



# CRISIS SUPPORT SERVICES of Alameda County



## From the Executive Director

By Nancy Salamy, LMFT

FALL 2014 NEWSLETTER

Dear Friends,

Fall is the time of year for reflection and to look back at all that we have accomplished over this last year. In June, we celebrated our 4th annual walk/run for suicide prevention around Lake Merritt. And in September, we completed a successful 11th Annual Robby Babcock Memorial Golf Tournament, thanks to Kevin Chambers and the Babcock family. As we review this year, we are all very proud to share with you the outcomes of our services for fiscal year 2013-2014. We are fortunate to have amazing staff, volunteers, interns, and clinical supervisors who work hard to provide the very best services to our community.

The focus of this newsletter is Trauma Informed Care (TIC) and how we have integrated TIC as both a philosophy, and a treatment model for all of our programs at Crisis Support Services. Sadly, we cannot get through life without any traumatic event impacting us. However, the clients that we serve are oftentimes impacted by multiple traumas that are outside of one's control and can be devastatingly overwhelming. It is our desire to serve each one of our clients with the utmost respect and the belief in their ability to heal.

In September we all learned of Robin Williams's death. This news was devastating for not only his family and closest friends, but for all of us who have been touched by his talent and kind spirit. In response to this sad loss, I posted the message below on our Facebook page:

*We at Crisis Support Services of Alameda County are deeply saddened by the death of Robin Williams; and we extend our deepest sympathy to his family. His death reminds us of the more than 39,000 people who die by suicide each year in the United States. And his death reminds us of the suffering that these families are experiencing when we lose a loved one from suicide.*

*The work of our crisis center is so important in providing caring support and crisis intervention by skilled crisis counselors who have an amazing capacity for being there for someone in pain and at their darkest hour, at any time during the day or night. We are grateful to provide this important service and we thank those who support us. If you or anyone you care about is depressed, living with mental illness, or suffering in any way, please let them know about our services. Please give them our crisis line number: **800-309-2131**. We will be there for you.*

Now that Thanksgiving is approaching, I ask you to think about those we are there for and how you can help make a difference in their lives. Make a donation today, during our Year-End Campaign, or both. We are so very thankful for your support.

Warm regards,

### Grief Counseling

# of adult clients served...115  
# of sessions...1,295

### Senior Counseling

# of senior clients served...167  
# of sessions...3,004

### Stress Counseling

# of individuals served...2,006  
# of sessions...878

### School-Based Counseling

# of individuals served...209  
# of sessions...2,611

### DURING THIS PAST YEAR: 2013-2014

#### Community Education: Teens for Life

# of middle & high school students served...10,069  
# of classroom presentations...321  
# of school gatekeeper trainings...17  
# of staff & parents trained in gatekeeper trainings...414

#### Community Gatekeeping & Mental Health Consultations

# of gatekeeper presentations & trainings...59  
# of adults from the community trained...1,179  
# of community health fairs attended...22  
# of community members at fairs reached...1,877

#### The Crisis Line

# of Crisis Line calls...65,849  
# of emergency outreach calls...92  
# of emergency dispatch rescues for clients w/imminent risk for self-harm...144

#### Text Counseling

# of text sessions...509

#### Clinical Interns & Volunteers

# of clinical interns trained...32  
# of licensed supervisors...18  
# of Crisis Line volunteers...168



## **CSS Provides Safe and Accessible Environment to Promote Healing and Wellness**

**By Binh Au and Devah DeFusco, LMFT**

Consumers' initial-felt sense of safety and welcoming are key components of a successful trauma informed care agency. CSS strives to maintain a physical environment that is comfortable and inviting and thus, promotes healing and wellness. Our entire staff is warm and embracing of all clients and this warmth projects caring and emotional safety. We are aware that clients coming into the agency for services may have traumatic personal histories. Being mindful of this fact, every effort is made to avoid inadvertent re-traumatization.

Our lobby is calm and nurturing. We have removed all uncomfortable furniture and have de-cluttered the waiting area. The paintings on the walls are soothing and we have posters throughout the agency that convey positive and hopeful messages. A water cooler was recently installed in the lobby to provide fresh water to clients. We have given our conference room a complete makeover. There is a fresh coat of paint, new tables and chairs and a new air conditioning unit. We have support groups almost every night of the week, and the group members have responded positively to the changes.

