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Mental Health Services in the Richland County Jail to be Topic of November 10 Education Meeting

Join us for the Education Meeting held the second Tuesday of each month at 6 p.m. at Trenholm Road United Methodist Church, 3401 Trenholm Road. Learn more about treatment of mental illnesses and also how you can help stop the stigma associated with these illnesses. NAMI meeting are free and open to the public.

The speakers for the November 10 meeting will be John Brown, Director of Crisis and Forensic Services, Columbia Area Mental Health Center; Julius Jones, Forensic Services Coordinator, Columbia Area Mental Health Center; and Kathy Harrell, Assistant Director, Alvin S. Glenn Detention Center.

They will discuss Columbia Area Mental Health Center's purpose and role in working with inmates with mental illness at Alvin S. Glenn Detention Center. Discussion will focus on intake, treatment and discharge.

Please join us to learn new ideas and meet new people.

New Websites

NAMI South Carolina now has an updated website: www.namisc.org. Conference information (see page 4) is now online.

Also check out: www.bringchange2mind.org-- a new ad campaign that is a collaborative effort of many organizations, including NAMI, Mental Health America (MHA), and the American Foundation for Suicide Prevention (AFSP).

President's Letter

By Buddy Wier

After hearing a powerful introduction to a Mental Illness Awareness Week presentation of NAMI's *In Our Own Voice* program, I wanted you to have the benefit of the thoughts expressed. With permission:

"The stigma towards mental illness takes several forms. First is the stigma that expresses itself in language – "crazy, nuts, weirdo, bonkers" – you know the words, language that expresses hatred and resentment, like the language that marginalizes any other minority group. The second is the stigma of fear – isolation, shunning, fear of talking about it, hiding it away when it's in the family, refusal to seek treatment when you suspect you have a problem. The third is the stigma of ignorance – inability to learn what mental illness looks like, assuming it's not a serious problem, assuming it's untreatable, being too busy to even think about it.

Well, it is a serious problem, probably the most serious health care problem in the world. The UN estimates that the number one health care burden in the world is depression. Mental illness is the largest cause of lost time at work in the US. ...

And yet mental illness gets far less attention than cancer or heart disease or juvenile diseases – and almost no one, even mental health professionals, sees the whole person.

The good news is that mental illness is treatable. People can live normal lives with it. And many more would if it were not for the stigma that inhibits people from seeking help, that isolates people from friends and family, that takes away jobs, social life, almost everything that makes life worth living."

Fortunately, NAMI members recognize these facts and work every day to eliminate stigma and foster the cornerstones of recovery. Treatment, (family) support, a quality place to live, and a job are recognized as pillars which enhance recovery. Please read on to learn more about efforts that can be made to enhance one of these pillars – employment.





l-r: Demetrius Henderson, Eileen Schell, Bill Lindsey, Rosemary Heddon, Jack Balling, and Jackie Stone

Recovery Through Work: The Evidence-Based Practice of Supported Employment

In August 2009, South Carolina became the sixth state accepted into the Johnson & Johnson-Dartmouth project on family advocacy for Supported Employment. Supported Employment is a generic term used by many types of programs that provide long-term supports to people with disabilities. Recently, five members of NAMI Mid-Carolina (pictured above with Demetrius Henderson, Director of Consumer Employment at the South Carolina Department of Mental Health) attended a training at the Dartmouth Community Health Program in Hanover, New Hampshire, in order to learn more about Supported Employment, particularly a program called IPS (Individual Placement and Support). The trip was part of a grant from Johnson and Johnson, and the goal was to learn about ways to increase family advocacy efforts for promoting employment as a key part of recovery from mental illness.

The IPS program places and supports individuals exclusively in competitive community employment. Competitive community employment is defined as: working in the community for at least minimum wage; however, pay is commensurate to the job; and the work environment is in an integrated setting of people with non-disabilities.

The national average based on supported employment research indicates that people working competitively on IPS caseloads range from 40%-58%; as compared to 18%-21% range for traditional vocational programs serving people with mental health disabilities.

The core IPS principles are:

Eligibility is based on consumer choice. No one is excluded who wants to participate.

Supported employment is integrated with treatment. Employment specialists coordinate plans with the treatment team: the case manager, therapist, psychiatrist, etc.

Competitive employment is the goal. The focus is community jobs anyone can apply for that pay at least minimum wage, including part-time and full-time jobs.

Job search starts soon after a consumer expresses interest in working. There are no requirements for completing extensive pre-employment assessment and training, or intermediate work experiences like prevocational work units, transitional employment, or sheltered workshops.

Follow-along supports are continuous. Individualized supports to maintain employment continue as long as consumers want the assistance.

Consumer preferences are important. Choices and decisions about work and support are individualized based on the person's preferences, strengths, and experiences.

Benefits counseling is part of the employment decision-making process. Personalized benefits planning and guidance help consumers make informed decisions about job starts and changes.

From the SC Department of Mental Health Supported Employment Annual Report

Since 2002, the South Carolina Vocational Rehabilitation Department (VRD) and South Carolina Department of Mental Health (SCDMH) have implemented best practices supported employment programs in nine community mental health centers in South Carolina, and the goal is for programs to be statewide. This partnership between the two state agencies has helped individuals with severe psychiatric disabilities achieve high competitive employment in their communities.

