

Persons Points of View

SPRING 2016

DWMHA

TOM WATKINS, PRESIDENT AND CEO



Lt. Governor's Efforts Move State Toward Robust Public Behavioral Health System [By Executive Director]

Consumer Driven Newsletter

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Lieutenant Governor Brian Calley deserves tremendous praise for his recent work assembling stakeholders to develop a proposal for the future of integrated behavioral and physical health services in Michigan.

The workgroup, which includes public mental health organizations, counties and advocacy groups, is exploring how to integrate services in a manner that best serves Michigan's 300,000 consumers.

At the same time, advocates from across the state have come together to take part in public testimony and extensive outreach to legislators. These advocates have demonstrated their concerns with budget language that would have severely weakened the state's respected public system.

Michigan is considered a leader in innovation and integrating high quality care for those with behavioral health and substance use needs. We are the only state

that has integrated mental illness, intellectual/developmental disabilities, and substance use disorder services into one system. According to a 2015 Public Sector Consultants report, our state is pioneering advances in care that is innovative, cost-effective and evidence-based.

But we can't stop there. Our system must continue to transform in order to stay current and adapt to evolving needs of consumers. We look forward to ongoing meaningful conversations in tandem with Lieutenant Governor Brian Calley about how best to continue to integrate care where it matters – on the ground.

Governor Rick Snyder's proposed FY 2017 budget clearly indicated an interest in integrating care, an important strategy for both behavioral and physical health services.

At the same time, consumers, families and advocates are

calling for a system that is person-centered, fostering self-determination and full community inclusion. It's essential that the system encourage whole-person orientation, encompassing all dimensions of human need, including: housing, employment, transportation, food assistance and nutrition, income supports, child welfare and education.

Our state can, and should, address the many social determinants of good health by integrating health care services in a way that best serves the consumer, as well as working toward a person-centered, inclusive system.

The robust conversations taking place will help Michigan continue to lead in the delivery of essential behavioral health services. Together, we will ensure that all Michigan citizens are cared for with one common goal: to put every person's unique needs first.

Robert Sheehan is chief executive officer of the Michigan Association of Community Mental Health Boards.

Microenterprises

MACMHB invites consumer microenterprises to exhibit at Annual Spring Conference on May 10 & 11, 2016, Edward Village - Michigan Hotel & Convention Center (formerly the Adoba Hotel)

in Dearborn, MI. Microenterprises that haven't exhibited at a MACMHB conference previously, will be offered complimentary exhibitor space. Enterprises that have exhibited at a previous conference will be charged \$50 for an exhibitor table. We are

NOT able to include meals in the cost of the exhibit space. For additional information contact: Monique Francis, at (517) 374-6848 phone, (517) 374-1053 fax, www.macmhb.org mfrancis@macmhb.org. Deadline for applying: April 22, 2016.

DWMHA BOARD OF DIRECTORS

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Report on a Presentation By Sandy Peppers to the Constituents' Voice Meeting February 19, 2016 By Daniel Duane Spyker

Sandy Peppers, Consultant and former Deputy Director of the Detroit Wayne Mental Health Authority, gave a report on changes that new federal rules will make for owners of Adult Foster Care homes with respect to their practices and facilities. Her report was greeted with interest and enthusiasm by members of Constituents Voice, because it practically stated that AFC homes as we have known them will cease to exist in about two years. By St. Patrick's Day 2018, the all too prevalent warehousing, privacy denying, inadequate food providing, no opportunity for growth and independence, AFC homes will be out of business because they won't be able to

obtain Medicaid reimbursement for their services. Federal rules will mandate that future AFC home residents be provided with rooms that they can lock, be able to choose their roommates, be encouraged to make steps toward independence, have more control over their money, etc. Federal regulations will mandate that those who own AFC homes or facilities will not be the ones who provide services to residents. Big changes! Big changes that are needed to address decades of neglect that have led to lost opportunities and left thousands to live lives of boredom, if not misery. I cannot say enough about how happy members of the Constituents Voice are with these

coming changes. Most have direct experiences dealing with the damage that poor regulation of AFC homes has made to the very vulnerable. The same morning that I was working on this article, a friend informed me that the AFC home which had dismissed her for complaining about the conditions some two years ago is out of business. Documentation and monitoring will be needed even more as the federal oversight increases. Concerned caregivers, family members of AFC residents, and the public at large all need to take part in making a new world for residents in adult foster care so that they can be all that they can be. Caring for those less fortunate is the most important thing we all can do!

