CATG BEHAVIORAL HEALTH NEWSLETTER

BEHAVIORAL HEALTH STAFF

Debbie McCarty Clinic Director & Program Supervisor

Dr. Jana Zeedyk Licensed Psychologist

Stephanie Hinz – 662-7593 BH Clinician & Manager

Janis Carroll – 662-7545 BH Program Coordinator

BEHAVIORAL HEALTH AIDE PROGRAM

Shayna Tritt BHA-Trainee - Arctic Village

Keisha Joseph Prevention Worker - Beaver

April Peter BHA-Trainee - Fort Yukon

(Vacant) BHA - Venetie



SPRING IS HERE

April and May were full of BH sponsored activities for kids and for the community in general, everything from ice skating to learning about Adverse Childhood Experiences (ACEs) were offered. One film screened, "Paper Tigers", showed how one school changed to a trauma-informed focus and had significant improvements in student retention and lower disciplinary problems. The Behavioral Health program in Fort Yukon also held a Community Social Cookout on Good Friday and participated in the community clean-up in May. If you have ideas for activities you'd like to see in your community please contact us at behavioral_health@catg.org, or call 662-7545.



In April the Fort Yukon Police department offered a Gun Safety course to the Fort Yukon Venture Crew. The Venture Crew is once again planning activities and fundraisers. Both boys and girls, ages 14 (or 13 and have completed 8th grade) up to age 20, may participate. The crew is in the process of planning summer activities, including a day of archery on June 30th and an 8-hike & camping trip. Contact Stephanie Hinz, 662-7593, Janis Carroll, 662-7545, or Julie Mahler, 662-7590, for more information.



The BH program teamed with the Diabetes Prevention program in April to present "Making Salves" - part of the Wellness Project. A dozen participants learned how to combine all-natural ingredients to create two different types of healing salves.

JUNE IS PTSD AWARENESS MONTH

WHAT IS PTSD?

Posttraumatic stress disorder, or PTSD, is a serious potentially debilitating condition that can occur in people who have experienced or witnessed a natural disaster, serious accident, terrorist incident, sudden death of a loved one, war, violent personal assault such as rape, or other life-threatening events. Research has recently shown that PTSD among military personnel may be a physical brain injury, specifically of damaged tissue, caused by blasts during combat.

Most people who experience such events recover from them, but people with PTSD continue to be severely depressed and anxious for months or even years following the event.

Women are twice as likely to develop posttraumatic stress disorder as men, and children can also develop it. PTSD often occurs with depression, substance abuse, or other anxiety disorders.

Relationships, Trauma, and PTSD

Trauma survivors who have PTSD may have trouble with their close family relationships or friendships. Their symptoms can cause problems with trust, closeness, communication, and problem solving, which may affect the way the survivor acts with others. In turn, the way a loved one responds to him or her affects the trauma survivor. A circular pattern may develop that could harm relationships.

The most frequently experienced traumas were:

- witnessing someone being badly injured or killed
- being involved in a fire, flood or natural disaster
- · being involved in a life-threatening accident
- · combat exposure

The majority of these people experienced two or more types of trauma. More than 10 percent of men and 6 percent of women reported four or more types of trauma during their lifetimes.

The traumatic events most often associated with PTSD were:

for men: rape, combat exposure, childhood neglect and childhood physical abuse

for women: rape, sexual molestation, physical attack, being threatened with a weapon and childhood physical abuse

But none of these events invariably produced PTSD in those exposed to it, and a particular type of traumatic event does not necessarily affect different sectors of the population in the same way.

The NCS report concluded that "PTSD is a highly

prevalent lifetime disorder that often persists for years. The qualifying events for PTSD are also common, with many respondents reporting the occurrence of quite a few such events during their lifetimes."

PTSD Makes Communication Difficult

Many survivors can't find the words to express what they're feeling. Even when they do, it's very normal for them not to be comfortable sharing their experience. Elements of shame, fear, anger, guilt and grief often get in the way of a calm, focused discussion.

