

## Greetings from Our President

**Dr. Peter Hayden**



I'm so excited that we are back to having our

regular newsletter to share with everyone around the country what is going on here at Turning Point.

As you may know, my daughter Taylor was killed in the summer of 2016 by a stray bullet while in Atlanta, GA on a girls' weekend. I just want to let you know that my family and I are doing better. For more information see [www.taylorshayden.com](http://www.taylorshayden.com).

Today I want to focus on a personal experience I had this year. I underwent back surgery in January, and for 12 days my world shrank to 36 by 80 inches – the size of a standard hospital bed.

Within that hospital bed, I ate, I drank, I had visitors, I watched TV, and sometimes I was starting to hallucinate – and that's without drugs.

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## No Place Like Home

by Elizabeth Reed  
Chief Operating Officer



There's no place like home. Unless...

Remember *The Wiz* – our version of *The Wizard of Oz*? One of the best things that Dorothy learned was that there's no place like home. However, what if your home is unsafe? What if there are drugs everywhere or domestic violence or the place you are living changes every day because you are homeless and your "home" is sleeping in the park or under a bridge?

This is what home is for 95% of the people who come to Turning Point for care. Take note – they come not for **service** but for **care!** Just like you don't go to the hospital for service, you go because you need doctors and nurses to take care of you. Even if you're there because your arm hurts, they look at your whole body to figure out why your arm hurts.

Your soul may be whispering, "I can keep going with this pain in my arm," while fear is screaming in response.

Now think of substituting that pain in your arm with the pain you'd feel when it's two in the morning and you don't know where you are going to sleep.

Oftentimes the reason a person is homeless is Substance Use Disorder (SUD). They probably even know this has got to change, and big change is hard. But so is hiding from the truth.

There is no shortcut to fixing SUD or homelessness. But seize the day – you can walk through our door. The path to the life of your dreams lies just ahead. All you need is a simple plan that will bring it into focus.

When our clients leave, 90% of them have a place they can call home. They are sober and they are looking for employment. Our goal is to have them think, "There is no place like home."

**MISSION**

**VISION**

**SERVICE**

**SAVE  
THE  
DATE**

**Turning Point  
Honors Gala**

**April 20, 2018**

US Rep. Keith Ellison

Person of the Year

Ms. Patricia Carter

Employee of the Year

Mr. Marvin Clark

Client of the Year

Ms. Elizabeth Reed

President's Award

## Housing Programs Help Redirect Lives



**by Stephen Robinson  
Housing Division Director**

As an organization that has provided treatment for over forty-years to African Americans struggling with substance abuse disorders, we have continued to refine our service model so it meets the holistic needs of our clients through a culturally specific approach.

One of our many examples:

Mr. K Young came to Turning Point from Ohio, where as he says, "I came to Minnesota/Turning Point because I was struggling with a number of issues but my chemical use was my biggest problem. It was to the point where I knew I needed to get out of my environment, it was too easy to get high and ultimately, in trouble."

Mr. Young moved in to Ms. Bea's House after completing our 90-day inpatient treatment program. New clients are given a needs assessment and a goal plan is established. However, maintaining their recovery is job one. Staff introduced him to members of the clergy and escorted him to several aftercare groups and referred him to an anger management group to get him started in a new environment.

Mr. Young received one-on-one case management and consultation bi-weekly, 101-level computer training to improve his skills, employment search help, and regularly attended culturally based activities.

Staff helped him secure part-time work with a local construction company as a laborer where he was eventually hired on full-time. He has recently gotten married, and become a first-time homeowner. He often attends our Friday evening Aftercare group and states he is committed to maintaining his relationships with many of the people he met through Turning Point staff.

"I am happy, stable and sober; good friends, a wonderful woman and Turning Point have helped me get there....thank you."

From January 1, 2016 to date 117 clients have been discharged from our board and lodge facility, known as Ms. Bea's House. Homelessness is the main criteria for admission, and 86 (73.5%) of those discharged left due to securing permanent housing. Thirteen of those (15.1%) moved directly into our long-term Supportive Housing (GRH Demo Project) or low income housing buildings.

As the needs of the African American community have continued to grow, so have Turning Point's services. We are part of and invested in meeting those needs in this community.

## SUD Reform Changes Treatment System Approach

**By Elizabeth Reed, Chief Operating Officer**

About five years ago Turning Point and our Board of Directors made the decision to create the Culturally Specific Service Center (CSSC). It is through the CSSC that we provide supportive services to our clients, such as HIV education, legal consultations, mental health care and Aftercare.

Although we received no funding for the services provided by this Division, we knew if we didn't address the disparities African Americans struggle with every day, people that go through treatment here might go back to abusing drugs or alcohol.

Now with the 2017 Substance Use Disorder (SUD) Reform, insurance companies are willing to fund those services.

Reform efforts support the transformation of the SUD treatment system from acute, episodic care to a longitudinal model of care. This permits SUD to be treated and managed like other chronic health conditions.

