As we enter our third and final year of the anti-stigma campaign, I am looking back to where we started, where we are currently, and the direction we are headed. While the campaign’s chief focus is fighting the stigma attached to mental illness, we must also recognize recovery and define it as an ongoing process. Upon evaluating the proposal for the grant, the statement regarding recovery stands out, “We [CMHCM] will be available to support and promote this endeavor [of recovery] and will respect the right to make choices and decisions about the extent of involvement and sharing.”

What tools does CMHCM offer to help people during their journey on the path to recovery? This issue of News & Views looks at some programs or therapies that can facilitate this voyage.

DBT, or Dialectical Behavioral Therapy, has been running at CMHCM for about 15 years, although it was not run as an Evidence-Based Practice (EBP) until about five years ago. Today, each of the counties served by CMHCM has various exposure to DBT training. Cathy Todd, Program Supervisor for Osceola County, remarked, “I believe we have strengthened our overall program by utilizing this team-approach treatment modality which provides equal support to BOTH the consumers and staff involved. I have watched the teamwork and nonjudgmental stance trickle down past the actual clinicians involved on the team.” On page 4, Tabitha Woolman, a recipient of DBT comments on her recovery process – she has learned to enjoy life.

The Supported Employment program started at CMHCM in November 2009. Funded through a two-year block grant, the program has helped 38 consumers find employment in Isabella County. CMHCM has recently added another Employment Specialist in Midland County. (See full article, page 2.)

Originally presented to the Board Services Committee in May 2009, telepsychiatry has now become a reality in Mecosta County. According to the website www.wikipedia.org, “It has been the most successful of all the telemedicine applications so far, because of its need for only a good videoconferencing facility between the patient and the psychiatrist, especially for follow-up.”

Twelve staff members recently received training to become Acupuncture Detoxification Specialists. CMHCM is always on the look-out for new services to help people on their path to recovery. While this is the newest program within CMHCM’s wide array of services, it is the oldest form of therapy, with the earliest documentation dating to 305–204 B.C. (See full article, page 3.)
Helping People Achieve Recovery Through Supported Employment

by Mark Oliver

Eric Karbowski, Employment Specialist at Community Mental Health for Central Michigan (CMHCM), has been overseeing the Supported Employment program since November of 2009. CMHCM received a two-year block grant to fund Supported Employment, which at this time is available in Isabella and Midland County. Karbowski is hoping funding for the program will continue after the block grant expires.

Karbowski explains that Supported Employment helps people with chronic mental illness find “competitive employment or, better defined as a job in which individuals are making at least minimum wage, are working in positions that are open to the public, and are located in the community.” This is a start to finish procedure from helping people write resumes (if needed), to mock interviews in preparation for the real thing, to the actual job placement. Karbowski says when he first meets with a person interested in Supported Employment he asks them what kind of work they are interested in and what their goals are for a job and they set about trying to accomplish those goals. The program has had “tremendous success,” Karbowski states with 38 people placed in jobs. This is an important part of the recovery process says Karbowski. People feel good about themselves and they have some extra money and they feel needed. “It’s cool when you see somebody with nothing get an apartment and achieve their goals. It gives me goose bumps,” Karbowski says with a sense of pride.

Jerry Johnson received assistance from Supported Employment to find a job at Lone Star Steakhouse in Mt. Pleasant. He is a production worker and has many different duties such as prepping salads, making mashed potatoes, cutting meat, washing dishes, and cleaning the restaurant. Johnson says he appreciates how much Karbowski and others at CMHCM have cared about him. About employment helping him with his recovery he says, “Recovery is one day at a time. When people care about you it’s easier. Plan every day and use that plan wisely.” Johnson’s plan, from that first meeting with Karbowski was to work at a restaurant. Johnson achieved that goal and says there are plenty of chances to move up at Lone Star and maybe someday he would get into management. Johnson sums up his experience with Supported Employment and community mental health by saying it “is a good program. Stick with it—there are caring people here.”

Jerry Johnson and Eric Karbowski

www.cmhcm.org
Twelve Community Mental Health for Central Michigan staff members recently participated in training to become Auricular Detoxification Specialist (ADS). ADS use the technique of auricular (outer ear) acupuncture, or acudetox, a program that eases withdrawal from drugs and alcohol. It also helps people stay drug free and sober.

