



Mental Healthwise

Quarterly Newsletter

Summer 2008

MENTAL HEALTH AMERICA OF NORTHEAST GEORGIA presents

Addressing the Caregiving Crisis

-Rosalynn Carter

Public health is the science and art of preventing disease, prolonging life, and promoting physical and mental health. What we are beginning to see is that success in any one of these areas raises new challenges and presents new problems for us to solve in the other areas. For example, advances in science, better nutrition, and improvements in health care have allowed people around the world to live to unprecedented ages. But this blessing of long life presents us with a new set of formidable challenges: soaring rates of dementia and untreated mental health problems among the elderly, a growing burden of chronic illnesses that affects our communities, disturbing problems of elder abuse, and an unparalleled demand for the services of both professional and family caregivers. All progress comes with costs and challenges, but in the 21st century we will experience this burden on a scale and at a speed that we have never seen before. So, we must prepare ourselves.

I am particularly interested in two issues in this unfolding scenario: mental health and caregiving. When addressing chronic diseases, we must not forget the importance of depression, particularly late-life depression. Depression frequently accompanies chronic illnesses, sometimes emerging as a result of them and other times acting as a risk factor for other illnesses. In either case, depression substantially and independently increases the risk of mortality.

My interest in caregiving goes back to my childhood. I was deeply influenced by how chronic illness affected and shaped my family and by the heroic and selfless efforts of health care providers, including Jimmy's mother, Lillian Carter. She was among the most dedicated and skilled nurses imaginable, and I was in awe of her as I observed the expert care she provided. The type of assistance that Lillian provided as a nurse is increasingly being provided today by family members. In fact, the backbone of our country's long-term, home-based, and community-based care systems is the family caregiver. The approximately 15 million caregivers in the United States provide \$306 billion worth of unpaid services each year (3). That amount is almost twice as much as is spent on homecare and nursing home services combined (\$158 billion) (4). The number of family caregivers is likely to increase in the upcoming years, as is the intensity of these caregivers' work, not only because of our country's aging population but also because of the changing fabric of our family networks. With the aging baby boomer population, the life expectancy and quality of life in the United States cannot continue to rise, or even remain stable, without increasing the burden on caregivers. But the strains on our society and on these individuals as a result of providing care are becoming apparent:

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Mental Health: Progress in a Sentient Discipline

by Douglas (Doug) W. Bower, Ph.D., L.P.C., R.N.

Recent articles in many sources have drawn attention to the ongoing problems of mental health care in our area and around the country. It is also important to claim the progress in this field.

I was not privy to personal contact of the problems of mental health care before the 60s. However, the movie such as "Amadeus" and "The Music Lovers" gave at least a Hollywood version of the prison and dungeon like conditions of mental health care in previous centuries.

My personal experience with mental health began when I was a nursing. There was virtually nothing in my training that turned my stomach. The only occasion that I ever felt sick was the first time I walked into a state mental health facility in Florida. It was lunch time. The slop that was being fed to the patients turned my stomach.

The "back wards" were still in existence. Stories of restraints, electric shock treatment, and straight jackets were still part of the late 60s treatment. In the early 70s, I took a position in a psychiatric unit in Kentucky. I saw first hand as persons recovered from electric shock treatment. It was a treatment that I really never appreciated.

By the late 70s, I was working in Atlanta. There were no electric shock treatments taking place in the facilities I worked in. Instead, medication was more predominant. We didn't use straight jackets either, though there was a padded isolation room. Staff was present with a patients in the isolation room during a patient's difficult time of being out of control.

In the 2000s, it is important to note that medical advances have made it possible for patients to remain in the community. They can stay at home, or half way houses. There are those who can hold jobs that in previous generations could not have. A wide variety of services are available through the private sector and through State supported programs.

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Caregiving Crisis (continued from cover)

A 25-year body of research shows that family caregivers are at risk for a wide range of problems in health and mental health, finances, employment, and retirement. For instance, a recent study found that one-third of family caregivers of people with dementia were depressed (5).