The Inner City Clubhouse: (Seven Months in Their New Home)-By

Daniel Duane Spyker

It has been seven months since the Inner City Clubhouse has moved out of the cramped spaces of the first floor of 10 Peterboro into the renovated two story building at 8642 Woodward/Alger. We of the clubhouse are still getting used to this much larger and more useful space. We are also getting use to a new team leader as of the first of the year. Our former team leader, Marilyn Sanders is now working in another program of Detroit Central City, Project Heart. I must remind you that Detroit Central City CMH has officially become Central City Integrated Health. Its signage, stationary, and business cards will soon reflect that change. So, along with a new address, and a new name for its

sponsoring agency, the Inner City Clubhouse has welcomed a new team leader into our family. She is Latanya Shelton. I finally caught up with her (she's always on the go). I asked her a few questions about what she thinks the goals of the clubhouse should be. She listed three goals. The first is to recruit more members. The second is to pursue accreditation with the international clubhouse movement within the coming year. This accreditation is essential for the clubhouse to stay in business. The third goal is to increase participation and understanding of the "work ordered day." The "work ordered day" is the centerpiece of the programs of clubhouses. Clubhouse members during the "work ordered day" can work in environmental control (custodial and maintenance), food

service, and/or the business unit (which includes all clerical, record keeping, billing tasks, orienting of new members, use of computers, reception, and snack shops). Ms. Shelton brings to the clubhouse a positive and encouraging attitude, a commitment to education, and an open mind to all people and possibilities. There is no area of clubhouse work that she has not put her hand into. She is a teacher and enabler who constantly nurtures emerging leadership from among the members. The Inner City Clubhouse is growing with a redeveloping newsletter, more robust outreach, and increasing involvement with the wider community. Come and see us when we hold a really big open house. We'll be happy to show you what we're up to!

Concerts!-By Michael Shaw

The Detroit Public Library, Main Branch, 5201 Woodward Ave. Detroit, MI, begins its 2016 Comerica Bank Java and Jazz Series concerts on March 15, 2016 featuring "Straight Ahead," a local Jazz group. On April 19, 2016, the Main Library will feature Herbie Russ;

May 17, 2016, Brandon Williams; June 21, 2016, Balance (Marcus Elliot & Michael Malis); and July 19, 2016, Maurice Davis. All Concerts are open to the public, free of charge, and are held from 6:00 pm to 8:00 pm in the library auditorium. The Southfield Public Library, 26300 Evergreen Rd., Southfield,

MI, has its Jazz and Blues concerts every third Wednesday of the month from 6:30 pm to 8:30 pm. The cost is \$5.00 per person (friends of the library \$3.00 per person). Check their online calendar for this and other events at <http://www.southfieldlibrary.org/events/calendar> or phone Main (248) 796-4200 for further information.

Mysteries of Middle Eastern Pop Music Scene Revealed By John Edward Kelly

I love music. I listen to the Supremes, Sonny and Cher, and others. I look to my foreign friends for music suggestions as late because our music scene is full of lyrics that are “explicit” and I do not like that. Radio is not the place I go for music at all. I would suggest to anyone to subscribe to Apple Music. It is well worth the money. It is so much fun and interesting. I hardly watch TV anymore. Because of Apple Music and my curious nature, I have heard some really great Middle Eastern music. This is just a sampling.

