

Piaget's Cognitive Development Scitnick, 1997

Stage	Description	Age Range
Sensorimotor	Progresses from reflexive, instinctual action at birth to beginning of symbolic thought. Constructs an understanding of the world by coordinating sensory experiences with physical actions	Birth – 2 yrs
Preoperational	Begins to represent the world with words & images; these words & images reflect increased symbolic thinking & go beyond the connection of sensory info & physical action	2-7 yrs

SIGNS OF MENTAL HEALTH



**Inside:
ODS Aims For Partnerships
to Improve System of Care**



Volume 5 Number 1

March, 2008

Office of Deaf Services
Alabama Department of Mental Health and Mental Retardation
P.O. Box 301410
Montgomery, Alabama 36130



IN THIS ISSUE

ODS, SASD Partner to Enhance Services **2**

ODS, AIDB Team Up For Community Outreach **3**

ODS Hosts DBT Training **4**

As I See It **5**

Peterson New Communication Specialist **5**

Focus on the Staff: Jeff Welborn **6**

NAD Settles Case against Service Provider **6**

Greil, BDU Praised by Joint Commission **7**

On the ODS Bookshelf **8**

ODS Book Review "Because I Love you" **9**

Positions Available With Deaf Services **11**

Career Day at ASD **12**

Current Qualified Mental Health Interpreters **12**

Edison Was Deaf and Liked it That Way **13**

Signs of Mental Health
 ADMH/MR, Office of Deaf Services
 John M. Houston, Commissioner
 Steve Hamerdinger, Director
 P.O. Box 310410
 Montgomery, AL 36130
steve.hamerdinger@mh.alabama.gov

Editor's Notes:



Spring is here. And it brings the reminder that another edition of the *Signs of Mental Health* is due out. It has been an interesting winter dealing with various challenges that have come our way.

ODS has had some great events this winter, ranging from the DBT training to sweating out the accreditation of Greil (and with it, the Bailey Deaf Unit). You will find stories about both of these, and more,

in this issue.

You will also find the usual columns and features, such as "The Bookshelf" and so on. This is a good place to get tips on what new articles on deafness and mental health have been released.

If you are interested in learning about events happening in the Deaf community, it would be hard a better resource than the list serve "TERPINFO." It's one of the largest list serves in the southeast and it primarily deals with upcoming events. It's moderated so the volume of emails is a lot lower than most.

ODS, SUBSTANCE ABUSE SERVICES DIVISION PARTNER TO ENHANCE ASSESSMENT OF DEAF CONSUMERS

The Office of Deaf Services was set up to work with deaf and hard of hearing people with mental illness. While services in that area have improved, many people who are deaf or hard of hearing have substance abuse issues but do not have mental illness. They often are unable to get effective services.

The Regional Coordinators and the State Psychologist For Deaf People were given training in substance abuse assessment on March 27th by Kathy Seifried, the Director of Certification and Training of the Substance Abuse Services Division at the Alabama Department of Mental Health and Mental Retardation. The goal of the training was to make sure that ODS clinical staff knew how to do SA assessments, including elements required by Federal Law.



Kathy Seifried (center) discusses substance abuse assessment with ODS clinicians as Brian McKenny interprets. Beth Metlay (near left) and Dr. Frances Ralston watch.

This will allow the ODS clinicians to do assessments and make recommendations to treatment programs as to level of care needed to deaf or hard of hearing addicts seeking treatment. A side benefit will be that DMHMR will have a better handle on the number of people seeking services but not necessarily receiving them.

Continued on page 10

ON THE COVER:

Liz Hill, Region III Coordinator, discusses the impact of deafness on children's psychosocial development at an in-service given to the Directors of the Alabama Institute for the Deaf and Blind regional centers.

ODS, AIDB TEAM UP FOR COMMUNITY OUTREACH

Alabama Institute for the Deaf and Blind regional center directors met with staff of the Office of Deaf Services on January 31st to sample training options that ODS has developed for community outreach efforts. The event was hosted by the Montgomery Regional Center, directed by Ricky Holman.



Vignettes were offered by Steve Hamerdinger, Charlene Crump, Liz Hill and Brian McKenny and were designed to give an overview of the types of lectures and events that ODS staff could offer around the state.

Continued on page 13



Clockwise starting top left: Charlene Crump, State Mental Health Interpreter Coordinator, responds to questions from the audience. Top right: Brian McKenny makes a point during his presentation. Bottom: Ricky Holman, director, Dothan and Montgomery Regional Centers (foreground) listens to presentations along with other AIDB regional center directors and staff. From the right, Derek Fraser, interpreter, Talladega; Charlot Ritenbaugh, Director Auburn Regional Center; Karla Smith, director of Huntsville Regional Center; Linda Cole, case manager, Huntsville Regional Center; Stacy Yarborough, interpreter, Huntsville regional Center; Larscene Turk, director, Birmingham Regional Center, Jennifer Harbison, interpreter Birmingham Regional Center.



**DEAF SERVICES
REGIONAL CENTERS**

**Region 1: Northern Alabama
Wendy Lozynsky**

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

**Region 2: Central Alabama
Shannon Reese, Coordinator**

J-B-S Mental Health Center
956 Montclair Road, Suite 108
Birmingham, AL 35213
205-986-9213 (Voice)
205-591-2216 (TTY)

**Region 3: Wiregrass Region
Liz Hill, Coordinator**

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

**Region 4: Southern Region
Beth Metlay Coordinator**

Mobile Mental Health Center
2400 Gordon Smith Drive
Mobile, AL 36617
251-450-4353 (Voice)
251-450-4371 (TTY)



**Office of
Deaf Services
Regions**

We See What You're Saying

ODS HOSTS DBT TRAINING



Sharon Haynes makes a point about life planning.

