



mindspring
MENTAL HEALTH ALLIANCE

March 2023



Take your time reading the newsletter.

It's not meant to be read quickly.

If you are reading a hard copy of this newsletter – to access the links for more information, go to the electronic copy of the newsletter at

[Newsletter Sign Up - Mindspring Mental Health Alliance \(mindspringhealth.org\)](https://www.mindspringhealth.org) – please convert to an email newsletter

Mindspring Mental Health Alliance

511 E. 6th St., Suite B, DM 50309

(in DM Historic East Village)

515-850-1467

<https://www.Mindspringhealth.org>

Community Impact Officer–Michele Keenan

mkeen@mindspringhealth.org

Director of Special Initiatives– Kristi Kerner

kkerner@mindspringhealth.org

Development Director – Francis Boggus

Program Coordinator – Zoe Bardin 515-850-1467

Mindspring's Mission Statement

"Empowering community members through mental health education, advocacy and support."

Community Education Classes for anyone and everyone

Over 60 community classes are **free** and information can be found at our website [Upcoming Webinars & Events - Mindspring \(mindspringhealth.org\)](https://www.mindspringhealth.org)

"Workplace Mental Health Webinars"

Call 515-850-1467 if you have questions (a cost involved)

mkeen@mindspringhealth.com

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Effective 4-1-23

Mindspring will send out a monthly newsletter by email only. Newsletters sent by mail will be sent quarterly.

If you do not have a computer to receive the email newsletter, please notify us for placement on the mail list.

Please send the requested information to tbomhoff@mchsi.com or text to 515-344-2369

Thanks!

\$150 WEBINAR SPONSORSHIP

Sponsor acknowledgment with family name or logo during webinar (750-1000 attendees per live event)

Sponsor acknowledgment in all event promotions (approximately 150,000 recipients)

All contributions are tax-deductible

[INFO@MINDSPRINGHEALTH.ORG](mailto:info@mindspringhealth.org)

\$250 PREMIUM WEBINAR SPONSORSHIP

Sponsor acknowledgment with family name or logo during webinar (750-1000 attendees per live event)

Sponsor acknowledgment in all event promotions (approximately 150,000 recipients)

Sponsor acknowledgment in webinar follow-up communication with a message from the sponsor, including website links & promotional codes (2,000+ recipients)

All contributions are tax-deductible

www.weareherewithyou.com and www.mindspringhealth.org

You Are Not Alone. The Illness is Not Your Fault. Never Give Up Hope.



Inpatient Psychiatric Bed Program - November 2022

Name	County	Licensed Beds	Staffed Adult Beds	Staffed Older Adult Beds	Staffed Child Beds	Total Staffed Beds
Allen Hospital	Black Hawk	24	21	0	0	21
Broadlawns Medical Center	Polk	44	44	0	0	44
Buena Vista Regional Medical Center	Buena Vista	10	0	10	0	10
CHI Health Mercy Hospital*	Pottawattamie	38	21	0	16	37
Clive Behavioral Health	Polk	100	20	0	14	34
EagleView	Scott	72	36	0	0	36
Finley Hospital	Dubuque	9	0	9	0	9
Genesis Medical Center - Davenport	Scott	39	28	0	8	36
Great River Medical Center*	Des Moines	8	8	0	0	8
Iowa Lutheran Hospital	Polk	68	24	12	12	48
Jennie Edmundson Hospital Behavioral Health	Pottawattamie	29	24	0	0	24
Mary Grosley Medical Center	Story	19	18	0	0	18
Mercy Medical Center - Cedar Rapids	Linn	20	10	0	0	10
MercyOne Medical Center - Cedar Falls	Black Hawk	15	0	15	0	15
MercyOne Medical Center - Clinton	Clinton	14	7	0	0	7
MercyOne Medical Center - Dubuque	Dubuque	20	16	0	4	20
MercyOne Medical Center - North Iowa	Cerro Gordo	45	24	0	10	34
MercyOne Medical Center - Sioux City	Woodbury	20	7	3	0	10
MercyOne Medical Center - Waterloo	Black Hawk	20	16	0	4	20
Ottumwa Regional Health Center	Wapello	14	0	14	0	14
Spencer Municipal Hospital	Clay	15	10	0	0	10
St. Anthony Regional Hospital and Nursing Home	Carroll	11	11	0	0	11
St. Luke's Methodist Hospital	Linn	72	13	9	14	36
St. Luke's Regional Medical Center	Woodbury	14	14	0	0	14
University of Iowa Hospitals and Clinics	Johanson	88	58	0	15	73
Community Hospital Total		828	430	72	92	599
Cherokee Mental Health Institute	Cherokee	36	24	0	12	36
Independence Mental Health Institute	Buchanan	56	40	0	16	56
Mental Health Institute Total		92	64	0	28	92
* Last updated 6.28.21						
GRAND TOTAL		920	494	72	125	691

4.2% of Iowa's population has **severe** mental illness or approximately **134,000 people**

Iowa 2020 Census total population is 3,190,369 X .042 = 133,996

The large chart above reflects 'staffed' beds. There is a greater number of 'licensed' beds. Finding qualified staff is the key to opening more inpatient beds.

The VA hospital in Des Moines has 10 inpatient psychiatric beds.
The VA hospital in Iowa City has 15 inpatient psychiatric beds.

Psych Acute Care Beds in Des Moines

Location	Adult	Children & Youth	Geriatric	Total
Mercy	18	16		34
Iowa Lutheran	68	16	12	68
Broadlawns	44			44
VA Hospital	10			10
Clive Behavioral	67	33		100
Total	179	65	12	256

See [Psychiatric Bed Supply Need Per Capita](#).

— 40 to 60 beds per 100,000 people — let's use 50 beds/100,000
3.19 million Iowa population divided by 100,000 = 31.9

31.9 X 50 beds = 1595 acute care beds are needed

We have 691 – a shortage of 904 beds.

As per the above chart, - between June 2021 and November 2022, the number of Iowa acute care beds **have dropped** from 955 licensed beds to 920 and from 734 staffed beds down to 691.

References

McBain, R.K., et al. (2022, January). [Adult psychiatric bed capacity, need, and shortage estimates in California—2021](#). RAND Corporation.

Mundt, A.P. et al. (2022, January). [Minimum and optimal numbers of psychiatric beds: Expert consensus using a Delphia process](#). *Molecular Psychiatry*.

Office of Research and Public Affairs. (2016). [Psychiatric bed supply need per capita](#). Treatment Advocacy Center.

Torrey, E. F., et al. (2008). [The shortage of public hospital beds for mentally ill persons](#). Treatment Advocacy Center.

Healthcare Exchange Open Enrollment

Iowans may preview plan options at [healthcare.gov](#). Open enrollment will start November 2023.

There is a free program to help you figure out insurance options. New rules and rates for ACA marketplace health insurance.

Most can get a plan for \$10 or less/month Even high earners now qualify for financial assistance.

Contact: [IOWANAVIGATOR.COM](#)

877-474-NAVI

16.3 million people signed up during the 2023 ACA open enrollment – a 13% increase over the previous year.

[www.weareherewithyou.com](#) and [www.mindspringhealth.org](#)
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Covid 19 - By the Numbers– As of date shown -2020 - 2023

	2020 April 20	Dec 2020	2021 April 20	Dec 20 2021	2022 April	2022 November	December 2022	January 2023	February 2023
# of Iowa cases reported	3159	274,982	389,172	601,531	856,086	1,002,939	1,016,767	1,031,182	?
# of Iowa deaths Covid 19	79	3745	5893	7680	9475	10,276	10,343	10,508	10,794
# of suicides	194	551	132	525	146	516	556 waiting for final #		
# of opioid deaths		208	70	250	73	202	211		
# of Covid cases reported nationally	986,596	19,278,006	45,391,030	50,773,620	80,518,989	98,562,304	100,160,501	101,345,042	102,998,014
# of Covid deaths nationally	56,164	336,683	735,703	806,273	987,343	1,087,089	1,094,727	1,106,216	1,113,254

Iowans can now find COVID-19 reporting data on the IDPH website at: idph.iowa.gov/Emerging-Health-Issues/Novel-Coronavirus/COVID-19-Reporting. Data on the page will be updated weekly on Wed.

The Clarinda Mental Health Institute and the Mt. Pleasant Mental Health Institute were closed by the Governor in 2015.

The Independence PMIC for children was closed in 2016 by the Governor.

The entire Clarinda MHI campus is now controlled by the Dept. of Corrections – they have a 795 bed prison and a 147 bed minimum security unit.

The entire Mt. Pleasant MHI campus is now controlled by the Dept. of Corrections – they have a 914 bed prison at the Mt. Pleasant MHI.

The Glenwood Resource Center for ID/DD persons has been scheduled to close July 2024.

In the nation, Iowa is:

- **51st for # of mental health institute beds (2023)**
- **45th for mental health workforce availability (2023)**
- **47th for # of psychiatrists**
- **46th for # of psychologists**

Recovery Community Center

Anawim and the Beacon of Life have combined their efforts to receive funding from the Iowa Dept. of Public Health to become one of four Recovery Community Centers in Iowa.

Recovery Community Centers (IDPH \$) – 4 funded

1 – Crush of Iowa Center in Linn County - Cedar Rapids

3 - **Full Circle** – handling Dsm (Anawim and Beacon of Life), Council Bluffs, Sioux City

Community Mental Health Centers (CMHC) – provide mental health services for individuals of all ages regardless of funding.

<https://yourlifeiowa.org/mental-health/cmhc>

Federally Qualified Health Centers (FQHC) - a reimbursement designation from HHS - community-based organizations that provide comprehensive primary care and preventive care, including health, oral, and mental health/substance abuse services to persons of all ages, regardless of their ability to pay or health insurance status.

<https://carelistings.com/find/federally-qualified-health-centers/iowa>

Crisis residential beds are residential settings that de-escalate and stabilize an individual experiencing a mental health crisis. Stays can be for 3-5 days.

