MHA received a $40,000 grant from United Healthcare in March, for its Suicide Prevention Education program that offers training and education for students and the community reaching schools, nonprofits, health care centers, businesses, churches and government agencies. The donations were given during a special check-presentation ceremony at the Dover Library. House Majority Leader Rep. Valerie Longhurst and Rep. Trey Paradee attended the ceremony, and Darrin Johnson, CEO of United Healthcare Community Plan of Delaware, presented the grant to the Mental Health Association in Delaware.

Opis subcommittee members with the finalists and winners of the 2015 Opis Youth Suicide Prevention YouTube PSA Contest

Congratulations to St. Mark’s High School Senior, Dylan Colby, who was the grand prize winner of the 2015 Opis Youth Suicide Prevention YouTube PSA Contest

Inside:
• Q & A with Rita Landgraf
• E-Racing the Blues® is 10/25!

Learn how you can get involved!
(302) 654-6833
(800) 287-6423
www.mhainde.org
A message from Jim Lafferty

Executive Director, Mental Health Association in Delaware

Welcome to summer.

I’m writing to you just as this session of the legislature ended. I want to thank the Joint Finance Committee and the entire legislature for their approval of the funds requested by the Governor for additional substance use treatment services. These funds are fundamental to addressing the state’s critical need for additional services and improved access to these services statewide. I also want to thank them for not reducing grant-in-aid funds for non-profits like MHA. In our case, these funds are used to support our peer support groups which we feel are a very important adjunct to professional treatment for individuals recovering from mood or anxiety disorders or the loss of a loved one.

In this issue, Secretary Rita Landgraf provides an update on the Department of Health and Social Service’s work in the area of mental health and substance use services. MHA is very grateful for the work she is doing to improve these services.

MHA continues to focus on suicide prevention education. We feel that suicide is preventable and people trained to work with others who are in crisis are a critical part of preventing suicide. In the last year, more than 1000 individuals have been trained. They come to the training as educators, mental health professionals, members of law enforcement, other non-profit staff and members of the community. I want to thank Emily Coggin Vera, Jennifer Seo, Ally Gawel and Jennifer Smolowitz for their dedication to this very important education that we feel will have a positive impact on preventing suicide.

In addition to our critical focus on suicide prevention, we continue to provide peer support groups for people recovering from a mood disorder or for those who have lost a loved one to suicide or homicide. Our board and staff are committed to advocating for improved mental health services and to educating the community that mental health and substance use disorders are medically treatable illnesses.

I also want to thank Susan Cyczek, Director of the Division of Prevention and Behavioral Health Services for Children for the important work they are doing as the recipient of their third federal suicide prevention grant. Receiving their third grant says a lot about the work they are doing and the credibility that they have with the federal government. Congratulations, Susan.

Finally, thanks to all of you for your support, which is critical to the services we provide throughout the state. We are very grateful.

Jim
Q&A with
Rita Landgraf
Secretary of the Delaware Department of Health and Social Services
By Pam George, contributing writer

When Rita Landgraf became secretary of the Delaware Department of Health and Social Services in 2009, her pressing concern was tackling the crisis at the Delaware Psychiatric Center, which had been under investigation prior to Landgraf’s appointment. The U.S. Department of Justice maintained that the state had violated the civil rights of psychiatric patients by restricting them to the hospital and not supporting them in living in the community. A settlement, reached in 2011, paved the way for improvements.

Addiction was not on her immediate radar. “I knew that there were people out there challenged by the disease of addiction, but I never would have anticipated that it would rise to the epidemic proportion that it has,” she says.

In July, legislators approved the $4.45 million requested by the state Department of Health and Social Services to address the mounting addiction problem in Delaware. The funds will go to the Division of Substance Abuse and Mental Health and Division of Public Health for programs concerning young adult residential opiate treatment, general residential treatment, adult detoxification and sober living residential beds.

What’s driving the rise in addiction?

We knew opiates were becoming an issue – the overdose of prescribed and non-prescribed opiates. We didn’t see the impact of heroin until we started controlling those opiates to the degree that we did. It left us with a heroin explosion. [As prescription pain-treatment drugs became more difficult to obtain, addicts turned to heroin.] We’re not the only state facing this. Across the country, we’re seeing the same thing.

