

**Two articles written by Lee Dunham published in the
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New ACT Teams created in Montgomery County

Assertive Community Treatment (ACT) was developed during the early 1970's, the heyday of de-institutionalization, when large numbers of patients were being discharged from state operated psychiatric hospitals into an underdeveloped, poorly integrated "nonsystem" of community care. ACT was created by a group of psychiatrists, psychologists and social workers at Mendota state hospital in Madison Wisconsin. Originally called the "Madison Model", ACT seemed radical at the time but has since evolved into one of the most influential service delivery approaches in the history of community mental health.

Think of ACT as a "hospital without walls", a trans-disciplinary team of psychiatrists, nurses, casemanagers, therapists, and peer specialists available 24/7 who strive to meet all the psychosocial treatment needs of clients with severe and persistent mental disorders not reached by traditional services.

There was only one ACT provider in Montgomery County for many years. In the wake of the closing of this provider, South Community and two additional providers were asked by the ADAMHS Board of Montgomery County to develop three new ACT teams. Today, there are 32 providers and 52 ACT teams in Ohio.

Because of its long track record of success with high-risk clients, as demonstrated by a large and growing body of rigorous outcome evaluation studies, ACT has been recognized by SAMSHA, the Robert Wood Johnson Foundation, NAMI, CARF, and other arbiters as an evidence-based practice.

Some of the features that distinguish ACT from traditional services include:

- Low client-staff ratio. The maximum caseload per staff is 15.
- Community-based services. A minimum of 65% of the services will be provided in the community.
- Ready access in times of crisis. An ACT staff person will be on call 24/7.
- Time-unlimited services. ACT is available as long as clinically warranted.

For more information on ACT:

The Ohio Coordinating Center for ACT: www.ohioactcenter.org

The Ohio Department of Mental Health: www.mh.state.oh.us

The Assertive Community Treatment Association: www.actassociation.org

What "Recovery" means to me

I'm a mental health provider. I've been one for 36 years. I was in on the ground floor of de-institutionalizing the state hospitals and in every paradigm shift since. According to the President's New Freedom Commission Report that makes me part of a non-recovery focused fragmented system. That's pretty accurate. But I have Hope. Where do I get Hope? I can name three sources.

The first comes from the initiatives at the state and local level focused on making our system more effective and recovery focused. Centers have been established throughout Ohio to promote and implement evidenced-based practices. What's an evidence based practice? These are treatment methods/models whose effectiveness has been verified through research. The ones I'm involved with are all highly recovery focused, i.e. strength-based, client driven, and holistic.

The second source of hope comes from the collaborative efforts I see in our county. These ongoing efforts have become even more imperative following the closing of TVBH.

My third source of hope comes from our clients and their families. They teach me everyday the meaning of courage and perseverance.

What does "Recovery" mean to me? It means listening to the people I serve, listening to their needs and goals. It means looking for opportunities to work collaboratively with other providers and systems. And lastly, it means remembering that it doesn't matter in the end what I think "Recovery" is because it's not about me. It's about you.