Two big events this month!

Monday, October 10, 2016
World Mental Health Day

2nd Annual
DESTINATION DIGNITY
Rally & MARCH

Washington, DC

Learn more on page 4

Thursday, October 20, 2016

2nd Annual
GLOBAL PEER SUPPORT
CELEBRATION DAY

Everywhere around the World!

See page 2 for an example of a proclamation

In this Issue

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- Dignity Rally & March / World Mental Health Day / GPSCD
- Feature Article by Steve Harrington – The World May One Day Be Led by Persons with Mental Illnesses
- What’s New (webinars, articles, surveys, and call for presentations)
- 10th Anniversary Conference Photo Gallery and Reviews
- Member Submitted Announcement and Information
- Allied Organization Announcements and Continuing Ed Opportunities
- About iNAPS / Join now and save!
WHEREAS, the role of the peer support worker has been defined by SAMHSA the Substance Abuse and Mental Health Services Administration as offering help based on shared understanding, respect, and mutual empowerment between people in similar situations; and

WHEREAS, peer supporters engage in a wide range of activities, including advocacy, connection to resources, sharing of their experiences, community- and relationship-building, group facilitation, skill building, health education and mentoring, individual goal setting and more; and

WHEREAS, the number of peer providers currently employed in the U.S. is 25,419; and

WHEREAS, it is estimated by 2020, peers will constitute 30 percent of the behavioral health workforce; and

WHEREAS, the International Association of Peer Supporters (iNAPS) has asked that the third Thursday in October be designated as Global Peer Supporter Celebration Day;

NOW, THEREFORE,
I, Official Representative of this city, state, nation, do hereby proclaim October 20, 2016, to be Global Peer Support Celebration Day in this community, and encourage all our residents to recognize the value which peer supporters bring to the behavioral and general health workforce.

IN WITNESS WHEREOF, I have hereunto set my hand and caused the Seal of the [city, state, nation] to be affixed to this 20th Day of October, 2016.
Collaborating for Unity / Letter from the Editor

Dear iNAPS community,
We had a very successful 10th Annual National Peer Support conference in Philadelphia at the end of August and this newsletter contains photographs and reflections from that event. A Thank You letter with our deepest gratitude to all who volunteered in so many different capacities to make the conference a success is posted on our website. If you attended, take a look at this thank you letter to acknowledge everyone who worked to make this event a success.

It is with a mixture of joy and sadness that I announce I have accepted a full-time position with Rutgers University to continue the work I have been doing on a part-time basis with the Academy of Peer Services for my home state of New York. I see a great many leaders of the peer support movement who have been involved with iNAPS through the years, as well as many other who we have yet to reach, who can step up and shape the future of this organization and its ability to meet the growing needs and demands of the peer support workforce.

I especially want to thank Lori Ashcraft for her guidance and mentorship and faith in our mission and Steve’s vision to work in the past year to raise awareness about iNAPS with many new and important stakeholders. I also want to thank Renee Kopache and Ethel Sidney for their professional direction during the organization’s time of transition ensure that the organization was on track to meet its fiscal and legal responsibilities. Renee in particular showed a level of dedication far above and beyond anyone in the organization’s history, with the possible exception of Steve Harrington. For that reason, Renee received this year’s Volunteer of the Year award. So, with that, I’ll be signing off and looking forward to what comes next! I hope you’ll be a part of it!

Renee Kopache, Treasurer
Receiving the Volunteer of the Year award at the 10th Annual National Peer Support Conference
Collaborating for Unity / **Dignity Rally and March**
**Monday, October 10 in Washington, DC**

**RALLY!**
for INSPIRATION
With Health and Social Justice Leaders
US CAPITOL REFLECTING POOL 11am-1pm

Dr. Arthur Evans, Philadelphia’s Transformative Health and Social Justice Champion

**MARCH!**
for ACTION!
1-3pm: DC streets to Washington Monument

Judge Ginger-Lerner-Wren, Repairing The World: Human Rights Activism through Mental Health Courts

**CELEBRATE!**
Dignity, Recovery, Mental Health Now!

Join the march against the dehumanization, discrimination, and stigmatization of people living with mental health conditions.

Visit the site:
http://www.destinationdignity.org/

Facebook:
https://www.facebook.com/MHDignityMarch

Twitter:
https://twitter.com/d_nationdignity
Collaborating for Unity / World Mental Health Day
Monday, October 10

World Mental Health Day is observed on 10 October every year, with the overall objective of raising awareness of mental health issues around the world and mobilizing efforts in support of mental health.

The Day provides an opportunity for all stakeholders working on mental health issues to talk about their work, and what more needs to be done to make mental health care a reality for people worldwide.

To learn more about The World Health Organization (WHO) and the World Mental Health Day, visit: http://www.who.int/mental_health/world-mental-health-day/2016/en/

World Health Organization (WHO) QualityRights Initiative

This is an update (from an earlier newsletter) on the actions that WHO is taking through its QualityRights initiative, along with information and suggestions about how you can join our efforts to improve quality of care and respect for human rights in mental health services around the world in line with the Convention of the Rights of persons with disabilities, other international human rights instruments and the Human rights Council resolution on mental health and human rights adopted July 1 2016 http://www.un.org/ga/search/view_doc.asp?symbol=A/HRC/32/L.26

We are writing to specifically invite you to contribute to an international review of capacity building materials on mental health, human rights and recovery (listed below) that we will be carrying out towards the end of the year.

The core mental health and human rights modules:

- Understanding human rights
- Promoting human rights in mental health
- Improving the mental health services environment and community inclusion
- Realising recovery and the right to health in mental health services
- Protecting the right to legal capacity in mental health services
- Creating mental health services free from coercion, violence and abuse

Advanced modules:

- Promoting recovery in mental health and related services (includes recovery plan template and recovery star)
- Realising supported decision making and advance planning
• Setting up and operating a civil society organization
• Setting up and running peer support groups
• Preparing and implementing Improvement Plan for service change.
• Providing individualised peer support within services and the community
• Implementing strategies to end the use of seclusion and restraints and other coercive practices (in progress)
• Strengthening advocacy for promoting mental health and human rights (in progress)

If you are interested in reviewing these materials or participating in other actions related to this initiative, let us know (send email to info@naops.org and we will put you in touch with the organizers of this World Health Organization initiative).

Collaborating for Unity/ Global Peer Support Celebration Day
Thursday, October 20, 2016

Greetings everyone,

Here is some more information about the 2016 Global Peer Support Celebration Day; our second year of celebration.

Global Peer Support Celebration Day is an authentic celebration of recovery and support that is unique to each person and group. In other words, it belongs to those that make it happen; those who chose to celebrate in as big or as small a way as they wish.

The celebration began with and is promoted by the International Association of Peer Supporters, but really belongs to all organizations and groups that wish to join in appreciation for the peer support movement. Regardless of how your group chooses to celebrate, simply pause at 12:00 noon (in your time zone) on Thursday, October 20, and stop to take few photographs of what is happening at your celebration, and then share those photos on the Facebook page or with the Celebration organizers (listed below) to share with others around the world.

Note: We are seeking one or more individuals or groups from each state, province, country, or planet to send us photos and a brief report about how you celebrate the day.

The email address is gpscd2016@gmail.com or bill.beverleyblanco@gmail.com

Our Facebook page is https://www.facebook.com/globalpeersupportrecognitionday/
Editor’s note: With the upcoming election, we thought it might be fun to revisit one of Steve’s earlier articles on the subject of world leadership.

The World May One Day Be Led by Persons with Mental Illnesses By Steve Harrington, J.D., Founder, International Association of Peer Supporters (iNAPS)

Two bits of information recently came to me that, taken together, caused me to formulate the following, inescapable conclusion: persons with a mental illness, particularly those with schizophrenia, are destined to lead the world.

