Building a Strong Foundation

of Mental Health

40th Anniversary





2005 Annual Report

Mental Health Association of Frederick County

"It is easy to overlook the value of mental health until problems surface.

Yet from early childhood until death, mental health is the springboard of thinking and communication skills, learning, emotional growth, resilience, and self-esteem.

These are the ingredients of each individual's successful contribution to community and society.

Americans are inundated with messages about success - in school, in a profession, in parenting, in relationships without appreciating that successful performance rests on a foundation of mental health."

> Source: U.S. Department of Health and Human Services Surgeon General's Report on Mental Health



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Mission Statement

To promote an emotionally healthy Frederick County by advocating for people with mental health needs;educating the community; and empowering individuals, children, and families.

Our Vision



Sometimes growth seems achingly slow, and change does not appear to come about readily--in the short run, at least. Looking back, however, we realize what incredible change and growth the Mental Health Association has experienced in its relatively short forty year history.





Starting as an all-volunteer organization in 1965, we have grown to encompass 25 discrete activities with 39 full-and part-time staff, a cadre of 100 volunteers and a budget slightly exceeding \$1 million. More important than our size, however, are the people we've touched over the years.

While it's impossible to quantify the number of lives which have been transformed as a result of our efforts, we do know for a fact that we have kept elderly people from living in total isolation; ensured that countless children have experienced healthy social, emotional and physical beginnings; played a vital role in the incarceration of child abusers, and saved lives that otherwise would have been lost to suicide. We have helped to renew and strengthen fragile ties between children and their parents, supported those grieving for loved ones lost to suicide, made it possible for parents to work to support their families without having to worry about who would care for their children, and helped people of every age overcome the debilitating effects of depression, panic, anxiety and grief.

What do future years hold for us and the people we serve? We continue to be disheartened by the intensity of the stigma that is still associated with mental illness, and by the number of people who either don't recognize their own need for help or don't know how to access it. So we plan to create a Community Educator position to help ensure that the public knows that mental illness has a physiological basis and everyone who needs help knows where to get it.

We plan to revitalize and grow our successful ParentPower program designed to break the terrible cycle of parents who were abused themselves abusing their own children. We will redouble our efforts to reach out to the growing Latino population in Frederick to help ensure that they become productive and stable members of our community. We will continue to add to the number of graduate students we train, to make certain that future generations have access to the highest quality mental health care available. We will become a part of the national 2-1-1 telephone system, designed to ensure that everyone has easy access to information and referral to health and human services. And we will expand our facilities to accommodate our anticipated growth.

We are mindful that, to do all of these things, we need to ensure a solid financial base for MHA--one that doesn't depend excessively on the economic or donor climate. To that end we have recently launched a campaign to increase our endowment fund significantly over the next several years.

When we see how far we have come in the past 40 years, we feel confident that we will accomplish all of this and much, much more over the next 40 as we continue to provide peace of mind to the Frederick Community.

Katuria S. Honberry

Patricia G. Hanberry, CEO

Can Magae

Jean Joyce, President, Board of Directors

eflections on Our Past

When the Mental Health Association of Frederick County (MHA) began in 1965, people with mental illness were still termed "insane," thought to be incurable, and locked away in institutions. No one openly discussed mental illness for fear of becoming an outcast and bringing shame to the family.



The 1970s brought a radical shift in the approach to mental health treatment with the "deinstitutionalization" of patients, releasing them from state mental hospitals into the care of their communities. This drastic change required each community to launch a local response, bringing us to the model used today.

MHA began as a part-time, one-person operation that closed for the summer. Serving primarily as an advocacy organization, our

founders made great strides in public awareness of mental illness and the inadequate treatment options and resources available for those suffering from it.

For the first 20 years, MHA functioned as an incubator for innovative programs that still exist today. Highly regarded programs such as the Way Station, the Alternative Sentencing Program, and The Volunteer Center, now Volunteer Frederick, originated from ground-breaking concepts during MHA's early days.

