

# THE PIPELINE

SINCE 1991

VOLUME 4, 2021-2022

## 2022 EVENTS

### GMHCN Board Meetings

July 19  
September 26  
November 17

### Peer Support IOI Online

July 25  
August 11

### 2022 Certified Peer Specialist Trainings

Training 84 Online  
August 1-11

Training 85 Online  
October 10-20

Training 86 Online  
December 5-15

### Ready4Reentry Forensic Peer Mentor Training

September 12-16  
November 14-18

### 7<sup>th</sup> Annual Ken Whiddon Memorial Golf Tournament

October 30

## 2023 EVENTS

### Addiction Recovery Awareness Day

January 2023  
Freight Depot

### Mental Health Day at the Capitol

January 2023  
Freight Depot

Dates and locations may change as we receive information from public health officials.

More events and training opportunities will be scheduled before the next issue of *The Pipeline* is published. Please visit [gmhcn.org](http://gmhcn.org) or visit our Facebook page for the latest information.

## PEER RECOVERY AND RESPITE CENTER OF AUGUSTA OPENS ITS DOORS

On May 19, 2020, the first gathering, an open house, was held at the Peer Recovery and Respite Center of Augusta, heralding a new era of peer support in Augusta, and capping off a two-year journey that began in the summer of 2020, when GMHCN executive director Sherry Jenkins Tucker notes, "the whole world was in a dark moment. So much sadness, so much anger and frustration. And in the midst of all that, to be handed this opportunity to make something good out of some of the pandemic's destruction, was extraordinary. We were not blessed just with the property, but with the opportunity it afforded us to stay focused on the future. And now the future is here."

The future got here very quickly, according to Roslind Hayes, who added "It's amazing how quickly it all came together. We had so much support from the community, and not just the groups who volunteered and invested their sweat equity in us, but also the people who stopped in to say 'Hello,' to welcome us, to thank us for what we are working to accomplish here. In some communities where our Peer Support, Wellness, and Respite Centers have opened in the past, the welcome has not been so warm, though we have grown to be valued neighbors wherever we go. But here in Augusta, most likely because of the decades Friendship Community Center spent building relationships and reducing stigma, we received an enthusiastic welcome, and we are grateful for it."

Chris Johnson, GMHCN's Director of Communications, who holds an MFA in interior design from SCAD and taught and practiced design for many years, shared a similar sentiment regarding Joy Morgan Newberry, AIA, and Amy Harmon, the project architect and interior design team from Augusta firm Virgo Gambill, saying "from a design perspective there was really nothing appealing about this project at all. The buildings are not especially interesting, and there was no budget to make them interesting. This was not a project that was going to show up in a design magazine. But from the start of the project they were deeply invested in understanding who we are, and what we do, and they worked diligently to make sure we have the best possible space for recovery and wellness to flourish." With over 5,000 square feet of occupied space at the PRRC, most of it nearing 100 years old, there will always be a renovation project ready for volunteers from the community.

Considering the day of the open house event, Christina Morris, Interim Director of the Peer Recovery and Respite Center, was especially grateful for the nearly-100 guests who showed up for the open house on such a blistering hot afternoon, saying "We were concerned earlier in the day that after our months of preparation, the community would justifiably be reluctant to come out in that heat, but people showed up, and they were so enthusiastic. Most gratifying were the many words of praise that came from those who knew the space before and could appreciate how much work so many of us have put into creating a new space for recovery and wellness. It was a great day, but our real work--providing peer support--is where we are focused now, and I am glad to have such a great team of Certified Peer Specialists working with me."

## THE PEER RECOVERY AND RESPITE CENTER OF AUGUSTA

- The Respite Center has four private bedrooms and is open 24/7 for respite guests.
- The Wellness Center is open to the public for recovery and wellness activities Monday-Friday 10am-6pm, Saturday 11am-6pm, and Sunday 1pm-6pm.

• Email [augusta@gmhcn.org](mailto:augusta@gmhcn.org)

• Phone 706-426-4030

• 24-Hour Peer2Peer **AUGUSTA WARM LINE 706.738.3548**



## PSYCHIATRIC ADVANCE DIRECTIVES: A BIG STEP FORWARD FOR GEORGIA

After many years and several failed attempts at getting meaningful Psychiatric Advance Directive legislation passed in the Georgia legislature, Psychiatric Advance Directives are now a real and (importantly) legal tool for those of us living with mental health concerns to use in managing and planning our affairs.

