



A QUARTERLY PUBLICATION FOR MEMBERS AND FRIENDS OF THE MHAFC

# ADVOCATE

Laura Moskow Sigal, Executive Director; Marian Harris, Editor

FALL 2006

## Mental Health Association of Franklin County Celebrates Its 50th Anniversary

It's hard to believe that the Mental Health Association of Franklin County will celebrate 50 years of providing mental health education and advocacy to the Franklin County community. Looking back, here are some of our highlights:

- 1956 – Franklin Co. Mental Health Association founded and chartered.
- 1958 – first Directory of Mental Health and Recovery Services printed
- 1965 – established the Board of Columbus Area Community Mental Health Center
- 1967 – established Suicide Prevention Services
- 1976 – established Senior Friends Program at Central Ohio Psychiatric Hospital
- 1980 – established Families In Touch, a support group for families of persons with chronic mental illness
- 1986 – published a new parenting series, ParenTalk, for first-time parents
- 1991 – established Schizophrenics Anonymous, a self-help support group
- 1991 – began annual training for mental health professionals
- 1995 – chosen as the only MHA in Ohio to participate in the National MHA Campaign on clinical depression
- 1995 – self-help depression group is formed
- 1996 – helped found the statewide Coalition for Healthy Communities
- 2001 – in collaboration with NAMI, received a SAMHSA grant to bring The Village (an innovative system of wrap-around support services) to Franklin County
- 2001 – our new Ombudsman program was started
- 2002 – participated in a task force to develop a mental health court in Franklin County
- 2002 – wrote and designed Relatively Speaking, our series for grandparents raising grandchildren
- 2002 – created and distributed the Spanish version of ParenTalk

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## The Story of the Bell

During the early days of mental health treatment, asylums often restrained persons with mental illnesses by iron chains and shackles around their ankles and wrists. With better understanding and treatments, this cruel practice eventually stopped.

In the early 1950s, the National Mental Health Association (NMHA) issued a call to asylums across the country for their discarded chains and shackles. On April 13, 1956, at the McShane Bell Foundry in Baltimore, MD, NMHA melted down these inhumane bindings and recast them into a sign of hope: the Mental Health Bell.

Now the symbol of the NMHA, the 300-pound Bell serves as a powerful reminder that the invisible chains of misunderstanding and discrimination continue to bind people with mental illnesses. Today, the Mental Health Bell rings out hope for improving mental health and achieving victory over mental illnesses.

Over the years, national mental health leaders and other prominent individuals have rung the Bell to mark the continued progress in the fight for victory over mental illnesses.



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- 2003 – worked successfully with other agencies to provide wrap-around services for people with severe mental illnesses
- 2004-2006 RAAP – Raising the African-American Potential: presented two very successful programs featuring African-American teens and African-American families
- 2006 – created and distributed a patient education project, which includes fact sheets and resources for psychiatrists to distribute to their patients.

We begin our new half-century with a new name and a new look to be announced at our 50th anniversary celebration. Our commitment to the community remains the same as it has been for the last 50 years. To celebrate our 50th anniversary, we are privileged to have the National Mental Health Association bell – all 300 pounds of it – on display here in Columbus.

## United Way Campaign

Community Care Day was the kick-off of the United Way of Central Ohio Campaign to raise money to fund a broad range of services in our community. Without this funding, many agencies, including the MHAFC, would be unable to provide the aid and assistance that are needed in central Ohio. Please support the United Way and give generously.



### United Way Community Care Day

Our annual visit from Community Care Day volunteers left us with windows we can see through (Yes, they do windows!), conference folders stuffed and boxes moved into basement storage! Special thanks go to John Castorano, Kristin Newton, and Randy Dull from the Edison Welding Institute (pictured L to R above) and Jay Bobo from WCKX 107.5 for all their hard work. On Sept. 19, thousands of volunteers helped United Way agencies and other central Ohio non-profits with a variety of tasks.

