Forging a Path Toward Social Inclusion: Collaboration Among Individuals, Community Partners, and Public Systems

June 23, 2011

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Archive

This Training Teleconference will be recorded. The PowerPoint presentation, PDF version, the audio recording of the teleconference, and a written transcript will be posted to the SAMHSA ADS Center Web site at *http://www.promoteacceptance.samhsa.gov/teleconferences/archive/default.aspx*.

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2

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3

Questions

At the end of the speaker presentations, you will be able to ask questions. You may submit your question by pressing "*1" on your telephone keypad. You will enter a queue and be allowed to ask your question in the order in which it is received. On hearing the conference operator announce your first name, you may proceed with your question.

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4

Social Inclusion as a Framework for Mental Health Policy and Practice

Lindsey Dawson
Health Policy Advisor
The Centre for Economic & Social Inclusion

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5

Social Exclusion and Social Inclusion

Social Exclusion: The systematic marginalization of groups of people from resources, rights, and opportunities that are typically available to the rest of society and that are key for participation in the mainstream of community life.

Social Inclusion: The process of reversing exclusionary indicators and moving excluded groups towards civic engagement, full rights and access to community resources. Inclusion is achieved when those in the margins of society secure a place in the community.

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6

Social Inclusion as a Concept

- Multi-dimensional rather than unidirectional, avoids silo thinking
- Dynamic rather than static
  - Allows for transitional stages and episodic circumstances
  - Considers compounding and influencing factors
  - Positive in approach
  - Considers the individual (uniqueness of communities and customers)
  - Addresses community rather than individual responsibility
  - Solution orientated

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7

Poverty Under the Social Inclusion Framework I

- <u>Poverty as typically seen in the US</u>:
  - Defined using the Federal Poverty Level (FPL)
    - $10,830 for an individual in 2010
  - Looks only at dollar-based income
  - Ignores other factors contributing to deprivation
  - Describes a symptom rather than a problem or a solution
  - Points to the individual rather than to systems and communities

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8

Poverty Under the Social Inclusion Framework II

- Poverty through the lens of Social Inclusion:
  - Income but also: unemployment, education, homelessness, housing quality, health access and inequalities, general and mental health condition, access to services, substance misuse, etc.
  - Interconnectivity, causation, and reinforcement of these factors
  - Looks to structures and systems, holds communities accountable
  - Explores underlying inequalities, systems and structures
  - Encourages different conversations, asks a different set of questions, and suggests different *solutions*

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9

Social Inclusion as a Framework for Mental Health Policy and Service Delivery

- Considers the social and physical institutions involved in developing a strategy

- Social Inclusion indicators dovetail with social determinants of health

- Addresses differences experienced between individuals and groups

- Multidimensional, moving and changing, episodic

- Mental Health episode → missed work → job & healthcare loss → homelessness →fear, stress, shame, isolation and safety issues → substance abuse→ incarceration → worsened mental and physical health problems

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The UK as a Site for Policy Learning

- A national Social Inclusion Strategy
  - Social Exclusion Unit, 1997-2006; Social Exclusion Task Force, 2006-2010
    - Seeks to link up services across government and in communities
    - Range of social issues (e.g. homelessness, teen pregnancy, incarceration, ex-offenders, youth engagement)
- National Social Inclusion Strategy specific to mental health
- National Social Inclusion Programme (part of the National Institute for Mental Health in England), 2004
  - "…Action plan to reduce and remove the barrier to employment, mainstream services and community participation for those with mental health problems…"

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Measurable Areas of Life Impacted by Social Exclusion

- Community Engagement

- Employment

- Education and Skills

- Housing

- Arts and Culture

- Leadership

- Socially Inclusive Practice

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12

6 Categories of the UK Mental Health Action Plan

- Stigma and discrimination: Challenging negative attitudes/promoting awareness
- Health and social care: Implementing evidence-based practice in services and enabling reintegration into the community
- Employment: Opportunities for sustained paid work reflecting skills
- Supporting family and community participation
- Basics rights: Access to decent homes, financial advice, and transport
- Making it happen: Clear arrangements for implementing this program and maintaining momentum

