

Help us combat stigma associated with mental illness

If your friend were diagnosed with diabetes, would you want to spend less time together? If your neighbor had breast cancer, would you discourage your children from playing with her children? Shunning someone because of an illness seems ludicrous in our day of promising treatments and pink ribbon campaigns. But what if your friend, neighbor or co-worker had a mental illness? If you or someone you love *has* experienced mental illness, you know firsthand that society continues to stigmatize diseases of the brain.

What is stigma? The Mayo Foundation for Medical Education and Research describes stigma as a “mark of shame or disgrace” with four components, each component building upon the previous: labeling; stereotyping; creating a division between a superior “us” and an inferior “them”; and discriminating against the person who has been labeled.

For example, consider the true story of a single mother who was president of her building’s resident council and whose apartment was a popular gathering place for her eight-year-old son’s many friends. This woman also suffers from depression and schizoaffective disorder. One night, the woman briefly contemplated suicide and, because she couldn’t imagine her son finding her in the morning, thought about giving him pills. Her thoughts lasted less than two minutes and didn’t return. After confiding in her therapist, the woman was hospitalized for 72 hours. When she returned home, her fellow residents avoided her and her son’s friends stopped coming to play. One resident called her a “child killer.” The staff asked her to relinquish her role as council president and, a few days later, gave her two weeks to vacate the building.

How is stigma harmful? As this woman’s example illustrates, stigma compromises the lives of individuals with mental illnesses. Because of stigma, these individuals may face lack of acceptance, job and housing discrimination and even verbal and physical abuse.

In a speech to introduce the National Mental Health Anti Stigma Campaign, SAMHSA’s Center for Mental Health Services director Katheryn Power said, “Stigma deters individuals from seeking the care they need, and it deters the public from wanting to pay for that care.”

Nobody is immune from stigma’s effects. NFL Hall of Famer Terry Bradshaw told *USA Today* it took all his courage to seek help for depression in the late 1990s. “Stigma is incredibly powerful,” said Bradshaw, who is now an advocate for mental health awareness and treatment.

How can I combat stigma? Attitudes are changed one person at a time. Combating the stigma of mental illness begins with you and extends to your circle of friends and beyond.

Start with Yourself: Check your perceptions about mental illness. Do you attach labels and stereotypes to persons with mental illness? Do you mistakenly believe persons with mental illness can’t recover? Resources such as the National Mental Health Association’s “Mental Health America” Web site (www.nmha.org) will help you become informed.

Don’t equate individuals with their illnesses: For example, a person with schizophrenia is not “a schizophrenic” and is not defined by the symptoms of that condition. If you have a mental illness, remember that your diagnosis is not who you are. Inform yourself about your condition and your treatment options as you would any other diagnosis.

Reach Out to Others: Tactfully correct others’ misconceptions about mental illness, and comment on news stories and entertainment media that perpetuate stigma. Offer support to family members or friends with mental illness. If you have a mental illness, you have the right to choose whom you’ll tell. Help others understand what you want and need from them. If you decide not to confide in people you know, find others who will support you. Confiding in a mental health professional is a significant step, and he or she may refer you to a support group where you’ll meet others who understand your experience.

Work for change: Anyone can be an advocate. Support legislation advancing mental health care, and write letters when you encounter negative portrayals of mental illness in the media. Join or donate to an organization that supports mental health awareness and treatment. If you’ve had experience with mental illness, visit the Mental Health Association of Colorado (MHAC) web site (www.mhacolorado.org) to learn how you can participate in the mental health consumer movement.



The Center for Mental Health is a private 501(c) (3) non-profit agency. We depend on grants, donations and community support. Your tax-deductible donation helps people receive the care they need so much. For more information, or to make a donation, call 970-494-4226 or visit www.larimercenter.org.

The Center for Mental Health joins Salud Family Health Center in a new Estes Park facility

In December of 2006, the Larimer Center for Mental Health moved its Estes Park services to a new building located at 1950 Redtail Hawk Drive, sharing the facility with Salud Family Health Centers, a primary health care provider with offices throughout Northern Colorado. This move enhances the Center for Mental Health's drive for greater coordination between mental healthcare and primary health care.

"The new building is the only location in Estes Park where consumers can address medical and mental health issues at the same time," says Mike Crabbs, Mental Health Therapist IV at the Center for Mental Health in Estes Park. In the short time since the move, Crabbs and his staff have received several on-the-spot referrals from Salud providers and have consulted face-to-face with Salud staff regarding consumers' medical needs.

The Center's Estes Park therapists serve an average active caseload of 100 consumers each month, providing individual, family and marital counseling, medication evaluations and case management. Crabbs and his staff provide emergency evaluations at the Estes Park Medical Center and Estes Park Police Department, visit seniors at the Prospect Park Living Center and consulted last year with the Park School District after a teen suicide.

The staff consults with physicians throughout Estes Park to help them address their patients' mental health needs. Because a number of Estes Park physicians volunteer at Salud Family Health Centers, Crabbs anticipates an increase in such consultations, to the benefit of the entire community.



The Center for Mental Health congratulates Colorado Senator Steven Johnson, recipient of the Colorado Behavioral Health Council's 2006 Legislator of Merit award for his ongoing support of mental health programs.



Loveland: 970-494-9870
 Fort Collins: Children & Family Services 970-494-4300 / Adult Services 970-494-4300
 Estes Park: 970-494-9959
 Connections Information & Referrals:
 Fort Collins: 970-221-5551 / Loveland: 970-461-8944
 www.larimercenter.org

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 LARIMER CENTER FOR MENTAL HEALTH

Liz Buchanan: leading a new approach to treating juvenile offenders

Liz Buchanan is a voice for troubled adolescents and their families. Buchanan supervises the Multisystemic Therapy (MST) and Functional Family Therapy (FFT) programs at the Center for Mental Health, two research-based treatment approaches that provide alternatives to incarceration or other out-of-home placement for adolescents in the juvenile justice system.

"Research consistently tells us the factors that contribute to delinquent behavior are high family conflict, negative peer groups and lack of success in school," Buchanan says. "Historically these kids have been removed from their community. There's a time and a place for out-of-home placement, but many times it's the wrong medicine."

As a supervisor, Buchanan assigns a therapist to each family referred by the court system for MST or FFT. She meets regularly with each therapist and once a week accompanies therapists to clients' homes. Buchanan was herself an MST therapist for more than four years. Like those she now supervises, she worked with families in their homes to help them establish and reach goals for change.

"I really enjoy focusing on the whole family," she says. "How do we help people become more independent? How do we empower parents to have the strongest voices about their child? I believe that's what's



best for the child and for the community."

With graduate training in clinical social work, Buchanan is now an advocate for systemic change in the treatment of juvenile offenders and is active on several committees within the juvenile justice system. "There's a lot of support in this community for keeping these kids with their families," she says.

Success rates of MST and FFT are a reason for such community support. While half of all Colorado youth committed to out-of-home placement have experienced two or more previous placements, MST and FFT are up to 80 percent effective in halting criminal behavior – at a fraction of the cost of incarceration.

Having observed significant change firsthand, Buchanan voices the promise of mental health treatment. "There's been a shift in the perception that if you see a therapist, you're always going to need a therapist," she says. "We're seeing that people can successfully complete treatment."

The Center for Mental Health's MST and FFT programs are supported by funding sources including Larimer County HHS, Larimer County Interagency Oversight Group and the United Way of Larimer County, and would not be possible without our partners within the juvenile justice system.