Residential beds which have stays longer than 3 to 5 days are called **transitional** beds

Other types of beds available

8 residential care facilities (RCF) for persons w/MI – 135 beds
3 intermediate care facilities (ICF) for persons w/MI – 109 beds

YSS Launches AFFIRM Therapy

YSS introduced AFFIRM, a new affirmative therapy group for LGBTQ+ youth. The group is open to teenagers 14-18 who identify as LGBTQ+ and/or are questioning their gender or sexual orientation. Participants meet virtually each week to learn how to manage stress, enhance coping skills, make healthy choices and build a community of support.

[Read more](#)



What is Momentum? Momentum is a creative, supported art studio and gallery where people learn and practice positive coping tools and create art while building their own

resiliency within a safe and uplifting community.

What does it do? It helps people cope, create and rebuild in positive, healthy ways

Who does it benefit? Anyone who identifies as having a mental health diagnosis or disability in Central Iowa can attend for free 515-883-1776

www.teamcsa.org



Scanlan School for Mental Health

The Scanlan Center for School Mental Health is Iowa's hub for school-based mental health research, training, professional development, and clinical services. Their work supports the social, emotional, behavioral, and mental wellbeing of students and educators across the state. The clinic collaborates with Iowa school districts, Area Education Agencies (AEAs), and Iowa mental health systems. What They Do:

1. Providing post-crisis debriefing and support.
2. Offering short-term individual and group counseling.
3. Training future school mental health professionals.
4. How to Refer: Students
 - o School administrators, AEAs, and school mental health providers can refer students by emailing the clinic.
 - o Educators/school staff can self-refer by emailing the clinic.

Contact the clinic at scsmhclinic@uiowa.edu or learn more by visiting their website scsmh.education.uiowa.edu.

Community Mental Health Centers

Polk Co.	Child Guidance Center – 808 5 th St. - DM – 515-244-2267
	Eyerly Ball Community MH Center, 1301 Center St., - DM - 515-241-0982
	Eyerly Ball Community MH Center 945 19 th St.- DM - 515-241-0982
	Broadlawns Medical Center- 1801 Hickman Rd.- DM – 515-282-6770
	<i>Broadlawns - New Connections Co-Occurring Outpatient Services – Medical Plaza, 2nd Floor, 1761 Hickman Road - DM 515-282-6610</i>
Dallas Co	<i>Southwest Iowa Mental Health Center</i> 410 12th Street Perry, IA 50220 P515) 642-1023 F515) 334-4076 <i>Adel area patients should call the Perry number to be scheduled.</i>
Madison Co	Crossroads Behavioral Health Services 102 West Summit Street, Winterset – 515-462-3105

Primary Health Care and Behavioral Health

Engebretsen Clinic, 2353 SE 14 th St. – DM - 515-248-1400
The Outreach Project, 1200 University, Suite 105 –515-248-1500
East Side Center, 3509 East 29 th St. –DM – 515- 248-1600
Primary Health Care Pharmacy, 1200 University Avenue, Suite 103 – DM – 515-262-0854

County Community Mental Health Services

Polk Co.	Polk Co. Mental Health and Disabilities Dept. 515-286-3570 https://www.polkcountyia.gov/behavioral-health-disability-services/
Warren Co.	Central Iowa Community Services https://www.cicsmhds.org 1007 S. Jefferson Way, Indianola, IA 50125 515-961-1068 email: mentalhealth@warrencountyia.org https://warrencountyia.org/mentalhealth
Dallas Co.	Heart of Iowa Community Services 25747 N Avenue, Suite D, Adel, IA 50003 515-993-5872 Toll free: 877-286-3227 E-mail: dccs@dallascountyia.gov Website: hicsiowa.org
Madison Co.	Central Iowa Community Services https://www.cicsmhds.org Madison County Service Coordinator 112 N. John Wayne Drive, Winterset, Iowa 50273 515-493-1453 https://madisoncounty.iowa.gov/offices/community-services/



<http://iowahousingsearch.org/>

A free resource to help you find a rental home/apartment that fits your needs and budget

New Iowa Peer Workforce Collaborative website

<https://iowapeersupport.sites.uiowa.edu/>

Substance Abuse Resources

<https://recovery-iowa.org/>

I've learned that people forget what you said, people will forget what you did, but people will never forget how you made them feel.

Maya Angelou

Crisis Phone numbers and Text numbers

National Text Crisis Line

<http://www.crisistextline.org/>

9-8-8 is the National Suicide Prevention Lifeline phone #

You can also chat with the 988 Suicide and Crisis Lifeline at **988lifeline.org**.

For every person that dies by suicide, more than 250 think seriously about it but do not die. It is possible to prevent suicide and save lives by connecting at-risk individuals to support in their area. If you are thinking of hurting yourself, tell someone who can help. If you cannot talk to your parents, your spouse, a sibling -find someone else: another relative, a friend, or someone at a health clinic.

National Human Trafficking Hotline

The National Human Trafficking Hotline is a national anti-trafficking hotline serving victims and survivors of human trafficking and the anti-trafficking community. The toll-free hotline is available to answer calls from anywhere in the country, 24 hours a day, 7 days a week, every day of the year at **1-888-373-7888**.

Alcohol, Drugs, Gambling and Suicide Prevention Lifeline –

Available 24/7. **Your Life Iowa** <https://yourlifeiowa.org>

Call 855-581-8111 Text 855-895-8398.

It is also a source for Mental Health information and resources. All topics will address needs for both children and adults.

Your Life Iowa (YLI) is an integrated project funded and managed by the Iowa Department of Public Health that offers free 24/7 help and resources on alcohol, drugs, gambling, mental health, and suicide. Local YLI ambassador, Tony Leo, offers organizations a 30-minute tutorial of the tools that YLI offers, such as their vast services and professional development offerings. If you are interested in this free tutorial contact Tony at leo@bbbsia.org or 515-288-9025

The Trevor Project (for LGBTQ+ Youth) - 1-866-488-7386

The Gay, Lesbian, Bisexual and Transgender National Hotline: 1-888-843-4564

Trans Lifeline: 1-877-565-8860

LGBT National Youth Talkline: (800) 246-7743

Crisis Text Line: Text HOME to 741741 to be connected to crisis counseling

Online Mental Health Crisis Chat: iowacrisischat.org

Life Long Links: 866-468-7887

UCS Healthcare Offers Free Transgender Support Group - Open to all transgender, queer, non-binary, gender non-confirming individuals. Whether you're just beginning your journey or somewhere beyond, please join! Allies in direct support of transgender members welcome. Meetings held weekly at UCS Healthcare. Guest speakers on special topics once per month. For transgenderdesmoines@gmail.com

Iowa WARM Line – 844-775-WARM (9276) - Provides confidential access to peer counseling and can connect people with services

Veteran Suicide Prevention Lifeline

1-800-273-8255 – press 1 Text to: 838255

Veteran Toolkit to Prevent Suicide can be downloaded

from: <https://www.va.gov/nace/docs/myVAoutreachToolkitPreventingVeteranSuicidesEveryonesBusiness.pdf>

In the middle of every difficulty lies opportunity...

Albert Einstein

www.weareherewithyou.com and www.mindspringhealth.org

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Visit everystep.org/program_guide for a current list of programs and services



Community Providers

Mind and Spirit Counseling Center

www.mindspiritcenter.org

8553 Urbandale Avenue, Urbandale 515-274-4006

Accepts all insurances, sliding scale for fees.

On-site psychiatrist, PA and counseling staff

Free Mental Health Counseling in Spanish and English

at the Library at Grace United Methodist Church

Wednesdays – 2 to 6 PM

For an Appointment: Por favor contacte a Alicia Krpan, at 515- 274-4006 ext. 143 – or –

Contact Nathan Delange, LISW., at 515-577-0190

Optimae Behavioral Health– and - Home Health Services

515-243-3525 – 600 E. Court Avenue 515-277-0134

House of Mercy (Co-occurring treatment, residential for women)

1409 Clark Street, Des Moines (515) 643-6500

Mercy One House of Mercy provides mental health counseling and psychiatric services



UCS Healthcare delivers comprehensive and integrated health care services. Our Des Moines office offers medical, behavioral health diagnosis and treatment including mental health therapy,

psychiatric services, substance use disorder therapy and medication assisted treatment. We have offices in Ankeny and Knoxville that offer therapy and medication assisted treatment as well. We accept most insurance plans and Medicare/Medicaid (service specific) and we can also provide some services on a sliding fee scale. Spanish speaking assessments and therapy services available. Find out more at UCShealthcare.com or call 515-280-3860 or ucsinformation@ucsdsm.org

African-American Community Providers

Thriving Family Counseling Services – 2213 Grand Avenue, DM 50312 – Phone: 515-808-2900 <https://thrivingfamiellesservices.com>

Aspire Counseling Center – 3520 Beaver Avenue, Suite D DM 50310 515-333-8003

Urban Dreams – 601 Forest, Avenue, DM 50314

Outpatient Substance abuse treatment and OWI services

Mental Health and Treatment Services 515-288-4742

<https://urbandreams.org/programs/admin@urbandreams.org>

ForWard Consulting, LLC – Breann Ward, CEO and therapist, 4309 University Ave., DsM – 515-410-1716 -

<http://moveforward2day.com>

“There is always light. If only we’re brave enough to see it. If only we’re brave enough to be it.”

-----Amanda Gorman



Amani Community Services

Amani CS started in 2014 by three African Americans who saw the need for culturally specific services in their community. Services are free, confidential and provided statewide. No referral needed. Anyone can call and make an appointment.

It is a domestic violence and sexual assault agency providing culturally specific services to African Americans in Iowa.

Services provided: individual counseling, support groups, medical, legal and housing advocacy, outreach, prevention and teen and children programming.

Phone:

Waterloo (319) 232-5660

Cedar Rapids (319) 804-0741

Davenport (563) 564-5392

Des Moines (515) 991-4589

24 hour after care line: 1 (888) 983-2533

Culturally specific services are designed to meet the needs of communities that are unserved and underserved. Services are culturally focused; values, behaviors, expectations, norms and worldview of the cultural community are present at every level of service delivery. Amani Community Services is funded by VOCA funds and grants.