This conclusion is well-supported by social scientists and organizational theorists. Very recently, researchers have concluded that the best leaders for organizations of all types are those who know themselves best. Experience has shown that those who know themselves well, and are comfortable with who they are, relate to others in a humane, compassionate way. That, in turn, inspires workers with loyalty and a desire to become more creative and productive. Everyone wins! Gone is the attitude that productivity is best driven by cold-hearted bean counters who monitor every move it takes to create a widget.

One business author, Robert Thomas, CEO of Accenture Performance, uses current leaders as examples. In his new book, Crucibles of Leadership, Thomas writes that the best way for people to know themselves, and thus become more effective leaders, is through adversity. He cites cases where deaths and illnesses forced now-effective leaders to reevaluate their lives and reprioritize their values. The result: compassionate people who lead with their hearts and workers who have never been more happy, productive, and creative. Businesses, especially the most successful in the world, know this lesson well.

So, it struck me. Where would you go to find people who have experienced adversity and grown through the experience? Psych hospitals! (Or those who have been there.)

Complementing this revelation is another. I recently heard a respected psychiatrist, sitting on a panel of his peers, go through a litany of challenges persons with schizophrenia face. The doctor painted a pretty ugly (and, fortunately, unrealistic) picture of what life is like for all persons with schizophrenia. At the end of his presentation, an audience member asked if there could be anything positive resulting from schizophrenia.
“Steve, you just don't think like other people,” he said. “You come up with ideas and approaches that are totally unique. Your head just doesn't accept reality, and that challenges us to change our perception of reality... You don't just think outside the box—you don't even know there is a box!”

I thought for a moment about my own reality challenges. Walls moved, ceilings collapsed, lines on the road shifted, and voices... oh, those voices telling me what to do! And then there was that day I had a stimulating conversation with an unseen companion on a street corner. That little incident sent me back to the hospital, where meds ended the conversation—but not its memory.

Then I remembered the words of a professor recommending me for a doctoral program in public administration.

“Steve, you just don't think like other people,” he said. “You come up with ideas and approaches that are totally unique. Your head just doesn't accept reality, and that challenges us to change our perception of reality. That's what creative problem-solving is all about. You don't just think outside the box—you don't even know there is a box!”

Here's the bottom line: Those of us who have been there know all the disadvantages of having a mental illness, especially one like schizophrenia, which can affect cognitive abilities and perceptions of reality. On the other hand, society appears on the brink of recognizing the value of serious life challenges, especially when those challenges are used to foster personal growth.

The professional must therefore work to build upon the person's strengths (such as the perspective of yours truly being a creative problem-solver) and use them as the motivating factors to enhance his/her recovery. As is illustrated above, we can look at strengths instead of just the illness.

I foresee a time when executive headhunters will prowl the hallways of our psychiatric hospitals, looking for new leaders for organizations of all types. Gone will be the days when executive job descriptions require an MBA. Instead, job descriptions will read: “Life-changing experience through adversity desired; mental illness a plus.”

Look out, world. We're taking over!

Next iNAPS Webinar/Save the Date

Friday, December 2, 2016

Hospital to Community: A Process of Inclusion
with Gina Calhoun

In this 1-hour webinar, Gina shares her personal story of transitioning from long-term institutionalization to community living, including her work as a peer support specialist during the closure of Harrisburg State Hospital. Following Gina’s story, we will explore the role of peer support in downsizing, right sizing and closing institutional-based settings. We will explore 3 interrelated approaches to include: The Community-Hospital Integration Project Program (CHIPP); the Comprehensive Individual Treatment and Community Support Planning Process; and the essential role of Certified Peer Specialists in the hospital to community transition.

By the end of this presentation, participants will be able to:
1. Explore recovery and community integration through storytelling and data.
2. Explain the individual, community and financial benefits of downsizing, right sizing and closing state hospitals.
3. Relate at least 3 positive outcomes of Certified Peer Specialists on the transition team.

Gina Calhoun works for the Copeland Center for Wellness and Recovery.

After 17 years of back-to-back institutionalization, Gina credits her journey forward in life to relationships that chose to focus on What's Strong Not What's Wrong and to meaningful employment. Gina often says, "I didn't get well and go to work. Work was my pathway toward wellness." Gina was the keynote speaker at the National Olmstead Policy Academy; the Center for Medicare and Medicaid’s All Staff Meeting and for the University of Tokyo’s Mental Health Convention.

NO REGISTRATION REQUIRED!
On December 2, 2016 12 Noon Eastern / 11 AM Central / 10 AM Mountain / 9 AM Pacific
Click here to join the live webinar.

This series of free webinars is made possible by Optum, which provides technology and technical assistance.
Thank you Optum for your ongoing support of peer supporters!
And thank you Createus Media for recording these webinars.

Recently Released – Recorded Webinar 28:
Peers Educating Peers on the Affordable Care Act: Part 2 –

A partnership between Resilience, Inc. and iNAPS

About this two-part series

Peers Educating Peers on the Affordable Care Act: Part 1, focused on sharing information about this exciting project supported through the SAMHSA-funded Bringing Recovery Supports to Scale Technical Assistance Center Strategy (BRSS TACS) for Peer Specialists in the state of California and learning about the role Peers can play in the Affordable Care Act.

Peers Educating Peers on the Affordable Care Act: Part 2 – is just as exciting!! Even if you did not participate in Part 1 – this webinar will prove to be beneficial for you. The webinar is designed to provide you with solutions – including “why” the ACA is important and “how to” support those you serve to get health insurance. This will include a quick refresher on the Affordable Care Act, walking through the health insurance enrollment process and identifying strategies to reduce the life span disparity. While the webinar is targeted to Peer and Family Support Specialists in the State of California, the webinar will be open to anyone who is interested in learning these strategies. You will also receive user-friendly materials that have been developed to use while supporting an individual through the health insurance enrollment process.

Click here to download the user-friendly participant workbook and leader guide developed under this initiative.

Click here to view the recorded webinar.
Other recorded iNAPS webinars are available on the iNAPS website site (www.inaops.org).

**Webinar Number:**

#27: *The Power of Storytelling*; Gayathri Ramprasad, ASHA International

#26: *Peers Educating Peers on the Affordable Care Act*; Lori Ashcraft, Gene Johnson, and Scott Palluck of Resilience, Inc.

#25: *Activation, the “Secret Sauce”: Sue Bergeson*

#24: *National Survey of Peer Specialist Wages: Allen Daniels and Peter Ashenden*

#23: *Sustainable Resilience: Lori Ashcraft*

#22: *The History of the Consumer/Survivor Movement: Sally Zinman and Gayle Bluebird*

#21: *My Lived Experiences: Gitane Williams*

#20: *WRAP and Peer Support: Mary Ellen Copeland and Jane Winterling*

#19: *History of Peer Support: Larry Davidson, Ph.D., Yale University*

#18: *Compassion Fatigue: Ted Thomas, Promise Recovery Network, NC*

#17: *Peer Support in the VHA: Dan O’Brien Mazza, Director of Peer Support Services VA*

#16: *Build Your Resume: strategies for getting, keeping and advancing employment*

#15: *Emerging Roles in Peer Support: supporting employment and educational recovery*

#14: *The Workplace Bully – who and you and what to do*

#13: *Stress: The Deadly Plague* (applicable to all professions)

#12: *Self-Disclosure* for peer support providers and other disciplines

#11: *Tour of iNAPS Recovery to Practice training* for experienced peer supporters

To access recorded webinars, visit the archive page: [http://inaops.org/free-webinars-past](http://inaops.org/free-webinars-past).

Thank you David Barker ([www.createusmedia.com](http://www.createusmedia.com)) for recording these sessions!

