

THE FRONT DOOR

Mental Health America of Northeast Indiana Newsletter

Spring 2017

The Case for Crisis Intervention Team Training

*By Dottie Davis, Vice President of the Board of Directors
Director of Security at Fort Wayne Community Schools*

In recent years, communities across the country have been working to create open dialogue with the law enforcement agencies that protect and serve them. I find it likely that media coverage following use of force and police-involved shootings, and the resulting concern from citizens, act as the catalyst for many of these conversations.

I am sure that communities working to build stronger relationships with their police have created a list of solvability factors. I am not sure that they understand the importance of investing in training for the officers when dealing with people who are experiencing a mental health crisis. They may not see the connection between the treatment of this population and improving community relations.

Nearly two decades ago the Mayor of the City of Fort Wayne put together a task force to address how law enforcement responded to persons with mental illness. Approximately twenty individuals with a variety of backgrounds sat around a table and expressed their concerns about the lack of training and the negative interactions the police were having with their loved ones, friends, or members of the community who lived with mental illness.

As a result of that task force, a tradition of mental health training began in the Fort Wayne Police Department (FWPD). Since 2000, Fort Wayne has been blessed with law enforcement officers trained in the Memphis Model Crisis Intervention Team (CIT) Program. CIT training focuses on de-escalation skills and learning to communicate effectively with someone who is having irrational thoughts or feelings or exhibiting erratic behaviors.

Annually, FWPD officers respond to approximately 1,500 calls for service involving people experiencing a mental health crisis. The vast majority of these individuals are found to meet the criteria for a 24-hour immediate detention, as they pose a danger to themselves or others, and are immediately transported for a psychiatric assessment.

Of those 1,500 incidents, rarely is force utilized or is the person arrested for their behavior. Prior to CIT training many individuals with mental illness were incarcerated for disorderly conduct, public intoxication, or resisting arrest. Since the inception of the CIT Program, FWPD has annually had a less than 1% arrest rate on their calls for service when a CIT-trained officer responded.

Providing officers this skill set has shown to improve relationships with citizens and the mental health community. I would encourage cities and counties to add CIT training to their list of solvability factors. It made a big difference in our community, and it can do the same for communities across the country.

"I am mentally ill. I can say that. I am not ashamed of that. I survived that, I'm still surviving it, but bring it on. Better me than you."

-Carrie Fisher, 1956-2016



Dottie Davis

In This Issue

- From the Executive Director
- Out and About
- Guardianship: More than Advocacy
- Resident Spotlight: Beth
- April is Fair Housing Month
- Welcome to the Team, Kelly & Krista
- When Mental Health Conditions Affect More than the Mind



We Offer Hope

From the Executive Director



In March, many individuals in our area have their mind on spring, and the warmer weather and budding plants that come along with it. But at MHANI, we have our minds on something else—disabilities.

That’s because March is Disabilities Awareness Month. 1 in 5 individuals in America have a disability—that’s the same number of people who have a mental health condition. This means disabilities affect just about everyone, whether you have a disability or know

someone who does.

There is still much to be done regarding disabilities awareness. Sometimes, non-disabled individuals have a hard time understanding all the ways that a person’s disability affects their daily lives. People with invisible disabilities (so called because they cannot be seen by an outsider; for example, a learning disability or chronic pain condition) continue to face suspicion from people who don’t think they have a disability and are “faking” it to get “special treatment.” We can all do more work to better understand disabilities and their effects.

In addition to serving those with mental health conditions and symptoms, MHANI also serves individuals with disabilities in a variety of ways. Our Kids on the Block™ program teaches non-disabled children about the disabilities that may affect their peers, and how to accept their differences. And our Adult Guardianship Services provide guardianships to individuals with intellectual and physical disabilities who are unable to make medical decisions on their own.

These guardianships are integral to ensuring that individuals who don’t have family members or friends to advocate on their behalf still get the best possible care within their home and therapy settings. Without a guardian to act within their best interests, these individuals would be highly susceptible to abuse and neglect.

If you or a loved one has a disability, the AWS Foundation’s Disabilities Expo is a great way to have inclusive fun, learn about local resources, and meet a variety of other individuals with disabilities—all for free. The Expo takes place on May 13th from 10 am to 3 pm at the Coliseum.

Lisa Smith, Executive Director

Help Others!
 Have you faced a mental health challenge in the past and want to help others struggling with their mental health?
 You can become a peer support volunteer! Contact us at 260-422-6441 or MentalHealthFrontDoor.org!