First, let’s talk about my favorite Middle-Eastern artists and what they sound like in terms of other artists that are not Middle-Eastern. First, is my favorite Coptic-Christian from Lebanon. Her name is Nawal Al Zoghbi. My favorite song is called “Leh Meshtakalak.” Her album is available on Apple Music and is called Khalas Samht. Not speaking Arabic at all, I was a bit apprehensive at first, but when I saw the translation on YouTube, I was sold. The music video blew my mind. It was modern and the lyrics included words like love and compassion.

I would compare her sound to that of Celine Dion. The composition is completely unique and very Middle-Eastern. Nawal’s music is a good first step in understanding music from her home of Lebanon.

Now, my other favorite CD also available on Apple Music is called *Supper Club World Beat & Best Arabic Songs*. This CD is extremely modern. I might classify it as almost electronic, especially the first four songs. My favorite is the first song called Bhebbek. It is a remix by Makano. It almost sounds like something that Madonna would do without all her vulgarity. To my American ear, I listen to it at least once a day. It is truly a great composition.

On other side of things is “Keda Ya Habibi” by Jannat. I like this too. It is difficult to describe, but is beautiful as well. With Apple Music, you have the option of selecting a station that gives you a wide range of artists to listen to. One day, I happened upon some new music. The artist was from Iran. The music was extremely modern and almost electronic. It was nothing I would ex-

pect from Iran.

It totally blew my mind away. It is very Iranian in sound with a mixture of another artist I know that goes by the name Cedric Gervais. These are all musical artists I would recommend if you are interested in music from the Middle-East. One important detail that you need to know about this type of music: there are no translations available on the Internet, except for the first song by Nawal Al Zoghbi. You will have to know someone from those respective regions to gain the meaning. The compositions are very noteworthy and something to check out for sure.

In closing, these songs are super secret and something to check out for sure. I would advise everyone to check these artists out. I also want to say that it took a lot of listening to find these artists. The Arab music scene is full of songs that are way too Middle Eastern for the typical American ear. So stop watching TV, get on the Internet and tune into your favorite artist. TV is almost dead and full of misinformation. Read a book. Do something else.

Recognition Corner

Dr. Donna Coulter, Director of the Office for Peer-Participant Advocacy stated, “Robert Spruce is an inspiration. In addition to being the lead

trainer for the Michigan Department of Health and Human Services Peer Mentors training and certification program, he has been the Peer Mentor Coordinator with the Detroit Wayne Mental Health Authority’s Office for Peer-Participant Advocacy for the last

three years. Robert has ushered many aspiring Peer Mentors, i.e., professionals with intellectual developmental disabilities who provide services to others having similar needs, through the training and steps to earn their verification.”

Saying “Know” To Autism

- ◆ Autism is a developmental disability that usually appears in children by the age of 3
- ◆ Autism impacts the normal development of the brain in areas of social interaction and affects verbal and non-verbal skills
- ◆ 1 in 68 children in the U.S. are affected by autism. Boys are 4 times more likely to be affected than girls
- ◆ The rate of autism have steadily grown over the past 20 years. It is the fastest growing developmental disorder and the most underfunded.
- ◆ While there is no cure, children with autism do progress—early intervention is the key.

Peers In Action: Power Program!

Adult Well-Being Services' Peer Operated Wellness Enrichment Recovery (POWER) program is a peer-led initiative. The POWER program target populations are low income mental health and substance abuse disorders consumers, and those who reside in adult foster care or semi-independent living homes. The peers who run the POWER program have lived experiences, as they were once consumers themselves. The program is geared towards helping individuals integrate back into the community. This is

achieved through auditory and visual learning. This peer-led initiative aids individuals in safe medication usage and helps them formulate important questions they might need to ask their doctor(s). Individuals are also educated on how to complete a job search, what proper attire to wear for an interview, how to complete a resume, and instructs in interview etiquette. It also provides educational tips for smoking cessation, helps in finance management, and instructs in meals preparation while adhering to safe food han-

dling standards. The fore-mentioned topics are offered in six-week sessions. Consumers are given topic worksheets and receive certificates of completion at the end of the program. POWER also provides opportunities for consumers to volunteer in its peer ran store and to co-facilitate daily group sessions. POWER host fun activities such as shopping, karaoke, bingo, and art therapy. Sessions are held on Mondays, Tuesdays, Thursdays and Fridays from 9am-3pm. Free breakfast, lunch and two snacks are provided to participants.

