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CityVoices



A Peer Journal for Mental Health



For more art and artists, see special Fountain House Gallery Artists' section on pages 8 and 9!

Criminal Justice Forum Reveals New Information and Old Problems

By Carla Rabinowitz, Advocacy Coordinator, Community Access, Project Coordinator, Communities for Crisis Intervention Teams in NYC (CCINYC)

Community Asks Its Leaders, "What Is Taking So Long?"

The Daily News, The Greenburger Center for Social and Criminal Justice, and Metro Industrial Areas Foundation(IAF) hosted a forum on diverting people with mental health concerns away from the criminal justice system.

The February 14, 2018 forum was actually the 4th in a four-part series.

The focus of the last forum was Crisis Intervention Team training and catching people at the first intercept. An intercept is a step where people encounter the criminal justice system. There are 4 intercepts:

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Nine Dead in Two Years in **NYC** and **No** One is Listening

By Carla Rabinowitz, Advocacy Coordinator, Community Access, Project Coordinator, Communities for Crisis Intervention Teams in NYC (CCINYC)

The Mental Health Community Demands Change

On Friday, February 23rd, 2018, dozens of community members gathered to mourn the lives of people lost in NYPD encounters in the last two and a half years. At the memorial, we talked about the need to get the newly trained Crisis Intervention Team (CIT) officers to the scene of crisis calls.

We talked about the need for Mayor de Blasio to revive an old 2014 Taskforce to come up with other alternatives to police responding to these calls. Whether it is diverting calls to social workers or therapists to meet police on the scene, or trained peers responding in the community. We need alternatives to police responding to crisis calls.

But mainly it was a day for family, friends, and the community to mourn our nine

(Continued on page 5)

Beyond the Medical Model with Neesa

A Column by Neesa Sunar, Peer Specialist, Transitional Services for New York, Inc.

Changing the Language That is Used to Describe Us

Many of us who find ourselves in the mental health system have shared experiences as to how we got there. To speak on my own experiences, I first displayed "maladaptive," saddening symptoms as a teen, which then led to my first hospitalization at around my fourteenth birthday. I was diagnosed with clinical depression and medicated with Zoloft. Upon returning to school, I labeled myself as "depressed," which elicited within me a negative worldview amongst my classmates. My experiences with mental illness seemed alien to them, so my label further served to summarize my failures in forging meaningful friendships.

My condition turned for the worse when I developed schizoaffective disorder in my early twenties. Again, this diagnosis became a box I fell into, deeming me a "schizophrenic." Adopting this label as a self-descriptor caused me to feel broken in mind and character.

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p.15

Your floor is my floor

Having walked upon the cracks

And fallen through where I now

linger,

I often look up and wonder what it's

like

To never use my feet again,

To never ever run again,

Just to fly away.

Untitled

By Anna Santacroce

Sister forsythia. Dichotomous dicot flower.

Psychotic psychiatric flower. Schizoaffective disorder (bipolar type) I live alone.

I often write.

For my friend with megalomania: I hope for the best for you.

I often wonder if you remember your words and actions,

Adverse to the lying.

I don't have the same illness.

I must confess.

Do you remember after your tantrums and uses of myself and others? Or do you just do that lying?

You see yourself in others. To paint (me) as yourself.

You apply sadism to see myself in you world.

I am not always sure if we are yours.

In your megalomania you imagine a world to target.

Then you lie about it.

Like this personal monopoly. Gets scarier by the day.

You paint these sadistic pictures to reflect yourself. Is it love you have ever felt?

The Every Day Healer

By Gracelynn

I heal myself

Not because I received a prestigious degree

Or trained with the yoais and great healers of the world

But by the innate healing ability all of us possess

To Every Day

Bring my mind, my heart, my body To a place of presence

To a place of harmony with the Divine

Of which we are all a part.

To a place of Love.

Day by day

I choose to heal

And become Health itself.

Mood Swings By Ted Walner

The pendulum swings up The pendulum swings down.

Riding on this ride we go. As we approach everywhere

One moment utterly depressed. The next phase in euphoria land Feeling immersed in these emotions

Takes me nowhere. I cling and I climb.

I hurt and I love.

One minute blue

The next moment as happy as can

Truly, the meds help.

But they don't terminate my emotions. Swinging on this chandelier

Flying through all types of peril. Hook up, Hook down

And nowhere would I like to be.

As I shift

As I ride

As I fall

I lean to some and hope they are there for me.

Yes, hoping this perilous ride ends. And...

I am smoothly sailing.

Hoping I find that happy medium. Hoping I find that calm in the storm And am stable once again.

CityVoices

Founder, City Voices:

Ken Steele

Editor in Chief: Dan Frey

Business Manager:

Dan Frey

Layout Editor: Jenae Stone

Columnists/Associate Editors

Legal Column:

Mobilization for Justice

Bruni in the City:

Christina Bruni

Beyond the Medical Model with Neesa:

Neesa Sunar

Book Ends:

Kurt Sass

My Mental Health Journey: Jacquese Armstrong

CEO, Baltic St. AEH: Isaac Brown

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Sara Goodman, CPRP CFO, Baltic St. AEH:

Ravi Ramaswamy Secretary, Baltic St. AEH:

Joanne Forbes

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To Reach Us:

City Voices c/o Baltic Street AEH 9201 4th Avenue., 5th Floor Brooklyn NY 11209

Email: cityvoices1995@gmail.com

And even as I remained compliant with medications and psychiatric appointments, I continued relapsing, causing me to believe that my schizophrenia would haunt me for the rest of my life. Thus, the label seemed inescapable, thus sadly accurate.

My inability to work caused me to file for disability, which was an incredibly freeing experience. I began

accepted the top-down dynamics of the therapeutic relationship between practitioner and consumer. I absorbed that my mental illness diagnosis served as a label that indicated who I was and the future trajectory for the remainder of my life. And that all this was an injustice.

I became appalled that I had never even heard of the Recovery Model as a counter to the Medical Model.

"Part of our advocacy efforts should also include the request for creating alternative language that is person-centered, trauma-informed and affirming. A person 'suffers from' or 'experiences' mental illness and is not the illness itself."

openly disclosing my illness to anyone who would serve as an audience, and even felt proud that my struggles had a name, instead of being some amorphous spiritual curse. At the same time, the label of "schizophrenic" still caused people to distance themselves from me. Perhaps my label served as a threat, indicating that I had lying dormant within me a sense of criminality.

When discovering the peer movement in 2014, beginning as a student at Howie the Harp Advocacy Center, I learned that I had been entrenched in the Medical Model for my entire mental illness "career." I realized that I had completely internalized and unconditionally

Even in this massive city of New York, brimming with resources, I had never encountered peer specialists or Recovery Model enthusiasts. How could this be? Many of the peers I have since met proudly disown their diagnoses as descriptors, instead using more affirming language such as, "I am a person with schizophrenia," or "I have past lived experience." The peer community is a group of vibrant people with dynamic personalities, free from such labels. Bearing this perspective, we flourish and grow in our own recovery journeys as we influence and support one another.

Many of us peers are compelled to

in our communities. When we fight for widespread awareness of peers and the Recovery Model, we hope to challenge people in reevaluating their perspectives of those with mental illness. Part of our advocacy efforts should also include the request for creating alternative language that is person-centered, trauma-informed and affirming. A person "suffers from" or "experiences" mental illness and is not the illness itself. And what defines mental illness anyway? Descriptive words such as "crazy," "insane" or "dysfunctional" also serve to obscure the personhood of one suffering. When insensitive language is used, a person can internalize this and develop a sense of shame and fear. This can prevent a person from reaching out to friends, family, and/or professionals. In the worst of situations, such silence can end in immense and irreversible tragedy. As we advocate for change in

take action as mental health advocates

language, we must also recognize that each individual has their preference for how they should be regarded. Some people prefer to be called "disabled," while others eschew the term. Other terms can be preferred as well, such as "mentally ill," "other-abled," "neurodiverse," "chronically ill," "in remission," or simply "a human being." In the same way that the transgender community has fought for preferred pronouns, so too should we demand that mainstream society develops interest in



with respectful language.