Do many people with mental health issues have addiction issues?

We call that co-occurring disorders. Many individuals have used substances to control their mental illnesses. Some have told me that in the beginning, it helps control the symptoms. For instance if someone is challenged by schizophrenia, it could eliminate the voices for some time, but we know that is only temporary. Then individuals end up with not only the disease but they’re also in harms way relative to the substance addiction. We do know [physical and mental] trauma also plays a role.

Younger adults have told me that when they had access to substances in their early teenage years, they took it largely to combat anxiety. Many times, what we’re finding is that people are using prescription drugs like Xanax, which is not prescribed for them, to eliminate their anxiety. In their mind, they think that is safe to do because they are using a prescription medication. I’ve had young people tell me that it’s safer than alcohol. But as a public health official and as any medical professional will tell you, if it’s not prescribed for you – even if it’s antibiotics – then it’s not intended for you and can actually harm you.

How can we avoid co-occurring disorders?

If you start recognizing – through appropriate screening – that someone may be suffering from a behavioral health condition and do a level of screening that would be inclusive of substance use and abuse, the better it is for that individual. You can not only recognize the dangers for a potential disease but also recognize if there are other underlying behavioral health issues affecting that individual, such as depression and anxiety. You can support that patient and recognize that disease prior to them experiencing an addiction disease.

How do people perceive addiction in 2015?

In the past, many people thought addiction was a character flaw and that individuals had control over it. I still hear some of that, but not to the degree that we did 10 or even five years ago. Addiction is a behavioral health issue, and like other behavioral health issues, many times it’s not seen with the same lens as other health-related conditions. We’re conscious of the role behavioral health plays in overall wellbeing and in promoting good health. Some of the work we’re doing is for people with very persistent mental illnesses is similar to the work we’re doing on the addiction front.

How do we treat people with addictions?

We’re working with our providers, both those that serve through the public service system and those in the private system. One thing we need to do is get away from punishing people if they relapse. We know that relapse is possible and many times probable. In the past, programs had a tendency to kick people out of treatment. I believe when someone has relapsed or before he or she relapses that we need to enhance their treatment not force them out of treatment. We’re not punitive when it comes to other diseases.

Lifestyle changes, as with any disease, go hand-in-hand with treatment. How do we support people by giving them life-coping skills? Many times people are more vulnerable as their stress increases.

People have different philosophies relative to the use of withdrawal management and some of the tools that go along with that. You can’t just give people one tool, such as methadone, and expect that they’re disease-free. They need the appropriate nutrition and the appropriate coping skills, especially when people are impacted by a high level of stress, which is toxic in and of itself. I believe a comprehensive individualized treatment plan would incorporate all of these holistic approaches so the individual can live a healthier life. How are you better empowered to take care of yourself to promote health and wellness?

What are you most proud of?

We’ve been very pleased by the amount of support we’ve seen from both the public and private arena. We’re working with our insurers now. How do we better provide that fiscal support as people are in recovery? How can we utilize our funding to promote levels of care within our treatment and recovery domain so people get to the right level of care and are successful? We’re working with schools and building awareness into the curriculum. Schools really want this level of information and students are getting engaged. So we’re really trying to hit it on all fronts: prevention, education, reforming our treatment and recovery services.

We’re also looking into the criminal justice side of this. Delaware [Department of Correction] Commissioner Robert Coupe told me that more than 60 percent of individuals who are incarcerated have an underlying issue of addiction.

We created helpishererede.com, a one-stop website, where people can go for information. We continue to upgrade it as services become available.

What are you most proud of?

The work we’re doing in behavioral health. The last thing I did before I became the cabinet secretary was to work on the Delaware Psychiatric Center task force, which looked at how to enhance DPC, which had gone through a traumatic stage. We have to enhance our system so it never reverts backward and goes continuously forward. I happen to be the cabinet secretary at the most exciting time ever in healthcare when we as a country are focusing on access to healthcare, better patient outcomes, a better experience and lowering the cost of healthcare, which has become unsustainable. We’re looking at how to integrate behavioral health into the whole system in a way that provides early access to healthcare rather than later access, when the disease is much more problematic for the individual and the system.
The 13th Annual E-Racing the Blues© for Mental Health Race

By Lauren Golt

Earlier this year, Duchess of Cambridge, Kate Middleton said, “Together with open conversations and greater understanding, we can ensure that attitudes for mental health change.”

