



## Support Groups...

All support group meetings are free and open to the public. New participants are welcome.

**Mood Disorders Group for Women Only.** Evening meetings on the 2nd Tuesday each month at 6:30 p.m. at the ADAMhs Board office and day meetings on the 4th Tuesday of each month at 11 a.m. at the ADAMhs Board office on State Route 66 south of Archbold, T-761 SR 66. Contact: Jammie at 419/770-9488, or Katie at 567/239-5477.

**Mental Health Support Group — Bryan.** For adults with any diagnosed or undiagnosed mental illness. Meets on the 3rd Thursday every month at 7 p.m. in the Horizon Apartment commons, 617 N. Walnut St., Bryan. Contact: Mark at 419/913-8576.

**NAMI Four County.** For family members and friends of persons with a mental illness. Meets the 1st Tuesday each month at 7 p.m. at the ADAMhs Board office. Contact: Dave at 419/966-3006.

**Support Group for Family Members, Friends.** This group is primarily for family members and friends of persons with a diagnosed or undiagnosed mental illness. Meets the third Monday every month, 6:30 p.m. at the First Presbyterian Church, 506 Oxford Dr., Bryan. For more information, please contact Gail at 419/212-1911 or Jodi at 419/769-5106.

**Survivors After Suicide.** For anyone 15 or older who has lost a loved one to suicide. Meets the first Thursday of the month at 7 p.m. at the Four County ADAMhs Board, T-761 SR 66, Archbold. For more information, please call Pam at 419/267-3355, ext. 7.

## NAMI offers free family and community mental health education classes in April

NAMI Four County will offer three family and community mental health trainings in April. The classes are for caregivers and volunteers working with youth as well as a Mental Health First Aid class for clergy and other helping professionals. See Page 7 for details.

## Dr. Mercado talks to NAMI...

# Clozaril effective for treatment resistant schizophrenia

*Clozaril can be a miracle drug* for persons who suffer with treatment resistant schizophrenia, yet only 25 percent of those patients get the opportunity to try it.

“The patients that I put on Clozaril are glad I did,” said Dr. Melchor Mercado, a psychiatrist with Promedica Defiance Regional Hospital and a recent presenter at a NAMI Four County meeting. “You would be surprised by a before and after video (of the patients),” he explained.

He added that he can’t understand why Clozaril isn’t used more often for patients whose schizophrenia doesn’t respond to treatment.

About one percent of the population has symptoms of schizophrenia, which can include delusions, hallucinations, paranoia, social withdrawal, anger and a lack of motivation.

Those who have treatment resistant schizophrenia have tried at least two antipsychotic medications for four to six weeks without any impact on their symptoms. Or, if a patient has had no good period of social or occupational functioning in the last five years, they are also considered treatment resistant.

Dr. Mercado explained that Clozaril, a newer antipsychotic medication, is more expensive, but it is effective for 30 percent of the patients within six weeks and tends to have fewer side effects than similar medications.

*However, two infrequent side effects* can be serious and require close monitoring initially.

For example, in some patients Clozaril can significantly lower the white blood cell count which increases the risk of serious infection. While this only occurs in about one percent of the patients who take the drug, weekly blood tests are required for the first six months. The testing is done every two weeks for the next six months, and after one year it is monitored monthly.

Even less common, Clozaril can cause inflammation of the heart muscle. If it occurs, it is usually within the first month or so of treatment.

All in all though, Dr. Mercado said he is quick to try Clozaril for patients who have tried other medications without success. “It can improve a patient’s quality of life...it is worth it.” Results are usually obvious within three

months and improvement generally continues for another three months before the maximum effect is achieved.

Dr. Mercado also responded to questions on other topics that were raised at the meeting.

**Injectable Invega.** Although it is primarily used to treat bipolar disorder, it is also indicated for schizophrenia. A newer injectable is now available that lasts for three months. He said it seems to work well and injectable medications tend to have fewer side effects.