Trainings & Classes

Lunch & Learn

5/23/17

12 pm—1 pm

Citizens Square Omni Room

Support Groups

Parenting

1st and 3rd Mondays

6:30—7:30pm

Aboite Branch—Allen Co Public Library

5630 Coventry Lane, Ft. Wayne

Teens Helping Teens (13-18)

Contact the office for date, time, and location details

Phone: 260-422-6441

Email: info@mhaac.com

Adults with ADHD

1st Thursday @ 6:30 pm

3rd Friday @ 11:30a-1p

2200 Lake Ave. Suite 105

Adults with Anxiety

2nd and 4th Wednesdays

6 pm

Aboite Branch—Allen Co Public Library

5630 Coventry Lane, Ft. Wayne

Guardianship Corner

What is Guardianship?

Guardians advocate for incapacitated individuals who cannot make sound decisions on their own. They ensure that these individuals are being properly cared for by working closely with the interdisciplinary team caring for the individual.

Interested in Volunteering?

Do you like working with elders or individuals with disabilities? Do you enjoy talking to and connecting with these unique individuals?

Consider becoming a volunteer advocate at Mental Health America of Northeast Indiana. You will help our professional guardians ensure the safety and protection of vulnerable adults, and make a difference in the lives of our clients.

Please contact us at (260) 422-6441 or info@mhaac.com to learn more.

You can also apply online at MentalHealthFrontDoor.org/support/volunteer



Out and About



One of our clients, Willie, had a great time at Crazy Pinz in December. He and one of his housemates attended a friend's birthday party there. Here he is pictured on one of the bumper cars.

Guardianship: More than Advocacy

By Robin Morrow, VASIA Guardianship Coordinator

Late last year, I joined the Guardianship team at MHANI, excited to help at-risk clients and to advocate for their wellbeing. I quickly learned that Guardianship is more than advocacy.

My first client was referred to MHA from a nursing home. I had worked in Long Term Care for most of my career. I was excited because I would be able to start with a client with health issues. I knew about health issues. One Monday morning, shortly after being appointed his Guardian, I received a telephone call from the facility where he resided. My client had passed away, quite unexpectedly.

I met with the funeral home and planned his funeral. I had never planned a funeral before. My client was Burmese and his religious preference was Buddhism. With the help of the local Temple, my client was able to have a beautiful Buddhist funeral. Monks were present to perform Buddhist last rites and delivered a sermon appropriate to the occasion.

I later got a referral for a gentleman who needed end of life decisions. His family was unable to agree on the course of his treatment. The physician explained my client's prognosis was poor and recommended Hospice. My client was admitted to a facility on hospice and my client passed away three days later. His family and I planned an amazing Harley Davidson funeral with a write on casket. His friends and family wrote farewell messages on the foot of the casket with white markers. Friends and family shared stories about my client's life and adventures taken with him. What a beautiful celebration of his life.

When I became a professional guardian, I hadn't thought about the importance of decisions after the passing of my clients. I quickly realized that the celebration of life after death is as important as advocacy and quality of life for the living.

Donations Needed:

- Gently used clothing in all sizes
- New socks and undergarments (including bras)
- Twin-size sheets
- Pillows
- Towels
- Paper products

What is Cedars Hope?

Cedars Hope offers safe, affordable, and supportive housing for homeless women living with mental illness in addition to support services to men living off the premises. Cedars Hope's supportive housing is organized into a group living environment that encourages peer support and community engagement.

Our goal is to help the individuals we serve break the cycle of psychiatric crisis and homelessness, increase self-sufficiency, and learn to self-manage the symptoms of their mental illness and physical health challenges.

Now housing 16 residents.



CEDARS HOPE

Resident Spotlight: Beth



This quarter's resident spotlight is shining on Beth. She has been at Cedars Hope for almost six years.

Like everyone else she enjoys having fun and doing fun activities in her spare time. One of the activities Beth enjoys doing is reading books and playing solitaire. She likes to

socialize by hanging out with her housemates and she enjoys spending time with her boyfriend. Beth is very outgoing because she likes to volunteer. The place she enjoys volunteering at the most is MHANI.

Beth is a proud mother of three beautiful adult daughters, Sara, Lisa, and Anna. When Beth is not busy she likes to watch TV and listen to music. Her favorite channel to watch would be the National Geographic Channel. The song Beth likes to relax to is "Drift Away" by Dobie Gray. Beth's favorite quote of all time is "Music is the breeze on which my spirit soars free. Listen to my song and fly away with me."