Attention has been given to the physical safety around the building. We have security cameras and an alarm. All entrances have floodlights and the parking lot has a gate that closes at sundown. Clients are given a code to enter the parking lot after sundown, and their counselors greet them at the door.

Increased physical and emotional safety improves the social environment at CSS so clients can feel comfortable coming for services. Ultimately, we work to create a community of hope, healing, and recovery.

Accessibility is another key component of a trauma informed care agency like CSS. We work to mitigate the barriers and challenges to accessing services. Our business office is open from 9am to 5pm, Monday through Friday, and our administrative staff will answer calls for information and/or services. Requests for counseling calls are returned daily and clients are connected with services in a seamless and timely manner. The intake process for clients has been condensed and streamlined to help reduce stress at the on-set of treatment.

CSS also applies culturally responsive principles to our service delivery. We utilize a translation service on our Crisis Lines that can translate in over 140 languages. Our Teens for Life cards have the Crisis Line information printed in the County threshold languages. Counseling forms are translated to better serve monolingual Spanish clients.

For clients who come to the agency for services, we are accessible by BART and by two bus lines. Due to age or disability, many of our clients and staff have mobility challenges. The agency is wheelchair accessible. For seniors who are unable to come to the agency, our interns provide services in their homes. Counselors are responding to calls on the Crisis Lines, 24 hours a day, 7 days a week.

**Services are just a phone call away.**



# Is Recovery Possible?

By Cristina Rita, MA & Mercedes Coleman  
Community Education

Did you know that you are more likely to encounter a person in an emotional or mental health crisis than someone having a heart attack?

Did you also know that mental health disorders are more common than heart disease and cancer combined?

According to the National Alliance of Mental Illness (2013), one in four adults, approximately 61.5 million Americans, experiences a mental illness in any given year. Research suggests that approximately 70% of U.S. adults have experienced at least one traumatic event in their lifetime. The annual financial impact of mental illness including trauma, runs America \$193.2 billion each year. This cost includes psychiatric and non-psychiatric medical treatment, indirect workplace costs, mortality costs, and prescription drug costs and lost earnings. These numbers remind us that mental illnesses are common and that recovery is possible.

One of Crisis Support Services' many goals is to help educate and raise awareness in our community that addiction treatment and mental health services can help people with mental health issues, trauma histories, and substance use disorders to recover and lead productive lives. Each day, people recover and are leading self-directed and satisfying lives.

## WHAT IS RECOVERY?

Recovery for most is a lifelong process and takes dedication and hard work. According to The Substance Abuse and Mental Health Services Administration, recovery is defined as:

*There are many different pathways to recovery and each individual determines his or her own way. Recovery from mental health and/or substance use disorders is a process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential (SAMHSA, 2013).*

## HOPE IS KEY

Recovery emerges from hope. The individual must hold the belief that recovery is real and possible. Individuals in recovery have to overcome stigma as a barrier to seeking and receiving help and other obstacles, such as access to medical care and treatment.

They must learn to have hope, but they cannot learn it alone. Hope needs to be fostered by peers, families,

providers, allies and other members of the community. Hope is the key to all recovery. There are nine areas that dictate the recovery process.

**1. Person-driven-** Self-determination and self-direction are the foundations for recovery. Individuals in recovery need to define their goals and determine their path to reach these goals.

**2. Recovery occurs via many pathways-** Each person in recovery is a unique individual with distinct needs, strengths, preferences, goals, culture, and backgrounds including trauma experiences that affect their pathways to recovery.

**3. Holistic-** Recovery is not something that happens only in the mind. It encompasses the whole body including mind, body, spirit, and community.

**4. Recovery is supported by peers and allies-** Support is vital to recovery. Sharing of experiential knowledge and skills as well as social learning, play a critical role in recovery. This support comes from peers, professionals, families, faith communities, and other community supports.

**5. Recovery is supported through relationships and social networks-** It is important for the person in recovery to know that there are others who believe in their ability to recover. Family members, peers, providers, faith groups, community members and other allies play a role in holding hope that recovery is possible.