The use of auricular acupuncture for detox/relapse prevention has been shown, through experience and research, to be very helpful in relieving acute symptoms of withdrawal from alcohol, heroin, crack, cocaine, speed, and other drugs of abuse. Repeated treatments during the first week of detox generally relieves anxiety and aids in the relief of symptoms such as profuse sweating, headache, body-ache, stomach pain, runny nose, itchy eyes, tremors, and high blood pressure. Repeated treatments, after the acute detox phase help individuals by reducing cravings, depression, and sleep disturbances.

Auricular acupuncture is conducted by applying very thin pins to five areas of each ear. These pins are left in for 30 – 45 minutes. The treatment is most effective if the person is resting comfortably, in a darkened room, with appropriate meditation music playing in the background. Although talking during the treatment is allowed, resting silently will help to achieve the full benefit of the treatment.

If you think auricular acupuncture may help you, or if you are interested in finding out more about auricular acupuncture, please talk to your therapist or case manager.

### Annual Consumer Recognition Award

This award recognizes a consumer or group for their outstanding efforts, achievements, community contributions and the impact he/she has on making the world a better place for individuals with a mental illness or developmental disability.

Customer Service is accepting nominations through December 1, 2010.

### Art LeTourneau Award

This award recognizes an individual or community organization for their efforts to help individuals live richer lives as members of their community as well as the collaboration with community agencies and is viewed as a team player.

Customer Service is accepting nominations through December 1, 2010.

### Annual Report Art Contest

The selected artwork will be printed on the cover of CMHCM’s Annual Report. Artwork must be in the form of a drawing, sketch, painting, or photo. The artist will receive a gift certificate as well as a framed copy of the report cover.

Original artwork can be submitted to Customer Service by December 1, 2010.

### Telepsychiatry Comes to CMHCM

by Mark Oliver

A therapist uses a webcam to communicate with a consumer.

Telepsychiatry, which uses a camera to allow the patient and psychiatrist to see each other on a TV or computer screen instead of a face-to-face visit, comes to Community Mental Health for Central Michigan (CMHCM). Telepsychiatry is quickly gaining popularity across the country. Thirty-two states are currently using the technology, which was primarily developed for rural communities where consumers must travel over a hundred miles to see a psychiatrist.

CMHCM’s Mecosta County is currently the only county with this technology, but it is hoped that all six counties will some day have telepsychiatry. In Mecosta County, a person who needs to see a psychiatrist in Mt. Pleasant can go to the local CMHCM office in Big Rapids and have a telepsychiatry appointment with his or her psychiatrist saving a great deal of travel.
Tabitha Woolman has been diagnosed with borderline personality disorder, bi-polar disorder, and major depression with psychotic features, and the eating disorder bulimia. Just over a year ago she was hospitalized as a result of a suicide attempt. She felt she couldn’t continue going on the way she was living. She didn’t go through with it because she knew what it would do to her kids. While in the mental health unit, she received a blessing. She was introduced to Dialectical Behavioral Therapy or DBT. A therapy that incorporates individual therapy with a DBT-trained therapist and a separate group therapy session.

She attends her DBT group once a week with eight other women and a weekly follow-up session with her therapist. As a result of DBT, Woolman says she has learned how to “slow down and relate to other people.” Before DBT, she says she was “just surviving” and “hated people,” but she has learned how to enjoy life. She has overcome her bulimia. She has learned to do the opposite of what her emotions are telling her which helped her to stop the need to purge her food. She has put on weight and looks and feels healthy.

Woolman does the homework given to her in DBT. She faithfully writes down her joys, fears, and other challenges. She brings her homework to her therapist and they go over how to deal with the things giving her trouble.

In DBT, they practice how to use the wise mind, the reasoning mind, and the emotional mind. Woolman says she was “living in the emotional mind.” Her strong emotions were putting everything out of focus. She needed to learn how to combine her emotional mind, reasoning mind, and wise mind to think logically instead of letting her emotions get the best of her.

Woolman would like to see DBT taught in high schools to teach the students about the reality of life. “There is nothing to prepare them for the real world,” she says.

