A publication for the Mental Health Association in Delaware

Spring 2013

Inside:

• Q & A with Kathleen S. Matt, Ph.D, Dean of The College of Health Sciences at University of Delaware

• New “Double Trouble” Support Groups

Learn how you can get involved!

(302) 654-6833
(800) 287-6423

Karen Swartz, M.D., Director of the Adolescent Depression Program at Johns Hopkins Medicine welcomes people to the Adolescent Depression Awareness Program (ADAP) workshop held at the Delaware Prevention and Behavioral Health Forum.
A message from
Jim Lafferty

Executive Director, Mental Health Association in Delaware

I hope you are all enjoying springtime. I am really glad to have the opportunity to write to you again about MHA and the State’s collaboration with Johns Hopkins Medicine for the implementation of their Adolescent Depression Awareness Program. This program is funded in New Castle County by the National Institute of Mental Health and through a generous grant from Highmark Blue Cross Blue Shield in Kent and Sussex Counties. Here is why we consider this program so important for our children:

According to Johns Hopkins, Depression affects approximately 5% of today’s teenagers. Of these, only about 30% receive any sort of intervention or treatment, even though studies show depression can be effectively treated in adolescents. The impact of adolescent depression in teenagers has been found to significantly increase the risk of:
- Major depression and anxiety disorders
- Nicotine dependence, alcohol dependence and abuse
- Educational underachievement, unemployment, early parenthood
- Suicide attempts and completed suicide

Suicide, the most serious risk factor is depression, is the third leading cause of death among young people ages 15 to 24 in the nation and in Delaware. It is imperative that high school students, parents, and teachers understand the clear link between depression and suicide. Since depression is the primary cause of suicide, depression education can be effective suicide prevention.

Unfortunately, many high schools do not have a formal curriculum to address depression. Among schools that address depression in health classes, very few discuss depression as a medical illness. With an estimated 5% of adolescents having depression, this is one of the most common illnesses teenagers face. The high rate of suicide in depressed teenagers underscores the importance of all high school students receiving quality education about depression and learning that depression is a treatable medical illness.

Fortunately for Delaware, the plan is to implement the ADAP curriculum in all of the Delaware Charter and Public High Schools. One training has already been held in Kent County and a second training was held recently in New Castle County with an additional 10 high schools participating. Another 3 high schools will be trained in September and another training will be held in August for Kent and Sussex Counties.

If you would like to learn more about Depression as a medically treatable illness, please contact us.

Enjoy the upcoming summer and thanks again to all of you for your generous financial support. We work very hard to use your gifts wisely.

Jim

Remember our designation number of 430 when the time comes to make your United Way pledge this year. If you forget, all agencies are listed alphabetically on the back of the pledge form.
Q&A with
Kathleen S. Matt, Ph.D.

By Pam George, contributing writer

For Kathleen S. Matt, becoming dean of the College of Health Sciences at the University of Delaware was like coming home – in more ways than one. Not only did Matt receive her bachelor of arts degree in biology from the university, but she also grew up in Newark. After a career that took her from Seattle to Texas to Hawaii to Arizona, she was glad to be back in the First State.

“I really wanted to give back to the university and the community, which both did so much for me when I was growing up,” says Matt, who was associate vice president for biomedical affairs and clinical partnerships at Arizona State University before coming back to Delaware. “I saw this as an opportunity. I hope we can do some projects that help improve health care in our state.”

So far, she is doing just that. Since she became the dean in 2009, the college has added three programs, including the state’s first Ph.D. program for nurses. Other new doctorate programs include a Ph.D. in applied physiology and one in medical sciences. What’s more, the college recently received approval for a master’s program in speech pathology.

In addition, she’s also involved with the college’s planned presence on the Science, Technology & Advanced Research Campus (STAR), which is being built on the old Chrysler site.

You have bachelor’s and master’s degrees in biology and a Ph.D. in zoology. You’ve also taught psychology and exercise science at Arizona State University. It seems like a diverse background.

At the University of Delaware, I was premed, and I was interested in biomedical research. I decided to get my Ph.D. at the University of Washington in Seattle, and I did my postdoctoral fellowship at the University of Texas Health Science Center at San Antonio and Southern Illinois University.

