

THE PIPELINE

SINCE 1991

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2020 GEORGIA EVENTS

GMHCN Board Retreat
Online
November 5

Certified Peer Specialist Trainings
Training 76, Online,
Dec. 7-17

5th Annual Ken Whiddon Memorial Golf Tournament
Jekyll Island Golf Club
October 24, 2020

2021 GEORGIA EVENTS

Mental Health Day at the Capitol
Atlanta, January 19

Addiction Recovery Awareness Day
Atlanta, February 4

GMHCN Board Meeting
St. Simons Island
February 22

GMHCN 29th Annual Summer Conference
St. Simons Island
February 23-25

Certified Peer Specialist Trainings
Training 77 Online,
February 1-11

Training 78 Online,
May 10-20

Training 79 Atlanta,
July 12-22

Training 80 Augusta,
September 20-30

Training 81 Macon,
December 6-16,

Dates and locations are being updated as we receive information from public health officials, and adapt to online delivery where appropriate.

Please visit gmhcn.org or call 800-297-6146 for more information.

IT'S TIME FOR PARITY IN GEORGIA

The concept behind parity is pretty simple: People should have the same access to mental health treatment that they have for their physical health. A law was passed in 2008 (the Mental Health Parity and Addiction Equity Act of 2008, commonly known as the Federal Parity Law) that requires insurers to cover illnesses of the brain (such as schizophrenia, depression, and addiction) no more restrictively than they cover illnesses of the body (such as heart conditions or diabetes).

Unfortunately, that concept has not become reality in many states, including Georgia. The federal law left it up to each state to determine how to enforce the law. Over ten years later, there is no clear process in place for Georgians who believe they have been denied parity to seek recourse.

A working group of Georgia nonprofits and allies has been working to craft a strategy to make parity a reality in Georgia. There have been some legislative attempts over the years to improve parity in Georgia, but none has yet achieved the goal of mental health parity.

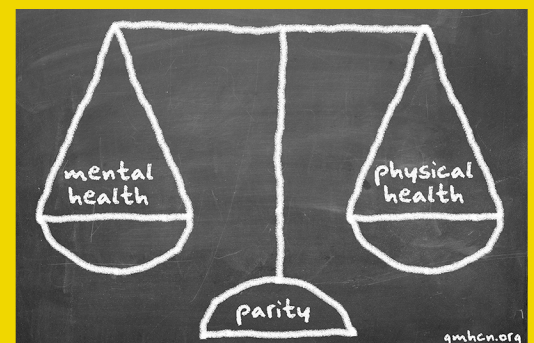
According to Sherry Jenkins Tucker, GMHCN's executive director, "There are a lot of special interest groups who have a financial stake in making sure mental health parity in Georgia is not realized. Until Georgia's citizens are better able to speak to their legislators about how important access to mental health support is, we may never achieve mental health parity here." That is why the Georgia Mental Health Consumer Network is encouraging its members, allies, and supporters to learn more about parity, and to begin talking about parity with their legislative leaders, behavioral healthcare providers, neighbors, community, and family members.

Tucker goes on to explain that "the benefits of parity are not limited just to what Georgians are required to pay out of pocket for behavioral healthcare expenses. By increasing access to behavioral healthcare, parity creates more opportunity for more people to receive mental health support, and draws in more mental health care providers and supports, which Georgia desperately needs, especially in rural areas."

The Carter Center in Atlanta has been a leading advocate for mental health parity for many years. They have worked closely with The Kennedy Forum, whose publication "What is Mental Health Parity? A Consumer Guide to the Evaluating State Mental Health and Addiction Parity Statutes Report," is a landmark publication that explains the importance of mental health parity in advancing the quality and availability of mental healthcare. It is available free online, and serves as a great introduction to parity for people who interested in improving the affordability, availability, and quality of behavioral health services.



On November 13th, members of The Georgia Parity Collaborative, including experts from The Carter Center and Georgians for a Healthy Future, will be joining GMHCN for a special online town hall meeting, "Ensuring Access to Behavioral Health Care in Georgia." Please visit us online at gmhcn.org to register for this unique opportunity to learn more directly from the experts.



