

MENTAL HEALTH AWARENESS MONTH

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Week Themes 1st-4th: Kick Off 5th-11th: Youth & Children 12th-18th: Prevention 19th-25th: Health & Mental Health 26th-31st: Resources			1. NAMI Utah presents: Mental Health Awareness Month, where we will share a fact-a-day in the month of May in hopes of spreading the message that "mental health matters, there is hope and recovery is possible".	By 2020, mental and substance use disorders will surpass all physical diseases as the major cause of disability worldwide. ⁴	3. In 2009 Utah lost 51 lives to homicides and 244 lives to traffic fatalities. In 2011, there were 500 reported suicide deaths (2011). ³	Anxiety Disorders affect about 40 million American adults age 18 years and older (about 18%) in a given year, causing them to be filled with fearfulness and uncertainty. Unlike the relatively mild, brief anxiety caused by a stressful event (such as speaking in public or going on a first date), anxiety disorders last at least 6 months and can get worse if they are not treated.
A large, national survey of adolescent mental health reported that about 8% of teens age 13-18 have an anxiety disorder, with symptoms commonly emerging around age six. Of these teens, only 18% received mental health care. Sunday Edition on KSL Airs at 9am	6. In 2011 over 11% of Utah youth grades 6-12 were in need of mental health services. ³	About 11% of adolescents have a depressive disorder by age 18. With medication, psychotherapy, or combined treatment, most youth with depression can be effectively treated. Youth are more likely to respond to treatment if they receive it early in the course of their illness. ¹	8. Bipolar disorder often develops in a person's late teens or early adulthood. Some people suffer for years before proper diagnosis. With diagnosis and treatment, bipolar disorder can be very manageable. Children with a parent or sibling who has bipolar disorder are four to six times more likely to develop the illness, compared with children who do not have a family history of bipolar disorder. However, most children with a family history of bipolar disorder will not develop the illness' Mental Health First Aid Tooele County Children's Mental Health Awareness/Fun Day in the Park Tooele City Swimming Pool Park, 3-7pm Hosted by Valley Mental Health	9. National Children's Mental Health Awareness Day Half of all mental, emotional and behavioral disorders begin by age 14 and 75% by age 24 making mental illness a chronic disease of the young. ³	We now know that youth who have depression may show signs that are slightly different from the typical adult symptoms of depression. Children who are depressed may complain of feeling sick, refuse to go to school, cling to a parent or caregiver, or worry excessively that a parent may die. Older children and teens may sulk, get into trouble at school, be negative or grouchy, or feel misunderstood. (Ask you pediatrician about a screening).	In Utah, 14% of high school students seriously consider suicide each year, 12% have a suicide plan, and 7% attempt suicide. Other research has suggested that less than half of teens who attempt suicide received mental health services in the year prior to their attempt. ³ Youth and Family Fair 650 S. South Temple, Masonic Temple East Lawn, 12-3pm