We each have our individual journeys towards recovery, as we leave behind our pasts to walk towards a bright future. The hope and vision that guides us in this process can be the foundation on which we stand, as we fearlessly share our stories of recovery. Part of our stories can include how we have reclaimed our lives by adopting affirming language. If we are able to incite curiosity in our audiences, we may enjoy immense success in this endeavor.

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The Ayesha **Karim Story**

By Ayesha Karim

The Little Black Girl That Grew Up and Became Herself.



What makes a healthy selfimage? It's not perfect parents, but good parents, loving parents and a protective environment. I lived in a rather protective environment with a middle class socio-economic background. My stepfather retired from his Social Security Administration job after 25 years, and told me he loved the poetry chapbook I had published in 2016.

I started writing poems in the 5th

grade while attending a school called Al-Karim in Old Brooklyn. I call the Brooklyn of my childhood Old Brooklyn. I was born in Brooklyn, New York on January 28, 1981 at a hospital called Brookdale. My parents loved Chinese food and my mother said their favorite meal was called Chicken Cantonese.

This is the story of the little African American girl who grew up to become a woman who likes and accepts herself. Ayesha wore a school uniform that consisted of a green sweater with AKS on it for Al-Karim

Ayeesha left Al-Karim School and went to the Brooklyn Friends School, an integrated K-12 independent school established by the Quakers, for 7th and 8th grades. She was a shy 10- and 11-year-old.

Ayesha got into three New York City Catholic high schools after she took the Catholic Schools Admission Test in 1993. She chose her top three schools: Catherine Mac Aulay, an all-girl high school in Manhattan where school uniforms were mandatory; Bishop Ford high school; and Bishop Loughlin, the

"Ayesha is in her mid-late 30s. She loves putting on lipstick, one of her five moto jackets and a motorcycle hat while smiling at herself in the mirror....I have SZ; SZ doesn't have me."

School and a green plaid jumper that all the girls wore to school. Ayesha went from preschool to 6th grade at Al-Karim School, which had mostly African American students. Ayesha was a smart girl and her teachers encouraged her parents to skip her a grade in elementary school.

Ayesha started writing poetry in the 5th grade. She loved to write poems about everyday mundane occurrences. She kept a composition notebook for every subject when she was a little girl and pupil at Al-Karim School. She was also good at mathematics.

school her cousin Jeanette went to.

Ayesha was in the honors program at Bishop Loughlin and in the best freshman class until she started to lose her own voice and develop schizophrenia.

Ayesha's parents, Shellon and Neil, moved with their daughter to New Jersey in the summer of 1994. One day, in February 1995, after only six months in New Jersey, Ayesha was walking home from the school bus when a man screamed "Nigger" at her and sped off in his car. This was the incident that pushed Ayesha over the edge into schizophrenia.

Ayesha finished high school on home instruction. She graduated from a 4-year college/university at age 34 despite living with schizophrenia since she was 14-years-old.

Ayesha volunteers with an organization called NAMI (National Alliance on Mental Illness). She has been involved with NAMI Mercer NJ since September 30, 2008. She's been a volunteer from December 2010—present. NAMI gives Ayesha quality of life. Ayesha has a place to go, friends to socialize with and a place to volunteer and be productive.

Ayesha had a poem published in the January 2018 NAMI Mercer NJ newsletter. She has published several poems in their newsletter since January 2013. Ayesha is a poet, creative writer, blogger and now a children's book author. Ayesha is in her mid-late 30s. She loves putting on lipstick, one of her five moto jackets and a motorcycle hat while smiling at herself in the mirror.

Ayesha feels good about herself, having grown up from that bullied little African American girl who wrote poetry as a form of escape since the 5th grade. She is a self-love advocate and quite independent despite her diagnosis of schizophrenia or schizoaffective disorder

Ayesha loves her life and says, "I wouldn't have done much differently even if I could. I made peace with my illness. I have SZ; SZ doesn't have me." That is the Ayesha Karim

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- **Intercept 1** is on the streets, where people meet police;
- Intercept 2 is from arrest to disposition;
- Intercept 3 is diverting people when they are in jail away from longer sentencing; and
- **Intercept 4** is release and reentry.

In attendance were some heavy hitters in the field of mental health and criminal justice. There was Dr. Gary Belkin, Executive Deputy Commissioner of the New York City Department of Health and Mental Hygiene(DOHMH), Commissioner Elizabeth Glazer, Director of the Mayor's Office of Criminal Justice, and NYPD Commissioner James O'Neill.

A large part of the planning for this event centered not only on what the police are doing but what the Mayor is doing to find solutions to the recent string of nine police shootings of New York City residents with mental health concerns during crisis calls, or Emotionally Disturbed Person(EDP) calls.

In 2014, Mayor de Blasio convened an impressive Taskforce to look into

all the intercepts where people with mental health needs encounter the criminal justice system. Many city agencies and health care providers were on that Taskforce. Each stage of encounter—intercept—had a

question. But as I caught her walking out the door she said the Mayor was working on something, maybe not what we want, but some version of a Taskforce. But politicians always say that.

"...O'Neill stated that Staten Island is piloting a program where some 911 calls get screened to determine if police are needed or if social workers can field the call instead."

committee.

I was on the Taskforce committee that strategized about Intercept 1. We brainstormed for a year and came up with the recommendation to train police about how to respond to those in emotional crisis and to build two drop-off centers where police could take people in distress, now known as diversion centers.

At the meeting in February, Elizabeth Glazer was asked about whether Mayor de Blasio would revive his Taskforce on Criminal Justice and Behavioral Health.

Glazer did not publicly answer the

Dr. Gary Belkin was grilled on why DOHMH has not yet built the two diversion centers promised in 2014. Dr. Belkin noted that Project Renewal and Samaritan Day Top Village were awarded contracts to build the diversion centers recently. But the questions are still: where will they find the land to build the massive diversion centers? And how long will the construction take? No timeline has been given.

Commissioner O'Neill was asked many questions and hit with many concerns, as one might imagine.

To his credit, the Commissioner

answered all questions and remained after the end of the Forum to speak to people.

Commissioner O'Neill admitted that most EDP encounters occur quickly. He noted one shooting occurred in the first 17 seconds of officers being on the scene. Usually experts say the first 3 to 4 minutes is where violence occurs.

Many people asked about nonpolice alternatives to answering the crisis calls.

Surprisingly, O'Neill stated that Staten Island is piloting a program where some 911 calls get screened to determine if police are needed or if social workers can field the call instead. Little is known about this program to anyone. This program was not mentioned in the quarterly NYPD advocate meetings I attend, nor is DOHMH staff familiar with this program.

Instances of projects being hidden like this show the need for the Mayor to bring a Taskforce back together to look at alternatives like this, and at least to issue reports to the public on what is already being done.

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—We Thank You, The staff of CITY VOICES

"My agency actively participates in the City Voices empowerment journal. Our advocacy events are regularly covered and, in general, Voices is a great source for advocacy news. Keep your client-base informed and subscribe to City Voices."

—Carla Rabinowitz, Advocacy Coordinator, Community Access, Inc. "City Voices has been empowering mental health consumers for almost twenty years. I encourage your organization to subscribe and empower the consumers that you serve."

—Isaac Brown, CEO, Baltic Street AEH, Inc "City Voices is unique.
It's my favorite creative
grassroots peer newsletter.
All organizations who
provide services to people
within the behavioral
health system should make
sure their constituents
have the opportunity to
participate in the City
Voices world."

—Jody Silver, Executive Director, Collaborative Support Programs of New Jersey (CSPNJ) We awarded City Voices for being an outstanding peer journal that empowers people with psychiatric histories with information and resources. I strongly encourage your agency to subscribe."

—Glenn Liebman, CEO, Mental Health Association of New York State (MHANYS)

Mobilization for Justice Helps Nursing Home Residents Live More Independently

By Daniel A. Ross, Senior Staff Attorney, Mobilization for Justice, Inc. (Formerly MFY Legal Services)

Mobilization for Justice (MFJ) offers nursing home residents advice and representation on a wide range of legal matters. MFJ's Nursing Home Residents Project continues the work of Friends and Relatives of the Institutionalized and Aged (FRIA), which provided information and advice to nursing home residents and their families for 35 years.

their families for 35 years.

