

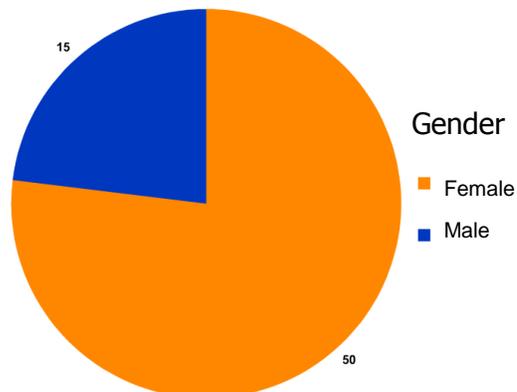
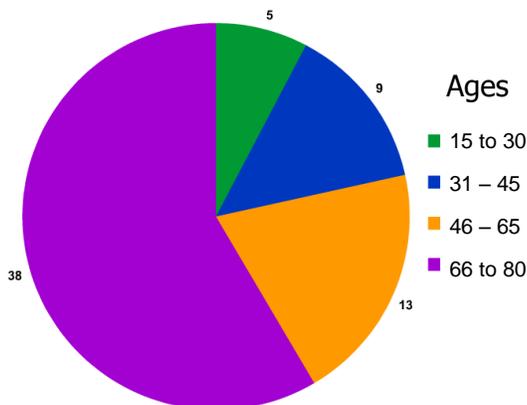


Behavioral Health Survey Results

March – April 2014

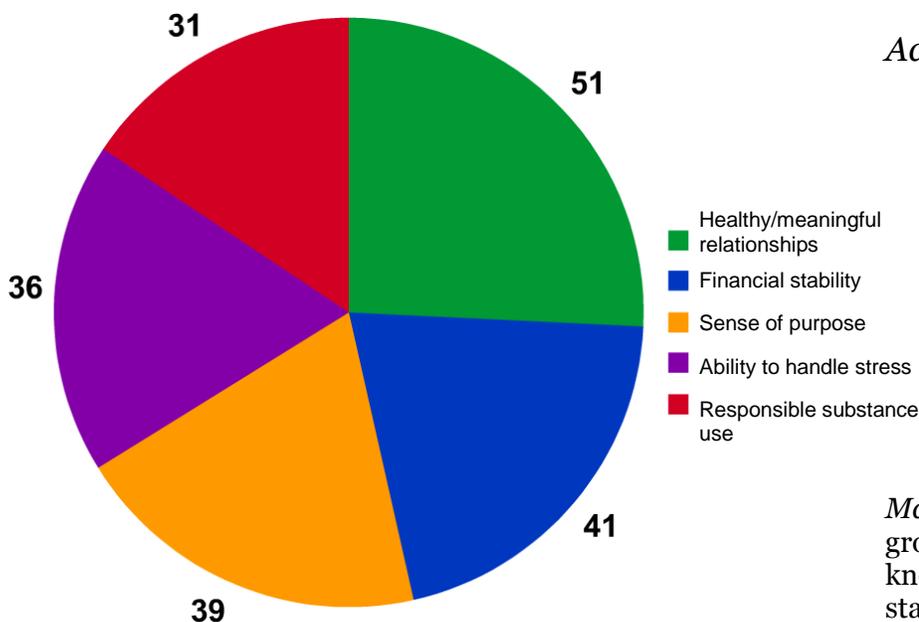
Total submissions: 65

Demographic Information



Questions

1. Which top five elements do you believe contribute the most to behavioral health?



Additional comments

- Supportive community
- Spirituality
- Sense of personal safety
- Healthy and active support structure
- Trauma prevention/support
- Close friendships
- Maslow's Hierarchy of Needs/Meditation
- Education
- Access to health care and support
- Participation in decisions

Manna comments: I hate group support groups. Do you know how many people don't know how to apply for food stamps or to even start the social security process?



Behavioral Health Survey Results

March – April 2014

2. *Please consider the Wellness Model. Considering the model and the other provided information, what does behavioral health mean within our community?*