April is Fair Housing Month



EQUAL HOUSING OPPORTUNITY

April is Fair Housing Month. The month celebrates the passing of the Fair Housing Act in 1968. The Fair Housing Act protects individuals from discrimination when they are renting, buying, or obtaining financing for any housing.

Unfortunately, despite the Fair Housing Act, discrimination still occurs. Individuals with a mental health condition may find it especially difficult to secure housing. Misunderstanding about mental health conditions can make renters and individuals

selling their homes uncomfortable renting or selling to someone they know has a mental health condition.

Because of this, individuals with a mental health condition might have a hard time finding affordable housing. If an individual has become homeless due to their mental health condition, getting back on their feet can be even more difficult.

Cedars Hope is proud to provide affordable and secure housing to the most vulnerable women in this situation. Through an intentional group setting and supportive atmosphere, Cedars Hope provides women with severe mental illness a place to call home.

About Us

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**Serving Allen,
Adams, DeKalb,
Huntington,
Kosciusko,
LaGrange, Noble,
Steuben, Wells, and
Whitley counties.**



Welcome to the Team!

Kelly Ellis, Community Services Coordinator: My name is Kelly Ellis, and I am excited to be joining Mental Health America! I'd been working with MHA as an independent contractor for approximately 8 months and jumped on the opportunity to join the team full time! My past experience includes running an emergency services department, juvenile corrections, providing services on both acute and sub-acute inpatient units, and home/community based rehabilitation. I earned a Bachelor of Arts in psychology in 2009 and a Master of Science in forensic psychology/mental health law in 2013. I look forward to the challenges to come and collaborating with such a rockstar team!

Krista Walker, Guardianship Coordinator: I am so excited that my journey has brought me to the front door of Mental Health America. I am thrilled to work with an agency who has served the community well for so many years. I have a Bachelor's degree from Indiana University, and my study of focus has been psychology. I am also a certified Life Coach. I am looking forward to using my education and experiences to advocate and serve individuals in the community along with the MHA team.

When Mental Health Conditions Affect More than the Mind

The human body is a system. And like all good systems, everything is connected. Everything talks to each other. In the case of the human body, for example, the brain talks to all your muscles so you can open and close your mouth, walk across the room, and pick up items.

Therefore, it's not surprising that mental and physical health are closely connected. But people don't often think of it that way—for a lot of people, mental health issues like depression and anxiety are entirely separate problems from joint pain and heart disease. This is reflected in the fact that you often have to go to two completely different facilities to be treated for depression and heart disease.

But the two are much more linked than we tend to think. For instance, when someone is depressed, they may experience body aches, fatigue, and changes in appetite. These are all *physical* symptoms of a *mental* illness. And on the other side of the coin, someone with a chronic pain condition may experience mental illnesses like anxiety or depression in direct response to the challenges he or she faces with a chronic condition.

Individuals with bipolar disorder have also noticed physical changes when they cycle between depression and mania. Each state has a distinct look (that can even alert them to the fact that they are depressed or manic).

This inter-connectivity can cause some issues. If a doctor sees a patient for a physical illness, they may miss the mental symptoms that individual is experiencing. The appointment is focused on the physical symptoms, when really the illness may cause issues with mental health as well.

Integrated care is a developing solution to this issue. The integrated care movement works towards exactly what it sounds like - integrating general and behavioral healthcare into one coordinated system. Much like the system that is our bodies, integrated care is meant to link physical and mental healthcare in a way that will make sure no illness is missed. It will take a lot of work, but it could mean that individuals with co-occurring mental and physical illnesses can get the treatment they need for both kinds of conditions.



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GREATER FORT WAYNE INC.

SAVE THE DATE

Evening of Champions

August 9, 2017, 5-8 pm

Parkview Field, Lincoln Event Center

Join us for this special evening to celebrate the *Champions* for mental health and recovery!

**Silent & live auction
Hor d'oeuvres & cocktails
Special Guests & Awards**

More information will be coming soon at
MentalHealthFrontDoor.org

Contact Us

Mental health advocates offer mental health support and information about local resources in northeast Indiana.

Mental Health America of Northeast Indiana
2200 Lake Ave Suite 105
Fort Wayne, IN 46805

(260) 422-6441
info@mhaac.com

Visit us on the web at
mentalhealthfrontdoor.org