1965 MHA began as an all-volunteer advocacy organization

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1965 Started running Operation Santa Claus program locally, continued until today **1979** Launched Frederick County Hotline as a part-time crisis center

> **1979** Launched the Way Station program at Evangelical Lutheran Church

1980 Started the Alternative Sentencing Program which sentenced juveniles to community service instead of incarceration; now a program of Frederick County Government

1980's

Operated an AIDS education program within public schools

A Life In Peril

"Hello, Hotline." "Oh, I have the wrong number." The Hotline volunteer's ears perked up and she refused to let the caller hang up, "Are you sure, sir?"

Silence on the line... "You have reached 1-800-SUICIDE, are you feeling suicidal?" "...yes."

The caller confided that he was ready to end his life and had already written a note. Stating that he had a gun with him, he could not guarantee that he would not use it while on the phone. Cautiously the volunteer began a conversation with the caller encouraging him to talk about anything at all just to keep him on the phone.

The other Hotline listener on duty dispatched the police; arriving at the caller's home quickly, they were able to intervene in his suicide attempt. Fortunately, the phone call kept him alive long enough for help to arrive.

In an unusual twist, the caller contacted the Hotline some six months later to report that he was a changed man. Ending the call with a positive outlook on his future, he offered kind-hearted thanks to the Hotline for helping him get back on the path to a better life.

Reflections

The past 40 years have seen enormous progress in the mental health field.

Extensive research has increased our knowledge of the causative factors of mental iillness, as well as the development of a diverse array of treatment modalities and medications improving the quality of life of people with mental illness.

While we have made great scientific strides, the silent shame surrounding mental illness persists.

Many people today still feel that emotional struggles and mental illness are a sign of personal weakness, to be suffered in silence.



1985

Operated The Volunteer Center until 1997 when the United Way assumed management

1986 Launched I Want To Talk Youth Crisis Line

1986 Began producing The Guide to Crisis Services; continued until today

1988 Won grant to deliver Kids on the Block performances in Western Maryland

1989

Hotline began taking calls for the Maryland State Youth Crisis Hotline prompted by severe increase in teen suicides **1991** Hotline became 24 hour operation and local cri sis center for national 1-800-suicide line covering the Western Maryland region

A Partnership for Kids

"E-Care funds obtained through Child Care Choices have played a vital part in our center's accreditation process. We simply could not have come this far without these funds.

Our center serves almost 100 children and we are proud to say that we have made many improvements to fulfill the MD State Dept of Education accreditation requirements.

We have used E-Care money to purchase multicultural dolls, doll clothes, and math, science and literacy materials. We have also improved our centers, created a parent lending library and added a staff library. Twelve staff members are being trained in MMSR (MD Model for School Readiness). Senior staff have been able to attend the Maryland State Child Care 'Association's annual conference.

All of these things were possible due to the generous financial support from E-Care.

Our staff has benefited, but the children in our care have been the real winners."

~ Kim Simmons Pre-School Child Care Director for the YMCA of Frederick County The YMCA is the single largest provider of

1997 Started

Telephone

Reassurance

Program; assumed

Frederick County

client base from

Department of

Aging in 1999

licensed child care in Frederick County

1992 Launched Youth

Youth Education Outreach Program

1990

Child Care Choices becomes a full time operation

1992 Hotline began answering calls from the National AIDS Hotline

At MHA we believe the keys to an

emotionally-healthy community are

Help the public understand what

good mental health looks like by promoting positive behaviors that

people can incorporate into their

lives to reduce stress and anxiety.

Educate everyone on recognizing

Work to destroy the stigma that

acts as an obstacle to seeking

symptoms of mental illness.

on Our P

treatment.

1994 Acquired and integrated Counseling Services Program into MHA, saving the 35 year-old community program from closure due to funding problems 2000 Launched ParentPower parent education program

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Why is Our Mission

Suicide and its devastating aftermath

Nationally, suicide is the 11th leading cause of death.