### MHAFC joins OSU in a Campus Suicide Prevention Program

The Ohio State University (OSU) Campus Suicide Prevention Program will be developing a comprehensive, effective, culturally responsive, and sustainable system of suicide prevention at the Columbus and five Regional campuses. More than 25 campus and community partners, including the MHAFC, have pledged their commitment to the project, agreeing to quarterly meetings and to finding ways to integrate suicide prevention into their work with student constituents. This program has recently been awarded a three-year Substance Abuse and Mental Health Services (SAMHSA) grant.

The project will serve to enhance and strengthen existing services for students while simultaneously creating new approaches to suicide prevention. A major component of the program is the development of a strong partnership network, both on-campus and in the surrounding community, to oversee, coordinate, and implement a comprehensive suicide prevention program at OSU, including screening, education, crisis management, policy development, and outreach activities. Also included is the expansion of suicide education and programming to all students.

The program will also include the development and implementation of stigma-reduction and encouragement of help-seeking campaigns. The result will be the development of a comprehensive Suicide Prevention Plan for OSU that can serve as a model for other colleges and universities.

## MHAFC Welcomes New Staff Member

The new voice you hear on the phone when you call our office is Misha Barnes. Misha has joined our staff as our new administrative assistant. She will provide administrative support to the staff and volunteers and is also responsible for all our bookkeeping.



Misha graduated from Ohio University with a degree in Political Science and a minor in English. While attending O.U. she worked in their Department of Social Work.

Misha is excited about working at the MHAFC. You can reach Misha by phone at 614-221-1441, extension 25, or e-mail at [mbarnes@mhafc.org](mailto:mbarnes@mhafc.org).

## COSI Exhibit

COSI and OSU's Office of Human Development and Family Science are joining with the MHAFC to present an exhibit for all ages that demonstrates the important mind/body connections that lead to mental health or mental illness. The exhibit will open October 18 and end Nov. 2. There will be activities for children and lots of helpful information for adults. Come and learn more about the MHAFC, its partners, and the critical connections between the mind and the body.

## 50th Anniversary Celebration

On Tuesday, October 24, we will officially celebrate our 50th anniversary to be held at COSI. Our special guest speaker is the newly appointed CEO of the National Mental Health Association, Dr. David Shern. The celebration goes from 5:30-7:30. There is no charge to attend, but reservations are required. For more information, call 614-221-1441 or visit our website, [www.mhafc.org](http://www.mhafc.org).

## Leadership Columbus Project Completed

The Mental Health Association of Franklin County partnered with a project team from the Leadership Columbus Class of 2006 and Highpoint Elementary School in Gahanna to produce a resource and reference guide for parents and educators. The guide, "Children's Mental Health Matters Every Day", is a notebook filled with information on childhood mental health issues and illnesses.

This educational material contains fact sheets in a reproducible format to help parents understand various topics including childhood ADHD, anxiety, depression, and behavioral and communication disorders. Additional resources, websites and support groups are listed. The guidebooks are being piloted in the Gahanna elementary schools. The guide was developed for educational purposes and is not meant as a substitute for medical treatment. The purpose of this project is to de-mystify mental illness and assist parents in seeking appropriate treatment for their child.

## Patient Education Program

The Ohio Psychiatric Association, NAMI Franklin County and the MHAFC were awarded two grants to create a resource guide to be used by Franklin County psychiatrists. Each guide includes fact sheets on different psychiatric diagnoses and psychiatric medications. Also included are resource sheets highlighting support groups, websites, and relevant books. These resources are designed to be reproduced and will be given to patients diagnosed with psychiatric disorders. We have received very positive feedback from the psychiatrists who have already received the binder. We hope to replicate this program throughout Ohio, and eventually the U.S. If you are a Franklin County psychiatrist and have not received your binder, please call the MHAFC at 614-221-1441 for your free copy.



## NASW Presentation

Linda Jakes from Concord Counseling Centers, Dr. Richard Boettcher from OSU School of Social Work, and Laura Moskow Sigal from the MHAFC have been selected to present at the National Association of Social Workers (NASW) conference in October. These three individuals will be presenting on the two SAMHSA grants awarded to the MHAFC from 2000-2003 to replicate the Village wrap-around program for clients with severe mental illnesses, which began at the MHA in Los Angeles. This successful project concluded in 2005, but has continued in a different form with Concord, Community Housing Network and COVA. Our hope is that other collaboratives will replicate this project around Ohio.

