lives, that we may share these gifts with others, and that we make recovery real—not just pretty words. May 2007 be a year of positive change, both within ourselves and in the world.

Happy New Year, everyone!

## The Power of Peer Support, con't.

DG: The concept of the drop-in center is that it is a place where we can do non-educational activities as well. Sometimes people just want someone to talk to, and it has nothing to do with education. It's just basic life stuff. And we always point out to whomever comes to us, that we have no paper credentials. But we all have "credentials." [Laughter]

**LH: Tell me a little bit more about that. What do you bring to this work in terms of your personal experience with recovery?**

DG: A lot of people who I come in contact with have drug issues. I have a very significant drug background. And even with people who are addicted and want to quit, but don't know how... People say "Don't do drugs." But if it were that easy, no one would be on drugs in the first place! But being that I have twenty years' experience, I can point them in the right direction.

SM: I don't know how many of our case managers have actually been addicted or had problems with alcohol or drugs. How many of them have actually been in the situations that they are advising people about?

**LH: And that's the power of peer support.**

SM: Exactly. If one of us says, "this is what my experience has been..."

DG: Peer support in the mental health field has a proven track record in terms of effectiveness. That's also true in the drug culture. The most successful drug treatment programs include people who have lived the life and walked the walk. The credibility issue is so important. I'll be honest with you... I have an automatic distrust of people who have a Ph.D. in drug addiction but have no personal experience. I don't know of any field where experience is more valued than academic qualifications, than it is in the drug culture. Life experience in the drug culture is the only way I know how to help someone. And it's the same with the mental health field. The counselors that meant more to me than anyone else were the people who were addicted. So going back to the Resource Center, the needs are not just for math, but for socialization. This is going to be hard to believe, for those of you who know me, but I had to go through a re-socialization period. Because when you're institutionalized, you just don't come out and say, "Hey, what's up?" [Laughing]. Everything—whether its drug addiction or mental illness—involves a re-integration into the social scene. Lots of people who use drugs are social, but you don't want to be *that* kind of social—that's how you got into trouble in the first place! [Laughter]

A whole lot of people, when they stop doing drugs, express that their biggest fear is "what will I do?" Whether it's mental illness or addiction, you'd be surprised how much time that really did consume in a person's life. You don't think about it when you're living it, but you do when you want to make a change. That's one of the biggest issues people come to me with: "What am I going to do?" I just tell them "Don't rush into anything. Sit back and find something that you like to do. I don't care how crazy it is. I don't care how far out there it is. I don't care how many times you were told that it was unattainable to you because you were addicted or because of your illness. Then bring that to me and we'll discuss it and see what the next steps are."

**"That's one of the biggest issues people come to me with: 'What am I going to do?' I just tell them 'Don't rush into anything. Sit back and find something that you really like to do. I don't care how crazy it is. I don't care how far out there it is. I don't care how many times you were told that it was unattainable to you because you were addicted or because of your illness.'" — David Goodwin**

## Consumer Action Network (CAN) CORNER



CAN is one of DC's leading consumer-run organizations.

On behalf of CAN, Effie Smith and Mary Blake are sending best wishes for a peaceful holiday season and wonderful New Year. We've learned a lot from all the folks we've worked with over the last year and have enjoyed collaborating with many consumers and providers, and advocates and others on many projects. We see a lot of hope for consumers in the DC mental health system and a lot of growing energy, even though there's still so much work to be done. While we know many people are still in great need, CAN is committed to working with our peers to overcome. For instance:

- Last month, we applied for and were awarded three computers from the DC CLF computer donation program. CAN is donating these computers to consumers who are receiving services at St Elizabeths Hospital, and will ensure that the computers are for the exclusive use of patients.
- Thanks to the CLF and other folks across the city who responded to CAN's request, we will be able to deliver books, current magazines, and other printed material to the consumers at the St. Elizabeths Treatment Mall.
- CAN has just completed a face-to-face survey of over 550 consumers, family members,

and staff across the city, where we met with folks at correctional facilities, homeless shelters, employment programs, hospitals, housing programs and Community Residential Facilities (group homes), Core Service Agency mental health clinics, and

day programs. The goals of the survey are for people to give feedback on what they expect from consumers' recovery and how they view the services they currently receiving. Your feedback is so important, and we thank everyone who participated in this project.