From 'Mental Health and Social Exclusion' (The Social Exclusion Unit)

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13

Lessons Learned and Transferable Concepts I

- Positive goals

- Realistic timeframes

- Develop and disseminate appropriate and measurable targets using agreed definitions

- Moving away from silo thinking

- Share best practices between communities, departments, and sectors

- Identification of key stakeholders

- Using senior stakeholders to broker relationships

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14

Lessons Learned and Transferable Concepts II

- Centrality of the voice of service user/customer
  - Building on customers *local* experiences in developing strategies and measurements
  - Engaging service users to communicate project messages
- Team approach welcoming to different groups
- Links between customers, practitioners, and researchers
- Individualized pathways to health

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Resources

- Cabinet Office (UK). *(*2006). Reaching Out: An Action Plan on Social Exclusion. http://www.socialinclusion.org.uk/publications/reaching_out_full.pdf

- Care Services Improvement Partnership, National Institute for Mental Health in England. 2006 (UK) . National Social Inclusion Programme Second Annual Report. http://www.socialinclusion.org.uk/publications/NSIP_AR2006.pdf

- Catholic Charities Australia. 2010. The Social Inclusion Agenda: Where It Came From, What It Means, and Why It Matters. http://catholicsocialservices.org.au/system/files/The_Social_Inclusion_Agenda_2010.pdf p. 34.

- Centre for Economic and Social Inclusion: http://www.cesi.org.uk/

- National Social Inclusion Programme (UK). (2009). Outcomes Framework for Mental Health Services. http://www.rcpsych.ac.uk/pdf/Social_Inclusion_Outcomes_Framework.pdf

- National Social Inclusion Programme (UK). (*2009).* Vision and Progress: Social Inclusion and Mental Health. http://www.mhhe.heacademy.ac.uk/news-and-events/latest-news/national-social-inclusion-programme--vision-and-progress-report/

- Percy-Smith, Janie. (2000). Policy Responses to Social Exclusion: Towards Inclusion. Buckingham: Open University Press, p. 66.

- Silver, H. & Miller, S. M. (2004). From Poverty to Social Exclusion: Lessons from Europe. Hartman, C. (Ed.). in Poverty and Race in America: The Emerging Agendas. New York: Lexington Books, p. 14.

- Social Exclusion Unit (UK). (2004). Mental Health and Social Exclusion. http://www.communities.gov.uk/publications/corporate/mentalhealth

Items marked **UK** are policy documents from the United Kingdom

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16

ADS CENTER

SAMHSA's Resource Center to Promote
Acceptance, **D**ignity and **S**ocial Inclusion
Associated with Mental Health

Toward Social Inclusion: Moving from Needs to Assets

John (Jody) Kretzmann, Ph.D.

Co-Director

Asset Based Community Development (ABCD) Institute
at Northwestern University

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17

The Reality: Both communities and individuals are like the half-full, half-empty glass.

Residents and Communities have *deficiencies and needs*

Individuals and Neighborhoods have *skills and talents*

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18

The Deficit Lens: Some communities, particularly those facing social and economic problems, are regarded as mostly empty, needy, and problematic.

