

COMMEMORATIVE ISSUE

Fall/Winter
2017

NORTHWESTERN
COUNSELING
& SUPPORT SERVICES

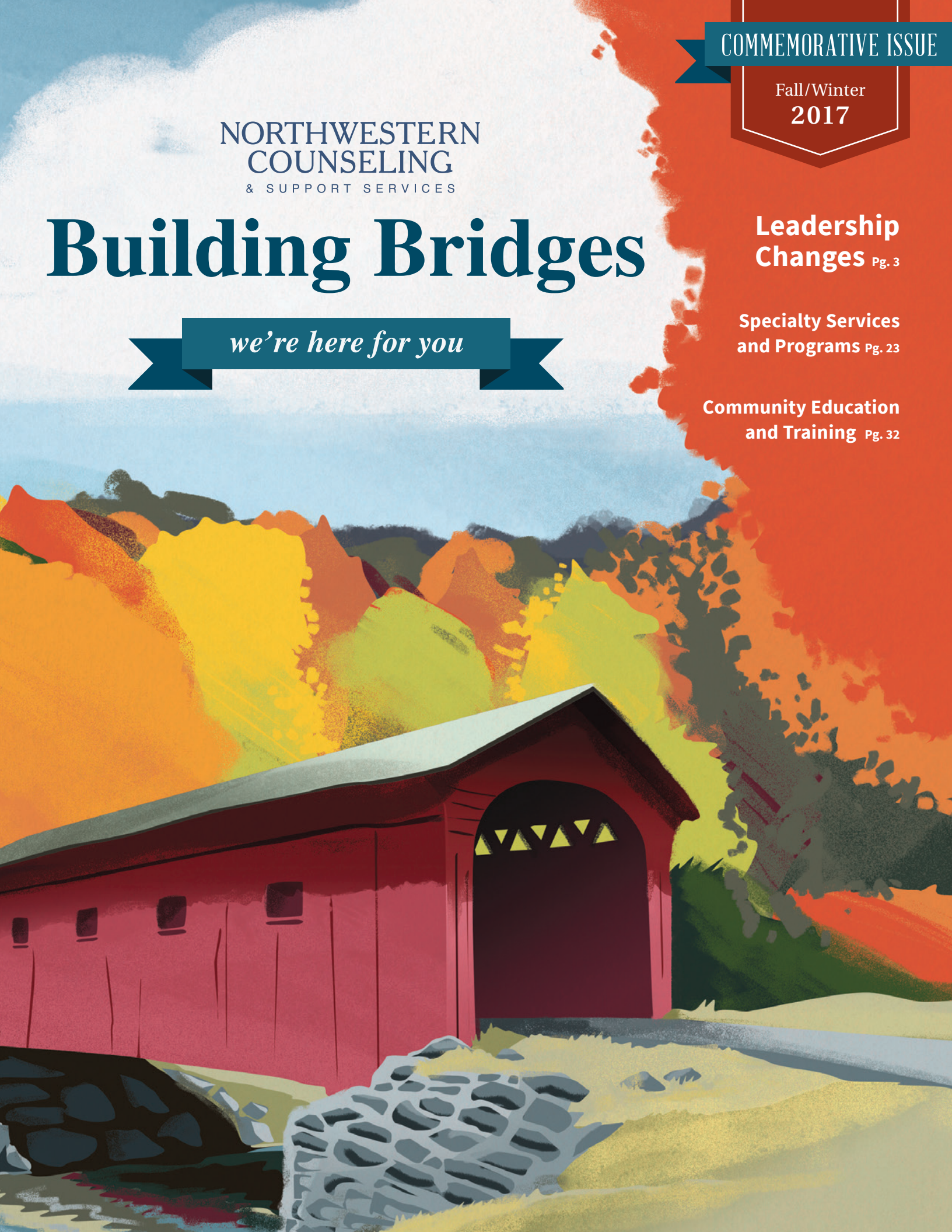
Building Bridges

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Our Mission is to ensure that the residents of Franklin and Grand Isle Counties have access to high quality services, which promote healthy living and emotional well-being.

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NCSS is a private, non-profit, human services agency serving Franklin and Grand Isle Counties.

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Behavioral Health Services • Children, Youth & Family Services • Developmental Services.

Joseph Halko, Director of Community Relations
www.ncssinc.org

Letter from Our Executive Director

Did You Know?

Every month, over 2,000 people from across our community access NCSS for help. Our strong community partnerships and models of integrated care help people to access the support they need.

Sometimes, people come to our main office to access a therapist, apply for child care financial assistance, or attend a class on Mental Health First Aid. However, the vast majority of people access NCSS supports outside of our four walls. Access to needed care often starts with our collaborations with Health Care Providers, Law Enforcement, and local schools. Through strong partnerships with the Northern Tier Center for Health (NOTCH), Northwestern Medical Center and Franklin County Home Health, our community has developed an integrated model of health care. We have social workers embedded within 100% of the Patient Centered Medical Homes. In addition, NCSS has partnered with law enforcement to provide proactive mobile crisis support side by side with responding officers. And, we have over 150 employees working in partnership with educational teams to help students succeed in school.

As we work together to envision a system of care that works better for those we serve, it is crucial that we elevate the principle that healing and recovery happen when there is continuity in the relationship between an individual and the team that supports them.

Sincerely,



Todd Bauman

Executive Director



TED MABLE

A LIFE, CAREER, AND CULTURE WORTH CELEBRATING

— WRITTEN BY MEREDITH VAUGHN, NCSS —

“

I'M SORRY, WHAT WAS THE QUESTION?"

TONY APOLOGIZES THROUGH A SERIES OF SMILES AND SMALL SPURTS OF LAUGHTER. "JUST REMEMBERING..." TONY TREANOR, FORMER HUMAN RESOURCES DIRECTOR AT NORTHWESTERN COUNSELING & SUPPORT SERVICES (NCSS), RECALLS THE EARLY DAYS OF WORKING WITH TED MABLE, NCSS' EXECUTIVE DIRECTOR WHO RETIRED IN JUNE AFTER NEARLY 20 YEARS.



Tony chuckles about past planning meetings, the opening of The Family Center, and golf tournaments that have come and passed. Tony becomes lost in his catalog of memories—he worked with Ted for nineteen years, after all—but he quells his laughter and tells me about Ted's ceaseless passion to excel, a trait that has fueled Ted since the start.

From 1962 to 1966, Ted attended college by day, and by night, he worked at IBM in Essex Jct. as the Quality Control Manager. During his years at St. Michael's College in Colchester, he also fell in love with a young woman named Patty (who happened to grow up next door to his grandmother, but

that's a story for a different day). After graduating in 1966 with a degree in sociology, Ted left his IBM job to become a teacher and counselor for the Sacred Heart School system in Newport. Tony didn't meet Ted until 1998, but after nearly two decades of working with him, Ted's history has emerged clear. "He has always been tremendously passionate about those who do not have voices in their communities," says Tony. "He took a big pay cut for that job [at Sacred Heart] but he followed his heart."

The next two years were full of changes for Ted: he continued his education, working toward a master's degree in education (counseling) from

St. Michael's. In 1968, he and Patty were married and their son, Rich, now a loan officer in Boston, was born. Ted received his advanced degree, propelling him to his next career as Director of Counseling at Lake Region Union High School in Orleans, a post he held until 1970, when he became Associate Principal at Union-32 in East Montpelier, Vermont. In the years following, he served as principal of South Burlington Middle School; the assistant superintendent of schools in Burlington; and an adjunct professor of management in the MSA graduate program at St. Michael's, a position he continued for 34 years. Ted also earned a Certificate of Advanced Study from the University of Vermont in counseling

and administration (1974), and his pursuit and love for knowledge didn't slow down here.

His daughter Katie, now a team leader at NCSS, was born in 1978, the same year that Ted completed his degree at Boston University as a Doctor of Education. The trend in Ted's life is fairly clear: opportunity and motivation; this trend continued in 1979, when Ted was selected by Governor Richard Snelling to enroll in the residential post-doctoral senior executives program at Harvard University. At night, Ted studied, and on weekends he traveled home to Vermont to see his wife and kids. "Sometimes when I was at parties, I would sneak off to an empty room and go to sleep," he admits, nearly whispering. "That was hard. Worth it, but hard."

Until 1982, Ted served as the Deputy

"Con" Hogan, a current member of the Green Mountain Care Board, entered his position as Secretary of the Vermont AHS in 1991, Vermont was in the middle of a recession. Con was a newbie to the AHS and Ted proved to be an invaluable guide and friend to him. "He saved the agency," Con says, recalling Ted's federal money hunt that resulted in securing funds to help cover the budgetary cuts. Even after all these years, there is a sense of relief in Con's voice as he recalls Ted's success. He perceives Ted as a true renaissance man, citing his three fundamentally different careers and his expertise and dedication to each of them.

It was in 1998 that Ted retired from the AHS and returned to the community that once served him to accept the position of executive director at NCSS. "I wanted the opportunity to go back to

Albans. These facts seem even more special now, considering how integrated NCSS is in the community. NCSS currently has partnerships with 84% of the schools in Franklin and Grand Isle Counties and has provided over 89,000 hours of care for area students in these counties in the form of therapy, home/school coordination, substance abuse treatment, behavioral supports, and alternative education supports. Ted has always been open to partnering with others and always stirred by the idea of integration.

Recognizing a need and addressing it: Ted claims this has been the most rewarding part of his job. His wealth of education and experience allowed him to grasp the value of partnerships from different angles: the school systems—small and large—and the state system. When Ted talks about partnerships in the community, it's all about the people served. Integration into primary care, for example, allows for a warm handoff between provider and social worker. Placing supports directly in healthcare offices normalizes mental health care into the environment, says Ted. NCSS is currently embedded in 100% of patient centered medical homes (primary care practices) in the area; in the Emergency Department at Northwestern Medical Center; in the St. Albans City Police; and the Vermont State Police.

Con says Ted's greatest attribute has always been his ability to take an idea and work it through. "So many new ideas come and go in the human services and the mental health arena," Con says. "Ted has the ability to respond to those ideas and he holds the fundamental belief that if you can measure something, you can improve it."

Jesse Bugbee, a member of the NCSS Board of Directors since 2013 and president since 2015, says one of Ted's greatest accomplishments is the manner in which he expanded the



Secretary for the Vermont Agency of Human Services (AHS); he then moved into the role of Director of Policy Research and Planning. In this role, Ted was instrumental in developing the Success by Six early childhood initiative that still exists today. When Cornelius

my home town. I wanted the chance to get things done and I felt I could do that as executive director," Ted says. Ted's father was a conductor on the railroad—an industry at the heart of the city—and Ted and his little brother attended school at St. Mary's in St.

reach and effectiveness of NCSS—in the number and size of facilities and also in the amount of quality programs that were introduced in Ted's tenure.

Since the beginning of his career at NCSS, Ted set out to develop a positive work culture; he believed that if NCSS were an enjoyable and rewarding place to work, it would attract aspiring, self-enforcing staff. Today, 55 teams across the agency—each with a designated team leader—allow for all staff to feel as though they have a direct ear for concerns, questions, and ideas.

“

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The turnover rate was high in the beginning, Ted notes, and he aimed for a time when he could regularly promote from within the agency in addition to finding top talent from outside. “Staff always has to feel like the work is challenging. When you feel like you’ve mastered something, you’re going to move on,” he says. “In order to keep quality staff, we need to give them opportunities to constantly learn something new. If you want good

people, you have to attract them,” Ted said.

Ted's inspiration was ignited after attending a presentation about the Disney model of management, and he made it his mission to pass the message along to his team. For two intensive days at a training in Boston, the NCSS management team learned about climate and values and the significance of culture in the workplace; they also learned how to develop a mission, a set of values, and how to reinforce these through Human Resources practices and hiring.

Value. It's a powerful word for Ted and it means more than one thing at NCSS. Value of services. Value of clients. Value of staff. It's about the small things. As a staff member, I appreciated the holiday cards that were hand delivered in December and inscribed with a message from Ted. I admired that Ted's office door was always open, so any staff walking by could pop in to grab a candy bar or catch a quick listen to Frank Sinatra who was inevitably crooning from the stereo in the corner of the large, U-shaped, wooden desk. I love the laid-back sunny atmosphere at the agency barbeque, an annual staff event held on the green of The Family Center. Ted could often be seen wearing an apron and a cap, flipping burgers at the over-sized grill. The annual barbeque is one of the events that make NCSS such a special place to work for the staff of nearly six hundred employees. It is one thing to like your job, but it's certainly another to feel as though your workplace is a kind of home, and your colleagues a kind of family. These feelings are a testament to Ted and the environment he created at NCSS. His compassion for his staff is certainly just one piece of his impressive legacy.

I asked him to remember those few early moments, what it felt like to set



out on his long journey as executive director. Did he feel at all nervous of what stretched ahead of him? By watching his eyes, I could tell he was sifting through those early days when he had just arrived at the agency to which he bid farewell. “All I saw was opportunity,” he says wistfully. In that respect, not much has changed. He still sees nothing but opportunity for NCSS; but this time around, it is up to the next executive director to lead the way. As he spoke, he glanced over to his shelves full of books about leadership, culture, positive psychology, moral character, and the power of virtue. The stacks seemed to offer a history of their own; each volume stippled with underlined passages and scribbled notes in the margins, all tiny displays of Ted's ceaseless dedication to education, self-enforcement, and the desire to be a better person for his community.

“All along, I was always looking ahead to the next thing. It goes so fast.” He smiled slightly. Although NCSS and all it represents will likely never be far from his thoughts, I'd venture to guess that when Ted is out there on the golf course, lining up his shot for the next green, he'll be happy to just enjoy the moment. ■

TONY TREANOR

HUMAN RESOURCES DIRECTOR RETIRES



Tony Treanor, long-time Human Resources Director at Northwestern Counseling & Support Services retired in December, 2016 after sixteen years in the director's seat.

The human resources (HR) department has undergone some significant changes since Tony assumed the director's chair in 2000. The HR department was once located in a quiet hallway on the east wing of the building, an area now home to the office of the CFO and the Director of Operations. The agency was much smaller then, and the department consisted of Stacey Remillard (now the new HR director), one part-time staff, and Tony. The team has grown considerably—to fit the size of the growing agency—and now is structured for six full-time staff.

Ted Mable, long-time executive director of NCSS who retired in July, has always admired Tony's safe and gentle leadership style. In Ted's view, the NCSS human resources department has often seemed more like a guidance department—rather than some more typical HR departments—in the way that Tony and his staff provide supportive and thoughtful advice to staff across the agency. The department has always carried out the typical responsibilities of payroll, benefits, staff support, and training, but they do much more than that. Human Resources staff offer support to new employees, guiding them through the intricacies of the agency's organizational structure and culture. "It was wonderful to support the

people to do the real important work,” says Tony.

