

THE MICHIGAN BANNER

Celebrating 12 years of Positive News!
Mental Health Awareness Month
Special Edition

Leading in Diversity

“Empowering Communities and Changing Lives”



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Public Policy Associates Join Local Leaders to Assist Youth



Dr. Paul Elam

Lansing - Public Policy Associates, Inc. (PPA) is working with a broad-based group of Saginaw leaders to ensure that all children are treated fairly and equitably in the child welfare and juvenile justice systems.

PPA is the lead consultant to the Saginaw County Disproportionate Minority Contact Steering Committee under the leadership of the Honorable Barbara Meter.

The Lansing-based consulting firm facilitates, coaches, and documents the work to understand why children of color are overrepresented in these systems, and devise strategies to improve equity.

The overrepresentation of children of color, called disproportionate minority contact (DMC), is a problem nationwide.

Saginaw County was selected by the State Court Administrative Office and funded by the Michigan Committee on Juvenile Justice to serve as a demonstration project to address DMC and improve outcomes for vulnerable children.

“Saginaw has assembled a diverse and cohesive team that is setting an example for the state in taking

SEE P 7, Public Policy Associates...

Time to Widen the Support



Dr. Gloria Morrow

By Dr. Gloria Morrow

Calif. - There is growing recognition that in order for mental health professionals to provide appropriate and effective mental health services to diverse communities, they must strive to understand and embrace the cultural world of those they serve.

However, there is the need for mental health professionals to move beyond the traditional definitions of culture. Spirituality is a cultural fact that also must be understood and embraced, in order to assist people through their journey of healing and wellness.

Therefore, Spirituality has been the topic of many seminars, workshops, and conferences throughout the country as we seek to find ways to ensure that people receive the help they need. And, to help to eliminate the stigma, and shame associated with mental illness. It’s a great time to widen the welcome and deepen the support.

Over the past few years, the Disproportionate Minority Contact Initiative in partnership with Saginaw

SEE P 4, Time to Widen the Support...

Welcome



Wardene Talley

**By Wardene Talley, Project Director
Saginaw MAX System of Care**

Saginaw - Welcome to the 2nd annual Saginaw MAX System of Care (SOC) Mental Health Awareness Month 'Special Edition' of the Michigan Banner. Communities across the country take time out during Mental Health Awareness Month to raise awareness about mental illness and related issues, to highlight accomplishments realized during the previous year and to share upcoming events and/or training opportunities.

Saginaw SOC looks forward during this time to shedding light on a subject too often kept in the dark and spoken of only in whispers – mental illness. It is our intent this year to focus on the very positive impact we can and have had on the lives of the children, youth, young adults and their families working together to dispel the negative stigma associated with mental illness.

Much has been accomplished in our community since the distribution of the first Special Edition during the month of May, 2014.

As Project Director, I have had a balcony view of the great work being done in Saginaw County and beyond.

Collaborative efforts between the child serving systems have resulted in the achievement of enhanced yet streamlined service planning and delivery; an increased awareness of challenges and barriers families navigate on a regular basis; providing forums for courageous and very open conversations on the topic of mental illness – necessary steps in the battle to reduce (and perhaps someday eliminate) this stigma.

An unprecedented level of family/youth involvement – family voice – in the decision making process ranging from the colors used in brochures all the way up to policy review and change; the securement of much needed resources to continue or 'sustain' the work being done.

Systems and community leaders have established Saginaw County as a community willing to tackle challenges head-on, implement evidence based or proven strategies to address the challenges and support the efforts beyond the life of grant funding.

Time and space permit only highlights of the past year. Throughout this addition, however, SOC staff, family members and champions, systems partners and community leaders share more detailed accounts of the growth and development of initiatives currently unfolding as a result of this collaborative effort – our willingness to work together for a common cause.

- The Empowered to Reach and Teach Family Team (ERTFT), a very active and thriving family group was featured in a national video (documentary) 'Families Rising' which was aired at the SOC National Conference in Georgetown, MD.

FAMILIES RISING

- a video of interviews exhibiting community traits of family-driven care
- servant leadership
- wide spread reliance on the experience & knowledge of families
- suspension of blame & judgement
- uncompromising commitment to improving community

Based on 100 community visits over 20 years, we selected Saginaw, Michigan for our

first round of appreciative inquiry interviews in an attempt to identify what it takes for a community to truly implement family-driven care.

This video highlights our learning from forty interviews conducted over a 3-day period in the fall of 2013. Partial support was provided by SAMHSA. We are grateful to the people of Saginaw MAX System of Care for their honesty and generosity. Pat Baker and Elaine Slaton.

- Saginaw MAX was one of three communities nationwide selected to implement a pilot project, Open Table from Poverty to Community.

- Twenty-five SOC youth were gainfully employed during the summer months (2014). This is the third year that Department of Natural Resources grant dollars (with SOC Match) were secured to provide meaningful work experiences for SOC youth.

- Summer 2014 was also the second year of SOC sponsored Therapeutic Recreation Day Camps. Six local faith and community organizations provided approximately 100 children with full day, structured recreational and learning experiences.

Each site offered field trips including visits to Bay City State Park on a weekly basis, provided healthy meals and snacks, music and/or art instruction.

- In a collaborative effort between the Disproportionate Minority Contact (DMC) Initiative, the Department of Juvenile Justice and the 10th Circuit Court, grant dollars were secured to continue the California Brief Multi-Cultural Competency Scale (Cultural Competency training).

Year one of this particular funding source focused on the faith community and year two on Law Enforcement. The training is now available at no cost for approximately 50 officers representing all 27 municipalities of Saginaw County.

- Saginaw MAX was awarded a SAMHSA Expansion Grant – an additional \$4 million to continue the mission of the original SAMHSA/Saginaw Cooperative Agreement currently in year 5 of the 6 year initiative. The Expansion Grant includes services, staff, new and renewed partnerships and additional time to establish and implement the required sustainability plan.

SEE P 13, Welcome

The Michigan Banner

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The Michigan Banner operates and serves as a print and online media venue committed to educating, informing and enlightening our readership regarding events and news that directly and indirectly affect the communities regionally and globally. Furthermore, to serve as a catalyst and a link for cultivating young adults as entrepreneurial and business leaders for the future.

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The Open Table



Pastor Hurley J. Coleman, Jr.

By Pastor Hurley J. Coleman, Jr.

Saginaw - It was in the early part of the summer of 2014. I was in a place I had never been before, with a group of professionals that I hadn't met before the Georgetown Training Institutes Conference in Washington, DC.

I was sure that the reason was to find out more about System of Care and how I, as a faith leader in our community, could be more active in helping young people with mental health needs. What I learned was that this was a divine appointment, with a much bigger agenda than I could have imagined.

I felt a pull toward a program called Open Table because of its initial suggestion that a person could be helped to move from poverty to community by the personal investment of others in their lives.

I am familiar with the success of mentoring and involved in several efforts, including Big

Brothers and Big Sisters, recreation programs, and church leadership efforts.

While at this conference, I heard a national leader suggest that the government agencies could do only so much. There are some things that only faith could do. The light came on. I felt we were at a portal of potentials.

I walked out of that meeting directly into a table promoting Open Table. The gentleman that was at the table was open and conversant.

I asked to receive information about this program that could help a congregation move from transactional help (providing a fish sandwich) to transformational help (creating a fisherman.) This was what I needed.

That conversation began a wonderful journey of exposure to a program that is the true example of compassion.

A group of people in a congregation sits with a brother or sister weekly for 52 weeks. They share their insights, life experiences, and wisdom with this person while they make their own decisions that change their lives. A transformation takes place. That is Open Table.

Since that time last year, we have had several meetings with the founder and leaders of Open Table, leaders in Saginaw MAX System of Care, and a number of leaders in the faith community of Saginaw.

At the time of this writing, we have 11 churches that have signed up to participate in Open Table locally.

I anticipate this program becoming an opportunity to influence many lives in our community. The progression from poverty to community is under way in Saginaw. I believe in divine influence, and I believe that Open Table will be an answer to many prayers.

For more information on Open Table in Saginaw, contact Coordinator Pastor Hurly Coleman at 989.525.3670 or hurlycoleman@yahoo.com.

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Training and Technical Assistance for System of Care



Kelley Blanck

**By Kelley Blanck, LMSW
Saginaw MAX Technical Assistance Coordinator**

Saginaw - Learning about System of Care and its related values is one of the driving forces behind system change efforts.

As a result, Training and Technical Assistance is a key component to System of Care Work. The role of Training and Technical Assistance

FROM P 1, Time to Widen the Support...

Max System of Care has provided opportunities for the faith-based community to engage in this rich dialogue about the role of spirituality in recovery by attending CBMCS (California Brief Multicultural Competency Scale) workshops.

These efforts have been very fruitful because the faith community and a variety of systems of care agencies have come together to learn how to best meet the mental health needs of those they serve.

It is this author's belief that one of the greatest outcomes of these workshops has been the slow but steady breaking down of the barriers of stigma and shame surrounding mental illness.

Throughout the course of these rich yet courageous conversations, faith communities have been inspired and motivated to widen the welcome and deepen the support in an even greater way to those within their various communities of faith who are living with mental illnesses.

In addition, there is an acknowledgment that in addition to spiritual resources, people may also be in need of help by trained mental health professionals.

in System of Care involves 3 Components: Training Development, Trainer Development and Community Resource Development.

Training Development includes: researching what training needs are being identified in the community, creating a curriculum of trainings that incorporate the values of System of Care, researching and connecting to trainings/conferences to attend, and soliciting speakers to come to Saginaw to provide trainings locally.

Trainer Development includes: recruiting and training possible trainers from the community on topic specific areas or for providing core competency trainings, such as System of Care 101, Wraparound 101, etc.

Community Resource Development includes: canvassing the community for training opportunities that can be shared or collaborated, broadcasting training/education opportunities to community partners through System of Care, and developing as a resource to the community on mental health trainings.

Simultaneously, providers of mental health services are also gaining a deeper understanding of the role of spirituality in the lives of the people, and the need for the inclusion of spirituality in various aspects of treating and responding to the needs of diverse communities of faith.

This author is pleased to have a key role in these conversations. In addition to serving as the Master Trainer of the CBMCS, and the developer of the CBMCS Train the Trainer Program, I have developed the S.A.F.E. (Spirituality and Faith Empowers) Handbook and Training Program.

S.A.F.E. is a 3-day training for diverse faith leaders and diverse systems of care providers. Through S.A.F.E., faith leaders will gain a better understanding of mental illness and how their communities of faith can be more helpful and supportive to those who are suffering with mental illnesses.

Additionally, S.A.F.E. will help mental health professionals to learn more about the role of spirituality in recovery, and be introduced

We have partnered with local and state training hubs, including Michigan Alliance for Families, to provide a well-rounded variety of training experiences.

Since 2010, over 500 community partners, families, and youth have been trained. Some of the trainings that are offered locally include System of Care 101 (intro to System of Care), Strengthening Families, Parenting Wisely, Parenting with Love and Limits, Parent Management Training, Family Leadership Academy Series, Youth Leadership Series, and California Brief Multicultural Scale Training.

In addition, we have sponsored many community partners, families and youth to attend state and national conferences, including National Federation of Families, Georgetown Institutes, National System of Care Conference, National Association of Mental Illness, Michigan Wraparound Conference, and many others.

For more information about training opportunities, contact Kelley Blanck, Technical Assistance Coordinator for System of Care at kblanck@sccmha.org or 989.797.3556.

to strategies for including spirituality in assessment and treatment.