Thank you Optum ([www.optum.com](http://www.optum.com)) for your ongoing donation of time and technology, which allows us to offer these webinars free of charge. Thank you Peter, for your support - you’re the best!
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To order, visit: http://www.apa.org/pubs/journals/special/6103903.aspx

UNDER THE MICROSCOPE: PERSPECTIVES ON PEER SUPPORT
By Dennis Grantham OCTOBER 1, 2016

The National Assn of County Behavioral Health and Developmental Disability Directors Nationwide, more than 25,000 Certified Peer Specialists (CPS) represent a key segment of the behavioral health workforce that continues to grow.

Dennis Grantham recently visited the 10th Annual International Association of Peer Specialists (INAPS) Conference in Philadelphia, where more than 600 peers met to review trends in their work.

Dennis compiled a number of perspectives on the peer workforce, including:
- Data on Certified Peer Specialists nationally
- Three broad categories of working peers
- Understanding of the work of peers
- How peers “connect” with individuals
- How peers activate individuals’ self-determination
- How the Veterans Administration is working with peers
- Taking action to expand peer support services

Read the full article on the NYAPRS website: http://www.nyaprs.org/e-news-bulletins/2016/015264.cfm
Two recent reports have been published of relevance to the Peer Workforce:

**The Peer Provider Workforce in Behavioral Health: A Landscape Analysis.**


**Peer Specialist Training and Certification Programs: A National Overview.** (Updated)


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**Peer Support / News and Notes**

Click here for news and notes from the Café TA Center
Peer Support Research / Surveys

Penn

Are you an adult who has been diagnosed with a mental illness? Are you willing to spend 20 minutes taking an online research survey? Participants will be entered to win 1 of 15 $50 electronic gift cards to either Amazon or Walmart.

Researchers at the University of Pennsylvania are seeking adult participants to complete an online survey about the interactions they have with the adult relative with whom they spend the most time. Help would be greatly appreciated! For more information or if you would like to take the survey please click on the link below. If you have any questions please send an email to the student investigator, Travis Labrum, at tlabrum@sp2.upenn.edu
https://upenn.co1.qualtrics.com/SE/?SID=SV_8jhQ4M1vYh34dlp

UNIVERSITY OF NORTH TEXAS

Dear Peer Providers,

We are researchers from the Department of Disability & Addiction Rehabilitation at the University of North Texas. We are conducting an Internet survey to better understand the job satisfaction of peer providers working in mental health settings. We would like to invite you to participate in this research project. To qualify for this research project, participants must meet the following criteria:

(a) Employed either part-time or full-time as a peer provider;
(b) Over the age of 18 years old; and
(c) Living in the community.

Research participants will be asked to complete 1 Internet survey. The survey will last about 25 to 30 minutes. Your participation in the survey will remain completely confidential.

Participants will earn a $10 gift card for their involvement. Your participation may help to improve training programs and other services for peer providers.

You can participate in the research study by going to the following website:

https://unt.az1.qualtrics.com/SE/?SID=SV_9AharlQTJ6jDiC1

For more information, please contact the principal investigator, Dr. Jessica Brooks, at: (940) 565-4938 or jessica.brooks@unt.edu.
Call for Presentations/PRA Conference

There are only 7 days left to submit your 2017 Recovery Workforce Summit Presentation Proposal

The 2017 Recovery Workforce Summit to be YOUR Summit! Partner with PRA and GA-PRA by sharing your knowledge and skill with your colleagues. Time is limited...but you can still submit a proposal to present.

We expect to feature over 50 workshops and more than 20 hours of continuing education contact hours across multiple disciplines. Submit today and attendees will enjoy your compelling presentation along with captivating keynotes, special events, opportunities to participate in exam preparation courses for both PRA's certification exams. New for 2017, PRA will feature pre-conference seminar on Transition-Age Youth. Be a part of this exciting 3-day experience unmatched in the psychiatric rehabilitation committl! Submit a proposal today.

Submit your proposal and and prepare to take the stage to share your ideas and expertise in Atlanta!

10th Annual National Peer Support Conference
Collaborating for Unity

Photo Gallery

Our video producer, David Barker, with Createus Media released videos of the morning keynote presentations. We hope you enjoy them and will share them in any way that helps to further promote peer support!

Keynotes Day 1:
Keynotes Day 2:

Thank you again for your support for a very successful conference!

Matthew Federici, iNAPS Board President, kicks off Day 1 of the conference on Friday, August 26.

Arthur Evans, Commissioner, Philadelphia Dept. of Behavioral Health & Intellectual disAbility Services (DBHIDS) joins the conference by video

Roland Lamb, Deputy Commissioner of Philadelphia DBHIDS giving his keynote

Beverly Haberle, Executive Director of the Council of Southeast Pennsylvania and Project Director of PRO-ACT

Mark Salzer, PhD, Professor and Founding Chair of the Dept. of Rehabilitation Sciences, Temple University

Nancy Wieman, Former Deputy Administrator for Mental Health Services in Montgomery County, PA

Matthew Federici, Shelley Brown, and Bill Beverley-Blanco (coordinator of the Global Peer Support Celebration Day)
Lori Ashcraft, co-director of iNAPS kicks of Day 2 with a remembrance of the 10 years of the iNAPS conference

Robyn Priest gives her keynote, Awesome! A Matter of Perspective

Gina Calhoun gives her keynote, Hope Inspiring Relationships

Sharon Wise, The Butterfly, a Dance of Freedom

Gayathri Ramprasad, ASHA International, gives her keynote: Be the Hope

Gina Calhoun and Scott Heller accepting the Dreamweaver Connection award

Conference Planning Committee (taken by Board Vice President Andy Bernstein)

Photos by Shelley Brown

Philadelphia Conference Coordinator Sean Brinda (dark blue shirt with envelop in hand) with a group of attendees

Presenter Noelle Pollet (left) on a break from the Sunday Morning CPRP Certification Workshop

Board members (left to right) Renee Kopache, Diann Schutter, Matthew Federici, Rita Cronise (director of operations), and Andy Bernstein
10th Annual National Peer Support Conference /Views & Reviews

The following view and reviews came from the 10th Annual National Peer Support Conference recently held in Philadelphia

iNAPS ten-year anniversary celebration (presentation) written and shared by Lori Ashcraft

Lori began by sharing the following poem written by iNAPS Board Member, Bill Beverley-Blanco

Every breath, every heartbeat is a Celebration of Life. We come together on this occasion to celebrate ten years of iNAPS and the role of Peer Supporters in Inspiring Hope. We realize that every day is a Celebration of Empowerment and ownership of our own lives. We aspire to pass on the empowerment and ownership to each person we support in recovery.

Our mission is to grow the profession by promoting the inclusion of peer supporters throughout mental and behavioral health systems worldwide.

Our vision is to make peer support services an option for anyone who needs the compassion and understanding of someone who has been there.

The beginning:

10 years ago iNAPS held its first conference. What was the “big bang” that brought the forces together to give birth to this remarkable association? Steve Harrington was one of 6 peers hired to do something loosely called “peer support.” It wasn’t long before they began to experience a sense of isolation and a need to belong to something bigger and broader than themselves.

Steve and his five colleagues realized that they were not alone. There were other peers being hired in other parts of the country. They wondered what those other peers were experiencing; what problems they were facing and what solutions they were coming up with. This curiosity prompted Steve to take a trip to various places in various states visiting programs that hired peers. He soon became convinced of the need for a national association where peers could learn from each other and belong to something beyond their immediate jobs. This, he reasoned, would reduce the feeling of isolation and separation.
In 2004 Steve completed the paperwork for setting up the association that would become iNAPS. To help reduce the sense of isolation and to share helpful information, Steve began to send out newsletters. Today, 14 years later, over 4000 open the newsletter.

Here’s a quick look at each of the past 10 years:

2007 was the year of the 1st conference. 225 peers attended. The conference was held in Denver CO. The theme was “Climbing the Mountain Together”. Gayle Bluebird was the keynote speaker. The hotel was under last-minute renovation, and we decided it was emblematic of our own movement, and of recovery itself—always evolving, not always at the most opportune time!

