

Our Human Community

Mental Health & Addiction Recovery in Ashland County, Ohio



Infants, Children
& Parents



Youth
& Adolescents



Young Adults
& Adults



Older Adults
& Elders

Supporting and promoting attitudes and services that do no harm.

- Trauma-Informed Care
- Resilience & Recovery
- Medication Optimization



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Our Human Community Our Human Experience



This booklet is an executive summary of a 32-page white paper, titled *Our Human Community*, which includes a full description of the philosophy and framework of policies and services supported by the Ashland County Mental Health and Recovery Board of Ashland, Ohio. We invite you to download that complete document from our website as well:

www.ashlandmhrb/ourhumancommunity.pdf

- You deserve the best quality of life possible—no matter how old you are or where you live or what you are experiencing right now in your life journey.

- You are an important and complex person.

• You have a body with many systems that work together.	Biological self
• You have an active mental and emotional life.	Psychological self
• You have a rich social life of relationships with family, friends, neighbors, co-workers, and maybe a faith community.	Social self

- All parts of you interact all the time. This includes your biological self (body), your psychological self (mind), and your social self (relationships). Each part influences the other.
- Not everyone sees this or believes this.
- Modern society and modern systems of care have become so highly specialized and focused on technology that many professionals and other people can only see what they've been trained to see.
- They might not make the time or have the ability to understand all the experiences that make you who you are—and make all of us human.
- We want to make sure there are individuals, organizations, and institutions in our community that understand the wholeness (and completeness) of you and the human experience.
- We want our community to help you take care of yourself and your loved ones across the lifespan.
- We want our community to help you and your loved ones live a full life.

“I don’t believe in ‘mental illness.’ My thoughts, moods, feelings, and emotions are not a disease, disorder, or an illness. They are me. They are the essence of my being and what makes me a unique human being.”

—Patrick Risser, mental health advocate from Ashland County

Mental Health & Addiction Recovery

Welcome to *Our Human Community*, a public information and education philosophy of the Mental Health and Recovery Board (MHRB) of Ashland County, Ohio. The purpose of this booklet is to introduce you (or re-introduce you) to the work we do to support and promote attitudes and services for mental health and addiction recovery that *do no harm* to people who live and work in Ashland County. This booklet focuses on the following:

- Who We Are & What We Do
- How We Support Our Community
- Importance of Local Planning & Governance
- Our Philosophy & Framework | Three Legs of the Stool
 - Trauma-Informed Care
 - Resilience & Recovery
 - Medication Optimization

WHY HUMAN COMMUNITY?

The MHRB has chosen the words *Our Human Community* for this public information and education initiative to remind ourselves and everyone else in Ashland County that the foundation of community is *people*—individual human beings, including infants, children, adolescents, young adults, adults, older adults—and their families. All of us have important feelings, thoughts, and perceptions about our experiences that inform the stories we tell ourselves and others about who we are.

The Board has also chosen the words *Our Human Community* because we are relational beings. Each of us is always *in relationship* with others. In fact, our feelings, thoughts, and perceptions about ourselves, each other, and the world around us are influenced and shaped by relationships. This happens throughout our lifespan—from birth to old age.

This never-ending *process of relationships* is what we call community. We are always in a human community, because we are always in relationships. There are people around us in the outside (social) world, and

there are representations of people inside our (psychological) world of emotions, thoughts, and memories. We carry people with us all the time—even when they are not near us or are no longer with us. This is the power of the human mind and experience.

Daily Choices

Each of us has an important choice to make every day about our attitudes and behavior. Do we want relationships within our families, schools, neighborhoods, organizations, institutions, and community to hurt? Or do we want those relationships to acknowledge us, to support us, to protect us and help us flourish, thrive, and reach our goals?

WHO WE ARE & WHAT WE DO

The Mental Health and Recovery Board (MHRB) of Ashland County is a branch of county government which oversees the planning, funding, and provision of public services for mental health and addiction recovery. These services help individuals and families in Ashland County address mental and emotional suffering and addiction to alcohol, tobacco, opiates/opioids, and other drugs. The Board works to ensure services are available for all individuals and families:

- Infants, Children & Parents
- Youth & Adolescents
- Young Adults & Adults
- Older Adults & Elders

Guidance & Oversight

The Board does not provide services directly to individuals and families. Instead, it contracts for services from local community agencies and other organizations that provide the help. The Board is responsible for the following:

- Develop a philosophy (framework) to guide attitudes about and services for mental health and addiction recovery
- Assess and determine service needs in the community

- Develop a community service plan and education plan
- Establish service and education priorities
- Direct financial and human resources to identified needs
- Monitor and evaluate outcomes of services and education initiatives

PHILOSOPHY & FRAMEWORK

A philosophy (or framework) is an important first step. It is an organizing principle—an approach to our work, a game plan. It answers an important question. What do we value most?

