



**mindspring**  
MENTAL HEALTH ALLIANCE

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

**Mindspring Mental Health Alliance**  
511 E. 6<sup>th</sup> 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](mailto:mkeen@mindspringhealth.org)

**Director of Special Initiatives– Kristi Kerner**

[kkerner@mindspringhealth.org](mailto:kkerner@mindspringhealth.org)

**Development Director – Francis Boggus**

**Program Coordinator – Zoe Bardin 515-850-1467**

**Community Education Classes for  
anyone and everyone**

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

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## Mindspring's Mission Statement

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

**RAYGUN PARTNERSHIP**

**MENTAL HEALTH AWARENESS**



**PROCEEDS BENEFIT  
MINDSPRING  
MENTAL HEALTH ALLIANCE**

\*May 2023

[www.weareherewithyou.com](http://www.weareherewithyou.com) and [www.mindspringhealth.org](https://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 Greeley 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	Johnson	88	58	0	15	73
Community Hospital Total		828	430	72	97	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](#)  
**You Are Not Alone. The Illness is Not Your Fault. Never Give Up Hope.**





## Covid 19 - By the Numbers– As of date shown -2020 - 2023

	2020 April 20	Dec 2020	Dec 20 2021	December 2022	January 2023	February 2023	March 2023	April 2023	May 2023
# of <b>Iowa</b> cases reported	3159	274,982	601,531	1,016,767	1,031,182	Completed primary series of vaccinations 64.4%			
# of <b>Iowa</b> deaths Covid 19	79	3745	7680	10,343	10,508	10,794			
# of suicides	194	551	525	588	22	66			
# of opioid deaths		208	250	228		19			
# of Covid cases reported nationally	986,596	19,278,006	50,773,620	100,160,501	101,345,042	102,998,014	103,672,529	104,445,294	
# of Covid deaths nationally	56,164	336,683	806,273	1,094,727	1,106,216	1,113,254	1,119,762	1,129,573	

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:

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

### 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](http://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](mailto:scsmhclinic@uiowa.edu) or learn more by visiting their website [scsmh.education.uiowa.edu](http://scsmh.education.uiowa.edu).

## Community Mental Health Centers

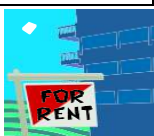
<b>Polk Co.</b>	<b>Child Guidance Center</b> – 808 5 <sup>th</sup> St. - DM – 515-244-2267
	<b>Eyerly Ball Community MH Center,</b> 1301 Center St., - DM - 515-241-0982
	<b>Eyerly Ball Community MH Center</b> 945 19 <sup>th</sup> St.- DM - 515-241-0982
	<b>Broadlawns Medical Center-</b> 1801 Hickman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

## Primary Health Care and Behavioral Health

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

## County Community Mental Health Services

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



<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](mailto: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](http://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](mailto: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](http://www.weareherewithyou.com) and [www.mindspringhealth.org](http://www.mindspringhealth.org)

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



Visit [everystep.org/program\\_guide](http://everystep.org/program_guide) for a current list of programs and services



Care & Support Services | Interpretation | Hospice  
Home Care | Community Health & Wellness  
Grief & Loss

## Community Providers

### Mind and Spirit Counseling Center

[www.mindspiritcenter.org](http://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 UCS healthcare.com or call 515-280-3860 or [ucsinformation@ucsdsm.org](mailto:ucsinformation@ucsdsm.org)

## African-American Community Providers

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

[www.weareherewithyou.com](http://www.weareherewithyou.com) and [www.mindspringhealth.org](http://www.mindspringhealth.org)

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## 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](mailto: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](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](mailto:mccauleyf@mchsi.com). Offering support for the family.

### Please Pass the Love Virtual Support Groups

Contact [Alex@pleasepasstheLove.org](mailto:Alex@pleasepasstheLove.org)

virtual **caregiver support group** and held every other Monday @ 7 pm  
Register at [www.pleasepasstheLove.org/youth-programming](http://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

**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](mailto: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](mailto: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](http://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](http://www.idph.org/alzheimers) can be  
found at this link.

Alzheimer's Virtual Support Groups in Iowa

[Events | Alzheimer's Association](http://www.alz.org/events/event_search?etid=2&cid=08zip=50325)

[https://www.alz.org/events/event\\_search?etid=2&cid=08zip=50325](https://www.alz.org/events/event_search?etid=2&cid=08zip=50325)

### Grief Support Group

EveryStep Grief & Loss Services, 1821 Grand Ave., WDM

**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, text "help" to 800-944-4773, or  
text en espanol 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, confiden-  
tial, 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](mailto: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.

### Virtual Statewide Brain Injury Support Group

*Every Thursday of the month*

Location: Zoom – Register [HERE](#)

Time: 3p-4:30p

Contact: Allison Andrews - [515-400-6456](tel:515-400-6456) or [aandrews@biaia.org](mailto:aandrews@biaia.org)

### Facebook (Private) - Iowa Brain Injury Family Caregivers Support Group

The Brain Injury Alliance of Iowa's Iowa Brain Injury Caregivers  
Support Group is a private, welcoming, supportive place for brain  
injury caregivers - spouses, significant others, parents, siblings,  
friends, etc. - to come together to receive helpful information and  
resources as well as to connect and receive peer support and  
encouragement from individuals with shared, unique experiences.

Contact [855-444-6443](tel:855-444-6443) or [info@biaia.org](mailto:info@biaia.org) Support Group [page](#).

### Peer Support for Peer Support is Back!!

on the **First and Third Wednesdays of Every Month - 9:30 AM**

Are you someone in the workforce supporting others?

Are you a Peer Support Specialist here in Iowa?

Join this meeting to check in and hear what others are doing for their  
own self-care and wellness.

This virtual meeting will be co-facilitated by Laura Semprini, Nancy A.  
Teubel, and Amy Ortiz, picking up the PSS 4 PSS group that Todd  
Lange and Todd Noack started. Come be supported for the support  
you are providing!

Join the Zoom Meeting:

<https://us02web.zoom.us/j/83481142012pwd=R1V4U0pzZE92Mh1aGNnaWF6bUtNdz09>

Meeting ID: [834 8114 2012](https://us02web.zoom.us/j/83481142012pwd=R1V4U0pzZE92Mh1aGNnaWF6bUtNdz09)

Passcode: 680016

Dial by your location [+1 312 626 6799](tel:+13126266799) US (Chicago)

## Crisis Services in Polk County



### The Mental Health Mobile Crisis Team

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 on every mental health call to 9-1-1.** 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.