Please see **Dr. Mercado** on Page 4



**Dental services.** A full range of dental services, including surgery, are now available at the Bryan Community Health Center, 228 S. Main St., Bryan. Dr. Sasha Davison, a fulltime dentist, and Jackie Burt, one of several dental hygienists, are ready to serve patients with Medicaid, Medicare, most commercial insurance, self-pay and also offer a sliding fee schedule. See Page 6 for the full story on all services at the Bryan Community Health Center and how this cooperative partnership with the Four County ADAMhs Board came to be.

## Therapy as effective as medication in treating depression

Cognitive behavioral therapy (CBT) is as effective for treating depression as antidepressants and is also less likely to have side effects. All of which has prompted the American College of Physicians to say that CBT should be strongly considered as the first line treatment for depression.

The new guideline is based on a review of randomized controlled trials from 1990 through September 2015 that compared the benefits of second generation antidepressants and non-medication interventions such as psychotherapies, complementary and alternative medicines, and exercise.

These guidelines are in agreement with those approved in 2010 by the American Psychiatric Association.

## New depression screening guidelines released

The US Preventive Services Task Force now recommends that depression screening be part of the regular adult health check-ups completed by primary care physicians regardless of risk factors. The recommendations, which were published in numerous journals including online January 26 in the *Journal of the American Medical Association* and online February 8 *Pediatrics*, also call for screening adolescents age 12 to 18 for major depression when adequate systems and staff are in place to ensure a proper diagnosis and treatment.

National data suggest that as many as 8 percent of American teens experience a major depressive episode each year.

## External nerve stimulation may help PTSD, major depression

A study published online January 28 in *Neuromodulation* reports that an external trigeminal nerve stimulation can significantly reduce symptoms of PTSD and major depression.

This non-invasive process requires the patient to attach an adhesive patch with electrodes from a cell phone size stimulator to the nerve every night for eight hours while they sleep for eight weeks.

The 12 patients in the pilot study experienced significant reductions in their PTSD and depression symptoms after eight weeks. The process is to be used on patients who have had no meaningful response to medication and psychosocial treatment.

One of the researchers pointed out that this external nerve stimulation is easier for the patient than an older type of neuromodulation or stimulation — transcranial magnetic stimulation (TMS), which is also effective. However, with TMS the patient has to go to the doctor five days a week for six weeks to get the treatment vs. doing it at home with the external nerve stimulation.

The researchers said a randomized clinical trial needs to be done to replicate the effectiveness of their small pilot study.

## Adding antiepileptic medication to quetiapine helpful for bipolar

Patients with bipolar depression may find that adding the anticonvulsive medication lamotrigine to quetiapine may improve outcomes, according to an online study in the December 10 issue of *Lancet Psychiatry*. The benefit was evident after just 12 weeks.

*research updates...*

However, it was learned that patients taking folic acid, which is present in many over the counter vitamins, had a reduced benefit of adding the lamotrigine.

## High fat diet linked to mood disorders

According to an online study published October 16 in the *British Journal of Pharmacology*, consuming a high fat diet may cause brain changes that lead to anxiety and depression. The preliminary research suggested that while switching back to a healthy diet will reverse the metabolic changes of a high fat diet, the mood problems persist.

The study involved mice, not humans, and also suggested that a high fat diet blunted the effectiveness of antidepressants.

## 1 in 10 American kids diagnosed with ADHD; other ADHD news

More than 10 percent or 5.8 million children between 5 and 17 years of age have been diagnosed with ADHD, according to an online report December 8 in the *Journal of Clinical Psychiatry*. The report also indicated that while boys are more likely than girls to be diagnosed with ADHD, the number of girls with the diagnosis is growing at a faster rate than it is for boys.

In related ADHD news, the US Food and Drug Administration has approved two medications for treating it. A chewable tablet form of extended release methylphenidate (made by Pfizer Inc.) is now available.

A little later this year, an amphetamine extended-release orally disintegrating tablet (Adzenys XR-ODT by Neos Therapeutics) will be on the market.

And, finally a study reported in the December issue of *Pediatrics* found that stimulant medications used to treat ADHD often resulted in poor sleep habits among those taking the medications. The study, a meta-analysis of controlled trials published up to March 2015, urged doctors to monitor for sleep issues. It also noted that extended-release formulations taken once a day and wearing off in 8 to 12 hours had less effect on sleep than medications taken two or three times a day. The study also said that the longer the youth took the medication, the more they seemed to adjust to the medication.