During Mental Health Awareness Month, the Disproportionate Minority Contact Initiative in partnership with Saginaw Max System of Care will host a town hall meeting on Tuesday, May 26, 2015 facilitated by this author. The time and location of the event will be provided at a later date.

The town hall meeting is to discuss evidence-based and community-based best practices to address mental illness, identify the barriers, and develop strategies to ensure that those who are in need of mental health services will receive the best care possible.

Dr. Gloria Morrow is a licensed clinical psychologist in private practice in Rancho Cucamonga, CA. She is a national keynote speaker and workshop facilitator, as well as the master trainer of the CBMCS.

Dr. Gloria is the author of several books, including S.A.F.E. (Spirituality and Faith Empowers), which will be released in August, 2015. Dr. Gloria can be reached at 909.581.1061 or visit www.gloriamorrow.com.

“People Achieving Change Today”



Terry Kuhns, M.A.

By Terry Kuhns, M.A.
CEO, PACT LLC

Saginaw - Dr. Gary Collins, a clinical psychologist and author, defined vision as “a clear picture of something that we want to exist in the future. It’s a target we intend to reach. It encourages people to think beyond what is and to visualize what will be.” PACT (People Achieving Change Today) is an LLC local to Saginaw County with a clear vision.

The vision of PACT is a large nexus of caring people and organizations committed to nurturing trusting and purposeful relationships.

PACT has been engineering this vision for the last year by recruiting and empowering some of the most outstanding men and women you would ever meet to serve as mentors to children and youth;

they are truly local Saginaw heroes. It is complete joy for me to lead such an incredible team of volunteers.

Being volunteers, they are not paid for mentoring. At least not in money. I have asked them, and they actually feel they are paid a great deal. Here is how four of them recently have described the payoff:

“I love being a mentor because I feel like I am able to make a difference in a child’s life. Maybe I will be able to give him something he didn’t have before and to show him there is someone out there who cares about him.

“Mentoring also benefits me. It shows me that I can make a difference. I am extremely fortunate that I can give back. I thank PACT for giving me the chance to do this. I will be in this program for as long as it is around.”

“I love having the opportunity to reach out and be a positive role model to someone in my community, giving him the opportunity to change and grow. PACT gives me this opportunity. I have had mentors in my life, and I know they directly changed the course of my life for the better.

“I took my mentee out last night for ice cream, and I gave him a gift for his birthday. He said, “Why did you get me a gift?” I told him I was glad he was born and that should be celebrated. He was so excited I thought he was going to start crying. It was a fun evening. Might have been the best \$19 I ever spent!”

“Seeing a twelve year old child in foster care change from a non-communicative

girl to a bubbly, fun-loving one, and having the privilege of being part of it, is reward enough. Thank you PACT for the opportunity.”

“Mentoring for PACT is an investment in the future. These young people have so much to offer, and they just need a chance to thrive. To me, that’s what mentoring is all about—helping them have better opportunities in life so they can chase after their dreams.

Future doctors, social workers, missionaries, educators, tradesmen and statesmen will rise from their ranks. Having a small part in that is rewarding.”

Our first mentoring relationship was launched last July. Currently, we have 42 active relationships. I believe we are quickly seeing our vision become reality. However, there are many more children and youth in Saginaw County who would benefit from a mentor. We are always recruiting new local heroes to join our ever growing team.

If you like additional information concerning PACT, I can be contacted at 810.488.0914, or peopleachievingchangetoday@gmail.com.



Introducing Resource Parent Training

Learn about Trauma Awareness



**Introducing Resource Parent Training—
Caring for children Who Have Experienced Trauma:
A Workshop for Resource Parents
(Foster Parent, Adoptive Parents, and Guardians)**

WHEN: May 7, 21, 28, and June 4, 2015*

10:00—1:30pm

WHERE: DHS Office
411 E. Genesee, Saginaw

Resource Parent Training Curriculum includes:

- Trauma 101
- Understanding Trauma's Effects
- Dealing with Feelings and Behaviors
- Building a Safe Place
- The Importance of Connection
- Becoming an Advocate
- Taking Care of Yourself

Resource Parent Training is a curriculum that was developed out of the work of the National Children's Traumatic Stress Network. It is an 8-module training format that is led by a parent and clinician.

This Training was initially developed for foster parents; however, it has since been adapted to train all forms of caregivers, including the community at large as well as system partners.



This program is presented in cooperation with Saginaw County Community Mental Health Authority, Saginaw MAX System of Care, and parent partners.

**The class requires at least 6 registrants/attendees and will be cancelled at the instructors discretion if this number is not met*

To Register: 989-797-3556

Saginaw Max System of Care Welcomes New Youth Program Coordinator



Timothy Walker
Youth Program Coordinator

Saginaw – Saginaw MAX System of Care welcomed Timothy Walker as their new Youth Program Coordinator on Monday, April 13.

Walker, a Saginaw native, has strong ties to the community through his personal and professional experiences, and a background in youth mentoring and clinical practice.

Walker will be overseeing youth involvement in the Saginaw MAX initiative through the development of a youth-driven group and strategic partnerships within the community.

“I have always had a passion for giving back to this community,” Walker said. “I know firsthand how difficult life can be for youth

growing up in Saginaw, and I wanted to be able to show the youth today that if they surround themselves with people and supports that encourage them to chase their dreams, wonderful things can happen.”

Walker graduated from Arthur Hill High School in 2008 and attended Saginaw Valley State University where he graduated in May 2014 with a Bachelor’s Degree in Social Work with a minor in interdisciplinary studies. He is set to graduate from Wayne State University on May 7, 2015 with a Master’s Degree in Social Work with a concentration in family systems theory.

Walker’s previous professional experience includes multiple internships in clinical practice with various youth and family serving systems such as Wolverine Human Services and Westlund Guidance Clinic.

He also volunteers in the community through Cultivating Youth for Future Generations (C.Y.F.G.) as a mentor to young males ages 7 to 17 in Saginaw County, as well as working with at-risk students through the Success Academy at the Saginaw Career Complex.

In November 2009, youth, families, community leaders and agencies came together to develop a county-wide System of Care to support youth, ages six to 21.

The supported youth experiences serious emotional and behavior challenges and requires services of two or more child-serving systems, such as mental health, juvenile justice, child welfare or special education.

By December of that year, the collaborative group submitted a proposal to the federal government’s Substance Abuse and Mental Health Services Administration (SAMHSA).

SAMHSA recognized Saginaw County’s need and awarded a six-year, \$9 million grant to continue to develop a children’s mental health System of Care.

As of 2011, Saginaw County was one of only nine national grantees for the fiscal year.

In October 2014, Saginaw MAX was awarded a four-year expansion grant from SAMHSA to continue and expand the system of care effort by addressing the unmet needs of youth with emotional and behavioral challenges and their families that have been identified in the Saginaw community, and progress the system of care initiative to a statewide level.

“I’m so excited about this opportunity to be a part of Saginaw MAX System of Care,” Walker said. “I am being given the chance to fulfill my dream of giving back to the community, but more importantly I am going to be connecting with the next generation of leaders for Saginaw.

“This is a chance to make a real impact on the future of our community and the future of the youth. It’s the opportunity of a lifetime.”

A System of Care is a popular approach for improving outcomes for youth with Severe Emotional Disorders and their families by expanding the availability of and access to individualized services and supports that are family-driven, youth-guided and culturally competent and relevant.

FROM P 1, Public Policy Associates...

a hard look at disproportionality,” said Dr. Paul Elam, PPA president, and lead consultant on the project.

“The members arrived with a wide range of perspectives but a unifying goal: helping kids have healthy, happy lives that prepare them to become productive adults.”

Research shows that youth find their involvement in the juvenile justice system is often treated like a criminal conviction and limits employment opportunities, the ability to join the military, and eligibility for government support. It can also result in expulsion from school and diminished access to higher education and financial aid.

PPA’s work began with research identifying the extent of the problem. The analysis showed that:

- Minorities are more likely to be investigated for abuse and neglect.
- Children of color are more likely to be removed from their homes and age out of the foster care system.

- Minority children are more likely to be arrested and referred to the courts.

- Minority children are more likely to be detained during the adjudication process.

Working closely with the committee under the leadership of Circuit Court Juvenile Division Judge Faye Harrison, PPA steered the committee through an assessment and diagnosis phase to understand possible causes.

The work included surveys, focus groups, interviews of key informants, and the involvement of more than 1,000 children and practitioners.

“We were very inclusive and tried to engage every group involved in juvenile justice and child welfare. That especially includes the children, who are too often left out of these conversations,” Dr. Elam said.

Following Judge Harrison’s retirement, her successor, Judge Barbara Meter, was selected to lead the committee. She is working with PPA and the committee to implement recommendations for creating more fair and equitable child welfare

and juvenile justice systems and then to implement the plan.

The strategy includes training in areas such as cultural competency and abuse and neglect reporting; programming, such as diversion options that provide supports and keep kids out of the juvenile justice system; and systems change, which involves better risk/needs assessments and more team decision making.

PPA will provide staffing for the training, programming, and systems change subcommittees that will work to move the strategy forward.

PPA is also helping the steering committee obtain funding to implement the DMC reduction strategy. The full team will meet twice a year to monitor progress.

“Our mantra is that all children should be treated fairly and equitably, whether it’s in child welfare or juvenile justice,” Dr. Elam said. “We are developing a plan of action that if implemented as intended should produce the results.”

Saginaw County Community Mental Health Authority Announces New Youth Therapy Service

Saginaw - SCCMHA is pleased to announce the implementation of a new evidence-based practice (EBP).

Parenting with Love and Limits (PLL) is an evidence-based practice that combines group therapy and family therapy to treat children and adolescents aged 10-18 who have severe behavioral problems and frequently co-occurring problems such as depression, alcohol or drug use, chronic truancy, destruction of property, domestic violence, or suicidal ideation.

It includes six multi-family sessions, conducted by two facilitators who employ group discussions, videotapes, age-specific breakout sessions, and role-play.

Individual families also receive intensive 1 to 2-hour therapy sessions in an outpatient or home-based setting to practice the skills learned in the group setting. PLL's integration of group sessions and family therapy is designed

to help families apply skills and concepts to real-life situations and prevent relapse.

PLL also acknowledges that many youth who exhibit severe behavioral problems have experienced traumas.

The program includes a "wound work" component that helps families acknowledge their suffering and support each other in healing. In addition, it organizes community resources and natural supports to help problem-solve ways to meet needs of the youth such as welcomed involvement in positive activities.

In March 2015, SCCMHA began partnering with the 10th Circuit Court of Saginaw County Family/Juvenile Division to offer PLL to adolescents (and their families) who are currently on intensive probation.

The treatment team will consist of PLL therapist, Tammy Sattelberg, from SCCMHA's Child, Family & Youth Services and an intensive probation officer, from the 10th

Circuit Court of Saginaw County Family Juvenile Division, Kila Cain, who will serve as the PLL case manager.

The PLL therapist and case manager will work closely together along with the PLL national implementation team to make sure the practice is adhering to the model. It is anticipated that 32 to 36 total families will complete the program in one year.

In other communities that have implemented PLL, the majority of youth who complete the program are able to remain successfully in their family homes and do not commit new crimes.

SCCMHA and the 10th Circuit Court of Saginaw County Family/Juvenile Division are excited to implement this new evidence-based practice and anticipate the many positive outcomes for at-risk families in the future.