**Emergency Calls: 911      Non-Emergency Calls: 515-283-0818**  
**Polk County**

**Experiencing an emergency mental health crisis?**

**Call 911**

- Acute or untreated medical issue
- Self-harm or suicide attempt in the last 24 hours
- Safety is a concern for self, others, or property
- Highly intoxicated, in withdrawal, or needing detox

**Expect Mobile Crisis Team to respond  
(will include police and a mental health professional)**

**For non-emergency mental health needs:**

**Call 988 or 515-288-0818**

or go to

**Adults:** Crisis Observation Center  
1801 Hickman Rd., Des Moines, IA  
Phone: 515-282-5742

**Children:** Behavioral Health Urgent Care  
1250 E. 9<sup>th</sup> St., Des Moines, IA  
(across the street – east - from Iowa Lutheran Hospital)  
Phone: 515-263-2632

Be clear with the dispatcher what the situation is, that it is a mental health situation. **Mental health counselors** will respond to some of Des Moines' 911 calls instead of law enforcement officers starting in July 2022. If it is a matter of life and death, the mobile crisis team is dispatched along with law enforcement.

The new approach, the Crisis Advocacy Response Effort (CARE) aims to better allocate police resources, reduce arrests and improve access to mental health programs for people in need and keep situations from escalating.

The police liaisons for the Mobile Crisis team are:

Officer Lorna Garcia (day shift) O: 515-283-4988 C: 515-205-3821

Officer Sean O'Neill (night shift 4-midnight M-F) cell 515-300-4644

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 Clive, West Des Moines, Norwalk and the Dallas County Sheriff's office.

### The 23 Hour Crisis Observation Center for Adults

Is intended to meet the needs of individuals who are experiencing an acute behavioral health stressor that impairs the individual's capacity to cope with his/her normal activities of daily living. The goal of the Crisis Observation Center is to offer a place for individuals to seek crisis intervention services and stabilize them quickly so they can return to the community. The length of stay is up to 23 hours. Services offered include a nursing assessment, care/service coordination, crisis intervention therapy, and access to a psychiatric prescriber if needed. Staff include registered nurses, Master's level psychotherapists, psychiatric technicians, and care/service. These services are offered in a safe and supportive environment.

**Crisis Observation Center is open 24/7.**

**Located at Broadlawns Hospital (1801 Hickman Rd in DSM – West Entrance)**

**23 hour Crisis Observation Center - Phone: 515-282-5742**

See map for location



### Psychiatric Urgent Care Clinic for Adults:

Will accept walk-in appointments for individuals who are experiencing an exacerbated mental health condition. Services at the clinic include mental health assessments, medication management, therapeutic counseling and coordination of services for healthcare and basic needs. **Broadlawns located at 1801 Hickman Rd in DSM – West Entrance). Hours are 9am-7pm, Monday through Friday. Serves ages 18 and older. Phone: 515-282-5742**

### Psychiatric Urgent Care Clinic for All Ages:

Services include, but are not limited to Mental health services, Psychiatric evaluation and assessment, Addiction medicine, Crisis services and Community resources. Onsite coordination for additional interventions will be coordinated with Eyerly Ball Community Mental Health Services, Orchard Place Integrated Health Program and other behavioral health agencies in central Iowa.

**UnityPoint Health located at 1250 East 9<sup>th</sup> Street in DSM. Hours Mon-Thurs 9 AM to 7 PM, Fridays 9AM to 5PM. Serves all ages. Phone: 515-263-2632**

### 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

[www.weareherewithyou.com](http://www.weareherewithyou.com) and [www.mindspringhealth.org](http://www.mindspringhealth.org)

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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 5<sup>th</sup> 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 60<sup>th</sup> St. in WDSM. Phone: 515-343-1200**

**MercyOne Emergency Department located at 1111 6<sup>th</sup> Ave in DSM. Phone: 515-247-3211**

**MercyOne Emergency Department located at 1755 59<sup>th</sup> 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 6<sup>th</sup> Avenue and 100 beds on the Clive /West campus at 1450 NW 114<sup>th</sup> 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 (JMHP) 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](https://jmhcp.org/?mc_cid=ab7143ba77&mc_eid=8c7240f0ab&mc_cid=e77ac0c82e&mc_eid=8e60d646c9)

## **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](https://www.epilepsy.com).

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

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

[www.weareherewithyou.com](https://www.weareherewithyou.com) and [www.mindspringhealth.org](https://www.mindspringhealth.org)

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## Suicides in Iowa 2000-2023 Opioid and Suicide Deaths in Iowa 2016-2023

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			
228	2022	588	As of 12-31-22			
19	2023	66	As of 2-28-23			

### Peer Support resources available statewide

#### Abbe Statewide Warm Line

A Peer Support Specialist is always available by phone, 365/24/7. On demand, no scheduled appointments.

[844-775-9276](tel:844-775-9276)

#### Rhonda's House Peer-run Respite

- Rhonda's House Peer-run Respite
  - Guests receive recovery support from trained and caring peer staff members for up to 7 days in a home like environment.
  - Located in DeWitt-available to anyone throughout the state.
  - <https://lifeconnectionsrecovery.org/services/rhondas-house/>
- Virtual Recovery Center
  - Join for Virtual Wellness any time 5 pm-10 pm M-F or 12 pm - 5 pm on the weekends.
  - Specific groups run 5:30 - 6:30 pm M-F or 12:30 pm -1:30 pm on the weekends.

<https://lifeconnectionsrecovery.org/services/virtual-wellness-recovery/>

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

A sobering center is anticipated to open in 2024 in a building to be renovated at 1914 Carpenter Ave.



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

- July 18 – 1:30 – 3:00 pm – Polk County River Place

Intercept 1 – February newsletter  
Intercept 3 – April newsletter

Intercept 2 – March newsletter  
Intercept 4 – May 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, Intercept 1, Intercept 2, and Intercept 3.

Intercept 4 of the Sequential Intercept Model focuses on when an individual is transitioning from jail or prison back to the community.

Following are the key elements for Intercept 4:

**Transition Planning by the Jail or In-reach Staff:** The Polk County Jail has a reentry coordinator that assists individuals with mental illness. This individual works with community-based Service Coordinators to make sure services and supports are in place prior to reentry.

**Medication and Prescription Access Upon Release from Jail or Prison:** Each individual that is released from jail is eligible for up to six months of free behavioral health medications. The individual needs to go the Broadlawn Behavioral Health Urgent Care where they will be assessed and enrolled in the program through SafeNetRx.

**Warm Hand-offs from Corrections to Providers Increases Engagement in Services:** Best practice is where a community-based worker who has provided in-reach provides transportation directly to services rather than being released to the streets.

**Benefits and Health Care Coverage Immediately Following or Upon Release:** The State of Iowa allows for Medicaid health coverage to be suspended instead of ending coverage when someone is in jail. This allows for quicker access to medication and needed services.

**Peer Support Services:** This is the area that Polk County needs to do better. We do not have any peer supports in our reentry programs. We know peer support is important and we can do better.