With a suicide-related death occurring every 3.5 days in Delaware and approximately 48,000 adults suffering from depression state-wide, creating an open dialogue about mental health and erasing the stigma associated with mental illness is crucial to our community.

How can you help? By participating, promoting and/ or sponsoring the Mental Health Association in Delaware’s 13th annual E-Racing the Blues© for Mental Health 5K Run/Walk and 10K Run on Sunday, October 25th.

The MHA’s mission is to increase awareness of the symptoms of depressive and anxiety disorders so that people will seek early treatment. They provide suicide prevention training, education and advocacy throughout the state, as well as support groups for those with depression, anxiety, bipolar disorder, and those who have lost a loved one to suicide, murder or accident. The agency is committed to understanding that mental health is equal to physical health and is fundamental to achieving a healthy, balanced, and productive life.

E-Racing the Blues© for Mental Health is a fun community event that allows participants to reap the positive mental health benefits obtained from physical exercise. Research on the subject of exercise and mental health continues to grow and physical activity is now recommended to patients suffering from depression, anxiety and other mental health ailments.

Day of registration begins at 7:30 a.m., followed by the 10K run at 8:30 a.m., the 5K run at 9:45 a.m. and the 5K competitive and recreational walks shortly after. E-Racing the Blues© is one of the few races in the area that offers a 10K run and competitive walking. All events are chip-timed, one of the most accurate timing devices used today. Awards are given to individuals with the best time in their age group. Prizes are given to the team who raises the most money and the team with the highest number of members. Each participant receives a free long-sleeve t-shirt and enjoys a wide selection of refreshments at the conclusion of the race.

Last year’s sponsors included:

**Gold Sponsors:** Aloysius Butler & Clark, Christiana Care Health System

**Silver Sponsors:** Ashland, Bayhealth, Hatzel & Buehler Inc., John du Pont, KT&D Insurance, M&T Bank


E-Racing the Blues© for Mental Health Committee members are: (Chair) Lauren Golt, (Vice Chair) Patty Daniels, Vanessa Braun, Marcia Cloud, Mary duPont, Marian Fischer, Roberta Fishgold, Candy Geise, Jane H. Gibson, Bill Green, Niki Hawkins, Jessica Hill, Lizzie Johnson, Laurie McArthur, and Karly Nesson.

To learn more or to get involved, visit www.eracingtheblues.org or contact the office at 302-654-6833.

Help us promote E-Racing the Blues© for Mental Health by liking us on Facebook (Facebook.com/MentalHealthAssociationInDelaware) and following us on Twitter (Twitter.com/MHADelaware)
What is Your Happiness Rating?  
National Depression Screening Day

By Alexandra Gawel

Did Madison Holleran, the University of Pennsylvania freshman track runner, who tragically took her own life, have a mental illness? Yes, Madison was being treated for depression, and research indicates that 90% of people who die by suicide have a mental health concern. So how can we stop this? Quick, anonymous mental health screenings are one simple way to connect people to the help they need.

For more than a decade, the Mental Health Association in Delaware (MHA) has participated in National Depression Screening Day, also known as “NDSD.” Our organization partners with other social service organizations to bring mental health professionals and clinicians into the community to do mental health screenings statewide. Annually, NDSD is held on the second Thursday of October; this year it will be on Thursday, October 18, 2015. We utilize a screening tool from Screening for Mental Health based in Boston, that is broken down into four sections: The Hands Depression Screening Tool (from the Harvard Department of Psychiatry/National Depression Screening Day Scale), The Mood Disorder Questionnaire (by the University of Texas Medical Branch), Carroll-Davidson Generalized Anxiety Disorder Screen (by Bernard Carroll, MD, PhD and Jonathan R. T. Davidson, MD) and the Modified Sprint (Sprint-4) PTSD Screen (by Jonathan R.T. Davidson, MD). Combined all four of these screening tools test for depression, bipolar disorder, anxiety and PTSD, and when the form is completed, the clinician will review the results and follow up with a recommendation.