There is a great deal of upward mobility within NCSS; employees are often promoted to leadership roles from within; for these staff assuming new roles, Tony and his team were available to offer guidance in navigating the waters of management. “Tony sees the good in all people and truly strives to bring out the best in those he leads.

over his tenure, he and his team did a tremendous job hiring selfless and motivated employees. “Tony often sees things in a way that others don’t,” says Ted. “Tony helped me see what was best for the agency.”

Tony started his career at NCSS in 1998—at that time, the agency was Franklin Grand Isle Mental Health. After three years as team leader, Tony noticed a position had opened up as

of these difficult conversations have a significant impact on people’s lives. Tony strove for a fair process over the years, but this side of his job was hard. “Tony approached everything with heart,” says Stacey, “and a heavy one in the tough situations.”

Stacey, who worked with Tony for almost his entire career in HR, was selected as the new HR director. She feels that working alongside Tony for all these years gave her some valuable tools to be an effective manager. “Tony influenced me to be a better person who tries to find the good in every situation instead of looking for the ‘wrong versus right’ answer. He always encouraged me to be the best I could be both personally and professionally and that is something I will take and share with others,” says Stacey.

At the start of 2017, Tony stepped down as director and began working part-time leading a committee in finding a new executive director. Upon the hiring committee’s recommendation, the Board of Directors selected Todd Bauman, director of Children, Youth & Family Services, to assume the executive director role in July 2017.

Tony’s humor is certainly missed around the office; no one can quite compete with his quick quips and perfect puns. But the hundreds of staff who have received support from Tony over his time at NCSS can relax knowing that his sense of humor and genuine compassion will instead be shared with his family, including his three young grandsons. ■

“ TONY SEES THE GOOD IN ALL PEOPLE AND TRULY STRIVES TO BRING OUT THE BEST IN THOSE HE LEADS. HE IS SOMEONE YOU CAN CONFIDE IN BOTH PERSONALLY AND PROFESSIONALLY.

- STACEY REMILLARD

He is someone you can confide in both personally and professionally,” Stacey says, “and you don’t have to worry about being judged.” The HR suite provides a warm, inviting atmosphere, one that has always felt welcoming should an employee wish to pop in and ask a member of the HR team a question.

The HR department is also on the backend of all hiring within the agency. Tony took a great deal of pride in finding the best people to carry out the agency’s mission. Tony always recognized the good the agency can do collectively;

the director of human resources. Tony applied for the position, and so began his journey as a member of the NCSS leadership team.

The ability to listen and speak objectively and without judgement is incredibly important in the HR field. While HR offers support in many positive situations, the HR department is also responsible for carrying out some of the most difficult conversations regarding staff conflicts, disciplinary actions, and terminations. Over his career, Tony delivered difficult news many times and he admits that it never got easier; many

TODD BAUMAN

NCSS SELECTS

NEW EXECUTIVE DIRECTOR



On March 1, 2017, the Board of Directors of Northwestern Counseling & Support Services, Inc (NCSS) selected Todd Bauman as the agency's next executive director. Starting in July, Bauman began following in the footsteps of Ted Mable, who served as the agency's leader since 1998.

Bauman was recommended to the Board of Directors by the hiring committee after a nationwide search and vigorous review of 68 applications. Bauman's 28-year career in mental health and government—twelve of which have been at NCSS as the director of Children, Youth & Family Services—has more than prepared Bauman to lead the organization. As

previous director of Children, Youth & Family Services, Bauman oversaw 280 employees providing developmental, mental health, and substance abuse supports to the people of Franklin and Grand Isle Counties. When Bauman began as director in 2005, the division employed 60 people. Bauman's collaboration with community and state partners allowed for the development of programs that serve children diagnosed with Autism; provide mobile outreach to children in crisis; meet the treatment needs of adolescents struggling with substance abuse; and provide home-based supports to new mothers. In addition, Bauman collaborated closely with area schools to develop positive behavioral supports that promote a culture of wellness. Bauman's ability to collaborate with community partners has allowed for innovative approaches to the way families access and receive services.

Before coming to NCSS, Bauman worked as Operations Chief for five years at the Vermont Department of Mental Health. He was responsible for bringing local teams together to promote community partnerships with the goal of providing an effective children's behavioral health service delivery system. While in this role, Bauman developed structures to assess outcomes and aggregate data across the Vermont system of care. Prior to working for the Vermont Department of Mental Health, Bauman was a crisis clinician through the Howard Center

“ BAUMAN'S ABILITY TO COLLABORATE WITH COMMUNITY PARTNERS HAS ALLOWED FOR INNOVATIVE APPROACHES TO THE WAY FAMILIES ACCESS AND RECEIVE SERVICES.

and managed a residential emergency and assessment program.

Bauman's vast clinical experience and education—he has a master's in clinical psychology from Saint Michael's College—is only part of what made him an ideal candidate for the role of executive director. Bauman is an experienced public speaker in a variety of settings, including academia and government; he will be a powerful and much needed voice for NCSS.

Bauman is also dedicated to his family including his wife Nicole, and two teenage children, Abigail and Owen. Both children belong to regional youth dance groups; he and Nicole spend much of their free time attending their performances. Bauman also enjoys camping, skiing, baseball and spending time with parents who recently moved to the area.

Bauman is poised to lead NCSS forward in the future so that it can continue to provide high quality services that produce excellent outcomes. ■

STACEY REMILLARD

NCSS SELECTS

DIRECTOR OF HUMAN RESOURCES



On January 2, 2017, Stacey Remillard became the Human Resources Director for Northwestern Counseling & Support Services (NCSS), replacing long-time director Tony Treanor.

It is fitting, and even heartwarming, that she replaced Tony, as she sat on the committee that hired him as the HR Director in 2001.

Remillard started her NCSS career with a short stint as medical transcriptionist and executive secretary, filling a temporary coverage need in 1998, before assuming the role of human resources coordinator. It was during this time that she immersed herself in the discipline of HR and

found her niche. In 2005, she entered the role of human resources manager. During her nineteen years in human resources, she has gracefully adapted to continual change, most notably the growth of NCSS as it transitioned from a small employer to the large, \$40M agency that employs nearly 600 people. Remillard developed and delivered a variety of trainings focused on topics of cultural competency; diversity; sexual harassment; recruiting and supervision. She executed all facets of payroll and benefit programs and has provided education and guidance of all aspects of human resources operations. She successfully led an organizational realignment effort and agency-wide conversion from a paper timesheet system to an electronic time and attendance program. Remillard has established processes to capture key metrics in order to gather an understanding of emerging cultures within the agency.

Remillard earned an associate degree in administrative management from Community College of Vermont and a bachelor of arts in business management from Johnson State College. Currently, she is enrolled in the master's in business administration program at Southern New Hampshire University with a projected graduation in 2018. She also has a Professional Human Resource (PHR) certification from the HR Certification Institute (2004), as well as a Society for Human Resources Management Certified Professional (SHRM-CP) designation

“HER PHILOSOPHY AS A LEADER IS ONE OF FAIR TREATMENT, TRANSPARENCY, AND ENCOURAGEMENT.”

(2015). Remillard is an alumna of the 2006 Franklin-Grand Isle Learning, Education, Aptitude, Development (L.E.A.D) Program, which was an endeavor to develop leaders within our local communities.

As director, Remillard oversees a team of four human resources professionals in various positions of recruiting, benefits, and payroll. Her philosophy as a leader is one of fair treatment, transparency, and encouragement. She believes that if leaders foster creativity and professional development, staff will feel empowered and engaged, thereby enhancing the organizational strengths. Remillard says she fell in love with human resources in her first few days on the job; she appreciates that every day is different.

Outside of work, Remillard enjoys being active, which includes playing on a women's hockey team, exercising, and conquering physical challenge courses. She and her husband have three children, all of whom play hockey; on any given weekend, Remillard could most likely be found sitting in the stands cheering on her kids' teams. She is thrilled about her new career move and excited about what the future holds. “I’m a very lucky girl,” she says. ■

DANIELLE LINDLEY-MITCHELL

NEW DIRECTOR FOR CHILDREN, YOUTH & FAMILY SERVICES



Danielle Lindley-Mitchell is the new director for the Children, Youth & Family Services Division at Northwestern Counseling & Support Services (NCSS).

The position became vacant when previous CYF director, Todd Bauman, accepted the position as NCSS' new executive director. Lindley-Mitchell (along with Bauman) shifted into her role on July 1, 2017.

Lindley-Mitchell entered the position with 13 years' experience in the human

services field, primarily in the children's system of care. From 2009 to 2017 she acted as the NCSS Parent Child Center Program Manager, a role in which she developed and oversaw all programs and activities of the NCSS' Parent Child Center, one of 15 Parent Child Centers in the state. In her new role as director, Lindley-Mitchell will be able to continue the great work she's been proud of for years—now, on an even larger scale. Prevention and population-based work has been paramount for Lindley-Mitchell, and as she takes on many new endeavors in her new role, she will remain focused on uncovering social determinants of health and supporting families in finding the right resources and services.

Lindley-Mitchell plans to lend her voice—as she has for years—to breaking down stigma, strengthening partnerships in the community, and finding creative ways to develop programs, despite limited funding. She is approachable and affable, traits that will serve her well in her new, more public position. Outreach and involvement are no strangers to Lindley-Mitchell; she serves on the Franklin County Promise Community Steering Committee, a grassroots and data-driven group dedicated to strengthening local resources and access for children and their families. Lindley-Mitchell is particularly proud to be a member

of the Vermont Parent Child Center Network Executive Committee and will continue to advocate and illustrate the importance of prevention and early intervention within the system of care. Lastly, Lindley-Mitchell is very grateful to be a graduate of the Early Childhood Leadership Institute through the Snelling Center for Government.

“ LINDLEY-MITCHELL PLANS TO LEND HER VOICE—AS SHE HAS FOR YEARS—TO BREAKING DOWN STIGMA, STRENGTHENING PARTNERSHIPS IN THE COMMUNITY, AND FINDING CREATIVE WAYS TO DEVELOP PROGRAMS, DESPITE LIMITED FUNDING.

This experience challenged Lindley-Mitchell to be reflective, build invaluable relationships, and gain a deeper understanding of effective leadership—all skills she carries into her new role.

Lindley-Mitchell has two young daughters of her own—Harper and Sydney—with her husband, Corey Mitchell. They relish the time that they can spend with extended family, having family dinners on the back deck. They enjoy spending time with friends, taking the family dog, Buddy, for long walks, and passing time at their family camp. ■

AMY JOHNSON

NEW PCC PROGRAM MANAGER



NCSS CELEBRATES ITS 60TH ANNIVERSARY IN 2018

We're pleased to announce that Amy Johnson joined the CYF Leadership Team as the Parent Child Center (PCC) Program Center Manager. Amy has 15 years of experience working with children and families. She is bringing a great deal of experience within the early childhood system of care and has been seen as a leader and true innovator in her role as Building Bright Future's Regional Coordinator and Early Childhood Resource Team Leader. Amy's experience around prevention and health care reform will be vital to the on-going work of the Parent Child Center and the agency. ■

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we're here for you

CHANGES IN PSYCHIATRY TEAM

THE PSYCHIATRY TEAM AT NCSS HAS RECENTLY UNDERGONE SEVERAL BIG CHANGES THAT ARE BOTH BITTERSWEET AND EXCITING.

THE DEPARTURE OF DR. PATUNOFF

After seven years as our Child Psychiatrist, Dr. Casey Patunoff decided to leave our NCSS Team. She jumped across the lake and accepted a position at CVPH. We wish her well and hope for great success as she transitions into her new role. As always, the safety and care of our clients is paramount; a cross-divisional team worked to assure a smooth clinical transition for the people she serves.



NEW ROLE FOR DR. SOBEL

Dr. Steve Sobel, after thirteen years, decided to step down as our Medical Director. He is looking forward to returning his focus to serving patients through his direct clinical practice at NCSS. We are excited to have Dr. Sobel in this role and think his shift in focus may allow us to explore creative psychiatric initiatives in the future.



DR. MOONEY NEW MEDICAL DIRECTOR

And finally, after a nine-year hiatus, Dr. David Mooney returned to NCSS assuming the role of Medical Director. Dr. Mooney has a long history with NCSS and we are very excited that he returned to our family on August 1, 2017.



We are incredibly excited about our entire team of psychiatrists and the role they play supporting the people of our community. We are lucky to have such a highly skilled team.

NATIONAL AWARENESS MONTHS

OCTOBER

- Down Syndrome Awareness Month
- Disability Awareness Month
- Traumatic Brain Injury Awareness Month
- Domestic Violence Awareness Month
- ADHD Awareness Month
- Bullying Prevention Month
- World Mental Health Day

NOVEMBER

- Family Caregivers Month
- Survivor of Suicide Day

DECEMBER

- International Day of Persons with Disabilities

JANUARY

- National Law Enforcement Appreciation Day

FEBRUARY

- Children of Alcoholics Week

MARCH

- Social Work Month
- Brain Injury Awareness Month
- Developmental Disabilities Awareness Month
- National Employee Appreciation Day

APRIL

- Autism Awareness Month
- Alcohol Awareness Month
- Child Abuse Prevention Month
- Counseling Awareness Month

MAY

- Mental Health Awareness Month
- Older Americans Month
- Teen Pregnancy Prevention Month
- Trauma Awareness Month
- Children's Mental Health Awareness Week
- Teacher Appreciation Week

JUNE

- LGBTQ Pride Month

Have you lost a loved one to suicide?

If you answered "yes", please consider attending a free, confidential group that meets monthly in St. Albans.

Everyone in the group, including its facilitators, have had someone close to them take their life and knows how devastating that experience can be. You can come and listen to others share what they are going through and how they are coping, or you can share your own story. The choice is always yours to do what feels right for you.

For information on dates, times and location,
or to answer any questions you may have

Call Tony at 802-393-6503

**NORTHWESTERN
COUNSELING**
& SUPPORT SERVICES

WELCOME TO *Minds & Matters*



Meredith Vaughn is the author of the Minds & Matters blog: ncssincvt.blogspot.com

MINDS & MATTERS IS FOR EVERYBODY

– Clients, staff, families, community members – and we invite you to join us. A blog post may focus on one of our programs here at NCSS, offer a discussion about a mental health article or issue, cast a glow on an inspiring story from our community, or provide tips and pointers for general health and well-being. It is NCSS' mission to build a stronger community; engaging in meaningful conversations can move us just a bit closer to our goal.

