

Performance Speaks

National Recovery Month

National Recovery Month (www.recoverymonth.gov) is a national observance that educates Americans on the fact that addiction treatment and mental health services can enable those with a mental and/or substance use disorder to live a healthy and rewarding life. The observance's main focus is to laud the gains made by those in recovery from these conditions, just as we would those who are managing other health conditions such as hypertension, diabetes, asthma, and heart disease. *Recovery Month* spreads the positive message that behavioral health is essential to overall health, prevention works, treatment is effective, and people can and do recover.

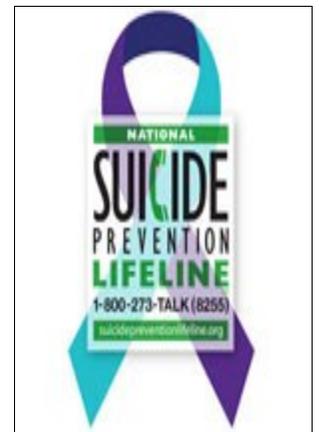
Recovery Month, now in its 24th year, highlights individuals who have reclaimed their lives and are living happy and healthy lives in long-term recovery and also honors the prevention, treatment, and recovery service providers who make recovery possible. *Recovery Month* promotes the message that recovery in all its forms is possible, and also encourages citizens to take action to help expand and improve the availability of effective prevention, treatment, and recovery services for those in need.

Celebrated during the month of September, *Recovery Month* began in 1989 as *Treatment Works! Month*, which honored the work of the treatment and recovery professionals in the field. The observance evolved to *National Alcohol and Drug Addiction Recovery Month (Recovery Month)* in 1998, when the observance expanded to include celebrating the accomplishment of individuals in recovery from substance use disorders. The observance evolved once again in 2011 to *National Recovery Month (Recovery Month)* to include all aspects of behavioral health.

Each September, thousands of prevention, treatment, and recovery programs and services around the country celebrate their successes and share them with their neighbors, friends, and colleagues in an effort to educate the public about recovery, how it works, for whom, and why. There are millions of Americans whose lives have been transformed through recovery. These successes often go unnoticed by the broader population; therefore, *Recovery Month* provides a vehicle to celebrate these accomplishments.

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The 2013 *Recovery Month* observance emphasizes the many ways that people can prevent behavioral health issues, seek treatment, and sustain recovery as part of a commitment to living a mentally, physically, emotionally, and spiritually healthy life.

- www.recoverymonth.gov



Suicide and Addictions: The Neglected Link - By Linda Rosenberg, President & CEO, National Council for Behavioral Health

September 10th is World Suicide Prevention Day. A good time to ponder the consequences of what we as a society have long neglected to address - the close link between suicide and addiction disorders.

We can't blame our neglect on ignorance. Multiple federal studies have revealed the startling statistics over the last five years. We know that addiction is the leading cause of preventable death in the U.S. - 600,000 out of the 2.5 million deaths in the U.S. annually are attributable to tobacco, alcohol, or other drugs. The failure to integrate addiction prevention, treatment, and recovery effectively into our nation's healthcare

structure costs upwards of \$468 billion annually, harming families and communities across the country.

Alcohol and drug abuse are second only to depression and other mood disorders as the most frequent risk factors for suicidal behavior. Alcohol and some other drugs can result in a loss of inhibition, may increase impulsive behavior, can lead to changes in the brain that result in depression over time, and can be disruptive to relationships - resulting in alienation and a loss of social connection and increasing suicidal ideation. An overdose of alcohol or drugs could also result in death.

Individuals with addiction disorders are almost 6 times more likely to report a lifetime suicide attempt than those without an addiction disorder. Yet only one in ten people with addictions report receiving any treatment at all.

Clearly, "Addiction is America's most neglected disease," as America's psychiatrist Dr. Lloyd Sederer eloquently states in a Huffington Post article.

