

FSOPC NEWS

FAMILY SUPPORT ORGANIZATION OF PASSAIC COUNTY

Children's Mental Health Awareness Week, May 3-9, 2009

By Nicholas Carson, M.D., FRCP

There is good news and bad news in the world of children's mental health.

First, the bad news: mental illness affects many youth of all ages and can seriously interfere with family and school life. For parents and guardians of youth with mental illness, this is not news, and the struggle to cope with mental illness is all too real. The good news is that advances in the treatment of childhood mental disorders can give families hope.

At any given time about one in five youth will have a mental illness (diagnosable mental illness or addictive disorder that causes at least minimal impairment). Common problems for young children are Attention-Deficit/ Hyperactivity Disorder (ADHD) and anxiety (obsessive-compulsiveness, separation fears, post-traumatic stress). As children enter the teenage years or, in some cases, at even earlier ages, they are vulnerable to depression, bipolar disorder (severe mood swings), schizophrenia (hearing voices, bizarre thinking), conduct disorder (delinquent behavior), and drug abuse. Different mental illnesses often overlap each other. For example, both anxiety and depression might cause a child to be irritable and withdrawn, and sleep poorly. The child may have headaches or stomachaches the pediatrician cannot explain. Therefore, whenever a child is diagnosed with a mental illness, it is important to look for a second one lurking

in the background.

It is difficult to properly diagnose and treat childhood mental illness. Critics question whether it is right to give psychiatric medications to children. Skeptics think that mental illness in children does not exist. These are important issues that should be discussed with a pediatrician, psychiatrist, or psychologist.

Most children with mental illness do not receive the treatment they need. This is especially true for children of color, including immigrant children. Latino youth—especially those who have emigrated from another country—may experience more anxiety and suicidal feelings than children who grew up in the United States. A sad result is that suicide remains one of the most common causes of death among youth in the United States and is particularly problematic among Latino youth.

Parents' feelings have an enormous effect on how their children feel. For example, children whose parents are depressed are at a higher risk for experiencing depression themselves. This is in part because children can inherit a risk for mental illness from their parents. It is also because mental health is influenced by the people and places a child experiences. In immigrant families, children whose parents are distressed by moving to a new country may also be distressed themselves. Trauma is an especially important influence on the mental health of children, including immigrant youth. Exposure to violence, poverty,

and discrimination can be disturbing for children and lead to future difficulties with behavior, sadness, and worry.

Fortunately, research in child mental health is delivering good news. We now know effective treatments for depression, anxiety, ADHD, schizophrenia, autism, and drug abuse in youth. Most of the time, a combination of medication and psychotherapy is the best approach. Medications like antidepressants and stimulants have been used for years in children. When monitored by a physician or nurse, they can be quite safe with few side effects. Psychotherapy, also called "talk therapy," can be very effective for teaching skills that are important for recovery, especially when parents are involved. Some studies have found that psychotherapy is especially helpful for reducing suicidal thinking. And don't forget schools: it is important for parents to request an academic evaluation when a child is diagnosed with mental illness. Problems with school achievement might be explained by an undiscovered mental illness or learning disability. Parents have the right to request this evaluation, and all children have the right to a free and appropriate education under the Individuals with Disabilities Education Act. Your pediatrician, psychologist, or psychiatrist is a good person to contact for help.

For more information visit: <http://mentalhealth.samhsa.gov/publications/allpubs/CA-0004/default.asp>.

www.nami.org



May 7th, 2009

FSOPC Mission Statement

The Family Support Organization of Passaic County (FSOPC) provides direct Family-to-Family peer support, education, advocacy, and empowerment and works collaboratively as a system partner in planning, organizing and coordinating needed and appropriate care to families with children with emotional, behavioral and mental challenges.

