



Mental Health Association of Rhode Island

Advocating for the Mental Health of Rhode Island Citizens Since 1916

The Rhode Island Affiliate of Mental Health America

The National Institute for Mental Health - Rhode Island Outreach Partner

Member of the Fund for Community Progress

Winter 2009

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* As of October 15, 2008

Protect Your Mental Health In Difficult Times Stress and the Economy

As we experience the worst economic downturn since the Great Depression, we need to explore many different ways of addressing this crisis. This includes tools to promote and protect individual mental health, and resources and information to help people manage money and debt.

Evidence is strong that economic uncertainty and recession increases the rates of psychiatric symptoms and demand for services. Increases in suicidal behavior and suicide are also associated with poor economic times as are measures of family disruption such as child abuse. In the 2008 *Stress in America* survey, conducted by the American Psychological Association, 80% of people reported that money and the state of the economy are two of the top sources of stress they are experiencing. To be successful the strategies our nation undertakes will need to include a focus on the immediate and long-term mental health consequences our families and communities are facing in their reactions to the economic downturn.

Additionally, many of the factors that help to create a recession are psychological, relating to the individual's confidence in his/her future economic well being with subsequent changes in consumer behavior. In November 2008, the Gallup-Healthways *Well-Being Index*,TM which surveys 1,000 people each day, found the average number of "struggling" Americans hit 60%, a rise of 14% from the beginning of 2008. The *Index* reflects both how people view their lives up to now and how they are envisioning their prospects over the next five years.

It is okay to get help! Persons who become ill as a result of the increasing economic pressures and uncertainties must be assisted in identifying and obtaining the help that they need. Early treatment improves outcomes.

Our role is to link individuals to formal treatment, as required, it as well as to other informal community support resources that individuals, families and employers can use to more effectively manage reactions to economic uncertainty and thereby preserve and improve health and productivity.

Remember-Live Your Life Well!

Vivian G. Weisman
Executive Director

From the Desk of the President

It's a daunting time we live in. So many things interfering with our lives: lack of money, job losses, and costs of everything rising out of sight. This is not a good time to ask for your help, but we must. As with just about every organization, we need funds to keep us going. Now let me tell you what the Mental Health Association of RI is doing. In addition to special project staff, we have our two full-time employees and a part-time accountant. We have some of the smartest and most dedicated members of our Board who are actively looking, searching and examining for ways to make things better for people with a mental illness. You will see their updates in this issue.

Under the direction of Dr. Joseph Bevilacqua, our Corrections Committee, in conjunction with other organizations, and the people at the Department of Corrections, MHA is looking for what would help and make a difference in the lives of those mentally ill persons who are incarcerated or involved in the judicial system. There are many, too many.

Our Children's Committee, led by Julia Steiny, is also examining the needs of children with problems that could potentially put them in the mental health system. Yes, we are trying to save them and take care of those who have already arrived in the systems.

Other Board members lead committees actively supporting lobbying and speaking out on behalf of those with a mental illness.

This is a plea for your help. As I stated earlier we need money, but we also need your help, your voice to all when there is need for it to be heard by those in power who govern and disburse the funding for services. The louder we become the more difficult it will be for them to ignore or turn away. Whatever your interest we have a place where you to can help. It's not all work because the successes are truly joyful. Please come on board. Call me at 401-726-2285

Scotti DiDonato
President

Mental Health America News

About Mental Health America: Celebrating 100 years of mental health advocacy, Mental Health America is the country's leading nonprofit dedicated to helping all people live mentally healthier lives. With our more than 300 affiliates nationwide, we represent a growing movement of Americans who promote mental wellness for the health and well being of the nation -- everyday and in times of crisis.

In 2009, we will mark a century of achievement with a yearlong Centennial Observance: "Celebrating the Legacy. Forging the Future."

ALEXANDRIA, Va., Dec. 15 -- Mental Health America, today announced the launch of its Centennial Year: "Celebrating the Legacy, Forging the Future." The 100-year history of Mental Health America is the remarkable story of one person who turned a personal struggle with mental illness into a national movement and of the millions of others who came together to fulfill his vision.

Founded in 1909 by Clifford W. Beers, a young businessman who experienced firsthand the treatment of individuals with mental illness, Mental Health America and its over 300 affiliates nationwide have a 100-year record of achievement advancing the cause of people with mental health issues. The National Committee for Mental Hygiene, as it was called in the early years, was the first association of its kind and the beginning of the organized mental health movement in America.

