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Steve Hamerdinger, Editor

Inside This Issue:

- 1 Group Homes Open In Birmingham
- 1 Hollingsworth Is Region Iv Coordinator
- 2 Commissioner Sawyer Retires
- 3 As I See It
- 4 Focus On The Staff
Brian McKenny
- 4 Bailey Unit Update
- 5 Current Qualified Mental Health Interpreters
- 6 Tele-therapy: Creating Choices
- 7 Positions Available With Deaf Services

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Signs of Mental Health

GROUP HOMES OPEN IN BIRMINGHAM

Two new three person group homes for the deaf opened in December, bringing the total of specialized group homes to four. All four homes are administered by J-B-S Mental Health Authority in Birmingham.

The Gardendale Home opened on December 1st. Located in a quiet, tree-lined neighborhood, this home, housing two men and one woman, is a lovely bi-level ranch house. The house manager is Christine Giancola. Jaime Walker, Teresa Crum, Melinda Walton, Scott Nail, and Paul Stephens round out the staff.



Gardendale Group Home

Continued on page 6

HOLLINGSWORTH IS REGION IV COORDINATOR

Ben Hollingsworth has assumed responsibilities in Mobile as the Region IV Coordinator, Steve Hamerdinger, Director of the Office of Deaf Services announced. Mr. Hollingsworth moved here from Knoxville, Tennessee, where he was a client advocate for Tennessee Protection and Advocacy.

Mr. Hollingsworth received his Bachelors Degree in American Studies from the University of Maryland and he holds a Masters Degree in Rehabilitation Counseling from the University of Tennessee at



Ben Hollingsworth

Knoxville. He is a Certified Rehabilitation Counselor.

Continued on Page 3



Region 1: Northern Alabama

Scott Staubach, Coordinator

Mental Health Center of
Madison County
4040 South Memorial Pkwy
Huntsville, AL 35802
(256) 533-1970 (Voice)
(256) 533-1922 (TTY)

Region 2: Central Alabama

Shannon Reese, Coordinator

J-B-S Mental Health Center
956 Montclair Road, Suite 108
Birmingham, AL 35213
205-591-2212 (Voice)
205-591-2216 (TTY)

Region 3: Wiregrass Region

Liz Hill, Coordinator

Montgomery Area
Mental Health Authority
101 Coliseum Boulevard
Montgomery, AL 36109
(334) 279-7830 (Voice)
(334) 271-2855 (TTY)

Region 4: Mobile

Ben Hollingsworth

Mobile Mental Health Center
5750B Southland Drive
Mobile, Alabama 36693
(251) 662-2226 (Voice)
(251) 661-5820 (TTY)
(251) 662 2249 (Fax)



COMMISSIONER KATHY SAWYER RETIRES

After 6 years as Commissioner of the Department of Mental Health and Mental Retardation, Kathy E. Sawyer retired on February 1, 2005. She was honored by a celebration on January 26, 2005, a day that Governor Bob Riley declared as Kathy Elmore Sawyer Day. In a moving and emotional tribute, the governor called Ms. Sawyer one of his "best cabinet officers."



Kathy Sawyer speaks at her retirement reception as Governor Riley looks on. Brian McKenny interprets.

Ms. Sawyer has long been a true friend and staunch advocate of the Deaf Community. Prior to becoming Commissioner, she served 14 years as the Director of the Office of Consumer Advocacy and during that time was frequently advocating for better services for deaf people with mental illness.

While she is best known for her work in bringing to a successful conclusion the long-running Wyatt case, she was equally involved in settling the Bailey case, which was the foundation of the current Office of Deaf Services. Her insistence that deaf people have culturally affirmative services has provided Alabama with an opportunity for creating some of the best programs in the country for deaf people who have mental illness.

Governor Riley, who in a very unique tribute to Ms. Sawyer's universal acclaim held her over from the Siegelman administration. Ms.