It does not discriminate based on age: it is the third leading cause of death for 15-24 year olds, and the highest overall suicide rate is among those 75 years and older.

The aftermath of suicide is overwhelming, leaving behind family and friends with unanswered questions and often extreme guilt for not recognizing the symptoms or getting help for their loved one.

Depression, anxiety, and other forms of mental illness

One in five adults and children will suffer from mental illness in their lifetime. It is a certainty that you, or someone close to you, will need help at some time during your life.

Those suffering often do not know that they have a treatable illness or that help is available.

In fact, the number one cause of suicide is untreated depression.

Sadly, fewer than seven percent of those experiencing symptoms of mental illness will seek treatment.

Untreated mental illness has a terrible ripple effect, negatively impacting a person's children, family, performance at work, and society as a whole. Our Response: Provide support and crisis intervention services 24 hours a day.

Serving as the only 24/7 crisis center in Frederick County, the Frederick County Hotline provided support, referrals, and suicide intervention for over 11,670 calls in 2005, of which 588 were suicide-related.

Hotline also offers the Survivors of Suicide Support Group, which is led by a trained facilitator, for those who have lost friends or loved ones to suicide.

In addition, Counseling Services provides professional outpatient therapy on a sliding scale, primarily serving the uninsured and working poor.

Our Response: Connect people with the resources they need; destroy the stigma surrounding mental illness through public outreach and education.

The Hotline is the first call for help in Frederick County. Hotline listeners are trained in recognizing signs of depression and mental illness, crisis intervention techniques, and providing referrals.

Counseling Services provided over 2,022 hours of therapy in 2005; depression and anxiety were the most frequently diagnosed disorders.

Specifically meeting the needs of seniors, the Telephone Reassurance Program makes scheduled daily calls to clients checking on their welfare. This population is at high risk for depression and suicide, making this service even more crucial as our population ages.

Important to You?

Child abuse and its destructive long-term effects

While the physical injuries may heal, abuse and neglect can have consequences for children, families, and society that last a lifetime, if not generations.

Children of abuse often experience impaired brain development resulting in cognitive delays, learning disabilities, and anxiety disorders. They typically develop poor mental and emotional health resulting in life-long struggles.

In a national study, as many as 80% of young adults who had been abused met the criteria for at least one psychiatric disorder by age 21.

Lastly, while not true of all victims, there is a strong link between abuse as a child and a greater risk for juvenile delinquency and adult criminality, and alcohol/drug abuse.



Our Response: Advocate for children; prevent child abuse through education and intervention.

Education programs specifically designed for children include the Kids on the Block puppet troupe, using life-size puppets to teach young children about difficult social topics, and on-site Youth Education Outreach for school-age kids and teenagers.

For parents, ParentPower provides a seven-week course in basic parenting skills offering adults, many victims of abuse themselves, their first and only education about what it means to be "a good parent."

Supervised Visitation provides a safe environment for children and their non-custodial parent to develop or repair their relationship.

Strong advocates for children, Court Appointed Special Advocates (CASA) is a national program that trains volunteers to act on behalf of abused and neglected foster children in the court system. The end goal is that children be placed in safe, permanent homes as quickly as possible.



Why is Our Mission Important to You?

Difficulty in accessing mental health care

Lack of access refers to a wide range of obstacles which prevent people from receiving needed mental health services or treatment.

These include money, knowledge of services, an adequate supply of professionals in our community, language, transportation, and cultural barriers.

Public funding cuts, recent changes to Medicaid qualifications, and restrictions for coverage by private insurance all present significant obstacles to mental health care. Our Response: Provide mental health services without barriers; advocate for those with mental health needs.

Counseling Services offers professional therapy on a sliding scale. While clients are expected to contribute something for their treatment, no one is denied service due to financial constraints.

For all services, we provide interpreters for those with limited English proficiency and the deaf population, as needed, thereby removing the obstacle of language in the pursuit of mental health treatment.

Contributing to the growth of mental health professionals within Frederick County, Counseling Services offers quality internships and professional supervision to graduate-level students, helping them to attain state licensure.