Callers to the Nursing Home Residents Project's intake line receive advice about residents' rights, decision-making, Medicaid and Medicare, and discharge planning. We also represent individuals in administrative hearings and litigation to preserve their apartments in the community, obtain home care, and protect residents' rights.

For example, one of our clients, Ms.

L, is a nursing home resident in Far Rockaway. She wanted to attend her granddaughter's graduation ceremony in the Bronx. She contacted us when the nursing home refused to approve a day pass. MFJ filed a lawsuit that forced the nursing home to allow her to attend the graduation. Ms. L explained that a day pass "is important because it helps me relax, gives me something to look forward to, allows me to visit my family and reconnect with friends." We published a report about this widespread problem called Imprisoned in Their Homes.

In another case, Medicaid denied rehabilitation services for Ms. H, a nursing home resident who wanted to return to her apartment. MFJ successfully challenged the denial so she could receive additional therapy.

She's looking forward to returning home

MFJ also advocates for residents who need help getting discharged from a nursing home. While Ms. G was in a nursing home, her landlord had illegally evicted her from her apartment. MFJ forced the landlord to provide her with another apartment. We also helped her obtain the home care and other services she needed to succeed in the community.

MFJ tracks trends in the complaints we receive to support policy advocacy and impact litigation. With pro bono help from Patterson Belknap Webb & Tyler LLP, we represent plaintiffs in a class action case against the Department of Health. The lawsuit alleges that many nursing home residents have waited years for services from the Nursing Home Transition and Diversion Waiver Program. The plaintiffs are among thousands of New Yorkers who remain trapped in nursing homes, when they could be receiving the care they need in their own homes.

MFJ hosts the Alliance of New York

Family Councils (ANYFC). ANYFC is a group of leaders of nursing home family councils who share information and advocacy strategies to ensure their loved ones receive quality care. We also present trainings for the Long-Term Care Ombudsman Program and provide technical assistance to lawyers and other advocates.

In 2012, MFJ revised FRIA's guide for residents and families, Nursing Homes and Alternatives. Called "the bible of long-term care for the elderly and their caregivers," this book has been used by many families to ensure that their relatives receive the care they deserve in nursing homes. MFJ also developed short fact sheets on common problems faced by nursing home residents and their families, including residents' rights, visitor policies, involuntary discharge, and medical decision-making.

For assistance with a legal problem affecting a nursing home resident, call MFJ's Nursing Home Residents Project on Tuesdays between 10:00 a.m. and 5:00 p.m. at 855-444-6477.

(Continued from cover Nine Dead in Two Years in NYC and No One is Listening)

We read the names of each life lost, and after each name was read, we popped a black balloon to signify their death.

Steve Coe, CEO of Community Access, implored the Mayor to revive the Taskforce, get all the experts in the room to figure out what is working, what is not working, and to fix this.

Below is my speech in full. At the memorial we spoke, and here we print the names of our community members so that we can remember them:

"Mario Ocasio was killed June, 2016. He was 51 years old. Mario was an uncle and a boyfriend. Mario, you are missed.

"Rashan Lloyd was killed June, 2016. Rashan was only 25 years of age when he died. Rashan was a construction worker and Rashan was raising his 4-year-old son. Rashan you are missed.

"Deborah Danner was killed in October, 2016. Deborah was well known in both the mental health and faith communities. Deborah was a regular member of Fountain House, a clubhouse in NYC. And Deborah was a long-time member of Trinity Church. She participated in the poetry and knitting groups. Deborah predicted her own death at the hands of police on a blog she wrote. Deborah you are missed.

"Dwayne Jeune was killed July, 2017. Dwayne was a Caribbean immigrant. He died at 32 years of age. Dwayne was a devoted son, who often helped his mother with groceries and could sometimes be found dancing in front of a mirror in the hallway outside

old when he was killed. Ariel was described as a peaceful, hardworking man. Ariel was a role model for his nephews and loved dearly by his little sister. Ariel you are missed.

"Andy Sookdeo died in August 2017. He was only 29 years old. Andy took his own life when confronted with police. Andy had been a school bus driver before things fell apart. Not only did Andy die in this encounter, but police were injured as well. Andy, you are missed.

"Let these lives lost not be in vain. Let's strengthen our resolve to continue the work to find new solutions to crisis calls that so many people in the mental health community face."

his apartment. Dwayne's cousin said Dwayne was a soft-spoken, mildmannered person who never bothered anyone. Mr. Jeune you are missed.

"Ariel Galarza was killed November 2016 when police mistook a hot sauce bottle for a knife. He was 49-years-

"Miguel Richards was killed in September, 2017. Miguel was a college student from Jamaica living in NYC in an exchange program. He died at 31 years of age. Miguel was an IT expert with a bright future. Police had 17 minutes to talk Miguel down using de-escalation skills, but instead they just shouted commands at him, telling him they would shoot him if he did not comply. Maybe that's what Miguel wanted at that moment. Miguel you are missed.

"Cornell Lockhart was killed in November, 2017. He was 67-years-old when he died. Lockhart had lived in a supportive housing residence for six years before his death. When police shot him, Cornell's arms were down at his side and his back was against a wall. Cornell you are missed.

Dwayne Pritchett was killed in January, 2018. Dwayne was 48 years of age at his death. Dwayne was a barber. He was raising his 3-year-old son with his female partner., but left to live with his father about a week before his death. Mr. Pritchett you are missed.

Let these lives lost not be in vain. Let's strengthen our resolve to continue the work to find new solutions to crisis calls that so many people in the mental health community face.

We demand the Mayor revive his Taskforce to find non-police responses to crisis calls before one more life is lost.

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MIXTAPE: Nightmares and Sweet Dreams

By Laura Anne Walker And They Say It Could Be Worse

My mom, whom I'd been taking care of while substitute teaching, died of a cancerous tumor that weighed more than 100 pounds. I knew her death would hurt me badly, but I didn't know it would be worse than that. I had a psychotic episode and was transported, screaming the whole way there, in emergency to the psych ward, where I remained for six days. Six days were not enough, so I was re-hospitalized for psychosis a few weeks later.

Altogether, I was hospitalized

four times between 1993 and 1998. Each time, I thought I'd never get out. The last time I went, I realized I had gotten all I needed to get from the psychiatric ward and would not return.

I attended a number of psychiatric day treatment programs. I was no longer a "shaker and a mover" and felt my life was over. I no longer had goals. I was isolated. All I had outside of the program were my brother and my grandmother via rotary telephone.

I made friends at the day treatment programs, but few, if any, traveled anywhere other than to the program and back home again. The second program ended each afternoon.

At one of the day treatment programs, I was introduced to the process of creating art with HAI (Hospital Audiences Inc, now HAI@ YAI)).

Twenty years later, I started doing art with Being Neighborly, and with

(Continued on next page)











(Continued from page 6 Mixtape: Nightmares and Sweet Dreams)

Fountain House Gallery, where my first piece of artwork was sold three minutes after hanging it on the wall and before I even walked out of the gallery.

Being Neighborly (arranged by artist Francis Palazzolo) led us as a group to the Museum of Modern Art (MoMA) for guided tours and art workshops. The workshops led to the MIXTAPE exhibition at the MoMA from February 2nd to

February 27, 2018. MIXTAPE is comprised of different groups of artists who live with disabilities. Prints, photographs, paintings, videos, and heads are on display on the walls and pedestals.

The (Being Neighborly)
MIXTAPE artists are: Laura Anne
Walker, Georgia Redd, Linda Moses,
Jenny Nicole Chan, Lawrence
Willoughby Jr, Terrance Watson,
Michael Johnson, Aracelis Rivera,

Roger Jones, Vincent Salas, and Ray Lopez.