- People in need of clinical services can access them easily and those who simply need to focus on areas such as diet and exercise have access to that information coupled with motivation.
- That everything is connected or plays a role in our health.
- Responsible use of substances and the presence of healthy meaningful relationships. An ability to meet one's basic needs, and a sense of purpose.
- Every individual has access to a living wage, healthy food, clean water, healthy home, recreation/exercise and pleasant public places, and affordable, quality integrated health care.
- Creating environments that foster mental health and access to services.
- Willingness to take responsibility for self and family and close associates/friends/neighbors, & as the opportunity presents, to assist a larger cross-section of needs one sees in the community.
- Good health is difficult to achieve all on its own. The cost of eating better and taking care of one's self is expensive but it exasperated in this community.
- Having balance and room for growth within all of the above listed categories. Being supported when making decisions in any of the above categories.
- We have a lot of families and youth who fall into the cracks of our community, and these are the ones who need these supports the most. Let's really focus of lifting these people up.
- To be healthy, it means surveying the community for which of the eight dimensions are the weakest in our area, and coming up with programs targeting those dimensions to strengthen overall wellness.
- Having the opportunity to not only be educated on what it means to have the eight dimensions in life, but also have the resources to develop those if any are lacking. Easy steps.
- We need an inexpensive inpatient option and step down program for those who want to quit abusing substances. Get rotary groups to sponsor several individuals in a program that is local.
- "It takes a village to raise a child" Healthy lifestyle and character education in K-12 curriculum and follow through with visible community devotion to all members of our area: ie Durango Connect.
- Supporting the whole person, in all aspects of their life.
- Access to meaningful work; a support group; good health care; an adequate and healthy diet; and recreational, cultural, and creative outlets.
- This question isn't entirely clear, but some of the needs I see in our community: people of color are generally disenfranchised and/or living in poverty; lack of overall sense of connection, etc...
- Having systems in place that support the ability of individuals to achieve productive & independent lives.
- Durango can be a very lonely place, it is hard to make and maintain friendships here. It is hard to make a living that allows normal people to live without financial stress, so a lot of people leave.
- The ongoing pursuit of improving each of these dimensions as much as possible while maintaining a balanced approach between each dimension.
- I think our community lacks occupational opportunities more than anything. This includes programs/ education for local community members to advance their job skills.
- Ideally, I think of a spectrum of services from outreach and public awareness about mental health and social emotional/ behavioral health to inpatient care. Including an effort to de-stigmatize the utilization of services and a holistic approach to addressing emotional and behavioral symptoms. Increased education of family and primary practitioners about how to collaborate with alternative medical practitioners to treat patients that seek non-medical remedies to treat emotional issues. Coordinated services from entry to discharge and follow-up. Seamless reentry of the system following relapse.
- Taking responsibility for self and proactively taking appropriate initiative as needed.
- Prevention focus with education beginning at early ages, support for families, counseling for substance abuse and other inappropriate behaviors Childcare, housing, medical and other financial safety nets. Improved opportunities for meaningful work.
- Behavioral health in our community is a complex balance of SAMHSA's eight dimensions of wellness. Because people with mental health and/or substance use conditions struggle to find this balance, they are at higher risk.
- A general responsibility for providing community resources that support our members' well-being; its more important than politics and economics.
- It means we've got a big job ahead of us---maybe an impossible job, seeing as how American society as a whole doesn't provide or even acknowledge and affirm all eight dimensions.