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19
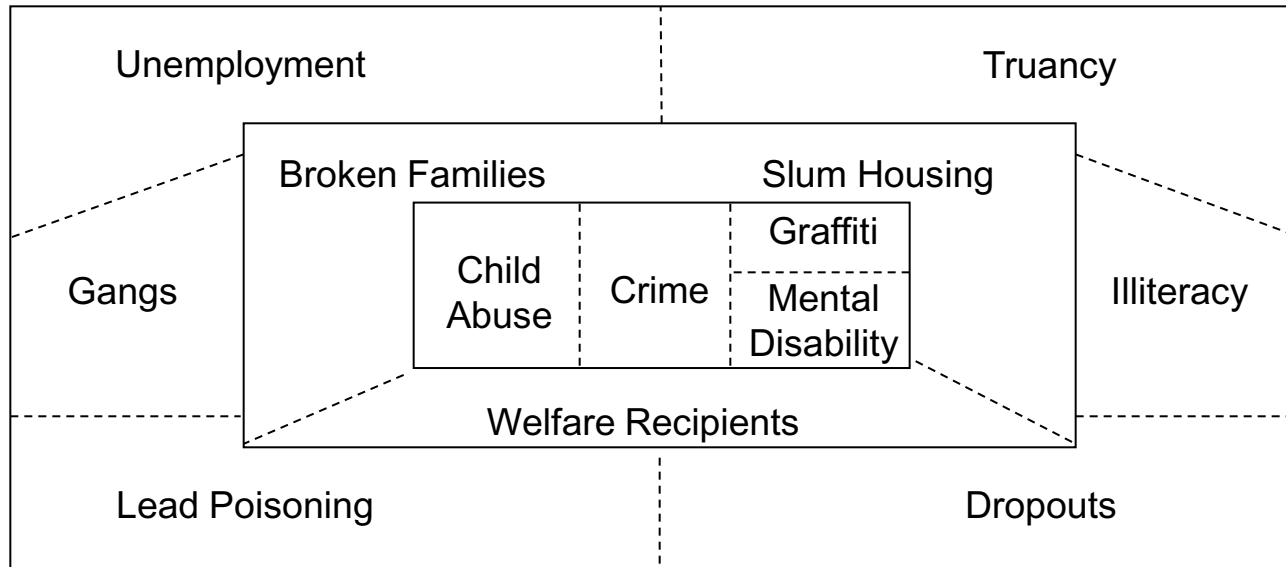
The Consequences: Viewing communities as mainly problematic has devastating consequences for residents.

- "We are deficient"
- Our local relationships are damaged
- Most money comes into our community for programs – often narrowly defined
- Money can get misdirected towards professional helpers, not residents
- We place focus on leaders who magnify deficiencies
- We reward failure and foster dependency on systems
- Our community has a poor self-image
- We experience hopelessness

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20

The Alternative: Some creative communities have substituted an "asset map" for the "needs map."
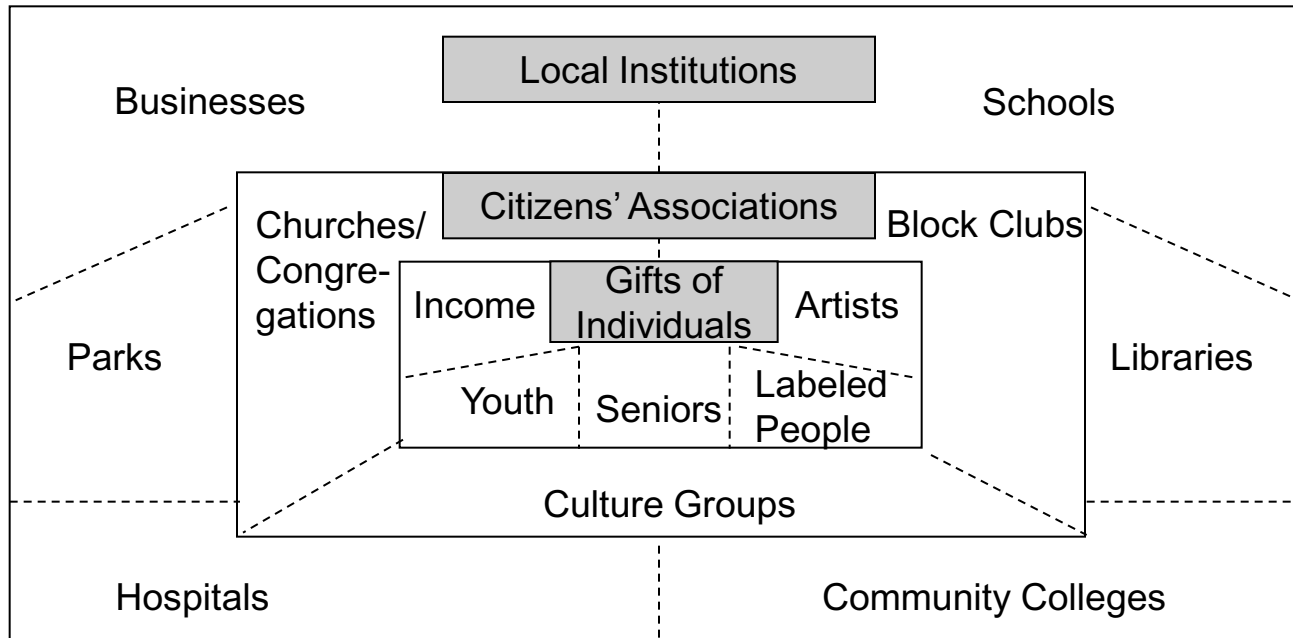
Building Communities From the Inside Out: A Path Toward Finding and Mobilizing a Community's Assets, Kretzmann, John P. and McKnight, John L.