The exhibit drew (no art pun intended!) many spectators, supporters and artists. A number of MIXTAPE artists spoke, including me. I thanked all of the people and places along my mental health journey that have brought me to myriad levels of healing: HAI; Citiview Connections Clubhouse; Community Access, Inc; Catholic

Charities; FEGS; Chelton Loft; Fountain House; CUCS; Being Neighborly (on Facebook, search: Neighborhood.Artists); MoMA's Community and Access Programs; friends and family; and the original inspiration for my artwork, the wonderfully magnificent cats who graced my life.

















From top left page: Laura Anne Walker and Lawrence Willoughby Jr; Artists Vincent Salas, Ray Lopez; Jenny Chan and Valerie Nechamkin; Jenny Chan with Workshop Director Rebecca Goyette; Artist Vincent Salas, artist Aracelis Rivera, MoMA workshop director Rebecca Goyette, and artist Laura Anne Walker. From top right page: Colorful by Vincent Salas; Man's Profile by Terrance Watson; Telescopic Light by Lawrence Willoughby Jr.; Georgia Redd; Colorful Print; Whiskered Cat by Michael Johnson; Wild and Black by Laura Anne Walker; Woman's Profile by Linda Moses.

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Fountain House Gallery and **Studio Arts Project**

Fountain House Gallery and Studio provides an environment for artists, including those living and working with mental illness to pursue their creative visions and to challenge the stigma that surrounds mental illness.

Founded by Fountain House in 2000 as a not-for-profit exhibition space for its member-artists, the Gallery sells original artworks and collaborates with a wide network of artists, curators, and cultural institutions. Embracing artists who are emerging or established, trained or self-taught, Fountain House Gallery cultivates artistic growth and makes a vital contribution to the New York arts community

Gallery artists have full-time access

to the space where they can work to advance their careers while collaborating with others in a supportive setting. The Studio is open to the larger Fountain House community during designated drop-in hours.

Fountain House Gallery has attracted distinguished guest curators such as Agnes Gund, President Emerita of The Museum of Modern Art (MoMA), who commended the Gallery as "a place where you can view fine works of art

a cooperative business run by and for its artists. Operations are supported by a small professional staff led by Ariel Willmott, Director, with the assistance of numerous community volunteers.

Fountain House Gallery functions as

made by a group of excellent artists."

Works by Fountain House Gallery artists are included in the collections of Citi, Eli Lilly and Company, and The Estée Lauder Companies Inc.

Fountain House Gallery has participated in exhibitions in public spaces, including: the Kennedy Center in Washington, D.C.; the Citi DeFord Gallery and lobby in Long Island City; and the World Financial Center Courtyard Gallery in Manhattan. Works by Gallery artists are presented at the annual Outsider Art Fair.

In this section, City Voices' field reporter and artist in her own right, Jenny Chan, interviewed five artists of Fountain House Gallery with the



following questions:

- What inspires you?
- 2 What colors do you like to use?
- **3** Is there a certain size you prefer?
- 4 How long does it take you to finish a piece?
- 6 Out of all your work what is your favorite piece and why?

This section contains photos of the artists, their bios, a selection of their artwork and their responses to Jenny's



Fountain House Studio Coordinator

"My works are a meditative focus on the beauty of personal objects; simple and glorious glass, the pleasure of a fleeting experience and surrounding oneself with objects and memories that are evocative, comforting or bring undefinable joy. It is about awareness and how experiencing light on a small thing can be powerful." Karen is a graduate of the High School of Art and Design in New York City and has studied architecture and film at Colorado State University and Montana State University. She is currently the Fountain House Gallery Studio Coordinator. More of her work is on www.saatchiart.com/wilderose.

Karen's Answers

1. Traditionally, everything. I go through phases when I am obsessed with something and will beat it to death. My last three projects were all over the place. Right now, I am working on a series of little known African Americans—so they are all narrative-based pieces. The first piece is called Tom's Bounty. Tom was a less than well-behaved slave of George Washington and was shipped off to the Caribbean in exchange for rum, molasses, tamarind and limes. The next piece in that series will be of a captured slave who fought for America during the War of 1812. Rather than return to America as a slave, he chose to stay in British captivity.

(Continued on page 14)













A self-described "artist of many styles," Barry works in mediums ranging from drawing and painting to sculpture and collage. He favors painting abstract landscapes in intense colors. He worked for many years as a jewelry designer, creating designs as well as producing molds and models for casting. Barry's formal art education was through the School of Visual Arts, and he has also studied at the Center for the Media Arts and Pels School of Commercial Art. In addition to being represented by Fountain House Gallery, he makes and sells art through Club Access. His work was featured in the Fountain House Gallery two-person show Urban Faces.

Barry's Answers

- 1. The impressionist and cubists and other artists in the gallery.
- 2. Blue, yellow and pink.
- 3. 16×20 and 18x24
- 4. Two days.
- 5. All my works are my favorites.





FROM TOP TO BOTTOM: Studio One Spikes;



Michelle's Answers

mental illness.

- 1. What inspires me is that I love to create thing that keeps the eyes schizophrenia. Her work has been moving. When I create art I don't like to keep it simple. I like the viewer to be constantly finding new elements in the artwork that lead the eye to a new section within each her signature mental health clothing
 - 2. I love to use bright colors, and colors that complement each other. There is not one color I like more than another. I like to represent all types of colors in different pieces of my art.
- 3. Most of my artwork is printed at 18"x24", however I have also printed them on 8"x8" canvases that look great!
- 4. It takes a few days to finish a piece. My first step is to draw at least three detailed drawings, that can take up to 2-3 days. After that I bring the drawings into the computer and spend 1-2 days in Photoshop editing and layering to get the desired effect that I like.

(Continued on page 14)







Michelle Hammer is a graphic and

web designer living with paranoid

featured on NBC, The Daily Mail,

BuzzFeed, Mashable, Shape, A+,

HelloGiggles, and Stylist. Her

artwork is the most recognized on

line Schizophrenic.NYC. Michelle

designs art on clothing that raises

awareness, and fights the stigma of







FROM LEFT TO RIGHT: Bleach; Surgical; Frozen; Blush; Chlorine; Night.

A fashion and costume designer, Guiomar holds a BA in Fashion Design from the Fashion Institute of Technology (FIT). As a painter, she works primarily in oil and acrylic, and on occasion in watercolor. Guiomar has a facility for figurative subjects such as portraits and landscapes and would like to take on the challenge of making abstract

Guiomar's Answers

1. I am inspired by nature, like

intricacies that life brings us at a given moment. 2. Unusual scheme of colors;

flowers, water, stones, art and the

- colors found in nature; pastel tones and bright tones; bright colors like yellow, royal blue, and lots of white. 3. I discovered that 18" x 24"
- canvas is a good size although I'd like to experiment with larger canvases. 4. I can finish a painting in two
- hours. Once I stop and consider a painting finished I start a new one

and I don't come back regardless if the painting is finished or not.

5. My favorite piece is "Music in the Forest" which sold at the Mad About Art exhibit. I like the energy in this painting, it is a sunny day and music is being played in the forest.













FROM LEFT TO RIGHT: Buddha; Baby Lion and Father; Peace and Love; Night Out IV; Water Reflections



Born and raised in New York City, Laurel works in mixed media incorporating found objects. She was introduced to the world of art through museum visits beginning when she was a toddler. Laurel began formal art training as a student at LaGuardia High School of Music & Art and Performing Arts and received a BA from Hunter College with concentrations in ceramics and black and white photography. She has exhibited at SUNY Fredonia, Bread and Roses Gallery, Materials

for the Arts and the Art Students League. The creative process enables Laurel to make peace with past trauma and mental illness, foster a sense of humor and bring clarity to this soup called life.

Laurel's Answers 1. I am inspired by the endless variety of colors in nature and the changes in weather. I often get mesmerized by the variety of colors in the ever-changing sky and movement of the clouds. A favorite

place of mine is Coney Island: the beach, seascapes and debris. Lately I have been collecting and studying seashells and driftwood and the stages of breakdown in their forms and colors. I grew up in Manhattan with all the chaos, but have always been drawn to quiet moments and open spaces. I love fairy tales and mythology because their veins run deep into our modern society. Jazz music, because I have synesthesia, where I hear colors.