The Georgia Psychiatric Advance Directive has two basic parts. Part one begins with a Statement of Intent, and it is just that, with all the legal words to make the document binding. It says that “being of sound mind, [I] willfully and voluntarily make this psychiatric advance directive as a means of expressing in advance my informed choices and consent regarding my mental health care in event I become incapable of making informed decisions on my own behalf.” It then asks about our symptoms, what helps us into or out of crisis, who is or is not helpful to us, where we want to receive or not receive care, what medications we prefer, how we prefer to take them, where we want to go (or avoid) if hospitalization is necessary, who we want to visit us there, and whether we consent to some specific interventions (seclusion, physical restraints, etc.). Part one ends with a space where we can provide whatever other information is important to us personally. Some of us may not be comfortable anywhere without a specific religious book, or a constant (photograph, or keepsake) that we will need with us if hospitalized, or care instructions for our animal friends or plants, or just whatever will help us in our mental health recovery.

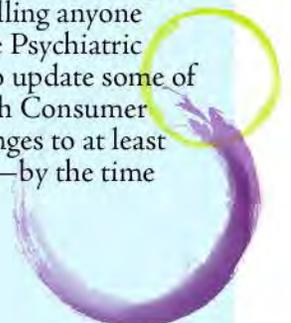
Part two is where we can assign a mental health care agent. It is not necessary to complete part two in order for part one to be legal. We can state our preferences for everything in part one even if we do not know anyone that we would be comfortable entrusting with the authority to make mental health care decisions for us (or we just don't want one at all). There is also the opportunity to have a backup agent, in case the first choice is unable or unwilling to perform the tasks associated with being a mental health care agent. In order for part two of the form to be effective and binding, the mental health care agent (and the backup, if chosen) must sign the form as well, consenting to performing the tasks. We cannot assign a mental health care agent without their consent, and they can withdraw from being our agent at any time.

Part three is very specific in asking us for the names and contact information for people who might support us if we are in a situation involving law enforcement, and also who generally is part of our support team (or which one person is our support team), and how to contact them if we are in crisis. And finally, part four is where our signature goes, after we say if the document is time-limited (we can put beginning and/or end dates on it). The form does not need to be notarized, but there must be two witnesses who sign the form, indicating they believe we were of sound mind when we signed the form, and that we did so voluntarily.

It is a straightforward form, but it fills many of us with trepidation, if not outright fear, for lots of different reasons. Some of us have been tricked into signing things we didn't understand or were misled about in the past; some of us have been hurt by people we trusted; some of us just don't like thinking about these things; and, some of these things can bring up memories of traumatic events we would rather not relive.

GMHCN executive director Sherry Jenkins Tucker acknowledges that all of those things may be true, and that some of them are true for her, but that “I still have a Psychiatric Advance Directive because it may be the only way I have choice if one day I have no voice. If no one knows what my preferences are, there is no way for them to make an informed decision about my preferences. This way there is at least a chance. Like many other Georgians, I have been hospitalized before, and like many others, I did not care for it. But there are certainly things that could have made my stay more comfortable, and my recovery faster, had people been empowered to act on my behalf. And I have learned through my years of work in the mental health profession, many times the power they need is not the legal power of the Psychiatric Advance Directive, but the information it contains. Knowledge really *is* power. If they know I never want to be sedated, or restrained, they can and might act assertively to prevent or stop those things from happening. But if they don't know, most people are unwilling to speak on our behalf if they are not certain—or in some cases have any idea at all—what we would say.

She goes on to say, “At the same time, we now have this useful legal tool at our disposal, and it costs nothing to complete, and we can withdraw from it later if we change our minds. I'm not in the business of telling anyone what to do, really ever. But my lived experience has shown me that people with legally enforceable Psychiatric Advance Directives fare better than those without. Personally, I plan to do a new one soon, just to update some of the information there, and professionally—as the executive director of the Georgia Mental Health Consumer Network—I want to encourage anyone who has or who has ever lived with mental health challenges to at least consider completing a Psychiatric Advance Directive, because they are a lot like health insurance—by the time you know for sure you need it, it may be too late to get it.”