Caregivers experiencing strain have a 63% higher risk of mortality than noncaregivers, even when adjusting for chronic disease and other risk factors (6).

Family caregivers are largely neglected by the health and long-term care systems. They frequently are not trained on how to deliver complicated care, not treated as partners in the patient's care, or not encouraged to maintain their own health.

Professional caregivers work under difficult conditions and are vulnerable to many of the same problems as family caregivers.

The cost to U.S. businesses attributable to the lost productivity of working caregivers is estimated at between \$17.1 billion and \$33.6 billion per year and growing (7).

To address this "caregiving crisis," all sectors of society must come together to develop solutions. A broad and coordinated response should address workforce development, community planning, and caregiver education and support, including regulatory and financing issues, more effective use of technology, and development and dissemination of evidence-based practices in caregiving. Building an infrastructure of supports for caregivers will improve caregiver effectiveness and reduce the harm, injury, and burden that can be associated with caregiving in isolation. Most importantly, I believe there must be a fundamental shift in how we value and support caregivers.

I have had a unique opportunity to address the caregiving crisis. With the assistance of many partners, the Rosalynn Carter Institute for Caregiving at Georgia Southwestern State University in Americus, Georgia, was created. Our hope is to play a key role in developing better supports for both family and professional caregivers. As part of our work, we have developed a network of community coalitions (CARE-NETS) that provides a forum for addressing the needs of caregivers in a concerted and coordinated way. In 2007, we launched a new venture. With the support of Johnson & Johnson, the National Quality Care Network (NQC) was formed to serve as a vehicle for innovation, dissemination, and networking, and to stimulate partnerships for action in our communities. The aim of the NQC is to support a network of stakeholders in the United States committed to promoting quality in long-term, home-based, and community-based care. Working together with scientists and leaders from many fields, I am very optimistic about our prospects for building communities of care to address the challenges that come with the gift of an aging society.

For more information about the Rosalynn Carter Institute visit www.RosalynnCarter.org

Author Information

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Annual Celebration Yields Increased Awareness for Mental Health America of Northeast Georgia

Civic clubs, public libraries, and the media took part in Mental Health America of Northeast Georgia's "May is Mental Health Month" activities. Director Eddie Whitlock says that there was great interest from the ten counties they serve. "It proved there is a growing recognition of the importance of mental health."

The celebration kicked off with participation in the Human Rights Festival in downtown Athens on May 3rd and 4th. The Festival, itself celebrating thirty years, was an ideal venue for sharing information and recruiting membership. Throughout the month, mental health professionals from Advantage Behavioral Health Services assisted MHANEGA by conducting presentations in the ten-county area.

Katie McFarland and Keisha Buynitzky covered the topic of "Depression in Teens" for an audience in Watkinsville at the Oconee County Public Library on May 6th. Dr. Cindy Darden spoke on "Dealing with Grief" at the Walton County Public Library in Monroe the following day.

In Memorium



John Duncan Odom III
1946-2008

John was a prolific painter who used vivid colors and bold imagery to share his fantastic inner visions. A freethinker and fervent advocate of personal rights and individual freedoms, John was an active supporter of several charitable organizations including Mental Health of America of Northeast Georgia, The Wall of Tolerance, and Doctors Without Borders.

John's lifelong struggle with untreated anxiety and depression made him acutely aware of the battle against bias and prejudice that all marginalized groups face.

John Duncan Odom, III, died at his home in Athens, Ga. on Monday, June 2, 2008. In addition to his mother, Anneliese and his brother, Frank, John is survived by his son, Michael Odom, who lives in Athens with his wife Katharine, and his daughter, Dr. Dana Odom Barnes, who resides in Ormond Beach, Fla. with her husband Chuck and John's one year old granddaughter, Carly.

John will be remembered as a passionate artist, a thoughtful idealist and a perpetual optimist. A more honest or loyal man would be difficult to find. He was a loving son, brother and father. He will be deeply missed.

Thoughtfully prepared by his daughter, Dr. Dana Odom Barnes.