2008 the second conference took place in Philadelphia, at the same hotel we are at now. And looking around, it’s clear that the hotel has changed significantly since then. 425 peers attended. The theme was “The Recovery Revolution: Peer Supports on the front line” Attendees began to see the peer movement as similar to the civil rights movement. There was also a focus on veteran’s issues.

2009 the third conference was held in Phoenix AZ. The theme was “Acquire the Recovery Fire”. What I remember about this conference is that someone drew a beautiful picture of a phoenix rising from the fire. It was beautiful and was made into a poster and many of us were lucky enough to buy a copy of it. Do we know who the artist was? We also acquired ANOTHER kind of recovery fire, and that was Rita Cronise! Phoenix was her first NAPS conference, and thankfully she’s been with us ever since! In Phoenix we also had an opportunity to see a number of local peer-operated programs, including a genuine “Sweat” in the backyard of a Native American peer-operated drug treatment program!

2010 the fourth conference was held in Lombard, Chicago. The Executive Director moves to Boston for a two-year post-doctoral fellowship at Boston University Center for Psychiatric Rehabilitation. New Jersey, Wisconsin, and Colorado join as the first NAPS chapters, an initiative that unfortunately was not continued, but maybe could still be! Steve, Jean Campbell and Sheri Mead offer webinar on Peer Support and Peer Providers—Redefining Mental Health Recovery, and 800 participants called in to attend.

2011 the 5th conference was held in Raleigh, North Carolina. If you were there, you might recall that at one point the hotel started shaking noticeably. We thought it might be us, but in fact it was a rare, east-coast earthquake, whose epicenter was close enough for us to feel it. The Washington Monument also felt it, and lost a few bricks in the process. We, however, still have all of ours. Membership dues were $10.00 annually.

2012 The 6th Annual Conference was held in Philadelphia again, with the Theme: “The Recovery Revolution Part 2.” We were in this very hotel (the Sheraton Society Hill), and there was a big rally to establish national standards, and out of that came the National Practice Guidelines which had 98% agreement across 1000 peer supporters nation-wide. Watching Steve pull all this together was amazing, and a clear reminder of how unified we were in certain ways...even back then.

2013 The 7th conference was held in Anaheim, CA, until then, only known as the home of Disneyland and the Crystal Cathedral. Our theme that year was “Growing Bigger and Best Through Sharing.” Lyn Legere and Keris Myrick were the keynote speakers, and a final draft of the National Practice Guidelines for Peer Support was published in the newsletter and posted on the website, where they still are today.
2014 the 8th conference was held in Atlanta GA with the theme “Changing Times, Changing Profession”. Steve Ford (Former First Family Gerald and Betty’s son) was the Keynote Speaker, along with plenaries delivered by Mark Ragins, Larry Davidson, Anthony Stratford, Anne Beale, Peter Ashenden and Allen Daniels. There was a lot of interest in dealing with stress that year, especially when the hotel had to be changed 3 weeks before the conference due to structural damage at the original hotel. It was a big scramble to get everyone to the right location with room to accommodate everyone. That year, we picked up Bill Beverley Blanco as a trusted guide and Steve published a survey on the challenges which peers were experiencing, and some ideas on how to address them.

2015 9th conference was held in San Antonio, Texas, and although Steve couldn’t make it for the very first time in iNAPS’ history, another attorney with a great heart stepped in to help manage the hotel contracts and general chaos that so often seems to accompany conferences like ours. That was Ethel Sidney, whom you probably have seen by now at the registration desk. Without her wisdom and guidance, we don’t know how iNAPS could have gone on through this year of transitions!

2016 10th Here we are now again in Philadelphia Collaborating for Unity. We have the largest attendance ever, topping out at over 600, the with most presenters we’ve ever had at about 150, counting co-presenters, and the first collaboration with a full partner in the City of Philadelphia DBHIDS. It has been an amazing adventure and our army of allies and volunteers have made this the smoothest conference ever.

**Things that have happened since the last conference**

We appointed a Board of Directors and an Executive Committee. We have worked hard to build the infrastructure and moved from an all-volunteer organization to having part-time paid staff and a part-time executive consultant with plans to grow and build through the development of a strategic plan and implementation of a marketing/business plan.

We published four full newsletters and 21 bi-weekly news updates to our members and subscriber list of 5000.

We established, and continue to grow, a state and country representative advisory council, made up of practicing peer support workers who are iNAPS members in various states and countries. We are striving to have 2 representatives from each state and country that has an active peer support program. So far, there are over 100 representatives on the google listserv.

We added over 600 new members in 2016 (once we process all the new ones from speakers and Philadelphia scholarships).

We held three Optum-sponsored free webinars so far in 2016, with a fourth this week (and four more scheduled for the year):

- **Webinar 24 - National Survey on Peer Specialist Compensation** with Allen Daniels and Peter Ashenden
- **Webinar 25 - Activation, "The Secret Sauce"** with Sue Bergeson
- **Webinar 26 - Educating Peer Specialist on the Affordable Healthcare Act** with Lori Ashcraft, Gene Johnson, and Scott Palluck of Resilience, Inc.
- **Webinar 27 - Telling Our Stories to Inspire** with Gayathri Ramprasad
We organized and held this 10th annual national peer support conference on August 26-28, and promoted a series of independently organized Summer Institutes in the week leading up to the conference, and a series of CPRP-bearing courses on the Sunday morning of the conference. We have two articles approved for publication in the special edition of the Psychiatric Rehabilitation Journal, due in September. We presented a workshop with Rita Cronise, Sally Rogers, and Andy Bernstein on the results of our 2014 national survey of peer supporter education, compensation, and satisfaction (as soon to be published in the above article) at the Psychiatric Rehabilitation Association (PRA) Recovery Workforce Summit in Boston. The presentation was repeated in Arizona and will also be given at the iNAPS Conference.

We have an article in Behavioral Healthcare magazine.

We participated in a May, Doors to Wellbeing webinar

- Peers in the Workforce: Invasion, Innovation, or Integration with Rita Cronise, Renee Kopache, and Patty McCarthy Metcalf

We answer (on average) 150-200 technical assistance calls or emails per month related to peer support and often engage our state and country representative advisory council to assist in answering.

We are involved in a number of special projects related to training and evaluation of peer support programs and we continue to grow through members and allies like you!

Thank you for your support through these past 10 years and may we support each other for many more.

More Conference / Views & Reviews

Alliance on the Advancement of Peer Careers

*Brief report/lessons learned about Peer Career Development concerns*

We offered workshops, presentations, caucus and round-table discussions on Peer Career Development to a total of over 220 participants at PRA in Boston in May; New York City Peer Specialist Conference in July; INAPS in Philadelphia in August; and at NYAPRS in Kerhonkson, NY and Alternatives in San Diego in September.

Our topics included “Peer Career Development Toolkit 1.0,” reports of findings from two online national surveys on peer career development; and discussions about key peer career development issues at national, regional, state and local levels as well as whether a peer-led and coordinated entity is needed to promote and advocate for peer career development nationally.
Key issues raised include compensation, certification, reciprocity, maintaining and promoting peer values and practice, supervision, disclosure, educating non-peer staff, ensuring organizational culture supporting peer values and team collaboration; peer-led research, and career advancement in peer and non-peer roles.

Stay tuned for next steps. We invite you to join the conversation in the Facebook group “Education Pays! Peer Career Development.”

In solidarity, Jessica Wolf (jwolfds@gmail.com), Nev Jones (njones@felton.org), Liz Breier (Ebreier@cspnj.org) and Clarice Bailey (cbailey@mhasp.org).

Peer Support Accreditation and Certification Canada

Thank you to each of you for your hospitality in Philadelphia last week. In particular thank you to Rita and the iNAPS board members who I had the privilege to meet. Your willingness to engage and share is most appreciated and made a great impact on me.