In a cross study of four screening locations for 2014, it was determined that most participants were “referred for depression and one or more co-occurring psychiatric disorders” (Davis, 2014). This indicates that if signs of depression are present in an individual, it is likely that they may also be suffering from another psychiatric disorder. For example, people who have high anxiety may sometimes partake in activities to distract their mind from their racing thoughts, such as gambling. According to HelpGuide.org, a nonprofit with a focus on mental health and well being, “As they gamble, people often report being separated from their anxious feelings or projecting their feelings of anxiety onto the excitement they feel when they partake in their gambling activity of choice.” As a result, if an individual gambles it may be difficult to get them to stop gambling if they have not been treated properly for their anxiety. This is one example of why it is crucial for providers as well as consumers to be aware of the high correlation between multiple psychiatric disorders so proper treatment can take place.

Even though Madison appeared to be an upbeat and happy person via her social media outlets, do not let psychiatric disorders fool you. It might be easy for a fearful, scared and lonely person to hide behind a smile. Do not allow yourself to end up like Madison - help is available. If you find yourself feeling like Madison, please reach out for help. Your life is worth more than you can imagine. Contact the suicide prevention hotline at 1-800-273-TALK.

If you are interested in learning more about National Depression Screening Day, would like to volunteer to do screenings, or want to hold a screening location at your facility, please feel free to contact Alexandra Gawel at your facility, please feel free to contact Alexandra Gawel at the Mental Health Association in Delaware at agawel@mhainde.org or (302)654-6833 x 16.

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

Lifelines is a Comprehensive Suicide Awareness and Responsiveness Program for middle schools. This is a whole-school program made up of three unique components: Lifelines: Prevention, Lifelines: Intervention, and Lifelines: Postvention. This trilogy of programs is the only existing model of its kind available for schools. The complete Lifelines Trilogy is based on over 20 years of suicide-in-youth research that indicates an informed community can help to prevent vulnerable teens from ending their lives.

Workshop Details:
Lifelines prevention program can be done in as little as 45 minutes to one hour. The program was created for school staff and parents but can be utilized in a variety of community settings including churches, community centers and after school pro-grams. These workshops can be ideal for parents & families, clergy, educators and others, who will learn about the problem of suicide in Delaware, basic myth and facts about suicide, and signs of suicide risk. We can customize the workshops to address the needs of your community or organization. The student curriculum must be done in two 90 minute sessions or four 45 minute sessions.

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 will-ing 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, 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.

E-Racing the
Blues® South

By Laurie McArthur

The 2nd annual E-Racing the Blues South was held on Saturday, May 9 at Rehoboth Beach with 39 walkers visiting 6 mental health related exhibitors in Grove Park to benefit Mental Health Association in DE (MHA). Thank you to sponsors of the event including Delaware Rural Health Initiative and Recovery Innovations. Special gratitude to our exhibitors: Recovery Innovations, MeadowWood Behavioral Health, Contact Lifeline, NAMI DE, Mobile Crisis Intervention Services – Southern DE, and MHA. The event began in 2014 to bring more attention to suicide prevention in light of the recent increase in number of suicides in lower Delaware. MHA has been working on the State’s suicide prevention efforts and this walk brings the word that suicide is indeed preventable to walkers, guests and volunteers. Mark your calendar for Saturday, April 30 for the 3rd annual event.
Military and Veteran Mental Health Summit and Family Fun Night Coming Again This Fall

By Emily Vera

The Delaware Suicide Prevention Coalition is pleased to announce the 5th annual Delaware Military and Veterans Mental Health Summit in support of suicide prevention month will take place on September 10th this year. The event will take place at the Chase Center on the Riverfront, and will focus on presenting and disseminating information and resources to veterans, service members, families, and providers who work with the military community in Delaware.

Along with several workshops, the Summit will include a Theater of War performance. The Theater of War is a national project that presents dramatic readings of Sophocles’ Ajax – an ancient Greek tragedy about the suicide of a great, respected warrior-to-diverse military and civilian audiences in order to engage communities in discussions about suicide, combat stress, alcohol and substance abuse, and the impact of military service on families and communities. It will be followed by a panel of military and community members who have been affected by these issues.