Sawyer was the only cabinet level person so honored. "Kathy Sawyer has been a star of Alabama's state government. She's done an outstanding job for Alabamians who needed her department's services and for all taxpayers by running an efficient organization," Governor Riley said. "I am grateful for her service and regret that she's leaving my Cabinet."

The February 2004 issue of *Governing* magazine cited the Department of Mental Health and Mental Retardation as a pioneer in the field of mental health, particularly for its creation of regional mental health teams in rural areas of the state. This same concept formed the basis of the regional offices for Deaf Services.

Ms. Sawyer will be greatly missed by everyone concerned with mental health, but especially by the more than 1,000 deaf and hard of hearing people who are receiving more culturally affirmative services today because of her vision and courage.



HOLLINGSWORTH IS REGION IV COORDINATOR

Continued from Page 1

In assuming his position in Mobile, Ben steps into the role bringing with him experience in advocating for better services for deaf consumers. This experience will serve him well as he works with 4 mental health centers across 11 counties. The region that Mr. Hollingsworth is responsible for includes: Mobile, Washington, Baldwin, Clarke, Conecuh, Escambia, Monroe, Butler, Coffee, Covington, and Crenshaw counties. When asked about the new position, Mr. Hollingsworth stated, "Coming from Tennessee with a background in advocacy, Mobile is the best area for me to continue my advocacy efforts in regards to deaf and hard of hearing consumers in the mental health system."

Mr. Hollingsworth is based at the Mobile Mental Health Center. He can be reached at (251) 661-5820 (TTY), (251) 661 3773 (Voice), or email him at bhollingsworth@mobilementalhealth.com.



Hollingsworth and Hamerdinger discuss plans for Region IV

As I See It

By Steve Hamerdinger

Deaf people are expendable. I really don't know what other conclusion I can make. Our experiences this fall with the hurricanes and the aftermath seem to consistently point to the same thing – when the money is handed out for relief services, or for emergency response, "Deaf people go to the back of the bus."

"I didn't know Hurricane Charley had changed direction. It was supposed to go to Tampa, but it changed direction to Punta Gorda," said Richard Schuler, 44. He and his wife, both deaf, rode out the storm in their Pine Island home before heading out into flooded streets to try and get to a shelter. "We were very scared. We couldn't understand the local TV news and we didn't see any closed captioning. We didn't know what was going on."

Getting information in times of crisis is critical to protecting life and property. Taken for granted by those who hear, emergency broadcasting of weather news saves countless lives. Not so for people who are deaf. The "fortunate few" deaf people who live in major cities and have text pagers may have emergency alerts sent to them. A far larger percentage has no such access. They, like the Schulers, are at the mercy of a fickle fate.

Dennis Santiago, of Carnegie, PA, found out the hard way. A 35 year old immigrant from Puerto Rico, Santiago was on his way out to meet a friend when he was swept away by flood waters in the aftermath of Ivan. He was unaware of the warnings of deadly flooding that was expected to hit Carnegie. His car was swept away and he was found dead on the banks of Chartiers Creek.

The tragic death of Santiago was unnecessary. Had he had access to emergency warning systems, like his hearing neighbors, he would not have been out driving on a road that was destined to be flooded. Had he known that Chartiers Creek was in the flash flood warning area, he could have avoided it and would probably be alive today.

Fatalities, fortunately, are rare. Trauma, though, is not. It is a universal experience by those who have survived disasters. Trauma is often made worse by uncertainty and lack of information and assistance. For those who are stricken without warning, it can be horrendous. Regrettably, getting the attention of people who are responsible for getting warnings out is not easy. "There aren't enough deaf people to make it worth the bother," is one comment heard in the aftermath of Ivan. As crass as that sounds, it was not the biggest insult the Deaf Community received in days and weeks following Ivan.

(Continued on page 5)

BAILEY UNIT UPDATE

The Bailey Deaf Inpatient Unit will open in the spring, officials announced recently. The delay in opening resulted from construction delays and issues regarding staffing that have been successfully resolved.