Think of it as if you were treated for a heart attack and your doctor gets your heart pumping again but fails to continue to monitor your health or work with you on what you need to do to ensure you don't have another attack.

Sometimes when you know it's the necessary thing to do and you go ahead and do it just because it's needed, you get the satisfaction of knowing that your investment may help someone.

*"We save lives, one life at a time."*

## Client Rebuilds His Life at Turning Point

### by MCO Communications

When society determines who you are, whether good or bad, sometimes you live up to that expectation. That's how Turning Point client Getonn Harbin characterizes the many years of his life he spent addicted to drugs and in and out of crime.

"What I learned while getting clean was that the perception of me was not who I was. Society told me who and what I should be," said Getonn. "Going through treatment [at Turning Point] gave me the opportunity to repaint my whole picture. I got focused, clean and changed my perception of myself."

Getonn went through Turning Point's Inpatient

Chemical Health program almost twenty years ago. He was in his mid-twenties, and stayed clean for a few years. But he relapsed after legal trouble led to his name in the news and his face in the public spotlight. No longer feeling like he knew how or where to fit in, he turned to the once familiar ... drugs.

After more than a decade, Getonn called on Turning Point for treatment again in 2014. He credits much of his success to the supportive housing that he lived in for almost two years following treatment. Ms. Bea's house is a 32-bed housing facility with case management, counseling and support services. Turning Point's maintains three housing

facilities and provides supportive and low-income housing to clients and community members.

"We provide housing options that help clients, like Getonn, transition from inpatient treatment to a safe and sober living environment," said Stephen Robinson, Director of Housing, Turning Point. "Our team is available around the clock to help clients maintain their sobriety and prepare for independent living."

"When I got into the transitional housing at Ms. Bea's, that's when the rubber hit the road for me," says Getonn. "I wasn't unique here—I fit in. By being at Ms. Bea's, I learned to live with and around people. That's the place where I rebuilt my



*Turning Point client Getonn Harbin shares his story about how chemical health treatment helped him repaint the picture of his life.*

*Photos by Walter Marmillion*

foundation."

From not fitting in to finding a community that fully supports him, Getonn now helps facilitate sobriety meetings and is active in Narcotics Anonymous. In his day-to-day encounters with people struggling with addiction, he tells them that no matter what they think they can let go of their addiction.

## Greetings from the President — continued

So I'm lying in this bed, and my world was revolving around me, but my foundation had become that hospital bed.

Modern hospital beds are very sophisticated pieces of equipment. They are set up for the patient to be able to do most anything without getting out of bed – it can weigh the occupant, and even be set to alert staff if the patient tries to get out of bed.

As you can imagine, I found these circumstances very restrictive, and frustrating. Just as in life, the lack of control was very challenging to someone used to being in charge of their own life.

The change came for me when I realized my foundation

was not really that hospital bed. My own recovery experience taught me long ago that my foundation is to "let go, and let God."

That attitude change allowed me to follow instructions from my medical team. It allowed me to start healing. It allowed me to be more cooperative with my family and friends. And finally, it allowed me to recover.

I'd like to thank my Staff and Board, who carried on so that I could let go and let God take care of Turning Point in my absence. While I wouldn't wish anyone to be restricted to a 36 by 80 hospital bed, the experience reinforced to me the importance of recognizing that I am not in control of my life, and need to let go and let God every single day.

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**TURNING POINT**

AN AFRICAN AMERICAN ORGANIZATION

SUPPORT SERVICES | HOUSING | CHEMICAL HEALTH | TRAINING

*Meeting the needs of our community, beginning with chemical health.*

## Thanks to our Donors

Turning Point extends a warm "Thank You" to all those who have made donations in 2017.

- Mt. Olivet Missionary Baptist Church
- Ms. Michelle Miller
- Mrs. Shearise Austin

Several employees have also made financial contributions in 2017:

- Zedrick Blake
- Jeff Cayo
- Michelle Edwards
- Dr. Peter Hayden
- Woodrow Jefferson
- Dorothy Jones
- Kim Weaver
- Cedric Williams

## Resources

### Residential Treatment or Outpatient Treatment

If you are seeking chemical dependency treatment, call Chemical Health Division Director Greg Jones at 612-520-9181

### Housing

If you are seeking housing, call Housing Division Director Stephen Robinson at 612-520-9190.

### Aftercare

If you are seeking continued support in recovery, there is a weekly support meeting at Turning Point Fridays at 7 p.m. in room 142.

## Training Seminars and Services

Turning Point offers cultural training opportunities with the educational philosophy that "one size does not fit all."

Our trainings are individualized based on the specific needs and barriers of each student group, with topics such as communication, compassion fatigue and avoiding unintentional racism.

For more information or to schedule a training consultation, please contact:

**Elizabeth Reed**

*Chief Operating Officer*

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