



THE TEMPLE UNIVERSITY COLLABORATIVE ON
COMMUNITY INCLUSION
of Individuals with Psychiatric Disabilities

**Into the Thick of Things:
Connecting Consumers to Community Life
- A Compendium of Community
Inclusion Initiatives
For People with Psychiatric Disabilities
At Consumer-Run Programs**

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**A Joint Project of
The Temple University Collaborative on Community Inclusion
Of Individuals with Psychiatric Disabilities And
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Table of Contents

I. Introduction

II. Summaries of Inspiring Programs

Housing

- Dodge City Peaceful Tribe
- Capital Clubhouse

Employment

- Office of Consumer Advocates

Education

- Howie the Harp Peer Advocacy and Training Center
- Amarillo Area Mental Health Consumers
- Office of Consumer Advocates

Family Life

- Office of Consumer Advocates

Religion and Spiritual Life

- St. Louis Empowerment Center

Leisure and Recreational Activity

- The Art Collective
- Vermont Psychiatric Survivors
- Pink and Blues
- PEOPLE, Inc.: Formal Nights Out

Civic Life

- Grassroots Empowerment Project
- Dodge City Peaceful Tribe
- Hope Impact
- DBSA-Southern Nevada
- Office of Consumer Advocates

Health Care

- Amarillo Area Mental Health Consumers
- DBSA-Southern Nevada

Finances: Capital Clubhouse

Agency-Wide Community Integration Initiatives

- Voices of Heart
- Dodge City Peaceful Tribe
- Capital Clubhouse
- Office of Consumer Advocates

III. Recommendations

Appendix I. A Summary of Other Community Oriented Programs

Appendix II. Contact Information for Organization Cited Here

I. Introduction

Purpose. In recent years, state and county mental health authorities have funded consumer-run programs alongside more traditional community mental health centers,

psychiatric rehabilitation programs, residential and vocational services, and others. In the wake of the Americans with Disabilities Act, the Supreme Court's Olmstead decision and the President's New Freedom Commission on Mental Health, one of the essential tasks of these various agencies, including consumer-run programs, has become integrating consumers into the life of the community. This compendium summarizes a year of study to identify the ways in which such consumer-run programs serving individuals with psychiatric disabilities have developed initiatives or programs designed to help the people they serve reconnect to the everyday world around them. Many consumers may be living in community settings but nevertheless still remain isolated from the real richness of community life. This study, therefore, has sought to gather examples of consumer-operated programs that have focused, at least in part, on promoting community inclusion.

It is to be decisively affirmed that consumer-run drop-in centers can play an important role in providing a welcoming community-based environment for individuals with psychiatric disabilities. Also to be affirmed is that consumer-run programs can offer much needed in-house classes to prepare consumers for living, working and socializing in the broader community. Yet this study looked for examples of consumer-run programs that went further - that helped consumers connect to individuals without psychiatric disabilities and to organizations outside the network of the mental health system.

Methods. In 2009, the National Mental Health Consumers' Self-Help Clearinghouse and The Temple University Collaborative on Community Inclusion (a Rehabilitation Research and Training Center funded by the National Institute on Disability and Rehabilitation Research) launched a project that sought to infuse

community inclusion practices into consumer-run programs. A previous Clearinghouse project had shown little evidence of systematic focus on community participation among consumer-operated service providers. While the traditional network of mental health community providers has been putting ever greater focus on integrating people with psychiatric disabilities into the larger community in recent years, researchers have not ascertained whether and to what degree consumer-run programs have done the same, and have actually succeeded in implementing new programs and practices promoting community inclusion. This current document, a partial list of community inclusion projects that consumer-run programs have already undertaken, represents a first step in this longer Collaborative/Clearinghouse initiative, to be followed by the development of both on-site technical assistance for consumer-run programs and a stand-alone workbook, both designed to help staff of consumer-run programs develop initiatives that better help people with mental illnesses join into the mainstream of community life. It is our hope that this document provides an overview of existing community inclusion initiatives developed by consumer-run organizations that can inspire others to develop similar programs fostering community participation, matched to their organization's strengths and the needs of their local communities.

The information presented here is based on a national online information-gathering effort begun in the autumn of 2009. Using the Directory of Consumer-Driven Services, a national list of consumer-run programs from the Clearinghouse (which has offered training and technical assistance on consumer-run programming to consumer-run services for more than a decade), we asked representatives of several hundred consumer-

run service providers to identify programs they had developed to expand community inclusion opportunities for consumers of mental health services at their agencies.

The questionnaire asked about community inclusion initiatives in eight “domains” of everyday life: housing, employment, education, leisure or recreational activities, friendship or romantic life, financial wellbeing, health care, and spiritual life. In addition, respondents were asked to identify community organizations with which they had partnered, what barriers they had encountered that had inhibited their efforts to promote community inclusion, and what supports had fostered greater community participation. Investigators also sent the online request-for-information to offices of consumer affairs within each state mental health authority, and to the existing statewide networks of consumer organizations. There were a total 107 responses to this questionnaire. The responses to the questionnaire and subsequent telephone conversations with respondents form the basis of the information presented here.

Background: Consumer-Run Programs and Community Inclusion. It might be beneficial to review for readers the two concepts introduced above - first, the concept of “consumer-run programs” and second, the concept of “community inclusion.”

Consumer Run Programs. The mental health consumers’ movement began in the 1960’s and 1970’s. Until that time, the public mental health system all too frequently housed people with psychiatric disabilities in large state hospitals, separated from the mainstream of American life for years or decades at a time. The 1970’s, however, saw the beginning of a movement to release people with psychiatric disabilities from these large institutions. Instead of being confined in institutions, many found themselves receiving services from a more decentralized community mental health system in which people

with mental illnesses were enrolled in day programs and vocational training programs by day, and were housed in boarding homes or personal care homes by night. While no longer housed in large state hospitals, many remained isolated from the everyday life going on around them in their communities.

Former patients, often infuriated by the way they had been treated in these hospitals, began to come together in the community, forming groups both for mutual support and for systems advocacy. Influenced by the civil rights movement, they advocated for rights for people with mental health issues; influenced by the consumer movement spearheaded by Ralph Nader, they began to regard to themselves as “consumers” of mental health services, whose real interests they thought should drive mental health program design. Throughout the 1970’s groups of consumers slowly began to win seats at the table where federal, state, and local mental health policy decisions were made, and by the 1980’s, consumer groups began to receive funding from the mental health system to develop their own services.

By the late 1980’s, there were numerous consumer-run pilot projects and more consumers were active in mental health decision-making bodies. In the 1990’s, as additional consumer/survivor groups emerged across the nation, the movement began to focus more on the concept of recovery. In more recent years, consumer groups began to advocate for hiring of peer specialists within traditional mental health programs. At the same time consumer-run programs continued to expand: some focused on the development of recovery/wellness centers, others specialized in trauma-oriented care or consumers’ spiritual lives, and others chose to offer residential, vocational, socialization and other rehabilitation services.

These social services provided by consumers to other consumers are the “consumer-run programs” focused upon here. These programs provide peer support, or help consumers to finish their educations, help find housing, help develop their artistic talents, and more. These also are the groups that we have surveyed in this document on consumer-run programs and community inclusion. The growth of the consumer/survivor movement in general and consumer-run programming in particular has been spectacular, and the development of consumer-run services continues to be inspiring.

However, a wide range of research indicates that the separation of mental health consumers from the mainstream of American life continues to be all too frequent even today. Service providers in both traditional community mental health programs or in consumer-run settings have often focused on either providing a “sanctuary” to which consumers with serious mental illnesses can retreat for reassurance, support, and activity, or have developed a wide range of in-house rehabilitation programs to help consumers develop the skills they will need when, if ever, they choose to re-engage in everyday community life beyond the warm embrace of the mental health system. Today, both types of programs are being re-examined to see if they have paid enough attention to the question of whether consumers are actually more engaged in community life as a result.

Community Inclusion . The movement for “community inclusion ” has a different history from that of the consumer movement. This movement traces its roots to the Americans with Disabilities Act that Congress passed into law in 1990, which grants people with physical and mental disabilities rights against discrimination similar to those granted to racial and ethnic minorities by the Civil Rights Act of 1964. Later that decade, in a decision called *Olmstead v. L.C.*, the Supreme Court ruled that mental illness is

indeed a disability covered under the A.D.A., and that this Act protects individuals with psychiatric disabilities from being excluded from participation in society. Thus, in the wake the *Olmstead* decision, the continued isolation of individuals from society at large has come to be seen as a form of discrimination. To ensure that the *Olmstead* decision

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was truly implemented, in 2002, the President of the United States appointed a commission to make concrete policy recommendations to government agencies. In 2003, the New Freedom Commission on Mental Health concluded its report, recommending both the use of existing resources for treatment of people

with mental illnesses and the promotion of efforts to promote of community inclusion.

These governmental decisions have established a legal and moral imperative for the inclusion of consumers into community life. Yet the term “community inclusion ,” all too often remains poorly understood. Many

providers understand the concept of community inclusion as ensuring that consumers are physically present in public spaces in society; thus, taking a group of people in a van to a baseball game or to a concert may be considered by some as community inclusion. Yet the word “community” does not in essence refer to a physical, geographic space:

“...in addition to focusing on developing programs to serve consumers in the ways that only peer providers can, consumer-run organizations can begin to develop partnerships with community organizations outside the mental health service provider community.”

communities are primarily comprised of formal and informal associations of people. Consequently, the term “community inclusion,” refers to mental health consumers’ engagement and membership in these interlocking social organizations of people that make up communities. The Collaborative defines the term, therefore, as the opportunity to live in such communities, “and be valued for one’s uniqueness and abilities, like everyone else.” (Salzer, 2006)

The National Mental Health Consumers’ Self-Help Clearinghouse and The Collaborative on Community Inclusion seek to bring the consumer/survivor movement and the community inclusion movement together more effectively. Today, research has shown that people with mental health challenges are still separated from community life. All too often, consumers live in the most impoverished communities, segregated from the bulk of American neighborhoods. People with such challenges also have an 85% unemployment rate, and have smaller and more fragile social networks than people without such disabilities. In addition, they are more likely also to have fractured relationships with their own families. In fact, studies have shown that mental health consumers are almost three times as likely to lose custody of their own children as non-consumers. This is the face of continuing segregation of mental health consumers from the everyday roles and responsibilities of the rest of society.