(Continued on page 14)









FROM LEFT TO RIGHT: Moonshine; Tori Amos' Winter; Hatch Movement; Anticipar la Fusior

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Bruni in the City: We Feast **Together**

A Column by Christina

Living in Two Worlds



You think it's a secret only it's not. I'm aware others most likely pick up that I'm different in some way. Yet I don't want my MH life to infringe on my other life. I move between these distinct worlds like a chameleon.

Italiani. We feast together. We meet a person for the first time and they are our new best friend for that

evening. Everyone is famiglia here. It was the day after Columbus Day. I arrived early to the restaurant

and was seated at our table. A drop-dead gorgeous guy walked in and was seated with a companion up front. All the guys were handsome and talking Italian at the other tables.

It's true that I have a striking look: a heart-shaped face and dramatic Mediterranean features. If you saw me you'd think: "Of course, she must be Italian.'

The 900-pound elephant in any room is always what people see even though I wish they wouldn't. A former hairstylist claimed you can't tell by looking at someone that they have a mental health challenge. This is most likely true.

Yet I'm a strange girl in other ways: I don't drink beer or liquor. won't eat meat. Instead of a garrulous talker, I prefer to listen to what people are saying and give them the spotlight.

Deride me all you want for my focus on fashion and style. Yet having a hurdle to clear socially is all the more reason I dress chic: to put others at ease as well as for me to feel at ease in their company.

When I walk down the street I want people to think: "Who's that girl?" I want them to take a second look as I destroy the stereotype of a person diagnosed with SZ.

I've thought long and hard

about this. It's the bedrock that the premise of my memoir Left of the Dial is founded on: "Enjoy your auirkiness.

At the end of the day I don't care what people think of me. I've observed that most people are kinder than you think. Find the compassionate so-called normal people, and gravitate towards them.

It's the little things that count the

That day in October I got a better haircut from a real parucchiere: an Italian hairdresser. She was older and had auburn hair. Snip, snip. She was done in ten minutes.

Figuring out how to apply the new blush helped too. It looks

"Everyone is famiglia here."

better swiped on my cheekbones not the apples of my cheeks. The rose fresque shade is good. I applied it in the afternoon. At nine o'clock at night the blush was still going strong when I checked my face in the restroom mirror

I say: ladies, put on your face and go out. There's a world out there that would look better with you in it. And guys, you're handsome too. So, go out and paint the town gold.

As hard as it is living with an MH

thing, I find that making the effort is worth it. Go on MeetUp.com to join others in the city doing things you're passionate about. There's even the #1 New York Shyness and Social Anxiety MeetUp you can join.

Once a month, the Mental Health Project of The Urban Justice Center in lower Manhattan, hosts an open mic with a theme for the month such as "self-care," "diversity," "action," "bravery," and others.

As I toggle between these two worlds, I understand how it is for a lot of us mingling in disparate environments. Yet feeling like an outsider shouldn't stop us from doing things.

What the world needs now is MH peers with the courage to show up. To take a seat and be counted. All of us have paid our dues. Festeggiamo insieme. We feast together.

Common ground is the ground on which everyone stands. Be not afraid to get rejected. Plenty of fish are swimming in the sea of friends

It's up to us to cast our nets wide. The unlikeliest stranger could turn out to be the most compassionate. Talk to a therapist if it would help you to set and achieve goals like this.

My Italian therapist tells it like it is. She colludes with me to help me get what I want.

I wish all you loyal readers tanti auguri. Good wishes.

My Trip to Britain as a **Clubhouse Ambassador**

By Craig R. Bayer I Just Love British Culture!

I drove a lot of people crazy helping me prepare for my trip to the United Kingdom, because I saw a trip to Great Britain as a trip to an adult Disneyland. I was an English major in college and I focused on British literature. I also adore British rock and roll bands like the Beatles, The Who and Led Zeppelin, so coming to England seemed like it was going to be a fantasy adventure, and to a certain extent it was.

I saw beautiful buildings, I heard that wonderful British accent everywhere I went, I visited Buckingham Palace and other touristy sights, hung out with the British and other Europeans in bars and restaurants, and for a while, I even felt British and was almost prepared to support the Queen and the aristocracy. I told the Mosaic Clubhouse audience, to many laughs, that I had wanted to visit Britain since I was seventeen years old and that they shouldn't worry about President Trump not protecting the English, because I would if he did not. I guess I almost lost myself being on such holy artistic and political and cultural

On the other hand, this was more a business trip than a pleasure trip. I was there to do a colleague training: to work unrelated tasks here and there, just to stay busy and be helpful.

I need to thank a number of people who made this trip a success. Fountain House's Alan D. and Kinga J. chose me for this trip and helped every time I panicked during the preparation for the trip. My friend Judy M. helped keep me calm and organized. Ian S., the hardest working person at FH, also helped prepare me for the trip and helped me throughout the journey to do my job properly and to enjoy myself, as well. He took me to places in London that I would not have found myself, where we encountered Brits from all walks of life (we went to a jazz club/restaurant/ cigar bar, where we encountered some colorful British businessmen). And Ian inspired me with his passion for getting members back in the workforce, and for building their confidence so that they can believe in handling work again. I thank Mosaic Clubhouse colleague training director Lee E. for leading the training brilliantly, for his kindness in helping get around London and giving great information about London and its sights. I thank the Mosaic staff and administration and members for being so kind, polite, friendly, fascinating,







Book Ends: Written Off by Philip T. Yanos by Philip T. Yanos

A Column by Kurt Sass

Examining Stigma with a Critical Eye

Dr. Yanos, a Ph. D. and Professor of Psychology at John Jay College, has written a captivating and well-researched book on the history, foundation, and most importantly, the effects of stigma about mental illness. This stigma includes the stigma by others (media, government, community and society in general), but also the stigma mental health consumers place on themselves (Self-Stigma)

Dr. Yanos has certainly put a tremendous amount of time and are almost 500 references cited. Many of these references point to a current theme: The stigma and misconception (by both society and consumers alike) that once a person has had a psychiatric episode they will never go back even while she was symptomatic.

10

to having a normal life.

Dr. Yanos points out many true instances of how this stigma has affected people's lives. The Nazis, for example, started an extermination campaign of their own people who had mental illnesses in 1939 called the T-4 program. The rationale behind this (even advertised in propaganda films) was that these were "mercy" killings and acts of euthanasia, as people with mental illness were

Another example is the actress Margot Kidder, who was extremely popular from the Superman and other movies. In fact, by the 1980s, she was one of the most popular actresses in the world. In the 1990s, however, she suffered a psychotic break, which was widely publicized. Although she has not had any episodes in many, many years, she feels that people still think of her only in terms of the breakdown, and that this has

hurt her career tremendously. Of course, it is not only celebrities who have to deal with stigma. Dr. Yanos relayed the story about a single parent in Kansas, who, shortly after giving birth in 2009, experienced a effort into this book as there psychotic episode. Her daughter was taken into custody by child welfare authorities. The mother was treated and recovered. She petitioned to regain custody but was denied even though she never abused or neglected her daughter,

The judge in the ruling stated that her condition "is permanent and there is no likelihood the condition can be reversed." She went on to give birth to another child in 2011 and has been allowed to keep custody of that child, but not her first born. As of 2014 things have remained the same.

The last story I would like to share from the book is how

stereotypes and stated that he had a "futureless future." He feared that he was becoming a "human rock," and that he had no hope. He eventually committed suicide.

Alas, there is hope. Research from the book has shown at least three strategies that have proven to work. The first is Cognitive Behavioral Therapy. The second is a National Anti-Stigma Campaign.

"...Margot Kidder (who played Lois Lane from the 1980s Superman films)...suffered a psychotic break, which was widely publicized. Although she has not had any episodes in many, many years, she feels that people still think of her only in terms of the breakdown, and that this has hurt her career tremendously."

stigma from the community can cause mental health consumers to suffer from "Self-Stigma." While doing an ethnographic study in Los Angeles, a sociologist came outgoing man in his 30s, living in the stereotypes he heard over the years that no one ever recovers from mental illness—although he was no longer suffering from any symptoms of his mental illness he was desperately struggling and grappling with these negative

(Note: The United States has local campaigns, but not a national one.) The last one is peer support.