This truth points to what we can do to stem the escalating rates of suicide and addictions in America.

We must bring attention to the public health crisis that addictions have become. It's a crisis for which we are unprepared.

It's a crisis on which we are largely silent. Since 1980, 3.3 million people in the U.S. have died of addictions, while 600,000 people have died of AIDS. If it was any other disease, we'd be marching on the streets!

But better late than never. We must march now and wave high the banner that addiction is a brain disease, not a moral failing or character flaw that many still believe it to be.

We must invest in public education, prevention, and early intervention. We must let those who suffer from addictions and their families know that help is available. We must let them know where they can turn for help and who will pay for it - parity and the Affordable Care Act have significantly expanded coverage, but not everyone in need of treatment may be aware of that. Programs like Mental Health First Aid play a key role - as they educate on signs and symptoms of addiction

disorders, highlight potential for suicidal thoughts and attempts, and outline an action plan for seeking help and present treatment and support resources in the community.

As with any public health crisis, we know that the solution lies in the cure. We must invest in the science that supports recovery from addictions, and in translating science to service. Medication assisted treatment, injectables, psychotherapies, 12-step and other recovery models all have a role. And we must not overlook the emerging technologies that support our treatment and early intervention efforts. From apps that alert people in recovery to avoid bars to support through text messages, virtual and mobile technologies are bringing addictions care into the palm of our hands.

Most important, we must expand access to addictions treatment. Screening for

addictions must be built into primary care visits and care for diagnosed disorders must be delivered in multiple settings - primary care, specialty behavioral health settings, online, and even in minute clinics - whenever and wherever people seek it.

The National Council is advocating for the passage of "The Excellent in Mental Health Act", to create Certified Community Behavioral Health Centers that can better meet the needs of people with addiction and mental disorders, and those who will seek care as a result of coverage expansion and parity.

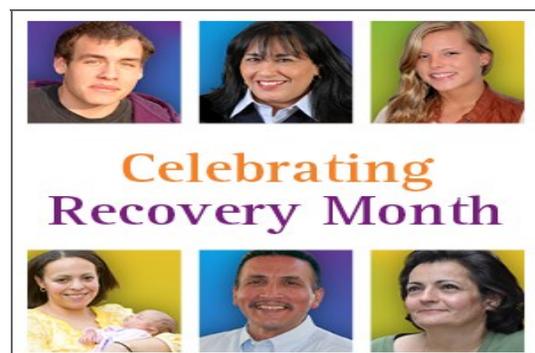
By raising awareness, focusing on the science, and expanding access to treatment, we can do for addictions what has been done for cancer, heart disease, and AIDS. We can save lives!

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Coping With Suicide - By Mental Health America

Where do I begin? Why did this happen? After losing someone to suicide, you may find yourself asking over and over again, "Why?"

Suicide is complicated, but from research we know a lot about it.

More than 90% of people who take their own lives have an underlying mental disorder at the time of their death. Many times, that disorder was never identified.

The disorders most often associated with suicide are depression, bipolar disorder, and schizophrenia. Substance abuse, either on its own or in combination with another mental disorder, can also be a factor when someone takes their own life.

These disorders can cause terrible suffering. They can affect a person's ability to think clearly and to make decisions. They can interfere with seeking help, continuing treatment, or taking prescribed medicines.

An underlying mental disorder alone is not usually enough. Most people who kill themselves experienced a combination of deep psychological pain, desperate hopelessness, and challenging life events.

Where Do I Begin?

We know that suicide is the tragic outcome of a serious underlying illness combined with a complicated mix of individual circumstances. It is not a sign of moral weakness. It does not reveal a character flaw. It is not a sign of responsibility, or a hostile act. It should not be a source of shame. Reading this paragraph over and over again until it sinks in can help you to make sense of the suicide loss and begin your healing journey.

Is It Normal To Feel This Way?

If you've lost someone to suicide, you may feel...

... alone, as though no one understands what you're going through.