Friends and family (and anyone else who is not the source of the PTSD but is standing by while someone attempts to heal) need something that translates PTSD language. Armed with knowledge, insight and awareness you'll have an easier time knowing how to react, respond and relate to your PTSD loved one during the healing process. The more you appreciate things from the PTSD perspective the more helpful and supportive you can be. Now is the time for empathy, compassion and patience.

The list below will give you an overview of things to understand.

1) Knowledge is power. Understanding the process of a triggering event, the psychic reaction to trauma, the warning signs and symptoms of PTSD, and available treatment options for PTSD allows you to help recognize, support and guide your PTSD loved one toward diagnosis, treatment and healing.

We need you to be clearheaded, pulled together and informed.

2) Trauma changes us. After trauma we want to believe—as do you—that life can return to the way it was; that we can continue as who we were. This is not how it works. Trauma leaves a huge and indelible impact on the soul. It is not possible to endure trauma and not experience a psychic shift

Expect us to be changed. Accept our need to evolve. Support us on this journey.

- **3) PTSD hijacks our identity.** One of the largest problems with PTSD is that it takes over our entire view of ourselves. We no longer see clearly. We no longer see the world as we experienced it before trauma. Now every moment is dangerous, unpredictable and threatening. Gently remind us and offer opportunities to engage in an identity outside of trauma and PTSD.
- **4) We are no longer grounded in our true selves.** In light of trauma our real selves retreat and a coping self emerges to keep us safe.

Believe in us; our true selves still exist, even if they are momentarily buried.

5) We cannot help how we behave. Since we are operating on a sort of autopilot we are not always in control. PTSD is an exaggerated state of survival mode. We experience emotions that frighten and overwhelm us. We act out accordingly in defense of those feelings we cannot control.

Be patient with us; we often cannot stop the anger, tears or other disruptive behaviors that are so difficult for you to endure.

6) We cannot be logical. Since our perspective is driven by fear we don't always think straight, nor do we always accept the advice of those who do.

Keep reaching out, even when your words don't seem to reach us. You never know when we will think of something you said and it will comfort, guide, soothe or inspire us.

7) We cannot just 'get over it'. From the outside it's easy to imagine a certain amount of time passes and memories fade and trauma gets relegated to the history of a life. Unfortunately, with PTSD nothing fades. Our bodies will not let us forget. Because of surging chemicals that reinforce every memory, we cannot walk away from the past anymore than you can walk away from us.

Honor our struggle to make peace with events. Do not rush us. Trying to speed our recovery will only make us cling to it more.

- 8) We're not in denial—we're coping! It takes a tremendous effort to live with PTSD. Even if we don't admit it, we know there's something wrong. When you approach us and we deny there's a problem that's really code for, "I'm doing the best I can." Taking the actions you suggest would require too much energy, dividing focus from what is holding us together. Sometimes, simply getting up and continuing our daily routine is the biggest step toward recovery we make. Alleviate our stress by giving us a safe space in which we can find support.
- 9) We do not hate you. Contrary to the ways we might behave when you intervene, somewhere inside we do know that you are not the source of the problem. Unfortunately, in the moment we may use your face as PTSD's image. Since we cannot directly address our PTSD issues sometimes it's easier to address you. Continue to approach us. We need you to!
- **10) Your presence matters.** PTSD creates a great sense of isolation. In our post-traumatic state, it makes a difference to know that there are people who will stand by us. It matters that although we lash out, don't respond and are not ourselves, you are still there, no matter what.

Don't give up, we're doing our best.

WHAT IF PEOPLE TREATED PHYSICAL ILLNESS LIKE MENTAL ILLNESS?

By Lindsay Holmes

It's no secret there's a serious stigma attached to mental illness. According to the CDC, only 25 percent of people with mental health issues feel that other people are compassionate and sympathetic toward them. It's a shameful statistic when one in four people have been touched by some form of mental illness.

Experts say that part of the problem when it comes to criticizing someone's mental health is a lack of empathy and knowledge about the ailments. Yet, despite the staggering evidence and rhetoric aimed at helping people understand, many people still don't get that being diagnosed with a mental illness isn't something that's in their control — just like having the flu, or food poisoning, or cancer isn't in their control.

