



WRITTEN BY Julie M. McKinnon

PICTURED Chelsea Proudfoot of Sylvania Township started a support group for young adults.

# ERASING THE **STIGMA** *of* **MENTAL** HEALTH **ISSUES**

A quiet teen, Chelsea Proudfoot was mistakenly convinced she was being bullied by students at her new school. Jeers overlooked in middle school in Dublin, Ohio, were plaguing her in New Jersey – or so the freshman believed. And when she thought about not wanting to wake up, she thankfully told her mother.

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"I had no idea what it was," recalls Miss Proudfoot, now a 20-year-old Toledo-area native living in Sylvania Township with her parents, Debbie and David Proudfoot.

"I wasn't talking much to my parents, and I was just not myself anymore," Miss Proudfoot adds. "I kind of alienated myself from most of my friends."

Eventually, Miss Proudfoot was diagnosed with depression likely caused by a chemical imbalance and genetics. These days, Miss Proudfoot is getting mental health treatments, and the part-time chocolate shop employee started a support group for young adults last year through the National Alliance on Mental Illness of Greater Toledo.

Such a weekly support group was needed in Lucas County so young adults could discuss problems, give each other support, make suggestions, talk about treatments and insurance, and simply socialize. At the same time, Miss Proudfoot's mother attends and sometimes helps with a support group for family members.

"I don't think anybody should go it alone," Miss Proudfoot says. "That's what a lot of teenagers and young adults are doing."

She adds, "We still joke around, and if we want to go bowling together, we go bowling together."

## Depression and Suicide

In Lucas County last year, 22% of adults were diagnosed with depression, up from 20% in 2007, according to statistics from the 2011 Lucas County Health Assessment. Of Lucas County residents diagnosed with depression, 57% were receiving treatment for it, according to the most recent report on health indicators among adults commissioned by Healthy Lucas County, a group with representatives from ProMedica, Hospital Council of Northwest Ohio and elsewhere.

Still, there is a stigma attached to depression and other mental health issues, including anxiety, schizophrenia, bipolar disorder, and post traumatic stress disorder, those who have and treat such problems say.

Mental illnesses should not be treated any differently, though, than diabetes, cancer or other physical health problems, they add.

"People are not ashamed to say they have diseases," says Gwen Jones, vice president of quality improvement for Harbor, a mental health provider based in Toledo. "They are ashamed, even frightened, to say they have schizophrenia or are bipolar."

Of Lucas County adults who needed help with depression or other mental health problems for themselves or a loved one, 7% indicated the stigma attached to seeking

care stopped them while 10% listed fear, according to the most recent health assessment report. Other reasons included not being able to afford services at 18%; other priorities, 12%; too high of copay or deductible, 9%; not knowing how to find a program, 9%; and transportation, 8%.

Yet, the ultimate cost for not getting help with mental health issues is high.

The health assessment report shows that 3% of Lucas County adults considered attempting suicide in 2011, the same as in 2007. Youths were included in the most recent report, and 16% of Lucas County high school students had considered suicide, while 4% had attempted to end their lives, it shows.

Among counties in northwest Ohio and southeast Michigan, Lucas County had the fourth highest suicide rate in 2010. Fulton, Monroe and Sandusky counties had even higher suicide rates, while Putnam County rounded out the top five in the region, according to the latest statistics available from both the Ohio Department of Health and Michigan Department of Community Health.

For more information, please see chart on page 20.



## Help for Veterans

Veterans returning from overseas deployment are one group concerning government officials and healthcare providers. Suicide among U.S. troops is increasing, equating to nearly one soldier a day taking their own lives through about mid-2012, according to U.S. Department of Veterans Affairs statistics.

The VA Ann Arbor Healthcare System has an outpatient clinic in Toledo. Returning veterans can get assistance with medical problems, as well as mental health issues whenever they are ready to discuss them, says Sheila Rauch, PhD, ABPT, director of the mental health program for returning veterans.

The goal is caring for the whole veteran as they transition home, and there definitely is a stigma for soldiers about mental health, Dr. Rauch says. Veterans in units that had combat exposure and lost soldiers, though, are at higher risk for mental health issues.

“It’s very much a priority in the VA system and in our program,” says Dr. Rauch.

Arrowhead Behavioral Health in Maumee also sees veterans, and it has an insurance-covered program that includes 28 inpatient days of psychiatric and detoxification treatments, says Mark Veal, director of community relations.