Support Groups

Thursdays - Addiction recovery (all inclusive addiction) group in person and Facebook live every Thursday at 7pm. In person – at West Des Moines Open Bible 1100 Ashworth Road. An LGBTQ+ support group meeting will start in July.

Our Facebook group page

<https://www.facebook.com/groups/306310047070015/>

Website - Sobersoldierz.com

Contact person: Christina Gist - 515-778-2015

cibscoffee17@icloud.com

For Foster parents, as per the Ask Resource Center

Foster Squad support group:

<https://www.fostersquad.org>

Support group locator provided by the

“Iowa Foster and Adoptive Parents Association”:

http://www.ifapa.org/support/support_group_locator.asp

Mindspring Support Group for Families of Persons with mental illness

Eyerly Ball, 1301 Center, Des Moines, Iowa

(across from Methodist Hospital)

Meetings: In person the **third Sunday** of the month from 2:30 to 4:00 pm. Contact: Susie McCauley at 515-274-5095

or mccauleyf@mchsi.com. Offering support for the family.

Bipolar Support Group

meets every Monday evening – 6 – 7:30 PM

at **Smoky Row**, 1940 Cottage Grove Avenue

Contact us at: smokybpgroup@2022@gmail.com

Hosted by Wilky Sanon, M.S., Clinical Mental Health Counseling and Tami Halbersma, ARNP, Psychiatric Nurse Practitioner

Please Pass the Love Virtual Support Groups

Contact Alex@pleasepasstheLove.org

virtual **caregiver support group** and held every other Monday @ 7 pm

Register at www.pleasepasstheLove.org/youth-programming

Support for Adults w/ Depression, Anxiety, Bipolar Disorder

Heartland Presbyterian Church - Candles in the Darkness

14300 Hickman Road, Clive, Iowa

www.weareherewithyou.com and www.mindspringhealth.org

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Meetings: In person the **second and fourth Monday** of every month at 7:00 pm - Contact: Julie at 515-710-1487 or email: candlesinthedarknesssg@gmail.com

Post Adoption Support Group

Lutheran Church of Hope, 925 Jordan Creek Parkway,
West Des Moines, Iowa

Meetings: In person monthly the on the second Tuesday from 6 pm to 8 pm. Contact: Michelle Johnson at 515-710-3047 or mijohnson@fouroaks.org

Note: childcare for all ages is provided – please RSVP

Alcoholics Anonymous

Lutheran Church of Hope, 925 Jordan Creek Parkway,
West Des Moines, Iowa

Meetings: In person meetings are held **Mondays** at 12:00 pm; **Saturdays** at 9:00 am, and **Sundays** at 5:00 pm. (size is limited)
AA membership is open to all those who desire to do something about his or her drinking problem. The primary purpose of AA is to carry the message of recovery to the alcoholic seeking help. AA can serve as a source of personal experience and be an ongoing support system for recovering alcoholics.

Al-Anon and Alateen

Lutheran Church of Hope, 925 Jordan Creek Parkway,
West Des Moines, Iowa

Meetings: In person meetings are held **Sundays** at 5:00 to 6:00 pm. Group size is limited.

Al-Anon is a fellowship of relatives and friends of those struggling with alcohol who share experiences, strength and hope. Alateen participants may choose to attend online Al-Anon if they are not able to attend the in-person group on Sundays at 5:00 p.m.

Gamblers Support Group

Lutheran Church of Hope, 925 Jordan Creek Parkway,
West Des Moines, Iowa

Meetings: In person meetings are held **Sundays** at 6:30 pm
This program is based on recovery for compulsive gamblers, debtors/spenders and anyone who seeks recovery from their addictions. Meetings emphasize a solution rather than the problem.

Parents of Addicted Loved Ones

Lutheran Church of Hope, 925 Jordan Creek Parkway,
West Des Moines, Iowa

Meetings: In person meetings are held **Mondays** at 6:30 to 8 pm -
Parents of Addicted Loved Ones is a support group of parents helping parents. They meet every week to offer education and support, at no cost, for parents who are dealing with a son or daughter battling addiction. PAL can also help spouses who have a partner with addiction issues. PAL is especially helpful for parents and spouses, but all other sober family members and friends (age 18 and older) are welcome at the meetings.

Dementia Support Group

Lutheran Church of Hope, 925 Jordan Creek Parkway, WDM

Meetings: In person meetings are held the **fourth Tuesday** of the month from 6:30 to 8:00 pm Being a caregiver to a loved one with dementia is hard, but having others to support you can help.

Dementia, Alzheimer's Caregiver Support

The Alzheimer's Association offers many free resources to caregivers, including the 24/7 help line (800-272-3900), local support groups, and education programs and information on its website – alz.org/iowa – which offers tips on daily care, information on legal and financial planning, the stages of the disease, and more. Resources from the IDPH [Alzheimer's Disease & Related Dementias Program](#) can be found at this link. -----

Alzheimer's Virtual Support Groups in Iowa

[Events | Alzheimer's Association](#)

https://www.alz.org/events/event_search?etid=2&cid=08zip=50325

Grief Support Group

EveryStep Grief & Loss Services, 1821 Grand Ave.
West Des Moines, Iowa

Contact: Des Moines at 515-333-5810 or
West Des Moines at 515-223-4847

Support groups are hosted at EveryStep locations in eight Iowa communities. EveryStep Grief & Loss Services' bereavement counselors are available to meet with families or visit by phone. Their support groups and services are available to anyone. To learn what services are available in your area, call the EveryStep office near you

Brain Injury Alliance On-line support groups

Connect with Iowans touched by brain injury

Register at: <https://biai.memberclicks.net/support-groups>

Weekly meetings: 3-4:30 pm

Postpartum Support International

has been awarded a landmark contract to operate the **first-ever Maternal Mental Health Helpline** by the U.S. Health Resources and Services Administration (HRSA). The **Helpline**, legislated by Congress and funded by HRSA, is available 24/7, 365 days-a-year, in English and Spanish, voice [\(800\) 944-4773](tel:8009444773), text "help" to 800-944-4773, or text en español 971-203-7773. <https://www.postpartum.net>

The PSI helpline does not handle emergencies. People in crisis should call their local emergency line.

Maternal Mental Health Hotline

HRSA launched the Maternal Mental Health Hotline, a new, confidential, toll-free hotline for expecting and new moms experiencing mental health challenges. Moms can call or text 1-833-9-HELP4MOMS (1-833-943-5746) and connect with counselors for mental health support. This resource is available in English and Spanish!

What is the leading cause of death for new mothers?

In the postpartum period, often during the time when new parents are out of the hospital and beyond the traditional six- or eight-week post-pregnancy visit, cardiomyopathy (weakened heart muscle) and mental health conditions (including substance use and suicide) are identified as leading causes.

Did you know? 1 in 7 mothers and fathers suffer from postpartum depression

Suicide Support Group

Coping After Suicide, Polk County Crisis and Advocacy Services
525 SW 5th, Suite H, Des Moines, IA 50309

Meetings: In person the **second Thursday** of each month from 6:00 to 7:30 pm, and the **last Saturday** of the month from 9 to 10:30 pm.

Contact Person: Kate Gilmore at 515-286-2029 or

kgilmor@co.polk.ia.us

Note: no fee

Addiction Recovery for Veterans

West Des Moines Open Bible, 1100 Ashworth Road
West Des Moines, IA 50265

Meetings: In person **every Thursday** 7 to 8:00pm
Sober Soldierz is an addiction recovery group. Each week is an open discussion format with an overview topic.
Note: Childcare is provided.

Facebook: @mindspringinfo

Instagram: @mindspringinfo

Twitter: @mindspringinfo

TikTok: @mindspringinfo

"There is no better compass than compassion."

— Amanda Gorman,
Call Us What We Carry

www.weareherewithyou.com and www.mindspringhealth.org

You Are Not Alone. The Illness is Not Your Fault. Never Give Up Hope.





Broadlawns Crisis Team:

Provides comprehensive emergency mental health services including assessment, triage, crisis intervention, and discharge planning. Services are available by phone or in person through our Emergency Department. In addition to being the initial contact to the Inpatient Psychiatric Unit, the crisis team assists clients in finding the programs and services that are the most appropriate for their needs.

For assistance 24 hours a day, call 515.282.5752

The Pre-Petition Screener Service

A resource for Polk County residents who want to file a petition for involuntary behavioral health services through the Clerk of Court. The Clerk of Court offers the filers the Polk County Resource and Referral Line with a private room to make the call before filing. The screener is a mental health professional who is available to assist applicants and respondents before, during, and after the petition process. The role of the Pre-Petition Screener is to gather back-ground information from both applicants and respondents and help determine if another path toward treatment may be preferable. In the event that a judge denies a petition, the screener is available to discuss appropriate next steps and help make connections with available resources.

The Pre-Petition Screener is available without an appointment Monday-Friday 8:30am to 4:30pm.

Located at the Polk County Justice Center (222 5th Ave in DSM) Phone: 515-336-0599 (direct line) or 515-282-5742 (main office)

Emergency Room: When a loved one is experiencing a mental health crisis, they have a plan to act on their suicidal, homicidal or self-harm thoughts, and you feel as if you have tried all other avenues and the current environment is unsafe, it is time to utilize an emergency room. The emergency room is used to stabilize a patient and transition them to the next appropriate treatment option.

Broadlawns Emergency Department located at 1801 Hickman Rd in DSM. Phone: 515-282-2200

Lutheran Emergency Department located at 700 E. University Ave in DSM. Phone: 515-263-5120

Methodist Emergency Department located at 1200 Pleasant St. in DSM. Phone 515-241-6213

Methodist West Emergency Department located at 1660 60th St. in WDSM. Phone: 515-343-1200

MercyOne Emergency Department located at 1111 6th Ave in DSM. Phone: 515-247-3211

MercyOne Emergency Department located at 1755 59th PI in WDSM. Phone: 515-358-8280

The Clive Behavioral Health Hospital will operate as a 134-bed independently licensed hospital on two campuses – 34 beds on the Des Moines campus at 1111 6th Avenue and 100 beds on the Clive /West campus at 1450 NW 114th Street, Clive, Iowa. Beds will eventually be 1/3 for youth and the rest for adults. The downtown location of 34 beds will be for adults with mental health and medical issues.