http://www.promoteacceptance.samhsa.gov/

A Discovery: Communities which are building a hopeful future recognize and utilize six basic kinds of assets.

- Talents and skills of our people
- Associations, and our network of relationships
- Institutions and professional entities
- Physical assets
  - Land
  - Property
  - Buildings
  - Equipment

- Economic assets
  - Productive work of individuals
  - Consumer spending power
  - Local business assets
- Culture, history, shared stories and values that define the community, make it special or describe a time when the community came together to solve a problem or celebrate

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"Deficient" Individuals: Not only communities but individuals are often "labeled" as deficient and problematic.

This is based on an actual welfare office questionnaire focused on deficiencies.

Deficiency	Yes	No	Comments/Solutions
Inadequate housing	_____	_____	_____
Limited job-seeking skills	_____	_____	_____
Poor work history/No recent work history	_____	_____	_____
Fired from jobs or quit jobs	_____	_____	_____
High rate of absenteeism	_____	_____	_____
Age	_____	_____	_____
Pregnant/Teen Parent/Single Parent	_____	_____	_____

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23

"Deficient" Individuals: Not only communities but individuals are often "labeled" as deficient and problematic. (cont.)

Deficiency	Yes	No	Comments/Solutions
No child care available	_____	_____	_____
Lack of reliable transportation/license/insurance	_____	_____	_____
Health of dependents	_____	_____	_____
Lack necessary skill, or credentials	_____	_____	_____
Poor communication skills	_____	_____	_____
History of mental illness or substance use	_____	_____	_____
Family issues preventing training/employment	_____	_____	_____

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"Deficient" Individuals: Not only communities but individuals are often "labeled" as deficient and problematic. (cont.)

Deficiency	Yes	No	Comments/Solutions
Felony record	_____	_____	_____
Physical problems w/vision, hearing, dental	_____	_____	_____
Other medical problems	_____	_____	_____
Financial problems as barriers to training/employment	_____	_____	_____
What friends/family will say	_____	_____	_____
Lack of support of training/career choice from family/friends	_____	_____	_____

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"Deficient" Individuals: Not only communities but individuals are often "labeled" as deficient and problematic. (cont.)

Deficiency	Yes	No	Comments/Solutions
Losing your benefits (food stamps, Medicare, etc.)	_____	_____	_____
Lack of career goals	_____	_____	_____
Uncertain or unrealistic employee goals	_____	_____	_____
Lack of appropriate work clothes	_____	_____	_____

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26

Gifted and Skilled Individuals: Creative community builders discover the talents, gifts, skills, and dreams of residents who have been marginalized, as in this example from a soup kitchen.

NEW PROSPECT BAPTIST CHURCH
Cincinnati, OH
Survey Guidelines

Introduction

My name is _____, what is your name?

Thank you for coming over. Did someone talk to you about what the "Gift Exchange" is all about? What do you understand it to be?

Basically, we believe that everyone has God-given talents and gifts that can be used to benefit the community. I'd like to spend a few minutes talking to you about your gifts and skills. Before we get started, let me give you a small gift.