Thus, in addition to focusing on developing programs to serve consumers in the ways that only peer providers can, consumer-run organizations can begin to develop partnerships with community organizations outside the mental health service provider community. These community organizations can help consumers become more engaged with others who are not part of the mental health system. For example, consumers who

need GED classes can be directed to such classes developed by the local school system or community college, not GED classes developed and located within a mental health agency, where all the students have a psychiatric disability. After all, if consumers are to participate in the community like everyone else, then they should use the same resources others use. Similarly, linking people to the YMCA, to local sports leagues, to local realtors, local employers, local civic associations should be a priority, as these community resources all provide opportunities for consumers to reconnect.

To help make these possible, consumer-run organizations should consider their own responsibilities – to encourage consumers to seek out community activities and services, to provide the supports consumers may need to participate in community life, and to establish partnerships with community organizations in the interest of community inclusion and recovery.

These suggestions form the basis for the criteria of what we consider to be inspiring and innovative consumer-run community inclusion initiatives from around the country. Many respondents to our request-for-information reported that they had developed wonderful programs that provide housing to consumers, for example, or had put together curricula to help consumers prepare to return to work, or to return to school. Yet housing or vocational training initiatives are not themselves new or innovative, as service providers have offered jobs and housing programs for years. Instead, those programs that are identified in this compendium are those that consumer-run programs have developed in *partnership* with organizations of the larger society, that increase consumers' engagement in the life of the community, and that make use of existing

community resources in the interest of fostering consumer engagement, membership and investment in society. What is exemplary, then, is that these consumer-run organizations have themselves engaged with the community – with individuals and organizations outside the mental health world - to provide services to consumers while ensuring that people with mental illnesses become citizens in their own neighborhoods.

This compendium is not exhaustive: preliminary evidence indicates that many other providers have developed initiatives that foster community inclusion. Yet this series of initiatives can be taken as examples, a paradigm of what community inclusion programs at consumer-run organizations might look like. We offer information to guide you to these programs for more information, and some recommendations for consumer-run programs who want to move further toward community inclusion goals.

II. Summaries of Inspiring Programs

The information to follow is organized in two ways. First, many of the representatives of consumer service providers described their initiatives promoting community inclusion within a particular area: that is, they reported initiatives that help consumers specifically with housing, or specifically with education or with civic life, etc. Other respondents reported on their overall orientation toward engagement with the community on many fronts rather than in individual domains. Both are reported on here, and are offered to readers as tools to help imagine new ways of working with consumers. Each entry below contains a short overview of the featured organization, a description of its noteworthy community inclusion initiative, and a brief statement about what is significant about that particular example of community inclusion.

Housing:

Dodge City Peaceful Tribe: Using Word-of-Mouth Social Networks to Locate Independent Housing for Consumers (no website)

The Agency. The Dodge City Peaceful Tribe began as a small support group, incorporated as a not-for-profit in 2006, with a core mission to provide peer support, hold pre-vocational classes, social events, and family nights. Yet, the founder of the Tribe has also lived Dodge City for thirty-five years, and her links to the community are crucial to their ability to help consumers join into the mainstream of local life.

Community Inclusion Initiative. One of the organization's major community inclusion projects has been to help consumers secure housing by identifying informal local social networks and integrating consumers into those existing patterns of small town social interactions. For instance, sometimes consumers living in subsidized housing or who rented through professional realtors have had to be hospitalized very quickly or unexpectedly and no one knew where they went. When they returned from the hospital, they often found that all of their things were gone and their home rented to someone else. Dodge City Peaceful Tribe began, instead, to identify a local network of small landlords who advertise only by word of mouth, and rent primarily to individuals with whom they are comfortable, based on the landlord's comfort with the person recommending the renter. The Tribe developed working relationships with a core group of twenty such landlords. Now, if a consumer/renter goes into the hospital without notice, the Dodge City Peaceful Tribe can arrange with the landlord to have the place reserved, and guarantee the payment of rent. Individuals representing this organization also mediate between tenants and landlords when problems such as cleanliness or loudness or even domestic violence arise.

Significance. This is a good example of how representatives of a consumer-run program can become tied into the town's web of social interaction, (in this case, word of mouth networks of landlords and tenants) and make use of these networks to establish consumers as part of this social fabric. Consumers are not just physically present in the community, but part of a network of landlords and tenants, with the consumer-run program providing support.

Contact: Diann Brosch, Executive Director. Dodge City Peaceful Tribe, P.O. Box 1111, Dodge City, Kansas, 67801. 620-623-2034. (dodgecity_peaceful_tribe_06@yahoo.com).

Capital Clubhouse: A Consortium of Community Groups Runs a "Ready to Rent" Curriculum <http://www.capitalclubhouse.org>

The Agency. Capital Clubhouse, in Olympia, Washington has been in existence since 1989, has 1700 members, and the majority of its board and employees are consumers. There are 165 active members—those who come at least once a month—and 30-35 people who come in a day. This group has developed an organizational focus on developing services in the community not just for mental health consumers, but for people in need in general.

Community Inclusion Initiative. The Clubhouse runs a curriculum called “Ready to Rent,” a two-week training for anyone newly returning to independent housing. The course of study covers subjects such as how to manage a budget, figuring out what you want or need for a home or apartment, how to negotiate barriers such as credit problems or incarceration history. Although Capital Clubhouse was designated by the state of Washington to run the pilot program of this curriculum (first developed in nearby Portland, Oregon) they collaborated in running it with a number of other area organizations, including non-profits, faith-based groups and public agencies. The partnering organizations were the city housing authority, City Gates Ministries, Union Gospel, United Churches, Drexel House, (a Catholic transitional Housing Center), Bread and Roses Women’s Housing Project, the Family Support Center, Out of the Woods (a family shelter), the county jail system, and the City of Olympia, and a community organization of a local tent city. The trainee group included not only mental health consumers, but also homeless people, people on probation, shelter residents, and so on. After the pilot project was been completed, Capital Club House, Drexel House, and Family Support Center have continued to offer the curriculum jointly.

Significance. The pre-renter education program is designed for all first time renters, whether they are consumers or not, and creates an opportunity for those with psychiatric disabilities to meet and learn along others without a disability. In addition, the “Ready to Rent” program is offered in collaboration with other community organizations. Thus, the consumer organization itself is not only focused on trying to take care of the needs of its consumers, but is working with the larger community to help support a broader array of constituents.

Contact: Susan Allen, Executive Director. 618 7th Avenue SE, Olympia Washington 98501. 360-357-2582. opportunities@capitalclubhouse.org

Employment:

Office of Consumer Advocates: Working Relationships with Managers at Martin’s Supermarkets (no website)

The Agency. The Office of Consumer Advocates in Hagerstown, Maryland—founded in 1998 and running programs since 1999—is a consumer-run organization funded by the Maryland Department of Health and Human Hygiene. They operate seven different programs in the three westernmost counties of Maryland: a peer center in each county; a transportation program that takes individuals to and from mental health appointments; and a consumer advocacy program that helps individuals receive

entitlements, energy assistance, housing, services, etc. Currently, they also run Maryland's pilot program of self-directed care, and staff also continually investigate free or reduced-cost resources and to connect consumers to those resources as appropriate.

Community Inclusion Initiative. OCA has made an especially promising linkage with a major local employer: they report that they have good, long term working relationships with Martin's Supermarkets, a company that operates five stores in the Hagerstown area and is a branch of the larger supermarket chain Giant Foods. Giant Foods offers training to its staff in how to work with employees with disabilities, and is known in the area for its willingness to hire people with disabilities. A local psychiatric rehabilitation program first developed these ties to two especially receptive Martin's supervisors, and OCA then built on this contact. Now, the Office of Consumer Advocates refers people to Martin's Supermarkets when they are interested in working, and the supermarket managers call them when they have questions about supports and accommodations for consumers. Recently, the Office of Consumer Advocates has given one of these managers an award of recognition for his work, the first time they have given such an award to a person working in the for profit sector.

Significance. OCA's staff actively seeks opportunities in the community for consumers. These opportunities pay off in ongoing relationships with others in the community. In this case, the staff of the consumer-run program can then refer consumers to an employer because of they have built a degree of credibility with managers there.

Contact: Ethel Nemcek, Executive Director. 265 Mill Street, Suite 200, Hagerstown, MD 21740. 301-790-5054. madjack@atlanticbb.net

Education

Howie the Harp Peer Advocacy and Training Center: Providing Education through Collaboration with Area Educational Institutions

http://communityaccess.org/index.php?option=com_content&view=article&id=18&Itemid=20

The Agency. Howie the Harp Peer Advocacy and Training Center began in 1995 as the division of the New York City consumer-run organization Community Access that provides job training and placement for people with a history of psychiatric disabilities. Community Access itself is an older consumer-run organization that provides housing for people with psychiatric disabilities and others. The Advocacy and Training Center offers a training program to prepare mental health consumers for employment in the human services industry as peer advocates, certified peer specialists, or generalists. They provide 6 months of classroom instruction, and 3-6 months of training in internships, and have a

job matching program that matches an individual's interests, aptitudes, and skills with appropriate job sites.

Community Inclusion Initiative The agency recognizes the limitations of their own ability to train consumers; that is, they do not have the capability to offer consumers pre-vocational training, computer skills training, or advanced credentialing. Thus, rather than run their own in-house educational programs, Howie the Harp collaborates with the SUNY Manhattan Educational Opportunities Center for adult learners, to provide consumers with GED's, participates in a program at Pace University that provides basic computer literacy skills to enrollees free of charge to a number of applicants each semester, and continues to search for a mainstream training provider that will help train people in basic office skills for those consumers who need intensive vocational training.

Significance. In trying to develop programs addressing consumers' educational needs that go beyond their agency's core mission, they help connect consumers to other educational resources in the area to fulfill these needs. As a consequence, Howie the Harp's consumer-students have become active in the broader community of students at educational institutions in New York City.