Several of you were quite interested in our experience in Canada creating and launching a nationally-endorsed Standard of Practice and certification process for Peer Supporters and Peer Support Mentors.

I am including a brief overview in case you find it helpful. We are proud of the Canadian peer supporters who came together beginning back in 2010 to develop a process that:

1. Honours and fosters the key principles of peer support.
2. Is based on a peer-created standard that includes the 5 pillars of lived experience, knowledge, acquired experience, competencies and a code of conduct.
3. Uses rigorous yet appropriate assessment tools that do not pose hurdles related to a person’s ability to write a test. For example, scenario-based questions (rather than memory-based multiple choice), and accommodations offered for literacy or anxiety challenges as required.
4. Is grounded by a Complaints Policy and Process with possibility of revoking a certification for serious Code of Conduct infractions. [peer-driven]

5. Certifies both Peer Supporters and Peer Support Mentors where a Mentor’s role is to oversee and guide the development of peer supporters.

In Canada our intent is that the standard of practice and certification is a tool to help government bodies, funders, and other stakeholders to better understand and be confident in the field of peer support.

The field of peer support will continue to grow, develop, and adjust as we continue to find ways to support those who choose to reach out in their times of need. Each one of us will make sure of that, and together we will make it happen.

Please share and forward this message. Kim Sunderland, Peer Support Accreditation and Certification (Canada), 416-930-3770, Kim.Sunderland@psac-canada.com

National Certification Forum (Notes)

R. PRIEST NOTES FROM CERTIFICATION FORUM
iNAPS - SATURDAY SEPTEMBER 27TH 2016

Facilitator: Chaz Longwell - AZ
Attendance: 63 (some people came in and out at varied lengths of time)

States/Countries represented: RI, AK, NC, MA, CT, PA, VA, NJ, TX, GA, CA, DE, NY, AZ, VA, FL, OH and Canada. NOTE: not everyone that entered the room was asked where they were from. There was also a journalist who does work for NASPID

Discussion:
- Chaz: started by talking about the difference between licensure and certification, discussed case managers have no certification requirement, boards of certification and liability of peers (from his perspective low against doctors, etc.).
- PA: stated there were only two companies able to train peer specialists – DBSA and RI.
- Some stated that there is no reciprocity between states and this creates issues.
- AZ: will accept other states certifications.
- VA: peer specialists certified through IC&RC. Case managers are QMHP – qualified mental health professionals.
- AK: CEUs were also discussed and there is concern as to how rural people get CEUs.
- FL: mentioned Florida Certification board in the past made trainings very limited for CEUs.
- DE: concerned about ultimately needing degrees.
- OH: On June 30th there were 1200 certified peer specialists, on July 1st there were none due to the changes in the state requirements.
- Rita Cronise: discussed Recovery to Practice improv videos: we are artists not scientists.
- How much can you place figures on us, limit us, when we are US.
- VA: discussed how they ask about recovery as it is the essence of what peer specialists do. They are not making certification mandatory. Some do not want structure in peer support.
- PA: in-service trainings occur on ethics/boundaries and recovery.
- Question: what is the evidence of how long someone has been in recovery making a difference to their ability to be a good peer specialist?
- Certification Boards sometimes try to judge recovery – concern about people having to go through that process.
- Benefits of certification: certification could have some standards, maybe we can create inter-state reciprocity. If no process – what stops crap peer specialists?
- AK: if we wait two years for someone to have the correct recovery time, they may have gotten other work and are lost to our profession.
- TX: have an ethics process where complaints are taken to a CPS committee to assess. Trying to become more integrated with substance use but there is a difference between SU recovery and MH recovery and how it is measured (how do you judge MH recovery when it is not linear?).
- CA: the things that inform SHARE are – do no harm (staff, peers and system), they are going after developing a certification process as they don’t want others telling them what to do.
- Stand-alone peer agencies should be able to bill Medicaid if a national certification is developed.
- CA: not doing entry level training (e.g. how to look after yourself, or keep a job, etc.). They do more professional training.
- NJ: Three peer certifications: certified recovery support practitioner, certified recovery wellness coach and CPRP.
- Canada: stated the question is where do you take it? They have a process outlined in their session and on their website that addresses many of these issues. They talk about peers being on a path of recovery; not in recovery. The role and the focus are important to define. They developed a set of common core principles and competencies which hold across the nation.
- RI: require 500 supervised hours, 23 hours must be direct supervision, 46 hours of education. There are 89 CPS. The issue is how do you assess competencies.
- It is a training issue NOT a certification issue.
- MHA national process marginalizes the CPS in the development process.
- Competencies should not replace field work – they need to be shown in a job.
- TX: working to further enhance/entrench peer support in the system which will hopefully increase pay.
- NY: the peer community is powerful and includes adult, families and youth peer specialists. It took 3 years to develop a certification process and now the certification board is 100% peers. The first year they certified 750 peers.
- DE: CPS bills more than therapists now.
- If there is a national process developed, how does that link with the current state processes? There needs to be respect to all state processes.
- States need to be part of the discussion.
- Peer specialists working on the ground should be involved in any discussion, not just people who worked in the field years ago and have high paid jobs doing non grassroots peer support now.
- First look at developing national standards and competencies and then consider certification.
National Certification Forum (continued)

From: Larry B.
Subject: Review of the Forum on National Certification

I don't know if anyone was fortunate enough to be in on the National Certification Forum at the iNAPS Conference in Philadelphia but the more this is explored the more complicated it becomes.

As this moves forward I want us to take a hard look at the different state certification processes. I know that as we (those of us who have been around for a front row view) have seen some things that we don't want to happen again. So let's take a hard look at what we don't want to happen.

I'm grateful for the people who had the **** to "go for it" in developing trainings and also the states who certified Peers, Peer Specialists, Peer Support Specialists, and whatever else we are being referred to throughout the USA. There is, however, a collective wisdom from being honest and saying we did some things wrong. Let's not repeat history. Let's chalk them up as growing pains and lessons learned. I've been told it's okay to look at the past but don't stare!

With that being said, there are so very many things that we have collectively done right. The increasing amounts of people who are moving into leadership roles is amazing. How ironic that iNAPS founder Steve Harrington lost his sight but certainly still has great vision. As he has passed the torch to those involved including, Rita Cronise, most definitely this international organization got it right. My opinion is that iNAPS needs to be a major stakeholder moving forward.

I personally have my professional goals. I would like to talk more about accreditation at a national level. It begins with verification of hours needed to even be eligible. My state does not require proof to recertify every 2 years. It's one thing to allow someone to become certified so that they can practice. This is especially true where employers are looking to save money by hiring peers already state certified. But most states allow two years before recertification. How about spending that time to produce documents to support being re-certified.

This brings up the topic of training. Training brings up the topic of money. Someone stated that everyone who has created and "owns" one claims to have the best (training). I'm a firm believer that everyone is entitled to their truth. I'm entitled to mine also, and without putting anyone under the microscope, there are huge differences in quality of curriculum and trainers. Did I mention money? The best advanced training available is the RTP "Next Steps" training. It was developed through money set aside by SAMHSA. If you want more information visit www.rtp4ps.org.

There are several other trainings of very high quality but I'm reluctant to name them here because one, they are "owned", and two I'm not advertising for them. They have incredibly talented trainers and all have a format where there is more facilitation and less teaching. They are for advanced level very experienced peers. They are expensive but (having been there done that) are a great value!