BUDGET CUTS HIT GEORGIA'S BEHAVIORAL HEALTH COMMUNITY

Pandemic Hits Community Supports from All Directions

When the State of Georgia preliminary budget proposal was released to the public in May of this year, the cuts to the Georgia Mental Health Consumer Network represented over 74% of the funds received by GMHCN from the state. While we were able to quickly mobilize GMHCN's membership, collaborate with our behavioral health allies, and significantly reduce the proposed amount, the reductions we received were still incredibly impactful not only to the direct services provided by GMHCN, but also to the broader behavioral health community. The budget did not just reduce funds, it shifted funds from community-based, recovery-oriented services to inpatient clinical services, reversing decades of gains and movement toward a Recovery-Oriented System of Care.

Many community-based nonprofits around the state have reduced services or closed altogether, not only as a result of the state budget cuts, but also as a result of reduced funding from some community-based funders, who have shifted charity funds to directly support the increasing number of those in the direst need of housing, healthcare, and food stability. There is a parallel increasing number of people needing and seeking behavioral health support with fewer resources to access, including GMHCN's Peer Support, Wellness, and Respite Center of Henry County, which closed at the end of July 2020 as a result of a reduction in state funding for that contract. It is the first time GMHCN has closed one of its beloved Centers, and in the words of Sherry Jenkins Tucker, "In a year of so many unprecedented and horrific things happening in the world, the closure of the Peer Support, Wellness, and Respite Center of Henry County may not seem monumental, but it certainly was to the people who relied on it for daily and respite support, and as a symbol of the overall and largely undocumented reduction in services across the state, it should serve as an alarm bell to anyone who relies on public behavioral health services."

Not only is the pandemic itself unprecedented, so are the financial actions that have been called into action to help keep the economy stable among widespread business closures and dramatic rises in unemployment. With borrowing at the national level greater than at any time since World War II, and an unclear path forward on establishing housing stability, it is unclear where the State of Georgia's budget is headed. While Governor Kemp has said publicly that no additional budget cuts are anticipated, the full economic impact of the pandemic is not yet known. So it is imperative that GMHCN and all of our behavioral health allies be prepared to advocate for the restoration of funds that have impacted the wellbeing of individuals, families, and communities across the state.

On November 20th, GMHCN will be joined online by our colleagues at Georgia Equality, who will be sharing with us the tools they have used for their successful advocacy work in Georgia over the past few decades. Regional advocacy teams are forming now to prepare for the upcoming legislative season, so that we may use our voices and lived experience to effectively advocate more and better behavioral health supports for Georgia's families and communities. Please visit us online at gmhcn.org/advocacy to learn more and get involved.

Original FY21 House proposal line items impacting GMHCN:

- 60.10 Reduce funds for Georgia Mental Health Consumer Network training for peer services by \$1,058,000 [This was actually funding for direct services at our Peer Support, Wellness, and Respite Centers that was misidentified in the legislation].
- 60.15 Reduce funds by \$329,504 and restructure training contract with RESPECT Institute
- 60.16 Eliminate funds for Trauma-Informed Care training, \$126,558
- 60.17 Reduce funds for peer workforce development contract by \$437,963
- 60.18 Reduce funds for five Peer Support, Wellness, and Respite Centers \$721,282
- 60.19 Eliminate funds for Forensic Peer Mentors \$690,675

Total proposed cuts to GMHCN: \$3,363,982

Line items from the FY21 signed budget impacting GMHCN:

- 882 Reduce funds for Georgia Mental Health Consumer Network training for peer services by \$1,058,000 (This was zeroed out.)
- 886 Reduce funds by \$329,504 and restructure training contract with RESPECT Institute
- 887 Eliminate funds for Trauma-Informed Care training, \$126,558
- 888 Reduce funds for peer workforce development contract by ~~\$437,963~~ \$219,000
- 889 Reduce funds for five Peer Support, Wellness, and Respite Centers ~~\$721,282~~ \$360,641
- 60.19 Eliminate funds for Forensic Peer Mentors ~~\$690,675~~ was removed in conference

Total realized cuts to GMHCN: \$1,035,703



THE PATH TO WELLNESS

How we got to where we are, in our own words.

What challenges were you facing before you discovered peer support?

The feelings of shame, guilt, disconnection and fear. I often felt my past was written on my face and I held my head down and remained silent about the details of my life. Dance was my safe place as I felt connected to God through my dance expression. Dance never asked me to articulate my pain but gave me permission to illustrate it and change my narrative. Peer support was not an option for me then. I kept my internal struggles to myself in fear of being judged.



Alexia Jones, CPS-AD, CPS-MH

What helped you move forward?