Dr. Amanda O'Hearn and Ms. Sharon Haynes, LMSW, from the Deaf Wellness Center at the University of Rochester Medical Center were in Montgomery on Friday, March 7, to lecture on "Dialectical Behavior Therapy for Deaf Consumers" in the most recent event of the Clinical Training Series. The series is conducted in collaboration with the Alabama Mental Health Interpreter Training Project.

Dr. O'Hearn and Ms. Haynes are national experts on modifying dialectical behavior therapy (DBT) in a way that is culturally affirmative and linguistically accessible for deaf and hard of hearing consumers. In their lecture they described the work done at the Deaf Wellness Center to overcome some of the serious obstacles to effective use of DBT with deaf consumers.

As part of their presentation, Dr. O'Hearn and Ms. Haynes shared video clips of modified DBT techniques in individual therapy and group therapy.

According to workshop facilitator, Liz Hill, 96 people were in attendance from states all over the nation. Participants represented a variety



Dr. O'Hearn explains some of her techniques.

of professional disciplines including social work, psychology, interpreting, medical and substance abuse. Said one participant, "This was really helpful for my job as a deaf therapist!"

Previous topics explored in this series included "Psychological Assessment," with Dr. Barry Critchfield, and "Overcoming the Communication Barrier: Working with Hard of Hearing Consumers," led by Steve Hamerdinger. More training events are being planned. ✂

"This was really helpful for my job as a deaf therapist!"



More than 90 people attended the DBT training.

As I See It

Steve Hamendy



Last January, Karen Putz, of Bolingbrook, Ill, pulled up to the service window of a local Steak and Shake to order a couple of milkshakes. Putz, who is deaf, was told that she would need to pull out of line drive around and inform them through the speaker that she needed accommodation before they could take her order at the window. She replied that she could not use the speaker because she could not hear it and you can't lipread a speaker! The response to this was, "I'm sorry but we have to follow our rules - you have to go to the speaker first. She reiterated that she couldn't use the speaker and mentioned the *Americans with Disabilities Act*. By that time, the store manager was threatening to call the police and have her and her ten year old arrested for "holding up the drive through." To really understand the low-ball comedy this situation unintentionally created you really need to read the whole thing here: <http://www.diversityinc.com/public/3158.cfm> and here: <http://putzworld.blogspot.com/2008/01/steak-and-shake-denies-service.html>

Where does one begin? Long-time readers of this column know that I do not deny a surfeit of cynicism. But once in while something comes along that fills me with incredulity. You mean that you have to be hearing to tell a person that you are deaf? I have found some fascinating cases of strange logic reasoning in my days, but this one surely has earned a prominent spot in the pantheon of egregious examples of operating in a "rule-bound" mode.

The argument the manager made is, essentially, "The rules say you have to place the order at the speaker. There are no exceptions written into the rule, therefore I cannot make exceptions for your case, whether they are obviously appropriate or not."

Sometimes exceptions written into the rules are those what might make sense in some situations but are absurd in others. One example that comes to mind is putting a warning sign to not iron clothes while you wear them. Product liability risk management insists that consumers be warned of all possible dangers. So, rule-bound managers of some iron manufacturing plant decided that a label admonishing purchasers to remove their clothes before ironing them must be affixed to each iron that leaves the plant.

Rule – bound thinking is effective in raising accountability in many situations, which is why it persists in ventures considered high risk. However, Otto Brodtrick, a Professor at the Centre for Public Management at McGill University, asserts that, "Traditional accountability demands that practices comply with procedures. The reverse might be better." In essence, he states that it may be more effective to design the rules around what works.

Continued on Page 14

PETERSON APPOINTED NEW BDU COMMUNICATION SPECIALIST



Amy Peterson joined the Bailey Deaf Unit staff as Communication Specialist on February 1. She was previously living in Pensacola, Florida, where she was an ASL Instructor for Deaf and Hard of Hearing Services of Northwest Florida for 5 years and an Adjunct Professor in teaching ASL at Pensacola Junior College. She also has worked in various Deaf Interpreting settings over the last 10 years. She graduated from Jacksonville State University in 2000 with Bachelors in Elementary Education with concentration in Deaf Education.

Peterson states that she loves teaching, interpreting and being creative with visual – gestural communication. She is looking forward to working with deaf patients to help close whatever gaps they have in their language. She will also be teaching ASL to staff who need remedial instruction.

Married to Jimmy Peterson for 20 years, Peterson has 2 daughters, Mary Ann (16 yrs old) and Elizabeth (2 yrs old). 

We See What You're Saying



FOCUS ON THE STAFF:
WILLIAM
“JEFF”
WELBORN



I'm William Welborn, but everyone calls me Jeff. I was born deaf and grew up in Mississippi where I attended a mainstream school with special services. Five years ago, I moved to Mobile, Alabama, to work, and develop new friendships within the community. Through my best friend, I became interested in doing deaf interpreting work and I went to the Mental Health Interpreter Training also known as the Interpreter Institute. After completing the training I began doing some work as a contract Deaf Interpreter in region four under the supervision of Lee Stoutamire (Interpreter/Interpreter Coordinator for Region IV).