A SPECTRUM OF SERVICES

There are many types of autism and understanding of its causes and diagnoses have changed over time. In 2013, four diagnoses that were once separated in the Diagnostic and Statistical Manual of Mental Disorders (DSM) were combined into the umbrella diagnoses of Autism Spectrum Disorder (ASD) in the DSM-5. These four diagnoses were autistic disorder, childhood disintegrative disorder, pervasive development disorder-not otherwise specified (PDD-NOS), and Asperger syndrome. ASD is more prevalent in boys; the Centers for Disease Control and Prevention estimates the prevalence of ASD as 1 in 68 children in the United States.

Autism is a complex brain-based disorder that affects a person's behavior, social and communication skills. Symptoms can range from mild to severe and no two children with autism are exactly alike. Each person with autism, like all of us, has unique strengths and differences. Common problems exhibited by those with ASD

are difficulty in social situations; some never learn to speak, while others speak, but use language in unusual ways. Others are sensitive to loud noises or bright lights. There is no single treatment for autism, though many benefit from highly structured educational programs and other services. [You can visit our website for more information about these services:](http://www.ncssinc.org/children-youth-family-services/autism) <http://www.ncssinc.org/children-youth-family-services/autism>

If a child is diagnosed with autism, early intervention is critical to gain the maximum benefit from existing therapies. In addition, after children have been diagnosed by psychologists, developmental pediatricians, psychiatrists and neurologists, the need for treatment and services is abundant.

At NCSS, there are several programs designed to serve individuals with autism. The School-Based Autism Program assists local schools in providing effective, strengths-based interventions and programming for

students with ASD, intellectual and developmental disabilities and/or Down Syndrome. The program is based on the principals of Applied Behavior Analysis (ABA); students typically need a behavior support plan to help decrease maladaptive behaviors while increasing prosocial and coping skills.

We, at NCSS, believe that students, regardless of their abilities, belong in their local community schools. The school-based services include behavioral interventionists, available on a one-on-one basis; individualized services like this provide opportunities for students to maintain positive relationships with peers and access their education on a level that works for them. Behavior specialists, autism specialists, service coordination and case management are also available. The programming is flexible and the child drives the program, making service delivery unique and individually tailored.

The Program for Adaptive & Expressive Arts (PAEA) offers therapeutic and recreational music, art



and sensory exploration experiences to children and adults with autism and developmental disabilities as well as communication supports and socialization opportunities. Like the services within the School-Based Autism Program, PAEA sessions—private and group—are consumer-driven, allowing individuals to explore personal goals set by them and their support teams. Music, art and sensory exploration offer emotional, social, and physical benefits by facilitating creative expression, fine and gross motor skill practice, and stress reduction. The PAEA music and art room at The Family Center is brightly lit and filled with instruments and art supplies; the space invites creativity! The newly upgraded sensory room provides a relaxed space with a variety of sensory stimulators that can enervate or calm depending on the participant's needs. At NCSS' various events, such as the Buddy Walk and the Autism Walk, you can find the PAEA Team at their station, a large table full of instruments and sensory items. PAEA also offers workshops in cooperative play, family life and sexual health, American Sign Language (ASL) and Alternative and Augmentative Communications (AAC). There are seasonal concerts and recitals and art shows where everyone can show to the community-at-large what they've accomplished!

Camp Rainbow, a creative summer camp for children with autism or

other developmental disabilities, provides stimulating activities such as swimming, singing, crafts, outdoor play and more. Camp Rainbow incorporates sensory exploration, fine/gross motor skills, communication skills, academic skills and social skills into the activities each day. This year, Camp Rainbow will run from August 7-August 11, 2017 and be held at the Soar Learning Center. And who knows...there might be some surprises in store! [You can find registration information here: http://www.ncssinc.org/children-youth-family-services/camp-rainbow](http://www.ncssinc.org/children-youth-family-services/camp-rainbow)

The Applied Behavior Services team of Northwestern Counseling & Support Services provides treatment in the home, community setting, and in our new building, the Applied Behavior Center. Services are provided to children of all ages diagnosed with Autism Spectrum Disorder and other developmental disabilities using Applied Behavior Analysis (ABA). This

team adheres to best practices and ethical guidelines of ABA.

Each program is tailored to meet the needs of the individual child and their family, with a strong emphasis on specific skill acquisition, behavior, and communication. These skills are taught through ABA and B.F. Skinner's model of Verbal Behavior. Individual acquisition and behavior management programs are created from individual assessments.

Skills are reassessed frequently and progress is monitored and measurable via weekly data tracking. Teaching strategies and content are modified as needed to fit each child's needs and all teaching techniques are based on what research studies have proven to be the most effective. ■

PROGRAM COMPONENTS

- Functional language skills: vocals, sign language, picture exchange
- Reductive procedures for non-desired behaviors
- Video modeling
- Self-care: toilet training, tooth brushing, dressing, shoe tying
- Skill acquisition
- Social stories
- Social skills
- Consultative model consisting of parent training in ABA procedures

NCSS BELIEVES DAILY PROGRAMS FOR PEOPLE WITH AUTISM OR INTELLECTUAL AND DEVELOPMENTAL DISABILITIES SHOULD ALSO BE UNIQUE AND INDIVIDUALIZED TO EACH PERSON'S SPECIFIC NEEDS.

we're here for you

WHEN SOMETHING ISN'T RIGHT

Heather Wilson, Early Childhood Support Team Leader at NCSS, notes that many expectant mothers feel thrilled about the upcoming birth of their child; they expect motherhood will be fulfilling and sublime, but when the baby is born, they may not feel that way at all. Sometimes these upsetting thoughts or emotions can start during pregnancy. Mothers may experience depression, anxiety, Obsessive Compulsive Disorder or Post Traumatic Stress Disorder following a traumatic birthing experience. Feelings of depression, compulsion, or anxiety do not mean someone is a bad mother and they do not mean she doesn't love her baby. Every mother has her own story, says Heather. "We want [expectant and postpartum mothers] to know we're here to help. We want to be a source of light during a time of darkness and provide comfort to unsettling distress."

Anna Gabaree knew throughout her pregnancy that she was at risk for postpartum depression and anxiety, and she knew what signs to look for. As soon as her baby was born, she felt a change instantly, like something wasn't right. For Anna, the symptoms didn't manifest in depression—as most people might associate with struggling new mothers—rather, she feared for her baby's safety to a degree that was harmful. She would sit awake and stare at her daughter through the night fearing that something would go wrong and her baby would die. After feeding, Anna wouldn't allow herself to leave her baby's side for even a moment,

worrying that something terrible would occur in her absence. As her daughter grew a bit older, she felt intense anxiety that she was doing everything wrong: she hadn't read to her daughter enough; she hadn't cleaned up enough; she hadn't completed enough puzzles with her child. Like many mothers, Anna held it together at work and with her friends—people who saw her every day didn't even know anything was wrong—but on the inside, she was bubbling over with anxiety. On the day she found herself screaming into a pillow to release, she knew she needed to seek help.

As supervisor of the Northwestern Medical Center Birthing Center, Anna was in a knowledgeable position; she knew she was at risk and she also had an understanding of symptoms and the kinds of resources that could help. For expectant or postpartum mothers who are not as familiar, there are screening tools to help identify troubling feelings, like the Edinburgh Postnatal Depression Scale (EPDS) that is used at Northwestern Medical Center (NMC). The EPDS is a 10-question screening tool that asks mothers to consider their feelings over the week leading up to the test. It is intended to be administered with the mother privately; this way the mother has the best opportunity to feel comfortable being honest. The EPDS can reveal results that are then reviewed with the mother's provider, and referrals can be made from there. While referrals can come from anywhere, a majority of the

referrals to the NCSS Perinatal Mental Health Counseling program come from NMC do to their thorough screening process. The EPDS is conducted after delivery; in the two-three days that a mother stays in the NMC Birthing Center; two weeks after delivery; and again six weeks postpartum.

Sometimes, a mother in the birthing unit might feel like something is wrong, but she can't identify it. "It can be easy to brush off," Anna says. "But it's okay to say that. It's okay to say 'something isn't right. I'm not okay.'" When a mother does say this, Anna and the other nurses in the Birthing center might follow up with questions like, "Can you tell me more about that?" "What are you afraid of?" "What does it look like?" Expectant or postpartum mothers can speak with any of the nurses in the Birthing Center; the nurses can help attach vocabulary and understanding to feelings and also connect mothers with programming at NCSS that can offer further supports. It's important to have quick access to programs and support, says Anna. A mother experiencing these unsettling and forbidding feelings does not want to wait days to hear from a provider. Within hours, a mother can be referred to the Perinatal Mental Health Counseling program and feel like support is on the way.

The Perinatal Mental Health Counseling program is a unique one at NCSS. Expectant mothers or new mothers who may be experiencing troubling symptoms can receive



counseling in their homes from a traveling counselor: Jessica Dewes, Early Childhood Specialist. Packing up the car and driving to NCSS might not feel feasible for new mothers just adopting a routine at home. Jessica will sit amidst a pile of laundry, or push aside diapers and rattles to engage in a conversation. “Messses don’t matter,” she says, laughing, as though she is recalling messes in her own home that might invite judgement. Jessica can work with families and mothers to reduce symptoms so motherhood can feel enjoyable and fulfilling. Jessica is also able to make referrals to other programs for the family while she works with the mother; as can be expected, the entire family can be affected when one is struggling with a mental health issue. Jessica loves the work she does with mothers, and she is moved by how many community members and mothers are open to the program.

It can be difficult to seek treatment; some mothers are experiencing these feelings for the first time, and unfortunately, like many mental health issues, there is stigma attached to postpartum depression and anxiety.

Part of that stigma might come from the media’s portrayal of mothers experiencing depression or anxiety. Often, in movies, TV, and even the news, stories are sensationalized and depict mothers as dangerous to their babies. Within NCSS’s program, counselors and other staff try to break the cycles of stigma. Every mother has her own story and her own journey, and for each of those mothers NCSS can help them to develop some strategies for success. Prior to a diagnosis of symptoms, everything can feel strange, misunderstood, and weird. Jessica says she can tell a mother’s situation is improving when the mother begins

to be honest with herself about her feelings. Surrendering can lead to important understanding and growth.

Finding a solid support system that encourages open, honest communication can make all the difference for expectant and postpartum mothers. For Anna, that meant talking to her family and her doctor. For other mothers, maybe that support person is a sister or a spouse, a partner or a neighbor; maybe it’s the person who delivers the paper in the morning.

The Perinatal Mental Health Counseling program at NCSS is intended for expectant or postpartum mothers in Franklin and Grand Isle counties. If you know of someone who is experiencing any of these troubling symptoms, please reach out. ■

we’re here for you

WINTER'S EFFECT



Vermont is a wonderful place to live for many reasons—clean air, open space, small town charm—but it also offers its challenges, especially in the winter. Anyone who spent considerable time in Vermont and lived through a winter can recognize the trouble! It's frigid, windy, dark, wet, and long.

While many of us might feel a bit starved for sunlight or warmth during the winter months, for some people, the seasons can have a dramatic effect: seasonal affective disorder, or SAD, is a condition that can have a tremendous impact on a person's well-being. SAD is a form of depression that comes and goes depending on the time of year. Spring-onset SAD—a type of SAD that starts in the spring and goes away in the fall and winter—can truly impact someone's life, though it is much less common than the most common form, fall-onset SAD, a type of SAD that

starts in late fall and goes away in the spring and summer.

Individuals with fall-onset SAD might notice increased appetite, especially for starchy and sweet foods; low energy; increased sleep; weight gain; hypersensitivity to rejection; feeling of heavy arms and legs; and irritability. Dr. Steve Sobel of NCSS says that individuals experiencing these symptoms often have to distinguish their feelings from other possible triggers in the season, such as the holidays, which can be a real stressor for many. There are plenty of things in everyday life that can make us feel blue from time to time, or make us want to indulge in carb-heavy meals and sweet treats; but if an individual experiences these symptoms for days at a time, do not be tempted to brush them off. Like with other forms of depression, SAD can worsen if not treated. A primary care provider can be a great resource; depending on the severity

of the symptoms, varying treatments are available. For mild symptoms, phototherapy (light therapy), talk therapy, and lifestyle changes can be effective. Talk therapy can be helpful in managing symptoms, and individuals might be less likely to experience SAD in the future. Being diagnosed with depression with a seasonal pattern might indicate that an individual is more likely to experience SAD year after year; it doesn't guarantee it. For those whose symptoms are having a pronounced and significant impact on daily life, medication, along with other treatments, might be considered.

THERE ARE SEVERAL LIFESTYLE CHANGES – SOME OF THEM SMALL– THAT CAN IMPROVE SYMPTOMS ASSOCIATED WITH SAD

1. Try to go for a walk during the day. Even if it is cloudy and cold outside, outdoor light can help.
2. Expose yourself to as much sunlight as possible. If you have a window in your office, open up the curtains or blinds. If you work on a desk at home, try to move your desk closer to the window to soak up as much light as possible.
3. Incorporate exercise into your daily routine. Exercise is beneficial on so many levels; it can increase self-esteem, relieve stress, and help you sleep, all of which can reduce SAD symptoms.

It's not always easy to work up the energy to go for a walk or get outside when it's blustery and cold. Good news is, spring is right around the corner! ■

THE PATHS THAT LEAD US

When you think about why you do your job, what comes to mind? Maybe you always dreamed of your career from when you were a little kid, or perhaps you developed a passion for a trade and worked at it, made it your life's work. Or possibly you're still searching for the thing that will fulfill you. Sometimes, like in Kathy Brown's case, our work finds us.

Brown, Director of Developmental Services at NCSS, eagerly entered the mental health field in 1979 after graduating from college. For two years, she worked at the state hospital, and things were different back then for those with disabilities. It wasn't until 1990 that the Americans with Disabilities Act was passed, a civil rights law that prohibits discrimination against individuals with disabilities, and it wasn't until 1995 that

the Vermont Developmental Disabilities Act was passed. To say the least, Brown has been witness to some pretty big changes on the Vermont hill. Brown notes that when she first entered the field, the population she served was institutionalized; now they are living in the community with their families, and have access to education and a fulfilling life just like everyone else.

Brown smiles as she reflects on the start of the career. Apparently, she surprised herself by getting married—something she swore she'd never do—and then again by having two sons—something else she said she'd never do! Everything changed for Brown when her oldest son Kyle got into an accident and endured a severe traumatic brain injury. He spent a year and a half in rehab, regaining skills he had learned

once as a very small child. There is intensity in Brown when she talks, especially when she recalls reentering the field of developmental services in 1996. Brown left mental health in 1981 and worked as a program manager at what is now Mylan for 23 years. But her son's journey lit a fire in her, she says, and that's when she applied at NCSS. Over the last ten years, she's worn a number of hats at the agency: she started working on the employment team, then oversaw the behavioral team; she then became interim director, got her master's in rehabilitative counseling, and in 2014, Brown found herself in the director's chair where she currently sits. This is quite a seat to settle into, as there are over 250 clients receiving services, 157 staff working in the division, and 110 contracts with shared living providers. Brown certainly



doesn't do it alone; she has help from many people, like her leadership team: Amy Bronson, Assistant Director; Emily Norris, Assistant Director; and Amber Schaeffler.