With the United States continuing to withdraw troops from Afghanistan, there likely will be more soldiers seeking help at Arrowhead for post traumatic stress disorder, trauma, addictions, and other ailments. Arrowhead has treated veterans from all over the United States.

“We’re going to probably see an influx because a lot of them are coming home,” Mr. Veal says.

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## Substance Abuse

Overall, substance abuse is on the rise in the region among those who have severe and persistent mental illnesses, creating a dual diagnosis that needs treatment, says Agha Shahid, MD, medical director of psychiatric services, ProMedica Flower and Toledo Hospitals.

Foreclosures and unemployment are fueling depression, according to Dr. Shahid. And, with the troubled economy, psychiatric units at the hospitals are treating mentally ill patients who have lost their jobs, cannot afford treatment elsewhere, have no insurance, and are not getting medications.

"If you have this diagnosis to begin with, and on top of that you have these economic problems, it's aggravating it," says Dr. Shahid, adding ProMedica Flower Hospital is increasing its number of psychiatric beds.

Meanwhile, it's hard for area women who have been treated for substance abuse to find a halfway house to continue their recovery. Some have had to be transported from the hospital to Dayton or elsewhere outside of the region, he adds.

In Defiance, economic woes in the last couple of years also have impacted the

community's mental health, and residents have less and less insurance coverage for treatment, says Betty Blockberger, RN-BC, director of the Coping Center at ProMedica Defiance Regional Hospital.

At ProMedica Herrick Hospital's outpatient behavioral services department, there are 100 people on the waiting list, and it will be four to six weeks before their appointments. There were around 25 people on the waiting list a few years ago, so the stalling economy likely has had an impact, says Cindy Daniels, process manager for behavioral services.

# Genetics and Mental Health

Generally, an estimated 20% – 25% of the population has mental health issues, a rate that increases to about 30% in those who have close family members with depression, schizophrenia or other problems, says Jean Molitor, MD, a Harbor staff psychiatrist.

“We always have to think about that when we look at how to treat these patients,” Dr. Molitor says.

Although Miss Proudfoot’s parents and twin brother do not have mental health issues, other relatives do. Miss Proudfoot is

working with a therapist for depression, and she also is under the care of a psychiatrist trying to find the best antidepressant with the least amount of side effects, she says.

“I have my ups and downs, but I know how to deal with it better,” Miss Proudfoot says. “I know the signs and symptoms.”

Recognizing the signs and symptoms of mental health crises is a skill more should know, says Marsha Drees, MSSA, LISW-S, LICDC, CEAP, SAP, Harbor’s symmetry wellness director.

Last year, Harbor started offering a 12-hour course to nurses, probation officers, ministers, case managers, and others to become certified in mental health first aid. The course teaches a five-step action plan so those who are certified can help someone in need connect with professional, peer, social, and self-help care.

## Other Community Resources

Toledo has a number of community resources to help people with mental health issues. Rescue Inc. runs an access service to connect Lucas County residents of all ages to mental health and substance abuse resources. Called Central Access, the service annually fields about 3,000 non-emergency calls, and Rescue also handles about 6,000 crisis assessments a year.

Rescue also has 12 adult beds and eight adolescent beds for those needing inpatient mental health assistance who have not reached the level of a psychiatric hospital. Last summer, those adolescent beds were opened to youth from 16 local counties, helping fill a void in the region, Rescue officials say.

Richard Arnold, a Rescue board member diagnosed with personality disorder as a child, says he is a living testament to the importance of getting help. The 54-year-old Toledo man lives in an apartment and volunteers at Toledo Seagate Food Bank.

“I get to see the faces of children who are going to have dinner on the table,” Mr. Arnold says. “That’s better for my mental health than all the antidepressants in the world.”

In 1982, a homeless Mr. Arnold went to St. Paul’s Community Center after being

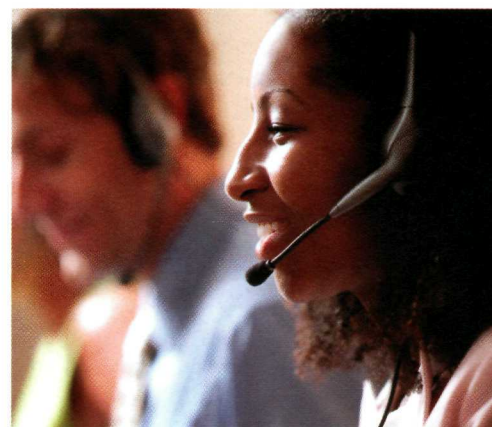
discharged from state psychiatric care. St. Paul’s continues to be a homeless shelter that primarily houses mentally ill people, as well as offering them activities to build life skills, connections to other resources, treatment, meals for them and the community, and crisis housing to anyone in the winter. It also has transitional housing and other services to help work toward independence.