Contact: Dwayne Mayes, Director. Howie the Harp Peer Advocacy and Training Center, Community Access, 2090 Adam Clayton Powell Jr. Boulevard, 12th Floor
New York, NY, 10027. 212-865-0775 Ext 2118. dmayes@communityaccess.org

Amarillo Area Mental Health Consumers: Helping Members Get Funding to Return to College (no website)

The Agency. Amarillo Area Mental Health Consumers is a non-profit, peer-support recovery center in Amarillo, Texas that operates the Agape Peer Center, and serves about 20 people a day on location. They have approximately 250 members, and like many other peer-run centers they offer support groups, informational classes, and group activities. They also run a GED program for individuals who have trouble in traditional classroom settings. A major focus of the organization is to encourage each consumer to identify himself or herself not as a mental health consumer, but as a musician, or as a computer specialist, or in another social role recognizable in the broader community.

Community Inclusion Initiative. One of the ways that Amarillo Area Mental Health Consumers excels beyond its traditional role as a peer center has been in helping consumers to get scholarships to pursue studies at regional institutions of higher education, now a standard practice that the staff members of AAMHC have accustomed themselves to doing. They have helped consumers successfully apply for scholarship programs to return to college, and helped members get funding from NAMI to return to school. They have helped others by referring them to the student loan office at various colleges to get Pell Grants and student loans. In addition they have referred consumers to the Handicapped Student Services at Amarillo College, where they can receive supports and advice on educational accommodations to their disability. They also refer people to the Panhandle Independent Living Center for computer training, especially useful for mental health consumers who also have a physical disability.

Significance. This is an example of an organization that uses its knowledge of community educational resources to steer consumers toward opportunities that they would not otherwise be aware of.

Contact: Carli Scales, Executive Director. Amarillo Area Mental Health Consumers, P.O. Box 44, Amarillo, TX79105. 806-373-9730. carli.scales@yahoo.com

Office of Consumer Advocates: Partnering in Education with Hagerstown Community College (no website)

The Agency. Office of Consumer Advocates, in Hagerstown, Maryland - cited previously - also steers consumers into educational programs at nearby Hagerstown Community College.

Community Inclusion Initiative. Rather than offering their own in-house educational programs, they leave it to the community college to educate the consumer along with everyone else. They have sent consumers there to pursue their GED studies, to pursue continuing education, and also to enroll in college courses. As part of their mission to find supports for those going to school, they help consumers apply for low cost or sometimes no cost classes. If they enroll early enough, consumers can be eligible through the disabilities office for laptop rentals at reduced prices, free time at the computer center, a tape recorder to record classes, and other supports. Consumer pursuit of educational goals has paid off in engagement with leisure activities also, as community colleges frequently have adult physical education programs and the college's "senior" recreational basketball, baseball and tennis sports teams. In addition to referring consumers to the community college, they refer them to the external education program (often one-on-one adult education) at the county's Career Study Center, a vocational high school run by the Washington County Board of Education.

Significance. OCA not only refers students to mainstream educational resources, it recognizes that the students referred may need a range of supports – scholarships, a referral to the college's own disability services offices, transportation problem solving, etc. – to succeed. Over time, OCA has realized as well that the more students it refers to mainstream community organizations, the easier it has become for additional students to take the path back to community engagement ("someone has done this before") and for the community organization (in this case the community college) to respond to disabled students' particular needs.

Contact: Ethel Nemcek, Executive Director. 265 Mill Street, Suite 200, Hagerstown, MD 21740. 301-790-5054. madjack@atlanticbb.net

Family Life

Office of Consumer Advocates: Parenting Classes at the County Health Department or Department of Social Services (no website)

The Agency. As previously mentioned, the Office of Consumer Advocates in Hagerstown, Maryland is the center for that state’s pilot self-directed care program for mental health consumers.

Community Inclusion Initiative. A certain percentage of the individuals enrolled in this self-directed care pilot program have lost custody of their own children, and the Office of Consumer Advocates is helping them to enter mainstream parenting classes that they may need to regain custody. The self-directed care program allows consumers to use the financial resources allotted to them on a yearly basis for parenting classes if need be. Rather than offering parenting classes themselves, however, they have been sending consumers to the county’s Department of Health, or the Department of Social Services for the classes, which are open to anyone who needs them.

Significance. The referrals to the countywide organizations such as the Department of Health for services, importantly, help mental health consumers join into a larger community of parents. As participants in classes with others, consumers are engaged in discussions of family issues with people from a broad cross section of society.

Contact: Ethel Nemcek, Office of Consumer Advocates. See above.

“What is really admirable is that this drop-in center has embedded itself in a neighborhood and makes use of its neighborhood’s strengths in a way that many others do not.”

Religion and Spiritual Life

Saint Louis Empowerment Center: Consumer Participation in Community Religious Life and Religious Social Life. (no website)

The Agency. The Saint Louis Empowerment Center is a drop-in center in urban Saint Louis affiliated with the Depression and Bipolar Support Alliance of Saint Louis.

Community Inclusion Initiative. The Center reports that they have developed an informal network of care with a group of African American churches in the neighborhood surrounding the Empowerment Center. The network itself began as customary Christian compassionate outreach. Initially, the Methodist Church in the neighborhood had a homeless outreach program, and referred the people they reached to the Empowerment Center. Then two volunteers from another church began bringing hot meals to the Center for consumers. They began leaving flyers in the center for church social activities such as church dinners, Wednesday night social meetings, and other open activities groups. Consumers began attending these church-based social activities. Distinct from these efforts, the Center began to offer a series of gatherings on Sundays to watch football games in a non-alcoholic environment. Before the Sunday football gatherings, church representatives would come to the Center to talk and then invite consumers to attend services. Several consumers have become full-fledged members of a church, actively contributing to the life of that religious community. This community of care continues to develop and add new dimensions. One church is working on starting a mental health

support group within the congregation. The church members have also helped open up new opportunities for housing, as they provide a larger social network for consumers to locate potential landlords.

Significance. What is really admirable is that this drop-in center has embedded itself in a neighborhood and makes use of its neighborhood's strengths in a way that many others do not. Consumers have benefited by becoming participating members of the local churches, and of the neighborhood in general. It is significant also in that the community resources that are being drawn on—neighborhood religious groups—are available to almost any drop-in center in the county.

Contact: Helen Minth, Director. St. Louis Empowerment Center 3024 Locust Street, St Louis, MO 63103-1329. 314-652-6100. hminth@sbcglobal.net

Leisure and Recreational Activity

The Art Collective: Moving Consumers from Arts in Recovery Programs into the Larger Art World.

(http://www.cairn.org/index.php?option=com_content&view=article&id=20&Itemid=22)

The Agency. The Art Collective is an 'arts in recovery' program at Club Access in New York City, part of a larger organization - Community Access - which began in 1974 as an agency providing housing and employment opportunities for people with psychiatric disabilities. The Art Collective itself has been in existence since 2006. While instructors have introduced participants to many art media, the medium that really resonated with the participants was book making because it empowers participants to "write the book" on themselves, rather than having their lives continue to be defined by others. The program also teaches several craft processes: participants can make the paper, bind the paper into books, and on each separate page create art from watercolors, painting, pencil drawings, or write poetry or tell stories.

Community Inclusion Initiative. The Art Collective has provided consumer artists a channel into an engagement with the larger art world of New York City. Since March 2009, the Art Collective has had a contract to sell consumer-made books at St. Mark's Bookstore in the Greenwich Village, where they have their own display shelf. Further, participants are encouraged to continue more advanced workshops and training at the New York Center for Book Arts. Some members have also participated in poetry readings at places such as the Audre Lorde Center in midtown Manhattan. Some have competed successfully to display their works at big art shows.

Significance. The Art Collective serves as one possible model for how arts-in-recovery organizations can work with consumers while also encouraging them to move on into the larger art world. They offer in-house classes, while not attempting to duplicate

the offerings of the advanced teaching centers in the area. Further, in addition encouraging consumers to exhibit their work in shows focusing on recovering artists, they encourage new artists to join the mainstream.

Contact: Suzanne Colley, director. The Art Collective, 242 East 2nd Street, New York City. 212-780-1400, ext. 2000 scoley@cairn.org

Vermont Psychiatric Survivors: Peer Advocates Link Consumers to Social, Recreational, Civic and Religious Groups
(<http://www.vermontrecovery.com/vps.html>)

The Agency. Vermont Psychiatric Survivors is the statewide consumer network of Vermont. Historically, several agencies in the network evolved from a psychosocial rehabilitation model of consumer recovery. Today, it is a network of consumer-run support groups and recovery initiatives.

Community Inclusion Initiative. VPS uses two methods to foster community inclusion: first, they use the WRAP (wellness recovery action plans) process to identify the civic, religious, recreational, and social interests individual consumers have as their goals for community connection; and, second, through their peer-to-peer mentoring program they help make these connections successful. What VPS does best is link each consumers to community organizations according to the consumer's own interests. Peer mentors have a unique ability to ease other consumers into new social roles. Rather than offering recreational activities at the Recovery Center, they make a practice of linking consumers to groups in the community with whom the consumer can develop a relationship. For example, the peer mentor will help introduce a consumer to a new community group, provide assistance until the consumer is better integrated into the group, and then allow the consumer to participate more independently. Similarly, if a consumer is interested in bowling, or sewing or knitting groups, a mentor will help connect that individual to others in the community with similar interests.

Significance. Community inclusion in the local civic, social, recreational and spiritual life of the community evolves from Vermont Psychiatric Survivors conviction that it is better to connect consumers to resources in the community than to provide recreational and vocational services in the Center. Peer mentoring is a particularly successful model of how to better ease mental health consumers into community life.

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Pink and Blues: A Core Group of Members Begin a Game Night Open to All at the William Way LGBT Center in Philadelphia (website currently under reconstruction)

The Agency. The Pink and Blues began in 2003 as a support group for LGBTQI (lesbian, gay, bisexual, transgender, questioning, & intersex) consumers in Philadelphia, Pennsylvania. For the last seven years, they have been meeting one evening a week, and averaging ten members in attendance at each meeting.