One of the reasons that I think peers are resistant to national certification is because of the affordability factor. Let's face it, even though the wages are going up, the average peer is making $10-$12 an hour. If employers want good peers than they should be paying for our professional development.
My vision is that the national accreditation/certification should not be about replacing the states and their right to self-determination. I would however caution that it not be more watering down of the ADVANCED practice of peers. By all means certify. Welcome to the profession. But if we are to be concerned about moving the profession forward we have to anticipate and expect that each one of us who becomes a larger voice in sharing recovery practice can undo a lot of reputation and respect for peer support from other providers. Peers working at levels that we are now trying to get a foot in the door at (primary care etc) can do harm to the peers who we work with on an individual basis as well as paint a not so positive picture on the value of our services. I'm not talking about how much our hours can be billed at but on how much money can be saved. This is a business and evidence shows that peer support is cost effective. If you don't like hearing that I'm not going to apologize. Peers have the coolest profession. We get to bring hope to the systems we work in as well as the peers that we serve. We get a front row seat to watching miracles happen!

The last thing I want to share is that I would steer national level "stuff" towards peers who now, or in the future, want to work in private practice. I don't have the numbers in front of me but several states do allow this. Take it for what it's worth! Namaste,

Member Submitted / Announcements

One of the benefits of membership is the ability to include announcement about activities in your area in the newsletter (as space allows).

Dear iNAPS,

We have a great new resource for those who live in the state of Virginia. Click to Access this new site: http://rrs4hope.com/ Submitted by Heather Seaman
Dear iNAPS,

Check out this new book... Help-Mental Illness to Wellness: The Impact of Food on Our Mental Health Paperback – September 21, 2016 by Carolyn Marsalis M.Ed. (Author), Amy Pierce CPS (Contributor)
The story of two women who share their life-long journeys of going in-and-out of private and public mental health systems as well as the subsequent impact on their lives. By examining a multitude of possible causes for their never-ending symptoms, just about every avenue available to them was explored in order to find the primary source of their illnesses. Upon discovering their food allergies and many food intolerances, they both overcame their mental illness diagnoses...all of them.

Submitted by Robyn Priest

An Overview of Family Peer Support Certification: Insights into State Implementation

Presenters: Lynda Gargan, Ph.D., Jane Shank, M.S.W., Barbara Granger, M.A.

As the field of Family Peer Support continues to evolve, states are developing certification standards to ensure the provision of quality services. These standards vary from state to state and are reflective of the unique characteristics of the state. While many states are creating certification for Family Peer Support, others are electing to adopt and utilize the national certification standards and examination, developed by the National Federation of Families for Children’s Mental Health. In this webinar, the presenters discuss certification standards that have been developed in Texas and Michigan and the national certification standards. Learn more about the processes that were involved in the development of each of these certifications and lessons learned through these processes. Our presenters discuss the training, experience and educational requirements of each certification process and will offer insights as to how Family Peers are being utilized in a variety of settings.

Click here for more: http://www.nasmhpd.org/content/overview-family-peer-support-certification-insights-state-implementation

Click here to view the webinar sponsored by SAMHSA broadcast on Sept 1, 2016.

Submitted by Jacek-Jack Haciak
Peer Support in the Criminal Justice System (PA)
By: Liz Woodley, CPS, Forensic Peer Specialist

Tuesday, Oct. 25th @ 11 am PST/ 1 pm CT/ 2 pm ET

All too often people with mental health challenges find themselves in the criminal justice system. Connecting these individuals with trained peer specialist who have shared similar experiences greatly enhances their recovery and ability to navigate the criminal justice system.

In this webinar, Forensic Peer Specialist Educator Liz Woodley will present specific information about diversion and the use of the Sequential Intercept Model as the natural framework for communities to use when considering the interface between the criminal justice and mental health systems and effects on individuals with mental health needs, while sharing her own personal recovery journey. (The Model was developed by Mark A. Munetz, M.D. and Patricia A Griffin, Ph.D. to provide a series of points of interception at which interventions can be made to prevent individuals from entering or penetrating deeper into the criminal justice system.)

- Define Forensic Peer Support
- Reducing recidivism and the over-representation of mentally ill in the criminal justice system
- Recognize Diversion Opportunities available for individuals with a Mental Health Illness or Substance Use Disorder

Liz Woodley leads the Forensic Peer Support Project for the Pennsylvania Mental Health Consumers’ Association. Active in her own recovery since August of 2004, Liz shares her fear of incarceration. After receiving a DUI and possession charge - which prompted her recovery - she recognized her mental health diagnosis of major depression and anxiety and sought treatment. Her main desire is to help others like herself.
Other Recent/Recorded Webinars

DOORS TO WELLBEING

-----Recorded Webinar-----
The spirit of bouncing beyond by: Lori Ashcraft

Visit this page for the full list of Doors to Wellbeing recorded webinars:
http://www.doorstowellbeing.org/webinar-recordings

What Webinars Do You want to See in 2017?

Help us provide you with the best webinars?

Please take a few minutes to fill out the attached survey about what topics you want to see in webinars. Plus, if you have a webinar you would like to present - let us know that as well.

It's YOUR series - help design it.

Click Here for Survey

Or copy and paste the URL below:
https://docs.google.com/a/copelandcenter.com/forms/d/e/1FAIpQLSe6YkEr2BOf_DSloDIscNDPCgNxI_k9u6RkTcN14nTZlFkg/viewform?c=0&w=1

Click here to access all of the Recorded Doors to Wellbeing webinars:
https://attendee.gotowebinar.com/register/6682977180743518722
Copeland Center Summit: Mentoring for Re-Entering

Nov 14-15, 2016
West Chester, PA
*WRAP Facilitator Refresher (Nov 14-17)
*Advanced Level Refresher (Nov 14-18)

This year's Summit, Mentoring for Re-entering, will focus on our grass-roots peer community converging together around our collective experience and practical approaches using WRAP, Peer Support and other Recovery based programs to overcome and transform the challenges of the criminal justice systems.

Don't miss this opportunity to learn more about how peers are changing re-entry for people around the US!

Confirmed Workshops Include:

- Peer Support within the Criminal Justice System
- Supporting Wellness & Recovery in San Diego Jails
- Peer Support and WRAP in the PA State Prison System
- Who Am I Now? Identities that Challenge Successful Re-entry
- From Parenting to Prison and back - One Mothers Story
- Applying the Key Concepts to Suicide Prevention

See the Interactive Schedule!

Center Stone West Chester Inn
943 South High Street
West Chester, PA 19382

Post conference opportunities include both WRAP Facilitator and Advanced Level WRAP Facilitator Refreshers.

Visit the website for more information and to register!
Online Support Group for Caregivers with Gina Calhoun

Giving care and support to a loved one can be very rewarding; yet it can also be challenging. Many caregivers are attempting to balance taking care of a loved one, while working, taking care of household needs and/or paying attention to other family members. This can lead to feeling overwhelmed and to put it simply - STRESSED! Remember that as caregivers, we need to take care of ourselves to be able to extend healthy support to others. Easier said than done, right?

We will have the opportunity to share our challenges, but just as importantly learn (from each other) coping strategies and skills to stay as well as possible. We will meet once a week for a live session online for 7 weeks. Each session is 2 ½ hours in duration with optional opportunities to 'chat' with the facilitator throughout the week.

Gina Calhoun, Copeland Center Director of Wellness and Recovery Education, will lead this 7-week peer support group which will offer a safe environment to focus on YOU. Don't miss this unique opportunity!

Session Dates: Nov 3, 10, 17 and Dec 1, 8, 15 and 22. Click for more information and to register.

The Way WRAP® Works

The key to ensuring that recipients of behavioral health services receive the full benefit of using WRAP® is for the leaders and participants in behavioral health organizations to better understand and incorporate the ethics, values, and practices that Mary Ellen Copeland, the Copeland Center, and the grassroots practitioners of WRAP® have established. The Way WRAP® Works serves as a guideline for how behavioral health organizations can implement WRAP® with fidelity to the model as designed by people in recovery with Mary Ellen Copeland and developed by the Copeland Center. Read the full paper at the website.