Although it looks like I did many different things, I was working with a lot of different organisms and animal models to research similar questions involving neuroscience and endocrinology – how the brain releases hormones and how hormones regulate systems in the body. I was looking at the mind-body connections. I started that work with hamsters and then went to birds and fish. Each time, I addressed similar questions. I still have an interest in this and would love to do more research.

You also have a department of behavioral health and nutrition?

Students are increasingly interested in that. It’s another program that’s relatively new. Because health promotion is important, the department offers a post-baccalaureate health coaching certification program. It’s a response to the needs in primary care practices: Patients are told they need to exercise and go on a diet, but they don’t know how to start.

We train these health coaches to help people. A lot of this will really come together as we move onto the STAR campus, which will give us a tremendous physical site for our clinics. We have a physical therapy clinic and nurse-managed health center. Both are open to the public. Right now they’re located in McDowell Hall and McKinly Lab, and parking can be a problem. At the STAR campus, they will be very open and accessible.

When will the move occur?

It should happen in January 2014. Less than a year!

Are there programs for nurses interested in psychiatric nursing?

There are opportunities within our college. They’re joint programs with the psychology department. We have a terrific psychology program here at the university.

Talk about your collaboration with theater minors.

Theater minors play the role of patients for students. Some of them are biology majors, too, and some theater students have gone through this class and decided to go on the medical school. They’ve seen both sides.

Why a doctorate in nursing?

Many people know there is a nursing shortage, but there’s also a shortage in faculty nurses. Many are nearing retirement age – it’s happening around the country. The Ph.D. program will help us grow our own faculty. We continually have nurses applying to our nursing programs. It’s very competitive to get into them.

Kinesiology is also a growing field. What is that?

Students who want to get into physical therapy choose kinesiology as their major.

In addition to being the dean of the college, you are the executive director of the Delaware Health Science Alliance, which was formed in 2009. What does DHSA do?

DHSA is a collaboration between Christiana Care Health Systems, Nemours/Alfred I. du Pont Hospital for Children, Thomas Jefferson University and the University of Delaware, which do joint programs together. Students interested in a pharmacy degree, for instance, can do several years here and then go on to Thomas Jefferson. It’s an alliance for education, research development and clinical opportunities. We’re trying to make the movement between the institutions seamless so students and faculty can go between them for education and research.

Delaware presently lacks a medical school. Is there one in the works?

There is not a plan right now. Thomas Jefferson has done an incredible job for us. They hold 20 places for Delaware residents each year. We’re continuing to enhance the program for third- and fourth-year students so they can do rotations at Christiana Hospital. Boosting the residency program here increases the probability that students will stay in the state and become part of our medical workforce.

There’s also so much change in health care, and looking forward, we can see a broader spectrum of providers, including physician’s assistants and nurse practitioners, who will provide really comprehensive care that includes mental health as well as physical health care services.

Does the role-play teach students communication skills?

With any disease, the compliance rate for properly taking medication is low. We’re not getting the outcomes we expect in part because of communication problems. The better the interaction, the better the outcome. It’s about motivating people to change their lifestyle and take more responsibility for their own health.
The 11th Annual E-Racing the Blues© Race

By Fern Skelly

It is time to lace up your shoes for the 11th year of E-Racing the Blues® 5K Run/Walk and 10K Run on Sunday, October 27th, at the Wilmington Riverfront!

The Competitive Walking Event will again be a separate chip-timed race. The E-Racing the Blues® race is one of only a few in the area offering competitive walking and it has become extremely popular in the last 3 years. Day of registration for all events opens at 7:30. The 10K run will start at 8:30 a.m. The 5K run will start at 9:45 a.m., followed by the 5K competitive and recreational walks. All events will be chip-timed, one of the most accurate timing devices used today. Teams are welcome and people are encouraged to start a team consisting of 3 or more people. Last year over 30 teams competed and represented companies, organizations, and groups of family members and friends. Along with individual competitive race awards, teams raising the most dollars and having the most team members will also receive prizes and recognition! Refreshments and the awards presentation will take place at the conclusion of the 10K race and after the 5K events.