In the Midlands, Work-in-Progress (WIP) is an independent employment agency contracted through SCDMH to place people with mental illnesses in competitive employment. They receive client referrals from Lexington County and Columbia Area Mental Health Centers. WIP uses supported employment guiding practices and principles of placing clients in jobs that best matches their preferences and experiences.



Tips for Including Families in Supported Employment

Reprinted from *Employment Works*, a newsletter from the J & J – Dartmouth Community Mental Health Program/Summer 2008

Michael Cohen, MA, has experience, not only in supported employment research projects, but also as the Executive Director of NAMI New Hampshire. Below, he shares some practical tips for practitioners about how to include families in supported employment, also known as the Individual Placement and Support (IPS) model.

- When meeting with a person who is new to supported employment, ask about a family member whom she would like to have involved in her employment plan. Remember that a family member could be a parent, spouse, sibling, partner, adult child, or even a good friend.
- With the person's permission, call the family to set up a meeting. Many families will be appreciative if you make the effort to reach out to them. Ask the person to be present at the meeting – the idea is for the family and consumer to work as allies.
- Provide the family with information about supported employment. Family members may have concerns about job-related stress or loss of Social Security benefits. Bring written information about employment and supported employment, for example, the NAMI fact sheet about supported employment (www.NAMI.org). Also provide information about benefits counseling.
- Be clear about the family member's role. For example, family members can serve as motivators by pointing out the person's accomplishments. However, it is not a good idea for families to feel as though they must nag their loved one to attend appointments or apply for jobs. The employment plan should not become a source of conflict.
- Ask the family for information that can be helpful for the vocational profile. "Can you tell me something about your family member's strengths related to his work history?" "What is the best time of day for your family member?"

- Review the employment plan with the family and consumer and continue to stay in touch with families throughout the employment process. Remember that families may have important information about the person's job. "Has your family member told you anything about his job that he likes or dislikes?" "Have you noticed any changes in your family member since she started working?"

Nothing says
"recovery"
like a job!

Collaboration with Employers

Employers report that they hire Supported Employment (SE) clients because they need qualified candidates who can get the job done. Employment specialists help employers find workers to fit the needs of their business. Another incentive for employers to engage with SE is that the employee they hire will have support. When clients choose to let the employment specialists have contact with employers, the employment specialists may provide support to the employer, as well as the employee.

For more information about Supported Employment/ Individual Placement and Support, including an online training program, training manuals, posters, DVDs, fidelity materials and program tools, visit:
<https://dms.dartmouth.edu/dsec>

New and Renewing Members

Barbara Kerr
Jo A. Marturano, M.D.
Marion Muscillo
Valarie Perkins
Helen Pridgen
Lisa Simonds

Donations and Memorials

Tommy Edwards (in honor of Carson Evans)
Jo A. Marturano, M.D.
Richland Kiwanis Club

Return Service Requested

You can also view the Brain Storm
at www.namimidcarolina.org

Mondays 11/2, 11/9, 11/16, 11/23,
11/30, 6 pm
NAMI Connection, Bridges
Clubhouse, 2015 Commerce, Cayce

Tuesdays 11/3, 11/17, 11/24, 6 pm
NAMI Connection and Family Support
Group, Trenholm Road United
Methodist Church (TRUMC), 3401
Trenholm Road

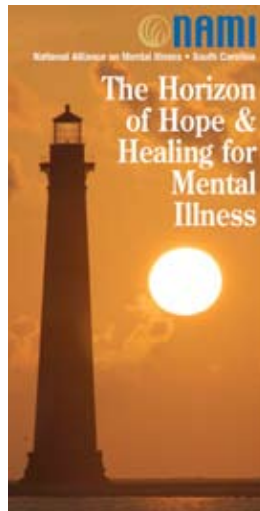
Wednesdays 11/4, 11/18, 11/25, 3 pm
NAMI Connection
Dorn VA Bldg 106, Room A-237

Thursdays 11/5, 11/12, 11/19, 6 pm
NAMI Connection, TRUMC

Tuesday, 10/13, 6 pm,
Education Meeting, TRUMC
(see story page 1)

Nov. 13 & 14
NAMI State Conference, Charleston
(see story at right)

Saturday, 11/21
AFSP Suicide Survivors Conference,
The Raft, 1532-A Sunset Blvd (Hwy.
378). Visit www.afsp.org/survivorday



NAMI SC Conference in Charleston November 13-14

The NAMI SC conference will be held at the Charleston Embassy Suites November 13-14. The Friday event begins at 5:30 pm with an awards ceremony and DJ Sugar Ray Allen. The conference continues Saturday, November 14, from 9 am until 4 pm. The morning session will feature NAMI National's Director of Legislative Affairs, Andrew Sperling. Morning breakouts will feature sessions on mobile crisis and urgent care, Breaking the Silence, the Recovery Model, and "Ask the Lawyer". The luncheon speaker will be Mindy Harmon, who will tell her personal story and screen her film "To Ride A Dark Horse."

Afternoon sessions include Council Meetings and breakout sessions on why adolescents are at risk for substance abuse, dual diagnosis, recovery, and an "Ask the Doctor" session. The closing speaker will be Mark S. George, MD, Director of the MUSC Center for Advanced Imaging Research (CAIR) and the Brain Stimulation. He will speak on "Horizons for Treatments."

The cost is \$60 for current NAMI members and \$25 for current client/consumer members. Go to www.namisc.org or call 733-9592 for more information or to register.