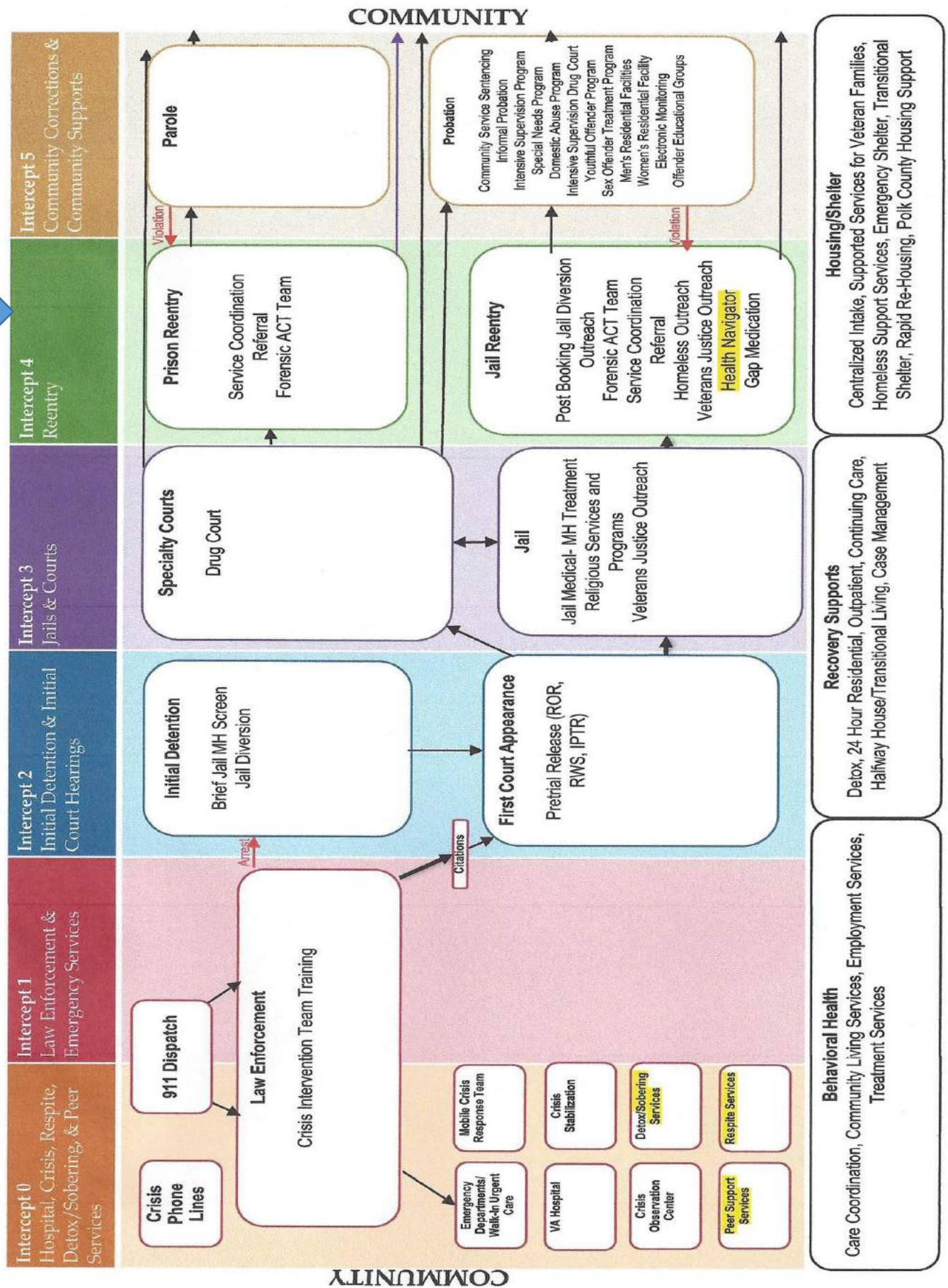
**Reentry Coalition Participation:** Polk County also does not have a Reentry Coalition. We need to look further into this key element for the future.

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.

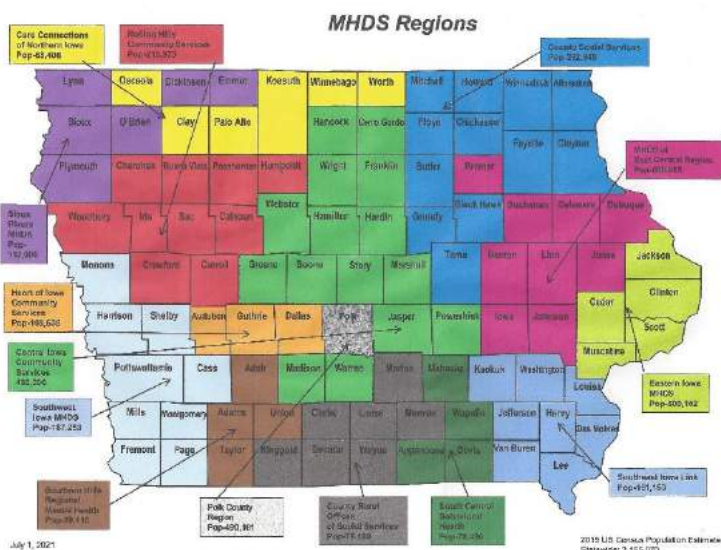
[www.weareherewithyou.com](http://www.weareherewithyou.com) and [www.mindspringhealth.org](http://www.mindspringhealth.org)

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# Polk County Sequential Intercept Model









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](http://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](mailto:aroberts@heartlandfamilyservice.org)

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

Your community is here for you.



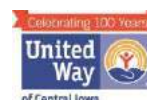
[brainhealth-now.org](http://brainhealth-now.org)



We are currently seeking volunteers to facilitate 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](mailto:volunteer@mindspringhealth.org)

[www.weareherewithyou.com](http://www.weareherewithyou.com) and [www.mindspringhealth.org](http://www.mindspringhealth.org)

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## Autism Now Affects 1 In 36 Kids, CDC Says

Disability Scoop

Autism rates across the country continue to climb, but for the first time, the demographics of children diagnosed with the developmental disability are starting to shift in a big way, according to new data from the Centers for Disease Control and Prevention.

A [report](#) out Thursday in the federal agency's Morbidity and Mortality Weekly Report shows that 1 in 36 children, or 2.8%, have autism.

The new estimate is based on information gathered on 8-year-old children in 11 communities in 2020 by the CDC's Autism and Developmental Disabilities Monitoring, or ADDM, network.

Results from a [similar analysis](#) released in late 2021 that was based on data from 2018 had pegged autism prevalence at 1 in 44 kids. By comparison, in 2000, the rate was 1 in 150.

"We suspect this is due to increased awareness, leading to more children being identified with autism," Dr. Karen Remley, director of the CDC's National Center on Birth Defects and Developmental Disabilities, said of the increase.

To assess autism prevalence, clinicians searched records to identify children in the communities studied who have been diagnosed with autism by a local health care provider or who have been classified as having the developmental disability by the special education system.

Notably, the latest data revealed big changes in the demographics of children with autism. For the first time ever, the percentages of Black, Hispanic and Asian or Pacific Islander 8-year-olds with autism were higher than white children, which CDC officials said may be a sign that efforts to improve screening, awareness and access to services among traditionally underserved populations are working.

But, Black children with autism were still more likely than those from other groups to have co-occurring intellectual disability.

Remley was quick to point out that the data is not representative of the entire U.S., but she noted that "we observed consistent patterns across the 11 ADDM communities."