**6. Culturally based and influenced-** Culture and cultural background are key in guiding a person's journey.

**7. Recovery is supported by addressing trauma-** The experience of trauma (such as physical or sexual abuse, domestic violence, war, disaster, historical trauma, and others) must be addressed in the recovery process. Services should be trauma-informed to foster safety and growth.

**8. Recovery involves individuals, family, and community strengths and responsibility-** Individuals, families, and communities have strengths and resources that become the foundation for recovery. Individuals in recovery also need to take personal responsibility for their own journey.

**9. Recovery is based on respect-** Societal acceptance, community and systems must learn to appreciate and accept people with mental health issues, substance use issues, trauma histories, as important parts of our communities (SAMHSA, 2013).

Recovery happens each day, a little at a time. For some clients, recovery is the ability to have no symptoms of their illness. For others, it is the ability to manage their symptoms, whether from mental illness, substance use, or trauma and still maintain their lives.

*Continued on Page 4*

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## RECOVERY & OUR ROLE AS A COMMUNITY

At Crisis Support Services of Alameda County, we recognize that many of the clients we serve not only have a mental health disorder, substance use disorder, physical illness, and/or disability, but also trauma histories. Most importantly, we also recognize that each of these individuals can recover and lead full, satisfying and productive lives.

We support the hope of recovery throughout all of our programs, including our: 24-Hour Crisis Line; Text Line; Stress Counseling Program; School-Based Counseling Program; Older Adult Program; Grief Counseling Program; and Community Education Program. We know that all of our clients are unique and have unique abilities. We meet each client where they're at, in keeping with the humanistic theoretical orientation of the agency. The humanistic orientation promotes seeing clients as whole, vital human beings. We are able to hold hope, the keystone of recovery, when that client may not be able to hold it for him or herself.

There is still much work to be done to better foster recovery. Each one of us plays a role. Helping someone recover begins with our community raising awareness by bringing mental illnesses out of the shadows and into the light. We can speak out against stigma when we witness it and inspire compassion. Friends and family can help by holding the hope while an individual learns to discover it for themselves. We all can be the holders of hope for someone on the road to recovery.

### RECOVERY RESOURCES

Family Education Resource Center (FERC)  
[www.askferc.org](http://www.askferc.org)

Mental Health America  
[www.mentalhealthamerica.net](http://www.mentalhealthamerica.net)

Mental Health Association of Alameda County  
[www.mhaac.org](http://www.mhaac.org)

National Alliance on Mental Illness  
[www.nami.org](http://www.nami.org)

Substance Abuse and Mental Health Services  
Administration  
[www.samhsa.gov](http://www.samhsa.gov)

Del Vecchio, P. (March 2012). SAMHSA's Working Definition of Recovery Updated. Retrieved September 13, 2014, from <http://blog.samhas.gov/2012/03/23/definition-of-recovery-updated/#.VBUT4y5dW0Y>

National Alliance on Mental Illness (2013). Mental Illness Facts and Numbers. Retrieved September 13, 2014, from <http://www.nami.org/factsheets/MentalIllness.factsheet.pdf>

Substance Abuse & Mental Health Services Administration  
September 21, 2014. About Recovery Month, from <http://www.beta.samhsa.gov/recovery-month>

## Trauma in the Schools

Submitted by Binh Au

*Crisis Support Services of Alameda County provides trauma informed, school-based counseling in elementary, middle and high school. The following is an excerpt from an interview with a counseling intern who provided services in the school. To preserve the confidentiality of our clients, the student's name, and the name of the school are intentionally omitted.*

### What kind of trauma did you see with the students you served in the schools?

Sexual abuse, physical abuse, community violence, drive by shootings, deaths due to violence, personal attacks on family members, witnessing domestic violence, family discord, car accidents, homelessness, fear of homelessness, suicide of parent, alcohol/drug use of parent, institutionalized racism, sexism, classism, authoritarianism, homophobia, bullying, cyber-bullying, neglect, and abandonment. This is a partial list.