## Marijuana use hastens onset of schizophrenia

A report published online December 8 in *Schizophrenia Research* said that people with schizophrenia who use marijuana develop the disease three years earlier than those who don't. Some 1,119 patients in Norway who had been diagnosed with schizophrenia and who had a history of substance abuse were part of the study. The average age of onset for those who had used was 23 vs. 25.9 for those with no history.

The researchers said they do not fully understand the cause. However, they said the most likely reason is that the marijuana influenced the brain's functioning and transmitter systems enabling a psychotic episode to occur.

## Study links gene to schizophrenia

An immune system gene (C4) has been identified as the one responsible for schizophrenia, according to a study reported January 27 in *Nature*. In addition to playing a role in the immune system,

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## Gene C4 and schizophrenia

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this gene is also involved with the process of synaptic pruning, which occurs with normal aging. It's thought that this gene may corrupt the pruning process, causing it to go into overdrive and subsequently result in greater loss of brain gray matter and increased reductions in synaptic structures on neurons — both of which are common with schizophrenia.

Steven McCarroll, Ph.D., explained, “The value of this is that ... with time (it will) lead to entirely new medical approaches that treat the underlying disease mechanism.”

The study involved analyzing genomes of 28,799 schizophrenia patients, 35,986 control persons, about 700 postmortem brains, and genetically engineered mice models.

## Follow-up care is poor for adolescents with depression

Follow-up care is not good for teenagers who are diagnosed with depression by primary care physicians, according to a study published online February 1 in *JAMA Pediatrics*.

The researchers used electronic health records from three large healthcare systems to determine that three months after diagnosis, more than one-third of the 4,612 adolescents with depression hadn't received any treatment at all and more than two-thirds hadn't undergone a follow-up evaluation with a specialist. Further, fewer than half of the teens who had been prescribed an antidepressant had received any follow-up care during the first three months.

A limitation of the data reviewed was noted by the researchers. For example, it could not be determined from the electronic record if follow-up care was provided and not recorded or whether the primary care doctor referred the patient to a specialist.

## Nasal spray promising for children with autism

Inhaling the synthetic hormone oxytocin led to significant improvements in social interactions in young children with autism in a study conducted in Australia and reported online October 27 in *Molecular Psychiatry*.

Following the oxytocin treatment, parents of the 31 children who were part of the study reported that their child was more socially responsive at home.

## Evaluation by specialist is key for reliable autism diagnosis

Some 13 percent of children who are given a provisional autism diagnosis by a nonspecialist lose that diagnosis eventually, according to research published online October 20 in *Autism*.

The most common replacement diagnosis is ADHD (45.9%), sensory, processing or auditory disorder (22.6%), anxiety (17.4%) and depression (12.9%).

## Genes predict lithium response

Genetic variations on a stretch of chromosome may predict how well patients with bipolar disorder respond to lithium. The study, published online January 26 in the *Lancet*, found that four genes on chromosome 21 were linked to lithium response with certain variations meaning a fourfold reduction in relapse rates.

Previous studies indicated that patient response to lithium was

*research updates...*

variable, with some 30 percent having no response at all.

Some 2,563 bipolar patients participated in the study; however, the researchers said that it needed to be replicated.

## Does online cognitive training help slow dementia?

It's becoming a big business — selling subscriptions to online cognitive training programs where you sit at your computer to learn a list of words or try to remember a set of pictures, for example. In seven years, it has grown from a \$200 million business to an estimated \$2 billion a year today.

But is it worth the cost? Short answer: There are no studies to evaluate the effectiveness of online training vs. what you can do for free.

However, for people who are still working, Dr. David Knopman with the Mayo Clinic in Rochester, Minnesota, and an investigator for their Alzheimer Research Center, says you probably get enough stimulation in the work environment. For people who are retired, reading the newspaper, belonging to a book club or doing volunteer work will provide plenty of stimulation and social interaction.