## Mental Health Parity

### ACT NOW!

Our last chance to pass Mental Health Parity (S.B. 116) in this legislative session will come after the election this fall. The bill is currently in the Senate Insurance, Commerce and Labor Committee, chaired by Senator Stivers of Columbus. Let Senator Stivers know your opinion on Mental Health Parity. You can contact him by phone at 614-466-5981 or email at [sd16@mailr.sen.state.oh.us](mailto:sd16@mailr.sen.state.oh.us).

### Mental Health Parity Facts:

- Discriminatory reimbursement for the treatment of mental illness only perpetrates the stigma of mental illness.
- Discriminatory reimbursement for the treatment of mental illness discourages individuals from securing treatment and ultimately is a very high cost to our workplace and to society.
- Employers that wish to provide mental health parity for their employees find that it is either not available because the law allows this discrimination or that it is extremely expensive because the law allows other employers to perpetrate this discrimination.
- Poor insurance reimbursement drives people to Medicaid and the publicly funded treatment system.
- Untreated mental illness in Ohio is estimated to cost \$3.5 billion per year due to lost productivity at work or school, incarceration, or replacement of family caregiving responsibilities.

### Mental Health Facts:

- Mental illnesses are biologically based brain disorders. They cannot be overcome through “will power” and are not related to a person’s “character” or intelligence.
- Mental illnesses strike individuals in the prime of their lives, often during adolescence and young adulthood. All ages are susceptible, but the young and the old are especially vulnerable.
- Without treatment, the consequences of mental illness for the individual and society are staggering: unnecessary disability, unemployment, substance abuse, homelessness, inappropriate incarceration, suicide and wasted lives. The economic cost of untreated mental illness is more than 100 billion dollars each year in the United States.
- The best treatments for serious mental illnesses today are highly effective; between 70 and 90 percent of individuals have significant reduction of symptoms and improved quality-of-life with a combination of pharmacological and psychosocial treatments and supports.
- Early identification and treatment is of vital importance. By getting people the treatment they need early, recovery is accelerated and the brain is protected from further harm related to the course of the illness.
- Stigma erodes confidence that mental disorders are real, treatable health conditions. We have allowed stigma and a now unwarranted sense of hopelessness to erect attitudinal, structural and financial barriers to effective treatment and recovery. It is time to take these barriers down.
- Four of the 10 leading causes of disability in the U.S. and other developed countries are mental disorders—major depression, bipolar disorder, schizophrenia, and obsessive-compulsive disorder.
- In 2002, 31,655 people died by suicide in the U.S.
- More than 90 percent of people who kill themselves have a diagnosable mental disorder; commonly a depressive disorder or a substance abuse disorder.
- In 2000, suicide was the third leading cause of death among 15 to 24 year olds.
- Four times as many men as women die by suicide; however, women attempt suicide 2-3 times as often as men.



## New Medicaid Requirements

U.S. citizens will now be asked to provide proof of citizenship before they can get Medicaid - the government's free health care for the poor. In Ohio, the law went into effect on September 25. Officials say it will affect most of the state's 1.7 million Medicaid recipients.

Those who receive Medicare or Supplemental Security Income along with Medicaid are exempt because their citizenship has already been verified.

Medicaid recipients should be told that if they cannot afford copies of birth certificates or other documents establishing citizenship, county welfare offices must pay for them. And if the documents are not available - because they were lost in Hurricane Katrina, for example - Medicaid recipients can sign a statement that says they tried to obtain the paperwork but were unsuccessful.

New applicants will be asked for the paperwork establishing citizenship at their initial meeting with caseworkers. Those already receiving Medicaid will be asked for it at their next re-determination meeting. State rules in Ohio say recipients have 30 days to comply.

Until now, citizens applying for Medicaid only had to sign a statement saying they were citizens. The list of acceptable documents establishing citizenship includes passports and certified copies of birth certificates. Increased demand for those could complicate the process further, if offices become overwhelmed with requests for copies. Certified birth certificates cost about \$17 in Ohio. If there are several family members on Medicaid, this can become a burden on low-income recipients.