### How does Trauma Informed Care influence how you work with the youth that you serve?

Often times, the reason for referral to counseling is disruptive behavior, ADHD, or "discipline." As I work with the youth, I begin to see evidence or symptoms of trauma. Over the summer, I read an article about how ADHD is so frequently diagnosed by doctors. The article questioned how many of these cases involved, might involve trauma. This is also what I have been thinking about and experiencing in terms of my work. Sometimes the kids who have the ADHD diagnosis from their doctor also report traumatic experiences to counselors. This is not to say that many students do not have ADHD. I have also worked with students who struggle with impulsive behavior and attention problems that have not reported or indicated traumatic experiences.

### How has CSS contributed to your understanding of Trauma Informed Care?

CSS is a very supportive community that encourages me to practice self-care.

### What kind of resilience do you see in the youth you have served?

Many of the kids I have worked with have shown remarkable resilience. They often find ways to cope. Younger children tend to play, whereas the older teens tend to form close-knit friendships.

### Leaving out identifying information, can you share a success?

Last year I worked with a little girl who was not participating in class or talking to her teacher. The staff was really concerned because they could not find a way to connect with her. One day, she decided to talk to me at length, out of the blue. This was followed by spontaneous and intense play. I continued to follow her, only playing, reflecting, and participating. Over time we formed a strong therapeutic alliance and she cried when I agreed to make an art project with her (she had asked). By the end of the year, she was smiling, talking, doing her work, participating, and asking to come to counseling.



# Trauma Informed Care 101

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Trauma involves deeply distressing experiences. Often, these experiences generate emotional shock that creates significant and sometimes lasting impacts on a person's mental, physical and emotional capacities.

Trauma is highly pervasive. Surveys of the general population suggest that at least half of all adults in the United States have experienced at least one major type of trauma. A traumatic event can be a single experience or a series of experiences. Trauma often occurs when our basic life assumptions are shattered. Examples might include: "the world is safe;" "people are good;" or "I am in control." After a traumatic event, an individual may experience feelings of powerlessness, fear, or hopelessness.

## Trauma and Mental Health

The impact of trauma is individual to each person. Trauma often impacts our core parts of self and therefore by its very nature is a deep and life altering experience. Exposure to trauma can affect many areas of one's life and can increase the risk of a range of vulnerabilities including: relationship problems; social alienation; low self-esteem; difficulty thinking clearly; difficulty with feelings; body issues; sexual challenges; and physical problems. Trauma has been found to be the central issue for people with mental health problems, substance abuse problems, and co-occurring disorders. Studies conducted over the past decade have consistently highlighted the link between trauma, mental health, and behavioral health.

## Trauma Informed Care vs. Trauma Specific Treatment

A majority of persons served in public mental health and substance abuse systems have experienced trauma and have been severely impacted by these experiences. Neglecting to address trauma can have huge implications for the effectiveness of mental health treatment and short and long-term wellness of the individual. Trauma Informed Care is an approach that aims to engage people with histories of trauma, recognize the presence of trauma symptoms, and acknowledge the role trauma has played in their lives.

Trauma Informed Care is grounded in and directed by a thorough understanding of the neurological, biological, psychological, and social effects of trauma and the prevalence of these experiences in persons who receive mental health services. It takes into account knowledge about trauma—its impact, interpersonal dynamic, and paths to recovery—and incorporates this knowledge into all aspects of service delivery. Trauma Informed Care also recognizes that traditional service approaches can re-traumatize consumers and family members.

## Trauma Informed Care is about creating a culture built on five core principles:

- 1) **Safety:** Ensuring physical and emotional safety
- 2) **Trustworthiness:** Maximizing trustworthiness, making tasks clear, maintaining appropriate boundaries
- 3) **Choice:** Prioritizing consumer choice and control
- 4) **Collaboration:** Maximizing collaboration sharing of power with consumers
- 5) **Empowerment:** Prioritizing consumer empowerment and skill-building

**Crisis Support Services has integrated Trauma Informed Care as both a philosophy and a treatment model for all of our programs.**

**While we recognize the prevalence of trauma is high and understand that the impacts of these traumas can be significant, we believe people can and do recover and heal.**

**Many thanks to our recent donors!** We thank all of our donors and supporters, and recognize the following donors for their very generous support. Our apologies if we missed you. Please let us know so we can list you next time (510) 420-2472 or [kmizuhara@crissupport.org](mailto:kmizuhara@crissupport.org).

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