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The Clipboard

On Columbine, Virginia, and Mental Illness:

I was a middle school psychologist when the shootings occurred at Columbine. At that time, the dominant question people seemed to be asking was "How can we prevent this happening again?" In answer to this question a whole range of anti-bullying programs sprang up. Our national dialogue in the face of this horrific loss of national innocence focused on how we could stop marginalizing young people who came across as different.

After the shootings at Virginia Tech University, I hear people asking the same question, "How can we prevent this happening again?" But, in the post 9/11 era, the answers seem to be different. I hear much more discussion of how we can exclude people with mental illness from public life. As a result of this event, guns may be less readily available to those who have been identified as mentally ill but treatment will still be as hard to get. Rather than opening dialogue about how we can create a society where people know about mental illness, its causes and its treatment, many people are responding out of fear and further marginalizing those who most need our support.

The Boards are in the midst of developing a plan, *Making it Work: Behavioral Health in Alaska*. As we work on that plan, I hope that we find effective ways to advocate for services that are based on empowering people rather than on a system that responds out of fear. Too often, public funding seems to go to those things that we fear the most. That puts us into a vicious cycle where it is hard to move beyond escalating costs and growing fear. The other part of the response we have seen to the Virginia tragedy is the outpouring of support for that community and the expectation that the community will heal and learn from this tragedy. I wish the same for our state and for the work of the Boards. Let's move on and make it work.

Carol Greenough
ABADA/AMHB Planner

Plan

Coordinate

Educate

Advise

Evaluate

Advocate

Carol and Marilyn hammering out the details of the ABADA/AMHB plan,

Making It Work: Behavioral Health in Alaska

Meet Our New Planner:

Marilyn Irwin was born and raised in a small community, Port Huron Michigan. Similar to Juneau, everyone knew who you were or at the very least, who your parents were. I tried very hard to be good, and mostly did O.K. With a lot of encouragement from my mom, I went off to college and earned a bachelor's degree in social work.

I made my way to Alaska in 1977, planning only to visit a sister in Valdez. Having that bachelor's degree allowed me to apply for and receive a position with the city of Valdez to start up a teen center for their community. I love the outdoors and Alaska became home to me. I have been fortunate to be hired into many social service positions since then some of which are a case worker with Big Brothers/Big Sisters, a case manger with the Juneau Mental Health Clinic, and a prevention specialist with National Council on Alcoholism & Drug Dependence. My most recent work was with the Division of Behavioral Health, Section of Prevention & Early Intervention as a project coordinator with community-based grants.

I have been married for 26 yrs, have two young adult children, one grandchild, and two chocolate Labradors. I am very happy to be in my new position as one of the planners for the Alaska Mental Health Board and the Advisory Board on Alcoholism & Drug Abuse. I believe my experience both in my work and personal life will definitely be put to use.

How Well Do You Know Board Member Marvin Deacon?

Marvin is a behavioral health aid - wellness counselor with the Yukon-Kuskokwim Health Corporation in Grayling, Alaska. His counseling duties include working with alcohol and drug abuse and mental health clients.

Marvin helped to construct the Alaska pipeline during the late 1970s. Following the completion of the pipeline, he worked several years on oil rigs on Alaska's North Slope. He completed the Village Safety Office Program and worked in Grayling as a Village Police Officer. Along with his current employment as a behavioral health aid, he is a commercial and subsistence fisherman as time allows.

He is currently a fire fighter with the Bureau of Land Management serving as a crew boss. As a crew boss, he hires his team. Marvin said his number one priority when fighting fires is for the safety of his crew. His crew is responsible for initial attack on a fire. They dig trenches in an attempt to prevent the fire from spreading. After the fire is contained, they "mop up" which consists of searching for and putting out "hot spots."

The crew has fought wild fires in Montana, California, Washington, Oregon and Idaho and in Alaska around Fairbanks, Kenai and Palmer. He said they have had their camp overrun by fire three times. The largest fire his crew fought was in Montana in August of 2000.

His hobbies include hunting, trapping, boating and snow machining. He doesn't like playing bingo but doesn't mind being with people who do. He especially enjoys camping with his family and spending time with his four grandchildren. He is a "young grandpa" to three girls and a boy.

Lonnie Walters—Chairman of ABADA

Lonnie Walters, ABADA Chair, was born on February 11, 1948 on the Arizona State Prison grounds in Florence, Arizona where his father was both Warden and Executioner. I moved to my grandmother's cattle ranch in Globe, Arizona when I was five. My father died of alcoholism when I was 14.

On my high school graduation night, I robbed a liquor store and was given the choice of 10 months in the Arizona State Prison or join the military service of my choice. At age 18, I was sent to Vietnam to serve on river patrol boats and loved every aspect of it-good and bad. During my second tour, I was caught in the Tet Offensive in Saigon. I didn't care for this tour as much and was in and out of trouble for the next fourteen years because of my alcohol addiction.