Behavioral Health Survey Results

March – April 2014

- Providing a well-rounded environment that incorporates all of these concepts into a person's life. As a person attempts to initiate a better lifestyle many of these dimensions may not be available to the individual based on current health, finances, employment conditions and such. Providing a community of support and actual avenues to these different facets of wellness supports a more successful goal for the individual.
- It means we should consider those who cannot, through no particular fault of their own, provide or secure these dimensions for themselves due to poverty, mental illness, addiction etc. We should think about the types of particular supports that are lacking and find ways to improve the social safety net in a way that speaks to the strengths of these individuals and/or families.
- An awareness of and use of stress relief and wellness techniques in personal, work, and public life
- What comes to mind for me is a sense of community - that we are all here to support one another. Whether a neighbor, friend, spouse, child etc - we are all willing to reach out and help and support however we can to each a well and healthy community.
- Within our community, we have a huge SES disparity. The high cost of living in Durango, along with the lack of resources in a rural area, significantly contribute to poverty (which is significantly related to behavioral health). Our public schools have school counselors but they serve high numbers of students and Colorado does not adequately fund our public schools. Colorado does not mandate K-12 school counselors & many of them, the first point of behavioral health contact for many students and families, serve over 500 students at a time. Fort Lewis College does not have a Career Counseling Center for its students. Behavioral health for our community is obvious for those who are educated, have professional jobs, and can afford housing here. For the other 25% or more, behavioral health is a challenge because they lack the skills, education, employment, etc. that comes with financial health. When social injustice like this exists in a community, it effects the entire community.
- That we can adequately provide a supportive and safe environment where people can find work, find housing, provide for themselves and families by earning a working wage and find emotional help with problems.
- Resources and support to facilitate a healthy lifestyle that allows access for all demographics--much like the rec center provided (low cost and various programs for all ages). comprehensive health care.
- Essential for promoting behavioral health is a community culture that accepts behavioral health as a normal part of overall health, encourages its members to openly discuss behavioral health problems and solutions, and provides the resources for ALL it members to achieve behavioral health and wellness.
- It means more education to the general population about how to achieve these eight dimensions in our community. Where are the resources in each category? What are the real definitions of each of these categories. How can people identify what a person's real needs are?? Where can families or individual go to get such information and support?
- It should mean all this, but sadly does not. There is a perception that mental health happens only to those who live in poverty. And those who do live in poverty do not have enough access to quality holistic health services, yes I say that even with the new Axis clinic. There are not enough doctors to see all the people in this county, and private practice doctors refuse to take on medicaid patients. I am a therapist in the community and I fully believe in the above model and it should be a part of every system: Medical, dental, mental health, occupational and educational.
- The "sense" of well being that derives from feelings of safety, comfort, freedom, and purpose.
- I don't think people have a clue as to what it means within our community. They know there is a problem with many psych pts, but don't know how bad and the lack of support is out there.
- Difficult if you are unable to financially or advocate for yourself.
- It means that only those persons with financial stability (basic economic security that will not be ended with an illness, divorce, or loss of a job) can truly experience "wellness" the way you describe it. I don't think "satisfaction" is part of financial security, however, and question its use in that dimension's definition. Yes, in the end, access to resources is a huge piece of the puzzle.
- The ability to lead a healthy life, with supports, no judgments.
- Equal opportunity to the eight dimensions of wellness, regardless of gender, sexual orientation, medical condition, race, ethnicity, socioeconomic status, geographic location etc.
- Problem in Durango is that there is a major "rift" between classes--upper class vs. population at Manna, etc. "Locals have gotten flushed out. And it's become a community more of the upper class and the locals are not as prominently represented in the community." A playground for people with a lot more money at the expense of the local working class.
- Manna: "You need to know when to put your stuff (drugs, alcohol) down for a while." Get off the substance use. A little bit of all of these factors affect people's mental health. "Here at manna, you're down on your luck. Scrounging up \$20/\$30 isn't going to get you much so people just go get high."

