

# Voices for Change

A Statewide Newsletter of the Mental Health Community

Fall 2010

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Lisa

## Allies at the Transformation Center

By Staff

Living and/or working in the mental health community can be stressful. Sometimes it's your own mental health condition that stresses you, sometimes it's trying to accomplish something for the community. It can be quite helpful to have allies: a group or community that is different from your own group or community who intentionally commit and act on behalf of your leadership and liberation. Individuals, groups and movements need allies; both allies and those they ally with should benefit.

Within the mental health community there are many groups such as: the Deaf community, African Americans, Latinos, White Americans, LGBTQQI (Lesbian, Gay, Bisexual, Transgender, Queer, Questioning, Intersexed), etc... when two or more of these groups ally

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La Verne Saunders, Trainer

## My Story by Lisa

The day my life changed forever was in November of 1999. I was 25 years old, and from the outside it looked like I had everything going for me. I had a rewarding job in Boston as a financial counselor for a nonprofit. My husband and I had just bought our first house. We were in the midst of plans to take a

trip to England to visit a friend, my first trip out of the country.

Unfortunately, I never made it to England. I had been feeling stressed at work and at home, trying to get everything done before our vacation. For about a week I wasn't sleeping or eating well. I felt antsy and on edge. Then, on the last week before our planned vacation, I had a sudden, ma-

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## Allies at the Transformation Center, cont'd

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together, it is more likely that they will effect social change and social justice.

Last year, we at the Transformation Center started talking about how our group (for example, the Transformation Center staff) can be helpful and welcoming to other groups. We also considered how other groups (for example, The Department of Mental Health, the Mental Health Legal Advisors Committee) can be helpful to the Transformation Center and the mental health community in Massachusetts.

Over the past year, La Verne Saunders, a peer and training specialist, helped us develop ally trainings for a variety of purposes. The plan that emerged was to take the ally training to groups of our allies, back to the Transformation Center staff, and then out to the community.

Our first conference where the idea of allies was presented formally was "Black Voices in Recovery," held Nov. 28-30, 2009 at the Walker Center in Auburndale, MA (see *Voices for Change*, Spring 2010, front page). La Verne Saunders led a workshop called "Black Recovery, Stigma and Developing and Maintaining Allies." She stated that an ally or allies are "those who surround us with love, faith and belief in ourselves and our abilities. They don't drive the agenda and they shield us from oppressors."

At the conference, many partici-

pants said that there were not many venues for Black voices to be heard in the mental health system and they really felt the conference had been necessary and should happen again. They felt there was a lack of places for Black people with mental health issues to talk and heal; in fact they found that talking itself was healing. People also reported that at the conference they felt supported about asking for help.

The Multicultural Leadership Academy was held April 28-30, 2010 at the Walker Center in Auburndale, MA (see *Voices for Change*, Summer 2010, p. 6), and was the Transformation Center's next venue for ally training. Among the other training skills that were presented, we practiced working in segregated affinity groups on the first day of the training. We learned that affinity groups benefit from working apart as well as working together.

Over the next two days, conference participants worked as a single group on such subjects as vocabulary, inclusion and collaboration. A question that was posed was, "What are the words and images of healing active, multicultural communities?" People brought much reflection from the segregated affinity groups into the other parts of the training including their reflections on their own group and what they learned about other people's groups.

Following was a facilitated liberation panel where allies to the affinity groups got an opportunity

to appreciate and publicly voice their commitment to each group. One of the trainers told her recovery story which was well-received and there were several favorable comments about an afternoon meditation.

Allies training at the Transformation Center was held in two



Gitane Williams, Trainer

installments in June this year. The training was deliberately held after the Multicultural Leadership Academy. The first staff training started with inspiration and education from La Verne Saunders who discussed the shared power and mutual respect among allies. She suggested that groups who are trying to ally should "look for things in common" and "honor differences" between groups as well as learning about the culture

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## Allies at the Transformation Center, cont'd

*(Continued from page 2)*

of the other group and asking questions. She commented that self-healing and community healing were an ongoing part of ally work.

Several ally groups represented at the Multicultural Leadership Academy reported on their “strengths, needs, concerns and what’s important” at the staff training. A presentation was made by Catherine Quinerly about our ally group, Latinos en Accion, and another presentation was made by Valeria Chambers about another ally group, Black Voices in Recovery.

Catherine reported among the strengths of the Latino group that they were “motivated for change, invested, united and wanted to help others.” One thing that was important to this group was to be able to trust and be trusted. Valeria reported among the strengths of the Black group that they were “strong in faith and resilience, powerfully motivated, had a tendency to honor and respect the notion of community” and were “sometimes down, but never out.”