Integrated Health Care!

PrimeCare is an initiative to establish coordinated and integrated primary and behavioral health care services in Detroit, MI. The **TARGET POPULATION** is low-income African American Detroit-Wayne County residents with serious mental illness (SMI) or SMI with Co-Occurring Disorder. This includes persons who have or are at risk of co-morbid physical health problems including chronic disease. Diagnoses such as schizophrenia, bipolar disorder, major depression and severe anxiety are common and are often exacerbated by obesity, poor nutrition, inadequate physical activity, smoking, co-occurring substance use

disorder, and lack of family or other natural supports. **STRATEGIES AND INTERVENTIONS** include best practice model of integrated primary and behavioral health care, comprehensive care management, care coordination, health promotion, transition care, individual and family support, referrals, and person-centered planning. Evidence-based practices of Cognitive Behavioral Therapy, Motivational Interviewing, Peer-to Peer Tobacco Dependence Recovery Program, Nutrition and Exercise for Wellness and Recovery, and Health and Recovery Peer Program will be used. The **GOAL** is to improve the physical

health status of the focus population through a seamless integration of these services. Objectives include creating a sustainable on-site culturally competent integrated primary and behavioral health care clinic using an Integrated Treatment Team with oversight from a Coordination Team, providing a comprehensive, culturally competent range of trauma-informed primary and behavioral health care and wellness services. An Electronic Health Record is kept to promote coordination and integration, and to evaluate and document outcomes and cost savings.

Collaborate and Prevent (CAP) HIV in Detroit and Wayne County

The CAP-HIV project is a four-year federally funded collaborative. Adult Well-Being Services, United HIV Health and Beyond (formerly AIDS Partnership of Michigan), Henry Ford Health System-Infectious Disease Division and 5e Gallery form the collaboration. The primary target populations are African American men who have sex with men and African American high-risk females ages 14-39. The goal of CAP-HIV is to integrate behavioral health treatment, HIV prevention and HIV medical services,

substance use disorder prevention and treatment program, and Hepatitis testing and vaccination services for the mentioned target populations. The peers in the CAP-HIV program play an important role in meeting the needs of the clients while achieving project goals. This is year two of the project. Some of the responsibilities of the peers include: outreach at various venues to identify potential clients, presentations to educate the community about the project and topics related to the project, dissemination of

educational materials, distribution of condoms and other fluid barriers, conduction of rapid HIV and Hepatitis C testing, provision of resources and referrals, assistance with linkage to care for those who test positive for HIV, provision of transportation to appointments and CAP related events, provision of peer support to those struggling in their recovery and facilitation of HIV evidence-based programming. Peers are integral to the success and sustainability of the CAP-HIV project.

Did You Know....

Enrollee Rights

You Have the Right:

1. To receive benefits, services and instructional materials in a manner that may be easily understood.
2. To receive information that describes the availability of covered services and supports and how to access them.
3. To receive information in prevalent non-English languages.
4. To receive interpreter services free-of-charge for non-English languages.
5. To be provided with written materials in alternative formats and how to obtain them for those who are visually and/or are hearing impaired or have limited reading proficiency.
6. To receive information within a reasonable time after enrollment.
7. To be provided freedom of choice among network providers.

8. To receive information on the grievance, appeal and fair hearing processes.
9. To receive information on the amount, duration and available benefits to which you are entitled.
10. To receive information that provides information on how to obtain benefits from out-of-network providers.
11. To be provided information on how to access 911, emergency, and post-stabilization services.
12. To receive information on how to obtain referrals for specialty care and other benefits that is not provided by the primary care provider.
13. To be made aware of those services that are not covered and may involve cost sharing if any.
14. To receive information on advance directives.