Becoming a CPS opened my eyes to another way of living well. Becoming a CARES gave me permission to live my recovery out loud. I literally started sharing my story without shame. Sharing with my peers and giving them a space to share was liberating. When I became a CPS I grew another set of wings. I found the root of my addiction. I faced anxiety head on when I sat in a room full of people who had experienced some of the same things I went through, I saw myself in a new light. I moved forward whole, healed and full of hope. I finally understood my reality, embraced me, put one foot in front of the other and said *Hello world I am not my diagnosis!!*

What is life like for you now?

Life for me now is full of faith, courage, healing and lots of peer support. As the founder of R2ISE I get the opportunity to share a space with my peers through art. I am inspired by the stories that surround me every day. I am restored, inspired, empowered and evolving in my truth. I seek to live my best life and encourage my peers to do the same. I love supporting my peers in reaching their fullest potential. When my peers succeed, I succeed because that's what peer support means to me. I am grateful for the gift of peer support in my life today.

What keeps you hopeful?

I am excited about the future of the recovery movement. As we continue to raise our voices to share our stories, I am seeing more people come to understand that recovery is possible especially in the African American community. As we continue to advocate, demonstrate, educate, illustrate and sharing our lived experiences, HOPE is ignited in my heart. Every moment counts, every story keeps the fire burning. I am hopeful we will march on raising the banner of Peer Support!



**THE 5TH ANNUAL KEN
WHIDDON MEMORIAL
GOLF TOURNAMENT
SATURDAY
OCTOBER 24**

Please plan to join us for this fun GMHCN benefit. All skill levels are welcome. Learn more and register at:

<https://kenwhiddonmemorial.com/>

GMHCN supports people in recovery from substance use and mental health concerns in activities throughout the state and online, every day.

**DUAL TROUBLE
IN RECOVERY**

Double Trouble in Recovery (DTR) meetings were started in Georgia in 1996 by GMHCN. Following the familiar twelve-step format, DTR provides participants the opportunity to share openly about both their mental health and substance use concerns. Learn more at gmhcn.org.

DTR meetings available on the Zoom app and phone seven days a week:

11:00am meeting

Dial 929-436-2866 Zoom ID 994-7569-8535 password 814560

4:00pm meeting

Dial 929-436-2866 Zoom ID 962-1663-0871 password 222822

7:00pm meeting

Dial 929-436-2866 Zoom ID 976-2733-5605 password 886700

THIRTY YEARS OF HOPE
THIRTY YEARS OF RECOVERY
THIRTY YEARS OF PURPOSE
THIRTY YEARS OF PROGRESS
THIRTY YEARS OF WELLNESS
THIRTY YEARS OF INNOVATION
THIRTY YEARS OF LEADERSHIP
THIRTY YEARS OF COMMUNITY
THIRTY YEARS OF SUPPORT
THIRTY YEARS OF EDUCATION
THIRTY YEARS OF POSSIBILITY
THIRTY YEARS OF ADVOCACY
THIRTY YEARS OF CONNECTION
THIRTY YEARS OF GMHCN
and counting!

A note from Sherry

The time for the publication of another Pipeline has arrived, and we remain largely where we were with the publication of the last Pipeline, this strange pandemic limbo where we cannot afford to be either careless with optimism or immobilized with pessimism. We remain hopeful, certainly, but today that hope wears a mask, washes its hands, and misses gathering with the people that support it. It is a prudent hope, born of necessity, from the suffering we have seen around us, but also from the recovery of those who have made it through, and those of us who have found and continue to find innovative ways to support and care for ourselves, our families, our neighbors, and our communities.

Taking action to create positive change has never been more challenging, or more necessary. Over the past eight weeks, the Georgia Mental Health Consumer Network has launched a six-part series with SAMHSA's Southeast Mental Health Technology Transfer Center to explore the impact of racism in our behavioral health systems. We have formed regional advocacy teams within Georgia to support the work of the peer community moving forward. We have begun an expansion of our Peer2Peer Warm Line to serve more Georgians in more ways than we have been able to in the past. We have begun exploring new ways to restore and secure funding. Even as our nights grow longer, we are preparing for tomorrow, living in today, and remembering all that we have overcome to get to where we are. We are calling upon the strengths, talents, and energy that have made our peer movement resilient over the past three decades, and we are able to say with confidence that we will make it through this season—together.

Sherry