



What is the NAMI Peer-to-Peer Education Program?

NAMI Peer-to-Peer is an 8-session recovery-focused course for adults with mental health conditions.

- Free and confidential
- Held weekly for two hours
- Led by peers with mental health conditions
- A great resource for information on mental health and recovery
- Offers respect, understanding, encouragement and hope
- Builds on the strength and resilience of participants

NAMI Franklin County offers NAMI Peer-to-Peer free of charge to participants via Zoom. The Zoom Meeting and password will be supplied after participant registration is received. Visit www.namifranklincounty.org for class dates and registration information.



Participant Perspectives

“NAMI Peer-to-Peer is uplifting, life-saving and an eye-opening experience that changed how I see myself.”

“The biggest thing I gained from this class was to become my own advocate and best friend.”

“Seeing my peers’ strength and dedication to their recovery was personally meaningful.”

Contact us to register for NAMI Peer-to-Peer!



National Alliance on Mental Illness

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About NAMI

NAMI, the National Alliance on Mental Illness, is the nation’s largest grassroots mental health organization dedicated to building better lives for the millions of Americans affected by mental illness. NAMI Franklin County is an affiliate of NAMI Ohio. NAMI Franklin County and dedicated volunteer members and leaders work tirelessly to raise awareness and provide essential education, advocacy and support group programs for people in our community living with mental illness and their loved ones.

Peer-to-Peer Participant Registration 2026

This 8-week, unique, experiential recovery program is for people living with mental illness interested in establishing and maintaining their wellness and recovery.



Classes are held on Zoom

- Winter 2025-2026** - Tuesdays, Jan 6, 2026, thru Feb 24, 2026, from 6 to 8 p.m.
- Summer 2026** - Tuesdays, June 16, 2026, thru Aug 4, 2026, from 6 to 8 p.m.
- Fall 2026** - Tuesdays, Sept 8, 2026, thru Oct 27, 2026, from 6 to 8 p.m.
- Winter 2026-2027** - Tuesdays, Jan 5, 2027, thru Feb 23, 2027, from 6 to 8 p.m.

Please PRINT the following information clearly for proper processing:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Diagnosis: _____

Emergency Contact Name (not your name) _____

Emergency Contact Phone Number _____

- 1) Why are you interested in taking the Peer-to-Peer course?
- 2) Will you agree to keep confidential the disclosures of other participants? **Yes** **No**
- 3) Will you agree to speak to others only of your own experiences? **Yes** **No**
- 4) Eight weeks is a substantial time commitment for a course. Do you foresee any attendance problems?
Yes (please explain below) **No**
- 5) Are you currently in treatment with a psychiatrist, therapist, or other health care provider?
Yes **No**
- 6) Do you have any chemical sensitivities, special needs, allergies we need to be aware of?
Yes (please explain below) **No**

How did you hear about this class? _____

Thank you for taking the time to fill out this registration form. Please return it to:
NAMI Franklin County / 1225 Dublin Road, Suite 050 / Columbus, OH 43215
Phone: 614-530-4554 / FAX: 614-501-6267 / Email: laurita.barber@namifc.org