Westlund Guidance Clinic Offers Outpatient Counseling for All Ages

By Erin M. Nostrandt MSW, LMSW
Vice President of Behavioral Health Services
Westlund Guidance Clinic

Saginaw - Westlund Guidance Clinic is a non-profit agency that provides outpatient mental health counseling for people of all ages. Westlund has been serving youth, adults and families since 1963.

The Clinic has various partnerships and contracts with other providers within Saginaw County to increase services and decrease barriers to consumers.

Westlund takes most insurances as well as contracts with Saginaw County Community Mental Health Authority which expands our coverage area.

The therapists are master prepared clinicians, each having areas of specialty and numerous years of experience working with various mental health issues, substance use and behavioral concerns. Westlund also provides psychiatric services if medication is needed when therapy alone is not enough.

The clinicians understand that life can be difficult and may include many obstacles along the way. If you would like more information on what Westlund has to offer, you can visit the website at: Westlundguidanceclinic.com, visit on facebook, or call 989-793-4790.



Integrated Health Care at Saginaw County Community Mental Health Authority



Colleen Sproul

**By Colleen Sproul
Director of Health Home and Integrated
Care, SCCMHA**

Saginaw - The Affordable Care Act includes a number of provisions that provide supports and incentives for States and health care providers to adopt the practice of bringing primary care and behavioral health care services together.

For consumers of mental health services or those in recovery from addiction disorders, the law's provisions and the general movement toward integration are important steps that can lead to improved overall health.

Why is the integration of primary care and behavioral health care important?

Over the past 10 years, studies show that people with mental health and/or addiction disorders die at a younger age than those in the general population. The causes of people dying so early are clear; people are dying of conditions like diabetes and heart disease that could be prevented if treated.

It is known that people with schizophrenia die from treatable diseases two to three times more often than other people. People living with addictions also have higher rates of many chronic, life-threatening conditions.

We also know from these studies that if people with addiction or mental health conditions saw their primary care physician more often, their high rates of illness and death would decrease.

What is integrated care?

Integrated care is when health care professionals pay attention to all of the person's health conditions – at the same time. It is sometimes called the “whole person” approach.

Integrated care is concerned with a person's mental and physical health and works to ensure that a person's needs are addressed each time they are treated by a health care professional.

How does integrated care work?

Integrated care can take place in several ways. In some instances, mental health or addiction treatment services may be provided in the same building and primary health care services.

Or, teams of professional, including primary and behavioral health care specialists, may work together with the same patients, or a primary care nurse or physician with mental health or addiction medicine training may provide all basic services for each patient.

Saginaw County Community Mental Health Authority (SCCMHA) and Health Delivery, Inc. have joined together to provide a health home at 500 Hancock Street, Saginaw.

Together, SCCMHA and Health Delivery's team of professionals provide “whole person” care in the same setting. Individuals receive medical and behavioral health care to achieve wellness goals that they develop with their healthcare team.

There is a strong focus on wellness such as managing high blood pressure, controlling weight, eating better and getting exercise while at the same time receiving on-site support to manage mental health issues.

SCCMHA received a 4-year grant from the Substance Abuse and Mental Health Services Administration in October 2014 to build on an integrated model of health care for adults with severe mental illness with Health Delivery.

What is an example of integrated care?

The most common example of integrated care is the “patient-centered medical home,” also known as a “health home”. In this home, a provider or a team of health care professionals

work together to provide care that manages and coordinates all of the services a person may receive.

This model focuses on an individual's specific health care needs and the health care professionals work together for the benefit of each person.

What will integrated care mean for the behavioral health community?

Integration of primary and behavioral health care will allow health professionals to coordinate diagnoses and treatments so that they can complement each other.

Integrated care should result in fewer medical test and repetition of simple procedures such as blood draws.

It is important for doctors who are treating you to know of all the medications you may be taking. When you agree to join a health home, the health care professionals who support you will work to ensure that your medications will not interfere with one another or, more important, will be prescribed in a way that could harm you.

Another important goal of integrated care delivery is the ability for all health care information to be available in one place. For doctors and other health care professionals, this will make it easier to keep track of all of the health conditions and medications a person has.

Are we “there” yet?

There are many projects and initiatives around the country working to develop health homes. It is an exciting time for everyone because we understand that focusing on providing “whole health” to individuals with behavioral and physical health needs will improve the quality and life expectancy of their life.

We are making great progress...but we still have a long way to go to make sure that behavioral health is essential to good health. Saginaw County Community Mental Health is making great strides in achieving improved health outcomes for their consumers through the establishment of the health home at 500 Hancock.

Over 100 consumers have signed on to the health home since October 2014. They are receiving their primary care health services from Health Delivery, Inc. at the health home site at 500 Hancock and are on their way to a healthier future.

Health Delivery, Inc. School-Based Health Centers Continue to Provide Services to Area Youth

Saginaw – The Health Delivery, Inc. School-Based Health Centers (SBHC) offer exceptional opportunities for students to receive health services located in both Saginaw High School and Arthur Hill High School.

After the students receive services in the health centers, they can return to class. The services are helping to reduce absenteeism and truancy in both schools.

The Saginaw High health center has provided services to students since 2006, and the Arthur Hill health center has been providing services to students since 2009. The services are provided to all youth ages 10 to twenty-one whether or not they attend either high school.

The services provided include: Annual Well Child & Sports Physicals, Vaccinations, Acute/Chronic Illness Management, TB Testing, Behavioral Health Counseling, STI/HIV Testing/Screening, Reproductive Health Counseling, Health Education, Dental Services, Medicaid Enrollment, and much more. In order to be seen at the health centers, students must have parental consent.

The health centers are fully staffed with licensed clinical and behavioral health staff. Each center (SHS and AHHS) has a full time provider (PA-C or NP) along with a part-time social worker (MSW), part-time registered nurse, full-time registered medical assistant, and full time health educator.

The staff works together to address several health issues that are relevant to teens including: chronic diseases: asthma and diabetes; behavioral health issues: depression, anxiety, anger, stress, etc;

teen pregnancy prevention and sexually transmitted disease (STD) prevention.

Not only are these issues addressed clinically, but the health educators provide evidence-based education to students at both high schools to address risky behaviors and risk reduction.

In addition to the services provided in the health centers, each school has a very active Teen Advisory Council. The Teen Advisory Council (TAC) was established in 2006 when the health center first opened at Saginaw High. After some programming changes, it was dissolved in 2009 and reestablished in January 2011.

The TAC has led several school-wide campaigns around different health topics related to adolescence including: Drug/Alcohol Prevention, HIV/AIDS Prevention, Bully Prevention, RESPECT, Teen Dating Violence Awareness, Nutrition/Exercise, (GYT) Get Yourself Tested, Teen Pregnancy Prevention, and much more.

In the summer of 2013, the TAC from both SHS and AHHS came together and created a constitution for the group, and in the fall of 2013 each group elected their first official officers. Since this, the TAC has become student-led.

Also in the fall of 2013, SHS and AHHS TAC members came together to create the “Think.Respect” pledge which has been adopted school-wide at Saginaw High, and the Saginaw Public School District is looking to adopt it district-wide.

In the fall of 2014, additional funding for behavioral health was given to the SBHCs.

This allowed Health Delivery to hire one full-time behavioral health specialist to work at both SHS and AHHS SBHC.

Having a full-time social worker in the health centers has allowed for the expansion of mental health services, including individual and group therapy.

In January of 2015, a “coping skills” group was formed, in which the social worker meets with a group of students weekly and addresses various issues including: stress reduction, anger reduction, depression, anxiety, etc. This has been extremely beneficial to the students.

The school-based health centers have also created several partnerships district-wide and in the community. The most recent partnership has been with the “Safe Schools, Healthy Students” initiative under the Saginaw Public School District. The enhancement of the SBHC behavioral health services has helped to enhance the mental health piece of this initiative.

Also, partnerships with Underground Railroad, Inc, Prevention And Youth Services and CAN Council has allowed for students to receive supplemental instruction and programming.

Healthy students make better learners. By providing students with services to address physical and mental health needs, as well as preventative care students are able to stay healthy, stay in school, and become productive members of society.





MONROE
COMMUNITY
MENTAL
HEALTH
AUTHORITY

Presents

Kevin Hines



Author of



Tuesday, May 12, 2015

9:00am to 11:00am

Location: Meyer Theater

Monroe County Community College

This event is FREE and open to the public.

For more information,
contact Bridgitte Gates at 734.384.8780

Book Signing

at 10:00 am

Autographed

Books on sale

for \$25

The Saginaw MAX System of Care Evaluation

Saginaw MAX is a six-year, federally funded initiative to help improve the way Saginaw county youth and family service organizations work together to provide coordinated care to Saginaw County youth with complex emotional and behavioral challenges.

It provides youth and their families with a coordinated team approach that may involve the educational, mental health, child welfare, healthcare, juvenile justice and law enforcement systems. This approach is often called "System of Care".

Every grant-funded community is required to participate in a national evaluation and also engage in local evaluation activities determined by each community. The national evaluation provides us with information about the youth being served, the services they receive, their satisfaction with the services they receive, and how they are doing in different areas of their life, such as home, school and the community.

The information we gather from evaluation activities informs us about what is working and what isn't and helps us improve programs. In addition, along with other system of care communities, Saginaw shares this information with other communities and the federal Substance Abuse and Mental Health Services Administration (SAMHSA) so that we can all learn from each other's experiences and make things better for youth and families.

Who participates in the evaluation?

At the time they begin services with Saginaw MAX, every youth and family is provided with information about participating in the study and an evaluation team member contacts them to invite them to participate in the study.

If the youth and caregiver agree to participate in the study, an appointment is scheduled to complete the interviews, which last between 1 and 3 hours each. Participation is completely voluntary and all information is kept secure and confidential.

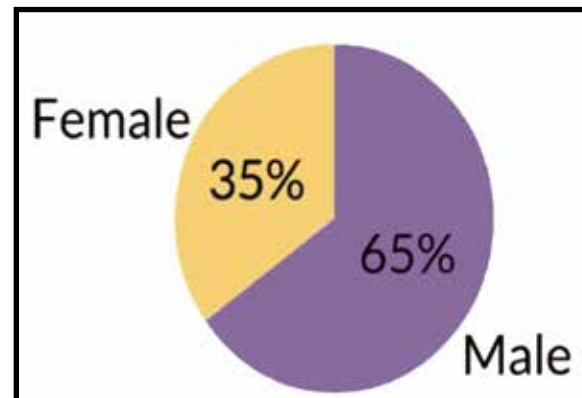
Interviews take place every 6 months for two years. This gives us the chance to see how youth and their families are doing before, during and after they receive help from Saginaw MAX.

Who is being served by Saginaw MAX?

Saginaw MAX has been providing services to youth and their families since October 2011. Since then, 233 youth have received services. The majority of youth (63%) have received Wraparound services. The rest of the youth (37%) have received services from the Family Services Unit within Saginaw County Community Mental Health or from a partner mental health provider

(Westlund and Saginaw Psychological).

Sixty-five (65%) of the youth being served are male and 35% are female. Their average age when they start services is 13. Forty-two percent (42%) of youth identify their race as African American, 27% identify as White, and 28% describe themselves as multi-racial. Seventeen percent (17%) of the youth served self-identify as of Hispanic origin.



How are youth referred to System of Care?

