



**Depression and Bipolar  
Support Alliance  
Texas**

# **DBSA Certified Peer Specialist Training**

Monday, December 8 – Friday, December 12, 2008  
Starts 8:30 am Monday, ends 3:00 pm Friday

## **Location**

Community Clinical Research Building  
8334 Cross Park Drive, Austin, Texas

## **DBSA Certified Peer Specialist**

**Training** prepares people who live with mental illnesses to use their experiences to work with others as peer specialists. Facilitated by nationally recognized trainers, this comprehensive training delivers a foundation in recovery principles, intervention techniques and ethical practice. Training focuses on the use of peer-delivered services to support the recovery of others. DBSA Certified Peer Specialist training is delivered in partnership with Appalachian Consulting Group, Inc., founders of the Georgia Certified Peer Specialist Project.

## **Training Topics**

- ▶ Role of peer support in recovery
- ▶ Beliefs and values that promote recovery
- ▶ Problem solving with individuals
- ▶ Effective listening and the art of asking questions
- ▶ Combating negative self-talk
- ▶ Facilitating recovery dialogues
- ▶ Spirituality and recovery
- ▶ Power, conflict and integrity in the workplace  
...and more

## **Who Can Participate**

1. Individuals 18 or older who are/have been consumers of mental health services and who wish to use this experience to assist other consumers
2. Those willing to publicly identify as a person living with a mental illness

***Please do not apply if you do not meet these first two standards.***

3. DBSA encourages people who currently hold a peer specialist position or who are actively seeking

such a position (paid or volunteer) to apply, although this is not a requirement to participate.

4. DBSA seeks a diverse group of training applicants with respect to race, gender, age, sexual orientation, diagnosis and disability.

## **Requirements**

Training participants must commit to:

- ▶ Attend and actively participate in five full days of training
- ▶ Participate in discussion and role-plays utilizing their personal experiences as mental health consumers rather than any clinical roles or training
- ▶ Take a written certification examination within four weeks of training completion

## **Registration Fee**

\$950 per person includes training fee and all training materials, and post-training certification testing. Registration fees will be due at a later date. Fee does NOT include hotel accommodations, meals or travel. Participants are responsible for paying these costs or obtaining outside funding support. Enrollment is limited, and participants will be selected through a competitive process based upon a set group of guidelines.

***Applications are due by November 15, 2008 by either fax or mail.***

***Fax: DBSA Texas, Suite 200 (281) 480-4333***

***Mail: DBSA Texas, 3710 Cedar Street, Box 22, Austin, Texas 78705. Letters must be postmarked by November 15, 2008.***

*(We cannot accept email applications.)*

# Application for Participation

You must complete this application in your own handwriting. Please do not type your responses. Please answer the following questions to the best of your ability. This is not a "test" with right and wrong answers. Your responses will help us get to know you and will assist the Selection Committee in identifying and selecting qualified applicants. Please answer all questions and sign your application. *Your answers can be brief, but please use complete sentences and write legibly. Write your answers on a separate sheet of paper, and include with application. Thank you!*

NAME \_\_\_\_\_  
STREET \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_ ZIP \_\_\_\_\_  
PHONE \_\_\_\_\_ FAX \_\_\_\_\_  
E-MAIL \_\_\_\_\_  
SPECIAL ACCOMMODATIONS \_\_\_\_\_

1. UNDERSTANDING AND INTEREST
- A. Why do you want to become a Peer Specialist?
  - B. What makes you a good candidate to work with other consumers in the mental health field?

2. RECOVERY EXPERIENCE
- A. What does recovery mean to you?
  - B. What were/are important factors in your own recovery?
  - C. What types of experiences have you had in assisting or advocating for consumers of mental health services (for example, support group leadership, self-advocacy, public testimony, programs you started, etc.)? Please be specific.

3. ENVIRONMENT AND ACCESS
- A. Do you currently hold a position in which you will use the skills gained through Peer Specialist training and certification?  
 Yes  No If yes, are you paid?  Yes  No  
Position title/location \_\_\_\_\_

- B. Are you a current candidate for a position in which you will use the skills gained through Peer Specialist training and certification?  
 Yes  No If yes, will you be paid?  Yes  No  
Position title/location \_\_\_\_\_

DEMOGRAPHIC INFORMATION  
The following optional information to help ensure diversity of the group. Aside from using aggregate numbers, DBSA will not maintain/use this information any other way.

GENDER                      PHYSICAL DISABILITY  
 Male  Female             Yes  No

AGE                                      SEXUAL ORIENTATION  
 18 – 25     56+                       Heterosexual  
 26 – 55                       Gay / Lesbian Bisexual

ETHNICITY  
 Asian/Pacific Islander                       American Indian  
 Black (not of Hispanic origin)             Hispanic  
 White (not of Hispanic origin)             Other

Please initial all items below to indicate your understanding of each:  
\_\_\_ I certify that I am a person who is or has been a consumer of mental health services.  
\_\_\_ If I am chosen as a training participant, I understand that I am responsible for funding my own registration fee, travel, hotel accommodations and meals.  
\_\_\_ I understand that participating in the DBSA Certified Peer Specialist training does not guarantee me employment or a volunteer position.

YOUR SIGNATURE \_\_\_\_\_  
PLEASE PRINT NAME \_\_\_\_\_

PLEASE MAIL/FAX COMPLETED APPLICATION TO:  
Marilyn Nolin  
Interim Executive Director  
DBSA Texas  
3710 Cedar Street Box 22  
Austin, Texas 78705  
Phone: (512) 407-6676 Toll-free Line (866) 327-2839  
Fax (281) 480-4333

***Emailed applications are not accepted. Do not send your registration fee with this application.***

*Thank you for your interest!*