15. To be provided with information on the structure and operation of the Authority.
16. To be provided with timely written notice of any significant State and provider network related changes.
17. To be provided with information annually about enrollee rights and protections.
18. To be treated with respect, dignity, privacy, confidentiality, and non-discrimination.
19. To receive information on available treatment options.
20. To participate in decisions regarding health care, the refusal of treatment and preferences for future treatment decisions.
21. To be provided with information on services that are not covered on moral / religious basis.
22. To be treated in the least restrictive, clinically appropriate setting.

Stigma What is Stigma?

Stigma is a form of discrimination. It is one of the leading reasons individuals with mental illness do not seek treatment for their condition.

You Know You're Being Stigmatized if...

- Words like crazy, psycho, loony, etc., are used to describe yourself or others.
- You are being referred to as being difficult.
- You are refused housing because of your mental illness.
- You are refused employment that you are qualified for because of your men-

tal illness.

- You are not being treated with dignity and respect by healthcare professionals.
- People fear you or avoid you because of your mental illness.

Did you Know that...

- Stigmatizing behavior can be viewed as discrimination or harassment.
- Stigma may cause individuals with mental illness to feel isolated in a community.
- Stigma may result in individuals feeling a lack of social support, positive social roles, coping and problem-solving skills.

- It is important that healthcare providers avoid using stigmatizing behaviors toward consumers.
- Educate yourself on stigma.
- Recognize that stigmatizing behavior is not normal or acceptable anywhere.
- Seek professional help for your mental illness.
- Request a Peer Support Person to Partner with while obtaining mental health services.
- Do not get upset, remain calm when someone says something demeaning; just show them with dignity that their comment was inappropriate.
- Report stigma if you or someone you know is a victim.

Ask the Doctor By Dr. Carmen McIntyre, Chief Medical Officer, DWMHA



Question: Michael Shaw asked: “Why do people with mental illness die on average 25 years earlier than those in the general population?”

In 2006 the National Association of State Mental Health Program Directors published a study analyzing the data from 16 states, and reported that people with severe mental illness (SMI) die (on average) 25 years earlier than (persons in) the general population. This was a huge wake-up call for mental health agencies, and has resulted in a greater sense of urgency to “integrate” behavioral health and primary care services.

So why is this? Studies show that people with SMI die from the same causes as the general population: heart disease, diabetes, cancer, stroke and pulmonary disease, but they do so prematurely. There are several reasons why.

First, there are risk factors that contribute to early mortality which are more common for persons with SMI, including smoking, obesity, substance abuse, metabolic disorder, poor diet and lack of physical activity. 66% or

more adults with SMI smoke. This is the single most preventable cause of death in the U.S. However, smoking, along with other substance use, frequently help persons with SMI manage symptoms. People tend to smoke more when they are having more symptoms of mental illness. The smoking results in a greater incidence of cancer and lung disease. Use of other drugs increases the risk of infections including HIV and hepatitis, as well as cardiovascular and lung diseases.

Persons with SMI tend to be of lower socioeconomic status because their behavioral health problems interfere with education, work, and socialization. As a result, they have difficulty accessing healthier foods and exercise, and also have greater barriers to quality healthcare.

Some diagnoses, such as schizophrenia, are associated with a greater incidence of diabetes unrelated to treatment, but many psychotropic medications also have side effects that result in obesity, diabetes and metabolic disorders.

In addition to the above factors of

poor lifestyle choices and low utilization of healthcare, some studies also show that health care providers contribute to the poor outcomes. There is some evidence that persons with SMI are less likely to receive standard care for many chronic illnesses such as diabetes. Unfortunately neither psychiatrists nor primary care providers have traditionally done a great job of screening persons with SMI for health risks. Furthermore, persons with SMI have difficulty communicating their signs, symptoms, and concerns to their doctors, all of which add up to significant health disparities.

What can be done to improve the life expectancy for persons with SMI? We have effective strategies to improve the risk factors such as obesity and smoking. We have to find ways to bring the strategies to folks with SMI as early as possible, focusing on prevention in addition to treatment. If you are struggling with SMI, like anyone else, stop smoking as soon as you can, and work with your doctors on a healthy diet and exercise plan.