Even better are lifestyle habits — getting out with friends, gardening, walking, seeing family — can reduce stress and depression. Keeping healthy by eating right, losing weight and not smoking also help retain cognitive ability. And, the best lifestyle factor to prevent dementia or Alzheimer's is physical activity.

## Dialectical behavior therapy reduces teen self-harm

A behavior therapy that teaches coping skills when used with psychotherapy not only reduces self-harm among teens, but also more rapidly leads to recovery from suicidal ideation and depression than enhanced usual care says an article published online January 27 in the *Journal of the American Academy of Child and Adolescent Psychiatry*.

Nineteen weeks of dialectical behavior therapy (DBT) adapted for adolescents reduced self-harm episodes by 55.9 percent compared to enhanced usual care that had a 44.9 percent reduction, and the difference lasted for one year.

## FDA urged to classify ECT as a low risk intervention

The US FDA is considering the reclassification of electroconvulsive therapy (ECT) from a high risk to a low risk intervention. It's a change that the American Psychiatric Association supports.

The association president Renee Binder, M.D., said, “For appropriate patients, ECT has been a lifesaver. It has given them an opportunity for a normal, functional life.”

Others disagree, citing the memory problems that are associated with ECT.

ECT is used to treat severe major depression in adults that have been treatment resistant or who require a rapid response to treatment because of the severity of their psychiatric or medical condition.

Dr. Binder explained, “ECT is not done today the way it used to be done. There is an anesthesiologist, the person gets a very mild anesthetic. (And) you don't induce a big seizure.”

# Help is available for veterans with PTSD and their families

Post-traumatic stress disorder (PTSD), a recurring response to a traumatic life experience, occurs in about 8 percent of the men and 20 percent of the women who have experienced a traumatic event. And, the numbers are even higher for those who experienced events related to combat and sexual assault.

Recently, Tanya Brunner with the Defiance County Veterans Affairs office talked to NAMI Four County about PTSD and its effect on veterans and their families.

She began by explaining that “one person’s trauma is not another person’s trauma.” However, she noted that the skills that soldiers are taught to survive combat can make the transition to civilian life difficult for both the veteran and their family.

Brunner, a Navy Reserve veteran, shared many stories that she has heard during her 20 years as an advocate for veterans and their families. Many veterans seem to make the transition well, but the stories they tell her show the struggles that they deal with.

For example, she told of a soldier who cringed when people called him a *hero*. Although he understood why they said it, he said he wasn’t a hero. He told her that he had shot and killed a young boy while on a patrol. The boy was running toward the convoy, carrying a basket. He wouldn’t stop when repeatedly ordered to do so. When the boy fell to the ground, loaves of bread tumbled from the basket – loaves his mother had told him to sell to the soldiers.

No, he said, he wasn’t a hero. Hearing well-meaning people refer to him as such only caused him to relive that traumatic experience.

Brunner said there are written accounts of soldiers with PTSD dating back to Roman times. It was called “battle rage.” However, it wasn’t until after Vietnam that the Veterans Administration began to more aggressively work to identify and treat soldiers suffering with what was called “soldier’s heart” during the Civil War and “combat fatigue” during WWI and WWII.

**A simple four item PTSD screening tool** says those who answer “yes” to any three of the following questions may be suffering from PTSD and should seek more information from a mental health professional. The screening tool:

*In your life, have you ever had any experience that was so frightening, horrible*



**Tanya Brunner** from the Defiance County Veterans Affairs Office with NAMI Four County president **Dave Durham**.

*or upsetting that in the past month you:*

- *Had nightmares about the experience or thought about it when you did not want to?*

- *Tried hard not to think about the experience or avoided situations that reminded you of it?*

- *Were constantly on guard, watchful or easily startled?*

- *Felt numb or detached from others, activities or your surroundings?*

**Help is available** through the V.A. system as well as locally.

Brunner explained that in addition to the V.A. hospitals in Toledo and Ft. Wayne, both cities have Vet Centers that are separate from the hospitals. At the Vet Centers, veterans and their immediate family can receive free, confidential services, including: individual, group, marital and family counseling; and medical referrals.

The phone number of the Toledo Vet Center is 419/213-7533.