About one third of referrals (32%) are from families; we sometimes refer to this as self-referral. Other referral sources include Child Welfare (DHS) who accounts for 23% of referrals, Juvenile Justice who accounts for 22% of the referrals. Twelve percent (12%) of referrals are initiated by a mental health provider and four percent (4%) by school representatives.

What agencies are youth involved with?

Because of the complex needs that most youth are experiencing when they come to the attention of Saginaw MAX, they are usually already receiving some kinds of help from other agencies, but this help is not enough to support them and their families.

Most of the youth served (97%) are receiving services from a mental health provider at the time they begin services with Saginaw MAX. Many of the youth (66%) are receiving a special service from school and more than one third (38%) are receiving services from Child Welfare (DHS) and 31% are receiving services from Juvenile Justice.

What kinds of challenges face youth and families when they come to Saginaw MAX?

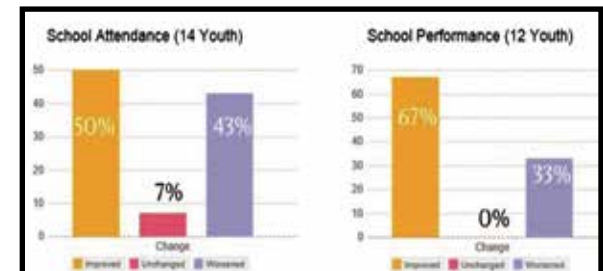
The main reason for youth referrals to Saginaw MAX is due to trouble following rules and with disruptive and violent behavior caused by mental health (81%). Seventy six percent (76%) of youth also present with problems in school and more than half (54%) have attention and hyperactivity related problems.

Saginaw MAX helps!

We are seeing positive trends in important life areas for youth receiving Saginaw MAX services.

Improvement in school and education.

After a year and a half in services, youth have a 45% reduction in school suspensions. Also, fifty seven percent (57%) of youth have either improved or maintained their school attendance and 67% of youth have improved their school performance.

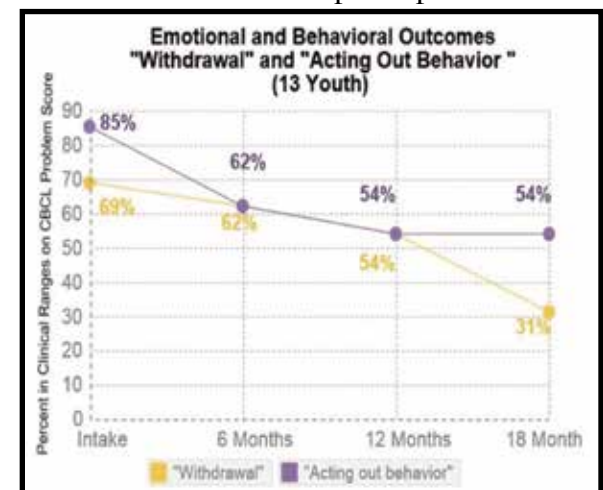


Juvenile Justice Involvement

For youth that have been participating in Saginaw MAX for a year, 24 youth report a 13% decrease in arrests and in being in trouble with police for running away. They also report a 21% decrease in bullying and an 8% decrease in theft.

Emotional and Behavioral Outcomes.

After 18 months in services, we see a steady improvement in withdrawal types of behavior and emotional issues (such as social withdrawal, demand for attention, feelings of worthlessness or inferiority, and dependency). For youth exhibiting "acting out behaviors" (such as difficulties with relationships and rule breaking, as well as displays of irritability and belligerence) we saw improvements in the first 12 months of participation.



What's next?

We will continue interviewing youth and families about their experiences with Saginaw MAX for another 4 years. As time goes by, we will have more about more youth and this will help us to continue to improve the ways that the agencies and programs in Saginaw work together to help youth and families succeed.

The Cultural and Linguistics Competency Team (CLC Team) is Making a Difference in the Great Lakes Bay Region

Saginaw - If you hear people working with Saginaw Max System of Care use the abbreviation "CLC" it's not meant to be mysterious, it just stands for Cultural and Linguistics Competency, and the CLC Team is a component of Saginaw Max System of Care.

It can be challenging to say the whole term repeatedly and to be more efficient Saginaw Max has shortened it to CLC. But make no mistake; though the abbreviation is short, the team works on many large and complex issues.

Saginaw Max is a county-wide effort that brings together the child and family-serving systems, community partners and families involved with caring for children and youth with complex mental health challenges.

Together, these entities work to achieve healthy outcomes for families with children and youth who have complex needs, or "big behaviors," and inform Saginaw Max about barriers and gaps in services.

Saginaw Max has a Cooperative Agreement with the Substance Abuse and Mental Health Services Administration (SAMHSA) that outlines how Saginaw Max will use the strengths within our community to address the challenges that families experience navigating services for their children.

There are several components involved in fulfilling the Cooperative Agreement including convening a Cultural and Linguistics Competency Team.

FROM P 2, Welcome

- In collaboration with the CAN Council, Department of Health & Human Services and Juvenile Courts, SOC launched on a very wide scale, 3 evidence based training programs: Strengthening Families (SFP), Resources Parent Training (RPT) and Parenting with Loving Limits (PLL). SFP and RPT have been offered at least 5 times over the past twelve months with PLL recently implementing its first session.

- Saginaw SOC Director was nominated and selected to serve on the Child, Youth and Family Council on Mental Health ("The Council"). Operated by SAMHSA's Child, Adolescent and Family Branch, this body convenes via monthly conference calls and an annual training in Georgetown.

The CLC Team:

- Is composed of families, youth, system and community partners who have the knowledge and experience to give voice to those who have historically been underserved, unserved or inappropriately served within our community.

- Is charged with helping to achieve the Saginaw Max vision by integrating culturally and linguistically appropriate practices throughout our community and will look at aspects of service delivery such as access, availability, utilization, quality, and outcomes specifically for those individuals in our community who have been historically marginalized.

- Works to integrate culturally and linguistically appropriate practices into our community and is grounded in the core values of the System of Care philosophy: family driven, youth guided, cultural and linguistic competency, and community-based, individualized care that is informed by data.

- Uses these core values as a framework to engage in work that involves assessing the community's strengths and needs in relation to cultural and linguistic competency, analyzing data sets that help describe the families that are being served in our community, and use local evaluation tools to determine the effectiveness of programs serving families with children who have complex behaviors.

- Will use relevant information and data to address disparities and disproportionality in the mental health system and other child-serving

The overarching purpose of the Council is to support the vision and mission of SAMHSA's Child, Adolescent, and Family Branch (CAFB). The Council provides guidance and input about how CAFB should address critical issues in the field of child and youth mental health, and shall identify strategies to improve child and youth mental health services and child serving systems.

In fulfilling this charge, the Council embraces a process of collaboration and coordination that includes a diverse representation of voices and ideas.

We continue to strive to collaborate, educate, train and support the children, youth, young adults, families and partners of Saginaw County.

systems that care for children with complex mental health needs.

- Uses the CLC Action Plan which includes strategies, objectives, and action steps designed to address CLC issues.

What is the expected level of involvement?

- Currently the CLC Team meets monthly, the third Wednesday of the month from 4:30-6:00 pm. Locations vary so we are able to visit our partner organization's sites.

- We will also be convening short-term, monthly workgroup meetings to address the different parts of the CLC Action Plan.

Our next CLC Team meeting is May 20, 2015, 4:30 PM – 6 PM, at Child and Family Services. For more information contact Dalia Smith at 989-498-2270.



Back row, L to R: Wanda Dunlap, Keva Clark, Reena Meredith, Amy Murawski, Dawn Hessel. Front row, L to R: Marie Villegas, Dalia Smith

These are highlights of a very busy year. Much has been accomplished. In a recent article (March 2015), Derrick Clifton notes that 'Cultural shifts take time, but it's important to foster a climate in which friends and loved ones can seek non-judgmental support for a mental health condition. Doing so could make all the difference in helping others feel empowered to get the help that they may need'.

Saginaw MAX SOC actively works towards and seeks opportunities to promote a healthy 'cultural shift'. A shift in thinking about, a shift in attitudes, a shift in serving youth with behavioral and mental health challenges.

Thank you for your continued support.

No Offense, But



Adrienne Gurman
Photo Credit: Twitter

By Adrienne Gurman

New York - Ask anyone who has been bullied, humiliated and shamed and they will be able to recount, in agonizing detail, who said what and when and what scars it left.

As a teenager, I was harassed and ridiculed for my pale skin. No matter how much I tried to soak up rays, my body rejected the sun. Kids in school loved to compare their bronzed arms to mine. They teased me with words like ghost, marshmallow, vampire and corpse. I guess it made them feel superior.

Always one to avoid confrontation, I shied away from cursing them out but it was at my own expense. I laughed along with the names they called me and cried when I got home.

As an adult when I disclosed that I was diagnosed with and getting treatment for Major Depression and Anxiety, it was crushing to once again be made to feel inferior by colleagues, so-called friends, neighbors, and even individuals in the medical profession!

Oh, if only I could go back in time with courage to stand up for myself, I would. I would know what to say every time anyone started a sentence with, “No offense, but...”

Telling me to not be offended by whatever I was about to hear, gave people a free pass to say whatever they wanted because hey, they’d warned me. How I’d love to let go of those memories and erase the painful recollections of feeling shame for an illness I either tried to hide, or needed to defend, due to the ignorance and arrogance of others.

I’m just one among millions who live with an invisible illness of the brain. It took years of thought-correction therapy to build my confidence and self-worth and become brave enough to talk about depression and anxiety with the same ease as when discussing migraines.

Finally, after so much damage was done to my psyche, it came down to me owning my illness — and fair complexion — without humiliation and with dignity.

When you take ownership of what makes you who you are, there’s no longer a need to justify or appease those who try to make you feel second-class. Speaking up for yourself means you are fighting stigma, not only for yourself, but also for all of us who sucked it up for way too long.

When you educate yourself about your diagnosis, physical and psychological, you become empowered by knowledge. You can see through the snide remarks from the no-offense-but-people. When you react from strength, not trepidation, you’re helping to erode the fear, misconceptions and stigma that are rampant in our local and global communities.

Since I can’t hit rewind and have no desire to ruminate over my past embarrassments

with should-haves, I can use all I’ve learned about depression and anxiety, and how I have come to successfully manage it, as a shield against any unwelcomed comment.

It’s actually been a few years since anyone has chastised me for going to therapy or taking anti-depressants. I no longer keep anybody in my life that drags me down. I also find myself meeting people who really do get that mental illness is not a weakness and certainly not a choice.

To all of those haughty types who told me not to be offended, but ... therapy is a waste of time; medications are a hoax; if I didn’t get a grip I’d end up in the nuthouse; it was all just a ploy for attention; I should choose to be happy because children are starving in Africa — if YOU happen to be reading this, have you seen the light and corrected your ways?

Self-righteous behavior is a ridiculous reaction to someone diagnosed with mental illness. If you think you are smarter, stronger, better and worth more than those with a diagnosis — you are wrong.

If you condemn and criticize others for reaching out for help, you are the one who should be ashamed. Dialogue, conversation, respectful exchanges — that’s how you can be helpful to others. Superiority has no place in discussions about any disease.

This summer will mark ten years since I found the right doctors and treatments for my depression and anxiety. It’s been an excruciating and eye-opening decade, requiring diligence, dedication and courage, so unless you stop with the stigmatizing, no offense, but, keep your thoughts to yourself.