Gifts

Gifts are abilities that we are born with. We may develop them, but no one has to give them to us.

1. What positive qualities do people say you have?
2. Who are the people in your life that you give to? How did you give to them?
3. When was the last time you shared with someone else? What was it?
4. What do you give that makes you feel good?

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Gifted and Skilled Individuals: Creative community builders discover the talents, gifts, skills, and dreams of residents who have been marginalized, as in this example from a soup kitchen. (cont.)

Skills

Sometimes we have talents that we've acquired in everyday life such as cooking and fixing things.

1. What do you enjoy doing?
2. If you could start a business, what would it be?
3. What do you like to do that people would pay you to do?
4. Have you ever made anything? Have you ever fixed anything?

Dreams

Before you go, I want to take a minute and hear about your dreams -these goals you hope to accomplish

1. What are your dreams?
2. If you could snap your fingers and be doing anything, what would it be?

Closing

First, I'd like to thank you. We're talking to as many people as we can and what we'd like to do is begin a Wall of Fame here in the Soup Kitchen highlighting the gifts, skills and dreams of as many people as possible. The ultimate goal is to find a way to use those gifts in rebuilding the community.

Before you go, can I get your full name? Address? Age?

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Resources

The Basic Manual, http://www.abcdinstitute.org/publications/basicmanual/:

- Building Communities from the Inside Out: A Path Toward Finding and Mobilizing a Community's Assets

ABCD Institute Workbooks, http://www.abcdinstitute.org/publications/workbooks/:

- Discovering Community Power: A Guide to Mobilizing Local Assets and Your Organization's Capacity

- Building the Mercado Central: Asset-Based Development and Community Entrepreneurship

- Asset-Based Strategies for Faith Communities

- The Organization of Hope: A Workbook for Rural Asset-Based Community Development

- Community Transformation: Turning Threats into Opportunities

- A Guide to Building Sustainable Organizations from the Inside Out: An Organizational Capacity Building Toolbox from the Chicago Foundation for Women

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29

Additional Resources

ABCD Institute Workbooks (cont.), http://www.abcdinstitute.org/publications/workbooks/:

- Newspapers and Neighborhoods: Strategies for Achieving Responsible Coverage of Local Communities
- A Guide to Mapping and Mobilizing the Associations in Local Neighborhoods
- Leading by Stepping Back: A Guide for City Officials on Building Neighborhood Capacity
- A Guide to Creating a Neighborhood Information Exchange: Building Communities by Connecting Local Skills and Knowledge
- City-Sponsored Community Building: Savannah's Grants for Blocks Story
- A Guide to Capacity Inventories: Mobilizing the Community Skills of Local Residents
  A Guide to Evaluating Asset-Based Community Development: Lessons, Challenges, and Opportunities
- A Guide to Mapping and Mobilizing the Economic Capacities of Local Residents
- A Guide to Mapping Local Business Assets and Mobilizing Local Business Capacities
- A Guide to Mapping Consumer Expenditures and Mobilizing Consumer Expenditure Capacities

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30

Additional Resources

ABCD Institute Additional Resources for Community Builders
http://www.abcdinstitute.org/resources/

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31

Looking Back, Moving Forward

Jacki McKinney, M.S.W.
Co-Founder & Director
National People of Color Consumer/Survivor Network
Founder & Director
Trauma Knowledge Utilization Project (TKUP)

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32

What Social Exclusion Really Means – Being and Feeling Alone

When consumers first began to push back, we were alone.

We had to fight every step of the way.

We were socially excluded in every way.

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33

Joining the Mainstream

This vision brings joy because it is an invitation

to join the larger world in bringing about a

change

we all desire – social inclusion.

I feel welcomed.

With all my baggage, I can be the change

agent to create a meaningful, purposeful life

for myself – and my peers.