"Our groundbreaking work has transformed how the country approaches mental health care," said David L. Shern, Ph.D., president and CEO of Mental Health America. "The recent passage of mental health parity is a milestone that builds on our history of advocacy. Now we must move on other fronts so the nation approaches the issue of mental health with the same urgency as other health problems. Good mental health is fundamental to the health and well-being of every person and of the nation as a whole."

Mental Health America will continue its vital work into a new century to end discrimination against persons with mental illnesses, increase research into the causes and cures of mental illnesses and expand access to effective, high quality treatment and prevention programming.

The yearlong anniversary will recognize major accomplishments, highlight the organization's continuing work and focus on the challenges and needs of Americans with mental health and substance use conditions.

Over the course of a century, Mental Health America led the way on major advancements and improvements in research, prevention, and treatment surrounding mental healthcare.

Major accomplishments include:

-- Convened the First International Congress on Mental Hygiene in Washington D.C. (1930)

-- Advocated for passage of the "National Mental Health Act," which created the National Institute of Mental Health. (1946)

-- Launched Mental Health Week (which eventually became May is Mental Health Month) with the Jaycees to educate Americans about mental illness and mental health. (1949)

-- Commissioned the casting of the Mental Health Bell from chains and shackles that restrained people with mental illnesses in decades past. (1953)

-- Convened the National Leadership Conference on Action for Mental Health. (1962)

-- Supported passage of the "Community Mental Health Centers Act" which called for deinstitutionalization and increased community services. (1963)

-- Advocated for inclusion of mandated mental illness services in Medicare. (1966)

-- Successfully demanded that a "Have you ever been mentally ill?" question be removed from federal government employment forms. (1974)

-- Helped to form the National Alliance for Research on Schizophrenia and Depression (NARSAD), a foundation formed with the purpose of raising private sector funds to support research on mental illnesses. (1985)

-- Promoted passage of the Protection and Advocacy for the Mentally Ill Act by Congress. (1985)

-- Organized the National Action Commission on the Mental Health of Rural Americans regarding the delivery of mental health services to citizens living in rural areas. (1987)

-- Played a leading role in the development of the Americans with Disabilities Act, which protects mentally and physically disabled Americans from discrimination. (1990)

-- In conjunction with the Congressional Black Caucus and the National Institute of Mental Health, organized the first comprehensive conference on The State of Mental Health and Mental Illness in Black America. (1994)

-- Helped secure passage of the "Mental Health Parity Act," the first federal legislation to bring more equity to health insurance coverage of mental health care and implementation of parity in mental health insurance coverage for 9 million federal workers and their families. (1996-1998)

-- Participated in the first-ever White House Conference on Mental Health. (1999)

-- Successfully advocated against the death penalty for juvenile offenders, resulting in a landmark Supreme Court ruling that removed 73 individuals from death row. (2005)

-- Along with a coalition of mental health agencies and advocates, succeeded in getting the Mental Health Parity Act signed into law. (2008)

What's Happening at Mental Health Association of Rhode Island

ACCESS RI

(Accessing Community Care & Effective Services & Support)

ACCESS-RI, a program of the Mental Health Association of Rhode Island serves people experiencing chronic homelessness who have a diagnosis of mental illness and/or substance abuse. ACCESS-RI has had a successful winter thus far. Currently, we have 31 Clients on our caseload. In the past three months, we have helped find housing for 3 clients who were currently homeless, 15 have maintained their housing, 2 more individuals received Supplemental Security Income through the SOAR program, 2 Clients have graduated the program, and we have taken on 4 new clients as well.

The Residence at Garden Street, which houses 6 formally homeless men has been honored with the Audrey Nelson Community Development Achievement Award. "This award recognizes exemplary uses of CDBG, HOME and other community development funds, and particularly those programs that address the needs of neighborhoods and families". Nine programs were honored with this award across the United States. The recipients will be honored at a luncheon held on Friday, January 30, 2009 at The Liaison Capitol Hill Hotel located in Washington, D.C. ACCESS-RI provides intensive case management for 4 out of the 6 beds at the Residence at Garden Street.

*Sheryl Marshall
Program Director*

Corrections Committee

The committee met with A.T. Wall, Director, Robert Richman, Deputy Director, and Dr. Fredric Friedman, Director of Rehab Services, in an effort to fully understand the treatment of persons with mental illness who become involved with the prison system. With this knowledge our January meeting is to access what we learned and make plans for how we want to further continue in our efforts working with the Department of Corrections to ensure care of those incarcerated that have a mental illness, and more fully explore the community connections between the Department of Corrections, the department of Mental Health, Retardation and Hospitals, the Court System and the Community Mental Health Centers.