In the fall of 2007, I received a job offer to work with deaf patients at Baypointe, an inpatient facility that is affiliated with Altapointe Health System. Later, I transferred to Princess Helen Group home as a behavior aide.

I really enjoy working with consumers and assisting them with their communication skills. I like to empower them to make choices for themselves about activities, such as going to library or going to the mall to window shop and get their daily exercise. I also encourage consumers to develop their independent living skills and help them learn to do such things as cooking, budgeting and so on.

I am working on my interpreter skills and I am hoping to get my Certified Deaf Interpreter credentials in the future. I need to gain more experience and skills so I can work with deaf consumers better.

In my spare time, I enjoy decorating and landscaping at home. I also enjoy hanging out with friends and going to deaf events. I love to play dingo and go to the movie theatre. My favorite movie genre is horror. I like a good scare! I also like to travel to Mississippi to play at the casinos. Another thing I really like doing is traveling to different states and experiencing new and different customs. ✍

NAD SETTLES COMPLAINT AGAINST SERVICE PROVIDER



Silver Spring, MD - The National Association of the Deaf (NAD) has settled a complaint, filed with the United States Department of Justice, against a company that provides behavioral counseling and psychological services for children with autism spectrum disorders, challenging behavior and related developmental disabilities. The complaint alleged that the company refused to provide services for a hearing child because his parents are deaf, a violation of Title III of the Americans with Disabilities Act (ADA).

"The NAD is committed to accessible health care services by deaf and hard of hearing individuals and their families. We are pleased that this settlement creates the necessary policy change to uphold ADA requirements," said NAD President Bobbie Beth Scoggins.

The company agreed to pay \$7,500 and to modify its policies to provide auxiliary aids and services, such as qualified interpreter services, when necessary to ensure effective communication with deaf and hard of hearing patients and family members. "Health care providers cannot refuse to treat patients because a patient or family member is deaf or hard of hearing," said Michael Stein, attorney with the NAD Law and Advocacy Center. "The ADA requires health care providers to ensure effective communication with deaf and hard of hearing individuals." ✍

GREIL, BDU PRAISED BY JOINT COMMISSION, GRANTED FULL ACCREDITATION

Greil Memorial Psychiatric Hospital, which houses the Bailey Deaf Unit, received high marks in a recent survey by the Joint Commission for Accreditation of Healthcare Organizations. In particular, the Bailey Deaf Unit was singled out as an example of innovative programming.

Greil Hospital began a trial of 24/7 operations on the Bailey Unit in November, 2007, working out systems of patient care, supervision and staffing prior to an official opening. BDU faced questions from the surveyors about how the program was justified. In particular the competencies of the staff were examined closely. The survey team left satisfied that the program was well thought through and carefully designed to respond to information gleaned in situ.

Greil Hospital Facility Director Allen Stewart stated, "A great amount of effort went into preparing for our Joint Commission survey. Our preparation caused us to look very carefully at our processes and procedures. An ongoing goal for Greil Hospital will be to remain in continual compliance through regu-

lar evaluation of all aspects of our hospital. I am very grateful for the cooperation and teamwork that went into our successful survey. I was not surprised that Bailey Deaf Unit gave a strong showing of competence to the surveyors. The staff on the unit has been diligent and they do not hesitate to make suggestions about how we can continue to improve the program as it grows."

Division of Mental Illness Quality Improvement Director, Dr. Danielle Rowe said, "The most important thing they said, in my opinion, was that the Deaf Unit was blazing new territory and was a unique program ahead of its time. They also said that the use of data to make decisions along the way – including a focus on consumer outcomes from this program over time – should ensure its continued success. They were very complimentary of both the program and the planning process used to get it to where it is today." Dr. Beverly Bell-Shambley, Director of M.I.

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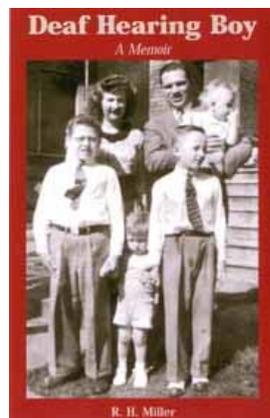
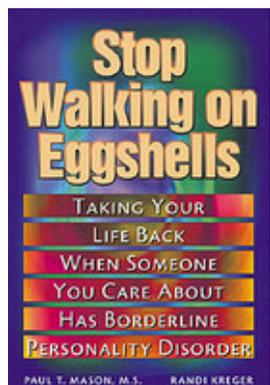
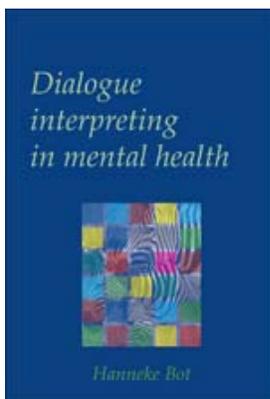
"I was not surprised that Bailey Deaf Unit gave a strong showing of competence to the surveyors. The staff on the unit has been diligent and they do not hesitate to make suggestions about how we can continue to improve the program as it grows."



