



CALIFORNIA NETWORK OF MENTAL HEALTH CLIENTS

2012 - 19th Street, Suite 100, Sacramento, California 95818

Voice: (916) 443-3232 ■ (800) 626-7447 ■ Fax: (916) 443-4089

E-mail: main@californiaclients.org ■ Web: www.californiaclients.org

FINDING YOUR VOICE Certified Training Program Application April 1- 4, 2009

California needs to develop more consumer/survivor advocates. To meet this need, the California Network of Mental Health Clients (CNMHC) and the National Empowerment Center (NEC) have developed a certified training for persons who would like to learn to conduct the Finding Our Voice Empowerment Training in their regions of California.

The focus of the training is to mobilize client leaders within local areas to return to their communities and train consumer/survivors to advocate for client-run programs and client-centered policy. Such recovery and wellness-based programs/services are prescribed by the MHSAs, the state plan, and the Veterans Administration as being a vital component in mental health wellness/recovery approaches and, as such, are recommended to be in every county's MHSAs plans.

Qualifications:

- Persons who identify as mental health services client/survivors.
- Persons from diverse backgrounds.
- Persons having the lived experience of homelessness, of co-occurring conditions (substance abuse), within the criminal justice system, and of being in an inpatient facility.
- Persons who have experience as trainers and who may also done plenary presentations and workshops at conferences.
- Persons who have the time in their schedules to carry out Finding Our Voice trainings.
- Persons who have displayed qualities of leadership in their local self-help/peer-support organizations and/or have been involved in planning and policy-making for the various mental health system components.

It is expected that anyone who receives this training will contract with the CNMHC to conduct trainings in accordance with the CNMHC's procedures and standards of quality. The contracts with participants will be executed at the training and will be in force for the period of three (3) years. Requests for training by counties, agencies, or programs will come first to the Network and contracted trainers will be assigned to do the trainings. Because this is a business model, trainers will be paid for the performance of trainings based on the fee schedule (in development).

The training will be presented by Dan Fisher, Executive Director of NEC, Sharon Kuehn of CNMHC, and Gwen Lewis-reid, Interim Executive Director of CNMHC. The training will take place over a four-day period, April 1-4, 2009. The training location will be in the San Francisco Bay area or Sacramento area. All expenses will be paid for selected participants.

Thirty (30) participants will be selected for this unique training. Equity in geographic and ethnic diversity will be a consideration in making trainee selections. If you would like to attend and can meet all of the time commitments, **please provide the following information:** (please print or type –may be submitted electronically). **Please include a resume and references from two persons in your local area.**

Name of Applicant: _____ Age: _____

County of Residence: _____

Ethnic or special population Identification (voluntary, examples GBLTQ, Vet, transition age youth, person with other disabilities): _____

Address: _____

Contact information:

Tel: _____ email: _____

1) Applicant's knowledge of the consumer/survivor movement and principles of recovery:

2) Applicant's involvement in consumer/survivor-run programs:

3) Applicant's participation in mental health training, policy and program planning:

4) Please list a sample of trainings/workshops you have carried out, giving topic, audience size and composition, and duration:

5) Applicant's assessment of present leadership skills and knowledge:

6) Please add below any information you feel would be helpful for the selection committee. Include remarks addressing how you would use this training to train clients in your county:

Please fill out attached *empowerment scale* and *community participation form*.

Must be returned to CNMHC office by post, fax, or electronically by 5:00 PM, January 10, 2009.

CNMHC, 2012 – 19th St., Suite 100,
Sacramento, CA 95818
fax-916-443-4089, gulshanyusufzai@californiaclients.org