... shocked, even if you knew your loved one was at risk. You may find yourself replaying their last days over and over, searching for clues.

... responsible, wondering whether there was something you missed, or something you could have said or done, or wished you hadn't said or done.

... angry, at whoever you believe is to blame: the doctor, therapist, spouse, boss, or principal, for example.

... abandoned by the person

who died.

... ashamed and worried about whether to tell people the truth, for fear of being judged.

... guilty for laughing, having fun, or beginning to enjoy life again.

... relieved.

Don't worry. It is normal to have some, all, or none of these feelings as you cope with suicide loss.

What Should I Do Next?

The first thing to know is that you are not alone. More than 80% of us will lose someone to suicide in our lifetime. Thousands of others know the pain and tragedy of your heartbreaking loss.

Here are some ways you can begin to heal:

- Connect with other survivors of suicide loss.
- Learn more about suicide and the mental illnesses that can cause it, to see how other people have coped, or for poetry, and other inspiration.
- You may need to take the initiative to talk openly and honestly about the suicide, share your feelings, and ask for help.

There is no set rhythm or timeline for healing. Each person grieves at his or her own pace and in his or her own way. Some people want to talk about it all the time; others don't want to talk much at all. Be patient with yourself and those around you. It takes time to heal.

Helping Children Understand

When explaining the suicide to a child or adolescent, provide truthful information, encourage questions, and offer loving reassurance.

Talking honestly about suicide does not give others the idea to take their own lives. In fact, understanding mental illness and suicide helps surviving family members to be watchful about their own health, and to take preventative steps when something is wrong.

* Reassure children that they are not responsible, and that nothing they said or did caused anyone else to take their life.

* Be prepared to talk about the suicide multiple times during the first days and weeks, and later throughout the child's life.

* Consider a children's bereavement support group for your child if they are having difficulty adjusting.

Handling Special Occasions

Celebrating anniversaries, birthdays, holidays, and other occasions after a suicide loss can be challenging. These events can bring up painful memories and feelings, but they also can provide an opportunity to celebrate your loved one.

Follow your intuition and do what feels best to you. You can always choose a different way to observe the occasion the next time. Here are some ways to handle occasions that other survivors of suicide loss have found helpful.

- Think about your family's holiday traditions. Consider which ones you would like to continue, and which you would not. Consider developing new traditions if that feels best.

- Other family members or friends may feel differently than you do about the way occasions have been celebrated in the past. As you are able, talk openly together about your preferences before the holiday so you will know what to expect.

- Consider whether you want to be with your family and friends for the holidays, or whether it would be more healing to spend time by yourself this time. Consider taking a trip if that feels right.

- Be aware that anticipating an event is sometimes harder than the event itself.

- If you find it comforting to talk about your loved one, let your family and friends know that in advance. Tell them it's okay to mention your loved one's name.

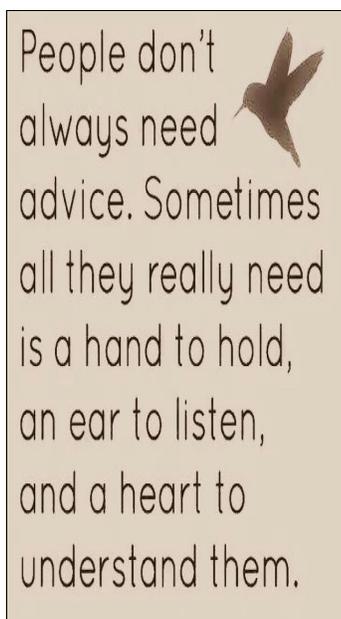
- If you would find it comforting, make a plan to get your loved one's friends and family together to acknowledge her or his birthday. If spending the day alone feels like a better choice, or with just one of two close friends or family, that's okay too.