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34

How Far We've Come to Get Here

- 30 years ago peer specialists were a pilot research project

- Now there are hundreds across the country earning Medicaid reimbursement for their lived experience

- Hundreds of people turning their scars into stars – an important step on the path to social inclusion

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35

Starting with "Nuts and Bolts"

- 1992 – Consumers developed "Nuts and Bolts: A Technical Assistance Guide for Mental Health Consumer/Survivor Self-Help Groups"

- Anyone could take these materials and adapt them

- This sparked a critical shift:

  – From others telling us what to do ➡ to us coming up with a plan to direct our own lives and actions

  – For the first time, providers of the support (consumers) and benefactors of the service (consumers) regard each other as equals

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36

Moments of Transformation

- Consumers speak about moments of transformation and three elements of change:

    – Elimination of the labels assigned by others

    – Changing our own thinking about ourselves

    – An external event or personal influence that provides the motivation to change our behaviors

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37

How Peer Support Groups Are a Vehicle for Social Inclusion

- We all have talents, gifts, skills, and dreams

- Consumer support groups recognize that and use it as a capacity-building strategy for individuals

- Peers use their lived experience – sharing coping strategies and skills with other peers to create a bridge from joblessness to workforce

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38

Trauma is the Common Denominator – Healing is the Common Goal

What brings us together isn't just our desire to heal and be well,

but to find a way to turn the dark cloud of trauma

into something positive that gives

the life experience meaning and purpose.

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Additional Resources

- Adler Institute on Social Exclusion
  http://www.adler.edu/page/institutes/institute-on-social-exclusion

- Boushey, H., Fremstad, S., Gragg, R., Waller, M. (2007). Social Inclusion for the United States. London: Centre for Economic and Social Inclusion.
  http://inclusionist.org/files/socialinclusionusa.pdf

- InclusionUS at http://www.socialinclusionus.org (this Web site will go live on June 27)

- Inclusion Institute http://www.socialinclusion.org.uk/home/index.php

- Institute for Community Inclusion http://www.communityinclusion.org/

- Leading Change: A plan for SAMHSA's Roles and Actions 2011–2014
  http://store.samhsa.gov/product/SMA11-4629

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40

Additional Resources (cont.)

- MIND at http://www.mind.org.uk/

- Schneider, J.A. (2004). The Role of Social Capital in Building Healthy Communities. Baltimore, Maryland: Annie E. Casey Foundation. http://www.aecf.org/KnowledgeCenter/Publications.aspx?pubguid=%7BCD14730F-ACCC-46D2-B3A7-BFB3EA4D0836%7D

- Yaskin, J. (Ed.). (1992). Nuts and Bolts: A Technical Assistance Guide for Mental Health Consumer/Survivor Self-Help Groups. Philadelphia, PA: National Mental Health Consumer Self-help Clearinghouse/Project SHARE. http://www.mhselfhelp.org/resources/view.php?resource_id=705

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41

Questions

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- John Kretzmann, j-kretzmann@northwestern.edu

- Jacki McKinney, jackimckinney3@gmail.com

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43

Speakers

Lindsey Dawson, M.A. is the Health Policy Advisor at the Centre for Economic & Social Inclusion–U.S. She is interested in the multidimensional relationship between social inclusion, health, and access to health care. She is currently contracting with the Kaiser Family Foundation's Medicare Policy Project in Washington, D.C. Previously, at the Muscular Dystrophy Campaign in the UK, she researched and developed patient and physician audit tools to examine the adequacy of National Health Service (NHS) provisions for people with muscle diseases.

Prior to her time in London, Lindsey worked as a paralegal for a progressive plaintiff's law firm in San Francisco, largely on employment discrimination and medical product liability cases. There she prepared a large race discrimination case for trial, analyzing complex data and working closely with clients, helping them to articulate their stories and framing claims in a legal context.

Lindsey has an expertise in evidence-based policy, qualitative methodologies, and research ethics. She has presented on community based reparations and on methods by which LGBT people cope with anti-gay political atmospheres in ways conducive to mental health. She has a master's degree in Public Policy from King's College London, where she focused on health policy, and a bachelor's degree from Smith College in Sociology and Gender Studies.