Community Inclusion Initiative. Although this is a small group not very well positioned to undertake community inclusion initiatives, they have come up with several interesting, ad hoc innovative ideas. Several members live in a building without cable television in an area where broadcast television reception is poor. Like many consumers elsewhere, they have little discretionary income to spend on outside entertainment. In response, Pink and Blues has been able to start a weekly “game night” get-together at Philadelphia’s LGBT Community Center. They meet in the lobby of the Center from 5:30 p.m. until about 9:00 p.m., play whatever board games that people have to bring, and open the event to everyone who comes in. Community participation – by other LGBTQI individuals without psychiatric disabilities - has been strong.

Significance. Representatives of many consumer organizations have spoken to us about the problems of poverty and of living in communities that seem to lack community resources to be integrated into. Poverty is, of course, a major barrier in the lives of many consumers. What is of value in this example is that community inclusion can be as simple as arranging to meet in a public space for board games, or card playing, or chess. Consumers do not have to join existing groups of non-consumers to become part of their communities, but instead can start their own activities and invite others to join.

“...community inclusion can be as simple as arranging to meet in a public space for board games, or card playing, or chess. Consumers do not have to join existing groups of non-consumers to become part of their communities, but instead can start their own activities and invite others to join.”

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PEOPLE Inc: Formal Nights Out Develop Consumer Interests and Connect Consumers to Similar Groups in the Community (<http://www.projectstoempower.org>)

The Agency: PEOPLE, Inc. (or Projects to Empower and Organize the Psychologically Labeled) has been in existence for twenty years, operating in Dutchess and Ulster Counties, New York, and also serving individuals in the surrounding counties. They provide advocacy for and services to people with mental health issues. They engage in individual and systems advocacy, in-hospital advocacy, peer support, and operate a hospital diversion house and a drop-in center. In addition, they operate a supported housing program, providing rental subsidies and care coordination.

Community Inclusion Initiative: Since 2006, PEOPLE, Inc has organized a Thursday Night Out program in Kingston, N.Y. and a somewhat newer Tuesday Night Out program in New Paltz, N.Y. When the program was beginning, they surveyed the

community and learned that many wanted a night out to socialize in a non-institutional setting. They began with six people meeting at a local coffee shop. Yet soon they wanted to start a bigger project. They began to have a “night out” in church halls in the community. At first staff organized the event, but eventually, consumers took on most of the organizing responsibilities. The staff purchases the snack food for the event, and the churches charge a small fee for use of the space. Some people walk to the event or take bicycles; some who live in group houses take a van. They also have a volunteer driving program in which individuals volunteer for twelve weeks to provide transportation for consumers at a minimal cost. The event lasts from 5:30 p.m. until 8 p.m. During that time, consumers themselves plan activities. PEOPLE provides a small stipend for individuals to develop their own activity for others, such as a discussion group, a poetry group, scrabble, monopoly, board game, or health related group. In addition, they have gone to the beach, to museums, or art shows. They have had fundraisers for a local soup kitchen, and bake sales. Finally, the organizers and participants encourage participation in the same activities, such as poetry groups, in the larger community.

Significance: The events among consumers on Tuesday nights and Thursday nights certainly help consumers to actively pursue their own interests and teach them to others, rather than have staff provide activities for them. What is of great interest for the effort of community inclusion, however, is that in addition to taking an active role in the consumer community in developing interests, they help participants move beyond involvement strictly with peers, and into involvement in similar activities in the general community, such as in poetry readings, or adopt-a-highway initiatives, or helping in fundraising for others.

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Civic Life

Grassroots Empowerment Project: Consumers in a Back-to-Work Curriculum Encouraged to Volunteer for the Dane County Timebank.
(<http://www.grassrootspower.org>)

The Agency. The Grassroots Empowerment Project is an umbrella organization of consumer groups throughout Wisconsin. In 2005, delegates from these groups developed a multi-week structured curriculum called “Career Paths to Recovery,” designed so that a peer facilitator can address issues consumers may face when they want to work, but feel they need to work on developing the skills to do so. The curriculum/workbook covers such issues as vocational planning through peer support, recovery and positive thinking, skills training, fair access in the workplace, and self-employment. During the course, people with mental health issues empower peers to recognize and fulfill work and life goals. Advertisements for participation put it this way: “If you’ve thought about working, but think you can’t, we will help you believe you can and help you get on the right path, while having fun.” Further, they advertise “we will work on self-image, social security, career interests, resume, finding work, self-employment, and staying well.” The

curriculum has been offered with different facilitators at a number of recovery centers in the state.

Community Inclusion Initiative. Community inclusion should be accomplished by encouraging consumer participation in non-consumer organizations. In this regard, the implementation of this curriculum has been of interest: group facilitators bring as guest speakers both area employers looking for new staff and leaders from area nonprofits looking for volunteers. Guest speakers encourage participants to volunteer to get work experience and to become more engaged with the community as a preparation for work. One example of a volunteer agency that they have worked with, the Dane County Time Bank (<http://www.danecountytimebank.org>), is particularly interesting: Time Banks in general (<http://www.timebanks.org>) are a system of exchange of volunteer labor made up individuals, small businesses, social service agencies, and public and private institutions. Individuals who volunteer at a participating institution for an hour can earn an hour of credit to draw services from others within the network. The concept is useful to mental health consumers in that it offers valuable opportunities for volunteer engagement in numerous community associations while earning timebank credits that they can use for such supports as child care, transportation, or fitness classes, and so on.

Significance. This project offers dual advantages. On the one hand, it is an interesting back to work program, and indeed volunteering as a job readiness technique has been around for a long time. More importantly, the project introduces consumers to staff of volunteer organizations, encouraging and supporting consumers to participate.

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Dodge City Peaceful Tribe: A Project That Promotes Bicycling Partners with the Local Police in Promoting Traffic Safety (no website)

The Agency. The Dodge City Peaceful Tribe, described previously, has developed a second initiative to foster consumer participation in community life. Consumers in the group who can't afford an automobile are helped to purchase electric bicycle kits. As a farming community, many of the consumers have the skills needed to assemble and repair farm equipment, so maintenance of the bikes is something that they can do themselves. Approximately fifty people involved in the group have purchased these bikes. Those who have purchased a bike can shop, go to work, run errands, visit their children's school, and so on.

Community Inclusion Initiative. Although a very creative support for a major *barrier* to community inclusion—lack of transportation—the project does not in itself indicate that consumers are *joining* into community life. What has increased consumer *engagement* with the larger community, however, is a collaboration that Dodge City Peaceful Tribe has developed with the local police as a consequence of the electric bicycle program. With so many bicyclists sharing the roads with automobiles, it has become necessary to educate bikers and motorists alike on how to share the road. As a consequence, once a year they collaborate with the local police in sponsoring a tutorial (meeting in a large local parking lot), for all of the area's bikers and motorists, entitled

“Rules of the Road: Bikes and Vehicles.” Participants are all recognized as citizens who are required to respect each other’s rights to share the same road.

Significance. It is wonderful that some consumer organizations are attempting to find ways to overcome a dreadful problem of lack of public transportation infrastructure. But community inclusion is not a matter of physical or geographic inclusion so much as inclusion into the social life of a community. In this regard, what is admirable about this program is the collaboration with the police department in sponsoring the drivers’ education tutorial for the public.

Contact: Diann Brosch, Executive Director. Dodge City Peaceful Tribe, P.O. Box 1111, Dodge City, Kansas, 67801. 620-623-2034. dodgecity_peaceful_tribe_06@yahoo.com.

HOPE Impact: Consumer Group Attends Community Meetings and Starts a Community Cable Television Show on Recovery (no website)

The Agency. HOPE Impact is a mental health educational and advocacy group in Wahiawa, Hawaii, a rural town in the north of the island of Oahu. Meeting weekly or bi-weekly at the Wahiawa General Hospital, they have averaged eight to ten people in attendance.

Community Inclusion Initiative. As part of the group’s focus on educating the public about people with mental illnesses, they make it a point to attend the local neighborhood meetings (the Wahiawa-Whitmore Village Neighborhood Board) to advocate for people with mental illnesses, the homeless population, people with substance abuse problems, and for the many veterans with similar issues who live in the area. As an outcome of their involvement in the community they have come to know and cooperate with other groups working in the area, such as the housing advocacy group Affordable Housing and Homeless Alliance, and the group Surfing the Nations, that does religious outreach in the area. Second, the founder of the group has begun a television show entitled “Hope in Recovery” on Hawaii community access cable television that airs once a week for half an hour. Although each show thus far has highlighted an individual in recovery, in the coming year, Ms. Algosos plans to also interview local officials about mental health policy.

Significance. While many consumer groups engage in public advocacy, individuals from HOPE Impact have, in the process, become engaged in community life simply by attending community meetings. Secondarily, consumers who take to the broadcast media become part of American public discourse. Also, in participating in community television, they are outside of the mental health community, collaborating with a different vital organization of civil society, community media.

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DBSA-Southern Nevada: Partnership with a Public Library in Sponsoring a Lecture Series (www.dbsasouthernnevada.org)

The Agency. The Southern Nevada chapter of the Depression and Bipolar Support Alliance is an all-volunteer education, advocacy and support group that began in 2001 and now runs eight support groups a week. They have a total average weekly attendance of 250 people.

Community Inclusion Initiative. As a facet of their mission to educate, they partner with the West Charleston Public Library in Las Vegas in sponsoring a once-a-month speaker series on mental health issues. One recent lecture, for example, focused on elderly gambling and elderly suicide. Together with library staff, mental health consumers help arrange the lectures, volunteer to set up and break down tables and equipment, or just attend the lectures with everyone else. These lectures are free of charge and open to the public, and professionals who attend can earn continuing education credit for attendance.

Significance. What is noteworthy about this consumer-sponsored public lecture series is that consumers are not sponsoring a lecture series in their own center and for their members only, and not joining in an existing event in the community, but are proactively starting their own event—along with public library—that others are free to attend.