Preparing for Bad Weather—By Marsha Hall

Earth, Wind, and Fire have been the themes for this season. Flooded basements, down power lines and no electrical power have been a great part of everyday life as we know it. Here are a few suggestions for the rest of the year.

- **Make sure you have plenty of bottled water in your home.**
- **Store dried fruit, canned food, and a manual can opener just in case you have a power outage.**
- **Flash lights and batteries are much more economical and safer than candles.**
- **Store dry clothing in plastic (tee shirts, jeans, tennis shoes, preferably) in case of a basement flood.**
- **Always make sure you have extra medications, in case you can't get to them in your regular storage spot in your home.**
- **If you can, try to have more than one phone and make sure it's charged. Secure a solar powered charger.**
- **Obtain a radio, preferably one that can be operated by solar power.**
- **Secure a first aid kit.**
- **Secure a beauty kit, with various grooming toiletries/basic essentials.**
- **Always have these items previously packed; it is good to be prepared.**

These are just a few suggestions to help you make it through a weather emergency.



Mark Your Calendars for EVOLVE!

The Detroit Wayne Mental Health Authority (DWMHA) will host **EVOLVE!**, a training opportunity for people who receives services. Sessions are designed to engage, equip and empower members to be more involved in decisions that affect their treatment and lives. If you want to learn how to be in the “driver’s seat,” these events are for YOU. EVOLVE! Gatherings take place on the 5th Wednesday from 11:00am – 1:30pm.



The first event took place on Wednesday March 30, 2016 at the Detroit Recovery Project (DRP). DRP is located at 1145 W. Grand Blvd. in Detroit. The theme was “OZ” and was inspired by the classic production *The Wizard of Oz*. Parking was free and available in the gated lot behind the building.

These events are held in collaboration with Oakland and Macomb County peers. They are free of charge and open to any service member within the tri-county region. Please RSVP. A light lunch will be provided. Your input will help us prepare.

To Reserve Your or Your Organization’s spot, click the Link:

<https://form.jotform.com/dcoulerdwmhacom/evolve-regisstration-form>

EVOLVE! 2016 DATES FOLLOW:

Wednesday June 29, 2016

Wednesday August 30, 2016

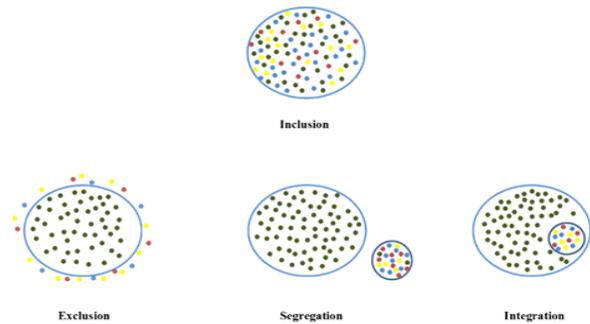
Wednesday November 29, 2016

Small Grants for Service Members

Have you heard about the ***George Gaines and Roberta Sanders Fund for Community Inclusion (“The Fund”)***?

Envisioned by Tom Watkins, the President & CEO of the Detroit Wayne Mental Health Authority (DWMHA), the peer-led mini-grant is both by and for people who receive Detroit-Wayne services. The Fund was created to increase the community presence and participation of individual who receive community mental health services, and named for former DWMHA board members

George Gaines and Roberta Sanders due to their years of service helping persons to live, learn, work, and recreate in their communities.



The Constituents' Voice (CV), which is the DWMHA advisory group for service members, has been charged with overseeing the award and administration process. Awards are up to \$500 each. In 2016, 10 individuals who live in Detroit-Wayne County and currently receive community mental health services will be granted this special award. Because the Fund is a resource of last resort, applicants must first determine that their community mental health provider is not able to cover the service using its resources, e.g., Medicaid, General Fund, grants, etc.