Schaeffler, a licensed clinical social worker in the DS division, was on the NCSS *Here for You* television show and also presented at the last Grand Rounds seminar along with Brown. She coordinates the Clinical Oversight Committee and the Internal Behavior Support Review. Schaeffler is also getting certified in biofeedback and neurofeedback, both alternative forms of therapy that are quite effective with those with developmental disabilities. Biofeedback refers to the clinical applications where physiological signals from the body are used for auditory or visual feedback. When given this feedback during a therapy or training session, an individual can learn how to alter their breathing or behavior. Biofeedback provides a visual representation of client's stress, thereby giving them the tools to learn about their body and shift behavior—even slightly—to work toward a goal. A client's ideal BPM (breaths per minute) will provide the most restorative functions for the body; this information can be gathered from biofeedback. With biofeedback, an individual's tension is visually displayed on a screen, providing a powerful tool for recognizing stress within the body. The visual graphs allow individuals to see the control they have over their own Autonomic Nervous System and that can be very powerful in healing. This form of therapy is especially beneficial for those who may not find success with traditional talk therapy,

This is just one of the many programs available within the DS division. Maybe you're wondering what makes someone eligible for DS services. There are

several criteria: an individual must have an IQ of 70 or less and have significant adaptive behavior challenges in at least two areas of daily living—in other words, everyday social and practical skills. The Intellectual Disability must have originated before the age of 18. This last criterion can prove tricky for staff in the DS division, especially if an individual who has never sought services before attempts to access DS services as an adult. Before services can be provided, staff must sift through years of documentation to find evidence of the disability prior to the age of 18; this might mean contacting previous school placements or family members conducting intensive interviews to establish functioning as a child. It can be challenging for our Intake Coordinator Samantha Burnell to locate, engage, and scour through information to uncover this proof; staff wants to deliver services in the most meaningful way and when they are needed.

Schaeffler, like Brown, followed an interesting path before coming to NCSS, and hers was punctuated by several advance degrees. Given her position now, you might not know that she has a bachelor's degree in sociology and criminology and a master's in criminal justice. That's not all! She has a master's in social work too! Schaeffler isn't just wealthy in degrees; she's also rich in life experience: before she moved to Vermont, where she met her husband, Schaeffler worked with the Deaf, Hard of Hearing, Late-Deafened and Deaf-Blind who had experienced sexual violence. It's special that she found herself working at NCSS—given her background—since NCSS is home to the only developmental deaf services team in the state.

Talking to Brown and Schaeffler, it's easy to see how they landed where

they are. Schaeffler is approachable, unassuming, and gentle; she sits with her hands folded in her lap and smiles as she answers questions. Brown is soft spoken but pointed in her speech, and it's evident that she's passionate about her work. She knows what she's fighting for every day. The most common misperception of those with intellectual disabilities, Brown says, is that they are not intelligent or capable of living a life like everyone else in their communities. "They are extremely capable of that," Brown says. "They should have the same rights as all of us." Brown says that the laws have heightened awareness and given advocates some teeth, but there is still a lot of stigma. Anyone doing this work day in and day out is doing it because they care about crushing the stigma that follows individuals with disabilities. They care about every individual being able to fulfill their goals.

Some of that stigma is in the way we talk. Putting the disability before the individual can perpetuate stigma, and you might be surprised by how commonplace this language is. How often have you heard the following phrases? "She's autistic." "He's learning disabled." "They're in special education." This kind of language defines the individual as their disability, rather than a person who has a disability. "She has autism." "He has a learning disability." "They receive special education services." Think about it: Would any of us want to be defined by just one thing?

**There are many services and programs available within the DS division of NCSS. You can read more about these services on our website by clicking on the "Developmental Services" tab at the top of page or by clicking on this link: <http://www.ncssinc.org/developmental-services>. ■*

THE MOST NATURAL APPROACH



Amy Anderson smiles as she repeats the phrase. “Dignity of risk and the right to fail.” She lets the phrase sit quietly for a moment before she continues. “Being a human means you can choose to do something or not do something “It doesn’t matter what I think you should do; it belongs to you,” Amy says. Amy feels the importance of breaking assumptions about people with intellectual and developmental disabilities. There is a sense sometimes that everyone with a disability is the same, she states, but we should really be asking ourselves, “How are we all alike? What about our dreams, passions, and fears?” Amy

works directly with clients a few days a week as well as in the Learning for Living program, which aims to provide independent living skills to individuals with intellectual and developmental disabilities. She also acts as a coordinator for the peer training team.

Many people are told what to do their whole lives, she notes, and part of being a peer advocate is demonstrating what it looks like to make choices and speak up for yourself in a way that works for you. It’s giving people the confidence to speak up without fear of retribution. It’s believing in them,” Amy says simply. Heather, a peer advocate, sits next to

Amy with her hands folded tidily across her lap. “Amy believed in me when I was studying for my learner’s permit and I actually got it.” Her face lights up as she recalls her triumph.

We all know how hard it can be to speak up for ourselves, especially if we feel like it’s not our place or we don’t have the right to express our opinions. Maybe we don’t know what to say. Or we just don’t want to do it alone.

GMSA is a statewide organization with a purpose of supporting people with intellectual and developmental disabilities to take control of their lives, solve problems, make decisions, and advocate for themselves. GMSA offers assistance with voting registration and helps to unify voices at the state level to affect legislation by offering information and education about the legislative process, as well as accommodations to allow groups face-to-face opportunities with politicians. About 15 years ago, Randy Lizotte, became a member of Green Mountain Self Advocates (GMSA), and he has served as president of the Board since 2010. Self-advocacy has always been Randy’s passion. He actually met his wife at a GMSA meeting, and two and a half years later, he moved to St. Albans where his wife resided. Shortly after Randy began volunteering at NCSS, there was a job posting in the Developmental Services division, which Randy landed right away.

GMSA started out as a small self-advocacy group in Burlington and has now expanded to a network of 23 local

groups located in towns across the state, including the St. Albans' group, Next Steps. Next Steps meets every Friday at the Academy of Learning, one of NCSS programs within the Developmental Services division. Though the group is not affiliated with NCSS, Kathy Brown, Developmental Services director, wanted to show her support for the group by offering up NCSS space as a meeting zone. "It is an honor to be giving access to the Next Steps peer advocates voices," Kathy says. "They are insightful, honest, and dedicated to pushing all of us at NCSS to deliver person-centered services. The Next Steps peer group has allowed our Local Standing Committee to join them monthly; this unified collaborative gives a significant consumer voice to all our new initiatives and divisional decision making."

Amy feels grateful that there is such support and that their group is valued. "It's really cool," she says brightly. "It's a real luxury at NCSS to work with open-minded, flexible people," she adds.

Individuals in the Next Steps group share in a confidential setting and participate in activities like the monthly movie showing, the occasional bowling trip, or the rare excursion to the water park. Heather has been a part of Next Steps since 2008. Her first meeting was made a little easier, she remembers, because she knew someone in the group, and it quieted some of her discomfort about showing up to a room full of strangers. Now, she couldn't feel more comfortable. "The meetings are mostly run by us, peers, not by Randy and Amy," she notes proudly. "I have confidence in everyone that's there."

Even though the group is accommodating and accepting by nature, it doesn't mean showing up the first time is free of anxieties. Randy, nodding agreeably, eyes Heather as she recalls her first group. He, too, felt nervous when he attended his

first group. "You don't quite know your role right away," he explains. "I had to learn what I was good at, discover it on my own. Had my good points and things I had to work on. Work on this, accomplish that." Self-advocacy is something you learn as you go along. Heather and others in the group help with these anxieties by providing welcome baskets with information and goodies.

Amanda, short-haired and

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bespectacled, chimes in. "The group helps me connect with people. I've made a lot of friends. I met some people I otherwise wouldn't have, and it got me out of my shell." Finding this kind of genuine support feels incredible for anyone; it offers an even deeper layer of support for individuals with disabilities, who can be at higher risk for social isolation. The peer support group offers a non-judgmental setting to discuss personal issues and concerns. Sometimes the concerns shared are about services received, and that's okay. Amy points out that receiving services can sometimes feel controlling, especially if an individual does not feel as if they have a voice to contribute to the conversation about how their services are delivered. These feelings are by no means a slight to providers—who always aim for the highest quality of care—but we all need

a little support sometimes in asking for what we need and articulating our fears, desires and hopes.

As an alternative to asking someone to speak up solely for themselves, Randy and Amy can help to facilitate peer support within an Individual Support Agreement (ISA) meeting. This aspect of peer support really inspires Heather who loves to "help people speak up and help them talk with their case managers about their dreams and goals." Heather can sit there with her friend and guide them through the difficult conversation. If her peer so chooses, Heather may speak for them based on what they discussed ahead of time.

Someone may feel they need help making their feelings clear, but it doesn't mean they need to speak alone. Self-advocacy is a choice.

"There's a real community for people with disabilities now where there wasn't before," says Amy. When it comes to advocacy, most of Amy's background was in crisis management and recovery services. Her work at NCSS within peer advocacy felt new. "I was used to speaking to those who couldn't, but stepping aside is new and encouraging. Helping people speak up for themselves has really worked for me," she says.

Randy and Amy both believe that peer services will be the future of care, and that makes sense when considering the ripple effect the groups have had on individuals. There have been fewer calls to crisis because, now, people are calling their friends instead. "Peer to peer support is the most natural approach in all of our lives," says Kathy Brown. "NCSS is very fortunate to have such a strong cohesive group of men and women helping to guide our future." ■

ANXIETY:

A MATTER OF DEGREE

By Robin Galbraith, M.Ed., M.A., Psychologist-Master
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Everyone experiences anxiety to some degree. It's a normal reaction to a lot of situations. It may come in the form of butterflies in the stomach when thinking about going on a first date or learning to drive, a child's dread before taking a spelling quiz, or apprehension before getting the results of medical tests. In these situations, it's our body's way of reacting to uncertainty about the future. Something unpleasant may happen: the date may go badly, the child may not pass the quiz, or the medical news may be bad. A little nervousness may alert us to what's important.

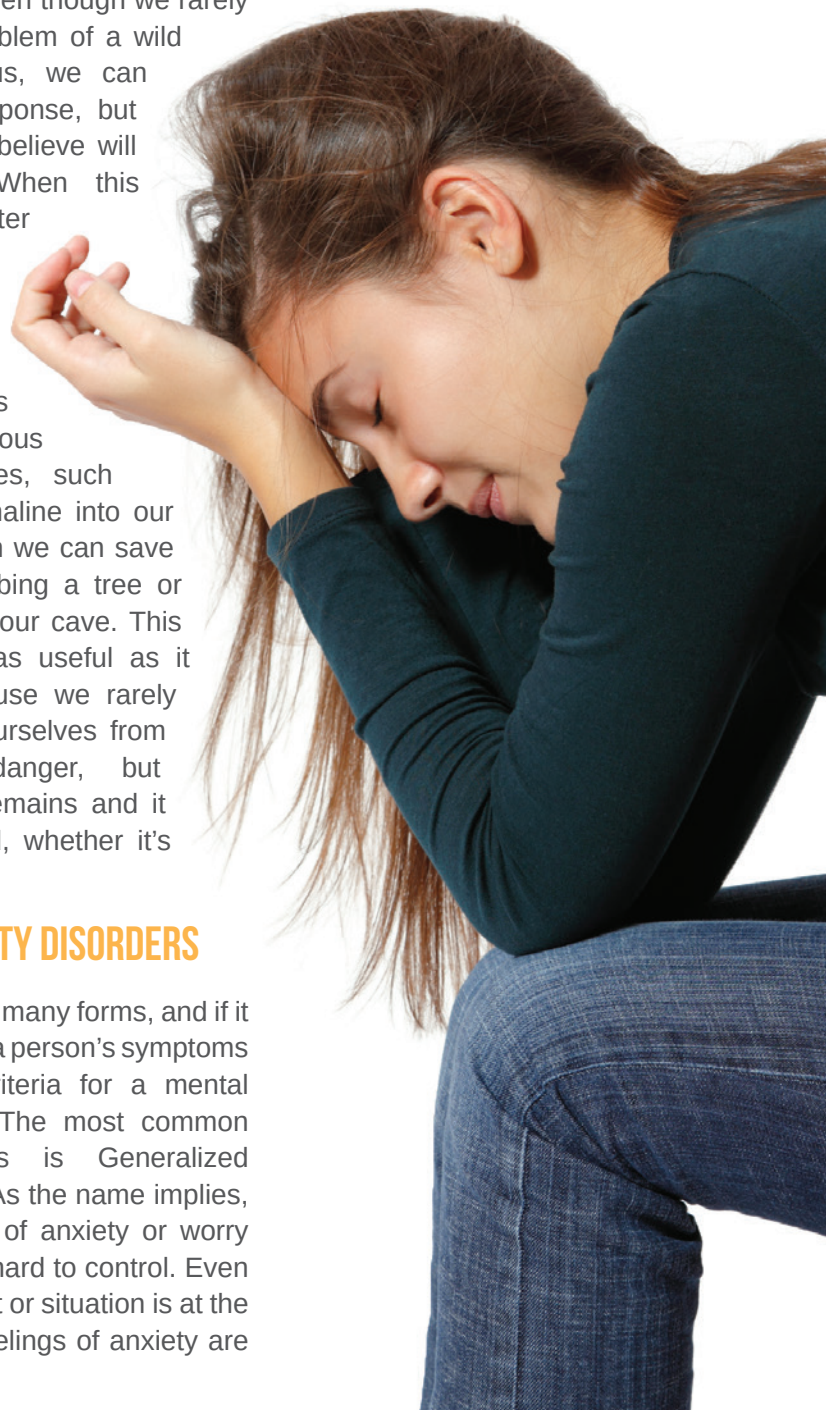
Sometimes these feelings of nervousness can get out of hand. The anxiety can become so extreme that we base decisions on our fear of negative things that may happen. Someone may miss out on learning to drive, the child may have a stomach ache on the day of the quiz, or a person may avoid going to the doctor altogether and not treat an illness before it's too late. When the possibility of something bad happening in the future becomes exaggerated, and out of proportion to the real odds, then the anxiety has become a problem in itself.

Our bodies have a natural response to things that are actually dangerous, such as being chased by a wild animal. It's called the "fight-or-flight" response. It started out as a survival mechanism in early humans (and other animals).