The Thomas M. Wernert Center, meanwhile, offers art classes, computers, support groups, fellowship, and other services on weekdays. One area the Wernert Center has focused on recently is nutrition and exercise since medication for mental illness often causes obesity and other medical problems, shortening life spans, says Kelly Skinner, executive director.

All Wernert Center staff members – including Ms. Skinner, who has been hospitalized for depression – have experienced some kind of mental health issue. That helps members build needed relationships with staff.

“I may not have experienced homelessness, but I can certainly relate to the feelings of hopelessness, not wanting to get up in the morning,” she says.

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Vent, a National Alliance on Mental Illness of Greater Toledo (NAMI) young adult support group hosted by peers, is held Mondays at 7 p.m., 2753 W. Central Ave., Toledo. NAMI also has an adult support group and a family support group meeting at the same time and place. For information about any of the support groups, please visit [www.namitoledo.org](http://www.namitoledo.org) or call 419-243-1119.

# STAGGERING Statistics ON SUICIDE

## Highest percentage of high school students who have considered suicide:

- Lenawee County, 17%
- Followed by Lucas and Paulding counties, 16%

## Highest percentage of high school students who have attempted suicide:

- ▲ Hancock County, 9%
- ▲ Followed by Defiance County, 8%

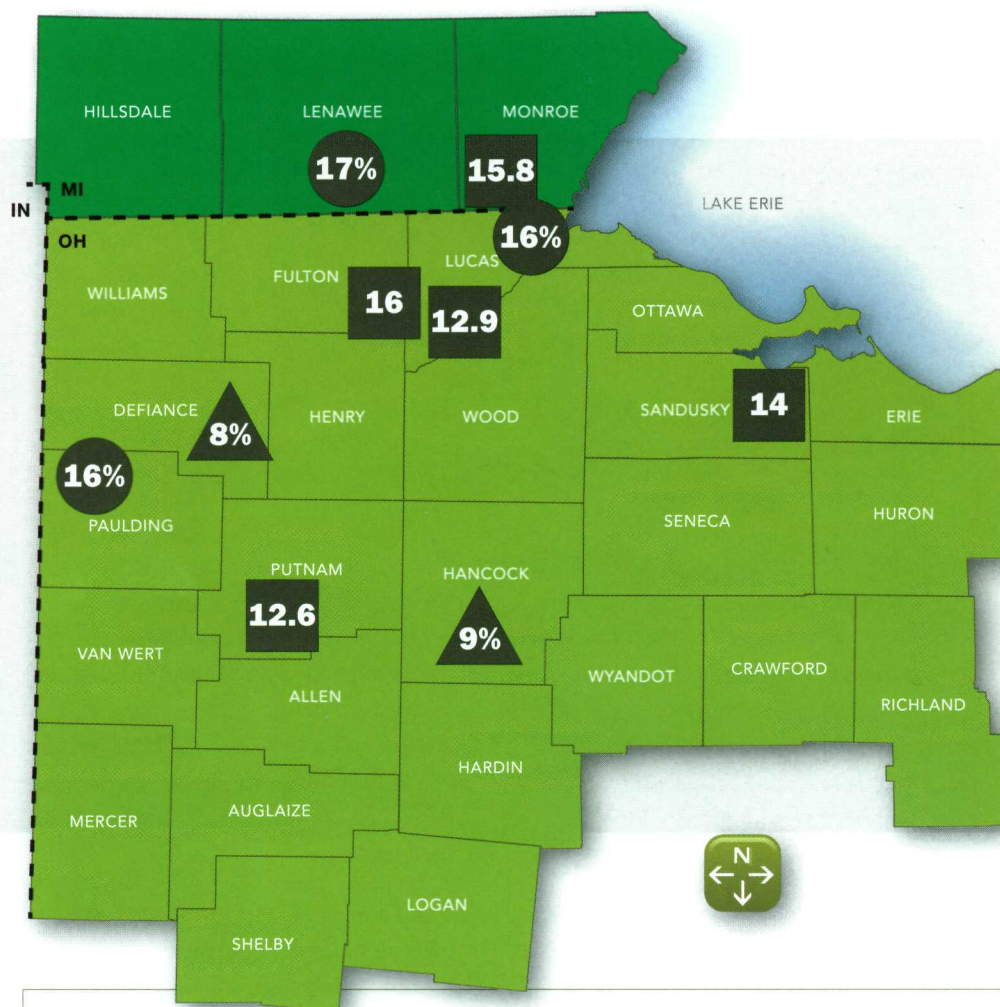
Sources: Most recent county health assessment reports