- Some people who have lost someone to suicide find this ritual helpful for observing holiday gatherings:

Light two candles, then blow one out. Explain that the extinguished candle represents the loved ones who are present, going on despite our loss and pain. Let the candle burn throughout the holiday meal or event, placing it to the side if you like. The glowing flame remains a quiet reminder of the one who is missing.

- Above all, bear in mind that there is no correct way to handle holidays, anniversaries, or birthdays. You and your family may decide to try several different approaches before finding one that feels best.

There is no set rhythm or timeline for healing. Each person grieves at his or her own pace and in his or her own way. Some people want to talk about it all the time; others don't walk to talk much at all. Be patient with yourself and those around you. It takes time to heal.



Basic Facts About Mental Illness

About one in five adults (ages 18 and older) has a diagnosable mental disorder. (National Institute of Mental Health)

Mental illnesses are more common than cancer, diabetes, or heart disease. (U.S. Surgeon General's Report)

Mental illnesses can affect persons of any age, income, race, religion, or culture. Mental illnesses affect both males and females. (National Alliance for the Mentally III)

Mental illnesses often appear for the first time during adolescence and young adulthood. While they can occur at any age, the young and the old are especially vulnerable. (National Alliance for the Mentally III)

Four of the 10 leading causes of disability (lost years of productive life) in the United

States and other developed countries are mental disorders, which include major depression, bipolar disorder, schizophrenia, and obsessive-compulsive disorder. Many people suffer from more than one mental disorder at any given time. (National Institute of Mental Health)

With proper care and treatment, between 70 and 90 percent of persons with mental illnesses experience a significant reduction of symptoms and an improved quality of life. (National Alliance for the Mentally III)

More than two-thirds of Americans who have a mental illness live in the community and lead productive lives. (National Mental Health Association)

Coping Strategies for Teens

Spent time with family & friends.
Volunteer—you have a lot to offer.
Try to be open with your feelings.
Read books & subjects that uplift you.
Consider the importance of spirituality in your life.
Eat right!! -- Chocolate is good!!
Do not tolerate physical, emotional, or sexual abuse from anyone. Get help immediately.

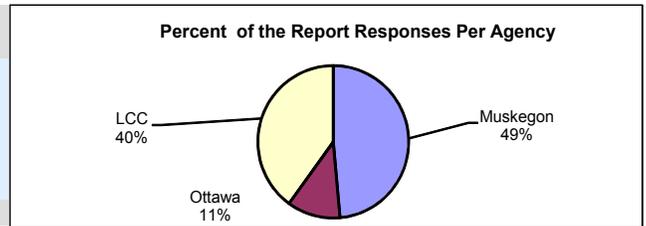
Get involved with after-school activities.
Think and plan your future. Set realistic goals.
Write your feelings and thoughts in a journal.
Laugh - keep your sense of humor!!
Accept other's thanks, compliments toward you, and praise for you.
Exercise regularly.
Seek help if you feel overwhelmed or troubled.

Lakeshore Behavioral Health Alliance: Satisfaction Questionnaire for Community Partners FY12/13

Report Date: 08/20/2013

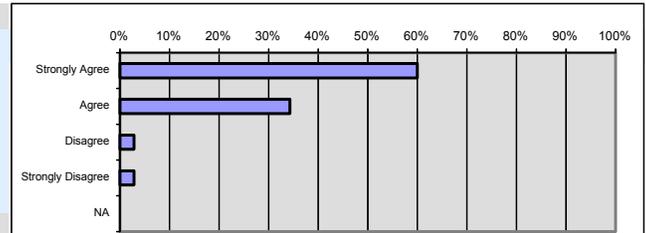
Select the Agency for which you are completing this survey:

Answer Options	Response Percent	Response Count
Muskegon	48.6%	17
Ottawa	11.4%	4
LCC	40.0%	14
<i>answered question</i>		35
<i>skipped question</i>		0



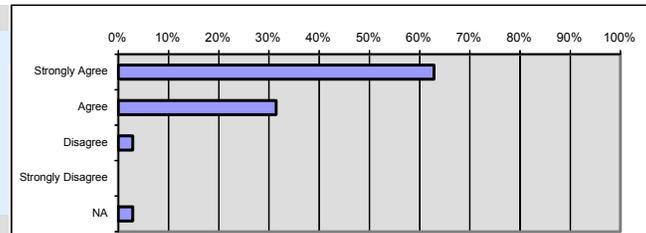
Agency cooperates well with our organization.