People with questions or concerns can call 1-866-529-6446 to be forwarded to the legal aid society nearest them.



## 2006 Election

November 7 is a very important day. We will be electing a new Governor who will set the tone for mental health issues for the next four years. We will be electing legislators who will be considering laws that will affect all citizens. It is time for parity legislation to be passed and it is important that you ask candidates what their position is on this issue.

For the first time, registered voters may choose to vote absentee. You do not need a reason to do this - there are no longer any medical restrictions or out-of-town requirements. You can receive a ballot and fill it out in the comfort of your own home - no standing on line, no pressure to finish quickly. You can download an application for an absentee ballot at <http://www.co.franklin.oh.us/boe/content/voter/absentee.html>. You can also find them at your local library or at the Board of Elections.

If you do choose to vote on November 7 at your regular polling place, remember to bring identification - driver's license, a utility bill, bank statement, paycheck, government check - anything that shows your current address. This is very important as it will determine your ability to vote.

## Americans Want Universal Health Care

According to the Citizens' Healthcare Working Group, American citizens want the federal government to guarantee basic, universal health care coverage. They have suggested that such coverage be financed on principles of fairness and shared responsibility.

Congress established Citizens' Healthcare in 2003 to investigate and determine what Americans want in relation to healthcare reform. These early findings were released as part of a preliminary report. The official report will be submitted to Congress later this year.

To learn more about the Citizens' Health Care Working Group initiative, visit their website at [www.citizenshealthcare.gov](http://www.citizenshealthcare.gov).

## Teen Depression

Mood swings in teens are something most adults are only too aware of. Is it hormones or is it something more serious? How do you tell the difference? What if it is a serious problem? What if the teen is suicidal?

The MHAFC fall children's conference addressed this issue for both professionals and for the community. Adolescent depression is increasing at an alarming rate. Recent surveys indicate that as many as one in five teens suffer from clinical depression.

Today's teens are bombarded with so many conflicting messages from television, school, magazines and newspapers, the Internet, parents, and teachers. Unrealistic academic, social and family expectations can create a strong sense of rejection and disappointment. Teens need adult guidance to understand all the emotional and physical changes they are experiencing.

Adults can help teens deal with adolescent pressures by helping them develop a sense of belonging. Teens should be encouraged to:

- Try to make new friends – healthy relationships with peers are central to teens' self-esteem and provide an important social outlet.
- Participate in sports, job, school activities or hobbies – staying busy helps teens to focus on positive activities rather than the negative.
- Join organizations that offer programs for young people.
- Ask a trusted adult for help.

When teens' moods disrupt their ability to function on a day-to-day basis, it may indicate a serious disorder – teen depression. Parents and caregivers must then take action.

### Warning signs:

- poor performance in school
- withdrawal from friends and activities
- sadness and hopelessness
- lack of enthusiasm, energy or motivation
- anger and rage
- overreaction to criticism
- feelings of being unable to satisfy ideals
- poor self-esteem or guilt
- indecision, lack of concentration, forgetfulness
- restlessness and agitation
- changes in eating and sleeping habits
- substance abuse
- problems with authority
- suicidal thoughts or actions

If one or more of these symptoms last for more than two weeks, depression should be seriously considered. It is extremely important that depressed teens receive prompt, professional treatment. If left untreated, it can become life threatening. Treatment can include:

- **psychotherapy** – provides teens an opportunity to explore events and feelings that are painful or troubling and to learn coping skills.

- **cognitive-behavioral therapy** – helps teens change negative patterns of thinking and behaving.
- **interpersonal therapy** – focuses on how to develop healthier relationships.
- **medication** – relieves some symptoms of depression and is often prescribed along with therapy.

Remember that few adolescents seek help on their own – encouragement from friends and family are vital toward helping the teen toward recovery.



