What is BRIDGES?

• A consumer-run evidence-based program
  – Education courses
    • 10 session: BRIDGES Crossings
    • 8 session: BRIDGES version R
    • 5 session: BRIDGES Footsteps (inpatient curriculum)
  – Support group method
  – Developed by consumers and family members
  – Copyright owned by NAMI Tennessee
    • Operated in collaboration with the Tennessee Mental Health Consumers Association
History

- Developed in Tennessee 1994-1995
  - Corresponds to *Journey of Hope* (Now *With Hope in Mind*)
    - Catalyze healing within the family
  - Designed for rural and urban areas
  - Course syllabus developed from 10 consumer-run focus groups across TN
    - Lessons written by consumers, edited by consumers and family members, reviewed by experts
  - Disseminated to 11 states, Canada and England
  - Two federal studies: COSP/SAMHSA & UIC/NIDRR
Design

• Recovery Philosophy
  – Philosophical influence
    • C/S/X movement leaders: Copeland, Deegan, Chamberlin
    • Academics: Harding, Anthony
  – Trauma model
    • Developed from intensive consumer-consumer interviews
  – Technical information in lay language
    • From inside the peer perspective
    • Curriculum incorporates teachers’ lived experience
• Team teaching/facilitating
  • Technical assistance & support
Political Climate in Tennessee

– Founded early in TN recovery movement
  • State investment
– Now 49 peer centers across state
– TMHCA is strong, partners with NAMI
– Certified peer specialists
  • BRIDGES as training component
BRIDGES and Employment

- Economic security/ supported employment
  - BRIDGES as springboard to employment
    - Meaningful work
  - Everyone who teaches BRIDGES is paid to do it.
    - Contract
      - Teachers paid $30 per session
      - Often springboard to employment
      - Part of peer service job
        - Peer Support Center
        - Certified Peer Specialist
BRIDGES Curriculum

1. Philosophy of recovery
   - Trauma recovery model
2. Psychiatric diagnoses
   - Consumer viewpoint
   - Lay language
3. Crisis planning, suicide prevention
4. Building social support
5. Medications
6. Mental health treatment
7. Psych rehab
   - Employment
8. Communication skills
9. Problem-management
10. Self-advocacy skills
Additional Modules

- Course allows flexibility based on student needs and interests
  - Personality Disorders
  - Eating Disorders
  - Attention Disorders
  - Dissociative Identity Disorders
  - Dual Recovery - Mental illness & Addiction
  - Criminal Justice
  - Wellness
  - Spirituality
BRIDGES Teachers

- Intensive 3-day initial training
  - TMHCA, Jenny Roman
- Periodic refresher training
- Classes monitored for fidelity to model
  - Technical assistance provided if necessary
BRIDGES Support Groups

• Process
  – Check in – Brief statement round robin
  – Problem management – in-depth assistance to one or two group members
  – Read BRIDGES affirmations (NOT steps)

• Support groups in jails
Support Group Facilitators

- Intensive 2-day training
- Periodic refresher training
- Volunteer position, not paid
- Common venues
  - Peer Support Centers
  - NAMI Affiliates
Technical Assistance for Teachers and Facilitators

– Field staff
– Convention/Regional Meetings
– Membership meetings
– Implementation manual
  • Monitoring – technical assistance
BRIDGES and TMHCA programs

• Regional coordinators
  – Satisfaction and challenges
  – Comparison to non-peer services
  – Feedback from other regional coordinators

  – Partnership with NAMI
  – Power of role modeling
Exploring How BRIDGES Improves Recovery Outcomes: UIC NIDRR-funded Research Study

• Test the effectiveness of the peer-led Building Recovery of Individual Dreams and Goals (BRIDGES) in improving consumers’ recovery and community integration outcomes

• These outcomes include:
  – Empowerment
  – Emotional and physical well-being
  – Quality of life
  – Enhanced recovery
  – Social support
  – Self-stigma
  – Employment status
  – Service use
BRIDGES Research Study

• Study Personnel
  – Judith A. Cook (PI) & Sue Pickett (Co-I), University of Illinois at Chicago
  – Pam Steigman, (Study Director)
  – Jane Burke-Miller (Study Biostatistician)
  – Sita Diehl, NAMI-Tennessee & Anthony Fox, TN Mental Health Consumer Association (Local Project Directors)