The Bailey Unit will be unique among Alabama in-patient programs in that it will be a statewide resource serving a low-incidence population. Based on culturally affirmative principles, the Bailey Unit will be the first of its kind in Alabama and one of the few in the country. Designated an acute psychiatric facility, Bailey will handle people with psychiatric crisis, including those with co-occurring substance abuse problems. Since the target population will be deaf people with mental illness, the staff working at Bailey will need to be fluent in American Sign Language.



Eric Johnson, front, discusses progress with architect Andy Burrell, right as Ricky Rowe (left) looks on.

Construction work on the Bailey Unit is complete and some staff have begun moving into the unit.

The exact opening date is still uncertain, pending arrival of furniture and hiring and training for the rest of the staff. (See elsewhere in this publication for job announcements.)



FOCUS ON THE STAFF BRIAN MCKENNY



Wake up and smell the Kansas City Barbecue!

Brian has been the staff interpreter at Greil Memorial Psychiatric Hospital since April 2004. He came to us from Missouri, where he worked for the Office of Deaf Services under Missouri's Department of Mental Health.

Brian has been interpreting professionally since 1993 in a variety of settings ranging from education to performance to medical to his chosen specialty of mental health. He began his career interpreting for project C.L.E.A.R. (College Learning Experiences for Adults with Retardation), a Saturday program teaching activities of daily living to persons with developmental disabilities. Later in his career, he worked in the arena of substance abuse treatment at a facility that provided culturally and linguistically appropriate counseling services with mainstreamed recovery groups. It was from here that Brian moved on to interpreting for persons with mental illness, and the professionals who serve them. His role as staff interpreter for the western regional coordinator for Deaf Services in Missouri saw him interpreting for the political aspect of mental health service delivery, as well as the clinical.

Brian will be working on the Bailey Deaf Inpatient Unit when it opens this spring, bringing his experience working with the co-occurring disorders of mental illness and substance abuse to the team. "The Bailey Unit is a wonderful opportunity for Deaf persons with mental illness in Alabama. I'm excited to be a part of it."

Brian currently holds certifications of interpretation and transliteration from the Registry of Interpreters for the Deaf. He is a member of the Alabama chapter of the Registry of Interpreters for the Deaf, as well as the Montgomery chapter of ALRID, where he serves as treasurer.

Brian enjoys football, adopting Auburn as his college team to support. He is an avid Chiefs fan, despite their recent lack of success. He is married to Courtney, has a two-year-old son, Jake, and a newborn daughter, Kate.

Dr. Frances Ralston, Unit Director, says that prior to admitting patients the unit will host an open house so

the community can tour the new facility, meet the staff and learn about the program, 

CHECK IT OUT!

The February, 2005 Issue of *Portico* magazine has a write up about Deaf Services and Bailey Unit Director Frances Ralston. *Portico*, published in Birmingham, is available at newsstands throughout the Birmingham metro area.

As I See It

Continued from page 3

Far worse was the cavalier attitude of Federal Emergency Management Agency and their reviewers who decided that deaf people do not need outreach – or at least not linguistically accessible outreach. “Specialized services are not necessary,” so said our Project Rebound reviewer. “There is no evidence that deaf people suffered any harm during the disaster,” was another comment. This incredible remark came from the agency which in the past granted North Carolina money to set up relief services for deaf people following Hurricane Floyd in 1999 and which funded a large part of the South Carolina outreach to the deaf community following their 1989 Hugo disaster. For 20 years the Deaf Community counted on the linguistic and cultural sensitivity of FEMA.

But not today, not in Alabama. “Not justified,” we were told. Does this

mean that somehow our deafness bestows on us some magical immunity from disasters? Are we, by virtue of our hearing loss somehow protected from emotional and physical trauma? Or are people who are deaf less likely to stir up trouble



Dennis Santiago, who perished in the Chartiers Creek Flood

for some Federal bureaucrat sitting in a comfortable office in Washington when the money is tight? Was it that FEMA really feels the Deaf Community can be better served by not having specialized services, or are they taking the easy way out by

disfranchising the community least likely to complain?