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Office of Consumer Advocates: Consumers Join Community Crime Watch in Oakland, Maryland (no website)

The Agency. For several years now, a number of consumers affiliated with Harvey House, the local peer center in Oakland, Maryland, have been full participating members in the town's Community Crime Watch program.

Community Inclusion Initiative. In this program, volunteers initially receive training from the city police. After that, crime watch volunteers have meetings approximately every month to discuss the state of the program and to allocate specific days of duty to each participant. Consumers are not relegated to patrolling lower income housing where many consumers live, but instead monitor the safety of the entire crime watch area, which consists of the small downtown area of Oakland. Volunteers have made friends through this activity, and procured side-jobs.

Significance. This example of community inclusion in the domain of civic involvement is of interest in this context for several reasons. First, it counters the common image of mental health consumers as offenders. More specifically, it shows how community inclusion can be accomplished by consumers joining membership-based community organizations and accruing related rights and responsibilities.

What is noteworthy about this consumer-sponsored public lecture series is that consumers are not sponsoring a lecture series in their own center and for their members only, and not joining in an existing event in the community, but are proactively starting their own event—along with public library—that others are free to attend.”

Contact: Ethel Nemcek, Office of Consumer Advocates. See above.

Health Care

Amarillo Area Mental Health Consumers: Referrals to Medical and Other Care (no website)

The Agency. Amarillo Area Mental Health Consumers – mentioned previously in regard to the assistance it offers consumers in pursuing an education – also routinely refer consumers to lower cost health care facilities in the area and to group classes at area hospitals that focus on particular health problems.

Community Inclusion Initiative. They have referred individuals to the Federally Funded Health Clinic’s dentist (despite a four month waiting list), and to the J. O. Wyatt Clinic and Texas Tech for persons who qualify based on low income. The Northwest Texas Health Clinic has smoking cessation classes and a diabetic care group that they refer to instead of offering in-house classes. Further, the organization has also referred members to an on-going grieving group and a hospice education group at Baptist St. Anthony’s, another regional hospital. They have helped people access trauma counseling through the Family Support Services, another non-profit agency. In addition to medical referrals, they have encouraged consumers who are seniors to begin going to a senior center rather than continuing to identify only as mental health consumers. Not necessarily health related, the group formerly worked with a lawyer at West Texas Legal Services who came to the Center once a month to assist consumers with problems with rentals, contracts, divorces, and so on. Yet the lawyer was so swarmed with consumers seeking advice, that she stopped coming there, and instead the organization refers people to her office, where she continues to assist them.

Significance. It is important to understand the role of *referrals* to mainstream programs – to educational opportunities or health care facilities, for example - in the inclusion of people with psychiatric disabilities into community life. Once a consumer organization has been in existence for a number of years, its staff and members will have learned the avenues that are open to consumers in the broader community. A new member might have an interest in finding a diabetes care class, but not have the knowledge of where to find such a class. The practice of referring such clients on a repeated basis becomes a pattern of referral. This pattern of referral itself can become a programmatic collaboration then, by which the consumer organization establishes itself, as well as individual consumers, as visible members of the larger community.

“It is important to understand the role of referrals to mainstream programs – to educational opportunities or health care facilities, for example - in the integration of people with psychiatric disabilities into community life. Once a consumer organization has been in existence for a number of years, its staff and members will have learned the avenues that are open to consumers in the broader community.”

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DBSA-Southern Nevada: Consumer Group Joins in Health Fair Circuit
(www.dbsasouthernnevada.org)

The Agency. The previously mentioned Southern Nevada chapter of the Depression and Bipolar Support Alliance is an all-volunteer education, advocacy and support group that began in 2001.

Community Inclusion Initiative. As part of their advocacy mission, they participate in many of the large, public, health fairs that different organizations in the Las Vegas area sponsor every year, setting up a booth, making contacts and passing out their literature. The group attends the health fairs, for example, of the Clark County school counselors, the police department, and several local hospitals, setting up their own booth, distributing their literature, and talking to the public. In addition, they sponsor their own outdoor health fair that other health care providers attend and distribute their literature. Other than health care booths, the fairs have art displays, a car wash, and sometimes basic health screenings.

Significance. What is interesting about this consumer organization's involvement in public health fairs is that such participation is based on reciprocity. Civic organizations that put on a health fair invite other health care organizations to sponsor booths. In return, the host organization of one fair often has a booth at other groups' fairs. Such patterned reciprocity is a principle of community life. When consumers and consumer organizations participate in such reciprocal actions, they are integrating themselves into community life.

Contact: Cheryl Murphy, President. Depression and Bipolar Support Alliance Southern Nevada. See above.

Finances

Capital Clubhouse: Partnering with a Business Training Non-Profit to Teach Financial Management (<http://www.enterpriseforequity.org>)

The Agency. The previously mentioned Capital Clubhouse in Olympia, Washington collaborates with another non-profit agency in Olympia called "Enterprise for Equity" in teaching mental health consumers how to start a small business.

Community Inclusion Initiative. Enterprise for Equity offers the sixty-hour course on financial management, asset building, and how to develop a business plan for a wide range of people with limited incomes, including mental health consumers. This organization is an independent community non-profit that was started by volunteers from a number of area agencies in 1999, and that helps low income people operate their own businesses.

Significance. Rather than attempt to duplicate a service already offered in the community, Capital Clubhouse directs its members to this community non-profit to help with financial management.

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“Peer mentoring programs that focus on community connections can offer assistance in community living tailored to the individual consumer’s interests.”

Agency-wide Community Inclusion Initiatives.

Voices of the Heart: Peer Advocacy **(www.voicesoftheheart.net)**

The Agency. Voices of the Heart began as the food pantry division of a larger human service provider. The food pantry volunteers spun themselves off a number of years ago to become a peer-run drop-in center and independent non-profit. After that, they developed self-help support groups and community education projects. Today, VOH also trains current consumers affiliated with the organization as peer advocates, who have major responsibility for mediating between individual consumers and the community - in what they sometimes call “case management-lite.” According to staff, there are about eight to ten volunteer advocates and forty people receiving services.

Community Inclusion Initiative. Much of what the peer advocates do is community linkage. Rather than hiring their own employment coach, for example, they will link the individual to the workforce development center at the local community college. They have also linked consumers to legal services or to the local Family Services Association (<http://mysite.verizon.net/bizwncfa/familyserviceassociation/index.html>), for such things as emergency dental care, or aid for children. Further, they have many ties to the local business community, who provide financial support and occasionally hire consumers. Counselors and peer advocates have even been able to find community help to pay the deposit on a new apartment or to locate churches that can help a consumer to move her personal effects when moving between apartments. This emphasis on community linkage is what makes their program significant as a holistic program promoting community inclusion across many domains.

Significance. Voices of the Heart is not alone as a consumer-operated service provider that fosters community inclusion through its peer mentoring program. Vermont Psychiatric Survivors (<http://www.vermontrecovery.com/vps.html>) has developed a peer-to-peer mentoring program that works in this way, and the Austin Area Mental Health Consumers (www.austinmhc.org) in Austin, Texas, also report a peer mentoring program working across many domains. Peer mentoring programs that focus on community connections can offer assistance in community living tailored to the individual consumer’s interests.

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Dodge City Peaceful Tribe: Inclusion for Consumers in Small Town America (no website)

The Agency. We have written previously about this group's initiative to find housing in the community for mental health consumers, and also about their collaboration with local police in educating residents of Dodge City about how bicyclists and motorists should interact on the roads. Yet their strategies for integrating consumers into the life of this small city can not be pigeon-holed as pertaining to one domain or another, as they provide many examples of integrative initiatives.

Community Inclusion Initiative. Members of Dodge City Peaceful Tribe, for example, also work in the community not only as recipients of charity, but as volunteers for a faith-based organization that delivers food boxes to people in need of charity. Members of the Dodge City Peaceful Tribe participate as volunteers in a social ministry of their different churches in which participants check-in on other church members who have been hospitalized and may have unmet needs. Also, about ten members of the group volunteer as "Senior Companions," which is a volunteer adjunct to the program "Senior Corps."

Significance. Dodge City Peaceful Tribe has been able to use the close knit social networks often seen as characteristic of small town life to find opportunities for consumers across many aspects of community life.

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Capital Clubhouse: Multiple Organizational Collaborations for the Benefit of Low-income People Regardless of Mental Health Status
(<http://www.enterpriseforequity.org>)

The Agency. In addition to the Ready to Rent program and the collaboration with the local non-profit organization that instructs low-income people about financial management, this clubhouse runs numerous programs in which they collaborate with other area institutions or businesses and which are open to low income people, whether mental health consumers or not.

Community Inclusion Initiative. The Clubhouse wants to be part of the community, and to be of service to community members, regardless of disability status. For example, rather than having their own in-house washers and driers for consumers to wash their clothes, they provide vouchers for people in need to use a local laundromat to wash clothes. Similarly they provide vouchers to applicants in need, whether mental health consumers or not, to be able to shower at the local YMCA. They offer scholarships to the local YMCA for low-income individuals to participate in activities there, be it yoga, swimming or basketball. For education, they send people to the local community college for GED classes, rather than trying to run their own classes. Finally, they have

started a website (www.nwseedsofchange.org) with other organizations in Washington State for consumers, providers, families and their larger support systems to interact.

Significance. Of interest in this example is the way that the staff have moved the clubhouse in the direction of providing services for people in need—including but not limited to consumers—in multiple ways.

Contact: Susan Allen, Executive Director. 618 7th Avenue SE, Olympia, Washington 98501. 360-357-2582. opportunities@capitalclubhouse.org

Office of Consumer Advocates: A Multi-site, Multifaceted Focus (no website)

The Agency. The Office of Consumer Advocates, headquartered in Hagerstown, Maryland has been sited four times previously in this document. Yet they merit further mention.

...”these initiatives are often quite simple: that is, they are initiatives that can be replicated by consumer operated programs across the country.”

Community Inclusion Initiative.