Clive Behavioral Health Intake & Assessment Center – accessed by calling 1- 844-680-0504. Website at: <https://clivebehavioral.com>

Crisis Services in Dallas County

Mobile Crisis Response Team: If you have a mental health crisis in your family and are in need of emergency assistance – call 911.

The Mobile Crisis Response Team provides short term on-site crisis assessment and intervention for children, youth and adults experiencing a mental health crisis. The team is staffed with behavioral health specialists including registered nurses, Master's level psychotherapists and social workers. The team is activated when a law

enforcement officer responding to an emergency call requests the presence of the Mobile Crisis Team. An evaluation, including a determination about the appropriate level of care needed, is completed in the field by a member of the team. The team member completing the evaluation will then make recommendations for appropriate interventions based upon the current needs of the individual in crisis. They will also provide information, education, and potential linkage to community resources.

Safe Harbor Crisis Line: You can talk with mental health professionals if needing assistance in a non-emergency situation. **24/7 crisis line covering Dallas, Guthrie and Audubon Counties: 1-844-428-3878**

Safe Harbor Crisis Center: A safe place where individuals who are experiencing a mental health crisis can voluntarily access crisis intervention services.

**Safe Harbor Crisis Center is open 24/7
Located at 706 Cedar Avenue in Woodward
Phone: 515-642-4125**

**Safe Harbor Center Transitional Living Services: The transitional living program is a 3-6 month program for individuals coming out of hospitals, crisis, or jail. They receive therapy, SUD services, work services, and housing assistance.
Phone: 515-642-4125**

Beginning July 1, 2022 - Waukee Police to Use Mental Health Crisis Team as part of a pilot program. Jan. 1, 2023 Urbandale will start using a mental health Crisis Team. A uniquely equipped car with a specially trained officer and an intervention specialist will answer mental health calls. Similar efforts are to be activated in Urbandale, Clive, West Des Moines, Norwalk and the Dallas County Sheriff's office.

Crisis Services in Warren County

If you have a mental health crisis in your family and are in need of emergency assistance – call 911

Mobile Crisis Response: Teams of professionals provide on-site, face-to-face mental health services for an individual or family experiencing a mental health crisis. They can respond wherever the crisis is occurring—in an individual's home, the community, or other locations where an individual lives, works, attends school, or socializes. This line also provides support on the telephone, day or night, for people looking for immediate help with their emotions or mental health. **To access mobile crisis response, call the Your Life Iowa Crisis line 24/7 at 855-581-8111**

Crisis Services in Madison County

If you have a mental health crisis in your family and are in need of emergency assistance – call 911

Mobile Crisis Response: Teams of professionals provide on-site, face-to-face mental health services for an individual or family experiencing a mental health crisis. They can respond wherever the crisis is occurring—in an individual's home, the community, or other locations where an individual lives, works, attends school, or socializes.

Justice and Mental Health Collaboration Program New website launches – please explore!

From first contact to re-entry, the Justice and Mental Health Collaboration Program (JMHCP) supports criminal justice and behavioral health systems across the country as they safely divert people from the justice system and increase access to mental health treatment, innovative crisis services, housing supports and more. Learn about the cross system, collaborative work that JMHP supports:

https://jmhcp.org/?mc_cid=ab7143ba77&mc_eid=8c7240f0ab&mc_cid=e77ac0c82e&mc_eid=8e60d646c9

www.weareherewithyou.com and www.mindspringhealth.org

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Information on Epilepsy Education

There are a couple education programs available on the epilepsy learning portal for psychogenic seizures which is for the general public and available at no cost on-demand at Learn.Epilepsy.com.

New website location for IDD Council – which includes the Infonet newsletter and legislative information [Home \(iowaddcouncil.org\)](http://Home(iowaddcouncil.org))

[515-288-5699](tel:515-288-5699) **Special Needs Estate Planning – Dennis Burns**
Phone: (515) 371-6768 dennis.burns@prudential.com

Suicides in Iowa 2000-2022 Opioid and Suicide Deaths in Iowa 2016-2022

Iowa Dept. of Public Health

<https://idph.iowa.gov/substance-abuse/substance-use-and-problem-gambling-data-reporting/in-the-know-common-data-reports>

Total Opioid Deaths		Year	Total Suicides		24 and under	25 thru 44	45 thru 69	70 and older
		2000	288		51	115	78	44
		2001	304		67	97	102	38
		2002	310		55	122	96	37
		2003	351		58	118	131	44
		2004	345		60	119	127	39
		2005	331		57	120	120	34
		2006	336		57	121	126	32
		2007	331		49	116	130	36
		2008	383		55	138	148	42
		2009	368		56	129	135	48
		2010	375		49	118	163	45
		2011	423		58	150	174	41
		2012	380		65	141	140	34
		2013	445		66	148	172	59
		2014	409		72	117	177	43
		2015	424		77	139	166	42
176		2016	459		68	161	186	44
201		2017	470		85	151	173	61
136		2018	495		71	170	201	53
156		2019	521		81% increase from 2000- 2019			
208		2020	551		91% increase from 2000-2020			
250		2021	525		As of 12-31-21			
211		2022	556		As of 12-31-22 (last updated 1/9/23 – waiting for final #))			
*2021-2022 data is preliminary and is subject to change								



Polk County Behavioral Health and Disabilities Dept. and Polk County Region

Polk County Behavioral Health and Disabilities Dept is 515-286-3570.

Resource & Referral line is: 515-288-0818

The CEO is Annie Uetz.
<https://www.polkcountyiova.gov/behavioral-health-disability-services/>

Polk MHDS Adult and Child Joint Committee Meeting are held quarterly – the schedule:

- April 18th – 1:30 – 3:00 pm – Polk County River Place
 - o Topic – Crisis System Evaluation

Intercept 0 – January newsletter

Intercept 1 – February newsletter

Intercept 2 – March newsletter

Sequential Intercept Model

By Annie Uetz

In previous newsletters, I shared how Polk County utilizes the SAMHSA Sequential Intercept Model to identify gaps and improve the system by partnering with community providers, law enforcement, first responders, the judicial system, jails, re-entry providers and community corrections to create programs and provide training for Intercept 0 and Intercept 1.

Intercept 2 of the Sequential Intercept Model focuses on when an individual is arrested, booked into jail and the initial hearing with a judge that takes place.

Following are the key elements for Intercept 2:

Screening for Mental and Substance Use Disorder: Each individual who is booked into the Polk County Jail receives a brief screening for mental health and substance abuse disorders to identify individuals who can be linked to jail-based treatment services and/or community-based services when they are released.

Data Matching: Since 2008, the Post-Booking Jail Diversion program has worked to reduce the amount of time individuals with mental illness spend in jail. Each morning before the initial hearing, they match who was booked into jail with who receives services in the mental health and disability system. They work with the community coordinators to develop a plan to present to the judge. For those who are not connected to community services a referral can be made, if the individual is willing.

Pretrial Supervision and Diversion Services: The pretrial release program utilizes objective and subjective criteria and recommends the release from jail, without money bond. The individual can be released on recognizance, released with services or released through Intensive Pretrial Release, if they qualify for the pretrial release program.

Post-booking Release: This is the last key element for Intercept 2. This is a gap in our community as Polk County does not have deferred prosecution.

See the sequential intercept model on the next page – it shows intercepts 0 through 5. Annie will give information on each of the 5 intercepts in future issues of the newsletter.



Volunteer Opportunity

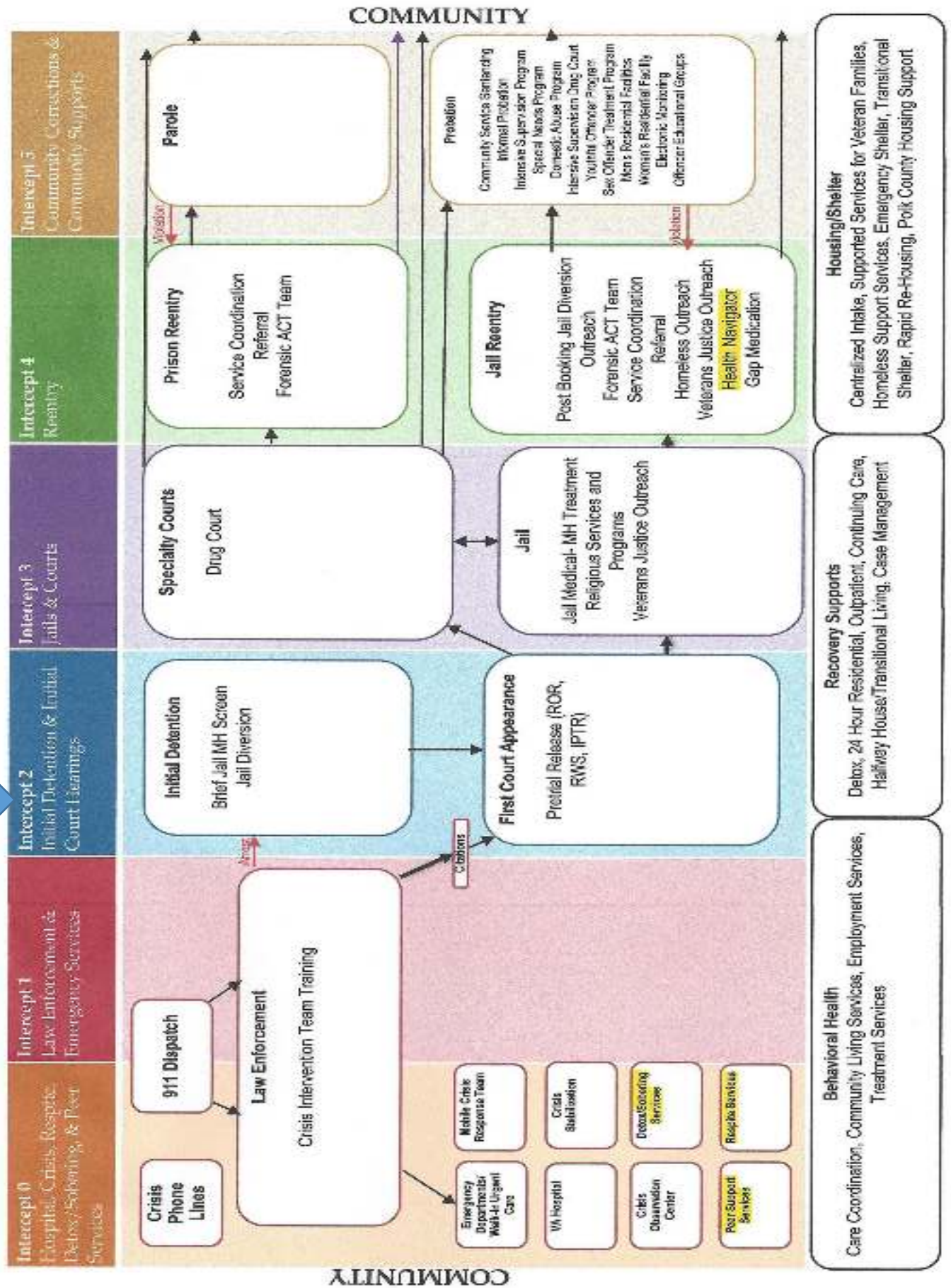
Mindspring Mental Health Alliance is looking to improve its support group programming. We are currently seeking volunteers to facilitate these support groups. Ideal candidates will have lived mental health experiences and/or work or study in the mental health sector.