There is hope. The Alabama Department of Public Health has taken an interest in the plight of the Deaf Community and has asked the Office of Deaf Services to work with them in improving emergency warning systems. They have also included Deaf Services staff in disaster planning and training. It's an important and encouraging sign that Alabama is prepared to work with the deaf community, at least in disaster preparedness and response. Too bad FEMA has taken several giant steps backwards from the days they were dependable and valued sources of support.

Disasters can't be prevented. Injury and loss of life can be reduced with appropriate warning. Recovery can be enhanced with appropriate response services. **As I See It**, this is the only way to make sure the lives of Deaf people are not sacrificed on the alter of political expediency. ✎

CURRENT QUALIFIED MENTAL HEALTH INTERPRETERS



Becoming a Qualified Mental Health Interpreter in Alabama requires a rigorous course of study, practice and examination that takes most people nearly a year to complete. It involves 40 hours of classroom time, 40 hours of supervised practica and a comprehensive examine covering all aspects of mental health interpreting. More than 50 people have started the process and many are nearing completion.

To date, eight people have successfully completed all the requirements for certification. Congratulations to:

Charlene Crump, Montgomery
Nancy Hayes, Hayden City
Dee Johnston, Oxford
Angel Dahlgren, Birmingham

Sue Scott, Mobile
Brian McKenny, Montgomery
Debra Walker, Montgomery
Lisa Gould, Mobile

GROUP HOMES OPEN IN BIRMINGHAM



Consumers making plans with Jamie Walker, staff member at the Gardendale House.

Rosemary, one of the consumers living in the Gardendale House, was effusive in her praise for the project. "I have learned so much here," she said in an interview. All the residents talked about how much easier it was to get along with the staff there because they all knew American Sign Language

The 6th Avenue house, managed by Amelia England, has two women and one man. The staff there includes Della Daugherty, David Donaldson, April James and Harold Baker. This house opened on December 20th.

"Thank You, Thank You, Thank You for letting me come here," exclaimed Kelly, who had been in long term care for several years. Because the staff are able to communicate with the residents they are able to de-escalate potential problems and thus teach valuable coping skills – the same skills that hearing consumers in other programs are taught.

"This is a milestone for deaf services because already we're seeing recovery happening with our residents and fulfilling their needs and desires to live with dignity," said Shannon Reese, Region II Coordinator. Ms. Reese has been the catalyst in setting up the homes. She has worked diligently to find staff who were fluent signers and able to work with deaf people with mental illness.

Both houses are part of the Bailey Settlement initiative that called for a "group home" for deaf consumers. Rather than open one large group home that would have to work with a wide range of communication styles and functional levels, it was proposed that smaller three-person homes open. While more expensive to run than a larger home, the intense and personal focus in the smaller units allows for a more therapeutic environment. This is done by providing a language enriched environment where people who are deaf are able to not only communicate, but improve their

language skills. This enables them to better negotiate their wants and needs.

These two programs join the already operating 4th Avenue House, which has been operating since summer of 2004. The net result of this approach means there will actually be more beds in the community for deaf consumers than was required under the Bailey settlement. *✍*

TELE-THERAPY: VIDEOCONFERENCING CREATES CHOICES

By Scott Staubach

My first experience doing therapy via video-conferencing was cumbersome as I'm not a technology guru! I found I had to adjust my signing speed frequently to make sure the picture was clear. After finally getting



Staubach works with a consumer

the hang of it, things started to be easier. At first I thought I, "This is so cool, but there is something missing." I couldn't figure it out until

afterwards. Being so accustomed to

face-to-face therapy with deaf people in my 12 years of providing direct care, this experience really threw me off. I realized it is the cultural aspect of wanting the physical contact of being in the same room "in the same room" with my consumers. It only took a brief period, before I could get back into it without feeling strange.

The good thing about using this method is that it saves time and travel to minimize cost and stress. Also, videoconferencing provides a natural sense of security for some clients who fear of going to mental health centers and being seen by others. Providing therapy using videoconferencing allows them to connect with me from their homes, other centers where no other deaf people work. This gives them more choices in getting services in a safer way.