The report also marks the first time that the autism rate among 8-year-old girls has exceeded 1%, though prevalence among boys remained four times higher.

Across the communities studied, autism prevalence ranged from 1 in 43, or 2.3%, of children in Maryland to 1 in 22, or 4.5%, in California. CDC officials said that could be due to differences in how communities are identifying children on the spectrum.

Alycia Halladay, chief science officer at the Autism Science Foundation, said the new data suggests that there is better awareness of autism, particularly among minority communities. But, given that a large percentage of Black children with autism also had intellectual disability and likely had more pronounced symptoms, she said that "there is still a way to go."

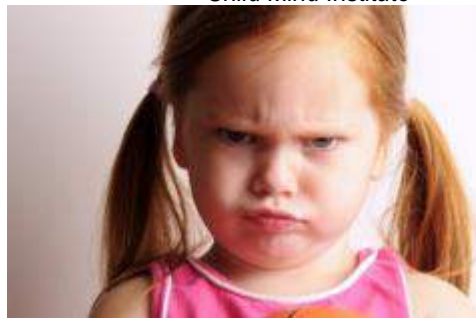
"The numbers are moving closer to numbers obtained in South Korea, which screened all kids in schools. However, we cannot rule out that some of the rise may be due to more cases," Halladay said.

The CDC also released a [separate report](#) Thursday looking at 4-year-olds in 2020 in the same 11 communities. It found that children who were age 4 in the early months of the COVID-19 pandemic were less likely to be evaluated for or identified as having autism as compared to the 8-year-old children when they were the same age.

"Disruptions due to the pandemic in the timely evaluation of children and delays in connecting children to the services and support they need could have long-lasting effects," said the CDC's Remley. "The data in this report can help communities better understand how the pandemic impacted early identification of autism in young children and anticipate future needs as these children get older."

## What is Social and Emotional Learning?

Child Mind Institute



Social and emotional learning (SEL) is a term for the way children acquire social and emotional skills. It includes things like managing difficult emotions, making responsible decisions, handling stress, setting goals, and building healthy relationships.

Social and emotional learning is often assumed to happen naturally in the course of a child's development without being taught. But when children don't master these skills, they often develop behavior problems that, in turn, can interfere with their functioning in school and their ability to learn.

That's why programs that teach social and emotional skills are now taught in many schools, from pre-kindergarten all the way through high school.

"When kids don't know math, we teach them math — we don't punish them for not knowing how to do math," explains LaKisha Hoffman, MSW, a social worker and a Senior Director of School and Community Programs at the Child Mind Institute. "But when kids don't know how to regulate themselves, we punish them for misbehavior."

Instead, she says, we want to teach kids the skills they're missing — to fill those gaps so they'll be able to manage their emotions, get along with other kids, and succeed in school.

"These are not things that humans naturally just know," adds Caroline Mendel, PsyD, a clinical psychologist and Senior Director of Clinical Services, School, and Community Programs at the Child Mind Institute. "They do need some explicit instruction and then ongoing reinforcement."

### What are the basic social-emotional skills?

One widely used framework for SEL is the CASEL framework, named for an organization that introduced the term SEL over two decades ago. (CASEL stands for the Collaborative for Academic, Social, and Emotional Learning.)

According to the CASEL framework, there are five interrelated areas of competence that makeup SEL:

1. **Self-awareness:** The ability to identify and recognize one's own emotions and thoughts and understand how they impact behavior.
2. **Social awareness:** Having empathy and respect for others and the ability to take on different perspectives.
3. **Responsible decision-making:** The ability to make ethical, constructive choices about personal behavior and social interactions.
4. **Self-management:** Being able to manage one's emotions and impulses, manage stress, and set personal goals.
5. **Relationship skills:** Having the capacity to establish and maintain healthy, supportive relationships.

### Why is SEL beneficial for children?

It's been shown that SEL can help children feel [more confident and happy](#) in the classroom and in life in general. [Research shows](#) that SEL consistently has positive effects on students' success — from their academic performance and behavior to their ability to manage

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stress.

[Other research](#) has shown that these long-term benefits are consistent across demographic groups — meaning that SEL instruction can support the positive development of children from diverse backgrounds and geographies.

There is also evidence that [SEL supports educational equity](#) and classroom inclusivity. “When I talk to parents and school leaders,” Hoffman adds, “it’s clear that another benefit they see from students engaging in SEL is a sense of belonging.”

### What does SEL look like in the classroom?

Educators usually integrate SEL into their curricula through both explicit instruction on the competencies and, equally importantly, through ongoing reinforcement of these skills.

Explicit SEL instruction might include lessons on how to identify and label your feelings, build your emotional vocabulary, consider other people’s perspectives and experiences, and brainstorm solutions to problems.

But then, the key to effectively teaching SEL competencies is reinforcing these lessons every day in the classroom. “It’s not about a standalone activity,” explains Dr. Mendel. “It’s about having a school culture that’s committed to engaging in social-emotional learning — where it’s infused into every day, with repetition of the lessons and skills.”

For example, while teaching children a lesson on conflict resolution is important, so is coaching them through conflicts when they happen in real-time — reinforcing those skills and giving them a safe space to practice them.

“It’s not always activity-based,” Hoffman says. “It’s thinking about what skills they need to know and how to engage in conversations about them. When they’re doing things that cause harm to other people, you’re practicing, ‘How did that make someone else feel?’ to build empathy. It’s taking the times that they don’t do things right as teaching moments.”

SEL programs in schools are often structured across three tiers based on children’s needs. Tier one is the standard program, taught to all students, with the aim of helping them develop the competencies and prevent behavioral or emotional problems from developing. Tier two is for children who haven’t responded to tier one and show some signs of risk, such as behavioral issues, social difficulties, or academic struggles. Tier three is for students who require more intensive support, potentially through individualized counseling or a [behavior intervention plan](#).

For parents interested in learning more specifics about how evidence-based school programs are rooted in research, the CASEL website provides a lot of information on [SEL in the classroom](#).

### How can parents support their child with SEL at home?

Parents are their child’s first teachers, and how they model and reinforce SEL competencies at home is essential to kids’ social-emotional development. And if they work in partnership, families, and schools can learn from each other about what works best for each individual child.

“I think the partnership between parents and schools is really important,” Hoffman says. “There are skills that students are learning in school that they can apply at home, and there are things at home that are working really well for parents — that they may not even define as an SEL skill — that they can communicate with teachers.”

For example, a parent could share with the teacher that taking a moment to meditate or focus on deep breaths helps their child handle emotions at home and see if there’s a way to integrate that practice into the classroom when needed.

“We have to really value the expertise of the home, as well as the school,” concludes Hoffman.

For resources on supporting social-emotional development at home, the site [Confident Parents Confident Kids](#) has a lot of helpful books, games, and more.



### RESEARCH WEEKLY: Climate Change and Serious Mental Illness

By Elizabeth Sinclair Hancox

(March 22, 2023) Climate change refers to long-term shifts in temperature and weather patterns on our planet, either naturally occurring or from unnatural causes. In many parts of the world, climate change has resulted in more extreme weather and hotter-than-average temperatures.