But these days, even though we rarely encounter the problem of a wild animal chasing us, we can still have this response, but to a situation we believe will be dangerous. When this happens (no matter what the level of actual danger is), our bodies get us ready to protect ourselves by activating various complex processes, such as pumping adrenaline into our bloodstream. Then we can save our skins by climbing a tree or rushing back into our cave. This response is not as useful as it used to be because we rarely have to protect ourselves from life-threatening danger, but the mechanism remains and it still gets activated, whether it's helpful or not.

TYPES OF ANXIETY DISORDERS

Anxiety can take many forms, and if it is severe enough, a person's symptoms may meet the criteria for a mental health condition. The most common anxiety diagnosis is Generalized Anxiety Disorder. As the name implies, an overall feeling of anxiety or worry takes over and is hard to control. Even if a particular event or situation is at the root of it, these feelings of anxiety are



ongoing and persist for several months or longer.

Other types of anxiety are more specific. Separation anxiety is when a person feels very anxious when away from someone they are strongly attached to, and they may be very fearful that they or the other person might get hurt, get sick, or die during the separation. They feel relief when reunited with this person. This is more common in children and can be an underlying reason for a child refusing to sleep alone or go to school.

Fear of public speaking or stage fright is very common, but Social Anxiety can affect everyday activities. We have to interact with people as part of our lives to get things done, but some struggle a great deal with even basic social interactions or exposure. They fear being ridiculed or judged harshly by observers who may or may not really be paying attention. This type of anxiety can be especially debilitating because sufferers may base important life decisions on their discomfort with social interactions, such as not developing their talents to have a fulfilling work life, not working at all, or having a very restricted social life.

An extension of Social Anxiety can be Selective Mutism. Most people with Selective Mutism have Social Anxiety and this is thought to be a way to cope with it. If you've ever seen the TV show *The Big Bang Theory*, you may remember that the character Raj suffered from this in the earliest seasons. He could chat comfortably with his male friends but once a female he was not related to came into the room, he would go silent. People with Selective Mutism stay silent even when the cost to them is high; grades, work or relationships may suffer.

When someone is terrified of a particular thing or situation, such as spiders, thunderstorms, flying, or getting an injection, they are said to have a

Specific Phobia. They may be able to endure exposure to what they're afraid of but with great distress, or they may avoid what they're afraid of at all costs. There are certainly things to be cautious about that can harm us, but a person with a phobia exaggerates in their mind the chances of being harmed. For instance, millions of people fly safely in airplanes every day, but some people are too terrified to do so.

Very suddenly, sometimes without warning, a wave of fear, dread or even terror can take over. These feelings of panic can be accompanied by a racing heartbeat, shallow breathing, sweating, shaky hands, dizziness, chest pain, nausea, tingling and other uncomfortable symptoms. Some people describe it as feeling like they're "going crazy." Panic attacks can happen in any type of anxiety disorder; a Panic Disorder is present when someone repeatedly experiences panic attacks and then develops the habit of worrying that more attacks will happen.

Panic attacks or milder reactions can happen when someone has Agoraphobia. This is a fear of being in certain public places or situations, such as at the grocery store, in an enclosed space such as a movie theater, in a waiting line, or even anywhere outside of the home. It is unusual in children and more common in women than men. Many with this disorder avoid the situations they fear or going out altogether unless necessary.

Some drugs (legal or otherwise) can cause anxiety issues in people who are especially sensitive to certain substances. Substance/Medication-Induced Anxiety Disorder can be caused by the use of or withdrawal from some prescription medications, recreational drugs, alcohol, caffeine, and nicotine from tobacco use. If you think this is happening when taking

prescribed medications, talk with your doctor who may adjust dosage or type of medication.

Did you know that thyroid and some other endocrine system problems can result in anxiety? Anxiety can be a factor in or related to other mental health conditions as well. Those with PTSD can struggle a great deal with panic and anxiety. Other disorders that can feature anxiety include Obsessive-Compulsive Disorder, Hoarding Disorder, Adjustment Disorder, and Depressive Disorders, to name a few.

Whatever the cause, trigger, or form, excessive anxiety is hard to live with and it can really limit a person's ideas about their choices. We can't eliminate anxiety from our life entirely because it's so tied to a normal protective mechanism in our bodies. We can, though, learn to manage it if it gets out of hand and reduce it to a normal level that doesn't have a big negative impact on our lives.

WHAT CAN HELP

Through the magic of television, during the sixth season of *The Big Bang Theory*, Raj's Selective Mutism disappeared after his girlfriend broke up with him. (He had been able to talk with her only when he was drinking alcohol.) Sadly, ongoing anxiety does not usually go away all of a sudden and by itself. After the date, the spelling test, or the wait for medical news is over, anxious feelings usually fade, but not always. If they grow or become out of proportion to the situation, there may be an ongoing problem.

When excessive anxiety goes unrecognized or untreated, some develop unhealthy ways to deal with it. This can lead to many larger problems. Despite a number of unhealthy ways to deal with anxiety, there are at least as many healthy ways that you can try for yourself. The internet offers many more

suggestions on various websites. Books can be a good resource as well.

If you're not able to reduce anxiety on your own, or help your child, a therapist may be able to help. It can make a big difference to have support! A therapist can make an accurate diagnosis by asking questions about your history, symptoms and stressors. You can learn to see unhealthy thinking patterns or beliefs that might be contributing to anxiety, process stressful events from the past, or learn how to communicate your feelings and needs better to those around you. A mental health provider can also be there to encourage your use of positive coping skills and teach new ones, including various mindfulness practices.

Over the past few decades, Western medical and mental health practitioners have integrated ideas and practices from Eastern sources that are known as "mindfulness." Mindfulness is based on the idea that when your thoughts are focused on the present moment, it's difficult to feel anxious, because anxiety is worry about the future. Many useful tools and strategies involving mindfulness can be used as healthy coping skills to deal with anxiety, including panic attacks.

As with many mental health problems, there are things that people can do to help themselves, using a variety of resources. Help is also available through therapists if you need to reach out for support. ■

SIGNS YOU MAY BE TOO ANXIOUS

- Using too much alcohol
- Recreational drug use
- Frequent overeating
- Avoiding eating
- Chronic procrastination
- Self-harm (cutting, burning)
- Using a lot of caffeine
- Avoiding important tasks
- Picking/biting skin or fingernails
- Excessive screen time
- Perfectionism
- Smoking
- Overspending

HEALTHY WAYS TO DEAL WITH ANXIETY

- Spending time with a pet
- Exercising (even just walking)
- Drawing/coloring
- Engaging in crafts or hobbies
- Socializing
- Taking time for oneself
- Creating a more balanced schedule
- Saying "no" to too many demands
- Listening to music
- Reading
- Spending time in nature
- Meditating
- Yoga
- Practicing mindfulness

Northwestern Counseling & Support Services, Inc. is a private, non-profit, human services agency serving Franklin and Grand Isle Counties. NCSS provides intervention and support to children, adolescents, and adults with emotional and behavioral problems, mental illness, and intellectual disabilities.



THE APPLIED BEHAVIOR CENTER



The new Applied Behavioral Center officially opened in spring of 2017. This team provides Applied Behavior Analysis programming to children diagnosed with Autism as well as other developmental delays. The team is very excited to be in their new space. Initial response from children and families has been overwhelmingly positive. Parents have reported feeling very lucky to have a space dedicated to Applied Behavioral Analysis here in our own community.

MENTAL HEALTH AND MS. AYER'S WELCOME \$30 MILLION GRENADE

By Emerson Lynn

This is a huge issue, and it needs a lot of light on it, and if it takes a (multi-million dollar) appropriation to get somebody to say 'Whoa', then that's what we're going to do."

The quote is from Sen. Claire Ayer, who chairs the Senate's Health and Welfare committee. The subject was the need to raise the pay of those who work at the state's mental health agencies. [In Franklin County, that agency would be Northwestern Counseling & Support Services.]

Ms. Ayers' committee voted 5-0 to increase funding to the agencies by \$30.2 million for the next fiscal year. The responsibility of implementing

that increase funding would fall to the Agency of Human Services.

Ms. Ayers' efforts are important in two ways; one obvious, the other less so. The obvious is that mental health workers are on the low, low end of the pay scale, which raises the twin issues of worker retention and the need for consistent, quality care. Second, and less obvious, is that we continue to undervalue the importance of mental health when we consider our overall health care needs.

This lack of attention, or value, is not something that has materialized in the present. It's been chronic, and long-term. The stigma with mental health

continues; we can deal with physical afflictions, but less so with afflictions that are mental.

To say this imbalance is wrong is an understatement. It's also incredibly misguided. As we learn more about the brain it becomes clearer that our physical health is largely dependent on our mental health. This is particularly true with chronic health care conditions, which are true cost drivers of the health care system. The stress that can lead to heart issues, for example, involves mental health. Mental well-being cannot be separated from physical well-being and the sooner this is understood and accepted, the sooner we will be able



to address our health care system's needs in total.

We can no longer pretend the problem doesn't exist, or that if we turn our heads it will lessen in severity. We don't have space necessary to treat those with mental illness, which means many Vermont patients languish in hospitals waiting for available space, something that is as costly as it is ineffective. And our mental health agencies are reportedly experiencing 27 percent turnover rate in staff annually, which make providing consistent care challenging, to say the least. No one can run a business successfully, for any

length of time, if they are losing almost a third of their workforce each year.

So, yes, Ms. Ayer can be defended for tossing a grenade into the health care debate by making it clear that mental health is an indispensable part of the discussion.

As important as the "competitive wage" needs are, it will take more than that to get mental health positioned to where it needs to be. We need to scrub clean the misperceptions that linger with mental health and we need to integrate the science of the brain with the health

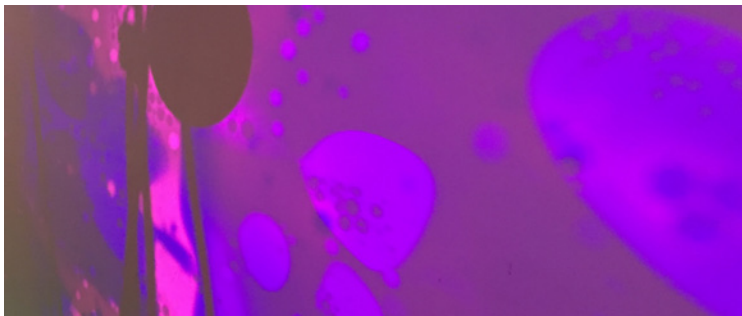
of the body. And we need to bring both messages to society at large.

In one fundamental sense, this is a branding campaign of considerable importance. People need to be educated as to what mental health really means and how it affects so many other parts of our society. Its separateness needs to end.

That should be the stuff of common sense. Why is it that we considered a strained muscle more important to treat than someone's mental impairment? Why is stress less important to address than a blackened toenail?

It shouldn't be. ■

REFURBISHED SENSORY EXPLORATION ROOM OPENS AT FAMILY CENTER



Community members and educational professionals were welcomed to tour the space and the programs offered during an open house during June.

The PAEA Sensory Exploration room offers a therapeutic environment for children and adults. We work with schools and community members providing one-to-one sessions. Those with or without the following

diagnoses can benefit:

ADHD * Autism * Intellectual Disabilities
* Sensory Processing Disorder

Sensory Exploration is a process that promotes the ability to retain impressions of sensory information after the original stimuli have ended. It acts as a kind of buffer for stimuli received through the senses of sight,



hearing, smell, taste, touch, movement and balance, which are retained accurately, but very briefly.

Sensory play includes any activity that stimulates a person's senses. Sensory activities facilitate exploration and naturally encourage children to use scientific processes while they play, create, investigate and explore. ■

CHILDHOOD NEGLECT HAS LIFELONG IMPACT

NCSS WORKING TO STRENGTHEN FAMILIES



By Danielle Lindley-Mitchell, Samantha Thomas & Amy Johnson, Special for the Messenger

Positive and negative experiences during childhood have lifelong impact on a person's health and well-being.

Childhood experiences have a tremendous impact on future violence, victimization, life long health and opportunity, making these experiences a public health issue. Much of the foundational research in this area has focused on adverse childhood experiences (ACEs).

Published in 1996, a Kaiser Permanente study of 17,000 people showed a link between the stressful experiences a person has before age of 18 and a person's physical, emotional and social health. This study documented quite clearly that ACEs can contribute significantly to negative adult physical and mental health outcomes and affect more than sixty

percent of adults. This continues to be reaffirmed with more recent studies.

The study identified ten adverse childhood experiences:

1. Physical Abuse
2. Sexual Abuse
3. Emotional Abuse
4. Physical neglect
5. Emotional neglect
6. Mother treated violently
7. Household substance abuse
8. Household mental illness
9. Parental Separation or Divorce
10. Incarcerated household member

Recent studies of adult Vermonters revealed that 57% have one or more and 22% have three or more. ACEs have been linked to risky health behaviors, chronic health conditions, and early death. As the number of ACEs increases, so does the risk for those outcomes.

Everyone experiences stress and how trauma affects an individual vary from individual to individual. Stress is a natural part of everyday life and can in fact be healthy, motivating us to make positive changes and grow. However, when stress is unpredictable, prolonged and severe it can create vulnerability. That stress may become

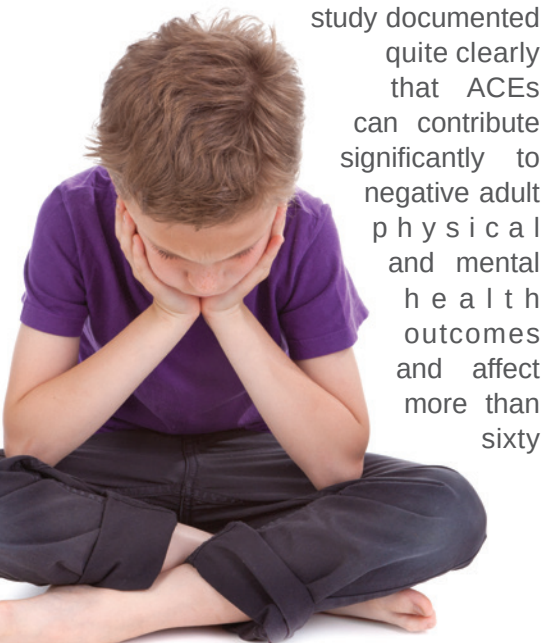
toxic and at this point, may have long lasting physical and mental health implications for an individual.

Researchers have found many of the most common adult life-threatening health conditions including obesity, heart disease, alcoholism and drug use, are directly related to childhood adversity. A child who has experienced ACEs is more likely to have learning and behavioral issues and is at higher risk for early initiation of sexual activity and adolescent pregnancy. These effects can be magnified through generations if traumatic experiences are not addressed.