I've had some mixed reactions from clients using videoconferencing. Most of them enjoyed the luxury of using this technology as it is less time consuming with traveling and time. The downside of this technology is occasional poor picture if there is a lot of network traffic. Some consumers become frustrated as they have to repeat once the picture freezes. Improving technology will ensure more consistent picture quality using videoconferencing and will reduce this concern. The biggest plus, though, is that consumers are not limited by geography. I can see consumers from all around the state

POSITIONS AVAILABLE WITH DEAF SERVICES

The Bailey Deaf In-Patient Unit, is hiring qualified clinical specialists who are fluent in American Sign Language to open this 10-bed specialized unit for deaf and hard of hearing people who have mental illness.

The following positions are now open and applications are being accepted:

SOCIAL WORKER II

SALARY RANGE: 70 (\$27,752 - \$42,039)

QUALIFICATIONS: Master's degree in Social Work from a college or university approved or accredited by the Council on Social Work Education. Preference given for Clinical area of concentration and direct practicum experience in working with deaf and hard of hearing individuals

PSYCHOLOGICAL ASSOCIATE I

SALARY RANGE: 69 (\$27,079 - \$41,035)

QUALIFICATIONS: Graduation from an accredited four-year college or university with a Master's degree in Psychology. Preference given to individuals with clinical area of concentration and practicum experience in working with deaf and hard of hearing individuals.

RECREATION/ACTIVITY SPECIALIST I

SALARY RANGE: 66 (\$25,121 - \$38,162)

QUALIFICATIONS: Graduation from a four-year college or university with a degree in therapeutic recreation, adaptive physical education, or physical education. Other job-related education and/or experience may be substituted for all or part of these basic requirements upon approval of the Job Evaluation Committee. Possession of or eligibility for certification as a CTRS through National Council for Therapeutic Recreation. Certification must be obtained within one year of employment.

MENTAL HEALTH R.N. I

SALARY RANGE: 73 (\$31,358 - \$47,500)

QUALIFICATIONS: Graduation from an accredited School of Nursing or graduation from an accredited four-year college or university with a degree in Nursing. Possession of or eligibility for a certificate of registration to practice nursing as issued by the Alabama Board of Nursing.

Preference will be given to candidates having some experience in working with the deaf and hard of hearing individuals.

MENTAL HEALTH LPN

SALARY RANGE: 57 (\$ 20,625 - \$30,604)

QUALIFICATIONS: Graduation from a standard high school, supplemented by graduation from a state-approved school of practical nurse education. Current license or eligibility to practice as a LPN in the State of Alabama. Preference given for experience in a psychiatric setting.

MENTAL HEALTH INTERPRETER I

SALARY RANGE: 73 (\$31,358 - \$47,543)

QUALIFICATIONS: Combination of training and experience equivalent to a two-year degree plus three years of full-time experience interpreting in a variety of different settings. Must be licensed or eligible for licensure by the Alabama Licensure Board of Interpreters and Translators. Must be certified or eligible to receive certification as a QMHI (Qualified Mental Health Interpreter) or its equivalent. QMHI Certification must be obtained within 24 months of hire.

DEAF UNIT MENTAL HEALTH WORKER

SALARY RANGE: 46 (\$16,502 - \$23,322)

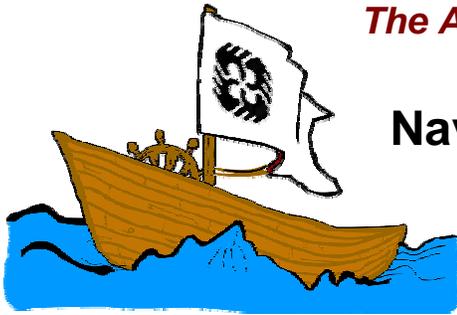
QUALIFICATIONS: One year of college/post-secondary technical training and one year of experience in providing direct care or teacher aide services to deaf and hard of hearing individuals, preferably in mental health psychiatric hospital, group home, or nursing home. Other job-related education and/or experience may be substituted for all or part of these basic requirements upon approval of the Job Evaluation Committee.