The Navy sent me to alcohol rehabilitation in 1982. I have been sober since February 28, 1982 and have worked in the substance abuse field since then. I retired from the US Navy in 1988 as a Chief Petty Officer with 22 years service.

At retirement, I was the Director of the Counseling and Assistance Center at Whidbey Island in Washington. Having been stationed in Alaska twice while I was in the Navy, I knew this is where I wanted to live. I have been married 28 years and have two wonderful children.

Andrea Schmook—Chairman of AMHB

Since her recovery from diagnoses of acute paranoid schizophrenia, schizoid affective disorder, and manic depression in 1985, Andrea has been a strong voice for mental health consumer affairs. Currently, she is the Director of Consumer Directed Services at Anchorage Community Mental Health Services. Andrea also serves as the chairperson of the Alaska Mental Health Board.

In 2003, the Alaska Psychiatric Institute contracted with her to establish the Office of Consumer and Family Affairs. She has also contracted to provide patient sensitivity training for staff at the Elgin, Illinois Mental Health Center. She served as Director of Consumer Affairs and Development for the Illinois Department of Human Services, Office of Mental Health.

In 1985, she served on the Governor's Mental Health Advisory Council and was later appointed to serve as the first consumer representative on the Alaska Mental Health Board. As president and co-founder of Mental Health Consumers of Alaska, Andrea successfully lobbied the Alaska Legislature for $125,000 to develop Alaska's first consumer-run organization.

In 1989, Andrea was one of five U.S. consumer representatives invited by the World Federation on Mental Health to attend the World Congress on Mental Health held in Auckland, New Zealand. She has frequently received recognition for her advocacy work including an invitation by President and Mrs. Clinton and Vice President and Mrs. Gore to attend the White House Conference on Mental Health in Washington, D.C.

She has served and continues to serve with numerous organizations as an advocate for mental health consumers.

"When man is serene, the pulse of the heart flows and connects, just as pearls are joined together or like a string of red jade, then one can talk about a healthy heart"

- The Yellow Emperor's Canon of Internal Medicine, 2500 B.C.

DHSS GRANT PROGRAM REVIEW

Happy Spring! DHSS, along with a few important partners, has embarked upon a project that we hope will change the fabric and culture of the way DHSS conducts business. Customer service is important to us. Every job within our department has the potential to affect someone's life; from the administrative clerk who is our direct, first contact; to other Alaskans, and to the nurse caring for a recent client admitted to API. Each state employee is a critical component to the DHSS Team working compassionately, effectively and efficiently for the citizens of our great state.

Overall Project Objective and Goals: The overall goal of this project is to increase the efficiency and effectiveness of the DHSS grant-making processes in order to 1) reduce administrative burden for DHSS while ensuring adequate fiduciary control; 2) increase grantee/customer satisfaction; and, 3) reduce the administrative burden for grantees to interface with the state.

Brief History: Last summer, the Rasmuson Foundation and DHSS worked with Cliff Consulting to conduct an overview of DHSS grant-making operations. This study included 1) review of previous studies, existing documents, current tracking software; 2) interviews with over 25 DHSS staff members; 3) grantee forums, one-on-one grantee interviews and written communications including over 125 grantees in about 90 organizations; and, 4) statistical analysis on current grant volumes, sizes, etc. to identify potential opportunities and impact. From these findings a list of opportunity ideas were created and reviewed with DHSS Grants & Contracts staff, select program staff and the project's Steering Committee. These ideas were then evaluated for feasibility, impact and implementation time. The resulting opportunities were synthesized into a set of recommendations and a final report. This report can be found at the DHSS Commissioner's website, http://hss.state.ak.us/

eGrants

EGrants is the other exciting news from the grant world in the Department of Health and Social Services. We are pleased to announce the roll-out of eGrants to the grantee community! EGrants is an electronic grant management system, designed to facilitate the administration and management of DHSS grants. EGrants will be used by both the grantees and the department to track grants from beginning to end. As part of the tracking, grantees will be able to report CFRs, Amendments, LIBRs and other documents that are exchanged over the life of a grant. They also will be able to review budget and payment information.

DHSS staff has been using eGrants internally for a couple of years. We recently announced its roll-out to our external customers. The department also had a small group of grantees beta test the system. They provided feedback and insight into the development of the eGrants system. To gain access to eGrants, grantees will receive an invitation in their email from State of Alaska (SOA) over the next six months.