Supporting this event makes a difference to help "e-race" the stigma surrounding mental illness and depression.

Mental Health is how we think, feel, and act as we cope with life. It also helps determine how we handle stress, relate to others and make choices. Like physical health, mental health is important at every stage of life, from childhood and adolescence through adulthood. Staying mentally healthy is not always easy, especially during tough times.

Regular physical activity is one of the most important things you can do for your health. It can help:

• Control your weight
• Reduce your risk of cardiovascular disease
• Reduce your risk for type 2 diabetes and metabolic syndrome
• Reduce your risk of some cancers
• Strengthen your bones and muscles
• Improve your mental health and mood
• Improve your ability to do daily activities and prevent falls, if you’re an older adult
• Increase your chances of living longer

This event connects family and friends and shows the advantage of exercise. The recreational 5k walk (3.1 miles) encourages families to walk with their children. Strollers are welcome.

E-Racing the Blues has attracted over 4,000 participants and helped us bring our total raised for the children. Strollers are welcome.

For more information, contact MHA at (302) 654-6833 or on www.mhainde.org

The 11th Annual E-Racing the Blues Race registration form

DATE: Sunday, October 27

TIMES: Registration opens 7:30 am 10K Run starts 8:30 5K Run starts 8:45

Dravo Plaza, Wilmington Riverfront, Wilmington DE

COURSE: 10K and 5K - USATF Certified – Start and finish at Dravo Plaza Chip Timing by Mid Atlantic Timing

FEES: 10K Run - $30 pre-registration (by 10/22) $35 race day registration

5K Run/Walk - $20 pre-registration (by 10/22) $25 race day registration

AWARDS and PRIZES: 10K Run, 5K Run, and 5K Competitive Walk - Overall male and female, Top 2 male and female in 10 year age groups - 13 and under through 70 and over. Top fundraiser and team captain with most members.

AMENITIES: Entertainment, refreshments, exhibitors. The first 750 participants receive long-sleeve race T-shirts

REGISTRATION: Pre-registration for individuals and teams available online at www.eracingtheblues.org or by requesting registration forms from MHA. To pay by check, mail with form to MHA, 100 W. 10th St., Suite 600, Wilmington, DE 19801

INFORMATION: For more information, contact MHA at (302) 654-6833 or on www.mhainde.org

Payment options (circle): check M/C Visa Discover AMEX Card acct#: __________ Exp. date: __________

In consideration of this entry being accepted, I, intending to be legally bound, hereby for myself, my heirs, executors, administrators, waives and releases any and all rights I may have against the organization holding this event, its agents, representatives, successors, and assigns for any and all injuries suffered by me at said race. I also hereby grant MHA the right to take and use photographs or video of me taken at this event.

Signature: __________________________

Date: __________________________

(Parent's signature required for participant under 18 years old)

*Please discourage unofficial entrants (bandits) from competing in our races. Bandits consume scarce resources and delay or inhibit accurate race results. Unregistered runners/walkers, running with dogs, strollers, rollerblades, bicycles, and the wearing of headphones are prohibited on the race course at any time to ensure runner's and walker's safety and to comply with liability standards. Thank you.


E-Racing the Blues® Committee members are: Fern Skelly - Chair of the event, Niki Hawkins - Vice Chair, Jack Akester, Patty Daniels, Roberta Fishgold, Jane Gibson, Lauren Golt, Pat Lugert, Shawn Hanshew, Chris Johnson, Gail Keller, Amy Milligan, Rachel Lee, Laurie McArthur, Carol Osbun, Deenie Reeves, Jan Wilkinson, and Wendy Wise.

To register for the race or start a team, simply visit our website at www.eracingtheblues.org or contact the office at 654-6833 for a registration form.
When a traumatic event happens in your school or community, you can be a Lifeline.

Lifelines: A Comprehensive Suicide Awareness and Responsiveness Program for Teens

A Suicide Prevention Program

A 5-step action plan encompassing the skills, resources and knowledge to assess the situation, to select and implement appropriate interventions, and to help the individual in crisis connect with appropriate professional care.