I have given just a few examples of the stories showing how stigma across the case of an intelligent, can impact people's lives and the names of the strategies most a community residence. Due to all effective in fighting stigma. I highly recommend you read this book to both read more of the stories and to find out how the strategies mentioned above work.

"I told the Mosaic Clubhouse audience, to many laughs, that I had wanted to visit Britain since I was seventeen years old and that they shouldn't worry about President Trump not protecting the English, because I would if he did not."

in the Mosaic Clubhouse and discuss with my European fellow colleagues how to develop the best clubhouse, one that serves members, staff and society. We talked about the political struggle of wanting clubhouses to be democracies yet pursue excellence and the struggle between members and staff for respect, dignity and power. As I said during one discussion, to more laughs, "normal" people (staffers) have a place in this world and therefore the clubhouse, too and should be treated with respect by clubhouse members. We honestly described the good and bad aspects of our respective clubhouses and how we could accent the good and alleviate the

I think I performed well in the discussions—a fellow colleague, a staffer, told me that she took notes on

some of the stuff I said. We worked on the units, something I enjoyed very much, because I relished the opportunity to work alongside, even serve, the British. I mostly worked on the Mosaic Clubhouse's newsletter and submitted to it a poem and did a few

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passionate and even humorous about what they do. I especially loved working in the Employment, Education and Information Unit, where I encountered staffers Sinead and Jane. Sinead, so joyful, friendly and enthusiastic, even singing to the printer when it broke down, and Jane, more reserved, coolheaded, yet friendly, too. The food at the clubhouse was almost as exotic as the wonderful restaurants in town—we had delicious pasta one day, goat curry

Lastly, I apologize to the other Europeans: the Norwegians, Swedes and Finnish, because I came in so infatuated with British culture that I neglected the other colleagues, at first, but I was charmed by the warmth and caring attitude and style of all the visiting colleagues and I hope that I behaved in a more appreciative manner to them for

NYAPRS Legislative **Day Will Never Be** the Same

By Carla Rabinowitz, Advocacy Coordinator, Community Access

A Great Day and Then a Great Loss

On Tuesday, February 27, 2018, NYC brought seven busses of people up to

The busses leave at 6:30 a.m. A few brave souls got to the buses at 4:00 a.m. Most straggled in between 5:30 and 6:30 a.m.

Some of the busses were late this year. But it was a warm day so at least people were not waiting in snow or freezing cold.

On the buses people were given granola bars and juice drinks for breakfast, and literature about the day. The written materials included a legislative chart that tells people which elected officials they are visiting with, at what time and in what room.

Once we got to Albany, we met in a large auditorium downtown near the Capitol building called The Egg.

Peers from around the state gathered together in the auditorium and we heard from the Executive Director of NYAPRS, Harvey Rosenthal. Harvey explained to us all the issues we would be talking about on legislative day with elected officials.

Both the leader of the mental health committee in the New York State Assembly Aileen Gunther and the New York State Senate mental health committee leader Robert Ortt talked to the large crowd in the Egg. They both told people to share their personal stories, as that is what moves elected officials to take action.

Then we broke for lunch. Nine hundred people all eating in a very large hall is always a little chaotic, but the food was plentiful.

Next, Harvey and a Long Island leader, Theresa Hall, ushered everyone outside for a Rally and press conference.

My team always opts-out of the Rally so we can make early meetings with elected officials.

The nine people on my team met with senior staff from Senate leader

Jeff Klein's office and Assembly leader Felix Ortiz. We talked about supportive housing, police training on mental health, ending solitary confinement, and the need for more respite centers.

Everyone in the group got a chance to talk, and they all got their message

at Community Access. She was loved by the staff and program participants alike. Always bouncing into work in her own way and keeping her problems to herself; no one could have known we were close to losing her vibrant

"Our long-time bus captain from the Harlem bus and fellow Community Access staff member, Brenda Fields, passed away just a week after Legislative Day....She was loved by the staff and program participants alike."

across well. Those elected officials will remember the stories we shared for sure. But the day will never be the same.

Our long-time bus captain from the Harlem bus and fellow Community Access staff member, Brenda Fields, passed away just a week after Legislative

Brenda's bus in Harlem is known as the party bus. A group from Harlem, from Harlem Hospital CSS, always brings chicken and potato salad for the bus. Ronald Flemming, a DJ by trade, co-leads the Harlem bus so there is always great music on the ride back.

Brenda was an Advocacy Specialist

Brenda was always willing to help anyone in a jam. That was her way.

She was leading her group in Albany on Tuesday the 27th and gone the next

Brenda leaves behind two adult children and a granddaughter, all who loved her dearly.

She will be missed by all of us who had the privilege of knowing her. And Legislative Day will never be the same.





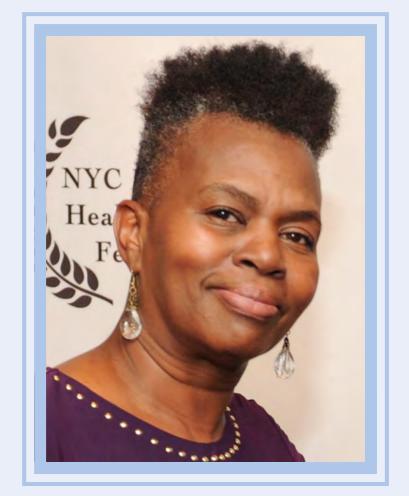












To Many Without, She Was Light

An Homage to Ms. Brenda Fields (1960—2018)

By Felix Guzman

She'd say to call her momma, the tabernacle of Her love always within arm's reach,

teaching to live, looking past our suffering as tomorrow is never far enough

I preach, "Life-preserver for whoever came to know Her heart of diamonds, always believing

in the potential of all as if her own. She'd want our every new word to be a love offering.

"She preserved our right to not only speak, but also to breathe easier than what the past or what all moments allow for, so carry the torch indeed.

"Without question, if given the opportunity, we need to, in death, keep alive Her memory.

"We need to refuse to grieve until seeing Her promise fulfilled: a peaceful night's

for those without much, but hope. Having an ear for whoever's dream went unheard, hugs, which could mend am sure we all are. broken hearts. Until the end doing the Good Lord's work without question. She followed

place of redemption. "Ms. Brenda, She was

His footprints in the sand to a

everything and everything was

"Beautiful soul through and through. Your faith convinced me, we ARE blessings regardless of what others say. To You WE were family oceans

"The loss is to the community at large. More than a place have You in our hearts.

"God calls every angel home when the time arrives. In our breaths You have life.

"Ms. Brenda, You are everything and everything You "Not ready are we ever to add

to the depths of sorrow already present within our eyes. "Our life's work going forward must make sure She did

not pass in vain. "To the many without much, She was light; Mother times three; Sister; and Friend.

"I am grateful to have known Her unconquerable spirit as I

"Rest easy, Ms. Brenda, please keep a tidy home for us all amongst the stars."







dearly departed





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professionals

Karen's Answers (Cont'd)

1. Turns out he had a bent for

leadership and ended up governing a

colors and dislike pastels. I find strong

saturated colors like cobalt blue, ruby

reds and forest greens more compelling.

The subtly of pastels never seem to

5. My favorite piece is always the one I am working on now. I am always excited and in a good place when I am working—so the immediate answer is, Tom's Bounty.

Michelle's Answers (Cont'd)

5. My favorite piece is "Bleach" (http://www.schizophrenic.nyc/shop/ case of days, it is usually weeks or bleach-print/). I love this one because months, when work on the piece is It shows depth and I find the color consistent and I will generally work on scheme to be awesome. Out of all the artwork I sell on my website, www. Schizophrenic.NYC, this one is purchased the most.