In early summer 2021, Vancouver, British Columbia experienced an unprecedented heat dome where temperatures reached more than 110 degrees Fahrenheit in a region that rarely sees that high of temperatures and where most homes do not have air conditioning. This was the deadliest extreme weather event in Canada’s history and more than 600 people died.

In an analysis of the individuals that died heat-related deaths during this period, the Government of British Columbia found that individuals with severe mental illness were especially at risk. In fact, people with schizophrenia had more than four times higher risk of dying during the heat dome. People with other types of serious mental illnesses and substance use disorders were also at risk, according to the BC government’s analysis of the death records.

### Comparing heat dome to typical weather deaths

To better understand the health conditions that might put people more at risk of dying during extreme heat events, researchers compared the health records of individuals that died during the heat dome to those that died during previous summers with more typical weather. This case control analysis included 678 people who died during the heat dome and almost 25,000 people who had died in previous summers.

While statistically controlling for factors such as age, socioeconomic status and others, the researchers examined the odds of dying during the heat dome compared to previous summers for people with various health conditions. The conditions that put people at highest risk for death during the extreme heat event include:



- Schizophrenia: 4.67 times higher risk
- Substance use: 1.54 times higher risk
- Depression: 1.54 times higher risk
- Mood/anxiety disorders: 1.39 times higher risk

### Why are people with serious mental illness disproportionately impacted by climate change?

The fact that people with serious mental illness had one of the highest risks for death during the heat dome in British Columbia is in line with other emerging themes of the analysis: social deprivation and isolation were significant contributing risk factors to heat-related deaths. For example, the vast majority of the deaths of individuals during the heat dome occurred inside and in homes that did not have air conditioning. Protective factors include being in some type of long-term care where there are others checking in on your well-being, as well as greenspace. In fact, with every 5% increase in tree cover, there was a 9% decrease in risk of dying during the heat dome, according to the results.

Because extreme heat events are predicted to continue, the BC government is working to prepare residents for these types of events and to reduce the disproportional risk on people with serious mental illness. Preparations include working with the local weather stations to educate the public about extreme heat events and their dangers and partnering with local community organizations to reach individuals most at risk.

### References

- [BC Centre for Disease Control Grand Rounds](#). (2021, November) *Presentation*.
- St. Denis, J. (2021, November). [Who died in BC's Heat Dome?](#) *The Tyee*.

*Elizabeth Sinclair Hancq is the director of research at Treatment Advocacy Center.*

### What is CRUSH of Iowa?



CRUSH of Iowa is a community based non-profit organization that is focused on providing support, resources, education, and referrals for individuals whose lives have been impacted by **substance use disorders** of all types.

CRUSH provides a multiple pathways approach where the key question is, "What does recovery look like to you?" CRUSH of Iowa was built on the premise that there is more than one way to recover and that when the recovery community, including family and friends, self-help groups, treatment providers, community programs and agencies, come together, a connection is made that greatly enhances the chances for long term recovery.

Crush Iowa provides many services including weekly support groups inspired to foster community and encourage healthy coping skills, prevention training and community presentations intended to educate and empower communities, along with resources to assist in locating treatment and support services for yourself and others.

<https://www.crushofiowa.com/>

### Did You Know?

Nationally, neglect is the most common form of abuse. Three-fourths (More than 75%) of victims were neglected, 16% were physically abused, 9% were sexually abused, and 0.2% are sex trafficked.

### Child Abuse Facts

1 out of 3 girls and 1 out of 5 boys will be sexually abused before they reach age 18.

### Prevent Child Abuse Iowa

The Iowa Child Abuse Prevention Conference is [May 9-10, 2023](#). The conference will be held in person at the FFA Enrichment Center in Ankeny and there is also a virtual option!

### Incarcerated Women and Girls

#### *The Sentencing Project*

The Sentencing Project released a report documenting over a 525% increase in the women's imprisonment in the United States between 1980 and 2021. The report, [Incarcerated Women and Girls](#), is the latest in a series of publications highlighting the 50-year legacy of mass incarceration in the United States as part of The Sentencing Project's [50 Years and A Wake Up](#) campaign.

While more men are imprisoned than women, the rate of growth for female incarceration is twice as high as that of men since 1980. In 2021, almost 976,000 women were under supervision of the criminal legal system. The report's additional highlights:

- In 2021, the imprisonment rate for Black women (62 per 100,000) was 1.6 times the rate of imprisonment for white women (38 per 100,000).
- Latinx women were imprisoned at 1.3 times the rate of white women (49 vs. 38 per 100,000).
- The rate of imprisonment for Black and Latinx women has declined since 2000, while the rate of imprisonment for white women has increased.
- Idaho has the highest rate of incarcerated women, while Massachusetts has the lowest.
- 58% of imprisoned women in state prisons have a child under the age of 18.
- Black and Native American girls are much more likely to be incarcerated than Asian, white, and Latinx girls.
- Over one-third of incarcerated girls are held for status offenses, such as truancy and curfew violations, or for violating the terms of their probation.

As this year marks fifty years since the United States began its dramatic increase in imprisonment, it is clearer than ever that this is not working. The continued overcriminalization of women and girls does nothing to improve public safety, but needlessly destroys lives, families and communities.

### The Future of Prisons

#### *CURE National*

In a recent NY Times opinion [piece](#), The Marshall Project's founder and editor-in-chief, Bill Keller, writes of how European systems of corrections should serve as a model for the future.

He points out how our system is failing, "Each year more than 600,000 individuals are released from state & federal prisons. Far too many of them emerge from custody brutalized, alienated, estranged from their families, stigmatized and lacking in basic education or employable skills. Unsurprisingly, about 3/4 of those released from state prisons nationwide are arrested again within five years."

Clearly, our system isn't working. These European models emphasize rehabilitation and education over punishment.

Build lives, not prisons!

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## Large Genome Study Finds a ‘General Addiction Risk Factor’ Commonly Inherited Across Multiple Substance-Use Disorders

*Brain and Behavior Research Foundation*

In recent years, studies involving large numbers of individuals have identified numerous locations in the human genome where commonly occurring variations in DNA sequence are associated with significantly increased risk for specific disorders involving the use of alcohol, nicotine, cannabis, and opioids.

Now, an international team of over 150 researchers, including many who have been supported by BBRF grants, has reported the identification of 19 DNA variants that are commonly inherited by individuals across these four substance-use disorders, irrespective of the specific substance used. The team describes this signal from the genome as a “general addiction risk factor,” and notes that it likely applies to addiction to substances in addition to those at the focus of their study.

The team was led by Alexander S. Hatoum, Ph.D., of Washington University, St. Louis.. The team’s results were published in *Nature Mental Health*.

The study, based upon a meta-analysis (a study of past studies) involving over 1 million individuals of European ancestry and over 92,000 of African ancestry, also succeeded in identifying genome variations specific for risk of disorders involving use of alcohol (9), tobacco (32), cannabis (5), and opioids (1).