We'll continue to update you all on our activities. And, if anyone has a concern about their services or wants more information about their rights or resources in the community, please call us at: (202) 842-0001 or e-mail us at [info@can-dc.org](mailto:info@can-dc.org).

Also, in the spirit of giving, if you are able to provide socks, toiletries (in plastic containers, no glass), coats or other items for consumers at St. Elizabeths Hospital, please call CAN at the number above. We've heard from a few that purses are in demand by the ladies. In the meantime, we hope for a blessed season for all.

"We see a lot of hope for consumers in the DC mental health system and a lot of growing energy, even though there's still so much work to be done."

## December 1 CLF Meeting Report

By Frederica Gonzales and Sherry McMahon

Our December 1st CLF monthly meeting was held at the McClendon Center. Several guests attended, including Steve Baron, Director of the DC Department of Mental Health (DMH), and Alexis Haines, current director of CPEP. In addition, Dr. Katherine Green, who is a change management/leadership development consultant, led the afternoon workshop on leadership. The group talked with Steve and Alexis about our concerns about the Access Helpline and crisis care. Steve also told us that there is a committee looking at the creation of a Wellness Center within DMH. He also announced that there will be a groundbreaking ceremony for the New Saint Elizabeth's Hospital on Tuesday, December 19.

Jeanne invited Steve and Alexis to the next meeting to continue our discussion, and they have agreed to attend our January monthly meeting from 12:30 to 2:00 pm. So, if you have issues, concerns and suggestions about the Access Helpline, CPEP, crisis care, crisis beds, crisis houses and crisis intervention teams, please make the effort to attend our January meeting. A primary issue that surfaced in the discussion is why doesn't DMH hire consumers/peers to work the Access Helpline? What do you think about this issue?!

In the second half of the workshop, Katherine Green, leadership development consultant, led us in a series of exercises to get us thinking about leadership skills. She started with a delightful "Getting to Know You" icebreaker. We each filled out a card with something about ourselves that we thought no one else would know. Katherine collected and mixed up the cards. The fun began when we all got up and walked around the room to see if we could match the card with the person we thought it belonged to. We also discussed leadership myths such as the need for a college degree or work experience in order to be successful. We all have skills and talents, but we may not be using them because of feeling that we have nothing to offer. The next exercise was to identify Mental Models of leadership from our past, and Mental Models currently active in our lives. We were unable to finish the entire agenda as we had many questions. Dr. Green passed out information folders along with her personal contact card. She reminded us that we should always work to make the CLF grow through each one of us, and plans to come back in January for a follow-up session.

Galina then passed out certificates to those who attended the November 3rd training on Leadership and Effective Communication. Jonathan Smith, Director of The Legal Aid Society DC talked to us about the Principles of Leadership and Cheryl

Barnes, who is a consumer advocate, talked to us about effective communication.

Frances Priester, Director of the Office of Consumer and Family Affairs at DMH, shared some of her goals, including a consumer internship program. She also updated us on the Wellness Recovery Action Plan (WRAP) trainings coming up in January and February of 2007.

Dorothy Adams announced the Consumers' Choice Awards Ceremony is scheduled for March of 2007. Dorothy is working very hard on organizing this event for us. This is your opportunity as a Consumer to nominate the person who has been most helpful to you in your recovery. Dorothy will be distributing nomination forms. So, please take some time to think about who you would like to nominate for this very special award.