*Joseph J. Bevilacqua, Ph.D
Chair, Corrections Committee*

Children's Mental Health Committee

The Children's Committee is continuing to identify what information would be most useful to parents who are struggling with no information and how to get this important information to them. These are big issues, but we don't know who else is taking them up, and few consider parents as offering viable solutions to problems with kids.

They seem like powerful, but neglected allies in the fight to improve children's mental health. Please contact Julia at juliasteiny@cox.net if you'd like to join the committee. The committee would be delighted to include you. We also welcome any materials you think would be useful as well as issues you'd like included as part of the agenda. Meetings will be the second Wednesday of the month at 5:30 at 729 Hope Street, Providence.

*Julia Steiny
Chair, Children's Committee*

Global Medicaid Waiver

The devil is in the details. In the coming months we will learn details of the global waiver that were not known or evidenced during about twenty hours of hearing before the house and senate finance committees of the general assembly. January 19th is the date the waiver takes effect, but implementation will be delayed for two weeks so that the legislature can pass a bill that will in some respects put the legislature in place of the federal government. The governor will not be able to make changes in beneficiary eligibility, benefits, overall healthcare delivery systems, payment methodologies or cost sharing, "without the express approval by a legislative body..." states the proposed bill. But, what will be the role of the healthcare community in this process? What does all this mean for the care and treatment of the mentally ill in Rhode Island

The Mental Health Association of Rhode Island, the National Alliance for the Mentally Ill and the Rhode Island Council of Community Mental Health Organizations, to name a few, must exercise their advocacy roles to insure that the thousands of sufferers from mental illness are fairly treated in spite of what looks to be a massive bureaucratic imposition on service delivery. With the legislature and the governor assuming what once was the authority of the federal government over Medicaid expenditures, now capped over a five-year period, let us assess and evaluate how services are affected and make our voices heard at the appropriate times on behalf of the people we represent. We can do no less than that at such a critical point in the evolution of funding practices affecting service delivery to the mentally ill!

*Richard C. Antonelli
Chair, Community Mental Health*

May is Mental Health / Programs

Planning is well underway for our 2009 state activities in observance of May is Mental Health Month. Our committee membership represents organizations throughout Rhode Island, and includes providers, consumers, advocates and family members. The Kick-off event will take place on Thursday, April 30 at 1pm in the State Room of the State House, and will reflect our theme for this year "Live Your Life Well - Thriving in the Community." We are delighted that Barbara Morse-Silva, Health Reporter at NBC 10, has accepted our invitation to be Mistress of Ceremony. Butler Hospital has once again offered to provide refreshments, and A New Leaf will again be selling their beautiful "Message of Hope" bouquets throughout the month. The event is free and open to the public, and promises to be an exceptional event with inspiring and diverse messages. A calendar of statewide events will be available at the kick-off.

Earlier on April 7, 2009 we will be hosting a community forum at the Mental Health Association with Dr. Philip Wang, MD, DPH, Director of Research Intervention and Services at the National Institute of Mental Health. Dr. Wang will be addressing the latest in research and best practices in mental health treatment, including the integration of mental health care and primary health care, access to services for children and families, the rising number of uninsured, mental health parity and the Rhode Island Global waiver. More detail and registration information will be available soon, along with our May events.

Our goal in all these events continues to be to educate and enlighten our community on the importance of good mental health and effective treatment for mental illness. Hope you will be joining us and helping us to get the out the word!

*Christine Brown, Chair
May Is Mental Health Month & Program Committee*



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Upcoming Events
2009

April 7th

Phillip Wang, M.D., Dr.P.H.

Director of Division of Services and Intervention Research
 National Institute of Mental Health
 (Time & Place to be announced – call for information)

April 30th

Kick-off of May is Mental Health Month

RI State House
 Governor's State Room - 1:00pm
 Calendar of Events for the month of May available
Free & Open to the public

Visit us on the Web
www.mhari.org

Join the Mental Health Association NOW
 Help us promote Mental Wellness & Well Being

Membership

Corporate	\$500 <input type="checkbox"/>	Individual	\$40 <input type="checkbox"/>
Family	\$ 75 <input type="checkbox"/>	Other Gift	\$ ____

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***Please remember the Mental Health Association of RI
 in your Fund for Community Progress, United Way of RI
 or SECA workplace campaign.***