**Locally, Sherry Phillips, a psychologist,** is working with spouses and significant others of veterans who are suffering from PTSD. Her office is in Ney and she is currently working with nearly 50 spouses and girlfriends from the area. Her phone number is 419/572-0272.

“The military is a dangerous profession,” Brunner said, “even for veterans who didn’t serve during wartime.”

For a complete list of services available to veterans and their families, contact your county Office of Veterans Affairs: Defiance, 419/782-6861; Fulton, 419/337-9266; Henry, 419/592-0956; and Williams, 419/636-8812.

## Dr. Mercado talks to NAMI members

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**Medications with side effects.** He said he encourages patients taking once daily medications that have side effects to take the medication before they go to bed, especially if the medication causes drowsiness. He explained the side effects may be better tolerated while you sleep.

**ECT treatment.** Dr. Mercado is certified to administer ECT. He explained that it’s primarily used for treatment resistant depression. The treatment, generally 3 sessions a week for a total of 10 sessions, is safe and up to 90 percent effective. The main side effect is recent memory loss.

**Family involvement with the treatment team.** When the patient allows it, family involvement can be invaluable to the treatment team, he said. Family members can add perspective that the patient sometimes forgets or chooses not to mention. However, even if the patient is unwilling to allow family members to be involved with the treatment team, Dr. Mercado encourages the family to send him a letter explaining what they observe and feel he should know about the patient.



**Dr. Melchor Mercado** with NAMI member **Lois Pifer**.

## NAMI officers elected for 2016

Late last year, NAMI elected officers for 2016. **Dave Durham** will serve as president, **Sharon Weaver** as vice-president, **Barb Amos** as treasurer, and **Lou Levy** as secretary. **Dan Beck** was appointed to serve as assistant treasurer.

**Katie Beck** is the immediate past president.

**Valarie Lashaway** will serve as the NAMI Basics coordinator, and **Sharon Weaver** will be the Family to Family coordinator.

Family matters...

# The TRUTH...

By Janet Hitchcock

*Family to Family*, the support group that keeps on giving — even when the giving is painful. Mental illness often leads to self-medicating with drugs. Too often that self-medication turns into heroin addiction. So, this issue I'll share some of our pain and its blessing.

Our son CJ is a heroin addict — 6 years clean, 6 months out of prison. Re-entry is a

challenge, but he is handling it well. So are we. We are proud of the hard work he has put into becoming himself again.

As part of his healing process, he has chosen to share this poem he wrote while in prison. It is his hope that sharing it will help another young person make better choices than he made. Feel free to use this in any way that will help fight this horrible heroin epidemic that is taking so many of our loved ones.

## The Truth

By C. J. Hitchcock

You'll love me when you try me,  
 The first time you won't have to buy me.  
 At first you might not bite,  
 But the second time I'll get you – right!  
 To get more, you'll steal, rob, and even fight.

Don't worry, you won't need friends,  
 Where I'll take you time seems to end.  
 No depression or sorrow,

But without me, pain will be severe tomorrow.  
 Puking, crying, wishing you'd die,  
 You'd do anything, just for one more high.

Begging and praying the pain will go away,  
 You tell God, "Just one more time and I will not stray."  
 I'll serve you forever, only doing good, I swear."  
 But the devil has got you in a noose,  
 And he doesn't play fair.  
 You'll do good for a couple of days,

Then I'll grab you again and drag you back to my maze.

This time you might not get out.  
 Scream, holler, and shout—  
 No one will hear you, it's all inside,  
 But your tracks and yellow Hep-c skin you cannot hide.

Maybe you'll get lucky and catch HIV,  
 (Hmm...It's odd how that didn't even matter to me.)  
 Just one more high so you won't die.  
 For one more high you'd even give me your eyes.  
 Where you're going you won't have to see.  
 Where you're going is Misery.

The pain without me seems unbearable,  
 But the destruction I cause is so terrible.  
 You'll lose your family and you'll lose your friends.  
 They'll all miss you, if that last one is your end.  
 You thought the pain was bad when you said you were through.  
 How about their pain when they bury you?