In the next installment of the allies training, the training will be taken to the community and included in the surveys of the Community Voices Task Force. The Community Voices Task Force (CVTF) is the group at the Transformation Center that is responsible for holding at least twelve community meetings in the Fall for people with mental health conditions across the state.



Participants at the Multicultural Leadership Academy

In these meetings, comments and feedback will be solicited from the audience about what the Transformation Center should do with its time, money and human resources in the upcoming year and the years to follow. The ally work at the CVTF meetings will focus on working with affinity groups, reconciliation and heal-

ing, and who is responsible for transformation and what the responsibility is.

We are proud of our ally groups and the work we do with them at the Transformation Center, and we hope to be inclusive of more groups in the future.

## Stigma Panel at UMASS Boston

Stigma Panel 2010 will take place at UMass-Boston, Healey Library 11<sup>th</sup> Floor, Room 0011B, on Thursday, November 4<sup>th</sup>, 2010, 4:30–7:30 p.m. Arthur Stead will moderate. Stephanie Pinder-Amaker, Ph.D., Director of the College Mental Health Program at McLean Hospital, will be keynote speaker. HaiHung VanCong and Amy Dahlberg-Chu will also present. Sponsored by DBSA-Boston and UMass-Boston’s Provost’s Office, Chancellor’s Office, and Graduate Student Assembly. For special accommodations, contact Shelby Harris at [Shelby.Harris@umb.edu](mailto:Shelby.Harris@umb.edu)

## My Story cont'd

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for breakdown. I was at work, and had just had several clients in a row who seemed hostile and combative towards me. Very quickly, my inner world became convoluted. I thought my clients were “out to get me” and became paranoid. I am sure that the lack of sleep contributed to my inner world falling apart. Other factors, such as my brain chemistry, likely played a part in my breakdown. Later, I suspected that one of my clients had put ecstasy in my drinking water when I left the room, and I wondered if it helped lead to my psychosis. To this day I do not know, nor will I ever know, if I was drugged that day or if my break from reality came from within. In any case, I became very paranoid and out of touch with reality. I was hospitalized for the first time in my life. I was terrified.

I was put on a high dose of antipsychotic medications. The entire hospital experience was a nightmare for me and I was relieved to be discharged, and went home to the support of my family. My marriage was in jeopardy, as my then-husband could not handle my illness. My parents and other relatives, however, were very supportive. I also saw a wonderful therapist for several years.

I thought that I was “recovered”. I tried to work on my marriage and it seemed things were looking up. As so many women do, I took myself off of my psychiatric medications in order to try to get pregnant. Big mistake. I did get

pregnant, but had a miscarriage early on in the pregnancy. In the meantime, my marriage fell apart. We divorced, sold our home, and I retreated to live with my parents on Cape Cod. With all of the stress, I felt very unstable and on edge, so I checked myself into the hospital in 2003. Another terrifying experience.

I eventually was discharged and went back home with my parents. I found a better psychiatrist than the one I had been seeing...my new psychiatrist worked with me to find the right combination of medications so I was healthy but not a zombie. He actually listened to what my symptoms were, and didn't just assume things. I am diagnosed with Psychosis, NOS, which is now very much under control and responsive to the medication. My family was wonderful and supported me every step of the way.

Today, with the support of my loved ones, and the help of medications, I am now truly in recovery. Life has vastly improved. I have been at the same job for 6 years, whereas for several years when I was having problems I had a hard time sticking with a job. I am now in a healthy relationship with a kind, considerate man. We have twin 3-year-old children together who are such a joy to us. I am considering going to law school. I would like to be a lawyer who fights for the civil rights of the mentally ill. This cause is close to my heart, as I was mistreated and had my civil rights violated while I was in the hospital. Back then I did not know my rights and did not have a voice.

What I have learned is that no one is immune to mental illness.

If it could affect me, an intelligent person from a supportive family, it could affect anyone. Today I make self-care a priority. I take my medications without fail. I make sure that I get enough sleep (or, as much as I can with two 3-year olds up at the crack of dawn!) I have accepted my illness as if it were any other illness, and try to treat it that way. I am mindful of what my brain and body are trying to tell me. My hope is that I will never again have the terrifying experience of being locked up in a psychiatric unit. Although there are no guarantees in life, my hope is that I have learned enough about myself to see early warning signs of trouble so that I can get help when I need it.

