INDEPENDENCE CENTER

Los Angeles, California
Judith Maizlish – Executive Director
310-202-7102
judym@independencecenter.com
www.independencecenter.com

Visit by: Kristie Henley, November 8, 2007

While attending the IECA Conference Fall 2007 in Hollywood, CA, I decided to take some time to visit a local program. Independence Center is a mainstreamed residential program for young adults with learning disabilities. Residents stay at Independence Center for a minimum of one year. As Judy Maizlish, Executive Director, drove Nancy Masland and me over to the program, we discussed appropriate residents and the basics of the program.

Independence Center accepts young adults who struggle with broadly defined learning disabilities. Many have "labels" but basically lack concrete thinking. Judy explained that some residents have a low IQ, above the mentally retarded level, while others test in the gifted range. However, IQ doesn't matter as much as history and ability. Judy prefers to look at individuals rather than their labels. Approximately one-third to one-half of the students look and sound like they belong in normal society, which makes it harder for them to accept they have a disability.

Residents live in apartments spread throughout in a large, gated community, allowing them to live independently with support of the staff and other residents. The schedule is fairly strict with meetings and gatherings, but gives ample opportunity for residents to be alone and put their learned skills to the test. Each resident has at least one roommate in his/her apartment.

Shortly after we arrived at Independence Center's office, a resident came in to take us on a tour of the apartment complex. She was from a larger family, so adjusting to living in an apartment with only one other resident was a change for her. By the looks of her apartment, she was adapting quite well.

There are three basic components of the Independence Center program. The first focuses on Independent Living Skills. Independent Living doesn't just teach residents how to cook and clean, but how to use and manage time effectively and manage money. Residents learn to get and keep employment, attend meetings and group activities, budget accounts, track their money, fill out forms, etc.

Continued: **Independence/** pg 10

AGS
Adolescent Guidance Services LLC
We Treat All People with Dignty, Respect and Compassion
We Locate and Transport Missing Children and Runaways Nationwide.
Adolescent Guidance Services LLC has been in business since 1997.
Fully Licensed & Insured - CA Lic. # 15321
Staff trained in anger management and non-violent crisis intervention.
30 years combined experience transporting adolescents. Investigative services available.
Escort and Transport
Anger Management
Conflict Resolution
Agents in 36 States
Crisis Intervention
Buddy System
Aftercare Support Program
Consultations and Presentations Available on request

877-700-3300

Independence: Continued from page 9

The second phase focuses on Vocational and Educational components. We met with Dr. Marie Walbridge, Clinical Director and Vocational Coordinator, who works on the employment plan with all residents. Dr. Walbridge speaks with employers before residents apply for their jobs, prepares residents for application and interviews and, more importantly, teaches the residents how to keep their jobs. She assists them in finding jobs that will be most like their personalities and abilities to enhance the potential of success. We talked with a resident about her experiences with job related activities and she explained that the program was helping her discover her likes and dislikes, hobbies and abilities, and helping to match her with a part time job that would allow her to explore a career.

In addition to the Vocational component, Independence Center works with residents to further their education. Because of its location, Independence Center residents may work part time and/or attend one of the two community colleges. For those who do not wish to attend a local community college for a degree, the Venice Skills Center or a technical training program are appropriate for residents who need to learn to live within routines and schedules, and learn specific vocational skills.

The third phase of Independence Center focuses on "narrowing the gap." Meetings, groups and community activities help make life as normal as possible for the residents. They work on social skills such as entertaining guests and being a good host. Students set goals and work on problem solving and feedback with each other.

All activities at Independence Center are mandatory until residents are in the advanced stages of the program, unless the activity interferes with school or work. As residents advance, they also begin to do other tasks independently; such as attending outside activities and doing their own shopping and banking.

For residents who have completed the residential program, Independence Center offers an Outreach phase as well. Outreach residents live in their own apartments and have access to "life coaches" and other support services as needed.

As we finished our visit to Independence Center, Judy, Nancy and I sat in Judy's office discussing staff at the program. An intriguing part of the hiring process for "field staff" is that employees, all of whom have at least a bachelor's degree, must volunteer at the program for at least one week before being hired. This allows the Center to assess how they will fit in as well as determining how dedicated these staff members will be to the residents needs. They are then hired retroactively.

In 1983 Wilderness Treatment Center was the first program to successfully blend conventional treatment with a true wilderness expedition. Our in-patient center is located on a working cattle ranch is Northwest Montana. The setting is perfect for young men who can have a difficult time in the confinement of a conventional program. Treatment includes plenty of ranch work, group and individual therapy, educational lectures and films, attendance at AA/NA meetings in nearby Kalispell, plus a 16 to 21 day true wilderness expedition.



The First... The Finest!

As always, W.T.C. has a licensed Chemical Dependency Counselor present for the duration of every expedition maximizing the therapeutic value. They meet some pretty big challenges facing life without chemicals; a good foundation based on a spirit of success and an ever increasing self-esteem is a great beginning in the journey of recovery.