If you're lucky you might get to stay,  
 But I will be waiting for you to stray.  
 Remember how good it feels to be loose?  
 Just one wrong move and I'll tighten that noose.  
 I'll drag you back down in the blink of your eyes—  
 Oh wait, you gave them to me for one more high.

*In prison I write this poem,  
 Twelve days from going home.  
 After six and a half years of missing my family and friends,  
 My journey has finally come to an end.  
 But a new path I will take,  
 I swear I'll never again drag my family through this heartache.  
 But I'll never forget he's watching me.  
 To drag me back to Misery.  
 He is a terrible friend,  
 That friend I called ... Heroin.*



**Upton Heights Apartments are now open.** Ryan Pickut, clinical director for A Renewed Mind's programs in the four county area (including the on-site clinical and monitoring services at Upton Heights Apartments) and Caren Bauer-Male, executive director of New Home Development Company that owns and manages the apartments, stand in one of the 650 square feet apartments. The 10 apartments are intended to provide permanent housing for persons with co-occurring mental health and substance abuse disorders who are actively involved in and compliant with treatment from a behavioral health provider. The residents must also agree to avoid using or having alcohol and non-prescribed drugs on the premises, including their apartment. Each apartment has a bedroom, closets, bathroom, kitchen and dining area, and a living room. Upton Heights is located on the east side of Defiance across from Kroger's.



*Bringing affordable healthcare for all to our area....*

# Bryan Health Center caps a 5 year partnership that began with a simple goal — improve client health

*By Les McCaslin  
CEO Four County ADAMhs Board*

**The new Bryan Community Health Center** that opened in January was the culmination of a successful partnership between the Four County ADAMhs Board and Health Partners of Western Ohio, a federally qualified health center based in Lima. The journey started in 2011.

Back then, my goal as the ADAMhs Board CEO, was to simply explore whether there was a way to provide affordable physical healthcare for the behavioral health clients who were served by ADAMhs-supported agencies. We knew that our clients, most of whom had limited income, also had co-occurring physical health issues that were going untreated. This made it more difficult for behavioral health professionals to successfully treat their mental health and addiction problems.

The clients simply didn't have, and in many cases couldn't afford, a family doctor.

**We learned that Health Partners of Western Ohio** had not only established a successful comprehensive community health center in Lima, but they had also started successful centers in rural areas.

Once their facilities were approved as a federally qualified health center, Health Partners was able to provide affordable comprehensive behavioral and physical health services in the areas that they served. The array of services included primary care, dental, a federally approved pharmacy, and more.

After our initial discussions and research determined that a relationship with Health Partners would be a good fit for both of us,

the ADAMhs Board allocated \$ 1.2 million to support the costs associated with Health Partners opening federally qualified primary care practices and a pharmacy in ADAMhs-funded agencies in Defiance and Bryan in 2012.

When those offices opened a year later, we knew that the overall health of our clients would improve, and we were sure the pharmacy would save taxpayers' money that we had been spending to provide our mental health clients with the psychiatric medications that they needed, but could not afford.

In the years leading up to the partnership, the ADAMhs Board had allocated as much as \$900,000 a year for the medications.

**What we didn't expect** was how successful the centers would become — serving not only ADAMhs Board clients, but the community at large.

Within 12 months of opening, Health Partners grew from no patients to 2,300 patients between their two offices in Defiance and Bryan. And, 25 percent of their patients were not previously behavioral health clients. They were middle income community residents with marginal or no healthcare. They had no family doctor -- no healthcare home that they could afford.

And, for those patients needing on-going

medications, the Health Partners' pharmacy was able to fill their prescriptions at a fraction of the cost.

Within a year, nearly all ADAMhs Board supported clients who were receiving psychiatric medications through the board as well as those who didn't already have a family doctor had made Health Partners their medical home.

**ADAMhs Board spending** on psychiatric medications dropped from nearly half a million dollars a year to several thousand dollars — all within one year. It



was a huge savings for our taxpayers while we improved healthcare for our clients and the community.

Now, nearly five years after we started our partnership with Health Partners of Western Ohio, we are able to expand that relationship and the services that we can provide both the behavioral health clients served by ADAMhs-funded agencies as well as the community at large.