I am a person with mental illness, but I am a Person first, not just an illness. There are many facets of my personality, both positive and negative, and my mental illness is just one part of who I am. It does not solely define me as a person. Because of the stigma surrounding mental illness, I do not share my story often with people. If my friends and coworkers read this, they will be surprised. My goal in writing this is to affirm my journey towards mental health, and to help fight stigma. Thank you for reading, and may good health be yours to treasure.



# MassPRA as Our Ally

By Staff

At the Transformation Center we have been having trainings on how to work with our allies. According to La Verne Saunders, the lead trainer we are using, “An ally is a group or community that is different from your own group or community and who intentionally commits and acts on behalf of your leadership and liberation.” Individuals, groups and movements need allies; it is a relationship where both groups or both individuals are to benefit.

This article is based on a phone interview with Diane Gould, who is on the Board of Directions of the Massachusetts Psychiatric Rehabilitation Association (MassPRA). MassPRA is an organization of psychosocial rehabilitation agencies, practitioners, and interested organizations and individuals. They are dedicated to facilitating recovery by working with community-orientated rehabilitation services. Their website is: [www.masspra.org](http://www.masspra.org). On the website there is a page about their “Core Values.”

Diane thought that MassPRA and the Transformation Center were allied through our common values, for example, that recovery is real and we are both committed to helping people with mental health conditions achieve the lives they want. She thought we shared the value that persons with mental health conditions have the right to dignity and respect, and that they should be taking direction of their own lives. She thought that people with mental health conditions should be the

“authors of their own evolution, their growth and development.”

The Transformation Center supports human rights, peer support and self-direction in our policy work, systemic advocacy and training programs. We are also run by people with lived experience of mood swings or extreme states. Speaking of her employment at Advocates, Inc., Ms. Gould mentioned that they employ 15 Peer Specialists, most of whom have certification from the Transformation Center’s Certified Peer Specialist Program.

Diane mentioned our mutual values in advocacy and systems change, in particular MassPRA’s support of Emergency Room Rights, Elimination of Restraint and Seclusion, Fresh Air Rights and Promoting a Culture of Trauma Sensitivity. In all these cases, MassPRA has either written a letter or educated or advocated to the legislature to promote these concerns. We are excited to have this collaboration with an outspoken ally on these several issues. We work together in this way as allies to improve the quality of life of people with mental health conditions in Massachusetts.

Diane also mentioned MassPRA’s interest in training for Peer Workers in order to develop a statewide workforce of Peer workers. MassPRA is interested in workforce development of non-peer providers as well (although these could be people with lived experience of mental

health conditions). These workers would focus on psycho-social rehabilitation and would become Certified Psychiatric Rehabilitation Practitioners (CPRPs). MassPRA hopes that with this training (described on their website), Massachusetts can have a “skilled, knowledgeable workforce” of mental health providers.

Diane mentioned the other pole of working with an ally: as well as understanding our similarities, it can be productive to respectfully explore our differences. She hopes for future dialogue with the Transformation Center that will result in “deep understanding,” and inquiry that will help us understand our differences. According to Lyn Legere, President of MassPRA, the theme of allies and the tensions that may exist between the peer community and MassPRA was raised, and creating opportunities for meaningful exploration, and dialogue around these differences was incorporated into MassPRA’s 2010-2013 focus.

*(Continued on page 6)*



*Diane Gould*

# MassPRA as Ally

## Cont'd

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The Transformation Center and MassPRA have many values in common. Diane hopes to see presenters from the Transformation Center at the next MassPRA Annual Conference to be held on Oct. 27-28, 2010 at the Hogan Center at Holy Cross College in Worcester.

## Ally Training: One View

By Maura Pieciak

In June, I attended a "Developing & Maintaining Allies" training presented by La Verne Saunders with the support of Valeria Chambers and Catherine Quinlerly. As I was leaving the training I knew that a door was opening; I had new information that was resonating with me and I felt energized!

La Verne said as allies we need to be informed and hear what is said by the people that are speaking - each individual group. As Catherine and Valeria shared the strengths, needs, concerns and what was important to their (Latino and Black) communities, I was excited by the many common threads we share and also became aware of differences. From this training I learned that to be a true ally, it is my responsibility to open my heart and mind and find more understanding of beliefs that are different than my

own.

For example, I am not part of a religious community and I personally have trouble understanding the role of religion in various communities. I need to keep opening my heart and mind in order to understand and accept religious beliefs that are different than my own, otherwise I can just shut down. I am continuing to learn how to let people figure out their own way. Although not always easy to do, as I practice these skills I reach a new level of acceptance for others.