Mental Health First Aid

Specifically, participants will learn:

• Assess for Risk of Suicide or Harm
• Give Reassurance and Information
• Encourage Appropriate Professional Help
• Encourage Self-Help and Other Support Strategies

If you are interested in setting up a free training for your organization, please send an email to Jennifer Seo at jseo@mhainde.org or call the Mental Health Association in DE at 302-654-6833

ASIST (Applied Suicide Intervention Skills Training) is a two-day training for anyone who wants to feel more comfortable, confident and competent in helping to prevent the immediate risk of suicide. Over one million caregivers have participated in this evidence based two-day, highly interactive, practical, practice-oriented workshop. ASIST is the most researched suicide prevention skills training world-wide, and evaluations have shown that interventions skills learned at ASIST are retained over time and put to use to save lives.

The Outcome

The emphasis of the ASIST workshop is on suicide first aid, on helping a person at risk stay safe and seek further help. Attendance at the full two days is essential.

Learn how to:

• recognize invitations for help
• reach out and offer support
• review the risk of suicide
• apply a suicide intervention model
• link people with community resources

Who to Contact:

Mental Health Association in Delaware:
(302) 654-6833 or (800) 287-6423

safeTALK: a 3 hour training that prepares anyone over the age of 15 to identify persons with thoughts of suicide and connect them to suicide first aid resources. As a safeTALK-trained suicide alert helper, you will be better able to: move beyond common tendencies to miss, dismiss or avoid suicide; identify people who have thoughts of suicide; apply the TALK steps (Tell, Ask, Listen and Keep Safe) to connect a person with suicide thoughts to suicide first aid, intervention caregivers.

Why should I come to safeTALK?

In only a few hours, you will learn how to provide practical help to persons with thoughts of suicide. Expect to leave safeTALK more willing and able to perform an important helping role for persons with thoughts of suicide.

Why is safeTALK for everyone?

Most persons with thoughts of suicide go unrecognized—even though most all are, directly or indirectly, re-requesting help. Without safeTALK training, these invitations to help are too rarely accepted, or even noticed. With more suicide alert helpers, more people with thoughts of suicide will get connected to the intervention help they need.

According to the American Association of Suicidology, suicide ranked as the third leading cause of death for young people (ages 15-19 and 15-24.) While suicides accounted for 1.4% of all deaths in the U.S. annually, they comprised 12.2% of all deaths among 15-24 year olds. In Delaware, someone dies by suicide every 4 days.

To schedule a FREE Lifelines Program at your school, contact Emily Vera at the Mental Health Association in DE at (302) 654-6833 or evera@mhainde.org

Comments:

safeTALK Evaluation Comments:
“IT opened my eyes more!”
“I feel like I could really help someone now.”
“It was thorough, not dragged out and covered a lot of great info. The trainers were really great and presented the material in a very learnable way.”

ASIST Evaluation Comments:
“Good information provided for reference – very easy to do!”
“The interactive components really helped me to reflect on the issues at hand.”
“I liked how we were given tips on how to ask if a person is suicidal.”

Lifelines Evaluation Comments:
“The entire presentation was extremely enlightening.”
“Simple but informative”
Double Trouble in Recovery Support Group

Since 1989, individuals with severe co-occurring addiction and mental health disorders have found experience, strength, and hope through the Twelve Step group Double Trouble in Recovery (DTR). Double Trouble in Recovery is the equivalent to Alcoholics Anonymous for those dealing with severe mental illness and addiction.

Membership is open to anyone who is currently experiencing or has formerly experienced dealing with mental disorders and chemical addiction.

For more information, call MHA
New Castle County: (302)654-6833
Kent/Sussex: (800)287-6423

Meeting Details:

Wilmington Groups
Every Tuesday at 1 p.m.
2500 W. 4th St. Suite 5
Every Wednesday at 5 p.m.
2500 W. 4th St. Suite 1

Dover Group
Every Tuesday at 3 p.m.
1679 South DuPont Highway

Looking for Support with Mental Health and Substance Abuse? Double Trouble in Recovery gives people an opportunity to get together and support one another in recovery.