Answer Options	Response Percent	Response Count
Strongly Agree	60.0%	21
Agree	34.3%	12
Disagree	2.9%	1
Strongly Disagree	2.9%	1
NA	0.0%	0
<i>answered question</i>		35
<i>skipped question</i>		0



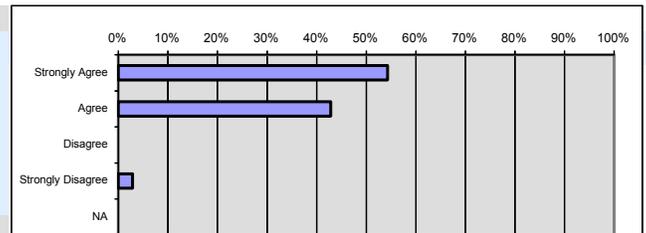
Agency is accessible to our organization.

Answer Options	Response Percent	Response Count
Strongly Agree	62.9%	22
Agree	31.4%	11
Disagree	2.9%	1
Strongly Disagree	0.0%	0
NA	2.9%	1
<i>answered question</i>		35
<i>skipped question</i>		0



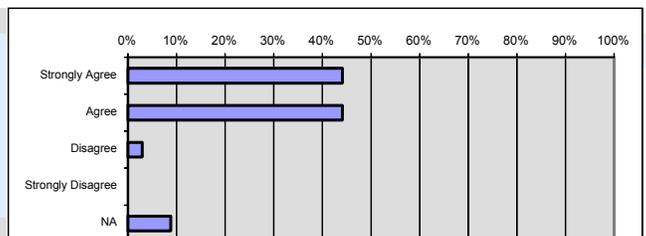
Agency has staff who are knowledgeable and competent.

Answer Options	Response Percent	Response Count
Strongly Agree	54.3%	19
Agree	42.9%	15
Disagree	0.0%	0
Strongly Disagree	2.9%	1
NA	0.0%	0
<i>answered question</i>		35
<i>skipped question</i>		0



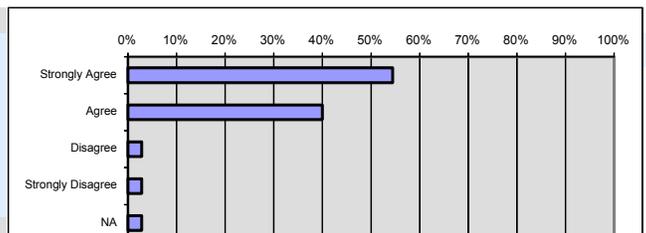
Agency responds promptly to referrals and services requests.

Answer Options	Response Percent	Response Count
Strongly Agree	44.1%	15
Agree	44.1%	15
Disagree	2.9%	1
Strongly Disagree	0.0%	0
NA	8.8%	3
<i>answered question</i>		34
<i>skipped question</i>		1



Agency is consistent and fair in its dealings with our organization.

Answer Options	Response Percent	Response Count
Strongly Agree	54.4%	18
Agree	40.0%	14
Disagree	2.9%	1
Strongly Disagree	2.9%	1
NA	2.9%	1
<i>answered question</i>		35
<i>skipped question</i>		0



Communication with Agency on mutual clients is satisfactory.

Answer Options	Response Percent	Response Count
Strongly Agree	45.7%	16
Agree	42.9%	15
Disagree	5.7%	2
Strongly Disagree	0.0%	0
NA	5.7%	2
<i>answered question</i>		35