The keynote address will be given by Carol Graham, a military mother who lost two sons—one to suicide and one in combat—and devoted her life to fighting the military’s high suicide rates and mental health stigma. She and her husband, Major General Mark Graham, US Army (Ret.), are outspoken advocates for both civilians and soldiers who suffer from Depression, PTSD, and Traumatic Brain Injury. Her presentation is entitled, “A Legacy of Hope: A Mother’s Story.”

This day-long event is an excellent forum for sharing resources and increasing understanding of mental health issues in the military population in Delaware. The event is planned and executed by the Delaware Suicide Prevention Coalition Military Subcommittee, which includes Mental Health Association in addition to the Delaware National Guard, ContactLifeline, MeadowWood Behavioral Health System and the Rockford Center, as well as the agencies which are the main sponsors of the event—the Department of Veterans Affairs and the Delaware Commission of Veteran’s Affairs.

On October 17, 2015, the Delaware Suicide Prevention Coalition will present the Military Wellness Fall Festival from 5 to 8 p.m. This is our fourth annual wellness event for military service members, veterans and their families, and will provide an evening of family fun as well as a source of free information regarding services and resources available to the Delaware Military Community. Our purpose is to increase connection, mental wellness, and overall health for military-connected Delawareans.

The Military Wellness Fall Festival is free and open to all military-connected families, and is a fun-filled event with games, food, face painting, and balloon animals. In addition, it will include a live band and raffle prize drawings for the families who attend. We hope you can be a part of this fun and important event!

2015 Veterans Mental Health Summit

“The Theater of War”

Register At: www.mhainde.org
Chase Center
815 Justison St, Wilmington, DE
Thursday, September 10, 2015
8:30AM - 4PM (Registration opens at 8AM)
FREE CEUs

Delaware Military, Veterans and Suicide Prevention Coalition

SAVE THE DATE!

2015 Veterans Mental Health Summit

“The Theater of War”

By Jennifer Seo

On Thursday, June 11th, 2015, Opis, which is the youth suicide prevention subcommittee of the Delaware Suicide Prevention Coalition, held their first 2015 Youth Suicide Prevention YouTube PSA Contest Premiere Party at the Rockford Center Gymnasium. The party brought out about 70-75 people in total and was an event to celebrate and recognize the finalists of the 2015 YouTube PSA Contest. There were 3 category winners and one grand prize winner. Students from Polytech High School’s Aevidum Club won the category for best promotion of help seeking behavior. Students from Conrad Schools of Science walked away with the prize for most informative and factual PSA. A rising senior from St. Mark’s High School came in first place for most attention grabbing category. And our grand prize winner was St. Mark’s High School senior, Dylan Colby. Dylan’s 30 second PSA will play in movie theaters in Delaware around the months of November and December before blockbusters like The Hunger Games Mockingjay Part 2 and Star Wars. Opis wanted to create opportunities for youth to play an active part in youth suicide prevention by offering creative avenues to deliver this important message. The group hopes to provide more activities and events for youth in the future and involve more youth in the planning process. A big thank you to all those who helped with the planning of the contest and party! The Opis 2015 Youth Suicide Prevention YouTube PSA Contest was made possible and funded by Project SAFETY, the federal Garrett Lee Smith Grant, provided by the Division of Prevention and Behavioral Health Services. For more information on Opis and the PSA Contest, please contact Jennifer Seo at jseo@mhainde.org.

The winners of the best promotion of help seeking behavior category from Polytech High School's Aevidum Club enjoy the photo booth at the premiere party.
CLIP AND SAVE THE FALL SCHEDULE

Mental Health Association in Delaware
SUPPORT GROUPS SUMMER 2015
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.

For help with …

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<th>Depression</th>
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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>
<td>Newark (7-9 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>Wilmington (1st, 3rd &amp; 5th Mon.) (7-8:30 p.m.)</td>
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<td>Millsboro (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>
<td>Milford (4th Monday) (7-8:30 p.m.)</td>
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Are You Aware? Mental Health Awareness Month

By Alexandra Gawel

More than sixty people came together in solidarity to celebrate May is Mental Health Awareness Month.

This year, the Mental Health Association (MHA) in Delaware partnered with the National Alliance on Mental Illness (NAMI), Delaware to hold a proclamation unveiling for May is Mental Health Awareness Month.