## Highest suicide rates in northwest Ohio and southeast Michigan in 2010:

- Fulton County, 16 per 100,000
- Monroe County, 15.8 per 100,000\*
- Sandusky County, 14 per 100,000
- Lucas County, 12.9 per 100,000
- Putnam County, 12.6 per 100,000

\*Not age adjusted.

Sources: Ohio Department of Health and Michigan Department of Community Health



## Persons at higher risk

Some people are at a higher risk than others to die from suicide. Men, for example, are about four times more likely than women. Some other factors that can put a person at risk for attempting or committing suicide are:

- Previous attempt or attempts
- History of depression or other mental illness
- Alcohol or drug abuse
- Family history of suicide or violence
- Physical illness
- Feeling alone

Source: National Center for Injury Prevention and Control

# Suicide Spurs Prevention Education

Scott Hammersmith made the Defiance High School varsity baseball team, and the 16-year-old sophomore was trying to secure a starting spot on the mound. His wish was to one day pitch professional baseball. In the meantime, Scott garnered As in school, enjoyed popularity and was an ideal oldest child despite occasional moodiness.

"He was every mother's dream," recalls Sherri Hammersmith, Scott's mother.

"He wouldn't even drink pop because he didn't want caffeine in his body," adds the Defiance mother of three. "He took care of himself. He really did. And there were no signs."

There were no signs of the nightmare apparently playing out in Scott's head and his journal, where the scholar athlete detailed struggles with the label of overachiever and feeling far from perfect. On a beautiful and sunny April day, after a baseball game, Scott committed suicide. He left a note expressing love and regret to his family, and his journal found days later by his parents told of his torment.

Suicidal attempts and thoughts among high school students are raising alarms throughout northwest Ohio and southeast Michigan. In 2011, 17% of Lenawee County high school students thought about committing suicide, and 9% of Hancock County high school students attempted to take their lives, according to a comparison of the most recent county health assessment reports.

In Defiance County – where the 2009 county assessment report shows 14% of high school students considered suicide and 8% attempted it – Mrs. Hammersmith sought a way to help others after Scott died.



Last year, she started the annual One Step At A Time 5k Run and Walk in Defiance to raise money for teen depression awareness and suicide prevention efforts. Some money benefits the Four County Suicide Prevention Coalition, which serves Defiance, Fulton, Henry, and Williams counties.

"I can't let this go," Mrs. Hammersmith says. "I don't want kids out there and parents out there feel no one wants to help them."

The Lucas County Suicide Prevention Coalition is among northwest Ohio groups working to raise awareness. Lenawee County has a task force that meets monthly to deal with teen suicide and bullying.

Lenawee County school districts have a tight-knit group of guidance counselors who support students during a crisis situation, such as after a Morenci Middle School student accidentally shot himself while hunting a couple of years ago, says Michael Osborne, EdD, superintendent of both Morenci and Hudson area schools.

At Morenci and Hudson schools, students making remarks about suicide would be counseled and, if necessary, connected to outside assistance, Mr. Osborne says.

ProMedica Toledo Children's Hospital's pediatric psychiatric unit treats children as young as 6 from northwest Ohio and southeast Michigan, although typically depression and suicidal thoughts are not problems among such young patients, says Marianne Thomas, RN, unit director.

Adolescents are facing more pressures, such as having sex at an early age or anxiety about substance abuse, and that is compounded by splintered families offering less support, Ms. Thomas says. Those engaging in self-injurious behaviors, such as cutting, are at higher risk of suicide, she says. Bullying can lead to suicide attempts as well, she adds.

"Kids are more sensitive to what's going on in their environment, both at school and what's going on at home," Ms. Thomas says.

The pediatric psychiatric unit works to stabilize patients and involve family members. The hope is for patients to start a new life, but some get a false sense of security on the unit, Ms. Thomas says.

"The saddest ones are the ones who don't want to go home because life is nicer here," she says. ◀