Interested? Please reach out to volunteer@mindspringhealth.org

www.weareherewithyou.com and www.mindspringhealth.org
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Polk County Sequential Intercept Model





The Iowa Mental Health System has 14 regions

At <https://dhs.iowa.gov/mhds-providers/providers-regions/regions>

You can find the following items:

- Map of Approved MHDS Regions
- Regional CEO Contacts
- Regional Coordinators of Adult Disability Services
- Regional Coordinators of Children's Behavioral Health Services
- DHS Community Systems Consultants
- Regional Services Waiting List
- Each region's website
- Each region's children's behavioral health services implementation plan
- Each region's complex service needs regional community plans
- Each region's regional service system management plan

Of the 14 MHDS Regions in the state of Iowa, Polk County is the only county region.

MHDS Regions website: <https://www.iowamhdsregions.org>

MHDS Regions & AEA website: <https://iowaageamentalhealth.org>

Dashboard: https://dhs.iowa.gov/dashboard_welcome

Major changes at the state level

STATE OF IOWA DEPARTMENT OF
Health AND Human
SERVICES

Alignment of DHS and IDPH

IDPH and DHS has become a new, single agency as of July 1, 2022. This alignment – creating a new Department of Health and Human Services – aims to integrate programs, policies, and practices to improve service delivery with a population health approach, and to leverage funding more effectively.

The following report is from 1-2023, Connie Fanselow.

NEW HHS INTERIM WEBSITE LAUNCHED JANUARY 12

- The Iowa Department of Health and Human Services (HHS) launched the combined health and human services website on Thursday, January 12
- This is the latest step in Iowa's HHS alignment initiative that brings content from both agencies into one unified website
- HHS continues to work on the process of creating a human-centered website, making the website more user friendly and easier to navigate for the end user, starting with added functionality and enhanced accessibility

988 SUICIDE AND CRISIS LIFELINE

- Year one activities, building staff capacity
 - Month of August – about 2300 contacts
 - 1654 calls - 321 chats - 323 texts
 - 309 calls on Veteran's line
 - 36 calls went to back-up center
- Warm hand-offs to mobile response
- Information and referral to resources
- Coordination with 911
- Marketing plan for 988 and suicide prevention
- In addition to the SAMHSA grants to support implementation of 988, HHS received an additional \$458,000 for:
 - Statewide marketing of the 988 number
 - Training and technical assistance to PSAPs (Public Safety Answering Points), meaning staff answering phones, or 911 and mobile response warm hand-offs
 - Looking at centralized tracking for crisis services
- Policy for warm hand-offs from 988 to the mobile crisis dispatch entity was finalized and training provided in October
- Warm hand-offs began December 1, 2022
- Regions hosted a crisis response summit and began collect data on crisis services in the fall – set a goal to be consistent across the state by January 1st

EARLY IOWA 988 DATA

The charts below reflect 988 contacts originating from Iowa since 988 went live on July 16, 2022. The charts are broken down by call, chat, and text. Individuals calling 988 are offered the option of using the Veterans Crisis Line, a specialized Spanish speaking center prior to being routed to an Iowa 988 Center. Individuals may abandon a call, chat, or text prior to a 988 Center answering the contact. If the Iowa 988 Centers are at capacity and unable to answer a contact, it will be answered by an out of state 988 backup center.

Iowa 988 Calls

See chart on next page

	Iowa Demand	Veteran's Crisis Line	Spanish Center	Received by Iowa 988 Centers	Answered by Iowa 988 Centers	Abandoned Calls	988 Back Up Center
July 2022	2,233	339	22	1,791	1,420 (79%)	250	121
Aug 2022	2,137	320	30	1,712	1,595 (93%)	79	38
Sept 2022	2,096	287	33	1,706	1,602 (94%)	66	38
Oct 2022	2,140	313	51	1,776	1,611 (91%)	142	23

Iowa 988 Chats

	Iowa Demand	Received by Iowa 988 Centers	Answered by Iowa 988 Centers
July 2022	413	154	154 (100%)
Aug 2022	449	330	329 (100%)
Sept 2022	600	411	411 (100%)
Oct 2022	557	298	298 (100%)

Iowa 988

Texts

	Iowa Demand	Received by Iowa 988 Centers	Answered by Iowa 988 Centers
July 2022	288	141	137 (97%)
August 2022	379	339	335 (99%)
Sept 2022	460	390	388 (99%)
Oct 2022	517	424	421 (99%)

COMMUNITY MENTAL HEALTH SERVICES BLOCK GRANT

- Iowa is receiving additional funds through the Bipartisan Safe Communities Act
 - Related to mass shootings and shootings and traumatic events
 - \$621,948 to be spent by 10/16/24
 - 10% set aside to fund First Episode Psychosis programs
 - Targeted to crisis, emergency, traumatic events in communities
 - HHS has put together a plan for spending the funds which includes:
 - Strengthening DBHRT (Disaster Behavioral Health Response Teams) by recruiting new volunteers, providing additional training for teams, and developing systems for deployment and tracking of the teams
 - Reviewing and updating the Statewide Disaster Behavioral Health Response Plan to describe collaboration between behavioral health, emergency management, first responders, justice

systems, local community mental health and behavioral health provider agencies, and public health services

DOJ INVESTIGATION AND CONSENT DECREE

- Glenwood Resource Center has been filed with the court and signed
- It is an agreement based on the Department of Justice findings from the Glenwood Resource Center investigation that was reached through negotiations between the DOJ and Iowa HHS
- The resulting document lays out the issues identified by DOJ and how Iowa will remedy each of those items
- Considered finalized on Jan. 11
- Should be publicly available soon
- Iowa will have a monitor to help keep track of progress on the 300 items it contains
- HHS has been working with the University of Iowa to hire chief medical officer to oversee the quality of medical care provided
- A second report has been issued on overall ADA compliance by the State of Iowa and work on a second consent decree on those issues continues while the state continues to work on community integration and building capacity

Glenwood Resource Center Consent decree summary available at:

https://dhs.iowa.gov/sites/default/files/GRC_DOJ_Consent_Decree_Summary_final.pdf?011220232012

DOJ Information Page: <https://dhs.iowa.gov/doj>

GLENWOOD RESOURCE CENTER CLOSURE ACTIVITIES

- Glenwood RC is scheduled to close by July 1, 2024
- As of Jan. 12, there were 113 individuals residing at Glenwood and 121 individuals residing at Woodward
- 36 individuals have left Glenwood since the closure announcement
- The resources that have been used to support the facility will be redirected to community-based services in Iowa
- The state has been working on the issues related to the consent decree for more than three yrs and will be engaged in the consent decree work for at least 5 more years
- Work will focus on transitions, ensuring high quality of services, and ensuring individuals have real options for community living,
- HHS is seeking providers to bring more HCBS living sites online
- HHS has requested more reserve capacity waiver slots to make sure there is a funding pathway for everyone leaving a facility—these reserve capacity slots prevent individuals leaving a facility and delayed by the waiver waiting list
- Glenwood has held several provider fairs – bringing providers on campus to meet with residents and families and make connections

HHS COMMUNITY INTEGRATION WORKING GROUP

- Includes BHDS, Medicaid, HCBS, MCOs, and facilities representatives engaging in collaborative planning
- Working to make sure people have the information they need
- Next focus area will be the Americans with Disabilities Act (ADA) – as another process of reaching agreement on a consent decree proceeds
- The Medicaid Division has just hired a new community integration manager who is starting work this week

MONEY FOLLOWS THE PERSON

- At the end of December, Congress approved additional funding for MFP through 2027
- Iowa's MFP amended budget is in CMS's hands – once that is approved, we will be adding 5 more Transition Specialists (for a total of 15), one more Behavioral Specialist, and one more accounting position as soon as possible
- Another Behavior Specialist, and two Transition Specialist Supervisors are expected to be added soon as well
- 117 individuals transitioned through November 2022
- At least 128 MFP transitions are expected for the full calendar year
- A lot of hard work has been done to get that many people transitioned into the community
- Plans are in place for all the remaining Glenwood residents to make transitions over the next year or so
- Efforts continue to provide information from individuals and families who have transitioned to caregivers who are still resistant to the move

LTSS, HCBS, BH, AGING SYSTEM REVIEW & RECOMMENDATIONS

- Last year, HHS contracted with researchers at Mathematica and The Harkin Institute to conduct a systemwide assessment of community-based behavioral health, disability and aging services across the state
- Their work has sought to understand how people access and use these services through Medicaid and other programs
- By early 2023, the research team expects to make recommendations based upon successes to spread as well as opportunities to improve service delivery throughout the state