Members of the large Mennonite communities in Garrett County have helped consumers to learn how to do cleaning and other home skills when they are having trouble perhaps with the local housing authority that oversees the housing units in which they live. The Mennonite groups have invited consumers to their annual picnics, and have invited them into their churches. Some consumers have become

members of these local churches. Further, they have worked at locating inexpensive opportunities for healthcare for consumers in the counties in which it operates. They have been able to find one dentist in the area who will work with mental health consumers for minimal cost. They also have a working relationship with a free medical clinic in town where doctors volunteer their time, and where patients can sometimes get medications free of charge. They have also located small medical practice, called Tri-state Medical, which will care for mental health consumers for a reduced fee.

Significance. This organization is sited here because their effort to locate community resources for individuals they serve is rather comprehensive and cannot be confined to one domain or another.

Contact: Ethel Nemcek, Office of Consumer Advocates. See above

Some of the projects discussed here are small in scope. Yet what they all share is 1) a determination to ensure that consumers of mental health services become part of the larger civil society, and 2) a determination to achieve this community inclusion by partnerships with community organizations. Furthermore, these initiatives are often quite

simple: that is, they are initiatives that can be replicated by consumer operated programs across the country in ways that will foster greater consumer participation in society. In the process everyone's lives will be improved, and we will create a more robust civil society from which everyone will benefit.

II. Recommendations

This year-long effort to identify consumer-run programs providing community inclusion supports has proved useful in two ways. First, it is clear that there are many consumer-run programs across the country that have moved beyond sponsoring drop-in centers or scheduling educational opportunities in-house: many have begun to work directly or indirectly with mainstream community agencies and to provide the supports consumers need to re-connect to their communities – thrusting consumers “into the thick of things.”

Second, however, it is also clear that many consumer-run programs have not yet moved very far in this direction. With few funds and inexperienced staff, they stick to the basics, even while they have the unrealized potential to reach out to their surrounding communities and build supports for consumers who do indeed wish to move beyond the world of psychiatric disabilities and back to the world of valued – and rewarding - social roles.

To help consumer-run programs move more decisively in the direction of community inclusion, we offer a few recommendations for action. There is very little in these recommendations that are likely to surprise you. In one sense, they are the most fundamental of planning steps for any new initiative. In another sense, they are just plain common sense – with a community inclusion emphasis! But they can be useful in thinking through how a consumer-run program can better meet the needs of its consumers in building more meaningful and more satisfying lives. It's as basic as A – E – I – O – U.

Assess consumer needs and staff interests – then prioritize. Most new initiatives begin with an assessment of consumer needs (in this instance, in what areas would consumers like to be re-connected to their communities?) and staff capacities (in this instance, how much do staff know about the array of community resources available?). Here are some ideas to do both – and then to prioritize which actions you can take: the process begins with asking consumers about their current connections to community life, and in what areas they would like to be more connected. Consider the following options:

- . put together a list of ‘community life domains’ (like the ones used here – housing, employment, spiritual life, etc.) and develop a written or interview survey to be taken by consumers that asks how often they participate in activities in the community *and* whether they would like to do so more often;

- . pull together one or more ‘focus groups’ of consumers – 8- 12 people at a time – and ask people to talk about their level of satisfaction with their participation in community activities, what they would like to do more of, and what barriers they think exist to achieving greater community inclusion; and

. ask staff in the consumer-run program how often they have helped consumers to connect to community life, and what supports exist for doing so and what barriers to doing so have they faced: check to see whether staff think greater community inclusion is a good idea, or not.

With a better sense of what consumers and staff are thinking, the consumer-run program can begin to prioritize – that is, pick one or two areas at a time to work on. There are so many aspects of life and so many community organizations, that it would be simple for a program to feel overwhelmed by multiple responsibilities to multiple consumers. To make sure at least one or two community inclusion initiatives move forward effectively, pick one or two areas (e.g., building up volunteering opportunities in the community, developing relationships with local employers, connecting to area churches and synagogues and mosques) and develop a consensus – among both staff and consumers – that for now your emphasis is in those areas only.

Educate yourselves about community opportunities. Mental health agencies – both traditional programs and consumer-run services – often do not know very much about the opportunities that exist in the surrounding community (where are the recreation centers? how many church groups are targeted to seniors? what types of job training programs are there?) – and neither do many consumers. Once you have a priority or two, start researching what actually exists in the community around you, and how you can access those resources – who is eligible, how much does it cost, etc. Here are some approaches:

“Staff can certainly take responsibility for identifying community resources, beginning to develop a catalogue of the opportunities available, and making sure that for each listing there is also information on eligibility and costs.”

. staff can certainly take responsibility for identifying community resources, beginning to develop a catalogue of the opportunities available, and making sure that for each listing there is also information on eligibility and costs – as well as the resources consumers can draw upon to participate (e.g., scholarships, etc.);

. consumers can do a great deal of the work: form a committee of consumers with a particular focus (e.g., list all of the colleges, community colleges, career colleges, vo-tech programs and GED courses) in the area. It will help if consumers can call each resource to gather details they need for a

useful listing; and

. consumer-run programs may want to go further and begin contacting each of the resources in these new listings to begin discussions – with a college admissions officer or the director of a local recreation center, or a pastor – to begin to open doors to consumers who want to participate in their activities.

With a better sense of the range and costs and complexities of opportunities for consumer involvement in the community, consumer-run programs and the consumers they serve can then begin to work on strategies for identifying barriers and building supports for participation. You may find yourselves surprised at the wealth of opportunities and the willingness of community organizations to provide some assistance – but you will never know how far you can go without this initial educational initiative.

Identify organizational barriers and plan a strategy to overcome them. Community inclusion isn't as easy as just showing up: the isolation of individuals with mental illnesses is in part a reflection of the prejudice, poverty, and protectiveness that consumers have experienced for many years. Consumer-run programs are in the perfect position to challenge these and other organizational barriers so that consumers have every opportunity to participate in the world around them. It is not necessarily easy, but it can be a vital and vibrant part of the consumer-run organization's mission. Try to address:

- . prejudice: while some community organizations may be welcoming of people with mental health challenges, many will be wary or downright hostile. No one wants to thrust consumers into unwelcoming situations, and so consumer-run programs will sometimes need to take the lead in working with local organizations, educating and challenging them for change;

- . poverty: community inclusion can often strain consumers' budgets. Joining the baseball league, setting up an apartment of one's own, going on dates, participating in community fairs, paying tuition – all of these are challenges to limited budgets. Agencies can seek scholarships and develop specialized budgets to meet these costs; and

- . protectiveness: we tend to be protective of consumers, and worry about the risks of helping people move 'into the thick of things.' What if they are rejected or are unsuccessful, what if they get lost or confused – what then? Consumer-run programs can do a great deal to anticipate problems, but must believe in the 'dignity of risk.'

Strategies to confront organizational barriers, then, require an awareness that some of the problems are internal (e.g., how wary are staff and consumers alike of engagement in the community?), and some are external (e.g., how unwelcoming is a community organization, and what practical hurdles must be overcome?) Faced by community and staff and consumer hesitancy, the tendency is to turn away from the challenge of community inclusion: yet, the programs in this compendium argue that those challenges can be met creatively.

Organize individual supports to help assure success. While consumer-run programs tackle organizational barriers, they must also pay attention to the supports that individual consumers may need to succeed in their new efforts to connect to their communities. While some consumers will be just fine on their own – comfortable with their identity and skilled in their social interactions – others will need a good deal of support. But supports for community inclusion are best offered *in the community itself*, rather than in

the cloistered setting of the consumer-run program: that is, consumer-run program staff ought to be working in the community as well. You might want to try:

. staff assistance. Some consumers may benefit from having staff members of the consumer-run program accompany them to community events – attend a church service with them, help them look at apartments to rent, go to the bowling league – for at least a few times until the consumer is more comfortable on his or her own;

. peer support. Other consumers may want to support each other: one consumer comfortable in social settings can help another; those who are already a member of a local congregation can invite another consumer along. Consumer-run programs can help to organize consumer-to-consumer supports that promote community inclusion; and

. community mentoring. Some community organizations may be willing to offer the support of their own staff or their own members to provide consumers with someone they can count on in a new setting to provide them with guidance and companionship – a way for community organizations to extend their own mission.

While some aspects of community inclusion do indeed pose some risks, using staff, consumers, and community organizations to help consumers anticipate those risks and have someone to turn to for help in times of stress or doubt can be invaluable. In that way there will be every opportunity for the consumer to be successful – and to know that there is someone there to help if things go wrong.

Update the plan: add new goals as time goes by. The advantage of taking on one or two challenges at a time is that it allows consumers and consumer-run programs to succeed and then return to the planning process at a later date to re-assess. In some cases, consumers may experience tremendous success in rejoining one aspect of community life, and will be ready to take on another. In some cases, the effort will prove to be unsuccessful – but returning to the planning stage allows everyone to choose a new priority, develop new strategies, and try again. Over time, the consumer-run program with a strong and continuing commitment to community inclusion may find itself with a multitude of organizational and individual connections to community life that will serve the agency and its consumers well, returning people back into the web of community life.

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Appendix I

A Summary of Supports Provided by Survey Respondents, and a List of Collaborating Community Organizations

In response to our request for information, a number of consumer-operated service providers reported having developed a broad range of supports for designed to help consumers to participate in community life. Many describe the supports they develop as intended to fill in the gaps left after a consumer's basic needs have been met by professional service providers. We think of these supports as vital, but not necessarily the kinds of initiatives that we have wanted to highlight in this particular document, which emphasizes a series of direct connections between consumer-run agencies and mainstream community organizations. Nonetheless, the diversity of these supports and the ingenuity of consumer providers in developing them merit recognition: readers may find a glimmer of an idea here they may want to develop in their own settings.