- 60 day Primary Treatment
- Medically Supervised
- Designed for males 14-24
- 12 Step Modality
- 4 ½ day Family Program
- Covered by most Insurance

200 Hubbart Dam Rd., Marion, MT 59925
406-854-2832 www.wildernesstreatmentcenter.com

Association for Experiential Education

Another intriguing component of Independence Center is their admissions process. Once staff has met the prospective applicant and received written reports about him/ her, the applicant is invited to stay for a three-day visit. Potential applicants stay those three days with a current resident, where they participate in meetings, groups and activities. Staff is also able to do informal assessments on academic skills, cooking and shopping and communication skills during this time. By the end of this three-day adventure, staff and residents discuss which applicants will be an appropriate fit for the program.

Independence Center is a 501(c)(3) corporation which is able to get grants to help pay program costs for families not able to pay the full cost. Although they are one of the least expensive programs in the country, the program is still costly. About one fourth of the families receive some amount of aid although no one gets a free ride. This helps ensure the family is dedicated to the success of the resident.

On our way out, Nancy and I met another student who was returning home after work. He greeted us at the gate and, not knowing anything about us, made excellent eye contact with a proud and gentle presence about him. We left the campus having a good sense of how Independence Center works with its residents with a feeling they were doing a great job for this particular niche.

THE CHILD CENTER

Rogers Memorial Hospital
Oconomowoc, Wisconsin
Mary Jo Wiegratz, Senior National Outreach Liaison
800-767- 4411
mwiegratz@rogershospital.org
www.rogershospital.org

Visit by Judith E. Bessette, EdD, January 8, 2008

Rogers Memorial Hospital in Oconomowoc (their lake country campus) has opened a specialized residential program that offers both diagnosis and treatment for children as young as eight experiencing complex behavioral and mental health problems. The program stay is flexible depending on each child's needs but averages four to six weeks.

Several years ago, Rogers in Oconomowoc successfully opened a program for 12 – 17 year olds. Peter Lake, MD, Medical Director at the adolescent campus told me that "educational consultants, families and other referral sources started asking about services for this younger group" and Rogers responded to the need.

The 10-bed program for children opened last April, offering a secure, supportive environment with a high

Continued: **Child Center/** pg 12

Unreadable history books foster ignorance of history. I recently spent a day at an Ivy League campus, where a professor informed me that entering students—the creme de la creme of our leading prep schools—think that the Middle Ages began in 1 A.D. This accords with the finding of surveys which show that college students can't place the Civil War in the correct century. All this ignorance—at a time when we have more professional historians than ever before. It might lead a disinterested observer to wonder just what we, as donors and taxpayers and tuition-payers, are getting for our money.

~ Max Boot

Education is, among other things, a process of shaping the moral imagination, character, skills and intellect of our children, of inviting them into the great conversation of our moral, cultural and intellectual life, and of giving them the resources to prepare to fully participate in the life of the nation and of the world. But today in education there is a threat afoot to which I do not need to call your attention: the threat of high stakes testing being grossly abused in the name of greater accountability, and almost always to the serious detriment of our children.

Senator Paul Wellstone (MN)

Child Center: Continued from page 11

staff to patient ratio. The new 37,000 square foot patient services wing gives much-needed breathing room to all of the programs on campus, catering to the educational and social needs of these little ones in particular.

Karin Beal, MEd, CYCP is Program Manager and Behavior Management Specialist for the program. Karin and Mary Jo Wiegratz from marketing were my tour guides. We started in the lobby of the new wing in a spacious reception area with several smaller waiting areas offering a sense of comfort and confidentiality to prospective patients and family members. In the Kubly Education Center on the second floor, kids can work at tables or computers in the classrooms, curl up in comfy chairs or even sprawl on the floor in the library. The new dining room and patio on the lower level offer patients a view of the outdoors year 'round and "al fresco dining" from late spring through early fall.

Part of the Child Center is in the main hospital building that has been on the grounds since 1908. The kids' rooms are all doubles – newly renovated and less institutional looking than in the past. Each room has a private sink and toilet, with private showers down the hall – used each day under staff oversight. I was intrigued by a large square of duct tape outside one of the rooms. I learned that it represents "part of the room" so kids with attachment issues (or other problems that cause them to think they have been forgotten if they are out of sight of the staff) can still be minding the rules during room time even if they are in the hall, as long as they stay in the taped-off area.

The group room, a former sun porch, was decorated very pleasantly with new wood-grained laminate flooring being installed the day I visited. Staff offices and individual therapy rooms completed the Center's layout.

Because it was a very rainy day, the kids were having recess in one of the two gyms on campus, playing pool, foosball or shooting baskets. In talking with them, I found that while some of the kids thought the food was great… others did not… but that all of them really like recess!

I observed an experiential therapy session with a remarkably calm, soft-spoken, task-oriented therapist, a behavior specialist and five children. After circling up, each person led the group in a stretch of some sort and then shared how they were feeling (rife with teachable moments like learning the difference between *being bored* and *feeling sad*.) The "game" they played next involved sharing