Laurel's Answers (Cont'd)

- 2. I use all colors except ready-made black paint in a tube. The colors I am drawn to include shades of blues, greens, grays and metallics. I do not really have a set color palette. I enjoy layering colors to make different ones where they overlap.
- 3. There is no set size I prefer. Right now, I work very small, from 4" x 6" to about 14" square. Because I use found wood as a base, my work is varied in dimension. If I had the space, I would like to try working much bigger, maybe 8 feet square? The largest painting I ever did, years ago was about 10-foot
- 4. Hmmm, it really depends. It can take months before I collect my found materials without

knowing exactly what it will become. Sometimes I will have a piece half finished for months, hanging on my wall, wondering what else it needs. Other times I finish a piece in one stretch over a couple of hours. I don't enjoy deadlines, but sometimes they do motivate me to finish a piece. I never plan the pieces.

5. I don't know. "Anticipar la Fusion" was fun to make because it was the first time I used wax and foil as layers to make clouds. Also, because I was able to use a skyscape to portray an emotional dilemma. It's hard to say because they are all so different. My favorite sculpture is "Rarity for John James Audubon" because the creature came to me from finding a sea shell that ended up becoming the body of the

After Things Go Wrong Sometimes Amazing Things Happen

Book Review by Carl Blumenthal

Some Stories Have No Ending

How many of us could survive one day in New York City's notorious Rikers Island Jail, given we have behavioral health issues? Wouldn't admission to a psychiatric hospital be safer and more therapeutic?

Until recently I worked as a peer counselor in the psychiatric ER of Brooklyn's Kings County Medical Center. I admit that I approached with caution what the police call "emotionally disturbed individuals" (EDI's) charged with crimes. Even with one wrist handcuffed to a gurney, they were liable to react aggressively. Unfortunately, the sooner they calmed down and went to Rikers, the sooner our staff could focus on less agitated patients.

Having "done time" on psychiatric units as a non-forensic inpatient, I expected a lot more heartbreak than hope in psychiatrist Elizabeth Ford's Sometimes Amazing Things Happen: Heartbreak and Hope on Bellevue Hospital's Psychiatric Prison Ward (2017). I was surprised to discover a role model who all mental health providers should copy.

Due to the revolving door between Bellevue and Rikers—the hospital has 68 beds to treat the most distressed of 5,000 inmates with mental illness she admits, "I have come to see my success as a doctor not by how well I treat mental illness but by how well I respect and honor my patients'

humanity, no matter where they are or what they have done.

Ford shines a light not just on the iail's insufferable conditions but also on prisoners' lives that are too often defined in psychiatric and legal terms. The list of their challengesaddiction, homelessness, poverty, illiteracy, racism, etc-is as long as an indictment. To paraphrase African American psychologist, Amos Wilson, these men have learned to be the best at doing the worst.

Ford proves one wo(man) can make a difference by never giving up on her

(or God's), when, like a modern-day Noah, she evacuates the prisoners to an upstate hospital during super storm Sandy and finds refuge elsewhere for those re-housed on Rikers Island, where she discovers just how poorly those with mental illness and substance abuse are treated.

Is Elizabeth Ford too good to be true? Except for a few moments of self-congratulation, burnout seems to be her only shortcoming, but that's because she cares too much. Her family and therapist keep her on an even keel; she recognizes her racial,

"I expected a lot more heartbreak than hope in psychiatrist Elizabeth Ford's Sometimes Amazing Things Happen: Heartbreak and Hope on Bellevue Hospital's Psychiatric Prison Ward (2017). I was surprised to discover a role model who all mental health providers should copy."

patients even when society has cast them aside. And they do their part merely by surviving. As one peer tells another in group therapy, "You are worth it, man. You got mad courage. You just hang on and keep going one day at a time. That's all you got to do."

Elizabeth Ford may never have taken a course in conflict resolution, but she's a natural at calming potentially (self-) abusive patients and keeping the peace among staff—mental health providers and corrections officers alike. Even as she climbs the career ladder, there is always someone telling her what to (and not to) do. Yet she's not afraid to speak truth to power.

Her calling is to assume more and more responsibility for events others consider beyond their control, in the end becoming the current head psychiatrist of the city's correctional health services. She prefers the intensity of working with psychiatric inmates than other populations in

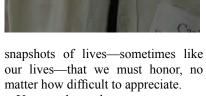
For example, Ford is in her glory

social, and economic privileges. And there are events out of her control, such as the beatings, murders, suicides, and escapes she learns about second-hand.

Ford's memoir has the pace of a well-directed movie with enough drama to satisfy the most avid consumer of stories about abuses at mental hospitals. Her prose is straight-forward. Her eye for detail demonstrates the mindfulness necessary to survive amidst daily trials and tribulations. She enables us to witness what others can't or refuse

Thus, it's the small blessings that give her and us hope: A phone call home by a scared teenager, a grungy prisoner's unexpected shower, proper clothes for a court appearance, a sing-along in community meeting, ping-pong on a makeshift table, and a patient forgiving a doctor's mistake.

She concludes Sometimes Amazing Things Happen with these words: "A story without an ending is still a story worth telling." Meaning these are



Yet, much as she treats our peers humanely, Ford doesn't hesitate to use both diagnostic labels and psychiatric medication for what she believes is our own good.

Based on my experience in the psychiatric department at Kings County, I now see the language is a shorthand and the meds are shortcuts to get people out of the hospital as quickly as possible. (After all, who wants to be confined in a mental hospital?) It may be only with longterm community services that peers have a better chance to educate

I volunteer for the American Friends (Quaker) Service Committee's Prison Watch to end solitary confinemen which causes and worsens mental illness. Agencies such as CASES, the Fortune Society, and the Osborne Association now rely on peer specialists to connect with exprisoners living with behavioral health challenges. I recommend that readers of City Voices get involved in these efforts if not doing so already.

Op-Ed: Return **Our Sanity Through Timely Treatment**

By Jane People with Stable

Minds Can See Illness for What It Is

It's the day after the Newton Children's Massacre and I want to say something as a mentally ill person. have had bipolar disorder all my life. I have been successfully treated for the instead of the truth—we were afraid of having a mentally ill person around). When people find out about their illness, they lose friends and sometimes are blackballed from organizations. A mentally ill person has to be careful with what he or she says and does at all times,

Mentally ill persons are the most

discriminated persons in the country.

They can easily be fired from jobs ("she

just wasn't capable of doing the job,"

so as not to trigger stigma. At the same time, access to treatment has been made difficult. In the past few vears, states have cut access to mental health treatment by limiting the illnesses they will treat. In my own state, mental health clinics will only treat those with schizophrenia, depression, and bipolar disorder. No other illnesses are eligible.

In the past year, I was cut from the program after five successful years with the same psychiatrist because I was "too stable" to receive treatment any longer. And I am a person who actively seeks

"Treat the person—return him or her to sanity then let the person decide whether or not they wish to be ill. Then, and only then, are they capable of making such a decision."

illness for 23 years. Since then I have done extensive research on the disorder and written four books on the subject. I have developed opinions on the way treatment is given (and withheld) in this

treatment, demands it, and insists that I always have my medication, even if it means an ER visit to get it.

What about those who resist treatment? Those like the school, theater, congress-people, and mall shooters?

The profile invariably shows that they ill? They are in no shape to make a did not seek treatment, that they refused decision as to whether or not they it. Often it is found that a parent tried should receive treatment or medication. They have a right to be treated. The many times to get help for their child, "freedom" we allow people to have in but was turned away because he was not a danger to himself or others—yet. our country to be mentally ill is illusory Read Pete Earley's book Crazy, in and has nothing to do with real freedom.

criminal justice system intervened after they had acted out. What about a person's right to be healthy? We don't leave sick people lying on the street to die. We deliver them to the hospital to be healed. What about a person's right to not be mentally the helpless.

person even as they declare their own Treat the person—return him or her to sanity—then let the person decide whether or not they wish to be ill. Then, and only then, are they capable of making such a decision. We need to upgrade our mental health system and to change our laws to deal with the reality that is mental illness and to truly help

These are chains that bind and hold a

this World of Action, is where we live our lives and perform all our daily activities. There are two higher, intermediate worlds; and the highest world, called the World of Emanation, is so close to G-d, it is considered one with G-d Himself.

which he describes his efforts to get help

for his bipolar son. He found that most

mentally ill people are not in institutions,

but in jails or prisons, because they did

not get help when they needed it, but the

Correspondingly, there are four distinct levels of caring for each other that we employ as mental health professionals, and as recipients of mental health services. The first and most active level is one in which we term others as "patients." Here, we deal with such tools as medications, and other practical milieu of therapy. The next level is one in which we term others as "clients" or "consumers," and here we help with benefits; vocation; housing; etc. At an even higher level, we might term others as "Mr. or Ms. So and So," meeting others more on their level, supporting them and directing them.