At the Ashland County MHRB, our first principle is this: *Do no harm!* We borrow this phrase from the Hippocratic Oath pledged by every physician who practices the art and science of medicine and healing. This philosophy and pledge is simple, clear, and direct. Everybody understands what it means.

Some professionals and other people might use different words to describe what the MHRB does. They might say we help people with mental illness, mental disorders, and substance abuse disorders (addictions). However, in Ashland County, we try not to use the words *illness* and *disorders*, because we believe this language can be harmful. These words brand human beings as deficient. These words essentially say the following:

- “There is something *wrong* with you.” / “What is *wrong* with you?”
- “There is something *wrong* with them.” / “What is *wrong* with them?”
- “There is something wrong with me.” / “What is *wrong* with me?”

We disagree. We acknowledge that mental and emotional challenges and addiction are a part of the human experience. They arise from and/or impact the biological self (body), the psychological self (mind), and the social self (relationships with others). In other words, there are conditions and circumstances which contribute to the emergence of suffering and addiction—and to the frequency, intensity, and duration of problems. It is important to note, however, that this understanding of human suffering does not excuse harmful behavior. Individuals are always responsible and accountable for how they act.

Acknowledge & Respect Personal Stories

In Ashland County, we encourage professionals and other people to suspend their judgement of individuals who experience and express pain and suffering. We encourage you to *be curious*. We invite you to listen to each other’s personal stories. Start by taking the time to ask very simple, clear, direct, and non-threatening questions, such as the following:

- “What happened to you?”
- “What happened to them?”
- “What happened to me?”

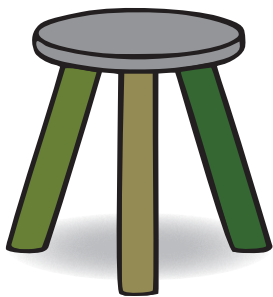
In Ashland County, we choose our words (our language) carefully, because it is always our intention to be as respectful as possible to fellow human beings who are experiencing difficulties and challenges.



Recovery

“The guiding principle of recovery is restoring a sense of power and control in the victim.”

— Judith Herman



Three Legs of the Stool

In 2014, the Mental Health and Recovery Board (MHRB) of Ashland County wrote, published, and adopted an integrated and cohesive philosophy of values and principles and described it in a document titled *Three Legs of the Stool: A Framework for Community Mental Health Services*.

We chose three legs as a metaphor to organize three core values and principles that we use to prioritize, develop, and evaluate services for mental health and addiction recovery for people of Ashland County, Ohio. We chose three legs of the stool as a metaphor because three legs are the minimum necessary for a stool to support us when we sit or stand on it to work. Three legs are necessary to give us strength and utility.

Today, we continue to use three legs—three core values and principles—to inform our approach to supporting and promoting helpful *attitudes about and services for* mental and emotional suffering and addiction recovery. These three core values and principles are

- Trauma-Informed Care (see page 8)
- Resilience & Recovery (see pages 9-10)
- Medication Optimization (see page 11)

HOW WE SUPPORT OUR COMMUNITY | THE STRUCTURE

Some professionals and other people might call the Mental Health and Recovery Board (MHRB) of Ashland County a *public institution* or a *government agency*. However, we look at our organization differently. To us, the Board is primarily a *group of people* from Ashland County who dedicate their time, attention, energy, talent, and expertise to ensure the following:

- Philosophy (framework) of services and community education that promotes and supports attitudes and actions that ***do no harm*** to people who experience mental and emotional challenges and addiction
- Adequate funding of services and education that meets the needs of residents of Ashland County
- Provision and delivery of high-quality services that meet the needs of residents

Executive Summary

Volunteers

The MHRB of Ashland County is governed by 18 citizen volunteers who represent the community. They come from diverse backgrounds and are comprised of the following:

- Mental health and addiction professionals
- People who have received or are receiving services
- Family members and other caregivers of people who have received or are receiving services
- Advocates of attitudes and services that eliminate negative attitudes (stigma)
- Other community members who wish to support and promote mental health and addiction services that are supportive of residents of Ashland County

Staff

The Board employs an executive director and small staff who run the day-to-day operations of the Board. For more information about current staff, visit our website.