Woolman graduated from DBT this past September. She says DBT “has completely changed my life. My whole family has noticed. I am alive now. I did not feel alive before.” Woolman feels “anyone contemplating DBT should stop and just do it.” She went to church, took her medications, “nothing worked except DBT.” Woolman says people who are struggling with mental health should not fear the stigma of mental illness. At one time she was told seeking help from CMH was a “cop out.” She discovered there was “nothing wrong with getting help.” She explains, “you can get help and you can improve.” Woolman is living proof of how DBT can change her life for the better. She recently got married is raising five children and holds down a job as an office assistant.

What is the difference between a psychiatrist and a psychologist?

The simplest way to describe the difference between a psychologist and a psychiatrist is that a psychologist primarily aids the depressed patient by counseling and psychotherapy. A psychiatrist may also perform psychotherapy; but, in addition, can prescribe medications and perform ECT (Electroconvulsive Therapy). A psychiatrist is a medical doctor. A psychologist may hold a doctoral degree (Ph.D.) and be called doctor; but, is not a medical doctor (M.D.).
Margaret Gorsline: Helping to Lead Gladwin’s Drop-In Center

by Mark Oliver

Margaret Gorsline has been an advocate for mental health for many years. She had a great deal to do with the start up of a drop in center in Gladwin which officially received notice of its funding this past October and will open its doors in February. Gorsline was one of the original people to spearhead this effort and her leadership had much to do with drop-in center becoming a reality. Now that the finances are available, she made sure the building was big enough to house all the visitors and had a good working relationship with their neighbors.

She is also apart of the Consumer Action Committee (CAC) a committee made up of consumers from Community Mental Health for Central Michigan’s (CMHCM) six counties. The CAC oversees such things as the anti stigma grant, a $350,000 grant that will be used to overcome the stigma of mental illness. The CAC plays a role from small things to large things like informing consumers their right to work and keep their health insurance.

Gorsline helps other consumers from a position of peer support. Gorsline once went three years with no income or health insurance and she shared her experience with the CAC to let people know how important it is to have health insurance. She expressed it was “hard to keep a job because my medical needs weren’t met.” She went into a deep depression. Her point is well taken. It just makes sense to provide medical insurance to people so they can be healthy enough to work, pay taxes, buy homes, and add to the financial health of the community.

Steve Lundsted, a Supervisor for Community Mental Health for Central Michigan (CMHCM) in Midland County, explains Dialectical Behavioral Therapy (DBT) is a behavioral approach designed to treat individuals with Borderline Personality Disorder. DBT requires participants to have “weekly individual therapy with a certified DBT therapist and weekly skills training group” therapy. Consumers keep diary cards in which they track their urges, feelings and behaviors, and discuss these feelings in therapy. DBT is a one-year program and takes a significant commitment. DBT also promotes peer support as at least one member of the treatment team must be a Peer Support Specialist.

DBT is an evidence-based practice which means it has been proven to be beneficial to the participants through trial programs. CMHCM is moving its support of consumers to evidence-based practices.

Lundsted explains “DBT frames the consumer in a more positive light. Instead of previous assumptions that consumers were manipulative and doing behaviors on purpose to get their way, DBT assumes they are doing the best they can.” Lundsted adds, “From my perspective, it works” and the DBT model supports “both the consumer and the therapist in a non-judgmental way with an emphasis on the therapeutic relationship.” Traditional therapies have not been very successful with Borderline Personality Disorders but DBT with its combination of group and individual therapies has been proven to be more successful.
Direct Support Professionals (DSPs) also known as direct service workers and direct care staff are an integral part of providing a high quality service to people with disabilities. Direct Support Professionals (DSPs) provide guidance and support to people who need help to be self-sufficient. DSPs provide this support to a wide range of individuals including people with physical, psychiatric, or cognitive disabilities or chronic illness; children and youth who are at risk; and families who need assistance in supporting family members. Many DSPs view their job as a profession that demands complex skills and knowledge, ethical judgment, and the ability to create long-term relationships of trust and mutual respect.

The 11th Annual Direct Support Professionals Conference was held September 22 at the Pohl Cat Conference Center in Mt. Pleasant. One of the only conferences intended for DSP staff. The purpose of the conference is to provide a day of appreciation, education, and recognition for direct support professionals. Presenters this year were Melissa Bentley: “Attitude is a Choice!” and the cast and crew of “More than Just a Face.”

Awards were presented by Myron Denman and Annette Israel. Many nominations were received from guardians, co-workers, consumers, and parents. The winners were chosen by the Consumer Action Committee of Community Mental Health for Central Michigan, which serves as a forum for consumers to exercise leadership and support advocacy endeavors on mental health issues.