Inside this issue:

Coaching Families in IEP's	2
Parent's Corner	3
Foster Care Month	3
Book Review	3
Announcements	4
Calendar	5
Health Tip	6

Coaching Families to be Involved in the Implementation of Evaluation Process

By Gwen Palmer

Family members rearing children and/or youth with emotional, mental, or behavior challenges have first-hand knowledge and expertise about what should drive the decisions about their children's care, and about the organizations that serve them. Because of this knowledge and expertise, a family-driven evaluation process needs families and evaluators to work together in partnership. This partnership needs to have an equitable balance of power and equal access to resources and evaluation skills. Families implementing evaluation processes may need to develop additional skills and knowledge; there is a need to educate families working with the evaluation team on not only the terminology of evaluation, but on an overview of the tools and resources and their importance to the process. It is crucial that professional evaluation staff or a more experienced family member sit down with family members to give an orientation to the tools and resources as they pertain to their community.

The Challenge

The complexities of collaborating effectively in a partnership with families are:

Limited education and training that address individual needs of family members

Understanding a family member's strengths and weaknesses

Lack of family members' involvement in the development, dissemination, and interpretation of evaluation findings

Families are busy and often still need to address issues related to their own children's

mental health needs

Lack of training for evaluators to work with family partners or training in collaboration

Wider community might not respect family member input

Tension between advocacy and research rigor

Family members and evaluators often speak different languages

The Strategy

Family/evaluator partnerships require collaboration with family members that concentrates on:

One-on-one discussions and the generation of lists meant to identify skill levels, strengths, and needs as identified by the family partner

Provision of on-the-job training and other training opportunities for family members to acquire technical skills needed to do the job

Learning by doing, such as families co-facilitating meetings or co-trainings

Learning from other communities that have been successful in partnering with families

Flexible scheduling of activities that involve evaluation processes to be convenient for families – avoid school and work hours for families

Promoting a culture of mutual learning

Open communication, especially about differences in perspectives

Sharing information to ultimately influence a better mental health system

Educating the wider community about the value of family involvement

Having ongoing discussions concerning the differences between advocacy and research

Assessment of communication styles

One-on-one conversations to get a sense of the family member's skill levels and the goals that he or she would like to accomplish in taking part in the evaluation process in his or her community

Clear articulation of expectations (and providing them in writing)

Providing training as needed (e.g. staff development plan) where gaps surface and needs arise

Providing the family partner with needed resources, supports, and technical assistance

Providing an employee a manual on Jargon 101 – a glossary of "work language" – as jargon can be a subtle barrier between professional evaluators and family partners

Providing ongoing monitoring and support that will enable the professional evaluator and the family partner to check on and balance their needs, perceptions, and plans for future activities around evaluation

Steps

Assess strengths of team members

Assess the identified needs of team members

Provide trainings with hands-on activities

Provide training where and when needed

Clearly articulate expectations and provide them in writing

Involve family members in the development, dissemination, and interpretation of evaluation findings

Discuss how to manage stress for family members

Collaborate with national or local family organizations in the development of materials to improve collaboration with families

Ongoing monitoring and support to balance needs and perceptions

Benefits

Mutual community-wide learning

Allows for shared responsibility

Dependency on each other to facilitate working with each other and not for one another

Realization that integrating the family perspective on evaluation processes is helpful on the practice, program, and system levels

Increased use of research by families

Increased relevance of research

Enhanced empowerment of evaluators, families, and other stakeholders

Equal roles as decision-makers

http://www.tapartnership.org/news/2009_02/familymatter.asp

Technical assistance Partnership for Child and Family Mental Health

Parent's Corner: HOPE



TODAY I have HOPE
that I won't fail,
TODAY I have HOPE
that all is well.
I look around the corner
to find what I see
little do I know
HOPE is in front of me.

I turn the corner
to see if I see it
down the street,
I turned the corner to find
HOPE meeting me.
I find myself looking to the
sky,
Even some days
I ask myself why?
It always comes back to me

That I have not failed
This is what life has dealt me
So I must not dwell.
It all boils down to
finding the hope in me,
people say that HOPE is the
key
So I say to myself why me?
I ran into a challenge
And before I could see

There was the burden
That blinded me.
I know I must stand
and face it head on
But sometimes I feel like
giving up
But with HOPE I stand
strong,
I search inside myself
and HOPE was there all
along!
By an anonymous FSOPC Parent

May is National Foster Care Month

All children deserve a safe, happy life — including the 496,000 American children and youth in foster care. Young people in foster care especially need nurturing adults on their side because their own families are in crisis and unable to care for them.