BDU sought out advice from Dr. Neil Glickman (far right), director of the world-renowned Deaf Program at Westborough State Hospital in Massachusetts. Allen Steward (bottom left) and Scott Staubach listen as Brian McKenny interprets

We See What You're Saying

This feature, highlights books that are being read by ODS and Deaf Services staff members around the state. Not all the books will be strictly about deafness and not all will be strictly about mental health, but all will help increase knowledge and understanding of how deaf people living with mental illness can be better served. The editors welcome contributions of ideas and reviews from our readers as well. Send your contributions to ODS in care of: steve.hamerdinger@mh.alabama.gov.



ON THE ODS BOOKSHELF



Bot, H. (2005). *Dialogue Interpreting in Mental Health*. Amsterdam/New York, NY: Rodopi ISBN-10: 9042019174

In this era of globalization, the use of interpreters is becoming increasingly important in business meetings and negotiations, government and non-government organizations, health care and public service in general. This book focuses specifically on the involvement of interpreters in mental health sessions.

Mason, Paul T., Kreger, Randi. 1998. *Stop Walking on Eggshells: Taking Your Life Back When Someone You Care about Has Borderline Personality Disorder*. Oakland, CA. New Harbinger Publications.

Guide for family and friends of those with borderline personality disorder. Designed to help them understand how the disorder affects their loved ones and recognize what they can do to establish personal limits and enforce boundaries, communicate more effectively, and take care of themselves.

Miller, R.H. (2004) *Deaf Hearing Boy: A Memoir*. Washington, DC., Gallaudet Press

Born in 1938, R. H. Miller was the oldest of four hearing boys with deaf parents in Defiance, Ohio, a small agricultural community. *Deaf Hearing Boy* is Miller's compelling account of the complex dynamics at work in his family, including the inter-generational conflicts in which he found himself, the oldest child of deaf adults (CODA), caught in the middle.

Hot Off the Presses: Important Articles You Must Read

Cawthon, Stephanie W. (2008) Accommodations Use for Statewide Standardized Assessments: Prevalence and Recommendations for Students Who Are Deaf or Hard of Hearing. *Journal of Deaf Studies and Deaf Education*. 2008 13: 55-96.
<http://jdsde.oxfordjournals.org/cgi/content/abstract/13/1/55?etoc>

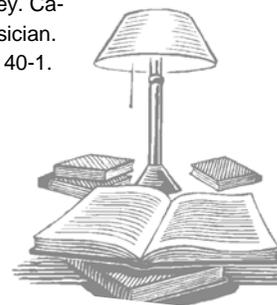
Feldman DM, Gum A (2007) Multigenerational perceptions of mental health services among deaf adults in Florida. *American Annals of the Deaf*. 2007 Fall;152(4):391-7.
<http://www.ncbi.nlm.nih.gov/pubmed/18257508?dopt=AbstractPlus>

Guest CM, Collis GM, McNicholas J. (2006) Hearing dogs: a longitudinal study of social and psychological effects on deaf and hard-of-hearing recipients. *Journal of Deaf Studies and Deaf Education*. 2006 Spring;11(2):252-61. Epub 2006 Feb 1.
<http://www.ncbi.nlm.nih.gov/pubmed/16452611?dopt=AbstractPlus>

Hintermair, Manfred (2008) Self-esteem and Satisfaction With Life of Deaf and Hard-of-Hearing People--A Resource-Oriented Approach to Identity Work. *Journal of Deaf Studies and Deaf Education*. 2008 13: 278-300.
<http://jdsde.oxfordjournals.org/cgi/content/abstract/13/2/278?etoc>

Vernon M, Leigh IW. (2007) Mental health services for people who are deaf. *American Annals of the Deaf*. 2007 Fall;152(4):374-81.
<http://www.ncbi.nlm.nih.gov/pubmed/18257506?dopt=AbstractPlus>

Woodcock K, Pole JD. (2007) Health profile of deaf Canadians: analysis of the Canada Community Health Survey. *Canadian Family Physician*. 2007 Dec;53(12):2140-1.



We See What You're Saying

AN ODS BOOK REVIEW

"Because I Love You"

By Joyce Allan

Book Review by Shannon Reese

"The place she remains to hide her pain is somewhere dark and deep. In a world where he can't find her, there are no ghosts behind her, and there are no secrets left to keep." (Because I Love you, p. 156)

Five generations of sexual abuse, and a woman brave enough to delve into her family as well as her own sexual abuse, make this book a powerful one about abuse...which in itself is all about power. Joyce Allen wrote *Because I Love You* with the intention of helping society understand how to stop child sexual abuse in families and neighborhoods.

The author's goal to find out why child sexual abuse is a serious problem becomes very real and personal as she discovers what actually happened in her own home - to her - with her father as the abuser and her mother maintaining silence about the incidents.

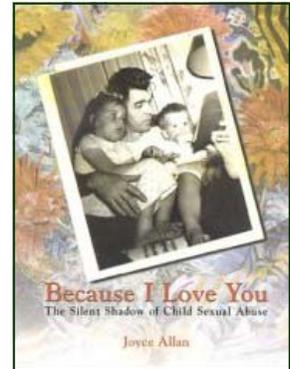
Thinking her father is now safe to be around, Joyce allowed him to take care of her own children during the summers of their youth, only to find out later that her children were also sexually abused by him. She takes it upon herself to penetrate the dark corridor of silence about sexual abuse - to find out how her abuse both started and ended with her own father. In her long journey to understand how and why her father

started the abusive behavior, she comes up with words of wisdom...and forgiveness.