In 2021, according to the National Institutes of Health, over 46 million Americans age 12 and older had at least one substance-use disorder, of whom only 6.3% received treatment. In the same year, an estimated 107,000 Americans died of drug overdoses. While substance-use disorders are known to be heritable, they are also known to be influenced by complex interactions among multiple genes and environmental factors.

The advent of genome-wide association studies (sometimes called “GWAS” studies) has enabled researchers to begin to understand where to look in the genome for vulnerabilities, which in turn provide potential insights for future treatments.

Some of these insights are obtained by considering the biological functions associated with genes and genomic locations that have been linked in GWAS studies with heightened substance-use risk. In the newly published finding of a general addiction risk factor in the genome, the researchers found that variations in several genes affecting the regulation of the neurotransmitter dopamine are linked with cross-substance vulnerability in those who carry these variations.

Past research has identified the role of dopamine in the brain’s striatum as being central in positive drug reinforcement. The gene encoding the DRD2 dopamine receptor, in addition, has been found to play a role in reward sensitivity and may also be important in the brain’s executive function, the researchers wrote. “The interplay of reward and cognition is likely relevant throughout the course of addiction,” they noted. Their findings, they said, “reinforce the role of dopamine signaling in addiction.”

Regarding the substance-specific genetic signals they found, the team said they fell into three broad categories: genes having a role in drug-specific metabolism, drug receptors in nerve cells, and general neurotransmitter mechanisms.

The analysis also highlighted “the robust genetic association” of the general addiction risk factor “with serious mental and bodily illnesses.” One interesting finding was that the general addiction risk signal was more strongly associated with using drugs to cope with problems such as anxiety or depression than with those disorders themselves. The analysis “suggests that correlations between substance-use disorders and mood disorders may partially be attributable to a [genetic] predisposition to use substances to alleviate negative mood states i.e., self-medication,” the team wrote.

“Substance-use disorders and mental disorders often co-occur, and we know that the most effective treatments help people address both issues at the same time,” said **Joshua A. Gordon M.D., Ph.D.**, the Director of the National Institutes of Mental Health and a two-time BBRF grantee and member of BBRF’s Scientific Council. “The shared mechanisms between substance use and mental disorders revealed in this study underscore the importance of thinking about these disorders in tandem.”

One of the next steps in the genomic study of substance-use risk, the team said, was to include much larger and more diverse study populations in the analytical cohort. The African ancestry component of the current study was about 9 percent of the size of the European cohort, and may have been too small to detect robust genomic risk signals specific to that population. Additional populations from across the globe should be part of future studies, Dr. Hartoun said.

**Nora Volkow, M.D.**, Director of the National Institute on Drug Abuse, and a BBRF Scientific Council member, commented: “A better understanding of genetics brings us one step closer to developing personalized interventions that are tailored to an individual’s unique biology, environment and lived experience in order to provide the most benefits.”

## Interested in bringing a Brain Health Retreat Room to your school or organization?

<https://www.brainhealth-now.org/retreat-room>

Brain disease is not a choice.

1 in 5 people have experienced a brain health issue in their life. That’s over 482,00 Iowans.

60% of adults and 50% of youth between the ages of 8 and 15 avoid treatment or don’t ask for help with brain health issues.

82% of people with brain health issues do not confide with their co-workers or employees.

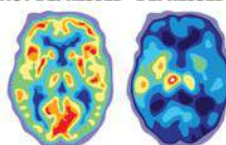
Brain health disorders are misunderstood. That’s why we need to reframe how we talk about them.

We all need to be mindful about our reactions, conversations and words when talking about brain health.

Our brains are organs and can get sick, too, so think about the words we use.

We need to treat brain health issues the same way we treat cancer, heart disease, diabetes and any other physical disease.

NOT DEPRESSED DEPRESSED



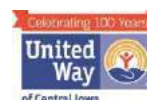
**THE BRAIN CAN GET SICK TOO!**

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# Creating a Brain Health Retreat Room<sup>SM</sup>

The Brain Health Retreat Room creates a place where high school students and staff can feel comfortable and safe. A place where their feelings, thoughts, and problems are accepted without judgment and with encouragement to learn new self-regulating techniques.

**Self Regulate.  
De-escalate.  
Educate.**

## Outcomes

- **Prioritize brain health services for them.** Students can then be referred to the health office or the counseling office, better ensuring the safety of all students.
- **Provides students with the support of trained professionals within the school building** who can assist with specific skills and coping strategies.
- **Funds and organizes necessary training and resources to faculty and staff** in the building to further support brain health needs, focusing on teamwork, and collaboration to support students.
- **Helps students build resilience, engage in restorative behaviors, and practice mindfulness,** individually and in groups through relaxation practices, and conflict resolution.

## Staffing

The Brain Health Retreat Room is staffed by someone certified in brain health education at the master's level. This liaison assists with strategies, coping skills, assessments, and other activities that students will be doing to process through their feelings. If staff feels that further intervention is needed, a school counselor will be called in to meet with the student. Liaisons in these rooms will also be able to recognize if students would benefit from additional brain health resources and will provide information for outside help.

## Benefits

### Provides early intervention.

Early intervention is proven to be much more effective than waiting.

### Aids transitioning students.

Helps with transitions from inpatient hospitalization, treatment, or other long-term care, which is often difficult for students.

### Supports under-served communities.

Supports communities in need that may have barriers to accessing resources.



## Interested in developing a Brain Health Retreat Room at your school?

### Dubuque, Iowa

Hempstead High School  
Senior High School  
Holy Family Schools  
Alta Vista Campus High School

### Hazel Green, Wisconsin

Southwestern Middle and High School

### Potosi, Wisconsin

Potosi High School

### Schools in Progress:

Ames High School – Ames, Iowa  
Ottumwa Schools – Ottumwa, Iowa



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Axios photo

(MCRT). The team expanded in July to include mental health clinicians who could respond to 911 calls as an alternative to police, a service known as the Crisis Advocacy Response Effort (CARE).

CARE resolves some cases with as little as a phone conversation and follow-up to keep situations from escalating.

**By the numbers:** The CARE unit responded to 805 calls through March. Nearly 400 other situations were handled via dispatch and follow-up calls rather than by officer responses.

**What they're saying:** The response needs of someone having a mental health crisis are generally far different than someone with criminal intent, Sgt. Lorna Garcia tells Axios.

Dispatchers and police are increasingly being trained to recognize the differences and rely on the mental health teams in situations when public safety or human life is not in imminent danger, Garcia says.

Cumulatively, the mental health teams respond to more than 400 calls each month with fewer than five ending in arrests, Garcia says.

That's because the counselors help diagnose things like psychosis and can offer health care as an alternative to being booked on charges like trespassing.

Of note: DSM's program is modeled after one in Austin, Texas. DSM pays Broadlawns almost \$328,500 annually for the MCRT and CARE services and its current agreement continues through June 2026.

**What's next:** Garcia predicts CARE responses will escalate in coming months as dispatchers become more familiar with the team and its new capabilities. CARE's expansion to metro areas is possible in coming years, she adds.