Each May, we salute the compassionate people who make a difference by serving as foster parents, relative caregivers, mentors, advocates, social workers, and volunteers. Thanks to these unsung heroes, many formerly abused or neglected

children and teens will either safely reunite with their parents, be cared for by relatives, or be adopted by loving families.

But some children in foster care are less fortunate. Most communities across the country are urgently seeking more everyday people to help these youth overcome their troubled childhoods and realize their full potential. No matter what their age, every young person in foster care benefits from a meaningful

connection to a caring adult who becomes a supportive and lasting presence in his or her life.

Take a closer look at the number and diversity of people who were once in foster care. It might surprise you. In fact, there are an estimated 12 million foster care alumni in the U.S. representing all walks of life. Behind this startling statistic are countless stories of children who grew up to be thriving adults while others struggled with life's challenges

all alone. Success stories come about when someone takes the time to offer comfort, provide support, give advice, or simply share a milestone moment with a youngster enduring a difficult family situation.

Now is the time to get involved. No matter how much time you have to give, you have the power to do something positive that will [Change a Lifetime](#) for a young person in foster care.

Book Review: Shadow Voices: Finding Hope in Mental Illness

Here is an inside look at what it is like to live with a mental illness and how individuals and their families find their way through medical, governmental, societal and spiritual issues -- to hope.

Ten people with mental illness tell their stories, and many experts and advocates in the field add helpful perspectives.

Bonus material includes more personal stories and historical

background, help for churches in relating to mental illness, support of family members, self-care, and more. A PDF discussion guide is included.

It spells out the ways in which the problems of the mentally ill become everyone's problems. If some people don't receive treatment, they become absentees or increase the numbers of the unemployed. If

health benefits don't cover mental illnesses, patients go to doctors for physical side effects when they really should be seen by therapists. The work does a wonderful job in showing how deinstitutionalization helped to lead to the increase in the prison population. I especially loved that the interviewees here were diverse in terms of race and gender said Jeffery Mingo about the book.





Important Telephone Numbers

Value Options 1-877-652-7624
FSOPC 973-427-0100

Mobile Response 1-877-652-7624
CMO 973-942-4588

Emergency Number 911

FSOPC SUPPORT GROUPS!!

Families have the opportunity to share their experiences, discover new resources, meet other people with similar situations and establish friendships. Services are free and is open to all families in the county.

Snacks and refreshments served.

Meetings available in North Haledon, Paterson, and West Milford

For more information, please call 973-427-0100



Join our monthly Breakfast Club

This is an informal get together where we discuss anything and everything, learn to do new things, meet new people in a relaxed environment.

For more information call 973-427-0100

YOUTH PARTNERSHIP

The Youth Partnership is a group of active young people (13 to 21) who want their voices to be heard by the mental health system. These teens have emotional and behavioral challenges and in this group, that provides a positive experience, they learn that they are not alone.

The Youth Partnership enables kids to interact with their communities in a positive manner and to help erase the stigma that is associated with these challenges. A chance to meet others and become a youth leader. Come out and find out how to make a difference.

For more information, contact Kaity Rodriguez, the Youth Coach or call our office at 973-427-0100.

WARMLINE

Do you have a questions that has been bothering you? Are you unsure what direction you need to be following? Call us. We want to hear from you. We promise to listen to you, and help you find answers for those pressing questions. Anyone calling remains anonymous and calls are completely confidential.

We are here Monday through Friday from 9 am to 5 pm.