As Health Partners outgrew their Bryan office space in the Recovery Services of Northwest Ohio building, we decided to reinvest our savings to fill a huge void in northwest Ohio — dental services for low income Medicaid families. Few northwest Ohio dentists accept patients with Medicaid coverage.

Health Partners' new Bryan Community Health Center, located at 228 S. Main St., has six dental chairs and will provide routine dental work as well as surgeries.

The additional medical office space at the Bryan Community Health Center also expands their ability to serve pediatric patients.

Again, all of these services are available to the entire community, not just clients who are served by the ADAMhs Board system.

I would like to say that this is just how we had planned it back in 2011. But, honestly this partnership has grown much bigger, much faster and much better for everyone than we could have ever hoped.

**And, the beneficiary is the entire community.**



## Health Partners of Western Ohio is accepting new patients at its health centers in Bryan and Defiance.

Patients will have access to primary care providers, behavioral health counselors, and the pharmacy team.

A full service dental clinic is at the Bryan office.

Services are provided on a sliding fee basis and most insurances, including Medicare and Medicaid, are accepted.

**Call 419/636-0410 (Bryan) or 419/782-8856 (Defiance).**

## NAMI Four County meetings & programs

All NAMI meetings, which are open to the public on the first Tuesday of the month, start at 7 p.m. at the ADAMhs Board office unless otherwise noted.

For the most up to date meeting information, please visit NAMI's website at [www.namifourcounty.org](http://www.namifourcounty.org).

### Tuesday, April 5

A tour of the recently opened Bryan Community Health Center, 228 S. Main St., Bryan. Owned and operated by Health Partners of Western Ohio, the new health center provides primary healthcare, pediatric healthcare, a full range of dental services, medication-assisted treatment for addictions, a pharmacy and mental health screening in one location. Following the tour, Les McCaslin, CEO of the Four County ADAMhs Board, will talk about the evolution of behavioral health services in the four county area. 7 p.m., Bryan Community Health Center, 228 S. Main St., Bryan.

### Tuesday, May 3

NAMI and advocacy -- how to be an effective advocate. We hope to have a speaker from NAMI Ohio. 7 p.m., ADAMhs Board office, T-761 State Route 66 south of Archbold.

### Tuesday, June 7

Teresa Eicher, clinical director at Recovery Services of Northwest Ohio, will explain the agency's integrated dual disorders treatment program (IDDT). The program is an evidence-based treatment model for persons who have difficult to treat mental health and addiction problems. 7 p.m., ADAMhs Board office, T-761 State Route 66, south of Archbold.

### Tuesday, July 5

No monthly meeting. Have a wonderful Fourth of July holiday.

### Thursday, August 4

Annual NAMI and support group summer picnic potluck starting at 6:15 p.m. at the Scout Cabin in Archbold's Ruidley Park. Grilled hot dogs, ice cream, soft drinks and water are provided along with paper products, eating utensils. Those attending are asked to bring a dish to share.

### Tuesday, September 6

Program to be announced. 7 p.m., ADAMhs Board office, T-761 State Route 66, south of Archbold.

# Free class for parents of kids with behavioral problems starts in April

## ***NAMI also has mental health classes for youth-serving volunteers and clergy, helping professions scheduled for April***

NAMI Four County will offer several free mental health education classes in April.

The spring **NAMI Basics class for parents, grandparents and care-givers of children** and teens with emotional, behavioral or mental health problems starts Saturday morning, April 16 at 10 a.m. and continues for five weeks at the Four County ADAMhs Board office, T-761 State Route 66 south of Archbold.

Each week, the class covers different topics, including: current information about the most common disorders (symptoms, treatment), strategies to handle challenging behavior, information on the various systems that are major players (the schools and behavioral health) and how to access services, problem-solving and communication, and how to plan for and manage a crisis.

The instructors are Valarie Lashaway and Lisa Holley, both of whom are parents of children with some type of behavioral issue. They will cover material developed by NAMI and provide participants with weekly handouts that further explain the material that is covered in class.

For more information on the class or to register, please call Valarie at 419/591-6986. The registration deadline is Friday, April 8.