# THE PATH TO WELLNESS

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



**Elizabeth Lambert,**  
CPS-MH  
CPS-AD  
FPM

### What challenges were you facing before you discovered peer support?

Challenges began for me at an early age. I was hospitalized and given a diagnosis by the age of 13. Mental illness was even more misunderstood and highly stigmatized then than it is today. I was labeled a "problem child". This quickly led to many trips to youth detention centers, hospitals, and crisis stabilizations units, which ultimately led to challenges for me as an adult. I started a long spiral of addiction. I wanted what was inside of me to go away. I felt lost and lonely. My mind and life were caught in a vicious, hopeless cycle of chaos.

### What helped you move forward?

February 2020 I was accepted to Next Door, a recovery residence for women returning to our communities from incarceration, and reintegrating into society. The program's foundation is centered around peer support. I was surrounded by peers who "got" me and engulfed me in unconditional love. I witnessed a myriad of different wellness tools working in the lives of peers around me, and when I implemented some of these tools, my life began to improve. I began to heal mentally, emotionally, and spiritually.

### What is life like for you now?

While still a resident at Next Door, I graduated the Respect Institute of Georgia. This sparked a passion to help peers using my own recovery journey. I sought and obtained my CPS-MH, and additional training in trauma-informed care. I held on for 20 months in the program, refusing to give up and go back to my former life. I graduated Next Door in November 2021 and moved into my own apartment with my dog, MJ. I completed CARES training, became a CPD-AD, and I am hoping to begin work soon at the Peer Support, Wellness, and Respite Center of Bartow County.

### What keeps you hopeful?

Watching other peers' lives heal. The transformation, the restoration, the recovery, the stretching and growing, the finding of voices, the passion, the advocacy. I'm learning to take the good with the bad, the triumphs as well as tragedies, the grief and pain, because life still shows up.

**Online Wellness Every Day**  
@Georgia's Peer Support,  
Wellness, and Respite Centers



ZOOM meeting ID  
341-153-3354

Dial-In Number  
646-558-8656

**NEW ACTIVITIES ADDED WEEKLY**  
**NEW FACILITATORS EACH WEEK**  
**SEVEN DAYS A WEEK**  
**SCHEDULE ONLINE AT GMHCN.ORG**

Peer Support Over the Phone 24/7  
at 888.945.1414 and online at

**www.peer2peer.center**

## GEORGIA PEER POLICY COLLECTIVE

The Georgia Peer Policy Collective is being established to serve multiple functions necessitated by the scope and scale of Georgia's Mental Health Parity Act. This group, which will include at least one representative from each of Georgia's six regions, will play a vital role in the next several years while our legislature determines the future of our behavioral health system.

visit [GMHCN.org/advocacy](http://GMHCN.org/advocacy)  
to learn more

## MEET US IN DECATUR

**If you are looking to demonstrate your peer leadership potential in mental health recovery, the Peer Support and Wellness Center of Decatur Director position may be the opportunity you are looking for. This high profile position is located in a fantastic Decatur neighborhood just minutes from amazing downtown Decatur. This is what opportunity looks like.**

visit [GMHCN.org/employment](http://GMHCN.org/employment)  
to learn more

wishing you a summer of unexpected joy.



## A note from Sherry

I was recently in front of one of those rotating digital ad displays, and I had to wait through a cycle of ads to make certain I had read two successive ads correctly, and I had, and the first read “The future is zero trust with zero exceptions,” and the ad following it read “Secure your resilience.” How can we be resilient in a world with zero trust? We are pack animals. The pandemic taught us (among countless other lessons we continue to be taught and re-taught): We need each other.

I reject the notion that the future is zero trust. While I now understand that “zero trust” has a meaning specific to technology security, it nonetheless speaks to a wider societal movement, and falls hard upon my ears, and even heavier upon my heart.

The errors that have caused some to lose faith in institutions that were once revered really did nothing more than reveal the simple truth that these organizations are not and were never perfect. The carefully scripted press conferences over the decades—filled with nonresponses, never admitting a wrong—only set the stage for a more dramatic fall from the pedestal for these human organizations masquerading as something else to build public trust that was always doomed.

Why can't they just come out and say “We made a mistake. We want you all to know that we are human, just like you, and like every other person and organization, we will continue to make mistakes?”

The next time you hear someone say “there's no room for error,” remind yourself there is *always* room for error. Believing otherwise is, well, a mistake.

Sherry