PREVENTING ACEs

ACEs can be prevented through multigenerational approach employed to interrupt the cycle of ACEs within a family, including both early identification, prevention and treatment throughout and an individual's lifespan. There are a number of human services programs and agencies in our community that can help with addressing ACEs. Northwestern Counseling & Support Services (NCSS) offers a variety of services such as:

- Home visiting to pregnant women and newborns



- Home visiting to children and adolescents
- Employment and transitional living skills
- Parent education and training programs
- Social supports for parents
- Parent support programs for teens and teen pregnancy prevention programs
- Support in accessing high quality child care
- Income support for lower income families
- Intimate partner violence prevention
- Mental health and substance abuse treatment

Providing appropriate services is important in addressing ACEs, as well as building the protective factors and families. Research from the Center for the study of Social Policy shows that these protective factors are also “promotive” factors that build family strengths and a family environment that promotes child and youth development.

PROTECTIVE FACTORS

Those protective factors include:

PARENTAL RESILIENCE

No one can eliminate stress from parenting, but a parent's capacity for resilience can be crucial for the well-being of the whole family. Resilience is the ability to manage and bounce back from the challenges that emerge in every family's life. It means finding ways to solve problems, building and sustaining trusting relationships including relationships with your own child, and knowing how to seek help when necessary.

SOCIAL CONNECTIONS

Friends, family members, neighbors and community members provide emotional support, help solve problems, offer parenting advice and give concrete assistance to parents. Networks of support are essential to parents and also offer opportunities for people to “give back”, an important part of self-esteem as well as benefit for the community. Isolated families may need extra help reaching out to build positive relationships.

CONCRETE SUPPORT IN TIMES OF NEED

Meeting basic economic needs like food, shelter, clothing and health care is essential for families to thrive.

Likewise, when families encounter a crisis such as domestic violence, mental illness or substance abuse, adequate services and supports need to be in place to provide stability, treatment and help family members to get through the crisis.

KNOWLEDGE IN PARENTING AND CHILD DEVELOPMENT

Accurate information about child development and appropriate expectations for children's behavior at every age help parents see their children and youth in a positive light and promote their healthy development. Information can come from many sources, including family members as well as parent education classes and surfing the internet. Studies show information is most effective when it comes at the precise time parents need it to understand their own children. Parents who experienced harsh discipline or negative childhood experiences may need extra help to change the parenting patterns they learned as children.

SOCIAL AND EMOTIONAL COMPETENCE OF CHILDREN

A child or youth's ability to interact positively with others, self-regulate their behavior and effectively communicate their feelings has a positive impact on their relationships with their family, other adults, and peers. Challenging behaviors or delayed development creates extra stress for families, so early identification and assistance for both parents and children can head off negative results and keep development on time.

NCSS has engaged in a process to become a trauma informed agency, embedding trauma informed principles in all aspects of our operations including client care, staff development, welcoming and safe environments, evidenced based practices and consumer involvement. The agency uses evidence based and evidence informed practices that specifically target symptoms of ACEs.

The wide-ranging health and social consequences underscore the importance of preventing ACEs before they happen. Safe, stable, and nurturing relationships and environments can have a positive impact on a broad range of health problems and on the development of skills that will help children reach their full potential and be resilient. It takes all of us to flourishing communities that support the healthy development of children and foster resilience. Together we can make a collective impact on addressing ACEs and reducing health care costs that will result in healthier residents of Franklin and Grand Isle counties.

Danielle Lindley-Mitchell is the Director of Children, Youth & Families at NCSS. Samantha Thomas is the Children's Initial Response Team Leader and Amy Johnson, the Parent Child Center Program Manager. ■

IDENTIFYING CHILD ABUSE

NCSS EXPERTS OFFER ADVICE



By Tom Benton, Messenger Staff Writer

Northwestern Counseling & Support Services (NCSS) professionals spoke with the Messenger about the signs of sexual abuse in children, and local work to combat abuse.

The first thing to look for is a change in behavior – for example, if a normally extroverted and outgoing child is suddenly more withdrawn.

These changes may be more visible at night. The child may respond differently to showering or bathing routines, or the child may simply seem distressed around bedtime, and suffer from bad dreams or nightmares.

Parents might notice a shift in their child's language use, or that their child is talking about atypical topics.

"None of these, in of themselves, are going to be a sign," said clinical consultant Tammy Leombruno. But collectively, these symptoms could indicate some form of sexual trauma.

"You want to look at the constellation of behaviors," Leombruno said, "without placing too much emphasis on each symptom. I think a lot of people could on hyper-alert, so you want to balance it out a bit."

Matthew Hogan, a licensed independent clinic social worker, suggests parents check in with their kids like they always do. "From when you're tying their shoes in the morning

to sending them off to the bus, what are you saying? 'Have a good day. I love you. I'll see you when you get home. Hey, how was your day?' That is what you do."

Hogan said the trick is to do so "with a little more intention."

"It's about being able to state it," he said, "and say, 'Here's what I'm noticing. I'd like to talk to you more about it.' If you dramatically change, they might become less comfortable."

Parents with younger kids can discuss body safety, rights, privacy, boundaries. Those with older kids can discuss what is and isn't right.

"It's just as important for parents, as much as they can, to stay calm and keep yourself in check," Leombruno said.

She also suggested parent practice asking their child questions before actually doing so. "It's hard to talk about this stuff," Leombruno said.

The goal is to communicate to kids that parents love them and care about their well-being, she said.

Leombruno, Hogan and Children's Initial Response Team Leader Samantha Thomas all stressed that incidents of childhood sexual trauma are all around us, all the time.

NCSS does a range of work on abuse issue responding to reported incidents

consulting with schools, offering training to support school staff members.

Thomas outlined NCSS's broad range of support services. "We have home-based supports, community-based supports, we have traditional outpatient therapy, we have psychiatry, and then we have respite services. We just have an array of supports we can offer to kids who have a really wide range of needs."

Hogan said he and other NCSS professionals spent the past two years creating a group of children with sexual behavior problems. "We've worked really hard to get information out of the parents," Hogan said.

"We really are able to serve both ends of the spectrum," he said. "Those who have these problematic social behaviors and then those who are impacted by it."

NCSS's director of Community Relations Joseph Halko, said NCSS offers a range of specialties just like any hospital. "It's a whole menu of different specialties," he said. "It's just a matter of what is the particular specialty or specialties that are required in this particular circumstance to help this individual, or individual and families, get over the hump."

"The minute you say 'mental health' or 'behavioral health,' people duck for cover," Halko said. "And the 'stigma'

word comes out. [People say], 'That doesn't happen here.'

"Well, if it doesn't happen here, how are the statistics so possible?"

Leombruno emphasized two specific statistics: that one out of four girls, and one out of six boys, will experience some form of sexual abuse before the age of 18, according to a 2005 study from the Centers for Disease Control and Prevention.

"When people say mental health, they think therapy," Thomas said. "People sitting in an office, with a person, and that's actually a very, very small percentage of what we do here. A lot of times people don't know we're

in the community, because we don't wear an NCSS hat."

And for those who fear seeking help might mean unwittingly finding publicity, Halko said think again. He said confidentiality is key to NCSS's work. The organization takes confidentiality so seriously, only team members specifically assigned to a person's case can find that person in the NCSS database.

NCSS served 4,180 people last year, Halko said. "Are those names in the paper?"

The case of Josie Spears, a former Highgate Elementary School paraeducator accused of sexually

abusing a student at school, has brought this topic back into mainstream local conversation. Leombruno said that if any good is to come from the situation, it's deepening and increasing those conversations.

"Although this is a really yucky situation, we're going to say, 'Hey, listen. Take advantage of this and start those conversations with kids,'" Leombruno said. ■

IN REMEMBRANCE

NCSS BOARD MEMBER JAMES HOLLIS TOMLINSON 1945 - 2017

Jim Tomlinson, NCSS Board Member, passed away in his sleep Sunday morning March 19, 2017 at the UVM Medical Center. Earlier Jim was surrounded by family. Over the years Jim served a cumulative 12 years on the board. In addition, Jim was an active member of the Behavioral Health

Division Standing Committee for over 15 years. Jim also formed the longest running peer support group in the state.

Sad Day... We'll miss his passion, advocacy, and unique way of viewing the world. As one of Jim's friends said, "The mental health system lost a great man." ■



MENTAL HEALTH FIRST AID

COMMUNITY TRAINING OFFERED THROUGHOUT THE YEAR

Do you realize that you're more likely to encounter a person in an emotional or mental crisis than someone having a heart attack? Mental health disorders are more common than heart disease and cancer combined.

What if a program was introduced that will prevent a major disruption to a person's work and family life or the need to be hospitalized?

What if individuals that encounter depression and anxiety disorders could be helped sooner rather than suffering for long periods without treatment? The number of lost days at work and the economic burden would be significantly reduced. Nationwide, untreated mental health disorders cost \$79 billion in lost productivity every year.

Some additional facts to consider... over 1 in 5 people in Franklin and Grand Isle Counties presently seek help for mental health services... suicide rates are rising... growing prescription drug abuse problems related to a range of concerns... domestic violence rates in Vermont are at an all-time high... all of these and more have resulted in demand for support being greater than the resources to meet the needs.

The training modules include:

INTRODUCTION AND OVERVIEW TO MENTAL HEALTH FIRST AID

Have you ever thought of becoming a Mental Health First Aider? Come learn

about how this program will change the way you look at individuals who are dealing with mental health struggles such as depression and anxiety disorders.

DEPRESSION

The word depression is used in many different ways. We all may have a short-term depressed mood, but we cope and soon recover without treatment. But a major depressive disorder lasts for at least two weeks and affects a person's ability to work, to carry out usual daily activities, and to have satisfying personal relationships.

ANXIETY DISORDERS

Everyone experiences anxiety at some time – anxiety can be quite useful in helping a person to avoid dangerous situations and motivate the solving of everyday problems. Anxiety can vary in severity from mild uneasiness to a terrifying panic attack. You'll learn the different types and symptoms of how an anxiety disorder differs from normal anxiety.

PSYCHOSIS

Psychosis is a general term used to describe a mental health problem in which a person has lost some contact with reality, resulting in severe disturbances in thinking, emotion, and behavior. Psychosis can severely disrupt a person's relationships, work, and usual activities. Although less common than other mental disorders

there are numerous disorders in which a person can experience psychosis.

SUBSTANCE ABUSE DISORDERS

Different substances affect the brain in different ways. People use substances because of these effects, which include increasing feelings of pleasure or decreasing feelings of distress. Substance use disorders include abuse of alcohol or other drugs which leads to work, school, home, health, or legal problems or dependence on alcohol or other drugs.

CHILDREN'S DISORDERS

Childhood is a time of rapid changes of physical and emotional development. This can also be a very stressful time while building relationships, self-esteem and a sense of identity. Learn the signs to look for in children who struggle with emotional, behavioral or mental health challenges.

Program Charge: \$100 for series, \$50 for Franklin and Grand Isle County residents, of 6 MHFA modules; includes the cost of materials.

Certification: Participants will receive certificates as Mental Health First Aiders. Program Size: Limited to 20. Pre-registration Required. For more information about the program visit www.ncssinc.org/about

Location: NCSS Main Office, 107 Fisher Pond Road, Main Conference Room. ■

SELF-MANAGEMENT WORKSHOPS

WORKSHOPS OFFERED

CHRONIC PAIN SELF-MANAGEMENT PROGRAM (CPSMP)

A self-management program to help you learn ways to reduce pain, deal with related issues like having trouble sleeping, and more.

CHRONIC DISEASE SELF-MANAGEMENT PROGRAM (CDSMP)

A self-management program to help you make choices to live healthier with chronic disease and lower your risk of related health problems.

THE YMCA'S DIABETES PREVENTION PROGRAM (YDPP)

A self-management program to help you get more active, lose weight, and decrease your risk of getting diabetes.

DIABETES SELF-MANAGEMENT PROGRAM (DSMP)

A self-management educational series for people with diabetes and their families.

WELLNESS RECOVERY ACTION PLANNING (WRAP)

A self-management program to help you maintain your overall wellness, develop tools for dealing with daily stressors, and manage anxiety and depression. ■

For details and information, contact Deana Chase at: 524-6554 (Main line) or 370-5626.

NEARLY HALF OF ALL ADULTS HAVE ONE OR MORE CHRONIC HEALTH CONDITIONS, AND ONE IN FOUR HAVE TWO OR MORE. MANY OF THESE CONDITIONS CAN BE TREATED OR MANAGED BY MAKING LIFESTYLE CHANGES. SIMPLY INCREASING ACTIVITY, EATING A HEALTHIER DIET, QUITTING SMOKING OR ELIMINATING ALCOHOL CAN HAVE LASTING BENEFICIAL IMPACTS ON YOUR HEALTH.



YOUTH & MENTAL HEALTH

ELIMINATING THE STIGMA AIRED IN JUNE 2017

NCSS has continued to provide community outreach and engagement within Franklin and Grand Isle Counties to support our mission of early intervention and reduction of stigma via Youth Mental Health First Aid (YMHFA) trainings. Within the last several months NCSS focused on increasing our efforts to support Designated Mental Health Agencies (DA's) throughout the state to implement and facilitate YMFHA trainings. Within the last three months NCSS has created a presence throughout the state as NCSS staff have partnered with four area agencies to complete six trainings certifying over 175 First Aiders. NCSS' partnership and support provided to area DA's has been vital to the ongoing success of the Aware Vermont training initiative.

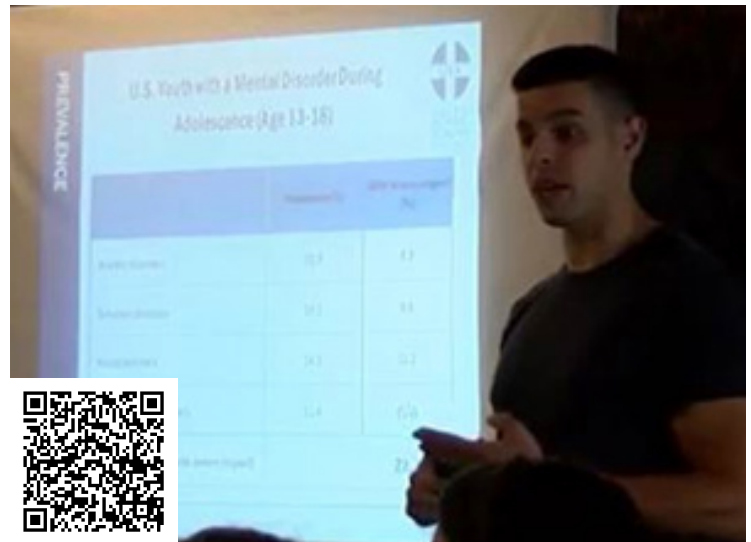
Collaborations with area agencies has also served to strengthen our partnership and collaboration with area DA's. In addition to supporting area DA's with YMFHA implementation NCSS also held several YMFHA trainings within Franklin Grand Isle Counties within the last three months certifying over 75 First Aiders. One of these trainings, at Camp Hochelaga in Grand Isle was highlighted in a FOX news segment entitled "Eliminating Stigma" and featured NCSS' Holly Reed and Lance Metayer.