APPLICATION DEADLINE: APRIL 15, 2016 BY 5:00PM

Application Submission Period
March 15 – April 15, 2016

Grant Review Period
April 18 – April 30, 2016

Public Announcement of Award Recipients
June 15, 2016

Interested persons should apply at <https://form.jotform.com/53506180249151> by April 15, 2016. Anyone who needs assistance, should contact, the ARC Detroit at [313-831-0202](tel:313-831-0202) (o) or via email at thearcdetroit@aol.com.

DWMHA Customer Service Department
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WHAT'S COMING UP!

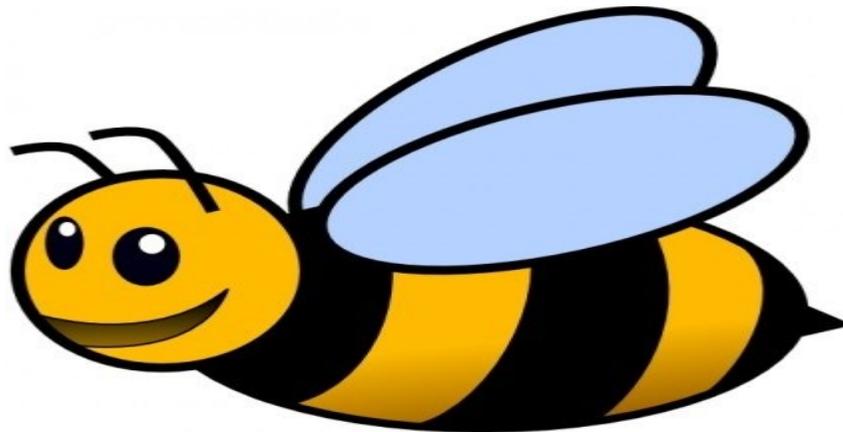
April 2016

April is National Autism Awareness Month”

“Know that autism is a complex developmental disability. Although children don't outgrow autism, early intervention leads to significantly improved outcomes.”

- April 12 **Peer Mentor Meeting**, a chance for peers who have developmental disabilities to learn about new educational experiences, job and training possibilities and more; Noon-2pm. DWMHA, 640 Temple, Detroit 48201. Contact Robert Spruce 313 344-3235
- April 14 **Our Place Drop In Recovery Group**, an informal get-together to discuss personal challenges in a relaxed, non-confrontational atmosphere. 1pm-2pm every Thursday, starting in March. Our Place Drop In Center, 12285 Dixie Street, Redford 48239; call 313 543-3393 for more information
- April 15 **Constituents Voice**, mental health professionals and individuals receiving services to meet and exchange ideas on how to improve services and encourage Recovery in Wayne County and beyond; location to be announced; 10am-noon. Questions: Robert Spruce 313 344-3235
- April 18 **NAMI Eastside Support Group**, an informal meeting to network and discuss mental health issues and supports, and innovative steps toward recovery. Group meets each month, the 1st & 3rd Mondays, 7pm. Henry Ford Cottage Hospital, 159 Kercheval, Grosse Pointe Farms; contact Barb 313 886-8004
- April 18-22 **Peer Support Certification Training**, for Peers receiving mental health services who are currently employed with a mental health provider. St. Francis Retreat Center, 703 E. Main Street, DeWitt, Michigan 48820; questions: contact skuhlman@dwmha.com
- April 19 **Youth MOVE Detroit Advisory Council**, for ages 14-25. Help make suggestions and decisions that impact services provided youth in Detroit and Wayne County. Learn about training opportunities; Free. Today and every 3rd Tuesday; 5pm-630pm; Children's Center, 79 West Alexandrine, Detroit 48201
- April 21 **Job and Volunteer Fair**, employment prospects, volunteer opportunities, community involvement with over 30 vendors on hand. Ford Community & Performing Arts Center, 15801 Michigan Avenue, Dearborn 48126. Contact tdevon@comlivserv.com or call 734 722-7185. Free
- May 13 **Persons Points of View Newsletter Meeting**, a chance to be a part of an energetic committee to assemble the spring edition of the popular newsletter. Bring your creative ideas and join the group! DWMHA, 640 Temple, 2nd floor Resource Room, Detroit; 1pm-2pm. Contact Mike Shaw 313 344-3039