Groups are free and Workbooks are provided for free for group members. Help with transportation is available upon request.

Funding provided by Delaware Department of Health and Social Services Division of Substance Abuse and Mental Health through the Substance Abuse and Mental Health Services Administration (SAMHSA) Co-Occurring State Incentive Grant (COSIG).

Some common questions and answers about suicide:

Q: How common is suicide in children and teens?
A: In 2009, suicide was the third leading cause of death for young people ages 15–24. In this age group, suicide accounted for 14.4 percent of all deaths in 2009.

While these numbers may make suicide seem common, it is important to realize that suicide and suicidal are not healthy or typical responses to stress.

Q: What are some of the risk factors for suicide?
A: Risk factors vary with age, gender, or ethnic group. They may occur in combination or change over time. Some important risk factors are:

- Depression and other mental disorders
- Substance abuse disorder (often in combination with other mental disorders)
- Prior suicide attempt
- Family history of suicide
- Family violence including physical or sexual abuse
- Firearms in the home
- Incarceration
- Exposure to suicidal behavior of others, such as family members or peers.

However, it is important to note that many people who have these risk factors are not suicidal.

Q: What are signs to look for?
A: The following are some of the signs you might notice in yourself or a friend that may be reason for concern.

- Talking about wanting to die or to kill oneself
- Looking for a way to kill oneself, such as searching online or buying a gun
- Talking about feeling hopeless or having no reason to live
- Talking about feeling trapped or in unbearable pain
- Talking about being a burden to others
- Increasing the use of alcohol or drugs
- Acting anxious or agitated; behaving recklessly
- Sleeping too little or too much
- Withdrawing or feeling isolated
- Showing rage or talking about seeking revenge
- Displaying extreme mood swings.
- Seeking help is a sign of strength; if you are concerned, go with your instincts and get help!

Q: What can I do for myself or someone else?
A: If you are concerned, immediate action is very important. Suicide can be prevented and most people who feel suicidal demonstrate warning signs. Recognizing some of these warning signs is the first step in helping yourself or someone you care about.

If you are in crisis and need help: call this toll-free number, available 24 hours a day, every day 1-800-273-TALK (8255).

You will reach the National Suicide Prevention Lifeline, a service available to anyone. You may call for yourself or for someone you care about and all calls are confidential. You can also visit the Lifeline’s website at http://www.suicidepreventionlifeline.org.

For more information on suicide
Visit the National Library of Medicine’s MedlinePlus http://medlineplus.gov
En Español http://medlineplus.gov/spanish

For information on clinical trials, go to the National Library of Medicine’s clinical trials database at http://www.clinicaltrials.gov.

Information from NIMH is available in multiple formats. You can browse online, download documents in PDF, and order materials through the mail. Check the NIMH website at http://www.nimh.nih.gov for the latest information on this topic and to order publications. If you do not have Internet access, please contact the NIMH Information Resource Center at the numbers listed below.

National Institute of Mental Health
Office of Science Policy, Planning and Communications
Science Writing, Press and Dissemination Branch
6001 Executive Boulevard
Room 6200, MSC 9663
Bethesda, MD 20892-9663
Phone: 301-443-4513 or
1-866-615-NIMH (6464) toll-free
TTY: 301-443-8431 or
1-866-415-8051 toll-free
FAX: 301-443-4279
E-mail: nimhinfo@nih.gov
Website: http://www.nimh.nih.gov
# Mental Health Association in Delaware

**SUPPORT GROUPS SPRING 2013**

**PLEASE CALL TO REGISTER. 302-654-6833 IN NEW CASTLE COUNTY**

**OR IN KENT OR SUSSEX 800-287-6423**

To maintain the privacy of our members, MHA does not publish support group location; locations are provided with registration. Support groups sponsored by MHA are not intended to replace professional mental health treatment.