In addition to this Lance Metayer and Simone Rueschemeyer, Executive Director, Vermont Care Network, were also featured in a live interview on FOX morning news where they spoke about Vermont's YMFHA efforts and mental health warning signs in youth and early intervention.

YMFHA training has been a vital way for NCSS to remain connected to our community and directly hear and respond to our community's needs. As a part of ongoing community engagement Lance Metayer had the opportunity to speak with a undergraduate class of early education students at UVM in May about early warning signs of suicide and suicide intervention. In June, Samantha Thomas and Lance Metayer presented on youth mental health, resiliency, and trauma to over



NCSS' Lance Metayer and Holly Reed featured on FOX44 segment focusing on Youth Mental Health First Aid Training.



Lance Metayer, Aware Vermont Project Coordinator and NCSS School Clinician, during training at Camp Hochelaga.

100 Counselors at Camp Abenaki. In June and July Holly Reed, Shaina Lussier, and Lance Metayer completed two separate trainings with the Richford and Swanton NOTCH summer camp staff to train approximately 40 staff in mindfulness, recognition of crisis warning signs, and crisis intervention. ■

2017 BOARD OF DIRECTORS

PRESIDENT: JESSE BUGBEE
VICE-PRESIDENT: CARL ROSENQUIST
TREASURER: DAN THOMPSON
SECRETARY: JEFF MOREAU
MEMBER-AT-LARGE: ANGELA POIRIER

17 LOCATIONS
551 EMPLOYEES
4174 CLIENTS SERVED IN FY 2017

MEMBER'S DIRECTORY

JESSE BUGBEE
 ELAINE CARPENTER
 BETTY CHARRON
 KEN GAGNE
 ROB HIRSS
 DAVID HUTCHINSON
 SARA B. KITTELL
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JASON MINOR
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 ANJANETTE WATSON

24/7 Care

Even though the month of September served as SUICIDE PREVENTION AWARENESS Month, at NCSS we want to make certain this topic is in the forefront 24 hours a day, 7 days a week, 365 days a year!

*Suicide
Prevention
Awareness!*

Our Services to You

Among the many specialty services made available to the community, NCSS offers prevention programs by facilitating Mental Health First Aid and Youth Mental Health First Aid trainings, Adolescent Services, Community Services and Outpatient, plus, Crisis and Mobile Crisis. NCSS provides confidential services and programs to residents struggling with suicidal thoughts.

**NORTHWESTERN
COUNSELING**
 & SUPPORT SERVICES
we're here for you

learn more about
our services at
www.ncssinc.org



Serving Franklin & Grand Isle Counties
 107 & 130 Fisher Pond Road
 St. Albans, Vermont 05478 | (802)524-6554

HIGHEST HONORS FOR 2016

NORTHWESTERN COUNSELING & SUPPORT SERVICES PAYS TRIBUTE TO DIFFERENCE MAKERS

During the Northwestern Counseling & Support Services FY2016 Annual Meeting, community and staff awards were presented in recognition of outstanding service. The large crowd assembled at the American Legion in St. Albans had the opportunity to learn about three outstanding individuals.



Bob Begley from Martha's Kitchen receives Marcheta Townsend Community Partner Award from Ted Mable, former NCSS Executive Director.

MARCHETA TOWNSEND COMMUNITY PARTNER AWARD

This award honors individuals from outside the organization who collaborate with NCSS to ensure success.

Bob Begley, the recipient of the Marcheta Townsend Community Partner Award, received the award on behalf of Martha's Kitchen and the many volunteers who have brought Martha's Kitchen from a soup kitchen to a community kitchen.

PARTNERSHIP IN EXCELLENCE AWARD

This award is intended to be the highest honor the organization can give to one of its employees, for it recognizes those staff who are in the top 1% in the organization. These employees exemplify the NCSS values of Safety, Responsiveness, Compassion, and Integrity. In addition, they have made a major contribution to a client, to the organization or to the community at large.



Melissa Machia accepts Partner in Excellence Award from Ted Mable, former NCSS Executive Director.



Tric Rogati is flanked by Ted Mable, former NCSS Executive Director (left), and Todd Baumann, current Director of Children, Youth & Families (right).

TWO RECIPIENTS IN 2016

The Partnership in Excellence Award is given to an employee that represents the top 1% of the organization.

Melissa Machia was one of two recipients of this award for 2016. Melissa's dedication has been proven by her outstanding performance in finding competitive employment for individuals with Intellectual Disabilities, resulting in a doubling of Developmental Services employment grants funds.

Tric Rogati also received this high honor in 2016. Tric is humble and quiet about her own accomplishments, and is always first to identify her co-workers as heroes. She now works on the Children's Mobile Crisis Team and has proven indispensable in this role.

2016 LONGEVITY AWARDS

Recipients listed in alphabetical order.



5 YEARS

Gladys Barnes, Chadwick Cioffi, John Chittick, Cara Corneau, Stephen Cousino, Heather Getty, Ryan Greeno, Melissa Grismore, Cheri Keith, Randy Lizotte, Megan Mayo, Kyle Murphy, Mariah Murphy, Colleen Pastina, Curtis Pelon, Samantha Price, Chad Sandvil, Amber Schaeffler, Nicholas Tebbetts, Iain White, Craig Wright, Lorine Wright



10 YEARS

Kathy Brown, Jordan Cota, Roxanne Comings, Randy Connelly, Gene Corliss, Kathryn Fairchild, Carmen Gosselin, Amy Irish, Jennifer Ladue, Amanda Lobb, Kyle St. Francis, Claire Thompson, Heather Wilson



15 YEARS

Eric Barrer, Raeleen Bedard, Belinda Bessette, Sharon Bevins, Shelley Broderick, Julian Desnoyers, Matthew Habedank, Carrie Hatch, Sue Loiselle, Sue McEwan, Vicki Menard, Amy Messier, Beth Mouser, Dorcus Pelissier, Samantha Thomas, Gary Thompson



20 YEARS

Merry Hill with Todd Bauman
Not pictured: Denise Wells



25 YEARS

John O'Neill with Steve Broer



25 YEARS

Stacey Steady with Kathy Brown
Not pictured: Sylvia Garrison



35 YEARS

Susan Trombley with Todd Bauman

OUTSIDE RECOGNITION



SAM THOMAS

Chosen as Building
Flourishing
Communities
Master Trainer



MATT HABEDANK

Receiving the
Ed Sbardellati Award for
Excellence and Innovation
in School Based Mental
Health Services

NCSS' KROMPF RECEIVES INTERNATIONAL AWARD



Following the ceremony John Lyons, developer of the Child and Adolescent Needs and Strengths Assessment (CANS), with award recipient Alison Krompf, NCSS Quality Manager.

Alison Krompf, NCSS Quality Manager, received the Total Clinical Outcomes Management Award from the John Praed Foundation, an academic research center through the University of Chicago Chapin Hall, for her passion and leadership in spreading the Child and Adolescent Needs and Strengths Assessment (CANS) and outcomes management in Vermont. She received the international award while attending the Total Clinical Outcomes Management Conference, an annual gathering of experts working in the field of caring for children and families. "I was incredibly honored to receive this

award, as I am so passionate about this clinical communication tool and its ability to help us provide the best services we can to those in need," says Krompf.

The CANS is a comprehensive tool that integrates a great deal of information into one place. The simple scoring and clear visual representations help to inform treatment plans and services by allowing children and caregivers to identify and envision their needs and strengths and communicate them easily across providers. The CANS was first utilized at NCSS in January in 2015

and is being used across the state in various programs. At NCSS, the CANS is first conducted upon a client's entry into the agency, and then again every six months. The CANS gathers many data points to reveal areas that need intense or immediate action, moderate action, or watchful waiting. The unique thing about the CANS is that it also focuses on the strengths of a child and their caregiver(s); this positive lens can prove instrumental in a personalized treatment plan. "Not only does the CANS support our agency's goal to continually improve our quality of care by monitoring our effectiveness," says Krompf, "but I believe that the people we serve are greatly motivated by seeing how far they have come. Our clients and families deserve this opportunity to assess their journey and celebrate their progress with us."

We extend congratulations to Alison Krompf, Quality Manager, for her recognition in receiving this international award. NCSS is proud of Krompf's hard work and proud to have her in the NCSS family.

Northwestern Counseling & Support Services is a private, non-profit, human services agency serving Franklin and Grand Isle Counties. NCSS provides intervention and support to children, adolescents, and adults with emotional and behavioral problems, mental illness, and intellectual and developmental disabilities. ■

NCSS GOLD RISEVT BUSINESS



Creating a Healthier Workforce, One employee at a Time isn't just idle chatter from the Wellness Committee. NCSS has been recognized as a Gold RiseVT business for the robust wellness initiatives that are in place for staff throughout the year. From being a breastfeeding friendly employer to fresh fruit Fridays and from Move More Minutes Challenges to immunization clinics, NCSS provides staff with a well-rounded approach to health and wellness.

EXCELLENCE IN WORKSITE WELLNESS AWARD



From left to right: Stacey Remillard, Andrea Pariseau, Morgan Randall, Mark Levine, MD, Kelly Hayes, Nancy Taylor, Brady Therrien, Meredith Vaughn, Samantha Wimble, and Governor Phil Scott.

NCSS received the Excellence in Worksite Wellness Award from The Vermont Governor's Council on Physical Fitness and Sports. Eight NCSS Wellness Committee members accepted the award from Governor Phil Scott at the annual worksite wellness conference in March, where nearly 500 professionals from across the state shared, listened, and learned how to get the most out of their programs. Through our self-insured captive health plan structure we are committed to cost containment and providing a variety of opportunities for staff to make healthy choices.

PUT MORE HEALTHY FOOD ON YOUR TABLE WITH 3SQUARESVT

WHAT IS 3SQUARESVT?

It is a federal nutrition program that can help you buy more healthy food.

Monthly benefits come on a debit card you use at many grocery stores and farmers' markets, so you have privacy and flexibility when you shop.

If everyone in the household is 65+ or gets SSI, benefits are directly deposited into your bank account.

WHO IS ELIGIBLE?

3SquaresVT is open to everyone who qualifies, including individuals, families, seniors and people with disabilities. Eligibility is based on household income.

MANY VERMONTERS ARE ELIGIBLE AND DON'T KNOW IT!

There are special rules that make it easier for households that include a senior or person with disability, or that get the VT Earned Income Tax Credit to be eligible.

HOW MUCH CAN PEOPLE GET?

- Benefits are based on monthly income, expenses and household size.
- Even the minimum amount of \$16 per month can help with grocery bills!
- 9 out of 10 3SquaresVT households get at least \$50 each month.

HOW TO APPLY?

Contact Franklin Grand Isle Community Action,
5 Lemnah Dr., St. Albans,
VT 05478.
Phone: 802-527-7392.



RAISING AWARENESS

NCSS HERE FOR YOU

EPISODES ON THE NCSS YOUTUBE CHANNEL



**LEARN MORE ABOUT NCSS
PROGRAMS AND SERVICES AT YOUR
CONVENIENCE... 24 HOURS A DAY**

We are currently utilizing YouTube as a means to post and distribute video content from the NCSS Here for You television show that airs on both Northwest Access TV – Channel 15 and LCATV – Channel 15. This allows us to provide viewers a well-rounded and more in-depth understanding of the diverse programs and services provided by NCSS at their convenience.



From L to R, Joe Halko, host, Samantha Thomas, Danielle Lindley-Mitchell, and Amy Johnson.

RECENT SHOW PRODUCED... THE IMPACT OF ADVERSE CHILDHOOD EXPERIENCES

Childhood experiences, both positive and negative, have a tremendous impact on future violence, victimization, lifelong health and opportunity, making these experiences a public health issue.



NCSS HERE FOR YOU

At the annual Northwest Access TV Producer's Awards Ceremonies NCSS Here for You has received the following awards:

2016 100TH ORIGINAL EPISODE AWARD
2014 PEOPLE'S CHOICE AWARD
2013 BEST NON-PROFIT SHOW

HEALTHY HEARTS ON THE MOVE

ACTIVITIES AND INFORMATION FOR THE WHOLE FAMILY

The Parent Child Center collaborated with Northwestern Medical Center for the second year in a row to host the annual Healthy Hearts on the Move event in February of 2017. Parent Child Center staff provided exercise activities such as a dance & movement class, a bouncy house, parachute & free play in the gymnasium as well as face painting, crafts, heart-healthy raffled prizes and information on early childhood resources and parent child center programming. Five hundred people attended this event!



MUSIC & ART SHOW 2017

DEVELOPMENTAL SERVICES DIVISION SHOWCASES UNIQUE TALENTS



The attendees at Church of the Rock enjoyed an evening of music and artwork during May as the Program for Adaptive and Expressive Arts presented their Music & Art Show 2017. The theme this year was Disney. Friends, family, and community members supported our consumers in their musical and artistic endeavors throughout the evening.

The event required intense preparation of material. In the end, the many hours of rehearsals resulted in another successful event for everyone. The evening included visual media, visual recordings and interviews, and an art exhibit. ■

LIVELY NCSS NIGHT OF THE ARTS

BEHAVIORAL HEALTH DIVISION'S COMMUNITY REHABILITATION & TREATMENT TEAM TAKES CENTER STAGE



This past May as one of the highlights of Mental Health Awareness Month, NCSS presented the 16th annual 'Night of the Arts' talent show in the Bliss Auditorium at the St. Albans Historical Museum. The production showcased the creative endeavors of NCSS Community Rehabilitation and Treatment's staff and clients.

The evening has grown out of a universal need for people to express themselves in diverse ways as they learn to cope, to share, to communicate and to connect with one another.

The 'Night of the Arts' is another example of the Northwestern Counseling & Support Services

initiative to reduce stigma. In fact, NCSS prefers to look at STIGMA as an acronym for "Striving To Increase Good Mental Health Awareness."



KIDS FEST 2017



The Parent Child Center organized this family-friendly event which was held during June at Taylor Park and City Hall in St. Albans in partnership with nearly thirty organizations that serve local children and families.

The goal of Kids Fest is to increase our community's awareness of and access to programs and services while simultaneously fostering and providing a safe, fun environment for children and families in our region.