GO TO OUR WEBSITE FOR NEW INFORMATION REGARDING FAMILY SUPPORT, DEPRESSION SIGNS, CARING FOR AN AGING PARENT, AND MORE.

Celebration

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Dr. Elizabeth Stewart presented "Depression in Seniors" at the Oconee County Public Library on May 15.

In addition to the ABHS staff presentations, Whitlock gave a program on "Mental Health and Aging" at the Morgan County Public Library on May 19. He also presented general mental health information to the Kiwanis Club of Monroe on May 15 and the Oglethorpe County Rotary Club on May 23. Area radio stations aired public service announcements throughout the month, informing the public of upcoming events. On Wednesday, May 7, Whitlock was the guest on "The Dottie Coffman Show" on WIMO in Bethlehem. Carol Cousins de Reyes also appeared on that program. She oversees the state's "What A Difference A Friend Makes" project.

During the week of May 19 - 23, the Athens-Clarke County Public Library was the site for an information/membership recruitment display. The display was hosted by members of the Peer-to-Peer group at Advantage's North Avenue location in Athens. Whitlock thanked these consumers with a cook-out held on May 29.

A highlight of the month-long celebration was the appearance of the "Kids on the Block" puppets at the Athens-Clarke County Public Library on May 14. Puppeteer Lorie Summers attracted more than 70 audience members for a fine performance centered around reducing the stigma of mental illness. Summers did a repeat performance on May 28 for the children who take part in the programs offered at Advantage's Dougherty Street location.

Whitlock reported that he was pleased overall with the events. "We touched many people with our activities during the month. We anticipate that May will serve as a springboard for further educational and advocacy efforts in our ten-county area."

Mental Health America of Northeast Georgia serves Athens-Clarke, Barrow, Elbert, Greene, Jackson, Madison, Morgan, Oconee, Oglethorpe, and Walton Counties.

-Eddie Whitlock, Executive Director, MHANEGA

Progress

(continued from cover)

It seems very important to highlight the progress of mental health care. The problems that exist will not be ignored, but consumers can't possibly trust mental health care if they just keep hearing the negative stories. I can't imagine any business telling their customers how awful it is. Instead, a good business talks about its benefits, and fixes its problems.

Some years ago I read a story of a young man who went into the mountains to explore. While there, he saw an eagles' nest which had eggs. Unfortunately, he took one of the eggs. On returning to his home, he went into the field and found the nest of a prairie chicken. He put the egg in the nest to see what would happen. Well the egg hatched with the other eggs in the nest. Naturally, the eaglet was a monster in that setting. But it was tended to by the prairie chickens. But as it grew, it learned how to behave and eat like a prairie chicken.

One day, it looked up into the sky. It saw a bird soaring in the heavens. "Wow! What is that?" it asked an elder prairie chicken. "It is beautiful." "Why, that's an eagle, one of the most powerful and magnificent birds of the bird kingdom," said the elder. "But don't you worry about it. You'll never be like that bird." So the eaglet grew up living and dying thinking it was a prairie chicken. It never learned how to fly and soar. No one believed in it or encouraged it. It was surrounded by "you can't" all its life.

I don't know how constant criticism of the mental health discipline helps people feel confident about using mental health to improve their lives. It is imperative to believe in people and systems, not without question, but to encourage people. It has been my experience as a counselor, psychotherapist, and pastoral counselor, to see people grow in change in relationship to positive environments rich in optimism. This has also been my experience in working with institutions. Positive change takes place in positive environments. This positive environment is not in denial about problems, but engages those problems with a certain optimism. It says in part, by working together we can address the problems and find solutions.

Doug Bower is a licensed professional counselor and elder in the United Methodist Church. He maintained a small counseling practice in the Athens area until recently. He also held a position as adjunct faculty at Fort Valley State University from 1999-2005. Presently, he serves as pastor of the Bishop Circuit of the United Methodist Church. He is also specializing in peak performance consultations for athletic programs. He is a Fellow and Life Diplomat in the American Psychotherapy Association.

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Name: _____

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_____ \$250.00 Corporate

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_____ \$500.00 Lifetime Individual

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