Housing

- Consumer-run agencies in Spokane, Washington (Passages) and Glen Falls, New York (Voices of the Heart) provide consumers escrow money to make advance payments on apartments.
- Voices of the Heart respondents mentioned also that they have been able to locate community resources--such as church vans--to help consumers move from one apartment to another when they are otherwise lacking in transportation, and use

- peer advocates to help consumers learn rights and responsibilities of both landlords and tenants.
- Paradise Center (Fort Worth, Texas) and On Our Own (St. Mary's Ct., Maryland) have been able to help consumers complete applications for apartments, procure furniture, household supplies, and find help in paying for utilities.
 - Familylinks Outreach Center in Washington D.C. has provided workshops to consumers on how to interact with housing managers. The Wellness Shack in Wisconsin reported having an "advocacy group" that helps consumers resolve issues with landlords. Recovery Empowerment Network in Phoenix, Arizona has employed peer advocates who advocate for consumers in landlord/tenant court. The Ida Mae Campbell Foundation in Washington D.C. and Cheers in Phoenix, Arizona provide mediation with landlords.
 - On Our Own, in Anne Arundel County, Maryland reports writing letters to landlords on behalf of consumers when landlords do not respond to repair requests, and Chestnut Clubhouse in Philadelphia Pennsylvania has an advocacy group that has helped work with landlords when the member has been denied housing because of past convictions.
 - The Saint Louis Empowerment Center helps consumers save to pay for rent.
 - CSPNJ participates in an Individual Development Account program that matches consumer savings to help consumers save to buy a home. Main Street Housing buys properties, renovates them and rents solely to persons with psychiatric disabilities.
 - Several groups, such as Feed His Sheep in Clayton, North Carolina and Horizon House in Wilmington, Delaware, provide consumers with housing referrals or contact information. The Open Door, in Arkansas City, Kansas, accompanies consumers when shopping, and provides transportation.

Employment

- Center for Career Freedom in White Plains, New York is run by consumers who have business experience: they have developed a program to train consumers at their own pace to become Microsoft Office support technicians. When consumers finish their training, some go on to work in the field in independent, non-supported employment. Some of their graduates have formed a team of technicians who are contracted by outside agencies to provide support to the MS Office applications. Their service contracts, however, are only within the local mental health system. When a consumer who attends the Center finds a job, she/he receives a *work start up kit* of a radio alarm clock, a watch, suitable business clothing, a bus pass, and sometimes a calendar. These items are procured through private contributions.
- The Recovery Center run by Vermont Psychiatric Survivors operates a soup kitchen, and some of the individuals who work in the soup kitchen have begun their own catering service that caters in-house functions.
- Shining Reflections in Ohio teaches consumers skills needed to seek jobs.

- Respondents from On Our Own, St. Mary's Wellness and Recovery Center, in St. Mary's County, Maryland report that they assist with job hunting, with writing resumes, and with transportation when needed. They will also advocate for a consumer with possible employers.
- CSPNJ (Collaborative Support Programs of New Jersey) report that they have developed a job coaching department that helps people address barriers to employment. Chestnut Street Clubhouse helps transition consumers from supported employment to independent employment. Ida Mae Campbell Foundation offers assistance in paying for ID cards and birth certificates, which are needed to get employment in the US. The St. Louis Empowerment Center offers a support group focused on keeping employment, especially focusing on anger management.

Education

- The Chestnut Clubhouse in Philadelphia, Pennsylvania sends members to GED classes run by the City of Philadelphia. Catholic Charities at Step-by-Step Clubhouse in upstate New York helps with enrollment for mainstream GED classes, and at Cayuga Community College. Many others also refer individual consumers to community colleges.
- Shining Reflections in Ohio has an education center of its own, and the County in Ohio where they are located offers all of its adult education classes and GED classes there. Shining Reflections also has an educational curriculum on mental illness, taught by consumers for family and friends of people with mental illnesses.
- Amarillo Area Mental Health Consumers Association and the Recovery
- The Recovery Empowerment Network in Phoenix provides consumers information about scholarships and educational grants. Consumer Support Project of New Jersey maintains a coaching department that helps consumers address their barriers to getting an education.

Family Life

- Saint Louis's Empowerment Center uses the local Salvation Army's on-line family location program to help reunite consumers with family members with whom they have lost contact. Yet this program is an on-line service, and does not therefore really bring consumers into greater face-to-face inclusion with others in society outside of the peer center. Similarly, On Our Own, St. Mary's Wellness and Recovery Center, in St. Mary's Ct., helps consumers find family and relatives using the internet.
- The Wellness Shack, in Eau Claire, Wisconsin mentioned that they co-sponsor a parenting group with Public Schools' Head Start program for parents with mental

- illnesses. This group is limited to parents with mental illnesses, rather than being offered to all, and the group classes are held in the peer resource center itself.
- Peer specialists at the St. Louis Empowerment Center make a point of being available to meet estranged family members and help consumers re-unite for the first time. DBSA Southern Nevada holds three weekly support groups for family members at the same time that consumers are holding their meetings in a different room; they report that this helps to re-engage consumers and their families. The Amarillo Area Mental Health Consumers helps mediate between consumers and their families, and some, such as the Dodge City Peaceful Tribe, sponsor a family night.

Religion and Spiritual Life

- Feed His Sheep, in Clayton, North Carolina writes that most of its members attend services at local churches.
- St. Louis Empowerment Center works with local churches whose members bring food to consumers in the Center, invite consumers to church social activities, and encourage those interested to join the church. Chestnut Clubhouse mentioned that two consumers there volunteer as American Sign Language interpreters at a local church.
- Vermont Psychiatric Survivors accompanies individuals to religious groups of their choice, and stays with them until becoming established in the group. Only then would the companion withdraw and let the consumer interact with her or his religious community on her/his own. The Recovery Empowerment Network of Phoenix, Arizona refers consumers to local faith communities.

Leisure and Recreational Activity

- St Louis Empowerment Center directs its members to the free programs at the local YMCA. The aforementioned Office of Consumer Affairs directs consumers to the local YMCA and its morning of free events for people with disabilities.
- Hope, Inc., of Phoenix, Arizona, has a monthly bowling night to which it takes some members. A few members have taken advantage of this opportunity to connect to local bowling leagues, and to join one of them on their own.
- On Our Own, of Anne Arundel County, Maryland gives consumers info about upcoming local events that are open to the general public. Members of the Pink and Blues of Philadelphia organized a game night at that city's William Way Center, the LGBTQI community center. The Chestnut Clubhouse in Philadelphia has several members who attend evening and weekend activities at local libraries, engaged in activities such as chess and scrabble. Shining Reflections in Ohio has an 'information and referral' section on where to go for fun. Amarillo Area Mental Health Consumers has encouraged consumers who are seniors to go to the

- seniors' center, and on occasion, directed another to a ham radio group, accompanying them there if necessary.
- Vermont Psychiatric Survivors links consumers to social, recreational and religious groups of their interests. Passages, in Spokane, Washington, has peer specialists help consumers identify interests and help connect them to appropriate groups based on interests. Austin Area Mental Health Consumers has an application form that asks consumers their interests, and peer mentors help them to connect to resources that can help them develop those interests.

Civic Life / Volunteering

- Career Paths to Recovery, the back-to-work curriculum developed by the Grassroots Empowerment Project of Wisconsin, brings in representatives of local volunteer organizations such as the Madison TimeBank to encourage participants to volunteer.
- Recovery Empowerment Network works in a coalition called “Protecting Arizona’s Families Coalition” with other non-mental health agencies on legislative advocacy for social service funding, and their members are encouraged to participate in these advocacy efforts. Pink and Blues in Philadelphia is a support group that supports civic engagement of members with the civic institutions of the LGBTQI communities, including Liberty City Democratic Group and the Log Cabin Republicans.
- Helping Others through Empowerment, a peer resource center in East Baltimore with a large homeless population has a Community Ambassador Program which gives their members an opportunity to go into the community and hand out pamphlets to educate people about homelessness and homeless people with mental illnesses. The concept of a peer center having a community ambassador - designating one agency member as community ambassador to forge ties with civic, religious, neighborhood associations, as well as businesses and non-profits - could help individual consumers to broaden their ties to their neighborhoods, and help the organization itself broaden its ties to the community.
- Feed His Sheep in Clayton North Carolina, has volunteers in local schools, at Habitat for Humanity, and they support Voter Registration Drives whenever they can.

Health Care

- DBSA-Southern Nevada hands out referral lists to local physicians, Paradise Center in Fort Worth, Texas provides referrals to doctors and provides rides to doctor’s appointments.
- Collaborative Support Programs of New Jersey has created an “Institute for Wellness and Recovery” that provides wellness coaches, who assist consumers in any aspect of recovery. The wellness coaches help consumers to advocate for

- themselves with their medical providers. CSPNJ also offers screenings for metabolic syndrome and provides consumers health education.
- Capital Clubhouse does in house trainings on healthy living, smoking cessation, diabetes care, stress reduction, and exercise. Also, they assist in finding physicians, medical screenings and mental health services. Chestnut Clubhouse in Philadelphia has offered onsite screenings from the University of Pennsylvania Dental School, and Medical School, and the Pennsylvania School of Optometry.
 - Mental Health Consumer Advocates of RI has had Health and Wellness Support Groups. On Our Own Anne Arundel County, Maryland assists consumers getting medical and dental help, making calls, setting up appointment. They also will accompany consumers to appointments, and sometimes provide transportation.
 - On Our Own, St. Mary's Wellness and Recovery Center, in St. Mary's Ct. accompanies consumers to doctors, provides transportation to pharmacies, and provides transportation when consumers are sick and can't get out on their own. Importantly, they also help advocate with the local health department to get temporary meds until consumers can get doctors' appointments.
 - Feed His Sheep (North Carolina) has volunteers in local Health Fairs.

Finances:

- On Our Own offers members classes in budgeting as part of their supports for consumers returning to work. Shining Reflections, in eastern Ohio has a budgeting class in its "job seeking skills training." Amarillo Area Mental Health Consumers, Familylinks in Washington D.C., and the Office of Consumer Affairs in Maryland also offer classes on budgeting.
- CSPNJ has supported financial services that help consumers pay rent and bills in a timely fashion. On Our Own, St. Mary's Wellness and Recovery Center, in St. Mary's County, Maryland, has monthly budget days to assist in budgeting, but are also available to assist with budgeting and planning as needed. The Saint Louis Empowerment Center helps consumers save for rent.
- The Amarillo Area Mental Health Consumers writes that they advocate for consumers that have problems with their banks. HOPE, Inc., of Phoenix, Arizona teaches simple budgeting and runs a token economy that has helped some consumers become their own payees, instead of relying on another.
- Collaborative Support Programs of New Jersey reports that they have instituted a program of Individual Development Accounts in which consumer savings are matched with federal dollars and CSPNJ's own money for consumers to pay for education, or to purchase their own houses. Collaborative Support Programs of New Jersey also offers two-hour to two-day trainings around the state on financial management for consumers, basing the curricula on that entitled "Building Wealth" developed by the Federal Reserve Bank in Dallas, and "Money Smarts," developed by the FDIC.