- May 18 **Walk a Mile In My Shoes Rally**, because Mental Health Matters. Join hundreds of advocates from across Michigan to put an end to stigma related to mental illness and developmental disabilities. Rally is from 130pm-330pm. On the Capitol lawn in Lansing. Details to follow
- May 24-26 **“Unity in Community” Peer Conference 2016**, celebrating the achievements of the peer community with dynamic keynote speakers, health and wellness practices; Lansing Center; open to everyone who has an interest in quality mental health services and accommodations. \$99, with hotel at an extra cost. Further details to follow
- June 6-7 **National Council Hill Day 2016**, free 2-day event to bring together behavioral health care leaders, consumers and stakeholders for sessions and workshops on behavioral health. The goal is to advocate for better resources for mental health and addiction treatment across the U.S. Hyatt Regency, Capitol Hill, Washington DC. Info: www.thenationalcouncil.org
- June 23 **4th Annual Wayne County Fatherhood Initiative Forum**, speakers and resources focusing on the strong role model that dads can be for their children and families; 10am-4pm. Greater Grace Temple Church, 23500 7 Mile Road, Detroit 48219; registration to be open soon through VCE
- June 29 **E.V.O.LV.E.**, an opportunity for people receiving mental health services in the tri-county area to engage, equip and empower members to have a hands on approach to their treatment *and* their lives. 11am-130pm; location to be announced; questions, call Robert Spruce 313 344-3235



Poetry Corner

Persons Points of View

Brother Lost, Father Lost (A Man mourning a Man)

By Daniel Duane Spyker

He was a Prophet, Praised & Scorned,
A Forth-teller beguiled,
A Discomfort to the Mighty.
I sing His Songs still,
& rush to tell those Stories
That Strengthen & Sustain the Least of
these.
It's Him whom I have lost.
It's Him alone I see
When Darkness falls & Voices rise unbid-
den.

He was a Strong Tower filled with Love,
Music,
& the clatter of things well made,
The Soul in the Machinery of a Builder, an
Artist,
Crafting Beauty & Utility in objects
Great and Small.
It's Him whom I have lost.
It's Him alone I see when Darkness falls
& Voices rise unbidden.

“My Ship”

By Dona F. Tatum

It's hard to determine where ocean
ends
to begin the sky
as I stand by the shore
to watch the ship sail by.
Sail on little ships, sail on
into deeper waters
and foreign lands.
One day my ship will come in
carrying a cargo of my
hopes dreams and plans.

Editor

If you have any questions, comments, or wish to contact Michael Shaw, the editor, send an e-mail to mshaw1@dwmha.com or phone Michael Shaw at (313) 833-2310

Community Stakeholder Participation Requested

The Detroit Wayne Mental Health Authority supports stakeholder advocates involvement in the design, delivery and evaluation of the mental health system. Stakeholders (e.g., consumers/ participants, providers, advocates, etc.) involvement through a variety of activities are held, sponsored or organized in collaboration with the Authority through a variety of committees and groups. Many of these activities are created, planned, implemented and monitored as the result of committee involvement. In an effort to en-

courage and ensure consumer and other stakeholder participation in all areas of the system, the Authority has centralized its process for recruiting new members to the Authority's various committees.

If you are interested in learning more about Authority committee vacancies and how you may be considered for participation, please contact the Customer Service Department by calling (888) 490-9698.

www.dwmha.com

Access Center
For
Enrollment Inquiries
Information and Referral
24-hour Crisis Line
313-224-7000 (Local Calls)
1-800-241-4949 (Toll Free)
TTY/TDD Line: 1-866-870-2599
(Hearing Impaired)
Customer Service
For
Consumer Affairs
Community Outreach
Grievances and Appeals
Family Subsidy
313-833-3232
1-888-490-9698
TDD Line: 800-630-1044
Office of Recipient Rights
1-888-339-5595
TDD Line: 1-888-339-5588
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