## Housing Task Force Report

By Sherry McMahon

On November 12, 2006, the Consumer Leadership Forum's Housing Task Force held its monthly meeting at the office of Legal Aid. Our guest was Edith Makenta, of the Department of Mental Health's Housing Office. Ms. Makenta came prepared, as Jeanne Locher had provided several questions to her in advance of the meeting. Additionally, Ms. Makenta brought to the meeting a number of DMH-Housing documents of interest to the Housing Task Force. The meeting was well attended, and many important questions were asked and answered.

As anyone who has applied for assistance with housing knows, the need is greater than the money or units available. Ms. Makenta acknowledged this fact, and gave the group an idea of how DMH-Housing works with the city and private sector to make housing options available to mental health consumers in DC.

With a new city government to be installed in January, we are all eager to know what this administration will be able to do to increase monies made available to DMH-Housing. The budget for Fiscal Year 2007 delivered only one-half of the requested funds for DMH-Housing. This under-funding, combined with a cut in the FY 2006 budget, puts housing for those in need at even greater risk.

The CLF Housing Task Force looks to Ms. Makenta to be a partner in improving the situation. To this end, Ms. Makenta invited members of the DC-CLF to join DMH's Housing Advisory Committee. The first invitation to a meeting of this Committee has been received by Jeanne, and publicized to the DC-CLF membership. This meeting will be held Monday, December 18. DC-CLF members will be in attendance, tasked with reporting back to the DC-CLF.

## Next Consumer Leadership Forum Meeting

**Friday, January 5th, 12 – 3 pm**  
**The McClendon Center**  
**1313 New York Avenue, NW**

Steve Baron and Alexis Haynes from DMH will be with us from 12:30 – 2 pm.

Then we will have a continuation of the group discussion on the future of the CLF led by change management / leadership development consultant Katherine Green. We will be thinking about such questions as what do we want the CLF to be? What role do we want the CLF to play in the Consumer/ Survivor movement in DC? Do we want to develop the skills to become leaders in the national consumer / survivor movement? Your questions/vision/ideas are welcome!

## Schedule of Events

**Friday, December 22**  
**Telling Our Stories of Struggle, Survival, and Recovery Workshop**

**AND**

**The CLF Holiday Party!**

**11 am – 3 pm, The McClendon Center**

In this interactive workshop, we will work together on constructing our stories for the purpose of healing, and to share our journeys of experience, strength, and hope with the world. Please come prepared to write! We will have a writing workshop in the morning from 11 am – 12:30 pm followed by a holiday meal and celebration. Then we will have an open session where we share our stories with one another.

**Friday, January 12, 2007**  
**Fall Conference Highlights Session**  
**12 pm – 3 pm, The McClendon Center, 1313 New York Avenue, NW.**

Twelve CLF members received grants from the DMH Office of Consumer and Family Affairs to attend three conferences this fall: The International Center for the Study of Psychiatry and Psychology (ICSPP), the National Association for Rights Protection and Advocacy (NARPA), and Alternatives. These attendees will speak on a panel designed to reflect on their experiences and to share information with the larger community. Lunch will be provided.

**Thursday, January 18, 2007**  
**CLF Housing Task Force Meeting**  
**12 pm—2 pm**  
 Legal Aid Conference Room

## Beatniks' Corner

By Peter R. "Beatnik Pete" Warner

The popular Bethesda Beatniks Dinner Club for consumers, family members and friends is continuing its series of arts festivals, music festivals, and poetry slams with a Friday night, January 5th semi-pro "Musical Showcase" night in conjunction with the club's post-holiday annual party, and a Wednesday night, April 25th amateur poetry slam. The last major arts event this group held, in conjunction with the DC Mental Health Consumers' League--the November 8th Dr. Kay R. Jamison lecture/dinner/Q&A session/art show/musical night, held at Alfio's Trattoria in Friendship Heights--drew over 80 people, and made it into the pages of the "Montgomery Gazette," "Psychiatric News," and "BP Magazine."