This article has been reprinted with permission from the website it first appeared on, www.bringchangetomind.org, and the author.

Strengthening Families

free parent support series for
parents, grandparents and care givers of children 10 –14 years



Connect with other families and learn :

- Nurturing skills that support their children
- Effectively discipline and guide their youth
- Set clear limits
- Deal with stress and peer pressure

FREE family support series
7 week course

For children 10-14 years
Dinner and Household Products Weekly

If you would like to attend or host this
training please contact:

Keva Clark, SFP Coordinator

989-797-3534

kclark@sccmha.org



Sponsored by Saginaw MAX System of Care

LLEAD Organization Comes Together to Better the Lives of all Latinos in Michigan



Daniel Reyes Soza III

By Daniel Reyes Soza III

Saginaw - In November 2013, Latino leaders from Saginaw, Holland and Lansing met for the first time to begin the discussion of creating a statewide Latino organization.

The meeting was at the Cristo Rey Community Center in Lansing, Michigan where three Latino leaders from each community met to discuss human and civil rights related issues as they affected Latinos in Michigan.

The observation of one Latino leader who traveled the State of Michigan and met with many Latinos in different communities was that "they all were confronting similar issues, including: unlawful discrimination/racism, lack of jobs and unfair employment practices, high K-12 drop-out rates, disproportionate teen pregnancy rates, immigration issues, school to prison pipeline, and health disparities.

Since that time, LLEAD has been meeting monthly for almost one year and have created the initial stages of a Latino Statewide

Organization. LLEAD will create local Branches in communities of the state where there are Latino Leaders interested, willing and able to become a part of LLEAD and assist in the enhancement of their local and state Latino communities.

This organization is in its infancy stages and will take time and many good people and leaders to continue its design and development so that it will have a strong basis and be able to act as the vehicle for Latino leaders to work together and better the lives of all Latinos in Michigan.

There is a state level LLEAD Board of Directors that is the steering component of LLEAD, statewide. This Board will be responsible for the actions of the entire organization and any funding that is collected on the local or state levels.

The local Branches will become a part of LLEAD via their own Branch bylaws that will serve to assure that the Branches follow the rules, regulations and statewide decisions made by the LLEAD Board of Directors.

By partnering with MAX System of Care, the LLEAD Saginaw Branch has been the first in the state to publicly introduce the concept of LLEAD to their community as well as hold workshops to assess the needs of the Latino community in Saginaw as well as give the Latino community in Saginaw the opportunity to express their concerns.

On January 19, 2015, Martin Luther King Jr's Birthday, a public meeting was held at Zion Evangelical Lutheran Church, 1209 Hancock St., to introduce the concept of LLEAD to the Saginaw community.

Approximately 65 people attended the event, which was facilitated by Dr. Gloria Morrow, a Master Trainer for the California Brief Multicultural Competence Scale Training Program. The event's objectives were to introduce the concept of LLEAD to the Saginaw community as well as hear and begin to record some of the concerns.

On March 31, Cesar Chavez's Birthday, a full day of workshops was held again to introduce the concept of LLEAD to focus groups in the community. These workshops

were held at the American GI Forum, an organization for Latino veterans, 604 Oak St. in Saginaw.

The workshops were facilitated by Fred Sandoval, Executive Operations Manager, and former President of the National Latino Behavioral Health Association.

Three workshops, morning, afternoon, and evening was held to introduce again the concept of LLEAD and were focused on the 3 following groups:

- Creating synergy amongst the various Latino organizations in the region.
- Meeting with community partner agencies and how LLEAD can work with them to address issues that face the Latino community.
- Revisiting the concept of LLEAD as well as identifying key issues facing the Latino community and challenges, barriers, and ways that agencies can better serve the community.

The workshops, had well over 100 people attend throughout the day and was met with great enthusiasm by the community.

The LLEAD Saginaw Branch is still compiling data from the workshops to present to the community and community agencies in a future report that will be key to addressing the issues identified at the March 31 workshops.

LLEAD



Latino Leaders for the Enhancement
of Advocacy & Development

Saginaw Psychological Services, Inc. Continues to Passionately Serve the Great Lakes Bay Region Children



Rebecca Broome

By Rebecca Broome

Saginaw Psychological Services, Inc. is a private, multidisciplinary, outpatient clinic that has served the mental health and substance abuse needs of adults and children in the Great Lakes Bay Region area since 1972.

It is the goal of the agency to improve the quality of life of individuals, families, and communities that are served, and provide a variety of mental health services including case management, psychiatry, psychological testing, individual, marital, group and family outpatient therapy.

Children are just one population this agency passionately serves with a variety of therapists available who specialize in children with significant behavior and emotional issues including ADHD, oppositional defiance, substance use, and autism.

There are also several therapists who are trained in Trauma-Focused Cognitive Behavioral Therapy and Seven Challenges, a treatment designed for adolescents struggling with substance use.

Additional therapists include the therapists trained in Alternatives for Families-Cognitive Behavioral Therapy, a treatment designed for families with chronic family conflicts resulting in involvement with Child Protective Services.

Saginaw Psychological Services maintains the position as an advocate alongside the Cultural and Linguistic Competency Committee and has been involved with the development of the strategic action plan to better serve Saginaw's diverse population.

There are several additional therapists to be trained by the end of this year in a nationally recognized training to increase awareness and provide tools necessary in addressing the cultural and the linguistic needs of this community.

The agency has also hosted a Strategic Families Group, a group focused on helping

families with children aged 10 to fourteen to improve relationships with each other, improve conflict resolution, and develop more effective consequences for problematic behavior.

As a partner with Saginaw Community Mental Health, Saginaw Psychological Services, Inc., serves children with significant and persistent emotional and behavioral issues. Stephanie Hunt, recently hired as Children's Case Management Supervisor, works with children referred from Community Mental Health.

Involved in community outreach, two therapists from Saginaw Psychological Services, recently spoke at the "Unmasking the Faces of Trauma through Resiliency: Caring for Our Children Summit" at Willie E. Thompson Middle School. The summit's topic was how the community could understand and help children with the effects of trauma more effectively.

For more information about the agency or if someone you know is needing help with any kind of substance abuse, mental health or family issue, you can call the main office at 989-799-2100.

You can also check out the website for a list of therapists, more details about the services available, issues of specialty and more at the website: www.sagpsych.com.

Everyday Heroes

Saginaw - We're surrounded by heroes: people who meet, and rise above the challenges of life — and make a difference. In their lives, in the lives of their families, in the life of our community.

For over ten years, the SCCMHA has celebrated Everyday Heroes by honoring consumers and their families for successes, personal growth, and participation and leadership skills as well as community

volunteers and organizations who contribute to the mission and vision of SCCMHA.

This year's annual Everyday Heroes Banquet will be held on Thursday, May 21, 2015, from 6 p.m. to 10 p.m. at Horizons Conference Center.

If you'd like to attend this year's banquet, please visit www.sccmha.org for additional information or contact Ryan Mulder at rmulder@sccmha.org or (989) 797-3501.



Saginaw County Community Mental Health Authority Provides Employment Services

Saginaw County Community Mental Health Authority (SCCMHA) has purchased new vending machines to be used solely for the purpose of providing transitional temporary jobs for individuals currently connected with SCCMHA Supported Employment Services.

A beverage and snack machines are at the Hancock building and Albert & Woods building, respectively. A combination machine (beverage/snack) is located at the Towerline location and Children Family Services Unit (CFSU) on Bay Road.

Also, SCCMHA has created a clerical temporary position to assist with the day-to-day operations at department offices throughout the agency.

Under the general supervision of the Mental Health Supervisor (Supported Employment), this position is a temporary position with the maximum employment

period of no more than 6-months upon hire.

Individuals are still active in seeking complete employment and may leave the transitional employment program before the six month time limit.

To be eligible for this position, the candidate must be a primary consumer of mental health services currently enrolled in the Supported Employment program.

This position will be knowledgeable about and actively support culturally competent recovery-based practices; person-centered planning as a shared decision making process with the individual, who defines his/her life goals, and is assigned to developing a unique path toward those goals; and a trauma-informed culture of safety to aid consumer in the recovery process.

These temporary employment positions are designed to help individuals develop skills in a real life work environment as they

seek permanent competitive waged employment within the Saginaw community.

One hundred percent of all proceeds from the vending machines will be used to fund consumer wages, training, maintenance of machines and additional product supply.



Evidence-Based Practices: What Are They and Why Are They Beneficial?



Sarah Denman

**By Sarah Denman, MA, LPC, CTS
Evidence-Based Practice Coordinator**

Saginaw - In recent decades, the mental health field has experienced a significant transformation in the way treatment and supports are provided for consumers.

The need for consistent results, quality care, and measurable outcomes all have become

a stronger focus of treatment providers and policy makers, thus the emergence of a stronger emphasis on and expectation of the use of Evidence-Based Practices in the provision of clinical services for persons with disabilities.

An evidence-based practice (EBP) is a clinical intervention or program model that has strongly rooted scientific foundation and produces consistent results in assisting consumers to achieve their desired goals and outcomes.

There are 3 components to an EBP:

- It has been studied and has achieved the highest level of scientific evidence and results.
- The person providing the EBP has been trained in the EBP and brings their own clinical expertise to the practice.
- The consumer's choices, values and goals are taken into account when providing the practice.

In addition, EBPs generally have manuals, or specific guidelines that must be followed to support positive results as well as specific training requirements that must be met to adhere to and sustain the EBP treatment practice.

Providing EBPs is our ethical responsibility as service providers to ensure that each consumer

is given the opportunity to experience quality outcomes over time. EBPs are considered the best practice standard of care that should be provided.

Not providing evidence-based supports where they exist, or not following an evidence-based model correctly, could, in fact, be considered to be creating an environment of potential harm for the persons we serve.

Using evidence-based practices in the public sector is also part of good public stewardship.

There are several resources available to access information about EBPs:

- National Registry of Evidence-Based Programs and Practices (nrepp.samhsa.gov)
- Substance Abuse and Mental Health Services Administration (SAMHSA.gov)
- Saginaw County Community Mental Health Authority (various Evidence-Based Practice Guides by population - SCCMHA.org)

For more information on Evidence-Based Practices contact: Sarah Denman, Evidence-Based Practice Coordinator, Saginaw County Community Mental Health Authority at sdenman@sccmha.org or 989-272-0234.

Meet the Empowered to Reach & Teach Families Leadership TEAM



Keva Clark,
Lead Family Involvement Coordinator



Reena Meredith,
Chair



Wanda Dunlap,
Co-Chair



Yalonda Freeman,
Administrative Coordinator



Lorisa Bellinger,
Secretary



Roslynn Williams,
Family Mentor Team Chair



The Empowered to Reach and Teach Families Team Parent Leadership Academy

The Saginaw Max System of Care Parent Group strategically established a leadership academy for parents and guardians who are day to day caregiver's currently raising children, youth or adolescents between the ages of 6 to 17 years old with serious emotional, behavioral or mental health challenges.

ERTFT has two goals:

1. To facilitate and develop parent leadership trainings.
2. To provide input, that promotes a family-driven approach throughout systems.

The System of Care parents are central to family support models and are encouraged to develop to their potential. Research shows that parent support, education, and leadership work together to help them develop the skills to do just that.

One of the trainings offered to families is Strengthening Families Program for parents and youth 10-14. This evidence-based program prevents teen substance abuse and other behavior problems, strengthens family communication, increases academic success in youth, and prevents violence and aggressive behavior at home and at school.