WRAP Calendar: See all upcoming events!
Using Compassionate Language

Language wields enormous power. Thomas Jefferson replaced the word “subjects” with “citizens” in the Declaration of Independence and a republic was born. Dr. Martin Luther King’s stirring cadences moved millions to march for civil rights. And, by and large, it has been words in the news coverage of the all-too-frequent mass shootings in this country that have led many to the conclusion that people with mental health conditions are violent and to be feared.

While we should always consider our word choices thoughtfully, DBSA believes we must be especially careful when we speak about mental health and the people living with mental health conditions. Words lead to stigma which is invariably followed by discrimination. While some people may intentionally use unkind labels to describe individuals with mood disorders, most are just unaware that their language choices are hurtful and often harmful. They fail to realize that their words make it that much harder for people living with these challenges to speak up, seek treatment, and find support.

DBSA recently published the guide 10 Ways to Combat Discrimination with Compassionate Language, in part as a response to the many requests we have received asking for direction on language and mental health. Whether you are a peer, family member, co-worker, clinician, or member of the media, we encourage you to read it, understanding, of course, that there are many differing and passionate opinions on this important topic. The guide focuses on these concepts:

1. Defy definitions
2. Choose words thoughtfully
3. Avoid distancing language
4. Separate the person from their condition
5. Don’t make assumptions
6. Acknowledge the right of personal choice
7. Accept responsibility
And for the media:
8. Avoid sensationalizing
9. Portray people with mental health conditions realistically
10. Don’t assume mental health is a factor in violent crime

As individuals and members of families, communities, workplaces, and the media, we each bear responsibility for our word choices. Please join us in working toward eliminating the stigma and discrimination surrounding mental health conditions by choosing language that is accurate, respectful, and caring.

Download the guide now (PDF).

Mental Health Parity
Mental health parity may be federal law, but is it being implemented at the state level? Care for Your Mind examines the issue and shares how you can get involved. Read more

Equity and Inclusion in Leadership: A National Networking Call for People of Color

The STAR Center launched our national networking call for people of color who are interested in increasing the number of people in organizational leadership roles who are African-American, Native American/American Indian/Alaskan Native, Latino/Hispanic or Asian/Pacific Islanders.

Our next call will be on October 14, 2016 at 2 pm ET and will convene on a monthly basis. Our hope is that this opportunity for people of color to network and support each other's leadership efforts across the country and in our target states/regions will make a measurable and remarkable difference towards eliminating the leadership and health disparities we currently experience across the country.

Register Now!
• **STAR Center podcasts** are 25-30 minute pre-recorded broadcast episodes that you can listen to on your computer or your smartphone. Our podcasts will be focused on healing and recovery, systems transformation, cultural diversity, peer support, youth leadership, organizational sustainability and more! We are just getting started so please give us your feedback about how to best meet your needs!

Get Ready to Kick off the New Year with these STAR Center opportunities!

• **Secrets of Sustainability Roundtable** is a monthly live streaming opportunity for identified organizational leaders (board members, executive and management staff) from consumer and family run organizations focused on organizational sustainability in a challenging and ever changing environment of Medicaid redesign, health care reform and managed care. Coming Soon.

• **STAR Center Collaborative Leadership Series** is a monthly live streaming opportunity for people interested in learning and practicing social justice and trauma informed community building skills. We hope to engage new and seasoned peer and family advocates who are interested in strengthening leadership skills and opportunities.

**Sign Up Right Away!**

Have a resource to share?

Please do!

We encourage you or your organization to submit a resource for the STAR Center to share. The STAR Center fosters a community of people and organizations interested in sharing information and resources to build a thriving leadership network. Please email your suggested resource(s) by including an attached document or link to tryder@nami.org. Please consider sharing your resource with the STAR Center community today!

• Want to learn more about the STAR Center and all that we do? Check out the [STAR Center’s website](mailto:tryder@nami.org) and follow us on [Facebook](https://www.facebook.com), [Twitter](https://twitter.com), [Instagram](https://www.instagram.com) and [YouTube](https://www.youtube.com) to find out where we are
The Key Update

The Key Update, Volume 13, Number 3 -- September 2016

About The Key Update

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Headlines (click the link at the end to access the issue)

- Action Alert: Mobilize to Shut Down Horrendous Haunted House Exhibit That Inflames Prejudice
- Action Alert Part 2: PSYCHO-PATH Haunted Asylum Created by Another Theme Park Chain
- HHS Issues Game-Changing Rules That Promise Increased Research Transparency
- Participants Are Sought for Study on Peer Involvement/Leadership in Early Intervention Policy/Programs
- SAMHSA Makes Available Many Resources to Prevent Suicide at the Community Level
- Report on Smart Solutions to Our Growing Female Prison Population Is Available
- New Resources, Including a Webinar, Are Available from the TU Collaborative on Community Inclusion
- National Drug Court Institute Issues Report on Drug Courts, Mental Health Courts, Others
- CBT Is as Effective as 2nd-Generation Antidepressants in Relieving Mild to Severe Depression
- Announcing Early Career Data Connections via Live & Learn and the TU Collaborative
- Scientific American Reports on How the FDA Manipulates the Media
- Report on Segregation of People with Mental Health Conditions in Prison Recommends Solutions
- New Rules Granting People in MA Psychiatric Hospitals Daily Outdoor Access Spark Some Resistance
- An Opera Based on the Life of Elyn Saks Can Be Viewed for Free Online
- Save the Date! March for Dignity & Change in Mental Health in Washington, DC, October 10!
- Consumer-Driven Services Directory

Click here to access the September Issue of the Key Update.
Resilience Inc. Newsletter: October 1, 2016 (Volume 14)

This month’s newsletter includes:

A Message from Lori Ashcraft – The Sticky Relationship Between Faith and Denial, Dare To....An Inspirational Message, Ask Emily and An Exciting Announcement - Lori Ashcraft's New Blog!!

A Message from Lori Ashcraft – The Sticky Relationship Between Faith and Denial.

Hello Friends,

The sticky relationship between faith and denial. Last month turned out to be quite a month for me. I was hospitalized for three days for a life threatening condition known as ‘pulmonary embolisms.’ I am now being treated for this condition and am feeling better. My reaction to this condition, even though it is life threatening, was not terribly negative. I did not sink down into depression and had only fleeting moments of being afraid. This is a reaction I would have hoped to have, but too many times I have taken the path of fear and depression instead. My reaction which was based on hope for recovery and faith in a higher power led some of us to wonder if I was simply in denial. Didn’t I understand how dangerous this condition is? Hold this thought and let’s back up a little.

I remember when I finally decided to go to the ER for help. I only had one of the many symptoms associated with the condition—I struggled to breathe and it was getting harder to breathe each day. Non-invasive tests of my heart and lungs kept coming back negative. I stood on the steps in our house and looked out the window at the distant buttes. I wondered if I should go to the ER. A strong answer welled up inside me – “YES.”

READ MORE....
https://gem.godaddy.com/p/ec90c8?fe=1&pact=18931-134514814-7855592545-f00139a2dffaa237349ec6a312ace16b5d05eddc
Collaborating for Unity / Advocacy

Mental Health Legislation (a letter from the Psychiatric Rehabilitation Association)

Psychiatric Rehabilitation Association (PRA) writes today to share our recommendations as the Senate considers legislation that seeks to reform elements of our nation’s mental health infrastructure. We appreciate your leadership on the Senate Health, Education, Labor and Pensions Committee on important mental health issues and for your sponsorship of the “Mental Health Reform Act of 2016” (S. 2680.) We also appreciate the work of the House of Representatives and House Energy and Commerce Committee, which passed the “Helping Families in Mental Health Crisis Act of 2015” (H.R. 2646) in July. As the Senate considers bringing mental health legislation to the floor, PRA seeks to convey our recommendations for amending these current bills to better meet the needs of the individuals and families who turn to the public mental health system for assistance.

Click to access the full letter and join in the support of recommendations to the Senate on the Mental Health Reform Act of 2016.