HOW WE SUPPORT OUR COMMUNITY | THE FINANCES

As briefly noted above, the Ashland County MHRB (like other county boards in Ohio) does not *provide* clinical services for mental health and addiction recovery. Instead, we contract (or pay) for services that are provided by local community agencies and other organizations. The money to pay for services comes from public sources.

State & Federal Funds

The Ashland County Board (like other county boards in Ohio) receives the majority of public funding from the state and federal government that is made available for mental health and addiction services in our county.

Local Funds

In addition, the Ashland Board (like all county boards in Ohio) is authorized by the Ohio Revised Code 5705.221 (state law) to leverage a property tax—with approval from the county commissioners and Ashland County voters. The tax levy provides *local* revenue from *local* residents for *local* services. Like most counties in Ohio, Ashland County has such a levy.

Ashland Voters

For many years, residents of Ashland County have supported each other by voting for a renewal of the property tax levy which helps pay for clinical and recovery services that help individuals and families of Ashland County. For this we are grateful and thankful. Your support enables us to do our work to support and promote attitudes and recovery services for your loved ones, friends, co-workers, neighbors, and members of your faith community.

IMPORTANCE OF LOCAL PLANNING & GOVERNANCE

All counties in Ohio have a mental health and recovery board like ours. County boards serve an important purpose. They understand the needs of *their* communities, whether they are urban, suburban, rural, or a combination of these. Each county board develops priorities that meet the needs of their communities. They oversee the philosophy, funding, and provision of services that help individuals and families who live and work in their communities.

A Local Voice for State and Federal Initiatives

County boards collaborate with departments and agencies of the State of Ohio, Federal government, and national health and behavioral health research and policy initiatives. This is important, because we are able to represent and give voice to the conditions and needs of Ashland County. Legislators and other people who work for the State and Federal government may wish to establish a one-size-fits-all approach to mental health and addiction services to simplify the *administration of funding* for those services. When

this is done, however, something important gets lost. People who do not live or work in our community likely do not understand the social, cultural, political, and economic conditions and history of our region.

A Focus on Our Local Community

The staff and volunteers of the Ashland County MHRB understand our community. And we promise to do everything we can to support and promote attitudes and services that respond to the needs of people in our community. We direct our attention and resources to residents and support a number of nonprofit organizations that provide community-centered services.

Collaboration with Community Partners & Stakeholders

The Board collaborates with many individuals, organizations, and institutions (community stakeholders) in and around Ashland County as a way *to maximize* the impact and effectiveness of positive attitudes and supportive services for our residents. Staff of the Board also participate on committees, coalitions, and workgroups of nonprofit, for profit, and government organizations and agencies that often interact with and provide services to residents of Ashland County.

Collaboration with Other Communities

We also collaborate with organizations and institutions in neighboring counties that provide services to our residents.

For a list of these organizations, visit our website:

■ www.ashlandmhrb.org



Your Support

For many years, residents of Ashland County have made a commitment to each other by voting for a renewal of the property tax levy which helps pay for clinical and support services that help individuals and families in the county who experience mental and emotional challenges and addiction. For this we are grateful to you.



Trauma-Informed Care

- **Trauma** is the experience of not having control over your safety. It is an experience of severe shock and injury. It may also be a *threat* of severe shock and injury.
- Trauma may occur to one or several parts of yourself at the same time and cause injury to
 - Body (biological self)
 - Emotions and thoughts (psychological self)
 - Relationships (social self)
- The words *trauma* and *violence* and *abuse* are often used to mean the same thing. Trauma and abuse can also be described as *assault* and *neglect*.
- Trauma can happen to anyone at any stage of life—including infants, children, adolescents, young adults, adults, and elders.
- **Traumatic events** may occur in many forms. Some examples include the following:

■ Natural disasters	(e.g., fires, floods, tsunamis, earthquakes, tornadoes, hurricanes)
■ Armed violence and conflicts	(e.g., active shooters, police raids, riots, gang fights, war, genocide)
■ Harmful interpersonal relationships	(e.g., family violence, family neglect, school violence, neighborhood violence, school bullying, workplace bullying, sexual harassment, sexual assault, and rape)
■ Harmful group relationships	(e.g., racism, sexism, ageism, classism, homophobia, and employer and employee conflicts)
■ Harmful institutional policies and procedures	(e.g., forced restraints in psychiatric hospitals and children's residential programs; forced restraints in hospital emergency rooms and surgery suites; forced restraints during arrest, incarceration, and in jails and prisons)