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<th>For help with ...</th>
<th>Monday</th>
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<td><strong>Depression</strong></td>
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<td>(Depression support groups are peer-led groups for individuals experiencing or who have experienced Clinical Depression, Bipolar Disorder, Seasonal Affective Disorder, or Dysthymia.)</td>
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<td><strong>Wilmington</strong> (10-11:30 p.m.)</td>
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<td>(Anxiety support groups are peer-led groups for individuals experiencing or who have experienced Generalized Anxiety Disorder, Panic Disorder, Obsessive Compulsive Disorder, Post Traumatic Stress Disorder, and/or specific phobias. The groups use a self-help book on anxiety disorders for discussion during each meeting.)</td>
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<td>(SOS support groups are peer-led groups for individuals who have lost a loved one or friend to suicide. These groups provide insight and comfort to individuals dealing with the trauma and tragedy of a loss to suicide.)</td>
<td><strong>Wilmington</strong> (1st, 3rd &amp; 5th Mon.) (7-8:30 p.m.)</td>
<td><strong>Millsboro</strong> (2nd Tuesday) (7:30-9 p.m.)</td>
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<td>(SAM support groups are professionally run groups for family and friends of people whose deaths were sudden and/or violent.)</td>
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<td><strong>Double Trouble in Recovery</strong></td>
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<td>(DTR is the only evidence-based peer support group created for those with co-occurring disorder. DTR offer a forum for people who have a substance use disorder as well as mental illness to address the challenges and issues specific to them in an understanding, inclusive atmosphere.)</td>
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MHA Continues Needing Your Help

By Laurie McArthur

Did you know that four out of the ten leading causes of disability in the United States are mental health conditions? These illnesses cause more days of disability than cardiovascular disease, cancer, arthritis, diabetes, and infectious diseases. The Mental Health Association in Delaware (MHA) has been working for people and their families living with mental illness for over 80 years, and will continue that support with your help.

One third of the people who have a heart attack have symptoms of depression, almost forty percent of people who have a stroke experience depression according to the American Heart Association Journal and people who have diabetes are twice as likely to have depression than the general population as stated by the National Institute of Mental Health. Sadly, half of the people with a mental health diagnosis first experience it by age 14 but do not receive treatment until about age 24, in large part due to the stigma that still exists in our world surrounding mental illness.

These facts underscore the importance of treating illnesses like depression. MHA provides education to the community about the signs and symptoms of these illnesses and importance of receiving treatment. As shared in recent letters, we provide support groups for people who are being treated for and recovering from depressive and anxiety disorders or who have lost a friend or family member to suicide or an accident or murder. We advocate for improved treatment services and greater access to treatment in Delaware. Our organization leads suicide prevention efforts throughout the state and co-chairs the state’s Suicide Prevention Coalition. MHA is a respected and trusted resource and is involved in much of the mental health related activity in Delaware.

Your financial support is needed so we may continue providing help and hope to people living with mental illness. Please go to www.mhainde.org and select donate on the home page or mail your fully, tax-deductible donation today to MHA in DE at 100 W. 10th St., #600, Wilmington, DE 19801.

National Depression Screening Day

Thursday, October 10, 2013 Statewide Event Throughout New Castle, Kent, and Sussex Counties

By Alexandra Gawel

On Thursday, October 10, 2013, the Mental Health Association in Delaware will be collaborating statewide to bring National Depression Screening Day to sites throughout the state. Screenings will be taking place in various locations such as community health centers, community centers, health clubs, community college campuses, churches, etc.

National Depression Screening Day is designed to call attention to the illness of depression on a national level and designed to educate the public about symptoms and effective treatment, to offer individuals the opportunity to be screened for depression and to connect those in need to the mental health care system in Delaware. Depression screenings are not a professional evaluation, but are a quick and easy way to spot some of the early signs of trouble.

Over 61,000 adult Delawareans suffer from a mood disorder including major depression or bipolar disorder. Over 51,000 Delawareans reported experiencing at least one major depressive episode in the past year. An initiative such as National Depression Screening Day works to provide Delawareans options if they are reluctant to seek help and it also establishes prevention and early intervention.

If you are wondering if you may have depression, take the first step in asking for help.

If your organization is interested in holding a depression screening at your site, please contact our office (302)654-6833 or e-mail Alexandra Gawel at agawel@mhainde.org.