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44

Speakers

John (Jody) Kretzmann is co-founder and co-director of the Asset-Based Community Development (ABCD) Institute of the School of Education and Social Policy at Northwestern University. The ABCD Institute works with community building leaders across North America as well as on five other continents to conduct research, produce materials, and otherwise support community-based efforts to rediscover local capacities and to mobilize citizens' resources to solve problems. The Institute continues to build on the stories and strategies for successful community building reported in his popular book *Building Communities from the Inside Out: A Path Toward Finding and Mobilizing a Community's Assets,* written with long-time colleague John McKnight.

A much-traveled speaker and trainer, Kretzmann brings more than 4 decades of community-based work and study to his current position. Before founding the ABCD Institute, he worked as a community organizer and community development leader in Chicago neighborhoods, and as a consultant to a wide range of neighborhood groups. He has worked to develop community-friendly policies in the city, and at the regional, state, national, and international levels. In addition to his work at Northwestern, he has taught about community development and public policy with the Associated Colleges of the Midwest Urban Studies Program (which he co-founded), Valparaiso University, the Lutheran School of Theology at Chicago, and McCormack Seminary. He serves on a wide range of civic, community, and foundation boards. His B.A. is from Princeton University (Magna Cum Laude); his master's degree from the University of Virginia; and his Ph.D. (Sociology and Urban Affairs) from Northwestern University.

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Speakers

Jacki McKinney is co-founder of the current trauma movement, the first African American woman to receive Mental Health America's Clifford Beers Award, and a national expert on trauma-informed program practice and policy. A survivor of trauma, addiction, homelessness, and the psychiatric and criminal justice systems, Ms. McKinney is well known for her presentations on issues such as seclusion/restraint, intergenerational family support, and minority issues in public mental health.

As director and co-founder of the National People of Color Consumer/Survivor Network, Ms. McKinney has worked as a consultant to numerous national and local social policy research groups and Federal agencies, including SAMHSA, and played a key role in integrating people with lived experience of trauma into the Study on Women, Co-occurring Disorders and Violence. She is director of the Trauma Knowledge Utilization Project (TKUP) and also co-directs the Philadelphia City-wide Trauma Initiative of Philadelphia's Office of Behavioral Health.

Ms. McKinney serves on the boards of directors for Bazelon Center for Mental Health Law and Mental Health America.

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Survey

We value your suggestions. Within 24 hours of this teleconference, you will receive an e-mail request to participate in a short, anonymous online survey about today's training material which will take 5 minutes to complete. Survey results will be used to determine resources and topic areas to be addressed in future training events.

Survey participation requests will be sent to all registered event participants who provided e-mail addresses at the time of their registration. Each request message will contain a Web link to our survey tool. Please call **1–800–540–0320** if you have any difficulties filling out the survey online. Thank you for your feedback and cooperation.

Written comments may be sent to the Substance Abuse and Mental Health Services Administration (SAMHSA) ADS Center via e-mail at _promoteacceptance@samhsa.hhs.gov_.

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47

Archive

This Training Teleconference was recorded. The PowerPoint presentation, PDF version, the audio recording of the teleconference, and a written transcript will be posted to the SAMHSA ADS Center Web site at:

http://www.promoteacceptance.samhsa.gov/teleconferences/archive/default.aspx.

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Also of Interest

If you enjoyed this training teleconference, we encourage you to:

Join the ADS Center listserv
http://promoteacceptance.samhsa.gov/main/listserve.aspx to receive further information on recovery and social inclusion activities and resources including information about future teleconferences.

Join the 10x10 Wellness listserv to learn more about promoting wellness and increasing life expectancy for persons with mental health challenges and substance use disorders. To join, visit http://www.10x10.samhsa.gov and enter your e-mail address in the field on the left-hand navigation bar.

Sign the Pledge for Wellness
http://www.promoteacceptance.samhsa.gov/10by10/pledge.aspx to promote wellness for people with mental health problems by taking action to prevent and reduce early mortality by 10 years over the next 10 year time period.

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*The moderator for this call was **Mary Pat King.***

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