All positions will be based at Greil Memorial Psychiatric Hospital, 2140 Upper Wetumpka Road, Montgomery, AL. 36107

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Shannon Reese works with a consumer through the network. The Office of Deaf Services currently has more than 12 sites equipped with videoconferencing capability with more coming on line each month.



The American Deafness and Rehabilitation Association

PRESENTS

Navigating the Course To Quality Services

May 26-29, 2005

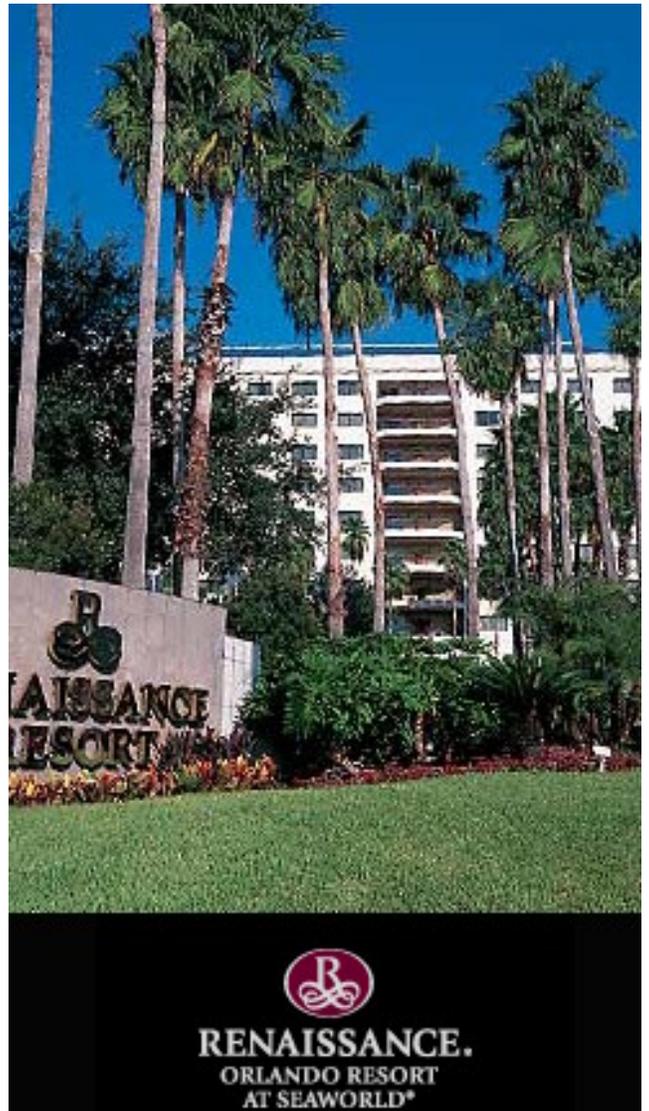
At The Renaissance Orlando Resort
at SEAWORLD in Orlando, Florida

The biennial conference brings together a variety of professionals who seek to improve education, employment, mental health, and advocacy services for members of our community. The upcoming conference theme, **Navigating the Course to Quality Services**, emphasizes the commitment ADARA members share in striving for the highest quality services possible and the desire that ADARA members have to collaborate with others in their efforts.



The American Deafness and Rehabilitation Association is:

- A nonprofit organization promoting and participating in quality human service delivery to Deaf, Hard of Hearing, Late-Deafened, and Deaf-Blind persons.
- A network of professionals and interested persons in the field of deafness active in their chosen disciplines. These disciplines include rehabilitation personnel, program administrators and coordinators, mental health workers, educators, social workers, interpreters, students, psychologists, and other specialists in the field.



Be sure to check WWW.ADARA.ORG for updated conference information on pre-conferences and special events

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