Resilience & Recovery

- **Resilience** is the ability to overcome *serious hardship*.
- Examples of *serious hardship* include adverse/traumatic experiences, emotional and mental suffering, and addiction to alcohol, tobacco, opioids/opiates, and other drugs. Serious hardship may also include severe and chronic physical illness and pain.
- Resilience is very important when *serious hardship* produces an intensity of feeling in the body and mind that seems life-threatening—as if you are going to lose control of yourself, your identity, your dignity, your life, or your attachment (connection) to loved ones.
- Resilience is an ability that all people can develop and recover at any stage of life.
- Resilience is the ability to
 - Notice and regulate strong emotions, impulses, and urges.
 - Interrupt and control the urge to yell, slap, hit, punch, or commit other acts of verbal and physical assault and abuse.
 - Interrupt and control the urge to ignore, walk away from, or completely abandon someone in need, or commit other acts of verbal and physical neglect.
 - Convert strong emotions, impulses, and urges into
 - Words and a tone of voice that communicate what you want and need without hurting someone else.
 - Behavior that enables you to take positive action to get what you want and need without hurting someone else.
- Researchers have identified *core components* for developing, maintaining, and recovering resilience:
 - At least one safe, stable, committed, and trusting relationship with another person in your family or community.
 - For infants, children, and adolescents, this person will be an adult who can model (or demonstrate) self-regulation of emotions, impulses, and urges.

- **Recovery** is the ability to develop and/or return to a state of personal stability (homeostasis).
- It is a concept that applies to physical health (body), mental and emotional health (mind), and social well-being (relationships). It also applies to abstinence and to managing cravings for and addiction to alcohol, tobacco, opiates/opioids, and other drugs.
- Recovery includes the ability to reclaim a sense of self and self-determination. It includes reclaiming your identity as an important person with feelings, thoughts, perceptions, value, and a personal history and story (narrative) that shapes who you are.
- Recovery is closely linked to resilience. The two go hand-in-hand. They are intertwined.
- Resilience will help you overcome *serious hardships*, and recovery will help you reclaim your sense of self and self-determination as an independent person despite the hardship.
- People do not seek suffering but are deeply affected when it occurs. However, experiences of suffering may inspire our resilience and teach us about our own capacities to protect and heal the self.
- Recovery is always possible. It is an individual process. There are many different paths that each person might take.
- Recovery is an ability that all people can develop and maintain at any stage of life.
 - Like resilience, a core component of recovery is the presence of at least one safe, stable, committed, and trusting relationship with another person in your family or community. For infants, children, and adolescents, this person will be an adult who can model (or demonstrate) self-regulation of emotions, impulses, and urges.



Medication Optimization

- **Medication optimization** is a philosophy for prescription drug use that takes a cautious approach to medication for mental health and addiction challenges.
- Medication can be useful for some people who experience mental and emotional suffering and addiction to alcohol, tobacco, opiates/opioids, and other drugs.
- Medication is often most useful—for limited amounts of time—when people experience a mental health crisis, like a psychotic episode, or an addiction crisis, like overdose.
- Medication can be useful but it can also be dangerous, especially when taken for many years. It can cause negative effects and chronic health problems.
- Some people are prescribed a number of medications to take at the same time (also called *polypharmacy* or *drug cocktails*). The mix of chemistry and multiple effects and side effects can be very dangerous to a person's health.
- Medication optimization emphasizes that people have the right to make decisions for themselves about how they will use medication, if at all.

Supporting and promoting attitudes and services that do no harm.

1 Trauma-Informed Care

2 Resilience & Recovery

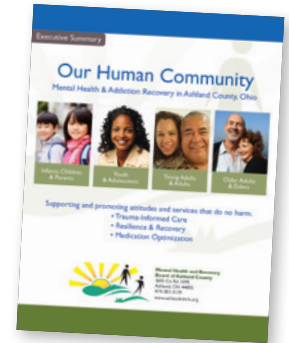
3 Medication Optimization

Executive Summary

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ABOUT US

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opiates/opioids, and other drugs. The Board works to ensure services are available for individuals and families across the lifespan:

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For a free PDF of this 12-page executive summary, visit our website:
www.ashlandmhrb.org/ourhumancommunity-summary.pdf

Download a free PDF of the complete 32-page booklet from our website:
www.ashlandmhrb.org/ourhumancommunity.pdf

We invite and encourage you to keep this booklet in your home and office and on electronic devices. Return to it from time to time as a reminder that our human community in Ashland County relies on people like you to support attitudes and services for mental and emotional suffering and addiction that do no harm to our family members, friends, neighbors, and members of our faith communities.



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