## This & That

### Columbus Public Health Prescription Assistance

Columbus Public Health, formerly known as the Columbus Health Department, has released its latest comprehensive brochure on prescription help programs. You can get the brochure at the MHAFC website, [www.mhafc.org](http://www.mhafc.org) or by calling Columbus Public Health at 614-645-7417. Many prescription assistance programs are included, such as the Medicare Part D prescription drug plan, the Partnership for Prescription Assistance and Ohio's Best Rx.

### Online Alcohol Screening

Join Together and the Boston University School of Public Health have developed an online tool that is an easy-to-use, scientifically validated online alcohol screening test. Users answer a few quick questions, instantly finding out if their drinking patterns are likely to be risky or harmful.

Why don't you give it a try? Join Together developed and supports this free tool—it's great for addiction and health professionals, and those curious about their own drinking. More than 400,000 people have already completed the screening. Go to [www.AlcoholScreening.org](http://www.AlcoholScreening.org). There is also a link on the MHAFC website, [www.mhafc.org](http://www.mhafc.org).

## Ready to Work? COVA Offers Programs to Help Consumers Decide

Studies have shown that for consumers with mental illnesses, functioning successfully in the workplace can greatly enhance the recovery and wellness process. It can help consumers maintain dignity, self-respect, confidence and a positive outlook for the future. But for consumers considering a return to the workplace, how can they know if they are ready?

The Center for Vocational Alternatives (COVA) in Columbus is offering free informational classes on "Rehabilitation Readiness - Part 1" for mental health consumers. This four-week program helps people decide if they are ready to work, and meets twice weekly. Classes begin from October through December. During classes they:

- Explore the realities of work
- Help you to better understand your illness
- Identify ways to manage your symptoms
- Explain the meaning of "supports" and explore the ones available to you
- Discuss the impact of working on your SSI / SSDI benefits
- Discover available resources
- Identify and compare personal and work values
- Identify your skills
- Explain the vocational rehabilitation process

"Rehabilitation Readiness - Part 2" classes will be held on Tuesdays and Thursdays. Eight different topics will be discussed on various dates. If a consumer decides to pursue employment, and is currently working with COVA or BVR, these workshops are designed for them. Whether they have completed "Rehabilitation Readiness Part 1" or not, they are invited to attend ONE or ALL of the workshops.

Registration for these programs is required. Call Barbara Schmitzer at COVA, 614-294-7117, for more details.

## Latest Research News

### More Vets Report Mental Health Disorder and Stress Symptoms:

The percentage of military veterans seeking medical care in Veterans Health Administration facilities and who report symptoms of stress or mental health disorders has increased by tenfold during the past 18 months, to about 33 percent, according to an agency study. Given the number of veterans reporting such symptoms, veterans' advocates have expressed concern that demand for mental health care will outstrip the supply of such treatment. Federal officials attribute the spike largely to veterans' increasing willingness to seek help as a result of decreased stigma. (Los Angeles Times, 9/24/06)

### Phone-based Counseling Seen as Possibly Effective in Helping Women After Miscarriage:

Phone-based mental health counseling appears to be effective in helping women who have had miscarriages overcome feelings of depression, a small study in the *Journal of Clinical Psychiatry* indicates. Past research indicates that women who have had miscarriages are more likely than other women to either develop major depression or subsyndromal depression, which is less severe than major depression but includes many of the same symptoms. The researchers suggest that the phone-based counseling system might help women who either don't have time for or don't feel comfortable with face-to-face counseling. They also point out that many of the women in the study were Hispanic and on Medicaid, which indicates that phone-based counseling might help reach these underserved populations. (Reuters, 9/22/06)

## Bipolar Disorder Takes Heavy Toll on Workplace

Forbes Magazine reports that bipolar disorder costs U.S. businesses twice as much in lost productivity than major depression, a new study finds. Each U.S. worker with bipolar disorder averaged 65.5 lost workdays a year, compared to 27.2 annual lost work days for those with major depression, concludes a study in the September issue of the *American Journal of Psychiatry*.

Overall, major depression is six times more common than bipolar disorder, but bipolar disorder costs U.S. businesses nearly half as much as major depression, at more than \$14 billion a year, the study said.