In an effort to reframe the conversation, artist Robot Hugs created a comic that displays what it would be like if we discussed physical illnesses in the same way we do mental illnesses. Take a look at the graphic below.

Makes you think, doesn't it?



Mental Health Awareness Month

By Janet Singer

May is Mental Health Awareness Month. In researching this yearly event I was surprised to learn that it started back in the 1940's as a weekly observance and eventually expanded to include the entire month of May. In 2013, then President Barack Obama signed a proclamation stating his commitment to mental health and confirming May as National Mental Health Awareness Month. Mental Health America, the organization that started Mental Health Awareness Month, explains:

We believe it's important to educate people about habits and behaviors that increase the risk of developing or exacerbating mental illnesses, or could be signs of mental health problems themselves. These include risk factors such as risky sex, prescription drug misuse, internet addiction, excessive spending, marijuana use, and troublesome exercise patterns.

Mental Health America, and other organizations such as the National Alliance on Mental Illness (NAMI), have created tools and organized resources to assist individuals, organizations and communities in raising awareness of the types of issues the above risky behaviors present, especially for young people.

What a wonderful source of information and support this is for so many people, and my guess is these efforts have helped a good number in our society who are suffering. This type of outreach has likely saved lives.

Yet, even with all the awareness and advocacy surrounding mental health these days, there are still those who deal with brain disorders but are afraid to ask for help. Indeed, there are those who don't even realize they are dealing with mental illness, and still others who reach out for help to no avail. I regularly hear stories of those being misdiagnosed, those who can't afford proper treatment, and those who are told to just "suck it up" and get on with their lives. We live in a world where there is still stigma attached to anything even remotely connected to our mental health.

And while I totally support Mental Health Awareness Month, I also believe we can each do our part every day of the year to bring about positive changes.

How? By talking. I don't mean at public events, symposiums, or other organized activities, though they can certainly be helpful. I'm referring to talking to each other – our families, loved ones, friends, and coworkers. Let's work toward being as open about our mental health as we might be telling someone we have a physical illness. And let's not forget talking's underrated counterpart – listening. Everyone needs and wants to be heard and if we make it a point to listen – really listen – to one another, we can make a huge impact on all of our lives.

One of the main things I've learned as an advocate for OCD awareness is that once you open up to others, they will often open up to you. How many of us have felt so alone at times, thinking that nobody could possibly understand how we are feeling? The truth is there are people out there who have gone through or are going through something similar. But we will never connect with one another unless we talk.

Mental Health Awareness in May began over seventy-five years ago. That's a long time. And while we have made huge strides in some respects, there are still many people who are suffering alone and in silence. Let's all do what we can to change that. Let's start talking.

"Mental health can improve overall well-being and prevent other illnesses. And since mental health problems have a serious economic impact on vulnerable communities, making them a priority can save lives and markedly improve people's quality of life."

- Vikram Patel, Indian Psychiatrist & Researcher

BEHAVIORAL HEALTH SERVICES

The CATG Behavioral Health Program provides professional, confidential, and culturally appropriate mental health and substance abuse services. Through a variety of services the program promotes healing, personal growth, and healthy living for the individual, family, and community.

CATG Behavioral Health Program services include: alcohol assessments, prevention education, individual counseling, and referrals.

All services start with a basic screening and information gathering session. If you would like to make an appointment, please contact our office at 662-7545.

If you feel that you are experiencing a crisis, please call the Yukon Flats Health Center: (907) 662-2460. After hours crises may be directed to the on-call number (907) 662-2462.

Other Crisis Contacts:

CareLine (suicide hotline): 877-266-HELP (4357)

National Child Abuse Hotline: 800-25-ABUSE (22873)



Lungwort, commonly referred to as "bluebells", is a medicinal plant used to treat diarrhea, allergies, and removes excess mucus from the respiratory system. When used as a poultice it is good for cuts. For internal use, brew as a tea, inhale the steam and then drink.

CATG BH Program PO Box 309 Fort Yukon AK 99740

www.catg.org behavioral_health@catg.org 907.662.7545 907.662.2460