By fostering parents in the role of expert and leader, families benefit from improved self-worth and as better advocates for their needs.

The SOC parent leadership is fostered on a meaningful level when parents are given the opportunity for personal growth, to gain the knowledge and skills to function in leadership roles while assisting them in navigating systems.

SOC has accepted the charge in listening to "parent voice" to help shape the direction of families, programs and communities. Parent leadership is successfully achieved when parents, practitioners, and the community, build effective partnerships based upon mutual respect and shared responsibility.

An additional curriculum taught at the academy is called Resource Parent Trauma Training, which assists foster parents, birth parents and community partners in recognizing the effects of trauma in children.

Many of the curriculums taught at the leadership academy provides parents with the tools they need to become more confident and to bond with other parents.

This confidence and connection to other families can then be supported and encouraged, to move parents towards more meaningful roles in programs by giving them opportunities to become a part of system change.

If you would like to be contacted by the ERTFT Family Involvement Coordinator,

Keva Clark, complete the information below and submit the completed forms at kclark@sccmha.org or by mail at: ATTN: Keva Clark, Saginaw MAX System of Care, 1040 N. Towerline Road, Saginaw, MI 48601. For additional information call 989.797.3544.



Keva Clark
Lead Family Involvement Coordinator

Date: _____

Referral Name: _____

Mailing Address: _____

Phone No: _____ Email Address: _____

No. of children aged 6-17 with emotional/behavioral challenges and multi-system involvement: _____

Please indicate which system(s) your family is involved in (check all that apply):

- Community Mental Health
 Department of Human Services
 Juvenile Justice
 Special Education
 Other (please specify): _____

How do you identify yourself within the membership structure (check all that apply):

- Family: day to day caregiver of child, youth or adolescent between the ages of 6 and 17 years
 Family: day to day caregiver of youth or adolescent 18 years of age and over
 Champion of children's mental health
 Other (please specify): _____

Mexican American Cultural Center is Recipient of Michigan Council for Arts and Cultural Affairs Region 5 Mini-Grant Award



*Mexican American Culture Center Art Class
Participants Create Cultural Art History*

Saginaw - The Mexican American Cultural Center (MAC Center) of Saginaw, Michigan was awarded a mini-grant from the Michigan Council for Arts and Cultural Affairs (MCACA) in January, 2015.

MCACA mini-grants provide funding for locally developed, high-quality arts, and cultural projects, which are special opportunities to address local arts and cultural needs and increase public awareness to arts and culture.

Region 5 is administered by the Saginaw Arts and Enrichment Commission (SAEC) and includes Arenac, Bay, Clare, Gladwin, Gratiot, Isabella, Midland and Saginaw Counties.

With these funds, the MAC Center will provide culturally based art classes for students in grades K-7. The program will run February through August 2015.

Classes will be held weekly at the MAC Center and will include field trips. Participants will explore Saginaw's rich Hispanic/Latino (a) history and culture through singing, dancing, arts and crafts projects, photography, creative writing and more.

Alberto Jimenez, Project Director of the MAC Center's Saginaw Hispanic/Latino (a) Arts and Culture Project, states "the children will be taught the history and meaning behind various Hispanic cultural art practices

and the connection to important art elements like color, balance, texture, sound, rhythm, and movement."

MAC believes in using art education as a vehicle to cultivate young people's awareness and understanding about Hispanic/Latino (a) culture and contributions to our community.

"This is an exciting opportunity for Saginaw youth to build not only an awareness of art and culture, but also skills in communication, teamwork and problem-solving," adds Jimenez.

On September 12, 2015 the MAC Center will host a community-wide fiesta exhibiting the student's artwork that was created through the program.

"We couldn't do the work we are doing in the community without help from our partnerships with organizations like MCACA and SAEC, Saginaw MAX System of Care, Team One Credit Union, Saginaw Chamber of Commerce, the Roethke Home Museum, the Bay City State Recreation Area and Advocates and Leaders for Police and Community Trust (ALPACT).

"Our annual event in September brings everyone together to celebrate the hard work of our students, families, and dedicated volunteers over the past year. Together we will continue to work toward a bright future for our community," says Bobby DeLeon, President of the MAC Center.

The classes will be held every Tuesday, Thursday until August, from 5:30-7:30 PM at the MAC Center, located at 1537 S. Washington Ave., Saginaw. Classes are open to the first 30 students. For more information please contact Alberto Jimenez, Project Director, at (989) 890-7784.

Saginaw MAX At-A-Glance



Saginaw MAX System of Care is a partnership of all of the youth and family-serving agencies that can provide the necessary care to youth with complex emotional and behavioral issues (sometimes referred to as Serious Emotional Disturbance or SED). It was designed to provide a tightly coordinated structure of care and eliminate gaps in service delivery.

227 YOUTH ENROLLED

To date, 227 youth and families have been enrolled into Saginaw MAX System of Care since the initiative began accepting referrals in 2011.

Better School Performance 64%

Sixty four percent of youth and families reported a maintained or improved school performance after 18 months of System of Care support.

22% Decreased Bullying

After twelve months of System of Care support, 22% of youth and families reported a decrease of bullying or threatening behaviors.

Decrease in "Acting Out Behaviors" 22%

Following 18 months of support from System of Care, 22% of youth and families reported a decrease in "acting out behaviors" such as difficulties with relationships and rule breaking as well as displays of irritability and belligerence.

CORE PRINCIPLES

- All planning and service delivery is family-driven and youth-guided.
- Agencies and programs are equally able to serve all people who need service, regardless of racial, ethnic, language or cultural differences.
- Public and private agencies are all working together for the benefit of the youth and his or her family.
- All care is designed for the individual, and evidence and scientific based - meaning its application is rooted in solid research and is based on proven results.

TARGET POPULATIONS

Saginaw MAX is designed to help young people with complex emotional and behavioral challenges and their families. You may be eligible for participation if you or your child:

- is six to 17 years of age
- has emotional or behavioral issues that interfere with or limit the child's role or functioning in the family, school or community activities
- is receiving mental health services and one or more of the following:
 - special education
 - juvenile justice
 - child protective services (voluntary or involuntary)

WHAT IS SED?

Mental illness in youth, or as you may hear it called, Serious Emotional Disturbance, is a diagnosable mental, behavioral or emotional disorder affecting someone under the age of 18. It must:

- exist or have existed within the past year
- exist or have existed long enough to meet the American Psychiatric Association's diagnostic criteria
- have resulted in functional impairment that interferes with or limits the child's role or functioning in family, school or community activities



Maximize Resources

Children with Severe Emotional Disturbance need a lot of support. From families, teachers, social service and healthcare providers ... and often more. We maximize those resources — to make sure those children get all the support they need.

Contact Wardene Talley
989-754-2288



2-1-1 Services Communities

FREQUENTLY ASKED QUESTIONS

Are you aware there is a service in Northeast Michigan to connect you with trained professionals for needed resources? Below are frequently asked questions about the 2-1-1

What is 2-1-1?

2-1-1 is a free, easy-to-remember telephone number that connects people in need with people who can help—24 hours a day, 7 days a week.

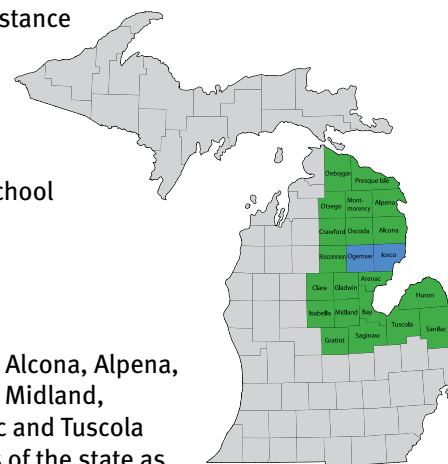
How does 2-1-1 work?

It's simple. When you dial 2-1-1, you will be connected with a trained professional who will assess your situation, identify your needs and refer you to the resources that can help. You can also connect to 2-1-1 using the chat and e-mail options located at www.211nemichigan.org.

What types of services does 2-1-1 refer people to?

Through 2-1-1, community members can gain access to the following types of services:

- **BASIC HUMAN NEEDS:** food banks, clothing, shelters, utility assistance, and much more.
- **PHYSICAL AND MENTAL HEALTH:** medical information lines, crisis intervention services, group counseling, etc.
- **EMPLOYMENT SUPPORT:** unemployment benefits, access to financial assistance programs, job training programs, etc.
- **SUPPORT FOR OLDER AMERICANS AND PERSONS WITH DISABILITIES:** home health care, adult day care, independent living, workforce training, Meals on Wheels, etc.
- **SUPPORT FOR CHILDREN, YOUTH AND FAMILIES:** quality childcare, after school programs, summer camps, mentoring, tutoring, etc.
- **CRISIS CALLS:** suicidal thoughts, domestic violence, etc.



Is 2-1-1 available in my community?

The 2-1-1 Northeast Michigan currently provides 2-1-1 service to residents in Alcona, Alpena, Arenac, Bay, Clare, Cheboygan, Crawford, Gladwin, Gratiot, Huron, Isabella, Midland, Montmorency, Oscoda, Otsego, Presque Isle, Roscommon, Saginaw, Sanilac and Tuscola (green). There are other 2-1-1 organizations that offer services to other parts of the state as well (grey). Over the next two years, 2-1-1 will expand to cover Ogemaw and Iosco Counties (blue).

Who can call 2-1-1?

Anyone looking for information or help with human service problems are encouraged to call. Case managers, church leaders, employers, teachers or other agencies calling on behalf of their clients are also welcome to call. Those who want to offer help in their communities are also encouraged to call 2-1-1. The Information and Referral specialists are sensitive to cultural differences and can provide information in different languages.

What is the difference between 2-1-1, 4-1-1 and 9-1-1?

- 2-1-1 is a free, easy-to-remember phone number connecting callers with health and human services in their community.
- 4-1-1 connects with Directory Assistance for local and long-distance phone numbers, area codes and addresses to businesses. There is a flat fee for this service (depending on your provider).
- 9-1-1 is reserved for police emergencies, ambulance, poison control and fire.



2-1-1 Services Communities

FREQUENTLY ASKED QUESTIONS (CONTINUED)

When I call 2-1-1, who answers the phone?

You will be greeted by a trained professional, endorsed by AIRS as a Certified Information and Referral Specialist (CIRS). These friendly advocates are trained to quickly assess your needs and match them with the most accurate and appropriate referral.

Do I have to give my name?

2-1-1 is a confidential service, so callers can choose to remain anonymous.

What do I do if I have problems calling 2-1-1?

If you have trouble when dialing 2-1-1 from any phone, use the toll free alternate number at 1-888-636-4211 instead. 2-1-1 may not be available in your area yet. You can use this alternate number when calling from outside of your county as well. You can also connect to 2-1-1 using the chat and e-mail options on www.211nemichigan.org.

How can I have my agency or service added to the 2-1-1 database?

Service providers can review our Inclusion Criteria on our website to determine if their services may be eligible for inclusion in the 2-1-1 database. They can also contact 2-1-1 and speak to the resource manager regarding the type of programs that are eligible to be listed in the database.

BENEFITS TO THE USER

- 2-1-1 is a free, confidential service.
- No more wrong numbers or wasted time trying to find the right resource.
- One call connects you with the appropriate resources you need in your community.
- 2-1-1 is efficient, fast and easy to use.
- Your call is answered by a trained professional.
- It is always there for you—24 hours a day, 7 days a week.
- 2-1-1 is an easy way to both GET and GIVE help in your community.