But the highest level of caring and it is this level that Billy Freeman exemplified—is the one of calling each by their first names, and is the level of greatest empowerment. I remember how Billy, at our occasional Peer Specialist gatherings would proudly announce that he "took Diane to Dunkin Donuts," or that he "took Freddy to pay his balance at the grocery." He had reached the highest level, of being so close to others that he was like one with them.

After the moving memorial

service. I was taken to visit Billy's office, for the last time. On his door was a hand-written sign that read: Empowerment; Self Help and Recovery; and Live Life.

His desk was well ordered and stocked with paperwork for all the people he was involved in helping. On his walls were many colorful flyers with activities and slogans. The one I liked best was: "Attitudes are contagious. Is yours worth catching?"

So, as a friend and as a colleague, yes, I am mourning. But I am not depressed because Billy is now happy, at the highest level, at one with G-d.

"Since he could not cut his meat when we went out to eat lunch, at his eulogy I stated that, 'I have cut up more chicken than a local butcher.' [Billy] was a fashionista. Who else do you know at South Beach that sported a 'flat top?'"

-Hector

"Billy would always ask me, 'Where's my coffee, Boss?'' —Allison

"One question I would like to pose to G-d is, 'Why do the good die so young?' Rest in Peace, Billy. You will be missed."

—The Reverend Judy L. Brown, Protestant Chaplain

Obituary: Billy Freeman 1952—2017

By Joel Simonds, Peer Specialist

Billy Freeman, Peer Specialist for South Beach Psychiatric Center, passed away November 20th, 2017, at the young age of

The Torah teaches that there are four Worlds. The lowest world,

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IMPORTANT INFORMATION FOR WRITERS

My name is Dan Frey, editor-in-chief of City Voices: A Peer Journal for Mental Health. I am looking for people who want to write about their personal experiences with substance use disorders, and/or mental illness. Poetry too. We will use your first name or a pen-name as author unless you specifically request that your full name be used. Writers must be over the age of 18, and understand that they are/may be disclosing private health information about themselves. Because articles will be posted on the Internet, writers understand that the information contained in published articles will be permanently available to the public.

Writers will not be compensated for their submissions, but can get a free copy of the paper that their article appears in. If interested, email CityVoices1995@gmail.com and I'll send to you the PDF of our last issue to help you decide if you want to submit your article.

Working and Living Well

Job Opportunities/Special Notices/Roommates/Personals

Employment Agencies

NETWORK PLUS (718) 797-2509 NETWORK PLUS WEST (718) 377-8567

Legal Help

MFY LEGAL SERVICES (212) 417-3700 URBAN JUSTICE CENTER (646) 602-5658 NYC BAR ASSOCIATION (212) 626-7373 LEGAL AID SOCIETY (212) 426-3000

Housing

CUCS (212) 801-3300 COMMON GROUND (212) 389-9300 OHEL (718) 851-6300

COMMUNITY ACCESS (212) 780-1400 SUS (212) 633-6900

Clubs and Clubhouses

Manhattan

FOUNTAIN HOUSE, 425 W 47 St. (212) 582-0340

CHELTON LOFT, 119 W 19 St. (212) 727-4360 HARLEM BAY NETWORK PROS, 4 W 125

St (212) 876-6083 EAST VILLAGE ACCESS PROS,

264 East Second Street (212) 780-9008

Brooklyn

EAST NY CLUBHOUSE, 2697 Atlantic Ave (718) 235-5780 RESOURCE AND WELLNESS CENTER, 882 3rd Ave, 10th Fl. (718) 788-6100

RAINBOW HEIGHTS CLUB, 25 Flatbush Ave (718) 852-2584

SEAMARK CENTER, 2559-65 West 13 St. (718) 372-0450

KADIMAH CLUBHOUSE, 4510 16th Ave (718) 686-3180 METRO CLUB PROS, 25 Chapel St (718)

596-8960

The Bronx

LANTERN HOUSE, 512 Southern Blvd (718) 993-1078

FOUNTAIN HOUSE BRONX, 564 Walton Ave (718) 742-9884

Queens

CITIVIEW CONNECTIONS, 42-15 Crescent St. (718) 361-7030

VENTURE HOUSE, 150-10 Hillside Ave (718) 658-7201

Staten Island

SKYLIGHT CENTER, 307 St. Mark's Pl. (718) 720-2585

Volunteer/Work Positions Available

BALTIC STREET AEH seeks FT/PT peer advocates. Computer/Office skills, peer advocacy or related experience a plus. Call Marianna (718)-833-5929. Advocacy through empowerment is our mission.

NAMI NYC METRO: assist with office help, including mailings, answering phones, organizing files, making phone calls, and many other office tasks. This position is open to those without prior experience. Call (212) 684-3264 or email volunteer@naminyc.org

Telephone Resources

NYC WELL 888-692-9355

NAMI HELPLINE: Mental health phone resource and database (212) 684-3264

THE TREVOR HOTLINE: If you or a young person you care about needs support call our lifeline at 866-488-7386. It's free, confidential and available 24/7. Learn more at TheTrevorProject.org.

QUEENS COUNTY MENTAL HEALTH SOCIETY: For information and referrals (718) 454-0705

Advocacy

NYAPRS: statewide mental health advocacy group that sponsors events and organizes the annual Legislative Day. To join call Carla (212) 780-1400x7726

MHASC: coalition committed to providing advocacy to consumers in special housing units in jails and prisons. Call Jennifer (646) 602-5644.

THE ICARUS PROJECT: join to help redefine mental illness as a "dangerous gift." Visit www.theicarusproject.net

The Arts

ARTWORK BY CONSUMER
ARTISTS: Fountain Gallery, 702 Ninth
Ave at 48th Street in Manhattan (212)
262-2756. Tues-Sat 11-8, Sun 1-5.
MOVIE CLUB/POETRY CLUB: NAMI
NYC Metro, 505 Eighth Ave, (212) 684-3264
also library@naminyc.org

WHIMSICAL, UPBEAT, ALL-OCCASION GREETING CARDS that lift your spirits by a consumer who has sold 1000's of

carde:

www.rosiesoriginalcards.com

WRITING WORKSHOP: For Fun, Healing, and Publishing! Led by children's book author Morella Bynoe, LMSW and published poet/editor Rev. Lisa Roma. Twice monthly meetings, convenient locations, online instruction. Option to publish work and do public readings. Contact morellabynoe@aol.com or CreativWomenNtwk@aol.com for more info/ registration. Visit creativewomensnetwork.com.

Support Groups

ZAPPALORTI SOCIETY support group for gays/lesbians/bisexuals/transgender peers with mental illness. Saturdays 2-4, LGBT Center 208 W 13 St. Call Bert (917) 286-0616.

HEARING VOICES SUPPORT GROUP. A group for people who hear voices. Call (212) 684-3264 for info.

CO-OCCURRING ILLNESS SUPPORT GROUP: monthly group for MICA consumers. Call (212) 684-3264 for info.

MOOD DISORDERS SUPPORT GROUP: for people with bipolar disorder and depression, as well as the friends and family of those with these disorders. Suggested \$5.00 donation for non-members. We also offer a group designed for people under 30, (212) 533-6374, info@mdsg.org, www.mdsg.org

Social

THE FRIENDSHIP NETWORK: If you want a friend or need a friend, then meet a friend through the Friendship Network. Call Alice, Nancy or Barbara at 516-326-6111 or www.friendshipnetwork.org