There *is* a happy ending: Joyce Allan's career as a therapist and as an advocate for those who cannot speak out about their sexual abuse is a direct result of her own experiences. She helps these victims discover their true beauty, as well as helping them remove the "monster" image they grew up with for "allowing" the abuse.

Because I Love You is a book about society's perspective on child sexual abuse. It is in no way a "blame the father" book but rather one on "understanding why the father did this and that". Unable to even begin to fathom why sexual abuse happens to them so easily, the author makes critical points about the effects of sexual abuse on the predator and victim, as well as their friends and families. Predators, who are often victims of abuse themselves, take away the physical and emotional innocence of children at a young age. The vicious cycle continues through each generation, and will continue, unless some effective treatments are developed to break it.

This most powerful book is a "must read" for those who yearn to know how and why sexual abuse happens and where it all starts. In addition, it addresses forgiveness for the predator and those who keep silent about it. For those wanting to work in mental health, criminal justice, and social work fields, this book is poignant, powerful, and full of information about sexual predators and their relationship to their victims. ❧



2002. Virginia Foundation for the Humanities Press.

ISBN-10:
0966891945

"The vicious cycle (of sexual abuse) continues through each generation, and will continue, unless some effective treatments are developed to break it."

GREIL, BDU PRAISED BY JCAHCO, GRANTED FULL ACCREDITATION

Continued from page 7

Facility Operations, noted that the surveyors recommended documenting and publishing the process and program design for the Bailey Unit, and is in agreement that publications on the design and implementation of the program would allow other systems to replicate and benefit from those efforts.

ODS Director, Steve Hamerdinger, was on hand to respond to questions involving the planning and design process of the Deaf Unit. Hamerdinger briefly outlined the legal, clinical and historical antecedents of the unit, paying attention to design modifications that occurred as a result of "lessons learned" from other programs. He pointed out that the unit was premised on the belief that deaf people represented a linguistic minority more than a disability group, thus the focus on competencies needed to be on linguistic issues. "We didn't change the clinical competencies," Hamerdinger told the surveyors. "We simply added cultural and linguistic competencies." The exceptions were the Communications Department where both clinical and linguistic competencies were developed. This is part of the larger mental health interpreter initiative

of ODS which has already earned national and international recognition.

Commissioner John Houston also lauded the program. "I am proud of the accomplishments of the Office of Deaf Services and particularly the development of the Bailey Deaf Unit. This has been a vision of many people in the deaf community and the Department of MH/MR for over twenty years and, with Steve [Hamerdinger's] leadership and hard work from many others, it is now a reality. Alabama is increasingly recognized as a leader in this field and this is something for which we can all be proud and thankful."

While BDU staff have previously been through JCAHCO surveys, the unit had been largely conceptual rather than functioning as a separate unit. This marked the first time Greil went through a survey with BDU as a stand-alone program.

Recently the 10 beds of BDU have been officially added to the overall census of Greil, giving it a total of 76 beds. Previously deaf patients were considered part of the authorized 66 bed census. The change now means that the 10 beds in BDU are not considered part of the hearing program at Greil and are able to admit patients pending bed availability on the unit rather than having to put deaf consumers on the wait list for the "hearing beds." ✍

"I am proud of the accomplishments of the Office of Deaf Services and particularly the development of the Bailey Deaf Unit."

ODS, DIVISION OF SUBSTANCE ABUSE PARTNER TO ENHANCE ASSESSMENT OF DEAF CONSUMERS

Continued from page 2

According to Seifried, "We know how much we spend on interpreters, but we don't know how many consumers are turned off or turned away."

ODS clinicians do work with people who

are dually-diagnosed (mental illness and substance abuse) provided that the mental illness is primary.

SA providers have been reluctant to call in the RCDs, fearing that they are not trained to do SA assessments. It is hoped that this effort will reduce resistance to having ASL-fluent clinicians doing assessments to look at both SA and MI issues. ✍



Ms. Seifried is the Director of Certification and Training for the Substance Abuse Services Division

We See What You're Saying

POSITIONS AVAILABLE WITH DEAF SERVICES

OFFICE OF DEAF SERVICES

The Office of Deaf Services, Alabama Department of Mental Health and Mental Retardation, one of America's best mental health programs for Deaf and Hard of Hearing people, is recruiting for several key positions in both its community program and its inpatient program.

INTERPRETER, (Two Positions)

Region II (Birmingham) & Region III (Montgomery)

SALARY RANGE: 73 (\$33,241 - \$50,396)

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

For more information on any of these positions, or for application, please contact:

Steve Hamerdinger

Director Office of Deaf Services

ADMH/MR

100 North Union Street

Montgomery, AL 36130

Steve.Hamerdinger@mh.alabama.gov

(334) 353-4701 (TTY)

(334)353-4703 (Voice)

THE BAILEY DEAF UNIT

The following positions are based at Greil Memorial Psychiatric Hospital, 2140 Upper Wetumpka Road, Montgomery, AL. 36107

RECREATION/ACTIVITY SPECIALIST I

SALARY RANGE: 66 (\$28,941.60 - \$43,963.20)

QUALIFICATIONS: Graduation from a four-year college or university with a degree in Therapeutic Recreation, Adaptive Physical Education, or Physical Education. **Other directly related education and/or work experience may be substituted for all or part of these basic requirements. Must be in possession of, or eligibility for certification as a Certified Therapeutic Recreation Specialist (CTRS) through the National Council for Therapeutic Recreation.**

Proficiency in American Sign Language at or exceeding "intermediate plus" level of signing skills as measured by a recognized screening process such as SLPI.