If you are unable to reach us immediately, please leave us a voice mail and we will return your call as soon as possible

973-427-0100

Staff / E-mail

Margie Pritchard, Executive Director, ext.12

mpritchard@fso-pc.org

Patsy Sanford, Peer Support Partner, ext. 18

psanford@fso-pc.org

Mercedes Ramirez, Bilingual Peer Support Partner, ext. 17

mramirez@fso-pc.org

Donna Vander Linden,

Peer Support Coordinator, ext.15

dlinden@fso-pc.org

Karina Bouxin, Community Outreach, ext. 13

kbouxin@fso-pc.org

Kaity Rodriguez, Youth Partnership, ext. 19

krodriguez@fso-pc.org




SPONSORS/ DONATIONS Needed

We are always looking for sponsors. If you know of someone that can help with our needs, please call us to let us know. Remember donations are tax deductible!

The FSOPC will accept donations of "gently" used items, just give us a call to make arrangements to drop them off at our office. We collect baby items, clothes, blankets and comforters, and non-perishable food.

Families in need of any of these items are encouraged to contact us.

May 2009

SUN	MON	TUE	WED	THU	FRI	SAT
					1 Breakfast Club 10:00—11:30 am	2
3	4	5	6	7	8	9
10 Mother's Day	11	12	13 Child Welfare Workshop	14 Paterson Support Group WYCA	15	16
17	18	19	20 Spanish Support Group 7:00-8:30pm	21	22	23
24	25 	26	27 FSO English Support Group 7:00-8:30pm	28	29	30
31						

June 2009

SUN	MON	TUE	WED	THU	FRI	SAT
	1	2	3	4	5 Breakfast Club 10:00—11:30 am	6
7	8	9	10 FSO English Support Group 7:00 8:30pm	11 Paterson Support Group WYCA	12	13
14	15	16	17 Spanish Support Group 7:00-8:30pm	18	19	20
21	22	23	24 FSO English Support Group	25	26	27
28	29	30				

July 2009

SUN	MON	TUE	WED	THU	FRI	SAT
			1	2	3 Breakfast Club 10:00—11:30 am	4 
5	6	7	8 FSO English Support Group 7:00 8:30pm	9 Paterson Support Group WYCA	10	11
12	13	14	15 Spanish Support Group 7:00-8:30pm	16	17	18
19	20	21	22 FSO English Support Group 7:00-8:30pm	23	24	25
26	27	28	29	30	31	

EASE—Education, Advocacy, Support, Empowerment



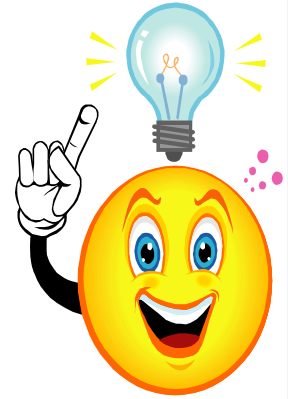
810 Belmont Avenue
2nd floor
North Haledon, NJ 07508

Phone: 973-427-0100
Fax: 973-427-2776

If you have an interesting story to share, we would like to hear from you. This is your newsletter, so please let us know what you would like to see added. Your input would help us make this newsletter a source for sharing, hope and inspiration to our families and colleagues.

Send your stories and pictures via email to: kbouxin@fso-pc.org or mail to

FSOPC, Community Outreach, 810 Belmont Avenue—2nd floor, North Haledon, NJ 07508



WE'RE ON THE WEB!

WWW.FSO-PC.ORG



Health Tip: Warning signs of Mental Illness

HealthDay News

Everyone has an off day, when they don't quite feel themselves or struggle with certain issues.

But when those issues take over most every aspect of your life, it may be time to enlist the help of a psychiatrist, the American Psychiatric Association says.

The Association offers this list of symptoms that may signal a need to be evalu-

ated by a professional:

Feeling anxious all the time, or fearing things that you know are irrational.

Persistent feelings of sadness or depression.

Significant mood swings or differences in your personality.

Finding it hard to deal with daily issues and responsibilities.

Experiencing delusions or unusual thoughts.

Significant changes in your

eating and sleeping habits.

Turning to drugs or alcohol for relief.

Feeling very angry or behaving violently.

Thoughts of suicide. If you have them, seek immediate help.

Last Reviewed 04/10/2009
| Last Updated 04/10/2009