Performers at the Friday night, January 5th party event will include singer/songwriter/guitarist Steve Gellman, teenage rock sensation "The Dice," and adult rock groups "Twisted Goddess" and "Special Ed and the Slow Learners." Most of the performers have had a brush with mental illness; what the media in attendance will be interested in is original songs dealing with some aspect of this. Beatniks club manager "Beatnik Pete" Warner has been busy trying to line up media coverage for this unusual event, which will be held once again at Alfio's Trattoria, 4515 Willard Avenue in Friendship Heights, about three blocks to the west of Wisconsin Avenue and the Friendship Heights Metro stop. The \$10 cover charge includes live entertainment, appetizers and punch. There is free valet parking, and full dinner service is available.

Pete & Company will soon have their hands full, trying to connect with a sufficient number of accomplished consumer/poets in Maryland and the District to read their original material for a combined four hours at the April 25th poetry slam, which will once again be held at Alfio's. The team is seeking a professional drum-player, and perhaps a bass fiddle player, to "riff" with the poets while they are reading their material.

Poets: call Pete at (301)279-2578 or e-mail him at peterwarner2@mac.com to register. To get a taste of all upcoming Beatniks events, log onto [www.bethesdabeatniks.org](http://www.bethesdabeatniks.org). ###

## *Consumer Leadership Forum*



# *Our Vision*



1. We seek an end to our isolation and we refuse to have our existence limited;
2. We seek a community that looks after the health and well-being of each individual, that respects the choices we make about our lives and our care;
3. We seek an improved system of crisis care and continuous care, where holistic healing, progress, and recovery are the key components. We need services that are individualized and self-directed as well as community supports such as consumer-driven respite and wellness centers;
4. We seek to engage with one another and to create a grassroots movement where we can support one another and keep our morale high. To forge our own identity as individuals and as a movement, separate and distinct from the provider community, but working in partnership with those who support use;
5. We seek a system that is driven by the needs, choices, and voices of consumers, not large pharmaceutical companies, providers and others in positions of power;
6. We seek a system of natural supports, where we can recognize that it is ok to fail, to make mistakes, to test new ground for ourselves in all that we do and in safety move beyond the system;
7. We seek an end to homelessness among persons with mental illness, and the creation of a network of affordable housing;
8. We seek to support and encourage consumer-run businesses and enterprises and to foster job opportunities;
9. We seek a community that respects the diversity within our movement and protects our traditions through a culture of competency and understanding. We seek to support families, youth and individuals to prevent isolation from one another and to provide training and information so that our community is empowered to cope with the unique challenges we face;
10. We will seek support from communities that are willing to partner with us and respect our choices and goals.

## Consumer Leadership Forum

How to Contact Us:  
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**Consumers Uniting for Freedom and Choice**

The CLF's mission is to empower consumers by providing an open forum for consumers and their allies to work together to transform the DC mental health system to a recovery-oriented, consumer-led system of care.

## Taskforces Under the Consumer Leadership Forum

**If you're not on one – you should be –  
Great things are happening!**

<b>Housing</b>	<u>Regular meeting time:</u> 12:00 pm—2:00 pm 3 <sup>rd</sup> Thursday of each month Legal Aid Conference Room
<b>Crisis-Care</b>	<u>Regular meeting time:</u> 1:00 – 3:00 pm 3 <sup>rd</sup> Tuesday of each month Legal Aid Conference Room
<b>Peer-Specialist</b>	<u>Regular meeting time:</u> 3:00 – 5:00 pm 2 <sup>nd</sup> Thursday of each month Legal Aid Conference Room
<b>St. Elizabeths</b>	<u>Regular Meeting time:</u> To be determined Legal Aid Conference Room

**Consumer Leadership Forum**  
Monthly meeting – 1<sup>st</sup> Friday of each month.  
12-3 pm at the McClendon Center  
1313 New York Avenue, NW

“Never doubt that a small group of thoughtful, committed citizens can change the world. Indeed, it is the only thing that ever has.”

—Margaret Mead