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The postpartum time is a period of major adjustment for new parents. Generally, postpartum depression (PPD) is thought to be associated with the drastic changes in hormone levels that occur during and just after pregnancy. Couple that with the daunting challenges associated with caring for a newborn and the estimated 14% prevalence rate becomes less surprising. Even that number is likely on the low side because like many mental disorders, PPD is generally under-recognized and under-treated. Recently, disorders during the postpartum period have also been described in new fathers. It	Alaska Natives tend to have the highest rate of	A study of 298 college students found that meditation helped students reduce stress and improve coping strategies. ¹	Older Americans are disproportionately likely to die by suicide. Although they comprise only 12% of the U.S. population, people age 65 and older accounted for 16% of suicide deaths in 2004. A recent study recommended that strategies based on social and community involvement should be used as part of a more comprehensive effort to address depression in older adults. Older Americans are dispressed to a suicide deaths in 2004. A recent study recommended that strategies based on social and community involvement should be used as part of a more comprehensive effort to address depression in older adults. Older Americans are dispression and	Effective suicide prevention is based on sound research. Programs that work take into account people's risk factors and promote interventions that are appropriate to specific groups of people. For example, research has shown that mental and substance abuse disorders are risk factors for suicide. Therefore, many programs focus on treating these disorders in addition to addressing suicide risk specifically. OPR Training SLC Library Conference Room B, 6:30-7:45pm	17. Promotion of Mental, Emotional & Behavioral Well-Being In a study of 50 women, regular practice of yoga benefited mood and physiological response to stress. Yoga for Mental Health Workshop 68 K Street, Avenues Yoga Studio 1:30-3:30pm	18. Men are more likely to die by suicide than women, but women are more likely to attempt suicide. Men are more likely to use deadlier methods, such as firearms or suffocation. Women are more likely than men to attempt suicide by poisoning. ² If a friend or relative is struggling with suicidal thoughts, help keep them safe by inhibiting their access to lethal means such as pills, firearms, sharp objects, etc. And you can call the National suicide prevention Hotline 1-800-273 -TALK (8255).	
Depression can increase a person's risk for heart disease, diabetes, and other diseases. ¹	Many studies document that psychological stress is linked to a variety of health problems, such as increased heart disease, compromised immune system functioning, and premature cellular and cognitive aging. Some evidence suggests that mind-body therapies could reduce psychological stress. ¹	Americans with major mental illness die 14-32 years earlier than the general population. The average life expectancy for people with major mental illness ranged from 49-60 years of age in the states examined; whereas the average life expectancy in the United States is 77.9 years. Reasons may include: individuals are more likely to suffer chronic diseases associated with addiction (especially nicotine), obesity (sometimes associated with antipsychotic medications), experience of negative side effects of mental health medication and poverty. People with mental health disorders may suffer the adverse health consequences earlier. ¹	Schizophrenia: Though most cases start during a person's late teens to early 20s or 30s, awareness of childhood-onset schizophrenia is increasing. Imaging studies have shown that growth of the brain's long distance connections, called white matter, is stunted and lopsided in children who develop psychosis before puberty, with slower growth associated with worse outcomes. NIH researchers suggest this phenomenon may represent a "window of future treatment"	As of 2006 mental disorders were the 3 rd (along with cancer) most costly medical condition after heart conditions and trauma-related disorders. ¹	People living with mental illness have a very high rate of smoking. A study by the Journal of the American Medical Association reported that 44.3% of all cigarettes in America are consumed by individuals who live with mental illness and/or substance abuse disorders. This means people living with mental illness are about twice as likely to smoke as other persons. A positive note is that people who live with mental illness had substantial quitrates, which were almost as high as the group without	A poor diet equals poor health, contributing to obesity, metabolic syndrome and diabetes—conditions that many people living with mental illness are at high risk of developing. A lack of nutrients can lead to physical difficulties, increased mental health problems, and even changes in brain functioning. ¹	

mental illness.1



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Access to treatment is elusive. The public mental health treatment system served approximately 45,085 youth and adults in 2011 in Utah. This is less than 31% of the current need. ³ For more information on

For more information on treatment options in your area visit the Division of Substance Abuse and Mental Health's website: http://www.dsamh.utah.gov/locationsmap.htm

27. Memorial Day

Post-traumatic stress disorder (PTSD) is recognized as a psychobiological mental disorder than can affect survivors of not only combat experience, but also terrorist attacks, natural disasters, serious accidents, assault or abuse, or even sudden and major emotional losses.¹

28.

Did you know there are police officers specifically trained to handle a mental health crisis? Officers that are part of the Crisis Intervention Team (CIT officers) are located in many police departments throughout the state. If you have to call 9-1-1 for a mental health crisis, remember to ask for a CIT officer.

29.

University Neuropsychiatric Institute (UNI) Crisis Services:

The Crisis Line is a 24-hour phone service staffed by mental health professionals. They provide suicide prevention, mental health crisis intervention, information and referrals, emotional support and assistance. (Interpreting services are available).

801-587-3000

The Mobile Crisis Outreach Team (MCOT) is a team of licensed professionals and peer certified specialists available 24/7 for intervention in a mental health crisis in Salt Lake County. 801-587-3000

The War m Line is a recovery support line staffed by certified peer specialists available from 3pm-11pm. 801-587-1055

30.

Family Resources Facilitators (FRF):

FRFs play a key role in developing a formalized, family-driven and childcentered public mental health system in the State of Utah. They are trained family members who develop working partnerships with the Community Mental Health Center staff to represent the family voice at service delivery, administration and policy levels. At no charge to families, FRFs provide referrals to local resources and programs; advocacy for culturally appropriate services; links to information and support groups; and family wraparound facilitation. These services provide increased family involvement at all levels and improve outcomes for families and communities where they live.

See namiut.org to find the FRF in your area.

Mental Health First Aid Tooele County

31.

NAMI Utah offers free support groups, education classes, school-based education, and provider trainings statewide for individuals living with mental illness, their family members, and those interacting with individuals and families dealing with mental health disorders.

See namiut.org or call 801-323-9900 for more information.

Closing Event (details TBA)