NAMI is once again partnering with the Hench Autism Studies Program at Defiance College to offer a **3-hour training for youth-serving volunteers** on Saturday morning, April 16 starting at 8:30 a.m. in Room 18 of Defiance Hall on the college campus.

Dr. Clarissa Barnes, director of the program at Defiance College, will explain practical management strategies that prevent challenging behavior and promote positive behavior among youth who may have ADHD or an autism spectrum disorder.

She will help the participants develop an action plan that they can take back to their Sunday school class or youth activity to help them effectively reach all of the youth that they work with.

This training is limited to 28 participants to allow Dr. Barnes to work with each group as they develop their action plan.

To register for the training, please contact Lou Levy by phone at 419/399-0952 or by email at [louandrene@artelco.net](mailto:louandrene@artelco.net) by Monday, April 11. Registration will close when the class maximum is reached.

## **The final training is a day-long Mental Health First Aid class for area clergy, lay leaders and others in helping professions.**

It will be offered Tuesday, April 26 at St. John's Christian Church, 700 S. Defiance St. (State Route 66), Archbold starting at 8 a.m. and concluding by 4:30 p.m.

This training focuses on how to recognize and get help for persons who are experiencing a mental health crisis by following a five step process called "ALGEE."

The acronym stands for...

Assess for risk of suicide or harm.

Listen nonjudgmentally.

Give reassurance and information.

Encourage appropriate professional help.

Encourage self-help and other support strategies.

The instructor, Tonie Long, completed a week-long training to become certified to teach the class. She is a mental health professional who works for Four County Family Center.

Each participant will receive a thorough 100 plus page Mental Health First Aid manual.

To register for this training, please contact Lou Levy at 419/399-0952 or by email at [louandrene@artelco.net](mailto:louandrene@artelco.net). The class is limited to 30 members and registration will close once that number is reached. The deadline to register is Tuesday, April 19.

# 2-1-1

**Need help? Don't know who to call? Get answers. Always toll-free, 24 hours a day, every day.**

If you need to contact *The Advantage*, please email Lou Levy, the editor, at — [louandrene@artelco.net](mailto:louandrene@artelco.net) or call — 419/393-2515.

### Training for persons who work with survivors of suicide set for May 4

The Four County ADAMhs Board and Behavioral Health Professionals of Northwest Ohio will offer a day-long training for clergy and mental health professionals on Wednesday, May 5 so they can better help survivors of suicide.

Dr. Frank Campbell will present the workshop starting at 8:15 a.m. in the Voinovich Auditorium at Northwest State Community College.

The workshop is designed for professionals who provide counseling and support for adults bereaved by suicide. The intended audience includes mental health professionals, clergy and acute care staff who might be caring for someone who has lost a loved one to suicide.

Seven hours of continuing education credit are available for nurses and behavioral health professionals. Registration with CEUs is \$90 for non-members of BHPNWO or \$20 if no CEUs are needed. Registrations must be received by April 27. Send your registration with payment to: BHPNWO, Diane Goyings, T-761 SR 66, Archbold, Ohio 43502

## NAMI Four County 2016 Membership Form

Now is the time to join the nation's largest advocacy group for mental health.

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE (daytime): \_\_\_\_\_ (evening) \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

Membership Levels: \_\_\_ \$35 individual/family \_\_\_ \$3 individual/family on limited income  
\_\_\_ \$50 corporate member rate

*Please mail your 2016 NAMI Four County dues to:*

NAMI Four County, Attn: Dan Beck, asst. treasurer, 06789 Co. Rd. 1950, Stryker, Ohio 43557.

## Check out NAMI Four County's updated website.

[www.namifourcounty.org](http://www.namifourcounty.org)

Photos, Links to Service Providers Serving the Area, Free Class Schedules, Support Group Meeting Times & Places, Information on Mental Health, and Links to Other NAMI and Mental Health Websites

ADDRESS SERVICE REQUESTED

PRSR STD  
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Archbold, Ohio  
43502  
Permit #8

ADAMhs Advantage  
T-761 State Route 66  
Archbold, Ohio 43502  
419/267-3355