Alaska Mental Health Trust Authority's Small Projects Funding

AMHTA is accepting proposals for its Small Projects Funding program. The program is designed to create innovative new program ideas or substantially improve existing activities that would be of direct benefit to Trust beneficiaries. Each small project is limited to a $10,000 maximum. The next deadline is June 1. For more information, call 907-269-7960 or visit: http://www.mhtrust.org/index.cfm?section=Our%20Funding%20Process&page=Small%20Projects%20Funding

Division of Behavioral Health Accepting Proposals for "Bring The Kids Home"

The goal is to provide Behavioral Health Treatment Services for the State of Alaska in FY08. This RFP will leverage development of pilot programs to increase in-state capacity to serve children and youth with severe emotional disturbances in community-based settings. The deadline is May 21. For more information, contact Myra Pugh at 907-465-6983 or visit: http://notes4.state.ak.us/pn/pubnotic.nsf/cc52605f7c156e7a8925672a0060a91b/66532421d37cc248892572c300814065?OpenDocument

NIDA Begins Its First-Ever Public Discussion on Pain Relief and Addiction

"The increase in opioid abuse may be due in part to the growing numbers of prescriptions written for narcotic pain relievers, such as Vicodin and Oxycontin."

"Who is most at risk for addiction to pain killers?" and "How do you balance getting adequate pain relief with the risk of addiction?" were only two of the many questions discussed at today's *Pain, Opioids, and Addiction: An Urgent Problem for Doctors and Patients* conference, sponsored by the National Institute on Drug Abuse (NIDA), part of the National Institutes of Health (NIH). More than 500 researchers, clinicians and interested consumers gathered on the NIH campus to discuss the growing problem of prescription painkiller abuse and the potential for addiction in patients with chronic pain conditions.

"This meeting brings together experts on both the research and clinical sides to discuss issues surrounding both the benefits and risks of prescription pain relievers, and to look at best practices that minimize the risk of addiction," said NIH Director Dr. Elias A. Zerhouni. "It is part of our ongoing commitment to use the best science available to inform medical practice."

"We are meeting to discuss how scientific research can contribute to safer solutions for patients in need of pain relief," said NIDA Director Dr. Nora D. Volkow, who gave welcoming remarks at the conference. "With high rates of non-medical abuse of opioid pain relievers, particularly among young people, we view this as an urgent priority."

The 2006 Monitoring the Future Survey, funded by NIDA, showed that one in ten high school seniors have used the painkiller Vicodin for non-medical purposes in the past year, with high rates for other prescription drugs as well. Today's conference participants looked at how adolescents' motivations for opioid abuse can predict other kinds of substance abuse. In addition, scientists discussed the brain mechanisms underlying both pain and addiction and how a genetic variation that alters how some people respond to stress can make them more vulnerable to addiction.

The increase in opioid abuse may be due in part to the growing numbers of prescriptions written for narcotic pain relievers, such as Vicodin and Oxycontin. However, when used properly, prescription opioids can have many beneficial effects, helping those suffering from chronic pain to lead relatively normal and productive lives. Because abuse of and addiction to opioid medications in the context of chronic pain is not well understood, scientists will be discussing this among other issues. For example, attendees today heard that when prescribed for cancer pain, opioids might have less potential for abuse.

In parallel, scientists are trying to develop new ways to treat pain without the risks of abuse and addiction. On Tuesday, for example, there will be more discussion about the development of a newer generation of pain relievers devoid of tolerance or dependence. They will also discuss real-time functional magnetic resonance imaging (rtfMRI) as a tool to allow patients to better manage their own pain, through the actual visualization and control of brain activity in regions associated with pain processing.

You know me. But did you KNOW . . .

Depression costs employers more than any other illness in terms of lost productivity? The annual national cost runs between $30 to $44 billion.

Absenteeism makes up 20 percent of the cost while 80 percent is linked to "presenteeism" - lost productivity due to lack of energy, insight, creativity or motivation.

State of Alaska
Department of Health & Social Services
Advisory Board of Alcoholism & Drug Abuse/Alaska Mental Health
431 N. Franklin, Suite 200
Juneau, AK 99824
Phone: 907-465-8920
Fax: 907-465-3079

Executive Director: Kathryn Craft
(907) 465-8920
Kathryn_Craft@health.state.ak.us

Advocacy Coordinator: Angela Salerno
(907) 465-4765
Angela_Salerno@health.state.ak.us

Planner: Carol Greenough
(907) 465-3278
Carol_Greenough@health.state.ak.us

Planner: Marilyn Irwin
(907) 465-5114
Marilyn_Irwin@health.state.ak.us

Research Analyst: Connie Olson
(907) 465-3072
Connie_Olson@health.state.ak.us

Administrative Assistant: Lance Brown
(907) 465-8920
Lance_Brown@health.state.ak.us

The Advisory Board on Alcoholism and Drug Abuse (ABADA) and the Alaska Mental Health Board (AMHB) are the state agencies charged with planning and coordinating behavioral health services funded by the State of Alaska. The joint mission of AMHB and ABADA is to advocate for programs and services that promote healthy, independent, productive Alaskans.

Lonnie Walters, ABADA Chair

Andrea Schmook, AMHB Chair

Funded in part by the Alaska Mental Health Trust Association.