The event took place in Rodney Square on Tuesday, May 26, 2015 from 10:00-10:30am. The proclamation, signed by Governor Jack Markell, was presented by Department of Health and Social Services Secretary Rita Landgraf to a group of over sixty individuals. Jim Lafferty, Executive Director of MHA in DE, Susan Cycyk, Director, Division of Prevention and Behavioral Health Services Delaware Children’s Department and Dr. Joshua Thomas of NAMI, DE all gave remarks about the event and its importance for our communities to be aware of mental health. The event ended with a commemorative bell ringing to celebrate Mental Health Awareness Month. Participants kept their bells as tokens to remind them of mental health awareness and keep the conversation going.

Mental Health Awareness Month is a time to come together to learn how to recognize early symptoms of mental illness and the importance of talking about concerns with a doctor or mental health professionals. According to the National Institute of Mental Health, there is a discrepancy of nearly a decade between the onset of symptoms for mental illness and receiving proper treatment. Early identification and treatment can make a big difference for successful management of a condition, especially because the World Health Organization ranks mental illness as North America’s biggest health concern, ahead of both cardiovascular disease and cancer.

One in four adults will experience a mental illness in their lifetime, which means over 13,000 adults in the city of Wilmington, DE have or will suffer from a mental illness. Since mental illness is a valid concern in our community, we wanted to recognize the month of May along with others as National Mental Health Awareness Month.

If you are interested in becoming involved with Mental Health Awareness Month through volunteering or organizing, please feel free to contact Alexandra Gawel at the Mental Health Association in Delaware at agawel@mhainde.org or (302)654-6833 x 16.
Smoking and Depression

By Emily Vera

Nicotine is one of the leading preventable causes of illness, disability and death in the United States. Among people with mental illness, tobacco-related illness is the highest-ranking cause of death.

Smoking rates for people with a mental illness or other addiction are two to three times higher than in the general population, and those with a mental illness represent about one-third of the estimated 51 million adult smokers in the US. Tobacco-related deaths in the United States are at 430,000 annually, with 200,000 occurring in people with mental illness. A large, recent study found that smoking accounted for 50% of the deaths among persons with schizophrenia, bipolar disorder, or depression (Callaghan et. Al., 2014).

Studies have found that smoking is an independent risk factor for suicidal thoughts, attempts and completions. It also makes recovery from mental illness more difficult for a number of reasons. 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. This leads to having to purchase more and more tobacco products, which often becomes a serious financial stressor. Additionally, as smoking becomes less common, people who do smoke experience greater barriers to finding a job and housing as employers and landlords become more prone to seek non-smokers. For example, a national movement is promoting smoke-free public housing that prohibits smoking in one’s own apartment because of the toxic effects of second-hand smoke, which will make it more difficult for people who smoke to obtain public housing.

The once-popular idea that smoking stabilizes psychiatric illness is not supported by evidence. Instead, studies show that people who smoke go through cycles of uncomfortable withdrawal that are relieved by smoking, which may be misinterpreted as reduction of symptoms of mental illness. Nicotine withdrawal results in agitation, anxiety, restlessness, and impaired concentration. These symptoms are temporarily improved by smoking, sometimes giving the smoker the false sense that smoking is calming and improves concentration.

Rather than smoking being a coping skill for mental illness, studies show that stopping smoking improves mental health. Multiple studies show that people who smoke and have a mental illness who receive treatment for quitting remain psychiatrically stable. Nicotine replacement and medication are shown to be effective treatments in helping people quit. A recent meta-analysis showed that smoking cessation was associated with reduced depression, anxiety and stress and improved mood and quality of life. The effect sizes of symptom improvement associated with quitting smoking were equal to or larger than those seen with antidepressant treatment of mood and anxiety disorders. Quitting also does not have a negative impact on treatment for other addictions and may increase long-term abstinence. Unfortunately, despite these findings, tobacco use continues to be a low-priority for treatment in the behavioral health sector.

Studies show that while people with mental health disorders are more prone to use nicotine, and may need support in order to quit, they also want to and are able to quit. Considering the harm caused by tobacco products, and the benefits of quitting, tobacco use treatment should be prioritized. There are many resources available to those who want help to quit smoking and using other forms of tobacco.

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 nicotine and provides information about quitting and available resources. Take control of your life by quitting. Call 800-287-6423 to request a brochure to be sent to you free of charge.