MENTAL HEALTH SOCIAL WORKER II

SALARY RANGE: 70 (\$31,968 - \$48,424.80)

QUALIFICATIONS: Master's degree in Social Work from a college or university approved by the Alabama Board of Social Work.

Possession of or eligibility for licensure as a graduate social worker (MSW) as issued by the Alabama Board of Social Work Examiners. Valid licensure must be obtained within one year of employment and maintained.

Proficiency in American Sign Language at or exceeding "intermediate plus" level of signing skills as measured by a recognized screening process such as SLPI.

MENTAL HEALTH INTERPRETER TRAINEE

SALARY RANGE: 67 (\$29,685.60 - \$45,038.40)

QUALIFICATIONS: Bachelor's Degree in any field. **Graduation from a**

recognized interpreter training program is preferred.

Possession of permit or permit eligible by the Alabama Licensure Board of Interpreters and Transliterators. Must be able to acquire a license by the Alabama Licensure Board of Interpreters and Transliterators within 36 months of hire. **Permitted individuals must pass the Sign Language Proficiency Interview (SLPI) at an Advanced or higher level.** Must be able to be certified as an interpreter by the Registry of Interpreters for the Deaf or National Association of the Deaf at a level 4 or 5 equivalent. Certification must be obtained within 36 months of hire. Successful candidate will be required to be certified or eligible to receive certification as a QMHI (Qualified Mental Health Interpreter) or its equivalent. Certification must be obtained within 12 months of acquiring license by the Alabama Licensure Board of Interpreters and Transliterators. Must have a valid driver's license to operate a vehicle in the State of Alabama.

For more information on any of these positions, or for application, please contact:

Letitia Hendricks

Director of Human Resources

Greil Memorial Psychiatric Hospital, 2140 Upper Wetumpka Road, Montgomery, AL. 36107

Letitia.Hendricks@greil.mh.alabama.gov

(334) 262-0363 ext. 231 (V)

334)834-4562 (FAX)

Scott Staubach

Director, Bailey Deaf Unit

Greil Memorial Psychiatric Hospital, 2140 Upper Wetumpka Road, Montgomery, AL. 36107

Scott.staubach@greil.mh.alabama.gov

(334) 262-0363 ext. 322 (V/TTY)

(334)834-4562 (FAX)

DEAF SERVICES GROUP HOMES BIRMINGHAM

HOME COORDINATOR (Birmingham)

(\$30,618 to \$32,148)

QUALIFICATIONS: Bachelor's degree in a social service or related curriculum, two years' experience working with deaf mentally ill population and supervision/running a residential program. Must have near intermediate plus signing skills in American Sign Language (ASL) as measured by a recognized screening process such as the SLPI and have a thorough knowledge of Deaf Culture. Must have a valid Alabama driver's license and car insurance.

MENTAL HEALTH TECHNICIANS (Birmingham)

(\$16,242 to \$17,052 FULL TIME POSITIONS)

(\$7.80/hr PART TIME POSITIONS)

(\$7.00/hr RELIEF POSITIONS)

QUALIFICATIONS: High School Diploma or GED. Must have near intermediate plus signing skills in American Sign Language (ASL) as measured by a recognized screening process such as the SLPI and have a thorough knowledge of Deaf Culture. Must have a valid Alabama driver's license and car insurance.

For more information about the Birmingham positions, contact:

Malissa Cates, Program Director

JBS Mental Health/Mental Retardation Authority

956 Montclair Road, Suite 108

Birmingham, AL 35213

205-591-2212 (Voice)

205-591-2216 (TTY)

mcates@jbsmha.com

Continued on Next Page

We See What You're Saying

DEAF SERVICES GROUP HOMES Mobile

BEHAVIORAL SPECIALIST FOR DEAF HOME (Mobile)
 QUALIFICATIONS: Bachelor's degree in mental health discipline. Must be deaf or proficient in American Sign Language and have a thorough understanding of deaf culture. Must have and maintain a valid Alabama driver's license. Must have knowledge of adult psychiatric service provision.

For information about the Mobile positions, contact:
 Beth Metlay, Coordinator
 Mobile Mental Health Center
 2400 Gordon Smith Drive
 Mobile, AL 36617
 251-450-4353 (Voice)
 251-450-4371 (TTY)
 251 450 4323 (Fax)
Beth.Metlay@mh.alabama.gov

ODS ON HAND AT ASD CAREER DAY

Shannon Reese, Charlene Crump and Steve Hamerdinger represented ODS at the annual Career Day at the Alabama School for the Deaf on March 14th. The event, which is open to all deaf and hard of hearing high school students, drew a good crowd.

Dozens of students stopped by the ODS booth to learn more about mental health and jobs that are available in this field to deaf and hard of hearing people.



Shannon Reese talks about mental health careers at ASD Career Day Fair



ODS Director, Steve Hamerdinger, talks with students at the ASD Career Day Fair

Steve Hamerdinger said that he was particularly excited to talk to several students who mentioned wanting to be nurses. "I told them that we were one of the few places that actually wanted to recruit nurses who were deaf!"