HHS Identified the Following Priorities to Guide the Project:

- Services should be accessed equitably by all
- High-quality care should meet the needs of people living in the community
- Service delivery should be well-coordinated, without gaps in or duplication of services
- System providers should have clearly defined roles and responsibilities
- The workforce should be well-trained, including paid staff and family members
- Available services should have demonstrated value to improve health and quality of life

- Mathematica has reviewed data, met with stakeholders and provided initial information to the stakeholder advisory group. Report of their recommendations is expected out this month including the areas of:
 - Modernizing the waiver wait list and using technology so that everyone can see where they are on the list
 - Assessing individuals on wait list to identify they meet eligibility criteria and working to eliminate duplication on the list
 - Work on short term solutions for those on wait list – better system to refer to other services, Medicaid, regional
 - Redesign of all waivers to be less fragmented – same services, different names
 - Make sure to connect all the various entry points, so they all lead in the same direction

DEVELOPMENT OF INTENSIVE RESIDENTIAL SERVICE HOME SERVICES CONTINUES

- Lakes Life Skills – Dickinson Co, providing services
- Trivium – Woodbury Co, designated, looking at referrals
- First Resources – Des Moines Co, designated
- Inspiring Lives – Fayette Co, designation pending
- Candeo – Polk Co, in development
- 43 North – Cerro Gordo Co, in development

MHDS REGIONAL REPORT

The MHDS Regions Study Report has been submitted to the General Assembly. The recommendations in this report provide a summary of what will be in the HHS legislation related to MHDS Regions. The study findings identified key areas that need attention:

- Lack of Consistent Services Across the State
- Lack of Consistent Definitions and Implementation of same Services
- Governance and Administration Across Regions
- Lack of Integrated Data Recommendations include:
 - Move Regional Code Language from Iowa Code Chp. 331 (County Home Rule) to Iowa Code Chp. 225C (Mental Health and Disability Services) because the regional MHDS system is now funded through state appropriations
- Revise Regional Governance Structure to create a better balance between elected county officials and other stakeholders, such as persons who utilize MHDS services and their families, providers, and representatives from law enforcement, judicial, and educational systems, and ensure that all stakeholders should have voting rights and representation of county elected officials should be limited to no more than 49 percent of the board membership
- Require Community Based Competency Restoration as a Core Service to shift toward addressing gaps in the system, including an increased focus on forensic and justice-involved services. The department recommends that MHDS Regions be required to develop and fund community-based competency restoration services. Regions should also become responsible for coordination between courts and providers of these services.
- Revise the Regional Ending Fund Balance Carryover to limit the amount of funds that a region may carryover between fiscal years

to five percent of expenditures in the preceding fiscal year to ensure that appropriated funds are not inappropriately retained rather than spent on intended services. To ensure that regions have adequate cashflow to pay regional staff and providers, and to retain funds set aside for large initiatives, the department recommends raising this limit to ten percent.

- Eliminate the requirement for HHS to file quarterly reports to the legislature outlining the status of implementing core services in each region, the accessibility of core services in each region, how each region is using its state funding, and recommendations for improvements to the mental health and disability services system. Because changes in service availability, service access, and expenditures are relatively stable across quarters. The department recommends making this report an annual requirement.

The full report is available at:

<https://www.legis.iowa.gov/docs/publications/DF/1366508.pdf>

2023 LEGISLATIVE SESSION

- Legislative Session started January 9
- The deadline to introduce bills is February 10
- First funnel (when bills need to pass out of committee to proceed) is March 3
- Second funnel (when all bills must pass out of committee to remain viable) is March 31
- The last day of the 110-day session is April 28
- There are 53 newly elected legislators

Iowa has a newly elected State Representative from Council Bluffs (Josh Turek (D)) who uses a wheelchair so a new ramp has been installed in the House Chamber to provide access to the well, meaning that it will be available for visitors also.

DD Council's Iowa InfoNET 2023-24 Guide to the Iowa Legislature is available at:

<https://irp.cdn-website.com/dc8e72bb/files/uploaded/20232024%20Legislative%20Guide%20FINAL.pdf>

DD Council's Bill Tracker is available at:

<https://www.iowaddcouncil.org/bill-tracker>

For other Legislative information from the DD Council, go to:

<https://www.iowaddcouncil.org/infonet>

Covid Recovery Iowa is now PROJECT RECOVERY IOWA

The need for these services has not abated.

FEMA funds are exhausted.

Additional funding has been found and is hopefully going to meet needs 7-1-22 through June 2023

Statewide MH crisis counseling program is continuing

Moved from a virtual to a hybrid approach

Have a daily presence on Facebook

Able to attend county fairs and community events, health fairs, summer camps and youth activities, school events

Individuals call with all sorts of concerns and needs including housing, employment, food as well as feelings of isolation, fearfulness, anxiety as well as domestic abuse

Continues to offer crisis lines, virtual outreach counselors, short term, individual supports and referrals and specific activities

Over the next year the focus will be on mental well-being, recognizing mental health stressors and anxiety, and reaching out to places of employment

Here are the free resources till June 30, 2023

8 Dimensions of Wellness

<https://www.facebook.com/groups/304914707458079>

A Home For Hobbies

<https://www.facebook.com/groups/1673775739439502>

A Place For Everything

<https://www.facebook.com/groups/309913920328197/about>

A Place For Everything:

<https://www.facebook.com/groups/309913920328197>

Book Club For Elders:

<https://www.facebook.com/groups/317037909640155>

Book Club: <https://www.facebook.com/groups/280051713313291>

COVID Numbers:

<https://www.facebook.com/groups/3316321331756451>

Domestic Violence:

<https://www.facebook.com/groups/277973576605783>

Easing Anxiety Over Covid-19:

<https://www.facebook.com/groups/276474223635311>

Four Legged Therapy:

<https://www.facebook.com/groups/785206062013450>

How Does Your Garden Grow:

<https://www.facebook.com/groups/298450564668994>

Inclusion For All:

<https://www.facebook.com/groups/1527902267369280>

Iowa - A – Zinnia:

<https://www.facebook.com/groups/599308484061448>

Meditation & Yoga:

<https://www.facebook.com/groups/1146630482359182>

Meet The (Grand)Parents:

<https://www.facebook.com/groups/645444526101023>

Month of Sundays:

<https://www.facebook.com/groups/567884850554888>

Next Level Gaming:

<https://www.facebook.com/groups/3439379396086318>

Over Coffee:

<https://www.facebook.com/groups/345471240189484>

Parenting in a Pandemic

<https://www.facebook.com/groups/937325153412822>

Songs From the Good Old Days With Carlene Hall:

<https://www.facebook.com/groups/2284812245146972>

Story Starters:

<https://www.facebook.com/groups/1109759116060849>

Substance Use:

<https://www.facebook.com/groups/337667384277299>

Sunday Connections:

<https://www.facebook.com/groups/3324026684308403>

Tell Me A Story:

<https://www.facebook.com/groups/1581970971987124>

Village of Hope:

<https://www.facebook.com/groups/2748982981997549>

Vivo En Iowa:

<https://www.facebook.com/groups/224936542192851>

Well, That Looks Good Enough to Eat:

<https://www.facebook.com/groups/603062780395504>

Work Resources:

<https://www.facebook.com/groups/261569204943086>

Agricultural and Rural Education available on request:

Stress on the Farm – Strategies that Help Farmers with stress reduction

Stress on the Farm – Strategies to Help Each Other During a Pandemic

Ongoing sessions: - FREE

Avoiding Burnout in a Crisis – The ABC is for Self-Care Question. Persuade. Refer (QPR) – Three simple steps anyone can learn to help save a life from suicide.

Workplace Diffusion – Virtual one-hour sessions are a safe place to talk about the way work has changed due to the COVID-19 pandemic.

Connection Points: COVID Recovery Iowa–Facebook, Instagram, Twitter, Discord and You Tube www.COVIDrecoveryiowa.org

Iowa WARM Line – 844-775-WARM (9276) - Provides confidential access to peer counseling and can connect people with services

Iowa Concern – 800-447-1985 - confidential access to stress counselors and an attorney for legal education, as well as information and referral services for a wide variety of topics.

Spanish Line – 531-800-3687 - Click on [Pre-Teen Support Groups](#) Click on [Teen Support Groups](#) Click on [Parent Support Groups](#)

Services for Older Americans – contact Ash Roberts 531-800-4450 aroberts@heartlandfamilyservice.org

**IT'S OK TO
TALK WITH
SOMEONE.**

Your community is here for you.



RESEARCH WEEKLY: 2 New Studies on Insight in Schizophrenia

By Elizabeth Sinclair Hancq

(January 11, 2023) Lack of insight into one's illness is a key characteristic of severe psychiatric disorders, and research indicates that up to half of people with schizophrenia may have this symptom. Reduced insight and general unawareness of illness is associated with a host of negative outcomes, including more severe symptoms, worse psychosocial functioning and lower overall prognosis.

**SCHIZOPHRENIA
BULLETIN**
The Journal of Psychoses and Related Disorders

Two research studies on insight into schizophrenia were published in the November edition of *Schizophrenia Bulletin*, an academic journal associated with Oxford University Press and the University of Maryland School of Medicine. The first examines the effect of early intervention services on insight in individuals with first episode psychosis. The second reports on the efficacy of transcranial direct current stimulation, an innovative interventional psychiatry treatment, on improving insight in patients with schizophrenia.

Insight in first episode psychosis

Insight in individuals experiencing a first episode of psychosis is of particular importance, because research has shown that it predicts overall prognosis of the individual's illness. While early intervention service programs for individuals experiencing first episode psychosis have shown positive results in improving symptoms and their overall illness course, none of those research studies have examined the impact of early intervention programs on insight, despite its importance.

The study published in *Schizophrenia Bulletin* is a randomized-controlled trial of the effects of early intervention services on insight in first episode psychosis. A total of 404 participants were included in the study, and they were followed for two years.