As I thought about my own life, I was surprised to realize I still often fall back on an old belief that only my peers can help me grow and heal. However, the peer support I have received throughout the years has been life changing. I was first exposed to peer support through twelve-step recovery, and also participated in a trauma survivors group run by my therapist and five other women survivors. About ten years ago after a very difficult period in my life I spent six years as part of the Franklin County Women's Resource Center, which was a peer driven, trauma informed organization. I learned the value of peer wisdom through these groups, which gave me many new skills and strategies for living and helped me to find my authentic self.

Once I found my voice in the safe and comfortable community of my peers, I stepped out into larger, broader communities (made up not only of my peers),



*Maura Pieciak*

such as Interplay & Pravada Sound Healing. This training helped me to realize that these communities are my allies, and although people come into them for different reasons and with different beliefs I now understand because we share a common goal of health and wellness, we are allies.

Now flash forward to this week ..... I am sitting in a meeting with providers talking about peers and peer workers. Ahhah!!! These are our allies, the people who are willing to carry the message to those who do not yet understand. Together, with these allies we can create a place of respect & value for peers in the workforce.

As I look at the wholeness of this experience, the places this training has taken me, my desire to be an ally, the allies in my life and the allies supporting my com-

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munity; I feel a sense of familiarity. Yes, it's The Transformation Center vision: "We live in communities where people, individually and together, experience well-being, and help each other with mutual respect and compassion to overcome the challenges we all

## Emergency Service Programs

By Gail Rosensweig

Many individuals in a mental health or emotional crisis now have somewhere to turn for help other than a hospital emergency room, and a number to call other than 911 and the police. There are 21 innovative mental health emergency service programs (ESPs) in Massachusetts, each serving a particular service area. Trained mental health (ESP) teams are now available all day, every day, to provide mobile mental health services in ESP site offices and, when appropriate, community-based crisis stabilization beds. Alternatively, an ESP team can make a home visit or go anywhere within their service area, where the person being visited feels comfortable.

ESPs are a community-based alternative to emergency rooms. ESP mental health clinical and nursing staff provide behavioral health crisis assessment, intervention, and stabilization services. All MassHealth and Medicare recipients are eligible for ESP services, and most ESPs also accept some private insurances. All ESPs serve anyone who is uninsured.

Many people in psychiatric crisis have had the all-too-common experience of staying for hours or days in an ER awaiting evaluation, discharge, or admission to a mental hospital. ESP settings are much more comfortable than a busy ER, where people with a mental illness are sometimes told to take their clothes off and may be put in restraints or in seclusion while they await evaluation and referral. Of course, if there is a medical issue, the ESP will send the person to an ER for medical clearance. In fact, some ESPs have established strong working arrangements with local hospital ERs. **In most cases, a person will not have to go to an emergency room.**

Stabilization beds at the community-based ESP offices are short term and designed to provide a home-like, comfortable environment that encourages recovery. Utilization of respite beds can prevent a mental hospital admission. Importantly, most teams include a **certified peer specialist** – someone with lived experience with having a mental illness – who provides the person in crisis the unique experience of a counselor who knows first-hand what the person is going through.

**To access an ESP quickly, call the statewide ESP toll-free number, (877) 382-1609, and enter your zip code to get the toll-free number for your local ESP.** Each ESP phone line is staffed 24/7 by trained, masters-level clinicians. Needs are assessed and a treatment plan is put into place by the consumer and the team. If a person is not yet connected to a psychiatrist, nurse practitioner, therapist, or social

worker, appropriate arrangements are made. A listing of ESPs and towns and cities they cover is available by going to [www.masspartnership.com](http://www.masspartnership.com) and clicking on **ESP Directory**.

Gail Rosensweig is an occupational therapist who is currently a research assistant at **The Center for Public Representation (CPR)**. CPR is a public interest law firm representing people with disabilities and has offices in Newton and Northampton, MA. CPR's Emergency Services Initiative encourages the use of ESPs as an alternative to hospital emergency rooms.

*Ed. Note: Ms. Rosensweig suggested that eligible consumers who think they may be using the service may wish to call when they are feeling well and talk to an ESP worker. You have the opportunity to describe how you are when you are not well and later may feel more comfortable calling a place where there is someone who knows a little about you.*



# Have you ever heard of Latinos en Acción?

In June of 2009, The Transformation Center held its first Latin Leadership Academy. A total of 35 Latin Leaders came from across the state of Massachusetts to discuss what was needed in Latin Communities through-out the state. From this conference three themes arose: Trainings to develop Latin Leadership, opportunities to become employed full-time even if Spanish is the first and only language and for “inclusion”. From our experience at the Latin Leadership Academy, Latinos en Acción (L.E.A.) was born and became a group that now meets monthly with a strong commitment to Latin Peer Leadership.