BENEFITS TO THE COMMUNITY

- 2-1-1 strengthens your community by uniting the people in your area who can help with those who need help.
- 2-1-1 is always there for you and touches every single person in the community, whether you need help or are looking to offer help.
- People looking for help have trouble navigating the complicated web of health and human service programs. Likewise, many people want to offer help, but are not sure where to begin.
- 2-1-1 is a useful planning tool. Based on data about the types of calls that are received, local communities can anticipate demand for services to identify and meet the changing needs. Reports are posted on the website.
- 2-1-1 promotes self-reliance and builds stronger communities.
- Database information is collected and updated on a regular basis—ensuring reliable information.

VISIT US AT: www.211nemichigan.org





Maximize Teamwork

A child with Severe Emotional Disturbance gets support from many places. But that support only helps that child if each provider works as part of a well coordinated team. We maximize teamwork — by making sure every step the team takes is focused on the betterment of that child.

Contact Wardene Talley
989-754-2288



Let's Get Involved Community with the Empowered to Reach and Teach Families Team

May 7, 14, 21, 28
Parent Trauma Training
10 a.m. -1:30 p.m.
Family Resource Center
1901 Maple St. Saginaw Michigan

May 14, 2015
Michigan Alliance for Families:
Positive Behavior Supports, Family Resource Center
1901 Maple St. Saginaw Michigan
4:30 p.m. -7 p.m.
Light dinner will be served

May 19
Family Voices on Committees and Councils
5:30 p.m. -7:30 p.m.
Family Resource Center
1901 Maple St. Saginaw Michigan

May 26
ERTFT Board Meeting
5:30 p.m. -7:30 p.m.
Saginaw YMCA
1915 Fordney St, Saginaw, Michigan

June 23
ERTFT Board Meeting
5:30 p.m. -7:30 p.m.
Saginaw YMCA
1915 Fordney St, Saginaw, Michigan

July 21
ERTFT Board Meeting
5:30 p.m. -7:30 p.m.
Saginaw YMCA
1915 Fordney St, Saginaw, Michigan

August 3rd –Sept 14th (Every Monday, 7 week class)
Strengthening Families Program
Family Resource Center
1901 Maple St. Saginaw Michigan
5:30 p.m. -7:30 p.m.

August 6, 13, 20, 27
Team Up For Your Child Parent Workshops
5:30 p.m.-7:30 p.m.
Family Resource Center
1901 Maple St. Saginaw Michigan

August 13, 20
Resource Parent Trauma Training
10 a.m. -3 p.m.
Family Resource Center
1901 Maple St., Saginaw Michigan

August 25
ERTFT Board Meeting
5:30 p.m. -7:30 p.m.
Saginaw YMCA
1915 Fordney St, Saginaw, Michigan

September 16 and 17
2015 Family Leadership Development Training
5:30 p.m. -7:30 p.m.
Family Resource Center
1901 Maple St., Saginaw Michigan

September 22
ERTFT Board Meeting
5:30 p.m. -7:30 p.m.
Saginaw YMCA
1915 Fordney St, Saginaw, Michigan

October 1, 8, 15, 22
Team Up For Your Child Parent Workshops
5:30 p.m. -7:30 p.m.
Family Resource Center
1901 Maple St., Saginaw Michigan

October 5-November 16 (Every Monday, 7 week class)
Strengthening Families Program
5:30 p.m. -7:30 p.m.
Family Resource Center
1901 Maple St. Saginaw Michigan

October 20
ERTFT Board Meeting
5:30 p.m.-7:30 p.m.
Saginaw YMCA
1915 Fordney St, Saginaw, Michigan

November 24
ERTFT Board Meeting
5:30 p.m. -7:30 pm
Saginaw YMCA
1915 Fordney St, Saginaw, Michigan

December - TBD
ERTFT Christmas Party

**If you are interested in attending the above scheduled events, contact Keva Clark, M.Ed,
Family Involvement Coordinator, 989.797.3534, kclark@sccmha.org**

Supporting a Yes Vote for Proposal 1 on May 5, 2015

Creating a Healthier Saginaw County



Leola Wilson



Joyce Seals



Rosa Morales



Pamela Pugh



Renee Johnston

What Does Proposal 1 Mean to You?

Proposal 1 isn't our idea of a perfect solution. But it was constructed to make sure taxes paid at the pump would be dedicated to repairing and maintaining our roads and bridges, while ensuring that our schools and municipalities do not suffer as a result. Some people are saying we should cut funding for schools or the environment or public safety and use that for roads. We disagree. It's time for Michigan to invest in safer highways and our roads need to be safe, for our children and grandchildren.

Benefit to Saginaw County

- Proposal 1 would result in an annual \$2,955,776 increase in funding for our roads (66% annual increase)
- Constitutional Revenue Sharing would increase by \$457,568 (12% annual increase)

Statewide Net Impact of Changes FY 2017-18 (fully implemented):

- MI Transportation Fund: \$1.25 Billion (66% increase to allocation for cities and villages)
- Comprehensive Transportation Fund: \$106 Million
- School Aid Fund: \$394 Million
- Constitutional Revenue Sharing: \$100 Million
- General Fund: \$36 Million
- Proposal 1 restores a reduction in the earned income tax credit to offset the burden of additional sales taxes on families at or near the poverty level.

Transportation

- Many of our residents depend on public transit to get to work, school, and places of worship.
- Voting yes on Prop 1 on May 5th would also bring additional funding back to Saginaw to support and expand our public transit system.

Schools

- Proposal 1 would generate \$394 Million per year in much-needed additional dollars for our schools.
- Proposal 1 replaces the money devoted to schools and prohibits the legislature from diverting school aid funds to four-year universities.
- Proposal 1 would also provide additional dollars for schools through the increase in the sales tax, as most of sales tax revenues are devoted to public education.

VOTE on MAY 5TH

Endorsed by the Saginaw Health and Social Equity Advisory Group

Supporting a Yes Vote for Proposal 1 on May 5, 2015 Creating a Healthier Saginaw County

Businesses and Local Municipalities

- Proposal 1 removes an unfair, burdensome double tax on Michigan's small businesses and makes Michigan's business environment more competitive.
- Proposal 1 would create thousands of jobs and generate millions of dollars in business investment. The repeal of the state's Personal Property Tax would create 15,000 jobs and \$450 million in additional investment for Michigan.

Supporting a Yes Vote for Proposal 1 on May 5, 2015 Creating a Healthier Saginaw County

- A part of the sales tax on fuel also goes to revenue sharing, to help your local municipality pay for police, fire and other services. Proposal 1 would replace those revenues through the sales tax increase

MAY 5TH ABSENTEE BALLOT INFORMATION

Applications to vote by absentee ballots are available through your local clerk. To find your local clerk, go to <https://vote.michigan.gov/mvic/clerksearch.aspx>.

When you request an absentee ballot, you must give one of six reasons for why you're not able to vote in person on election day at your regular voting precinct: You are age 60 years old or older, unable to vote without assistance at the polls, expecting to be out of town on Election Day, in jail awaiting arraignment or trial, unable to attend the polls because of religious reasons or appointed to work as an election inspector in a precinct outside of your precinct of residence. Requests for an absentee ballot that are sent by mail must be received by 2 p.m. on the Saturday before the election.

Once you receive your absentee ballot, you have until 8 p.m. on Election Day to complete and return the ballot to your clerk's office. Some clerks set up voting booths in their offices on the days before an election so people can get, fill out and turn in their ballots on the same day.

Application forms for an absentee ballot can be printed from the Michigan Secretary of State's office at www.michigan.gov/documents/AbsentVoterBallot_105377_7.pdf

VOTE on MAY 5TH

Endorsed by the Saginaw Health and Social Equity Advisory Group

SCCMHA 2015
Live Well
Wellness
Fair



Tuesday, May 5, 2015
10:00 am to 2:00 pm

SCCMHA
500 Hancock
Lower level room 001
Saginaw, MI

For more information, contact:

Mary Baukus, Wellness Coordinator

E-mail: mbaukus@sccmha.org

Phone: (989) 272-7228

- ♦ **Many vendors!**
- ♦ **Community resources!**
- ♦ **Prize drawings!**
- ♦ **Free stuff!**
- ♦ **Helpful information!**
- ♦ **Health screenings!**
- ♦ **All are welcome!**
- ♦ **Free to attend!**

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SAGINAW MAX SPRING COMMUNITY COOKOUT

Event will continue rain or shine!



Friday

May 8th, 2015
4pm - 7pm

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Family Resource Center**

1901 Maple Street,
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Join us in celebrating National
Children's Mental Health Awareness
Day and the return of spring!

**Hotdogs, Bratwursts & Sides
Burritos & Tamales**

Family Activities

**FREE to Attend & Open
to the Community!**

For more information
contact Melissa Lee at
(989) 272-7209 or
mlee@sccmha.org



Health and Wellness Community Resource Fair is Coming!

Saginaw - The Coordinated School Health (CSH) Team of Saginaw High School along with the Parent Outreach Specialists of the Saginaw Public School District Centric Program will present a Health and Wellness Community Resource Fair on Thursday, May 14, from 9 a.m. to 4 p.m. at Saginaw High School.

The event will take place in the school's gymnasium, and is part of the Safe and Supportive School/Think. Respect Program and the Centric Program initiatives.

The event is for elementary through high school students of the Saginaw Public School District. Attendance is open to district schools, school staff, parents and community members.

The objectives of the event include:

- Increase health awareness and disease prevention for students, staff, parents and the community by providing educational information, and related activities
- Increase and promote exercise
- Increase awareness of local health services and resources
- Motivate participants to make positive health behavior change
- Teach healthy self-care practices
- Share college and career readiness information; Healthcare fields and much more
- Increase awareness of SPSD Safe and Supportive Schools Program and Centric Program

Your agency or business is invited to showcase its services at this event by providing educational information, screenings and health awareness activities, and resources helpful to parents and students.

Vendor details:

Booth size: 1 6ft table and 2 chairs per vendor (table coverings are not provided)

Booth setup: Thursday, May 14, 2015, 7:30 a.m.; contact for May 13 setup times

Vendor fee: FREE

Contact: Tiffany L. Pruitt, tpruitt@spsd.net or 989-399-6039

A limited number of free booth spaces are available, with confirmation of participation requested by Friday, May 1, 2015.



SAGINAW HIGH SCHOOL



Health Wellness Community Resources Fair

COME ENJOY...
Healthy Food
Health Care Agencies
Human Services
Agencies
Physical Fitness (BBR)
Community Resources
Student Presentations
Parent/Family
Resources
Job/Career Planning
College Resources
Live Entertainment
And much more.....
Interested Vendors
Sign Up By May
4, 2015

(No Registration Fee and Free Table)

Tiffany L. Pruitt
(989)-399-6039
tpruitt@spsd.net

or
Jeannine Belton
(989) 399-5675
jabelton2@hotmail.com

*Take Charge
of*

*Your Health and Get
Connected!*

•Healthy Living Tips for
Mind and Body
Parent & Community Resources

•Nutritional Information

• Physical Fitness

•College & Career Readiness

•Safety

•Financial

•Raffles

& Much More!

Thursday, May 14, 2015

Saginaw High School Gymnasium

(enter through gymnasium door)

9:00 A.M. – 4:00 p.m.

think. respect.