The researchers found a larger improvement in insight among individuals in an early intervention program versus those in usual care. Most of the gains in insight occurred during the first six months of being enrolled in the program, although there continued to be improvement in the remaining 18 months studied.

Just like in previous research, this study showed that, at baseline, individuals with higher levels of insight had less severe psychosis symptoms and higher social functioning. However, higher insight is also associated with more severe depression in individuals with schizophrenia and in the first episode psychosis patients of this study. Importantly, while individuals enrolled in early intervention services showed improved insight, this did not lead to more severe depression in these individuals. These results suggest earlier intervention service programs can improve insight without worsening depression in individuals with first episode psychosis.

tDCS improves insight in individuals with schizophrenia

tDCS is a safe and low-cost interventional treatment that works by applying weak electrical stimulation to targeted regions of the brain to modulate brain activity and connectivity. Research shows that repeated sessions over a treatment course has positive results in alleviating hallucination and delusion symptoms, as well as cognition, in individuals with schizophrenia.

This new research by study authors from research centers from around the world is a systematic review and meta-analysis of randomized-controlled trials, the gold standard in clinical research. By combining results from multiple different trials, researchers have a better understanding of the true effects of a given treatment.

Thirteen studies with a total of 587 patients with schizophrenia were included in the analysis. Levels of insight were measured utilizing a widely used psychiatric assessment scale, the Posi-

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tive and Negative Syndrome Scale, and specifically, item G12, which assesses lack of judgement and insight into illness.

Patients with schizophrenia who received at least ten sessions of tDCS showed improved insight into their illness compared to those that did not, according to the results. The authors suggest that the improvement in insight among patients who receive this treatment might underlie the efficacy of the treatment itself on other outcomes like hallucination and delusion symptoms, because the increased insight may lead to better medication adherence and compliance with treatment.

Targeting insight

As the authors of the tDCS study note, "impaired insight is a transdiagnostic construct, since it is found in many psychiatric disorders, and it is underpinned by several commonalities among them. It is therefore important to focus on insight because it represents a therapeutic target that can affect many patients." These two studies show promising results on ways to improve insight in individuals with schizophrenia at different stages of the illness; however, more research is needed given the critical importance of insight on an individual's prognosis and overall well-being.

References

- DeTore, N. R., et al. (2022, November). [A randomized controlled trial of the effects of early intervention services on insight in first episode psychosis](#). *Schizophrenia Bulletin*.
- Adam, O., et al. (2022, November). [Efficacy of transcranial direct current stimulation to improve insight in patients with schizophrenia: A systematic review and meta-analysis of randomized controlled trials](#). *Schizophrenia Bulletin*.



Brain Health Retreat Room

brainhealth-now.org

Dubuque public high school students have a place to go when they need to process their emotions.

Dubuque Community Schools officials opened brain health retreat rooms at Dubuque Senior and Hempstead high schools.

The rooms will offer a calming space in which students and staff can work through emotions and then get back to the classroom.

A space to refocus.



"It is just a means of, 'Let's get you regulated, let's get you back focused ... and get you back to class so we can really emphasize that school is a huge part of this and we want you to be in school,'" said Kristin Nolen, brain health liaison at Senior.

The rooms came to fruition with the help of multiple community partnerships. They aim to help address increased student mental health needs, which have become particularly pronounced since the start of the COVID-19 pandemic.

Community backers aim to replicate the concept in other schools in the region. "We hope to see more children, more kids, getting help early on how to regulate emotions and feel comfortable asking for help ... to help, hopefully, prevent brain health issues throughout their life," said Debi Butler, founder of Brain Health Now, an organization that seeks to end stigma around brain health issues.

The brain health retreat rooms offer a variety of tools that students and staff can use to refocus. The rooms will be outfitted with comfortable seating, hands-on and educational materials to help users learn to handle problems, access to meditation apps, snacks, murals offering positive reinforcements and other items.

"We're really trying to make it like a retreat, not a sterile hospital room, really making it warm and fuzzy, a feel-good type of a room," said Amy Unmacht, executive director of Foundation for Dubuque Public Schools.

A Brain Health Retreat experience, and students can work with them on problem-solving and coping mechanisms.

Both schools have a referral process to determine when students might need to use the room.

"They can come to the room for 10 to 15 minutes to just take a break," said Kari Kuhle, brain health liaison at Hempstead. "While they're there, we'll work on skills, some strategies that they can (use to) help to calm down. They can recharge and self-regulate, and then they're able to - head back to class."

Nolen noted that the rooms don't take the place of therapy. However, if staff notice a student consistently struggling, they can work with school counselors to connect that student with additional community support.

Butler and her husband, Andy, are covering the cost to outfit the rooms. In addition to working with Foundation for Dubuque Public Schools and Community Foundation of Greater Dubuque, the district also is receiving resources and funding from Lerdahl, Gigantic Design Co., 100+ Women Who Care, Dubuque County, Project Rooted and Mindful Minutes for Schools, a press release states.

Increased need

The brain health rooms are opening as schools work to respond to increased student mental health needs connected with the pandemic. The Children's Hospital Association reported last year that children's hospitals saw a 14% increase in mental health emergencies among children ages 5 to 17 in the first half of 2021 compared to the same period in 2019.

In the Dubuque district, school counselors have more students coming into their offices struggling with anxiety, as well as more students reporting suicidal thoughts, said Shirley Horstman, executive director of student services.

She tied the increase to a variety of pandemic-related concerns, such as social isolation, increased social media use, loss of loved ones to COVID-19, fear around the pandemic and altered school schedules.



"They have all of these fears, and if they can't process those fears with someone, that develops the anxiety that we're seeing. And of course, sometimes that anxiety gets to the point where it affects attendance ... and it affects their ability to concentrate in the classroom," Horstman said.

Debi Butler would like to see the brain health retreat room concept spread to more local schools. The Butlers have committed to help pay to open six more such rooms in the area, and they are starting a fund with Community Foundation of Greater Dubuque to accept contributions for brain health retreat rooms. Debi Butler hopes to see more of the rooms open around the state, too.

Nancy Van Milligen, president and CEO of the community foundation, said officials have started reaching out to other local districts about the initiative. Unmacht said that if the rooms at

the high schools are successful, she would like to see the concept move to Dubuque's middle schools and, after that, to evaluate the need for such a resource at the elementary schools.

"We're looking forward to seeing the end results and what we can do as a community to help our students and staff in need," she said.



On Netflix Ginny and Georgia, Season 2, Being Praised for its Honest Portrayal of Mental Illness, and Here's Why

Buzzfeed



In order to realistically depict mental health on TV, the team behind *Ginny & Georgia* worked closely with a psychologist and Mental Health America. **Spoilers ahead!**

One of the show's many strengths in Season 2 is its ability to discuss mental health in an authentic way, namely depression, self-harm, and the importance of therapy.

This new season begins with Ginny (Gentry) opening up to her dad, Zion (Nathan Miller), about her self-harm, which we saw in Season 1. Zion immediately convinces Ginny to enter therapy, which becomes a major part of her story.

While Georgia (Howey) is initially kept in the dark about Ginny's self-harm, eventually she finds out. Georgia and Ginny finally come back together and have an honest conversation.

Alongside Ginny's journey, *Ginny & Georgia* also dives into Marcus's anxiety and depression. In Season 2, Episode 8 — titled "Hark! Darkness Descends!" — the entire episode is told from Marcus's perspective as he accurately describes what it's like living with depression.

What really amplifies Marcus's story is the following episode, when we see a lot of what happened during Episode 8, but this time from Ginny's perspective. The side-by-sides of some of the moments really help show what Marcus is feeling.

While *Ginny & Georgia* Season 1 touched on Ginny and Marcus's mental health, Season 2 puts it front and center, which ends up being the show's strength. Focusing more on those stories was a deliberate choice made by the creator, showrunner, and writers.

"Everyone's fighting a battle you can't see," showrunner Debra J. Fisher [told Variety in a recent interview](#).

In order to realistically and accurately portray Ginny and Marcus's mental health struggles, the *Ginny & Georgia* writers [worked](#) with licensed psychologist Dr. Taji Huang and [Mental Health America](#) to ensure these stories were being told on screen responsibly.

"It's really important for us to portray these issues in a realistic way," creator Sarah Lampert [told Deadline](#). "But we were also very cognizant of our audience in the sense that we're not trying to be irresponsible or trigger anyone. So we actually have a licensed psychiatrist who reads every script and gives us feedback."

She continued, saying, "Then Mental Health America watches every episode and gives us notes. As well as the writers room itself taking a lot of care, using some personal stories and really trying to approach these topics with honesty but also responsibility."

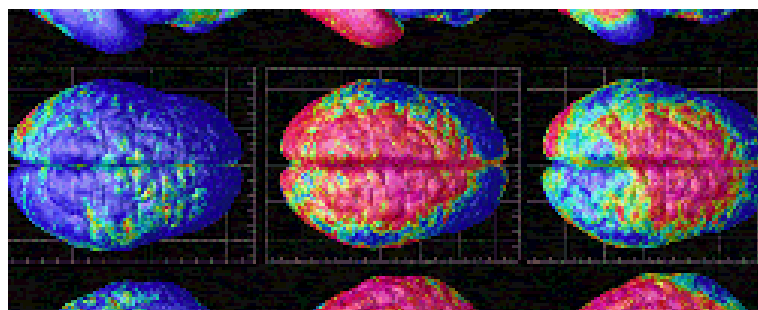
One of the important and deliberate [decisions](#) made by the writers to ensure they were taking care of the audience was to not show Ginny's self-harm.

In terms of Marcus's storyline, Debra [told Variety](#) that it was important for the show to depict depression and mental health in "a young man, a 16-year-old boy" since it's still rarely seen on television. Felix also impacted Marcus's story by willingly doing a "deep dive" with the writers on what depression could look like in a teenage boy.

Since depression is different for everyone, the *Ginny & Georgia* writers used their diverse writers room to pull stories from multiple points of view.

Marcus's storylines were how their families played a role. For Ginny, it was important to the writers that Zion be involved and not fall into the absent parent trope, and for Marcus it was "vital" to the story that Max and his parents help him get back on his medication.

