

The Frontline Reports column features short descriptions of novel approaches to mental health problems or creative applications of established concepts in different settings. Material submitted for the column should be 350 to 750 words long, with a maximum of three authors (one is preferred) and no references, tables, or figures. Send material to Francine Cournos, M.D., at the New York State Psychiatric Institute (fc15@columbia.edu) or to Stephen M. Goldfinger, M.D., at SUNY Downstate Medical Center (steve007ny@aol.com).

A Supported Education Program in a State Psychiatric Hospital

Many state psychiatric hospitals are moving toward a recovery-oriented philosophy. Although "recovery" and "state hospital" may seem contradictory, Oregon State Hospital (OSH) has worked to reconcile the potential conflicts by formally endorsing and implementing Recovery International, a peer-run self-help system, into its treatment philosophy and programming. In addition, the forensic program uses the extended period of treatment required by Oregon law to promote recovery by enhancing services. Supported education, which involves helping patients achieve their education and training goals, is one of those treatment enhancements.

Supported education is a service comparable to supported employment. Services include helping a person choose an education goal and selecting a program such as a GED, adult basic education, a training program, or coursework at a college or university where they can achieve the goal. Education specialists, similar to employment specialists or job coaches, assist patients with registration, financial aid, course selection, accommodations, tutoring, and other services that might help the enrollee to be successful in his or her education program. The education special-

ists are available for troubleshooting on campus and providing personal support.

Supported education has been designated an "emerging practice" by the Substance Abuse and Mental Health Services Administration of the federal government and an evidence-based practice by the state of Oregon. Research indicates improved employment outcomes, reduced rates of hospitalization, and an increased sense of self-efficacy for participants.

Supported education lends itself to many state hospital settings, especially those with longer-term forensic programs. In such programs, psychiatric symptomatology has often stabilized enough for patients to be considered for discharge, but they must demonstrate additional capacity for safe community living. OSH's forensic and longer-term civil commitment programs initiated a supported education program in mid-2007. The range of education options includes adult basic education, computer literacy, English as a second language (ESL), GED preparation and completion, and enrollment for college credit online and on campus.

Six qualified teachers provided services both on and off the units until 2009, when new treatment malls made five classrooms available. There are no eligibility requirements for the program except in regard to safety issues. Each patient is assigned a primary teacher who provides instruction, coordination, and progress reports to the patient's interdisciplinary treatment team. In the past two years for which data are available (2007 and 2008), the program served 122 and 133 patients, respectively.

Teachers use a variety of materials and methods for assessment and measuring patients' progress. They tap multiple instructional resources, including various software programs that are available in the computer lab.

Patients who began college classes in 2007 enrolled in 70 credit hours and completed 63. Those enrolled in 2008 attempted 237 credits hours and completed 193. One person completed a bachelor of science de-

gree in liberal arts in 2007. ESL students showed gains in their ability to speak English.

Classes taken include general studies (26% of patients), GED preparation (12%), basic math (11%), reading (11%), computer keyboarding (35%), online learning (28%), ESL (7%), and college courses (online and on campus) (12%). Classroom attendance averaged 77% in 2007 and 82% in 2008. The retention rate in 2007 was 95%; the retention rate in 2008 was 97%.

Several issues have arisen with the implementation of this project. The first was the reluctance of the colleges to provide financial aid to hospital forensic patients. After disability rights were asserted on behalf of the patients, the colleges agreed to review funding on a case-by-case basis. A second issue concerned Internet access for patients doing online coursework. A separate network with a secure log-in process was established for these patients.

The supported education program reflects the growing awareness that programs within the psychiatric hospital must move beyond traditional treatment and address the desires and needs of the patients. The popularity of the supported education program among the patients is demonstrated by the attendance and retention rates and a current waiting list of 30. Supported education programs offer hope and meaningful activity to improve the patients' quality of life within the hospital and to expand opportunities to develop work and living skills essential for transitioning to community life.

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Students for Recovery: A Novel Way to Support Students on Campus

Many university campuses struggle with substance use issues among students. Research consistently shows that such problems have long-lasting consequences for individuals and the university as a whole. With significant resources often directed to address problems of binge drinking and illicit substance use on campus, few resources and services target students who are recovering from a substance use disorder. These students face isolation and many unique challenges while pursuing education on college campuses. Students at the University of Michigan School of Social Work recognized an absence of recovery-oriented events and services on campus and used a novel approach to address this problem. They created Students for Recovery (SFR), an initiative that brings together students who are in recovery or involved in recovery-oriented efforts through a wide range of social, recreational, and educational events.

An initial welcome reception, marking the formalization of the group, drew over 175 students, faculty, and university staff, as well as support from community members and businesses. This was followed by a series of social and recreational events, such as a bicycle tour, an arcade event, a Halloween dance, games hosted at local cafes and restaurants, and yoga practice. Educational events offered by the group have included a panel discussion of students in recovery who described their challenges in maintaining sobriety, an information table at the university health fair, and student guest lectures in various classes. In carrying out the educational events, the group has worked to build awareness of the significance of recovery-related issues, to help reduce

the stigma of recovery on campus, and to encourage university administrators to increase support for this at-risk group of students.

All events hosted by SFR are free and intended to be highly interactive and engaging to help facilitate the development of supportive social networks among all participants. SFR group members hold weekly meetings to plan and organize events. Members of the group also are engaged in various other activities, such as writing university-based grant proposals to fund the events, building relationships with other student groups and campus units to increase visibility and support, connecting with community businesses and restaurants to receive donations or discounted services, and maintaining an online calendar of events that includes SFR activities and local 12-step meetings. The group relies heavily on using various information and communication technologies for organizing and marketing events (such as text messaging, e-mail, and social networking sites). The group also has a faculty advisor and other university professionals who provide informational resources and technical assistance as needed. Some group members have used this group as a form of service learning by combining their group participation with an individualized learning plan.

Thus far, SFR has not encountered any unexpected problems in relation to relapse or other clinical problems among group members. This may be attributable to many members' having extensive experience in supporting other people who are in recovery. In fact, the group has served as an important resource for making highly individualized and effective referrals to local 12-step meetings and facilitating transportation to those meetings for new or potential members who are in recovery. The group also has discovered many local businesses that

are highly supportive of the goals of the group, and this network has helped to expand the recovery-oriented environment.

The group has encountered numerous challenges. The most significant has been the amount of time that group members need to invest in order to secure the necessary financial resources for organizing, marketing, and making events widely accessible to the campus community. These planning efforts take away from opportunities to enjoy and benefit from the events themselves. Moreover, group members volunteer their time in the face of other competing academic demands, as well as individual recovery needs, employment, and family obligations. As with any student group, turnover in membership is high by nature of time-limited academic programs. Thus a critical challenge the group members discuss and attempt to address relates to recruitment and sustainability.

Overall, SFR is an innovative grassroots initiative at a major university that is taking steps toward addressing a long-standing, serious problem. It is important for university administrators to be aware of the challenges that students in recovery face in the broader efforts of dealing with substance use problems on campus. Although student-driven initiatives are part of an effective solution, universities must make resources available to these students in recognition of the clear benefits to their recovery and to the university as a whole.

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