In 2010/2011 L.E.A. continues to support our communities state-wide with training, advocacy and peer support. New members are welcome and are invited to join us at our monthly meetings. Please email Catherine ([catherineq@transformation-center.org](mailto:catherineq@transformation-center.org)) for more information.

Meetings are held once a month from 10:00 a.m. to 1:30 p.m.

Coffee and Lunch provided (Please R.S.V.P. so that we can ensure lunch for all who want to attend)

**Date:** **October 29, 2010**  
**Location:** The Transformation Center  
98 Magazine Street, Roxbury MA 02119  
**Telephone:** 617-442-4111

Community Voice Task Force Coordinator, Maura Piecak will be holding a 1 hour presentation at this meeting.

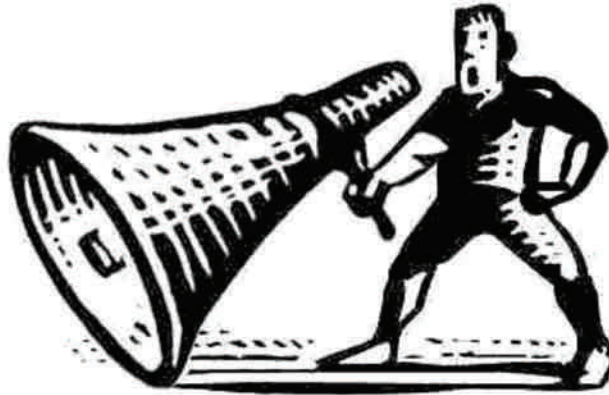
The L.E.A. Monthly meeting will be held after.

**Date:** **November 19, 2010**  
**Location:** The Bowen Center  
(email to be sent email to confirm this location)  
Backup Location: Central Massachusetts Recovery Learning Community  
91 Stafford Street, Worcester, MA 01603  
**Telephone:** 1-508-751-9600

**Date:** **December 17, 2010**  
**Location:** Transformation Center  
98 Magazine Street, Roxbury MA 02119  
**Telephone:** 617-442-4111

\*\*\*\* Second Annual L.E.A. Christmas gathering \*\*\*\*

# Tuesday, November 2nd Get Out And Vote !



Our Transformation Center sources say the race for governor of Massachusetts is going to be close. For those of us who believe that funding human services is important, this race will be very important. As we know, financial difficulties for the state lead to cuts in these vital services. There are many candidates responding to the groundswell from people in the state and across the country who want to reduce taxes, which means lowering state budgets and increasing cuts to human services even further. Your vote counts!! (if you believe your vote doesn't matter, go to this web site to see how many times a few votes made all the difference:

<http://www.votinginfo.info/2009/08/your-vote-makes-difference.html>

In general, Democratic candidates tend to favor human service programs while Republican candidates tend to favor cutting spending, with human services often ending up on the chopping block. But there are many issues and each candidate is his or her own person. Only you can decide who most closely represents your values, needs and wants. You need to decide who to vote for, and being informed will make your decision-making easier. Some information is available at the following web sites:

<http://www.ontheissues.org/states/ma.htm>

<http://www.thebostonchannel.com/commitment-2010-mass>

The Transformation Center does not endorse these websites. Probably no matter how well informed you are, you are going to feel like you are not well informed enough. Take what time you can to read about the issues and then

**Get Out and Vote !**

The way Massachusetts is run depends on who wins the election. If you don't know where to vote, call (800) 462-VOTE(8683), or see this web site:

[www.wheredoivotema.com](http://www.wheredoivotema.com)

## VOICES FOR CHANGE

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## Karl Ackerman Remembrance Gathering

Karl Ackerman was the Transformation Center Board President for several years. He also was the information technology director for the Metro Boston Recovery Learning Community and on the Advisory Council for the North East Recovery Learning Community and active with many other mental health organizations. A Vietnam veteran, Karl passed away last November.

A remembrance gathering and celebration of his life by all his friends and people

from different organizations is being hosted on Sunday, 11/14/2010 from 1030am-230pm at the Boston Resource Center, lead partner of the Metro Boston Recovery Learning Community, at the Solomon Carter Fuller DMH Building, 85 East Newton Street, Boston on the Boston Medical Center Campus. Details at



*Karl Ackerman*

[www.namigbcan.org](http://www.namigbcan.org) or call Howard at (617) 305-9976 or Chuck at (617) 305-9989.