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Supportive Schools

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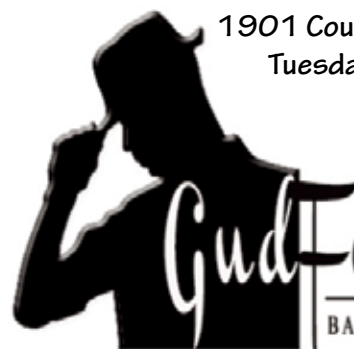


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for more information.

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Pitts Joins J.P. Morgan Private Bank

Calif. – DeRonnie Pitts recently joined J.P. Morgan Private Bank as a Vice President.

He joins J. P. Morgan Private Bank from Morgan Stanley Wealth Management, where he was a financial advisor. Prior to his role at Morgan Stanley, Pitts held positions at Stanford University in development, admission, and finance.

In his role as Private Banker, he will be responsible for delivering the firm's wealth management strategies to individuals and their families across the Bay Area, and helping them think through

the challenges of preserving and growing wealth over multiple generations.

Pitts and his team of specialists also advise clients on all aspects of their wealth including estate planning, self-directed and discretionary investing, liquidity management and banking.

He received an AB in Communication from Stanford and was a member of the varsity football team that played in the 2000 Rose Bowl Game. After a short career in professional football, he returned to Stanford and completed his MBA in 2007.



DeRonnie Pitts

"There are no secrets to success. It is the result of preparation, hard work, and learning from failure." ~Colin Powell

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Leonwa1@yahoo.com

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Saginaw ISD Head Start/Early
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Praise Connections & Life

What You Need to Know About Faith

**By Bishop Alfred Owens
Greater Mt. Calvary Holy Church**

Wash. - Scripture calls Christians to raise our children in a manner consistent with Godly principles. "Train up a child in the way he should go," Proverbs tells us, "And when he is old he will not depart from it."

This is wise advice for parents, and it extends to all the ways we can support parents in their role, including and especially the education of our children—body, mind, and soul.

God has endowed each child with dignity, value, and unique gifts, which require an education that addresses the whole child. As evangelicals, we, of course, focus first on a child's spiritual development, but I wonder if we've fully considered our role in supporting the development of a child's mind and body.

In order for the next generation to share their gifts with the world—as leaders in ministry, commerce, art and every sphere of life—they must have a solid education in which to grow their talents, to empower their potential.

For this reason I'm standing shoulder to shoulder with other leaders in the Faith and Education Coalition, such as Rev. Samuel

Rodriguez of the NHCLC and Elder Bernice A. King of The King Center, to advocate for educational equity.

The intersection of faith and education offers a powerful nexus of support for our students. They need to see that their parents, pastors and Sunday school teachers value education and the hard work required to learn.

They need to see that we, along with their teachers, are setting expectations high, calling them to maximize the gifts and talents God has placed in each them. Our students need to hear that it is a matter of Christian stewardship to develop their intellect, to learn about the world around them and discover their unique role.

The article can be read in its entirety at www.charismanews.com

Archbishop Alfred A. Owens, is Senior Bishop of the Mt. Calvary Holy Church of America. He also serves as the Dean of the Joint College of African-American Pentecostal Bishops and as an Adjunct Professor at Howard University School of Divinity. Bishop Owens, a product of the D.C. public school system, served as a teacher in D.C. schools for 10 years.

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Undocumented Immigrant Youth on Constant “High Alert” -- Study



Viji Sundaram

Photo Credit: New American Media

San Francisco - Fear followed Alberto Velazquez every time he left the apartment he shared with his mother and siblings in Pomona, Calif.

If he saw a cop walking on the sidewalk, he said, his first instinct was to turn around and walk the other way.

“I was becoming irrational and paranoid,” said Velazquez, who is now 24 and enjoying the security of being a DACA (Deferred Action for Childhood Arrivals) beneficiary. “I kept thinking if something goes wrong, the cops would be at my door.”

Velazquez’s mental state is typical of undocumented immigrant youth, according to a study released April 21 on the mental health of undocumented and uninsured youth called “Pol(ICE) in My Head,” a project of UCLA’s Dream Resource Center (DRC).

Researchers, many of them undocumented youth themselves, interviewed 550 people across California over a period of 10 weeks to find out how much access to health care they had, especially to mental health services.

“The mental health needs of undocumented [people] are rarely addressed,” observed Josue Chavarin, a program associate with The California Endowment, which funded the research.

Research coordinator Alma Leyva of the DRC said that the large number of immigrants

deported since Obama became president, combined with “excessive surveillance” by law enforcement officials and barriers undocumented youth face in areas such as health care, education and social services, are factors contributing to the high level of stress many of them experience.

“Fear of being deported prevents them from leaving their homes,” Leyva said at the April 21 webinar when the findings were released. “They are self-monitoring and on high alert all the time.”

Half of those surveyed said that when they fall sick, they delay seeking treatment. Leyva pointed out that her team found that the primary reason undocumented immigrants were reluctant to seek health care is “because that might require them to reveal their undocumented status.”

For Asian and Pacific Islander (API) immigrants, being undocumented and not being able to live up to the “model minority” status APIs largely enjoy, pushes some over the edge, according to researcher Trina Lei Pasumbal, a member of the non-profit group ASPIRE (Asian Students Promoting Immigrant Rights through Education).

According to the American Psychological Association, using the year 2007 as case study, suicide was the second leading cause of death for Asian-Americans aged 15 to 34.

The stigma of mental illness forces many to keep their problems under wraps, Pasumbal lamented.

Even for those who want to seek help, language barriers can stand in their way. This is especially true among older immigrants, who are reluctant to ask for help from health care providers simply because they have no vocabulary to describe how they feel. Pasumbal said there's no direct translation for the word “depression” in the Cambodian Khmer language. Instead, people may say something like “the

water in my heart has fallen.”

Researchers included participants in the DRC’s Circle Project, a three-year-old support group where undocumented youth can meet to share their concerns and fears. There are currently 30 youth who attend the biweekly meetings. Velazquez is one of them.

“It’s like group therapy,” he said.

While in high school, Velazquez said he got stressed wondering if he would be ever able to go to college. Doing part time jobs that “paid me under the table,” and with some help from his brother and mother, who manages an apartment complex, he was able to put himself through Cal Poly in Pomona, graduating with a bachelor’s degree in biology. He is now headed to Texas to work for Teach America.

“Going to Circle Project meetings has greatly relieved my stress,” he said.

Recently, the Tri City Wellness Center has begun providing basic mental health services to Circle Project members, Velazquez said.

But because mental health issues are so prevalent among undocumented youth, he believes they should have access to comprehensive health care.

“I think Lara’s bill would be a good solution,” said Velazquez, referring to the legislation sponsored by Sen. Ricardo Lara, D-Bell Gardens, called the Health for All bill.

The bill, which is currently making its way through the state legislature, would provide access to health care for all Californians, regardless of their immigration status.

Source: New American Media





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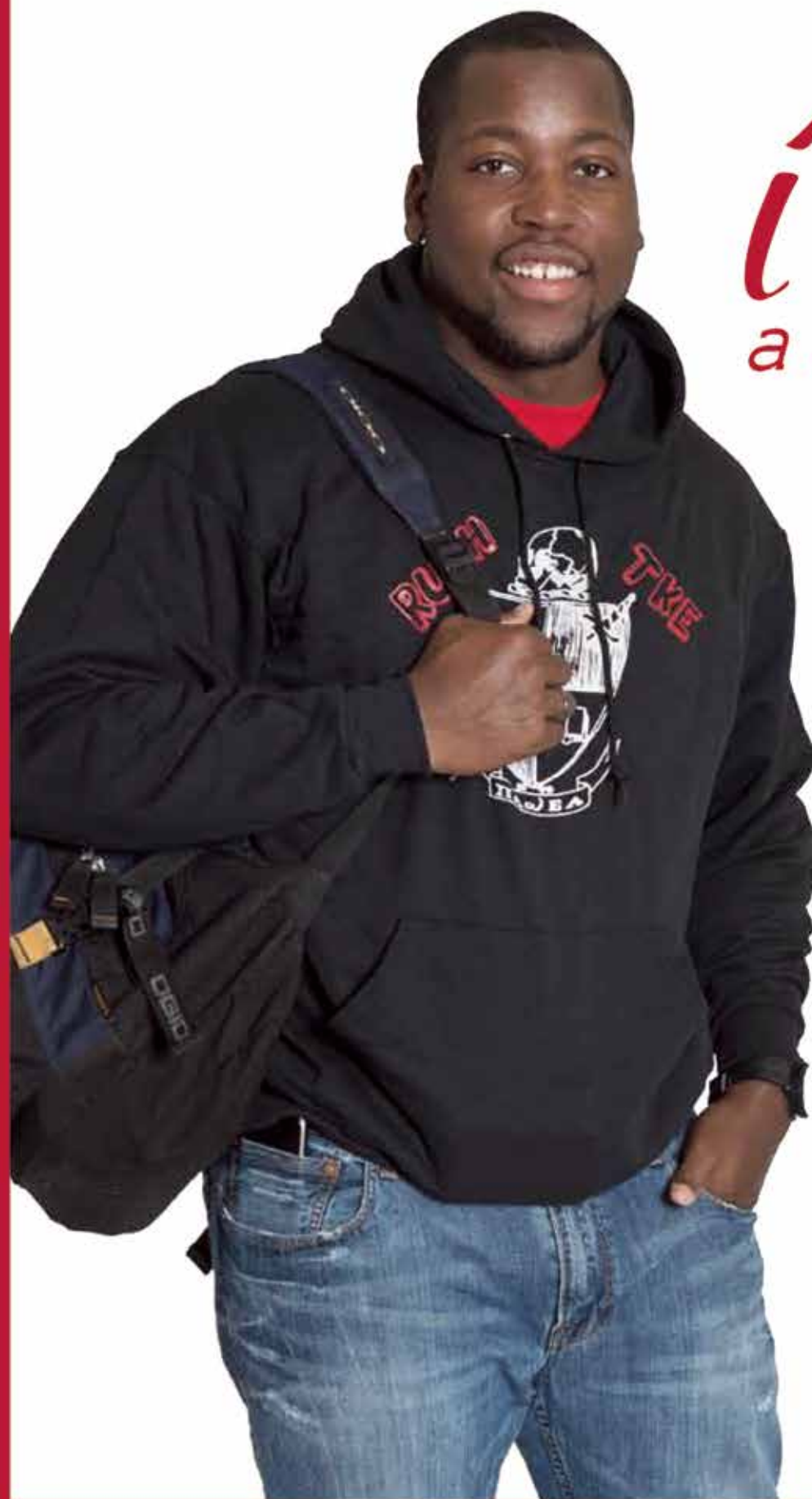
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i am a role model

Tackling life is a matter of problem solving — that's Terrance Moore's way of thinking. And what better way to improve the world than to help others as they leap life's hurdles? The junior criminal justice major likes to be there when someone can use a helping hand: Terrance serves as a resident assistant, helping his students overcome the roadblocks of college life, and as vice president of the Cardinal Military Association, supporting veterans through any difficulties they might face.

A firm believer in support systems, Terrence is also a member of the National Leadership and Success Society, an organization that unites students who want to set and achieve goals. And as part of the Greek fraternity Tau Kappa Epsilon, the Criminal Justice Society, and the co-ed service fraternity Alpha Sigma Pi, he's learned that the best way to lead is by example. "If I don't help," he said, "who will?"

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