The findings are based on a year of data collected from nearly 3,400 workers who took part in a national survey. Workers were asked how many days in the previous year they had experienced a mood-disorder episode. Lost productivity was calculated by combining work days lost due to absence or poor functioning on the

job and salary data.

About one percent of U.S. workers experience bipolar disorder in a year, compared to 6.4 percent who battle major depression. However, the researchers estimated that bipolar disorder accounts for 96.2 million lost

workdays a year and \$14.1 billion in lost salary/lost production, compared to 225 million lost workdays and \$36.6 billion in lost salary/lost production for major depression.

The study was funded by the National Institute of Mental Health (NIMH).



## Depression and Job Performance

Another NIMH-funded study in the same issue of the *American Journal of Psychiatry* found that depression can impair many aspects of job performance, and these effects linger even after depression symptoms have improved.

Researchers assessed the job performance and productivity of 286 workers with depression and dysthymia, 93 with rheumatoid arthritis, and 193 healthy workers for 18 months. Dysthymia is a form of depression marked by consistently low moods that aren't as extreme as in other kinds of depression.

Job performance among the depressed workers did improve as their symptoms eased, but even "clinically

improved" depressed workers did worse than healthy workers on mental, interpersonal, time management, output and physical tasks, the study found.

Compared to healthy workers, those with rheumatoid arthritis did worse only on physical tasks.

Health professionals need to pay more attention to recovery of work function in people with depression, the study authors said. They also suggested that workplace-supported programs are needed to help depressed workers better manage their job demands.



## Empty Nest Syndrome

Empty Nest Syndrome refers to feelings of depression, sadness, and/or grief experienced by parents and caregivers after children come of age and leave their childhood homes. This may occur when children go to college or get married. Women are more likely than men to be affected; often, when the nest is emptying, mothers are going through other significant life events as well, such as menopause or caring for elderly parents.

Feelings of sadness are normal at this time. It is also normal to spend time in the absent child's bedroom to feel closer to him or her.

If you are experiencing empty nest syndrome, monitor your reactions and their duration. If you are feeling that your useful life has ended, or if you are crying excessively or are so sad that you don't want to see friends or go to work, you should consider seeking professional help.

Recent research suggests that the quality of the parent-child relationship may have important consequences for both at this time. Parents gain the greatest psychological benefit from the transition to an empty nest when they have developed and maintained good relations with their children. Extreme hostility, conflict, or detachment in parent-child relations may reduce intergenerational support when it is most needed by youth during early adulthood and by parents facing the disabilities of old age.

At one time, it was commonly thought that women were particularly vulnerable to depression when their children left home, experiencing a profound loss of purpose and identity. However, studies show no increase in depressive illness among women at this stage of life.

When a child's departure unleashes

overwhelming sadness, treatment should be considered. Discuss your feelings with your general practitioner as soon as possible. You may need medication, and counseling may assist you in getting your feelings into perspective.

Meanwhile, look to your friends for support and be kind to yourself. There are practical things to help you feel better. For instance:

- Buy some pay-as-you-go mobile phone vouchers or prepaid calling cards for your son or daughter so that keeping in contact is financially viable.
- Try to schedule a weekly chat on the phone.
- Send your child brief e-mails of what's happening at home.
- Make care packages for your child with anything from groceries to a set of towels for their new apartment. Try not to overdo it in the beginning, and don't attach any strings to the gifts.

Time and energy that you directed toward your child can now be spent on different areas of your life. This might be an opportune time to explore or return to hobbies, leisure activities or career pursuits.

This also marks a time to adjust to your new role in your child's life as well as changes in your identity as a parent. Your relationship with your child may become more peer-like, and you will have to get used to giving your child more privacy.

Many suggest preparing for an empty nest while your children are still living with you. Develop friendships, hobbies, career, and educational opportunities. Make plans with the family while everyone is still under the same roof, so you don't regret lost opportunities. Plan family vacations, enjoy long talks, or take time off from work. And, make specific plans for the extra money, time, and space that will become available when children are no longer dependent on you and living at home.