• Funded by the NIDRR/U.S. Department of Education & CMHS/SAMHSA

• All participants who wish to join the study complete 3 interviews:
  – Time 1: Enrollment
  – Time 2: 3 months post-enrollment
  – Time 3: 8 months post-enrollment
  – All interviews are conducted by phone by the UIC Survey Research Lab (SRL)
  – Subjects are paid $20 for their first interview, $25 for their second interview, and $30 for their third interview. They receive an $10 bonus for completing all 3 interviews.
BRIDGES Study: Overview

- RCT: Consumers in TN are randomly assigned to either the intervention group (receive BRIDGES shortly after enrollment) or the control group (9-month BRIDGES course waiting list).
- All subjects complete 3 interviews:
  - Time 1: Enrollment
  - Time 2: 3 months post-enrollment
  - Time 3: 8 months post-enrollment
  - All interviews are conducted by phone by the UIC Survey Research Lab (SRL)
  - Subjects are paid $20 for their first interview, $25 for their second interview, and $30 for their third interview. They receive an $10 bonus for completing all 3 interviews.
BRIDGES in Tennessee: Study Sites

- Clarksville
- Nashville
- Knoxville
- Dixon
- Cookeville
- Chattanooga
- Memphis
- Gallatin
- Oak Ridge
Interviews assess empowerment, emotional and physical well-being, quality of life, social support, hope, enhanced recovery, stigma, service use, and employment status.

The study uses the 8 session version of the BRIDGES curriculum, meeting for 2-1/2 hours per week.

All instructors are experienced BRIDGES teachers who completed a special training on study procedures prior to delivering the intervention.
Recruitment Procedures

• At each site, TN local coordinators distribute recruitment materials, meet with potential participants to talk about the study
  – Interested individuals call UIC NRTC study 800 number and are screened for eligibility
  – Eligible individuals are sent consent documents and study materials, and are interviewed by SRL
• Our BRIDGES instructors are so enthusiastic about the study that they also assisted with recruitment!
Study Progress and Accomplishments

• 541 individuals screened for Waves 1-5
  – 493 eligible and agreed to participate
  – 428 (87%) completed Time 1 interviews
• 212 individuals randomly assigned to the intervention group and 216 individuals randomly assigned to the control group
• Wave 1-4 BRIDGES classes completed for intervention group participants
  – On average, participants attended 5 of the 8 BRIDGES classes
  – 54% attended 6 or more classes
Wave 1-4 Intervention Group Participant Characteristics

- 56% female, 44% male
- Mean age: 43 years
- 53% Caucasian, 35% African American, 4% Hispanic/Latino
- 66% High school graduate/GED
- 87% unmarried
- 52% living in their own home or apartment
- 72% had been hospitalized for psychiatric reasons
- Most common self-reported diagnosis:
  - 47% bipolar disorder; 21% depression; 20% schizophrenia spectrum
- Most were not working, but 59% foresaw themselves holding a job in the next year
Preliminary Outcomes

• Intervention group subjects had significant improvements from Time 1 to Time 3 for the following outcomes*:
  – Reduced psychiatric symptoms
  – Reduced maladaptive coping
  – Decreased service needs
  – Increased hope
  – Increased self-advocacy
  – Increased recovery

*Waves 1-3
Research Challenges

• Peers: Working with University Researchers
  – Fidelity
  – Recruitment vs. participation
  – Need for consistency & fidelity

• Researchers: Working with non-researchers
  – Dedicated, but poor, overwhelmed
Hard Times and BRIDGES

• What is economy doing to BRIDGES?
  – TN is broke
    • Mental health system is taking significant cuts
    • Peer programs have been notified of cuts
  – Economic stimulus funds bring hope
    • Possibilities
      – FMAP Medicaid (TennCare) relief
      – May shift $$ burden away from MH authority
      – But not without strenuous legislative advocacy
    • Pitfalls
      – Stimulus funds are all allocated, going to state government
Into the Future....

• Future of BRIDGES
  – Implementation in hospitals, jails/prisons & veterans’ organizations
  – Provide a vital link to community peer support

• Concluding points
  – TMHCA is proud to offer BRIDGES as an empowerment and recovery tool. Many TMHCA members have found a purpose in life as a result of BRIDGES.
  – Preliminary study results show the BRIDGES participants experience several significant changes in key recovery outcomes at the end of the course, and maintain these changes 6 months after their BRIDGES classes have ended.
  – BRIDGES has been transformative for students, even more so for teachers. Effective in combination with other consumer run programs such as drop-in centers, WRAP and peer mentoring.
Questions? Comments?

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