Roughly 125 children and 100 adults participated in the event.



AUTISM WALK 2017



The Fourth Annual Autism Walk of Northwest Vermont was held at Collins Perley Sport and Fitness Center on May 21, 2017. More than 200 people participated in this great event that benefits autism programming at Northwestern Counseling & Support Services.

As in years past, participants enjoyed face painting, bowling, sensory toys, music, and food. A few special additions joined this year's event, such as a kids' art auction that displayed pieces of art created by kids in NCSS programs! LuLaRoe, the well-known clothing company, also joined the crew and donated 25% of the proceeds to agency autism programs; the proceeds



generated at the walk were combined with funds raised on April 28th at the Family Center sale. Jessica Hubis of the Missing Piece Bakery generously donated 50% of her proceeds to autism programming. Her charming cookies were in the shape of puzzle pieces, the known symbol for autism.

The Autism Walk promotes the rights of individuals with autism and encourages respect for their differences. According to estimates from Center for Disease Control's Autism and Developmental Disabilities Monitoring (ADDM) Network, about 1 in 68 children has been identified with autism spectrum disorder (ASD).

Northwest Access TV, channel 15, was on site filming for a segment dedicated to the event. Staff, volunteers, and family members of individuals with autism were interviewed.

NCSS is blown away at the incredible generosity of the community. Aside from the fundraising contributions of the walkers and their pledge teams, businesses from around the area donated goods and services for the raffle. We had more prizes this year than ever before, and we are beyond

grateful. Thank you to all of those who participated. It truly was a community event.

We'd like to extend a special thank you to the following businesses and individuals for their generous donations:

LuLaRoe
Missing Piece Bakery
Habitat for Humanity
Scentsy
Price Chopper
Samantha Ovitt
Burns Farm Maple
United Steel Workers of America
Local 340
Kevin Smith's Sports Connection
The Grind Café
Build a Bagel
Bayberry Cottage
Tatro's Gourmet Soup & Sandwich
Moonshadows
The Traveled Cup
Mimmo's ■



COMMUNITY PARTNERS CLASSIC GOLF TOURNAMENT 2017

The 11th Annual Community Partner's Classic Golf Tournament (CPC) on June 16, 2017 was a success! Whenever rains rears its head in the forecast leading up to the CPC, the planning committee—made of the members from the three participating organizations, Northwestern Counseling & Support Services; Northwestern Medical Center; United Way of Northwest Vermont—takes a collective deep breath. Though it rained through the morning and the wind blew madly, the course was in excellent condition. The weather didn't put a damper on the event; the golfers were troopers! Decked out in rain coats, ponchos, and even galoshes, they took to the course, demonstrating that having fun is state of mind. As the raindrops fell outside of the clubhouse mid-morning, Emerson Lynn, editor at the *Messenger*, smiled widely and said, "It's all about the story!" It would be safe to say this tournament will be remembered.



The afternoon flight experienced some more pleasant weather with the sun making a few cameos. Jack Hungerford, golfer extraordinaire, got a hole-in-one! He won a year's

membership at the Champlain Country Club, where the tournament is held, and the prestige of sinking the very first hole-in-one in the tournament's history!

The golf tournament is a fun event for experienced golfers and novices alike. The three participating organizations are so grateful for the funds generated by the event and are always blown away by the generosity of the community.

Thank you immensely to our sponsors. It is due to your generosity that this event is such a success.

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HOLE-IN-ONE SPONSORS:

14th Star Brewing; Champlain Country Club; Eaton's Fine Jewelry; Paquin Motors, Inc.



RENAMING OF FAMILY CENTER A TRIBUTE TO TED MABLE



Ted Mable retired on July 5th, 2017 after nearly twenty years as executive director of Northwestern Counseling & Support Services. From renaming the organization to Northwestern Counseling & Support Services to creating the children's division,

Ted's thumbprint has been evident on numerous initiatives. While Ted's legacy will continue to thrive within these programs, his legacy will also live on in the new, renamed Family Center: what has been the Family Center of NCSS will now be the Ted Mable Family

Center. The conference room within the Family Center has already been dedicated to Ted Mable, and now the entire building and all of its programs will carry the name as well.

Renaming the building felt only right, as Ted Mable was instrumental in the erection and opening of the Family Center building at 130 Fisher Pond Road. The idea of the new farmhouse-style building was to consolidate the family and children's programs under one roof. "We're hoping it will lead to better coordination and provide one-stop shopping in a home-like setting," Ted stated to the *Burlington Free Press* in 2008. Since then, NCSS has continued to expand and even outgrow its 22,210-square-foot Family Center; the growth is another indicator of Ted's commitment to the community.

Each new program created within the Family Center means more employees and a greater need for space; more importantly, however, it means more needs are being met within the community. ■

DIVERSITY & CULTURAL AWARENESS

A WELCOMING ENVIRONMENT

NCSS is in the process of adding welcome signs to the entrance / lobby areas of all facilities.

We've always prided ourselves on being welcoming to everyone and this is a visual way of welcoming everyone from the community.



PCC SOMETHING FOR EVERYONE



Amy Johnson, MA., Parent Child Center Program Manager



Being a single parent can be incredibly challenging – the juggling act that is necessary to make the day function in a way that supports all aspects of family life is a feat that feels like it deserves an abundance of accolades. After a particularly long and tiring work week I realized it was going to be my first weekend alone without my partner. I was dreading it. While I was excited to spend time with my amazing daughter I also knew that filling time, without breaks, for two full days felt challenging and socially isolating. My natural supports had prior engagements so I looked to the community to find an enriching experience for myself and my child.

I was excited to discover the Healthy Hearts event put on in collaboration with The Family Center: Parent Child Center at NCSS and Northwestern

Medical Center. It felt odd to show up to the event alone but immediately upon entering the main activity space I found myself connected to Parent Child Center staff who helped me and my daughter to connect with activities and other caregivers and children.

Not only was I able to connect with the staff, parents, and caregivers but my child was engaged, enriched, and had positive social interactions of her own. I learned new games and activities to try at home, healthy food ideas (since we know trying to find healthy food a toddler will eat can be incredibly maddening), and had FUN!

The Parent Child Center (PCC) Network is such an integral part of each Vermont Community – they work to achieve the best possible outcomes for families by ensuring: families are

safe, nurturing, stable, and supported; children and young people achieve their potential; pregnant women and young people thrive; children are ready for school; and children succeed in school. PCC's are able to help children and families thrive in this way by offering home visits, early childhood services, parent education, playgroups, parent support groups, concrete supports, community development, and information and referrals. There really is something for everyone! No matter one's situation, we all want support, social connections, and the best for our children. Being a caregiver is an awesome, life-changing experience and also an incredible amount of hard work. Nobody should have to do it alone. And we don't because we have our amazing local PCC that offers so much to the children and families in Franklin and Grand Isle. ■

VT'S CRISIS: CHILD CARE

By Emerson Lynn

As seen in the
 **St. Albans MESSENGER**

The traditional childcare provider model seems to be falling apart, and the effects are pushing Vermont, and counties like our own, into a full blown crisis. Last year, Franklin County lost 42 registered programs and two childcare centers. Richford and Alburg have lost half their providers. There are essentially no available slots for working parents with infants and toddlers.

The collapse in the number of providers is problematic. It affects employment. It affects our schools. It affects our ability to grow and prosper. And it affects, long term, our social structure.

The reasons for the collapse vary, but primarily the positions don't pay enough to make them something people will pursue, and there is a necessary shift from simply being a provider of care to having expertise to teach as well.

Of the 42 providers who closed their doors, 11 of them left for better jobs, nine moved out of state, four closed because of stricter state regulations, four retired, with the remainder leaving for other reasons, according to Michelle Trayah, the childcare resource development specialist for Northwestern Counseling & Support Services [NCSS].

NCSS has stepped in as the county's facilitator, drawing the public's attention to the issue and its severity. In a Messenger story Wednesday the depth of the crisis was put simply by Deb Grennon, director of the Franklin Grand Isle Bookmobile: "The decline in childcare accessibility really stresses out families and it's affecting how kids

are developing and the quality of care that they get. It's even affecting whether people work, how they work, where they work and even when they're going to have another baby or if they're going to have a baby at all."

This is not a Franklin County problem; it's a Vermont problem. And it cannot be solved by simply sliding a little more money into the same tired system. In fact, the only upside to losing 42 registered child care providers is that it's forcing us to recognize the crisis and to look for common sense solutions.

That search has to begin with the understanding that the resources are available, and that the potential savings and societal value are so pronounced that access to high quality childcare should be placed at the base of the state's economic development pyramid. We can't get from here to there without it.

Consider for example, that 42 percent of the children born in Vermont have their births paid by Medicaid. Follow those children. What percentage of those children end up going to school on Individual Education Plans? What percentage of them are cared for by dollars disbursed by the Agency of Human Services. What percentage of a school's costs are devoted to special education? What is spent on mental health services?

Consider that as a state we spend more on a per pupil basis for our schools than almost any other state.

Consider the teacher-pupil ratio nationally is about 16 students per



teacher. In Vermont, it's roughly eight students per teacher.

Consider that one of the key challenges facing the sustaining ability of the Vermont State College System is raising the matriculation rate from high schools to secondary education.

Consider that employers can't find enough workers adequately prepared for today's workplace.

All these needs have their roots in Vermont's ability, and its willingness to address our early childhood needs.

Think about this, if this is not addressed, then to Ms. Grennon's observation: Wouldn't a couple think twice about having a child? Or two? Why would a company locate here, if

their employees would be so stressed over childcare availability?

Vermont's Agency of Human Services, with its 3,700 employees and a \$2.5 billion budget represents about half of all the state government. How do we ever address its sprawl if we don't deal with the health and educational needs of our youngest citizens?

We spend \$1.6 billion each year on education. We spend roughly \$5 billion on health care. And when we add the \$2.5 billion spent each year on the

Agency of Human Services that's a little over nine billion in total dollars, money that is, for the most part, spent not in the first years of a child's life when it's at its most formative stage, but from that point forward.

Think what we could save. Think of the good that could be done. Figuring this out is very doable. The money is there. The resources are there. The need is there.

What's necessary is the leadership to articulate the vision, and the tenacity to

follow through. Gov. Phil Scott had the right message with the opening of the legislative session. Our early education needs are central to the state's ability to prosper.

His approach was flawed, and it's something to which he needs to return. It's hard to think of any investment of time, energy and resources that would have a greater return. ■

LEGISLATORS UPDATE COMMITTEE WORK: CHILD CARE MAIN FOCUS

By Elaine Ezerins, Messenger Staff Writer

State legislators discussed child care, ethics, the budget and adverse childhood experiences during the Franklin Grand Isle Community Partnership meeting Wednesday morning.

All of the house representatives who showed, Carl Rosenquist, Marianna Gamache, Barbara Murphy, Cindy Weed, Kathy Keenan, Chuck Pearce, Steve Beyor, Brian Savage and Dan Connor; had a chance to share about work their committee accomplished during the last session.

Rosenquist, who served on the House Committee on Human Services, said he is looking forward in continuing the committee's work on Adverse Childhood Experiences (ACEs). "Some of the evidence that we heard in our committee is pretty dramatic," he said.

Research shows negative experiences during early childhood

development can affect a person's future outcomes, according to Rosenquist.

He said his committee will be working on the issue over the next legislative session to figure out how to better integrate the work many agencies already do in regards to ACEs. "I think it's an exciting opportunity for us to deal with," said Rosenquist. "The big problem is how are we going to get it done?"

"I'm disappointed that we spent so much time on two other bills in our committee, which had to do with marijuana, instead of spending some real time on things that I think were a lot more important to our society in general," he concluded.

Gamache who also served on the House Committee on Human Services, picked up where Rosenquist left off, "Carl touched on the marijuana issue

that we spent way too much time on," she said.

"The other two things that are going to be grappled with this next session... one has to do with child care."

Gamache said determining the difference between childcare and early education and which state agency the two fall under needs to be resolved in the next legislative session. She said it's a "very concerning issue" right now because the new childcare regulations placed on providers are putting some out of business.

The new regulations require registered home providers to have higher levels of education or training and include new requirements for health and safety in the home.

Gamache said the new regulations have contributed to Franklin County's



shortage of childcare providers. "So that's got to be resolved," she said.

According to the Northwestern Counseling & Support Services' Parent Child Center, four of the 42 providers who stopped providing childcare in the past year, cited the regulations as a factor.

When it was her turn to speak, Barbara Murphy, who sits on the House Committee on Transportation, started by sharing a personal triumph.

"A 25 year mission of mine was to get a crosswalk in Fairfax and I started it when I had children in the school system, trying to go from one side of 104 Main Street to the other side," she said, "but it's a state highway, you're not allowed to cross the road."

Murphy said she's received word that within the month, the town will have permission to apply for a permit to put a cross walk in by Foothills Bakery. "I'm not going to believe it until I see

the paint on the road," she said, but she put up balloons to mark where the crosswalk is being proposed.

Murphy said almost \$1 million in additional money was added to the 2018 transportation fund for public transit. She said that this should help the people who are being negatively impacted by the more stringent inspection requirements for vehicles.

Cindy Weed, a member of the House Committee on Government Operations, said one of the more important bills to come out of her committee was the ethics bill, requiring political candidates to disclose financial information.

The ethics bill also requires towns and cities to have conflict of interest policies and sets up a commission to review ethical complaints and create a state code of ethics.

Weed said Vermont was ranked very low nationally in terms of ethics because the state lacked transparency

around these areas. "[Now] people can look for themselves if they feel that there's a conflict," she said.

"A lot of the conflicts that we heard about in committee and in testimony were at the local level, interestingly," said Weed. "We straightened that out so I feel really good about that."

Last to speak was Kathy Keenan, ranking member of House Committee on Appropriations.

"There are some things that I was really proud of that we did," she said, including increase in funding for childcare by \$2.5 million. "It's very difficult of people to go to work if they don't have adequate childcare or if they're going to fall off the [benefits] cliff or if they don't have transportation," said Keenan. "There's a lot of barriers that we have in Vermont because we're a rural state." ■

HEALTHY READING AND WALKING



Wednesday, The Family Center, The Parent-Child Center of NCSS play-group, hosted its end-of-year field trip with a rail trail scavenger hunt and story walk in St. Albans. Collaborating with the Vermont Department of Health, the organizations provided healthy snacks, recipe cards and a story with pictures to look as families walked up the trail. The free play group resumed in September on Wednesday mornings at 9 a.m.

Left, Emma, age 2, and her father, Joe, look at one of the segments of the story along the rail trail. The story embraced living healthfully and incorporating exercise. ■

Northwestern Counseling & Support Services
107 Fisher Pond Road
St. Albans, VT 05478



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