ODS and the Career Technology Department at ASD have been working on a health care track for their vocational training program. This program will be designed to help students acquire skills to obtain jobs in healthcare upon graduation. 

CURRENT QUALIFIED MENTAL HEALTH INTERPRETERS

Becoming a *Qualified Mental Health Interpreter* in Alabama requires a rigorous course of study, practice and examination that takes most people nearly a year to complete. It involves 40 hours of classroom time, 40 hours of supervised practica and a comprehensive examination covering all aspects of mental health interpreting.

- | | |
|-------------------------------|-----------------------------|
| Charlene Crump, Montgomery | Sue Scott, Mobile |
| Nancy Hayes, Hayden City | Brian McKenny, Montgomery |
| Dee Johnston, Oxford | Debra Walker, Montgomery |
| Lisa Gould, Mobile | Jill Farmer, Arley |
| Dawn Marren, Huntsville | Wendy Darling, Prattville |
| Pat Smartt, Sterrett | Lee Stoutamire, Mobile |
| Frances Smallwood, Huntsville | Cindy Camp, Jacksonville |
| Lynn Nakamoto, Hawaii | Jamie Garrison, Wisconsin |
| Roz Kia, Hawaii | Vanessa Less, Wisconsin |
| Kathleen Lamb, Wisconsin | Dawn Ruthe, Wisconsin |
| Paula Van Tyle, Kansas | Kathleen Bucher, Huntsville |
| Joy Menges, Ohio | |

ODS AIDB Team up For Community Outreach

Continued from page 3

The initiative grew out of a series of meetings between ODS director, Steve Hamerdinger, and various officials at AIDB. During those meetings discussion centered on how best to increase knowledge and familiarity about services and issues among members of the Deaf Community. There was also a desire to build the knowledge base of local interpreters and those who might be interested in interpreting.

Each presenter gave a brief overview of topics in their area of expertise. Liz Hill talked about the psycho-social impact of deafness on young children and their families with emphasis on language deprivation and social skills development. Charlene

Crump addressed how mental illness and different disorders influence interpreter choices and approaches and also had a light – hearted presentation “What’s Your Sign” dealing with off-beat signs people sometimes encounter. Brian McKenny discussed confidentiality from the perspective of the Registry of Interpreters for the Deaf’s Code of Professional Conduct. Steve Hamerdinger talked about how interpreting assignments that seem to be innocuous can quickly turn into a tough mental health interpreting assignment. He also gave an overview of the history of sign language interpreting.

The presentations were well received by the attendees. Charlot Ritenbaugh, director of the Regional Centers, said, “I still get comments on the quality of each presentation by your staff during that workshop. I have used the handouts as a reference since January.”

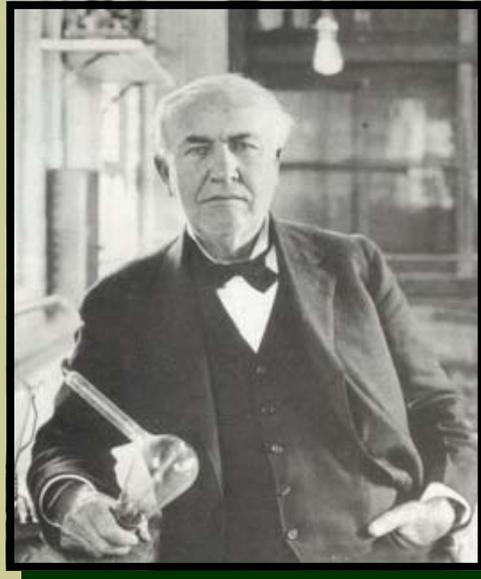
“I still get comments on the quality of each presentation by your staff during that workshop. I have used the handouts as a reference since January.”

EDISON WAS DEAF AND HE LIKED IT THAT WAY!

At around the age of 12, Edison started to lose his hearing. One legend has it that a train conductor smacked him in the ears after he started a fire in a boxcar by doing experiments. Edison himself said that he was injured when the conductor picked him up by the ears onto a moving train. Others had said that it caused by a bout of scarlet fever during childhood. In all likelihood it was a genetic condition as both Edison’s father and one of his brothers also suffered from hearing loss.

But one thing’s for sure: Edison actually liked being deaf (technically, he was hard of hearing, not completely deaf). He said that it made it easier for him to concentrate on his experiments.

Oh, one more thing: Edison actually *did* have a laboratory in a boxcar that caught on fire! Then 12-year-old Edison took a job selling newspaper and candies on the Grand Trunk Railroad from Port Huron to Detroit. He set up a lab for chemistry experiments and a printing press in the baggage car, where he published the *Grand Trunk Herald*, the first newspaper published on a train.



From www.neatorama.com/2008/02/11/10-fascinating-facts-about-edison/

We See What You're Saying

As I See It

Continued from Page 5

“One tires of a system that persists in putting round pegs in square holes, only to have the pegs moved to a different square hole when all fails.”

There are, of course, numerous examples of how this concept is taking hold in the field of social services. The whole push for evidence based practices has arisen as something of a reaction to the slowness of regulatory bodies to embrace change. Even here, however, the change is only up to a point. The push to embrace EBP puts at risk the populations that do not benefit from the particular magical solution of the week. Like all rule-bound thinking, it does not deal well with outliers. One tires of a system that persists in putting round pegs in square holes, only to have the pegs moved to a different square hole when all fails.