Please take 2 minutes to expand peer support services for Veterans

Below is an email asking people in GA only to contact Senator Isakson asking him to advance the PEER ACT which would mandate peer specialists be employed in the primary care settings at 25 VA pilot sites. I am only targeting Senator Isakson as he is chair of the Senate Veterans Affairs committee and has signaled he may be interested in moving the bill. If we can get a sizable amount of emails to his office, I will visit his office on October 19 and press the issue. Following the link in the email makes it easy for people living in GA to respond. So my question to you is it possible for iNAPS to forward the below email to just people living in GA?

From: Phyllis Foxworth
Subject: Please take 2 minutes to expand peer support services for Veterans

Since 2013, the Veterans Administration has effectively used peer support services to enhance behavioral health care delivered to Veterans in behavioral health settings. Yet, a majority of Veterans in need of behavioral health care enter the VA system through a primary care center. Now the PEER Act (S. 2210) addresses this critically important gap
within the U.S. Department of Veterans Affairs by mandating 25 pilot sites employ peer specialists at primary care centers.

This bill will help veterans with mental health conditions by providing a fellow veteran with similar lived experience to come alongside and assist with navigating healthcare, mental health and reintegration into civilian society. You can help by sending an email to Senator Isakson asking him to advance the PEER Act by clicking here. Two minutes of your time has the potential to make a real difference in the lives of Veterans and their families.

Phyllis Foxworth  
Vice President of Advocacy  
Depression and Bipolar Support Alliance  
312.988.1165  
pfoxworth@dbsalliance.org

Another opportunity to get involved with Veteran Programs

Register Now!

National Summit on Military and Veteran Peer Programs:  
Advancing Best Practices  
November 2-3, 2016  
University of Michigan - Ann Arbor

Recent years have seen a surge in the number of peer programs for military and veteran populations, yet few professional venues exist that foster the sharing of best practices among those with experience and expertise. We invite you to join us for this seminal event.

This two-day interdisciplinary forum will:

- Highlight the findings of a RAND Research Brief on peer programs
• Stimulate discussion and understanding of the latest research and best practices in peer programs
• Share tools and methodologies for program evaluation
• Feature innovative technology applications for outreach and support
• Explore strategies for sustainability and dissemination

Who should attend?

• VA, university, and military researchers
• Directors and key staff of peer support programs
• Military leadership
• Leadership from non-profit and veteran service organizations
• Project officers from funding and philanthropic organizations


This is an open event. Please share this information with others who may be interested in attending.

Peer Support Education / Resources

Peer Support Education and Training Resources
Several nationally recognized technical assistance centers and organizations offer regular webinars, workshops, or educational topics that are relevant to peer support practice. This is not a complete list. Feel free to submit others that you know would benefit others in learning about peer support.

Visit each of the following websites to learn more (listed alphabetically):

• Academy of Peer Services
• Annapolis Coalition
• Boston University
• Bringing Recovery Supports to Scale, (SAMHSA BRSS TACS)
• Cafe TA Center
• Center for Dignity, Recovery, and Empowerment
• Centre of Excellence in Peer Support (Australia)
• Copeland Center for Wellness and Recovery
• DBSA eUpdate
• DBSA Peer Leadership Center
• Doors to Wellbeing SAMHSA Consumer Technical Assistance Center
• Hogg Foundation for Mental Health
• Peer and Family Career Academy
• MAD in America / MIA Continuing Education
• Mental Health America
• Mental Health Association of Southeastern Pennsylvania / Institute for Recovery and Community Integration (IRCI)
• Mental Health Recovery (WRAP and Recovery Books)
• NAMI STAR Center
• National Consortium on Stigma and Empowerment
• National Empowerment Center
• National Mental Health Consumers Self-Help Clearinghouse / Key Update
• Net Institute
• NYAPRS E-News Bulletin
• PEERLINK Technical Assistance Center
• PeerZone – Peer led workshops
• Psychiatric Rehabilitation Association (PRA)
• Resilience, Inc.
• Resiliency Unleashed / PeerZone USA
• Recovery International
• RI International
• SAMHSA Recovery to Practice (Archive)
• SAMHSA Recovery to Practice (Current Webinars)
• Temple University Collaborative on Community Inclusion
• Recovering Liberty – TU Collaborative on Community Inclusion
• The Peer News (Canada)
• Yale University Program for Recovery and Community Health

Do you have continuing education or training resources to add?
Contact us at info@naops.org.
Reminder / Mental Health Events
Brought to you by DBSA

Each October, DBSA proudly joins countless other organizations in bringing public awareness to mental health. In addition to featuring our I’m here... campaign on Facebook throughout the month, we also recognize commemorative days and weeks presented by other groups.

Mental Illness Awareness Week—October 2-8
National Association of Mental Illness invites everyone to shine a light on mental illness during this week. Help reduce stigma by taking the #StigmaFree pledge.

National Depression Screening Day—October 6
National Depression Screening Day was begun in 1990 by Screening for Mental Health as an effort to reach individuals across the nation with important mental health education and support services. Twenty-five years later, this program reaches thousands of colleges, community-based organizations, military installations, and others.

Destination Dignity—October 10 (11 a.m.-3 p.m.)
The Destination Dignity March and Rally brings together people from around world to create energy and solidarity for mental health. A kick-off rally at the United States Capitol Reflecting Pool is followed by a march through Washington DC, accompanied by a digital rally.

Mental Health Day—October 10
Sponsored by the World Health Organization, World Mental Health Day is intended to raise awareness of mental health issues around the world as well as mobilize efforts in support of it. The day offers an opportunity for all stakeholders working in mental health to talk about their work and discuss steps toward making mental health care a reality for people worldwide.

Global Peer Supporter Celebration Day—October 20
Sponsored by the International Association of Peer Supporters, Global Peer Supporter Celebration Day encourages organizations and communities throughout the world to organize activities and events honoring peer supporters.
Our Mission / About iNAPS

The International Association of Peer Supporters (iNAPS) is a 501(c)(3) non-profit organization that promotes emerging and best practices in peer support and peer workforce development.

We send regular newsletters and updates to our members and free email subscriber list of 5000, hold webinars on topics requested by peer supporters, and host an internationally-attended conference that brings together people in all aspects of the peer support movement.

This year marked the 10th annual national conference devoted to peer supporters and the champions of the peer support movement.

Our Mission

Our mission is to grow the profession by promoting the inclusion of peer supporters throughout healthcare systems worldwide. We learn together and grow in our ability to...

- Demonstrate compassion and hope
- Understand
- Expect more and encourage the next step
- Increase acceptance of those with mental health, substance use, or trauma experiences in their communities of choice
- Increase awareness of the benefits of hiring peer support providers

Our Vision

Our vision is to make peer support services an option for anyone who needs the compassion and understanding of someone who has been there.

Our Values

Our values come from an inclusive process of focus groups, interviews, and surveys in which 1000 peer support providers across the U.S. gave a 98% approval to twelve core ethical values of peer support. The U.S. National Practice Guidelines that iNAPS founder Steve Harrington compiled from peer input in that process have been used as a global standard for ethical peer support practices. To download a free copy of the U.S. National Practice Guidelines, visit the iNAPS website: https://na4ps.files.wordpress.com/2012/09/nationalguidelines1.pdf
**Join now and save!**

(Projected membership rates up to 2021)

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**Announcing the Lifetime Membership**

(Your lifetime or ours)

Benefits include:

- Protection against cost increases
- 25% discount off full price on events
- VIP invitations to forums and special events
- Lifetime member virtual community
- Input on strategic planning and direction

Lifetime membership is now available.

*Join or renew before December 31, 2016 to receive the 2017 individual membership (or sign up for a lifetime membership) at the 2016 rates shown above.*

Join or renew online: [https://inaops.org/join-us/](https://inaops.org/join-us/)

Please share this information with all who can benefit from joining this membership organization that is run by and for peer supporters.