Collaborating Organizations: A Listing of Mainstream Community Agencies and Organizations Collaborating with Consumer-Run Program To Promote Expanded Community Inclusion Opportunities

The YMCA; Consumer Credit Counseling. The Dane County Time Bank (Dane County, Wisconsin); Pace University (New York City); The Salvation Army Missing Persons Program, Eau Claire County Head Start (Wisconsin) Hagerstown Community College (Hagerstown, Maryland); Neighborhood Town Watch of Garrett County, Maryland; William Way LGBTQI Community Center, (Philadelphia, Pennsylvania); West Charleston Public Library (Las Vegas, Nevada);. Federal Reserve Bank in Dallas; Wahiawa-Whitmore Community Neighborhood Board, (Oahu, Hawaii); Surfing the Nations, (Oahu, Hawaii); Affordable Housing and Homeless Alliance (Oahu, Hawaii); Family Services Alliance (Glens Falls, New York); Hawaii Community Access Cable Television, Log Cabin LGBT Republican Club , Liberty City Democratic Club (Philadelphia, Pennsylvania), City of Brotherly Love Softball League (Philadelphia, Pennsylvania), Habitat for Humanity, St. Mark's Bookstore (New York City); New York Center for Book Arts, Audre Lorde Center (New York City), Chamber of Commerce, Catholic Charities, Senior Link, Community College of Philadelphia, Cayuga County Community College (Ohio), University of Pennsylvania Medical School (Philadelphia, Pennsylvania); University of Pennsylvania Dental School (Philadelphia, Pennsylvania), Philadelphia School of Optometry (Philadelphia, Pa.), Treatment Instead of Prison (Eau Claire Ct, Wisconsin), Joining Our Neighbors Advancing Hope (Eau Claire Ct, Wisconsin), Protecting Arizona's Families Coalition (Phoenix, Arizona); Martin's Supermarkets (Hagerstown, Maryland). City Gates Ministries (Olympia, Washington); Drexel House (a Catholic transitional Housing Center, Olympia, Washington); Bread and Roses Women's Housing Project (Olympia, Washington); the Family Support Center (Olympia, Washington); Out of the Woods (a family shelter in Olympia, Washington), SUNY Manhattan Educational Opportunities Center (New York City); Eli Lily Foundation; West Texas A & M University (Canyon, Texas); Texas Tech (Amarillo; Texas) Amarillo College (Amarillo, Texas); the Handicapped Student Alliance of Amarillo College (Amarillo, Texas); Dodge City Police Department (Kansas); Wahiawa General Hospital (Oahu, Hawaii); Angel Ministries (Dodge City, Kansas); Hess and Wyatt Clinic for the Indigent (Amarillo, Texas); The Northwest Texas Health Clinic (Amarillo, Texas); West Texas Legal Services (Amarillo, Texas); Tri-state Medical (Washington County, Maryland); Enterprise for Equity (Olympia, Washington); Senior Corps (Dodge City, Kansas); American Association of Retired Persons (Phoenix, Arizona); a host of churches around the country; Places for People (St. Louis, Missouri); the Veterans' Center (St.Louis, Mo.); Arizona State University (Tempe, Arizona); Arizona Department of Fish and Game (Prescott, Arizona); Arizona Community Action Association (Prescott, Arizona); Leavenworth County Human Service Council (Leavenworth, Kansas); Lutheran Social Services (Wisconsin); Town Council of Clayton, North Carolina;

Appendix II
Contact Information for Organization Cited in this Document

Amarillo Area Mental Health Consumers
P.O. Box 44
Amarillo, TX 79105
Telephone: 806-373-9730
Email: carli.scales@yahoo.com

Austin Area Mental Health Consumers
3205 South 1st Street
Austin, TX 78749

Telephone: 512-442-3366
Email scarr@austinmhc.org
Website www.austinmhc.org

Capital Clubhouse
618 7th Avenue SE
Olympia, WA 98501
Telephone: 360-357-2582
Email: opportunities@capitalclubhouse.org
Website: www.capitalclubhouse.org

Career Paths to Recovery
2814 Lakeland Avenue #3
Madison, WI 53704
Telephone 608-245-1072
kmilstein@gmail.com
(no website)

Catholic Charities
160 S. 3rd Street
Fulton NY 13069
315-598-2252
Email” svanslyke@ccoswego.com
Website: <http://www.freewebs.com/sbsclubhouse/>

Center for Career Freedom
One East Post Rd
White Plains, NY 10601
Telephone: 914-288-9763
Email: donfitch@freecenter.org
Website: <http://www.freecenter.org/>

Collaborative Support Programs of New Jersey
11 Spring Street
Freehold, NJ 07728
Telephone: 732-625-0516
Email: pawarbrick@cspnj.org
Website: www.cspnj.org

Chestnut Place Clubhouse
4044 Chestnut Steet
Philadelphia, PA 19104
Telephone: 215-596-6200
Email: marvinelias@chestnutplace.org
Website: www.chestnutplace.org

Cheers

1950 West Heatherbrae Drive, Suite #5
Phoenix, AZ 85008
Telephone: 602-246-7607
Email: donnelm51@gmail.com

DBSA—Southern Nevada
3941 Copperhear Hills St.
Las Vegas, NV 89129
Telephone: 702-818-5634
Email: Cheryl@dbsasouthernnevada.org
Website: www.dbsasouthernnevada.org

Dodge City Peaceful Tribe
P.O. Box 1111
Dodge City KS 67801
Telephone: 620-623-2034
Email: dodgecity_peaceful_tribe_06@yahoo.com

Familylinks Outreach
3649 New Hampshire Avenue, NW
Washington DC 20010-1559
Telephone: 202-291-4979
Email: velvaspriggs@gmail.com

Feed His Sheep/Stellar Peer Recovery Center
P.O. Box 214
Clayton, North Carolina 27528
Telephone: 919-359-9276
Email: fhsroneal@aol.com

Helping Others through Empowerment
1426 E. Fairmount Avenue
Baltimore, MD 21231
Telephone: 410-327-5830
Email: thickshope@verizon.net

HOPE Impact
1623 Nakula Street
Wahiawa, HI 96786
Telephone: 808-429-9804
Email: sunnyalgoso@yahoo.com

Hope, Inc.
236 S. Tuscon Blvd.
Tucson, AZ 85716
Telephone: 520-770-1197
Email: ronschmidt@hopetucson.org

Website: www.hopetucson.org

Horizon House (Wilmington)
1902A Maryland Avenue
Wilmington, DE. 19805
Telephone: 302-655-7108
Email: jo.beck@hhinc.org
Website: www.hhinc.org

Howie the Harp Peer Advocacy and Training Center
Community Access
2090 Adam Clayton Powell Jr. Boulevard, 12th Floor
New York, NY 10027
Telephone: 212-865-0775
Email: dmayes@communityaccess.org
Website: www.communityaccess.org

Ida Mae Campbell Foundation
1338 North Capital Street NW, Suite 101
Washington D.C. 20002
Telephone: 202-684-7015
Email: idenmccollum@gmail.com

Main Street Housing
1521 S. Edgewood Street, Suite C
Baltimore, Maryland 21227
Telephone: 410-646-7840
Email: ken@onourownmd.org
Website: www.onourownmd.org

Mental Health Consumer Advocates of Rhode Island
Email: Charlesfeldman@verizon.net

Office of Consumer Advocates
265 Mill Street, Suite 200
Hagerstown, MD 21740
Telephone: 301-790-5054
Email: madjack@atlanticbb.net

On Our Own, Anne Arundel County
134 Holiday Court, Suite 304
Annapolis, MD 21401
Telephone: 410-224-0116
Email: onourownaa@verizon.net

On Our Own of St. Mary's County, Inc. Wellenss and Recovery Center
41660 Park Avenue
P.O. Box 1245
Leonardtown, Maryland 20650

Telephone: 301-997-1066
Email: oooinsmc@verizon.net

The Open Door
1224 South 3rd Street
Arkansas City, KS 67005
Telephone: 620-229-0415
Email: hicks8029@yahoo.com

Paradise Center, Inc
505 S. Jennings Avenue
Fort Worth, TX 76104
Telephone: 817-332-5868
Email: paradisefwtx@yahoo.com

Passages
525 W. 2nd Ave
Spokane, WA 99201
Telephone: 509-892-9241 or 509-688-1124
Email: bbates@voaspokane.org

Pink and Blues Philadelphia
709 S. American Street
Philadelphia, PA
Email: madpride@ymail.com

Recovery Empowerment Network
10 E. Mitchell
Phoenix AZ 85012
Telephone: 602-248-0368
Email: arider@recoveryempowermentnetwork.net
Website: www.recoveryempowermentnetwork.net

Serenity Steps
567 Main Street
Berlin, NH 03570
Telephone: 603-752-8111
Email: serenitystepspsc@gmail.com

Shining Reflections
509 Market Street
East Liverpool, Ohio 43920
Telephone: 330-385-7000
Email: srvtp@sbcglobal.net

Saint Louis Empowerment Center
3024 Locust

St. Louis, MO 63103
314-652-6100
Email: hminth@sbcglobal.net

Vermont Psychiatric Survivors
1 Scale Avenue, Suite 52
Rutland, Vermont 05701
Telephone: 802-775-8834
Email: vpsinc@sover.net
Website: <http://www.vermontrecovery.com/>

Voices of the Heart, Inc
3043 State Route 4, Suite 2
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515 S. Barstow Street, Suite 117
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