Give your Heart in three ways this Valentine's Day

Remember your Sweetheart and Support

A NEW LEAF FLORIST
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service florist*

Valentines Day Specials
One Dozen Long Stem Red Roses -
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Large Sweetheart Cookie in Tin
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***Give a donation in honor, or
in memory of a loved one.***

**Mental Health Association
of Rhode Island**

401 726-2285

A Successful Outcome

*Susan Heffner, LICSW
Probation Officer II*

Approximately one year ago, Paula W., a middle-aged Native American woman, entered the court probation office. She had walked several miles to appear for a cost review only to find that she had come to the wrong court. Paula suffers from -- or rather lives with -- cognitive and learning disabilities, serious medical problems and suffers from a major mental illness. When she appeared that day, Paula was coming to the end of her endurance. She was cold, exhausted and completely alone.

In 2008 the Probation Office of the Department of Corrections began an initiative to assist probationers suffering from major mental illness, assigning a Probation Officer to this unit who is a licensed clinical social worker. It is through that role that I have had the privilege of meeting and working with this remarkable woman. Paula had left Rhode Island several years prior while still on probation and owing restitution and court costs. I became her new Probation Officer and drove her home that day. She lived in a rural part of the state, where at the time no bus service existed. On the drive to her home, Paula said she was now living alone because her father, for whom she had returned to Rhode Island to provide care, had become increasingly ill and was now in the hospital. Without heat, a car, and even food, Paula struggled with deepening depression and had devised a plan and a means to commit suicide although she denied immediate intent. This is one of the amazing qualities of this woman. If she counts you among the "good guys" she will answer any question with complete candor and honesty.

Over the next few weeks General Public Assistance funds were restarted, the Diocese of Providence donated heating oil, court obligations were put on hold, and the local mental health center evaluated Paula for "community support program" services. It was still a struggle but Paula was maintaining.

However, by the end of the second month, progress with outside service agencies slowed and became insufficient. Paula's economic and health problems increased. Most depressing for Paula was her father's placement in a nursing home at the northern end of the state, making visiting him impossible for her. This is when she made the first of two suicide attempts during our association. During this period I had maintained close contact with her and that day I made a routine afternoon call. She told me that it was too difficult to go on and that she had just swallowed pills. I called 911 and met her at the emergency room. Clearly the isolated living arrangement and bare subsistence conditions were taking an emotional toll. On top of all her other problems, Paula was being evicted.

Upon release from the hospital Paula made her way to Providence and called me. I took her to a shelter that day.

Paula, ever unpredictable, mustered the inner strength to adapt to shelter living. She made a niche for herself and shortly became a fixture in downtown Providence. She was able to obtain good, consistent mental health services from the Providence Center and things were looking up for her.

Just before summer, Paula was banned from the shelter for 90 days for an infraction of the rules. She had a toxic level of medication in her system and was hospitalized for several days to stabilize the condition and adjust the medications.

One of the treating physicians stated, "She is compromised on so many levels that a change in one area throws everything else off." Upon release from the hospital she was again homeless. By this time her medical problems had impacted her mobility. Housing alternatives for a person in Paula's condition are scarce at best. Despite all efforts by concerned parties including the intervention of the state's Mental Health Advocate, the ban from the shelter remained in effect for the entire period.

On her own, Paula found a safe place to sleep in the daytime so she could be awake at night. During these months her medical problems worsened and there were several hospitalizations and even a short stay in a nursing home. She was still surviving on GPA bridge money pending her two-year SSI appeal. The mental health probation unit, in the persons of myself and a very determined and dedicated discharge planner, maintained almost daily contact and continued to advocate for her. Finally, in the beginning of September, the Providence Center arranged housing for Paula in the form of a room at the Crossroads Tower. Finally, she has a place of her own with heat, security, access to food, and her own television.

There are still obstacles to overcome, but Paula is doing much better. She is safe and has a home. The SSI appeal is set to be heard next month. She is stable and getting appropriate services. Once the financial obligations to the court are completed, Paula will no longer be on probation. This is OK. Paula now has adequate resources and supports and no longer needs the Rhode Island Department of Corrections.

During the past year, Paula and I met many good and helpful people. In fact there are too many to list in this article. We also encountered people uneducated to the needs and issues of people suffering from mental illness. Unfortunately, there are too many of these people and some are associated with programs and agencies servicing this population. It is because of this lack of understanding that groups like the Mental Health Association of Rhode Island are so very important. There is still much to be done.