"Thank you for seeing me the other day. You helped me a great deal; when I heard you say that I was going through a very normal event, having normal feelings - it literally freed me from my downtrodden state.....you listened and told me things I didn't appreciate until I heard it from your point of view.....I am much happier and lighter in my heart since then and I thank you for helping me get back to this better state."

~ Counseling Services Client





Quality early childhood education is critical to long-term success in life. By age three, 90% of brain development has already occurred, long before a child begins kindergarten.

In Frederick County, many parents can't find or afford quality childcare, and providers can't offer the services for less, a serious concern given that 77 percent of mothers today work.

On the other side of the issue, childcare staffs are becoming younger and less experienced due to the low pay scale and lack of benefits within the profession. These factors contribute to the high staff turnover within the industry.

Given that consistency of care for young children is absolutely critical to develop their good mental health, these topics must be addressed. Our Response: Link families and childcare providers with resources to ensure quality care for young children; train child care providers.

Serving over 1,691 parents in 2005, Child Care Choices is the only childcare referral source in Frederick County connecting parents with the resources they need to find licensed care for their children.

Also serving the caregivers, Child Care Choices is the main training resource for licensed childcare professionals in Frederick County, training 3, 065 professionals in 2005.

In addition, we offer start-up assistance to new providers, helping them through the state licensing process, thereby facilitating the growth of the childcare industry within Frederick County.

Our Vision for

We envision a community where children can grow and thrive without fear, where good mental health is valued, where people know when and how to seek help for emotional or family problems without shame. Everyone will have access to mental health services without any barriers.

the Future

2005 Statement of Activities

Support and Revenue

Public Grants (State/County/City)	\$ 695,467
Program Service Revenue	138,234
United Way	98,000
Private Foundation Grants/Donations	65,379
Fundraising/Special Events	52,168
Membership Dues	4,725
Interest and Other Income	41,461
Total Support and Revenue	\$ 1,095,434



Expenses

Program Services:	
Child Care Choices	\$ 359,507
Frederick County Hotline	248,776
Counseling Services	111,349
Child Abuse Prevention Program	138,853
Community Education,	
Advocacy & Publications	80,398
Total Program Service Costs	938,883
Support Service Costs	150,332
Special Event & Fundraising Costs	21,107
Total Expenses	\$ 1,110,322



Operation Santa Claus donates to Brooklane and Stone Bridge Transitional Care Home



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Michelle Bier

A Life of Neglect

An eight year old is placed in foster care due to neglect by a parent with serious mental illness.

During legal proceedings, the judge appoints a Court Appointed Special Advocate (CASA) for the child to advocate on her behalf throughout the case.

Visiting the child twice a month in the foster home, the CASA volunteer attends the child's sports activities, helps the child enter an art contest, and regularly meets with the parent, teachers, and others involved in the child's life.

Using this information, the CASA reports her observations and recommendations to the Court, helping the judge to make decisions in the child's best interest.

Unfortunately, as the parent does not pursue treatment to address the mental illness which had put the child at risk, family reunification is no longer an option.

During their many discussions, the child confides to his CASA that although he likes his foster parents, he does not feel like a "regular kid" and prefers to live with a close family member who wants to adopt him.

After moving in with his new permanent family, he writes a letter to his CASA:

"How have you been. I've had a good summer. I hope you had a good summer. I started school on Wed. I like it hear, its fun. On the bus we have assigned seats. We have a big inground pool in the back yard that I swim in on the weekends. Have a nice day."

After far too much pain during his young life, he has finally found a safe and loving home where he gets to be just a "regular kid."

* Denotes MHA Board Member

MHA <u>Benefactors</u>

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Non-Profit Organization U.S. Postage PAID Frederick, MD Permit No. #42

Our goal is for good ment be valued at the same level

Our goal is for good mental health to be valued at the same level as good physical health, with the common understanding that the link between the two is absolute to achieve an optimum quality of life.