"We're not a teen issue of the week show. We don't move on to the next problem. We really wanted to tell these stories over the course of several seasons," Debra [told Variety](#). "It was always about the long game, and just being able to approach mental health, self-harm, and depression in a really realistic, grounded way that we hope really resonates with the kids."



Incarcerated LGBTQ Youth Are Struggling. Here's How Bad It Is

Education Week

LGBTQ youth in juvenile detention centers face far greater mental health challenges compared with students in public schools. They reported higher instances of suicidal ideation, suicide attempts, and self-harm, according to a new report by the Williams Institute at UCLA.

The report is based on data from only one state, Minnesota, because most states do not collect information about the mental health of incarcerated students.

Compared with straight, cisgender students in public schools, incarcerated LGBTQ youth were twice as likely to consider or think about suicide, six times more likely to attempt suicide, and almost four times more likely to engage in self-harm, the report said.

Even within correctional facilities, LGBTQ youth were at a greater risk of suicide and self-harm, compared with their straight, cisgender peers.

Forty two percent of LGBTQ youth in correctional facilities said they had seriously considered suicide in the past year, 38 percent said they had attempted suicide, and 58 percent said they had engaged in self-harm, such as cutting, burning, or otherwise injuring themselves on purpose.

Based on the 2019 Minnesota Student Survey, the report compared mental health challenges faced by public school students with those in correctional facilities and broke it out by what it termed gender and sexual minorities. The survey results include responses from 72,102 public school students and 222 youth in juvenile correctional facilities.

LGBTQ youth were not only overrepresented in correctional facilities, they also had faced more trauma in their lives compared with non-LGBTQ youth, both in schools and the juvenile justice system, according to the report. The - of these factors is what led them to experience heightened mental health challenges, said Ilan Meyer, an author of the report, and a distinguished senior scholar for public policy at the Williams Institute and professor emeritus at Columbia University.

"When you put the picture together, you see that these are really kids that need support, need help," Meyer said.

"But for many reasons—including prejudice and stigma against sexual and gender minorities—end up being treated by correctional facilities, which sets them on a road to a really difficult life and really tragic consequences."

Incarceration is particularly traumatic for LGBTQ youth

Being in correctional facilities may be a uniquely harmful experience for sexual and gender minorities, who have to manage the stressors of being incarcerated while navigating their identity, which can increase exposure to violence, bullying, and isolation, the report said.

This is especially true for incarcerated transgender, nonbinary and gender nonconforming youth, who tend to be in sex-segregated housing facilities that often do not match their gender identities or expressions—putting them at a higher risk for victimization and exacerbating their mental health challenges.

But LGBTQ youth start experiencing trauma well before they are sent to correctional facilities. More than half—about 54 percent—of incarcerated LGBTQ youth said they experienced four or more adverse childhood experiences, including incarceration of a parent; living with someone who uses too much alcohol, abuses drugs, or has serious mental health problems; experiencing verbal or physical abuse by a parent; witnessing domestic violence; and being the victim of sexual abuse.

These adverse childhood experiences are linked to mental health challenges, the authors said. In contrast, 6 percent of non-LGBTQ youth in public schools reported the same experiences.

“Thinking about equipping correctional mental health care providers—social workers, counselors that work within custody settings—to be equipped to speak to the needs of sexual and gender minority youth, I think would be a really important first step, and attending to the needs of these kids,” said Kirsty Clark, another author of the report and a Vanderbilt University assistant professor of Medicine, Health, and Society; Public Policy Studies; and Psychology and Human Development.

Sexual and gender minorities are overrepresented in the juvenile justice system

Young people who identify as part of the LGBTQ community, were overrepresented in correctional facilities, according to this report and former research by Meyer.

These young people often are more likely to experience discipline such as expulsion and juvenile correctional system involvement than their heterosexual counterparts, demonstrating a school-to-prison pathway disproportionately impacting them, the report said.

More than 20 percent of youth in public schools reported a sexual or gender minority identity, compared with 28.8 percent in juvenile correctional facilities, according to the report. But other nationally representative studies conducted by Meyer and his colleagues through the Williams Institute also show a similar overrepresentation of LGBTQ youth in correctional facilities.

The previous study, published in 2017 in the *Journal of Youth and Adolescence*, also found that sexual and gender minority youth are two to three times more likely to be held in custody for more than a year, compared with heterosexual youth, and that they were often victims of force by other youth in custody. That was case especially for gay and bisexual boys.

The slew of anti-LGBTQ bills may be making the situation worse

Since last year, dozens of districts and states have introduced anti-LGBTQ and specifically anti-transgender policies and state laws, such as Florida’s “[Don’t Say Gay](#)” law. These policies and laws aim to restrict the rights of students to use bathrooms aligning with their gender identity, seek gender-affirming care or counseling at school, participate in high school sports, and read books or participate in classroom discussions about LGBTQ topics.

The onslaught of anti-LGBTQ legislation may have an adverse impact on mental health in correctional facilities for those who identify as part of the community, Meyer said.

“Some of the trends we’re seeing in states that are bringing anti-gay and anti-trans laws in terms of schools generally, such as Florida, Texas, those are bad indications that things are not necessarily improving,” he said.

“We can’t say with any quantitative empirical evidence how things have changed in the pandemic,” Clark added. “But it’s not a good sign.”

It’s hard to be a new mom. For some, a lonely struggle can spiral into mental illness.



Dramatic hormonal shifts combined with life changes and lack of support can lead to postpartum depression, anxiety, OCD and rarely psychosis.

When Melissa Anne DuBois gave birth to her first child 10 years ago, she was thrilled to finally take a baby into her arms after three miscarriages.

But soon disturbing thoughts invaded her mind, as a parent’s ordinary fears morphed into nightmare visions. A worry about accidentally drowning the baby in the bathtub became a vision of holding him under the water and watching him die. The normal fear of dropping the baby turned into a vivid image of herself hurling her son down the stairs to his death.

Dubois loved her baby and was horrified by the intrusive thoughts that sprang to mind. After 10 months of torment, she had a complete physical collapse that ultimately led to treatment.

There she learned she suffered from postpartum obsessive-compulsive disorder, one of a spectrum of mental health conditions that can occur after childbirth, spurred by hormonal and social changes. Her therapist assured her that her horrified reactions to these thoughts showed she would never act on them. With postpartum OCD, her natural desire to protect her child from bad things had just spun out of control.

And yet when news broke this past week of the Duxbury mother accused of strangling her three children, the 39-year-old Princeton resident wrote on Facebook, “It could have been me.”

The Duxbury incident has proven a double-edged sword for those pushing for more understanding of what are now called perinatal mood disorders. (“Perinatal” refers to the period before and after birth; sometimes the troubles start during pregnancy.) To read the rest of the story, [go here](#).



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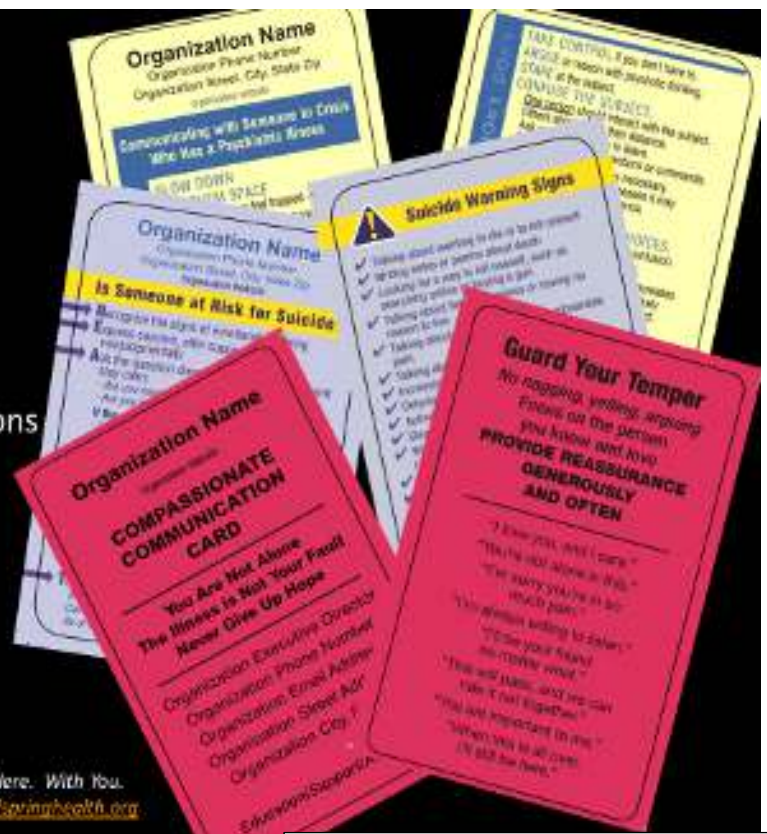
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CALENDAR OF EVENTS

Wed., March 8 - Mindspring Board Meeting
Jan, Mar, May, July, Sept., Nov
Location: 511 E. 6th St., Suite B, DM
4:30 to 6 PM

Community Impact Officer- Michele Keenan
515-850-1467

mkeen@mindspringhealth.org

Director of Special Projects –
Kristi Kerner 515-850-1467

kkerner@mindspringhealth.org
Program Coordinator -Zoe Bardin
zbardin@mindspringhealth.org
515-850-1467

Development Director – Francis Boggus

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Please become involved with one of our committees first. Contact the Director of Special Projects to discuss what committees we have. – 515-850-1467 or kkerner@mindspringhealth.org

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Contact: Community Impact Officer -

Michele Keenan- 515-850-1467

mkeen@mindspringhealth.org

Regarding: Community Education, Webinars and Workplace Mental Health Education Webinars, any other educational activities, Program funding, Marketing, requests for information and resources, Legal

Contact: Director of Special Initiatives –
Kristi Kerner kkerner@mindspringhealth.org 515-850-1467

Regarding: Fundraising, Financials, Social media, Website, Marketing, Newsletter, Mindspring Presentations, resource tables, requests for information and resources

Update!! The 2023 Golf Tournament will be Friday, September 22, 2023.

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