## The National Imperative to Improve Nursing Home Quality

National Academy of Sciences

The Committee on the Quality of Care in Nursing Homes was charged with examining the ways in which the United State currently delivers, finances, measures, and regulates the quality of nursing home care. After a thorough review of the evidence, the committee arrived at seven (7) overarching conclusions.

**First, the way in which the U.S. finances, delivers and regulates care in nursing home settings is ineffective, inefficient, fragmented and unsustainable.** Despite significant measures to improve the quality of care in nursing homes in the Omnibus Budget Reconciliation Act of 1987, too few nursing home residents today receive high-quality care. Moreover, too many nursing home workers, surveyors and others do not receive adequate and appropriate support to fulfill their critical responsibilities. Furthermore, since 1987, the acuity level, comorbidity burden and the sophistication and complexity of care needs of nursing home residents have increased markedly, but staffing requirements and regulations have not kept pace.

**Second,** the committee concluded that **immediate action to initiate fundamental change is necessary.** The situation in nursing homes was dire prior to the arrival of the COVID 19 pandemic. The pandemic amplified the significant long-standing weaknesses in nursing home care. Even prior to the pandemic, the quality of care in nursing homes was neither consistently comprehensive nor of high quality. Regulations in place for 35 years have not been fully enforced, further amplifying residents' risk of harm.

**Third,** the committee concluded that federal and state governments, nursing homes, health care and social care providers, payers, regulators, researchers and other need to make clear **a shared commitment to the care of nursing home residents.** No single actor or interested party will be able to ensure high-quality nursing home care on their own. It will depend on collaboration.

**Fourth,** the committee emphasizes that extreme care needs to be taken to ensure that quality improvement initiatives are implemented using strategies that **do not exacerbate disparities in resource allocation, quality of care or resident outcomes** (including racial and ethnic disparities), which are all too common in nursing home settings. While recommendations are intended to improve health equity, the committee cannot emphasize strongly enough the critical importance of close and systematic monitoring for potential unintended consequences.

**Fifth, high-quality research is needed to advance the quality of care in nursing homes.** Much of the available research relies on retrospective designs and is constrained by limited available data on nursing home care.

**Sixth**, the committee concluded that the nursing home sector has suffered for many decades from both underinvestment in ensuring the quality of care and a lack of accountability for how resources are allocated.

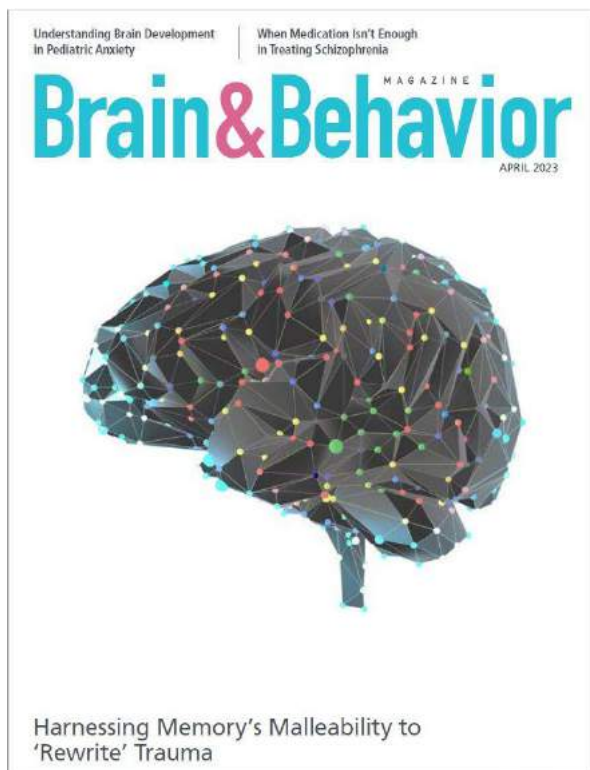
- Low staff salaries and benefits combined with inadequate training has made the nursing home a highly undesirable place of employment.
- Inadequate support for oversight and regulatory activities has contributed to the failure of state survey agencies to meet their requirements in a timely manner.
- Quality measurement and improvement efforts have largely ignored the voice of residents and their chosen families.
- Lack of transparency regarding nursing home finances, operations and ownership impedes the ability to fully understand how current resources are allocated.

**Seventh**, therefore, as a final overarching conclusion, the Committee notes that all relevant federal agencies need to be granted the authority and resources from the United States Congress to implement the recommendations.

**Note from Editor:** *The Iowa Capital Dispatch routinely includes articles about the deficiency of nursing homes, the cost to residents and families, and increasing closures. Since Oct 2022, there have been over 34 articles.*

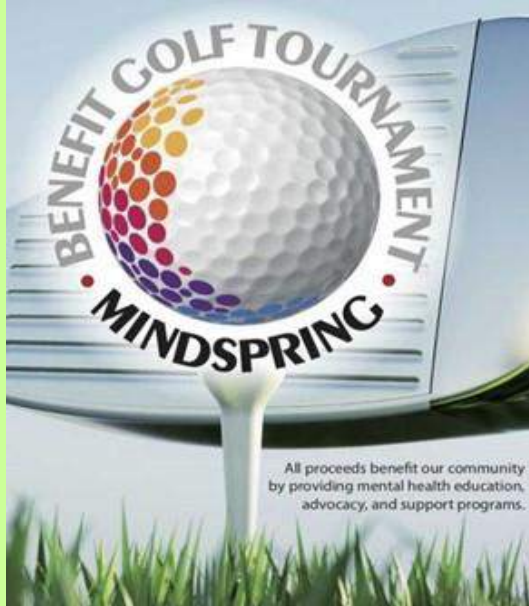
### Did You Know?

Non-elderly unhoused people have 3.5 times higher mortality than housed people, according to University of Chicago researchers, who say their work is the first national calculation of mortality for unhoused people in the United States.



[April 2023](#) issue of *Brain & Behavior Magazine*.

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Join us on Friday, **September 22nd, 2023** for the Mindspring annual golf tournament.

\$400 per foursome includes 2 carts, 18 holes, and lunch on the course. Registration at 9:00am and shotgun start at 10:00am.

Terrace Hill Golf Course, 8700 NE 46<sup>th</sup> Avenue, Altoona

[Register Your Team Here](#)

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- \$500 Amateur Sponsor
- \$250 Spectator Sponsor
- \$200 Family Sponsor

[Click here for a list of sponsorship opportunities and benefits.](#)

Last year, Mindspring was able to connect with 360,610 community members, deliver 171,238 newsletters, answer 1,899 referral requests, provide 2,993 educational opportunities, give 7 trainings to police officers and dispatchers, and develop a new children's resource which has sold over 159 copies!

Mindspring is on a trajectory to exceed these numbers and create even more resources this year, but we can't do it without your help! It may seem early, but we are determined to make this year's tournament the best it's ever been and you can help make this happen.