## Upcoming Events

### Oct. 14 & 15

NBC 4 Health Expo will be at the Columbus Convention Center. The MHAFC will be doing depression screenings with mental health professionals. There will also be a virtual reality machine that simulates the visual and auditory hallucinations experienced by persons with schizophrenia.

### Oct. 18 - Nov. 2

COSI exhibit in honor of the MHAFC 50th anniversary, featuring the National MHA bell, a children's coloring contest and information for adults about mental illness.

### Oct. 24

The MHAFC 50th Anniversary Celebration at COSI. Call 614-221-1441 or visit our website, [www.mhafc.org](http://www.mhafc.org), for further information.

## Welcome and Thank You to Our Newest Members!

From July 19 through September 28, 2006

Thank you to all of those who renewed their memberships or became new members of the Mental Health Association of Franklin County during our Annual Membership Drive. We appreciate your generosity and continued interest in helping the MHAFC promote mental wellness and recovery in our community. If you know of others who might be interested in joining us, please let us know. Thanks!

### Bellringer

BMI Federal Credit Union

### Pacesetter

Dr. S.R. and Frances Thorward

### Business/Organization

Children's Hospital

Columbus AIDS Task Force

NAMI Ohio

United Services for Effective Parenting of Ohio

### Patron

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Mike and Pam Mesewicz

Michael Mizenko, D.O.

Irene Muncy

Sally Pedon

Sandra S. Phalen, Ph.D.

Irma Phillips-Carmichael, Ph.D.

Elaine Swank

Jerilyn Wolman, Ph.D.

### Family

Larry and Karen Fournier

Alice Hale, M.D.

Wallace and Dorothy Johnson

David and Janet Shaw

### Individual

Terry Becker-Fritz

Sharon Bird

Carol Branscomb

Avni Cirpili

Mary Beth Cligrow

Gary and Margaret Dalton

Harvey Doremus

Steven and Jeanne Drown

Tracy S. Ervin

Jean-Michel Guldmann

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Rhea L. Humphrey

Rosemarie Husney

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Dorothy Kilkenny

George W. Knox, Ph.D.

Beth Learmonth

Tanya Lentz

Ronald N. Lott

Martha Maas and

Estelle Silbermann

Mary L. Mautz

Beatrice M. Rich

Kathy Ritchey

Gerry and Anna Marie

Robinson

Barbara Shappell

Joan Shkolnik

Kathleen Stith

Barbara Tewart-Darwin

Glenneth M. Tillman

Linda Van Camp

Jane P. Varga

Aivests L. Vecozols, M.D.

Carrie Washburn

Robert L. Westerheide, M.D.

### Other

Cheri L. Freedman

June McCoy

Michelle Pounds

## MHAFC 2005-2006 Board Members

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Siefkas Public Relations

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Vorys, Sater, Seymour and Pease, LLP

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Carole Robinson, SPHR  
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Linda D. Ross, BSN, MS  
OhioHealth

Julie Snyder  
Leadership Beyond Limits, LLC

## Retiring Board Members

A special thank you goes to the following MHAFC board members who are retiring from our board this October. These six individuals gave their time and their talents over the last two to four years to help the MHAFC further its mission. They will be recognized at our 50th Anniversary Celebration on Oct. 24. With the help of our incredible board members, we are able to provide even more services to the Franklin County community.

Kate Gaynor, Nationwide, 2003-2006

Rubén Herrera, Herrera and Associates, 2004-2006

Nora Montalvo-Crumbley, Centro Esperanza Latina, 2003-2006

Dana Pearson Kellerman, NBC 4, 2002-2006

Chris Peterson, GSW Worldwide, 2004-2006

Kathy Rausch, Interactive Ink, 2003-2006

## 2006 Award Winners Announced

Congratulations to the following award winners who will be recognized at our 50th Annual Celebration on Oct. 24 at COSI. Their service to the community is outstanding!

**Our Norman Guitry Award**, named after our founder, is the highest award given by the MHAFC. It will be presented to Mary Brenen-Hofmann, who has spent the last 20 years working to make the Suicide Prevention Services in Franklin County one of the best programs in the area.