The award winners for 2010 are:
Liz Osborn – Listening Ear Crisis Center
Sherry Scott – McBride Quality Care Services
Kandra Donald – Valley Residential
Beverly Ames – Listening Ear Crisis Center
Deb Bunker – McBride Quality Care Services
Bill Paterson – Listening Ear Crisis Center

Kris Stableford, CMHCM Recipient Rights Officer and Keith Sharkey give the opening remarks at the Direct Support Conference.

by Mark Oliver

Safe Haven
Schedule of Events

Parties:
Thanksgiving Party: November 25
1:00 – 4:00 p.m.
Christmas Party: December 25
1:00 – 4:00 p.m.
New Years Eve Party: December 31
1:00 – 6:00 p.m.

Support Groups and Meetings:
Last Thursday of each month
starting at 11:00 a.m.
Recycling and Beyond–
Wednesday at 6:00 p.m. Discuss
issues relating to recovery.
Discovery–Tuesdays from 3:00 –
4:00 p.m. Discuss healthy life-
styles from budgeting to sleep
habits to making the right
friends.
Schizophrenics Anonymous–
Mondays 6:00 – 6:30 p.m.

Questions? You can contact Safe
Haven at (989) 832-6495.
Walk-In Clinics

Community Mental Health for Central Michigan began Walk-In Clinic programs in all six counties October of 2010. Joane Tagliamonte, a Mental Health Technician in Gladwin and Clare Counties, explains the Walk-In Clinics in those two counties named ‘Peak Health’ are to provide health related services to adults and children with a mental illness or a developmental disability. The Walk-In Clinics offer such services as: referral that links consumers to community physicians or specialists, access to a Peer Support Specialist, links to health providers, health education classes, entitlement programs for Medicaid, housing, food and related psychiatric appointments, smoking cessation, and healthy diet programs.

Tagliamonte explains Walk-In Clinics accommodate “consumers who have limited natural supports or transportation to attend a scheduled appointment.” Tagliamonte sees a future with walk in clinics in their “efforts to continue to get consumers connected to a primary care physician” and to “improve communication and coordination with the Behavioral Health Community.

Walk-In Clinic Days & Times

- Clare: Tuesdays, 10:00 a.m. - 12:00 p.m.
- Isabella: 2nd & 4th Mondays, 3:00 - 5:00 p.m.
- Mecosta: Thursdays, 12:30 - 2:00 p.m.
- Gladwin: Wednesdays, 1:00 - 3:00 p.m.
- Osceola: 2nd & 4th Tuesdays, 3:00 - 4:30 p.m.
- Midland: Mondays, 3:00 - 5:00 p.m.

by Mark Oliver

Annual Report Cover Art Winner

Teresa Oliver’s painting was selected to grace the cover of CMHCM’s Annual Report. The theme of her winning entry “Rain or Shine” she explains, “is all about when you have friends they are with you rain or shine.” The painting is of two people sitting on a dock on a cloudy day with hands over them. Oliver explains the hands “can shelter you rain or shine.” Oliver says winning for a second time is still “exciting” and “is a great honor.”

Above: Linda Kaufmann, CMHCM Executive Director, Teresa Oliver, Annual Report Cover Art award recipient, Constance Gibson, CMHCM Board Chairperson. Below: The winning selection – “Rain or Shine.”
MISSION STATEMENT

To provide and support a wide range of mental health solutions to help the members of our communities gain control over their lives, achieve dignity and respect, realize their potential, and become full participants in community life.

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Isabella County
301 South Crapo Street
Mt. Pleasant, MI 48858
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989.773.2890 TTY

The Summit Clubhouse
120 South Pine Street
Mt. Pleasant, MI 48858
989.775.3501

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3611 North Saginaw Road
Midland, MI 48640
989.631.2320
989.631.0870 TTY

Child and Family Services
220 West Ellsworth Street, 4th Floor
Midland, MI 48640
989.631.2323
989.631.0870 TTY

Mecosta County
500 South Third Street
Big Rapids, MI 49307
231.796.5825
989.773.2890 TTY

New Journey Clubhouse
405B South Third Street
Big Rapids, MI 49307
231.592.4654

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989.773.2890 TTY

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