Your sponsorship allows Mindspring to reach hundreds of thousands of people, provide education to people all around the world, and most importantly carry out our mission each and every day to empower community members through mental health education, advocacy, and

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**mindspring**  
MENTAL HEALTH ALLIANCE



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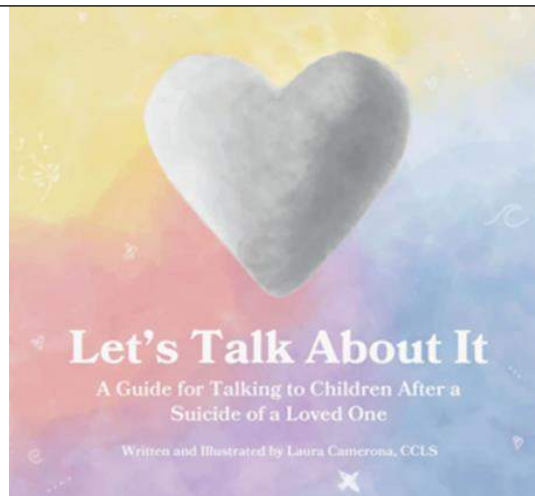
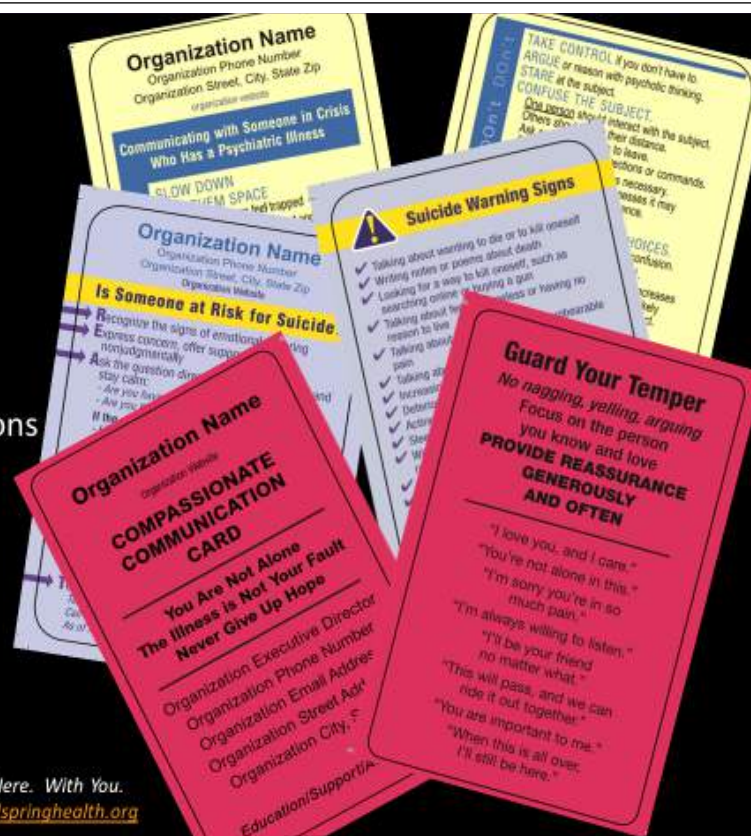
## Communication Pieces

1. Virtual community education classes
2. 'We Are Here. With You' Covid response platform
3. Virtual Workplace education classes
4. 24/7 on-demand courses and presentations
5. Monthly newsletter
6. Three Crisis Cards (*available for sale*)
7. Website
8. Social media
9. Information and Referral Warm line
10. Quarterly Community Conversations

Support groups, Children's Book

*We are Here. With You.*

[www.mindspringhealth.org](http://www.mindspringhealth.org)



This book gives adults the words to talk to kids after the death of a loved one by suicide.

Honest and simple explanations help children make sense of what has happened. Supportive phrases and suggestions in this book can help children find coping skills, people to talk to, and words to describe their feelings.

This book gives families the words to use after loss. It can be used as a tool in therapy or with grief groups.

**Available for purchase through Amazon Prime \$11**

**To purchase, go to:**  
[View Our Crisis Cards \(mindspringhealth.org\)](http://www.mindspringhealth.org)

**Click on the card link to purchase**

**Personalize with your organizational contact information.**

Cards are available in English and Spanish

Shipping costs are included in the purchase price

*The 3 cards have been copyrighted.*

[www.weareherewithyou.com](http://www.weareherewithyou.com) and [www.mindspringhealth.org](http://www.mindspringhealth.org)

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



MindSpring Mental Health Alliance  
511 E. 6<sup>th</sup> St., Suite B  
Des Moines, Iowa 50309

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#### CALENDAR OF EVENTS

**Wed., May 10 - Mindspring Board Meeting**

*Jan, Mar, May, July, Sept., Nov*  
Location: 511 E. 6<sup>th</sup> St., Suite B, DM  
4:30 to 6 PM

**Community Impact Officer-** Michele Keenan  
515-850-1467

[mkeen@mindspringhealth.org](mailto:mkeen@mindspringhealth.org)

**Director of Special Projects –**

Kristi Kerner 515-850-1467

[kkerner@mindspringhealth.org](mailto:kkerner@mindspringhealth.org)

**Program Coordinator -Zoe Bardin**

[zbardin@mindspringhealth.org](mailto:zbardin@mindspringhealth.org)

515-850-1467

**Development Director –** Francis Boggus

-----**Mindspring Board of Directors**-----

**President** Matt Connolly 515-975-9600

**Past President** Ashley Adams

**Vice-Pres** Mike Webster

**Treasurer** – Matt Pick 515-222-2377

**Secretary** – Staci Burr

**Board members**

Teresa Bomhoff [tbomhoff@mchsi.com](mailto:tbomhoff@mchsi.com)

James Crosby

Ian Fitzsimmons

Allyne Smith

Andrea Brown

Jessica Haggerty

Mitch Smith

Brock Milligan

Kristin Kuykendall

*If you are interested in Board membership -*

*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](mailto:kkerner@mindspringhealth.org)*

*We See You. We Accept You. We've Got You.*

<https://www.mindspringhealth.org>

Facebook: @mindspringinfo

Instagram: @mindspringinfo

Twitter: @mindspringinfo

TikTok: @mindspringinfo

**How can you help individuals with mental illness and their families?**

**Volunteer** – Join a committee!!

Advocacy and Outreach, Governance,

Membership, Education & Support,

Fundraising and Finance

**Tax Deductible Donations**

**Who do you contact at Mindspring?**

**Contact: Community Impact Officer -**

Michele Keenan- 515-850-1467

[mkeen@mindspringhealth.org](mailto: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](mailto:kkerner@mindspringhealth.org) 515-850-1467

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

**The 2023 Golf Tournament will be Friday, Sept 22, 2023**

**Ways to Donate to MindSpring**

-- Cash, Check

-- Credit/Debit Card on-line at 'Donate' on our website

--Through Employee Giving programs or Direct Donation programs such as United Way  
-- MindSpring Endow Iowa Fund

**Facebook** – MindSpring has been granted verified N/P status and can now solicit donations.

**In estate planning,** designating a donation to MindSpring can be made in your will.

[www.weareherewithyou.com](http://www.weareherewithyou.com) and [www.mindspringhealth.org](http://www.mindspringhealth.org)

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