**Our Community Partner Award** is given to recognize the company that helped us promote mental health in our community this year. This award will be given to NBC 4, who has helped the MHAFC on mental health screenings, our online auction and through the NBC 4 Health Expo.

**The Larry Burkett Peer Support Award** is jointly given by the MHAFC and Southeast, Inc. It is named after Larry Burkett, a long-time MHAFC volunteer and Southeast staff person. It recognizes a consumer who has demonstrated outstanding effort to help others on their path to recovery. This year's honoree is Stephanie Rich. Stephanie, a staff member of Southeast, is also a peer supporter working tirelessly to help other consumers.

## Membership in the MHAFC

Why should you join the Mental Health Association of Franklin County (MHAFC)? Because for the past 50 years, the MHAFC has been serving our community by providing information and education, sponsoring support groups, advocating for the rights of people with mental illness and providing ombudsman services to those in need. We can't do this without the support of people like you.

***Your contribution enriches the lives of those living with mental illness.***

***Your contribution helps us educate the community and remove the stigma attached to mental illness.***

***Your contribution helps us connect those in need with the services that will help them.***

***Your contribution helps us promote mental wellness in our community.***

So, please consider becoming a member. The fact that you receive this publication means that you have an interest in mental health, so please help us help our community by contributing generously.

Membership information and online giving are available on our website, [www.mhafc.org](http://www.mhafc.org), or by calling us at 614-221-1441. Together, we can improve the mental health of Franklin County citizens.



## SUPPORT GROUP SERVICES

**Families in Touch** – Support groups for families and friends of persons with mental illness. Meetings are held at:

**Westerville (NE) Meetings**, held at Concord Counseling Services, 774 Park Meadow Rd.; 2nd and 4th Thursdays; 10 am to 12 Noon. For further information, call Linda Jakes, 614-882-9338, Ext. 210. Next meeting dates: Oct. 12 & 26.

**Worthington Meetings**, co-sponsored by North Community Counseling Centers, held at the Worthington United Methodist Church, 600 N. High St., Room 300; 2nd and 4th Mondays; 5:30-7 pm. For further information, call Barb Chuko, 614-846-2588, Ext. 2224. Next meeting dates: Oct. 9 & 23.

**West Side Meetings**, co-sponsored by Twin Valley Behavioral Healthcare Community Support Network, held at the Hilltop Library, 511 Hague Ave.; meets the first Monday of the month; 1:30-3 pm. For further information, call Jim Lindholm, 614-752-0333, Ext. 5725. Next meeting date: Oct 2; Nov 6.

**VA Families In Touch**, co-sponsored by the Dept. of Veteran Affairs Outpatient Clinic, 543 Taylor Ave. is not scheduling meetings at this time.

**Depression Support Group**  
Meetings are held at the Overbrook Presbyterian Church, 4131 N. High St.; 1st and 3rd Mondays; 7-8:30 pm. For further information, call Karen Berry, 614-221-1441. Next meeting dates: Oct. 2 and 16.

**Schizophrenics Anonymous North**, held at Worthington Methodist Church, 600 N. High St. Rm. 317, Worthington; Mondays (weekly); 5:30-7 pm. For further information, call Mary Beth Sparks at North Community Counseling Centers - The Bridge, 614-846-2588, Ext. 2229.

**East**, held at Pathway Clubhouse, 1203 E. Broad St.; Wednesdays (weekly); 2:30-3:30 pm. For further information, call Mike Stalego, 614-251-7820.

**Central**, held at Southeast, Inc., 16 W.

Long Street, Second Floor; Fridays; (weekly) 1-2 pm. For further information, call Bonnie Baker, 614-225-0990 Ext. 1158.

**Northeast**, co-sponsored by Concord Counseling, held at Concord Counseling, 774 Park Meadow Road, Westerville, on Wednesdays from 5-6 pm. For further information, call Linda Jakes, 614-882-9338, Ext. 210.

**PLEASE NOTE: Meeting schedules are subject to change. Please call individual groups to confirm.**



United Way  
of Central Ohio



### **Mental Health Association of Franklin County, Inc.**

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