Rule-bound systems have great difficulty dealing with outliers. If 1,000 cars go through the drive-through with no problem, the 1,001st car will have a deaf person in it. This will stress the system. It will react by falling back on a literal interpretation of the rules. If the system has anticipated the deaf person, they will write the rules to accommodate the deaf person. But how many exceptions must you write in order to cover all possible contingencies? This is where services for deaf people run into problems. A macro example is the tendency for state mental health authorities to divide contracts among vendors by catchment

areas. This assures that the managers (in this case, the mental health authority) are able to track effectively all the consumers receiving services. This is fine for most consumers but it can be disastrous for low-incident populations.

The antidote to this is flexibility at the front lines. The Bailey Deaf Unit was specifically singled out recently by the Joint Commission on Accreditation of Healthcare Organizations for such willingness to think out of the box. At the same time, though, they still showed a determination to adhere to rule-bound accountability. The paradox between the two mindsets was most thought-provoking. “It’s great that you are doing these really cool, creative things, but are all your people credentialed to do them?” It’s at once prescient and absurd. To run the deaf program in that manner would require that every member of the staff have credentials in every area of mental health service. On the other hand, they did point out the importance of the training efforts that DMH has entrusted to ODS. The recent training by Dr Ohearn and Ms. Haynes is an example, as is the collaboration with the Alabama Institute for the Deaf and Blind Regional Centers.

By and large, Deaf Alabamians have been lucky. The Alabama Department of Mental Health, allows considerable flexibility to the Office of Deaf Services in how service for deaf people with mental illness are delivered. *As I See It*, most states are not nearly so lucky.



We See What You're Saying

CDI TRAINING: SKILLS DEVELOPMENT

Alabama Department of Mental Health and Mental Retardation OFFICE OF DEAF SERVICES

MAY 23 - 24, 2008
 Friday 10:00 a.m. – 5:00 p.m.
 Saturday 8:30 a.m. – 3:30 p.m.

Location: Montgomery, AL

CAROLE LAZORISAK

MA; RID: CDI, RSC; ASLTA: Professional

Carole is a native New Yorker with cultural diversity background. She holds a BA from Gallaudet University, an MA from New York University, and worked toward her doctorate at Teachers College, Columbia University. She holds two national certificates; Registry of Interpreters for the Deaf (RID): Certified Deaf Interpreter and American Sign Language Teacher Association (ASLTA): Professional.



Carole completed her Master Mentor studies at University of CO and Northeastern University. She is a tenured faculty member of Human Services at LaGuardia Community College/CUNY in Queens, NY. Carole has been an educator, a consultant, an interpreter and a trainer for at least 30 years in the following areas: communication, language and cultural studies, interpreting, language and interpreter assessment, human relations, and professional and teacher training. New York Cable TV selected Carole as New Yorker of the Week and she was featured in the national arts and entertainment magazine Biography. She was awarded a Humanitarian Award from St. Croix Deaf Coalition, VI for her community work in March, 1999, has worked as a Visiting Professor at the University of the Virgin Islands, and as a consultant for the past several years. Additionally, Carole gives presentations regionally, nationally and internationally and serves on several Advisory Boards. Carole worked in Puerto Rico for the past few years as a trainer and a mentor. Carole and her daughter co-authored The Complete Idiot's Guide to Conversational Sign Language, including a DVD, in 2004.

PURPOSE:

The program is designed to enhance the ability of interpreters who are deaf to more effectively work in community and mental health settings with consumers who are dysfluent. The training emphasizes performance and "hands on" applications.

AUDIENCE:

This training is geared to individuals who are deaf and function in the role of a Certified Deaf Interpreter (CDI) or Deaf Interpreter (DI).

CONTINUING EDUCATION CREDIT:

The Alabama Department of Mental Health and Mental Retardation is an Approved Registry of Interpreters for the Deaf (RID) CMP Sponsor for Continuing Education Activities. This professional studies program is offered for a total of 1.1 CEUS (.55 daily) at the "some" content knowledge level for CMP and ACET Participants. Activity Numbers 0263.0508.02 and 0263.0508.03.

COST: \$35.00

Refunds will be granted upon written request.



Lodging and restaurant information are available on our website at <http://www.mh.alabama.gov/MIDS>

Checks should be made out to: AL-ASLTA
 See below for more information or to request special accommodations

Mail registration to:
 Office of Deaf Services
 PO Box 301410, Montgomery, AL 36130
 334.353.4703 Voice or 334.353.4701 TTY
charlene.crump@mh.alabama.gov



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 Detach here, fill out and fax, mail or email back the application

Date of Application:

CDI TRAINING: SKILLS DEVELOPMENT

Mental Health Interpreter Training Series

Name		Deaf <input type="checkbox"/> Hearing <input type="checkbox"/> H/H <input type="checkbox"/>	
Address			
City	State	Zip	
Telephone	Voice <input type="checkbox"/> TTY <input type="checkbox"/> ()	Fax ()	
Pager ()		Mobile Phone ()	
Email		Additional Info	

Mental Health Interpreter Institute 2008



AUGUST 25–29, 2008
Montgomery Alabama

For more information contact Charlene.Crump@mh.alabama.gov

A Presentation of
Mental Health Interpreter Training Project
Office of Deaf Services

Alabama Department of Mental Health and Mental Retardation