Thank you to last year’s sites for depression screening in Delaware including: Beautiful Gate Outreach at Bethel AME Church, Christ Our King Parish Health Ministry, Claymont Community Center, Delaware Technical Community College (Wilmington and Stanton Campus) Dover Behavioral Health, Easter Seals Georgetown, Henrietta Johnson Medical Center, Latin American Community Center, Neighborhood House INC, SODAT – DE, Thurman Adams State Service Center, University of Delaware, and West End Neighborhood House.

Last year we screened 198 people throughout the state and 36 screened positive for depression and were referred to treatment. Join us for National Depression Screening Day!

Community Mental Health Conference 2013

Journey Toward Health and Wholeness; Mind, Body, and Spirit

By Alexandra Gawel

On Thursday November 14, 2013, the Mental Health Association in Delaware will be sponsoring the 12th annual Community Mental Health Conference. The conference will take place at the Doubletree Hotel in downtown Wilmington, and will focus on the theme Journey Toward Health and Wholeness; Mind, Body, and Spirit.

The conference will have a panel discussion, keynote speaker, and various workshops offered in the morning and afternoon. Breakfast, lunch, entertainment, and a raffle prize drawing are also offered throughout the day. Please note that this conference will be hosting exhibitors from local businesses and nonprofits. If you are interested in exhibiting and or sponsoring this event, feel free to contact our office (302)654-6833 or e-mail Alexandra Gawel at agawel@mhainde.org. Feel free to save the date to come out and join us for this wonderful event on November 14, 2013!

MHA in Delaware would also like to thank last year’s participants, volunteers, sponsors, speakers, etc. who made the 2012 CMH Conference a success!

A special thanks goes out to our planning committee members; Audwin Odom, Belinda Criddel, Dona Mesko, Frank Hawkins, Janet Kramer, Jennifer Seo, LaVaida Owens-White, Lonnie Edwards, Norwood Coleman, Olga Matias, Pat Evans, Phyllis Churchman-Boyd, Rev. William Rhines, Roberta Fishgold, and Tracey Taylor.

Smoking and Depression

By Yvette Aviles

Smoking affects our body negatively resulting in shortness of breath, the risk of heart disease, cancer, and other illnesses. There is strong evidence that is also associated with an increase of symptoms of depression and anxiety. Some might argue that people start smoking and this leads to depression or people with depression start smoking.

Having depression or anxiety can cause a large amount of stress on an individual. Smoking has mood-altering effects; therefore, some use smoking as a coping mechanism to alleviate this anxiety or depression. The effect of smoking reduces feeling of depression or anxiety for a short period of time. Recent studies have found that 1 in 3 adults with a mental illness smoke cigarettes, compared to 1 in 5 adults with no mental illness.

Nicotine is inhaled and first passes through the lungs into the blood stream. The heart pumps the nicotine through the body eventually reaching the brain. When a dose of nicotine reaches an individuals' brain, this triggers the release of the chemicals dopamine and serotonin, which is responsible for happy and positive feelings. Some of the immediate effects are relaxed muscles, curbed appetite, release of tension and stress.

So how can nicotine be that bad? Over time individuals who smoke or use other forms of nicotine will develop a tolerance to the nicotine and it will take more nicotine to achieve the same effects. Smoking also increases the breakdown of medicines in the body, requiring higher doses for medications to work. Smoking may also result in early mortality among adults. Tobacco related deaths in the United States are at 430,000 annually, with 200,000 occurring in people with mental illness.

Smoking does not have to be the answer to relieve stress and anxiety from ones’ life. With the proper help and assistance, it is possible to find resources to help quit smoking. The Mental Health Association in DE has published a Smoking and Mental Health brochure that is made possible through the DE Division of Public Health’s Tobacco Prevention Community Outreach Contract. Funding for the Contract is provided by the Delaware Health Fund and managed by the American Lung Association in Delaware.

The brochure highlights the correlation between mental health and smoking and provides information about quitting and available resources. Smoking is the number one preventable cause of disease, disability and death in the United States. Why not take a stand to protect your own physical and mental health through free resources. A healthy and productive life with out the need to reach for a cigarette is just a phone call away. Just call 800-287-6423 for a copy of the brochure to be sent to you free of charge.