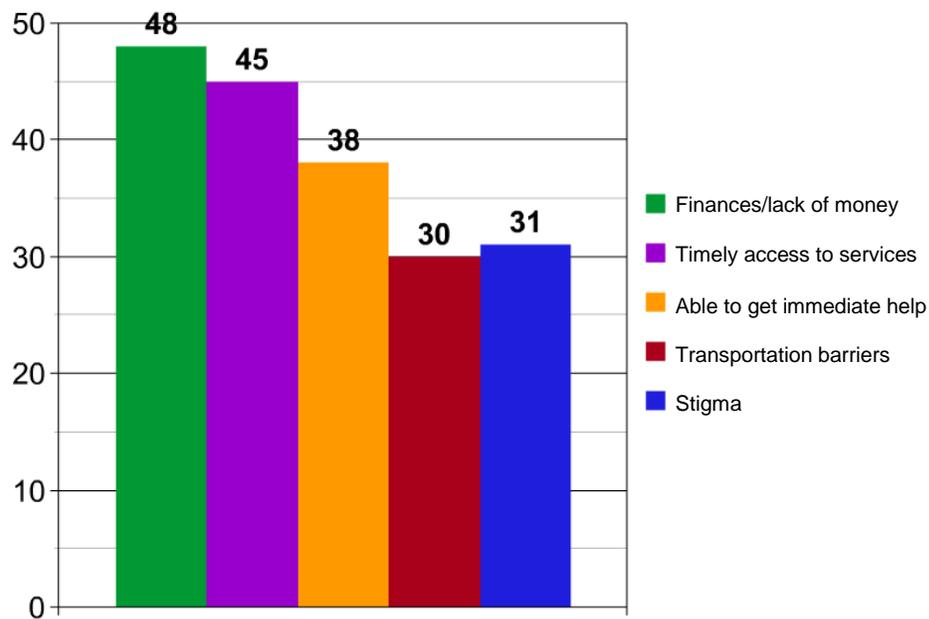


Behavioral Health Survey Results

March – April 2014

- we tried to start a program at the jail but we got one started here (manna) called break the chains. and sheriffs, etc., are recognizing as an alternative to probation and mandatory testing for being picked up for any stupid ticket. 3/4 of the people that are stuck in this program and disabled. have improper diagnosis, don't have a place to live, don't know how to access these programs. All of these agencies that are put into place to help people, starting with a food stamp app, how to get bus passes, how/where to fill prescriptions...they're not doing their job because of lack of income or lack of knowledge. every single one I try to grab from the animas and I fell through the cracks for so many years that I swore to god if I ever actually got my section 8 voucher that I would do as much as I can to repay and help the ones falling through the cracks. They are but they won't say that. My thing is social justice because it took me 12 years to get social security.
- Strong supports built into every aspect of our life to support both mental health and responsible substance use.
- That people have the supports they need and access to the services they need to be both physically and mentally healthy - able to live a balanced life.
- Having all of the dimensions of wellness in your life in a balanced fashion. Being able to have the resources to access and return to a balance if needed.
- Acting in a manner consistent with the values of the community, with respect to individuals and organizations.
- Mental well-being including all components of wheel and being free from additions.
- Everyone feels safe, healthy and happy
- BH is impacted by all of the 8 dimensions of wellness. The piece that is often missing is AWARENESS . Education for every demographic in our community from childhood to older adults is critical.
- It is being real enough to care for each other and support balance .s. Each person needs to feel support and hope; it is the community individuals who give sincere hope and support.

3. *As we develop a community plan regarding behavioral health in our community, what are the top FIVE challenges we should prioritize in mental health and substance abuse?*



Top priorities included: finances/lack of money; timely access to services; able to get immediate help if needed; transportation barriers; and stigma.

Additional comments



Behavioral Health Survey Results

March – April 2014

- Therapists who are genuinely supportive and understand depression from the client's point of view.
- When you say denial not sure if you mean from person who may need help. If that's what you mean, I prefer to term it, lack of insight which is often the case. So a person with lack of insight needs educational opportunities and a safe, supportive place to learn about their illness and explore their options. It is my understanding that people who are in crisis may not be able to quickly get an appointment and that really needs to change ASAP if someone is motivated to get help, they should be able to be seen immediately as the next day they many very well change their mind.
- The total lock Axis has on Medicaid reimbursements, their inability to retain counselors long enough to develop meaningful and consistent relationships with clients, the long time between assessments and treatment appointments and their apparent reluctance to reach out to and consult with other community providers and stakeholders, and finally, the isolation and containment of the Axis board of directors.
- The high turnover rate in our mental health center. Better management of the center with emphases on employee retention so as to provide stability in service providers.
- The challenge of partnership and care coordination when working with Axis
- Target marijuana use, especially among the younger population. Ongoing effects of even moderate regular use during youth are too disturbing to ignore & the message we have sent our young people by statewide legalization is misleading.
- Substance abuse as major contributor
- Stop having all events alcohol related.
- Services for youth as well as adults-- designed with input from youth so they are more likely to be youth-friendly.
- Screening
- People don't know that you can go to detox at ANY time even if you're not using to get help or get a place to sleep or get food, showers, and you can stay more than one day. if you want help they will put you up and order you food from the hospital. will connect you to other services (rehab) 82% of the cases of people with substance abuse issues are due to misdiagnosis of mental health issues, wrong medications if the person is disabled because of a drug or alcohol abuse division of vocational rehabilitation will pay for education, training, rehab
- Our community says "there is access to services" but it takes months to get appointments, and there is a gap of services between crisis and long term and short term care for mental health.
- Offer "SBIRT" training (Screening, Brief Intervention, Referral to Treatment) in our region. Refer to this link: <http://peerassistanceservices.org/programs/sbirt-colorado/> Access to help doesn't do any good if providers of care don't recognize the problem!
- No meaningful or consistent integrated care, so that someone seen for stomach ache is not evaluated for depression that may, in fact, be causing the physical symptoms.
- Negative media---the media in general don't promote health---physical, behavioral, mental. I'm thinking about all the violence in the media (including video games) that is presented as natural and even glorious.
- Modeling robust well-being and social responsibility
- Lack of providers for a well-coordinated services that provide a continuity of care.
- Lack of experienced counselors, lack of quality due to lack of experience in the field
- If a person is willing to ask for help then they are no longer dealing with full denial of their problem. As they join others in recovery then the stigma hopefully will be less of an issue for the individual. Getting the services needed when they are needed are critical to a successful recovery.
- Honestly, I think Stigma would be my top 1, 2, and 3 with Denial being 4th, and Finances/ Lack of money being 5th.
- Historical trauma of native populations, which lead to feelings of internalized shame & being worthless, powerless, hopeless & purposeless. This lead to mental health and substance use problems.
- Generational cycle of mental health, substance abuse and abuse of safety net programs
- Community support system
- Axis, is not doing its job in terms of quality, timeliness and access to services. The negative impact on our community is HUGE, and not much will improve without addressing this.
- Axis appears more interested in limiting their number of cts, way too focused on "not working harder than the client" and they do not seem to recognize the capacity of each of their cts to manage life
- Access to inpatient care for diverse socio-economic groups i.e. uninsured.
- Able to get immediate help is number one. "The times I've wanted or needed to get help it's practically impossible." "The only way my ex-wife can get help right now is to call the hospital and tell them that you're suicidal. And you make that call they treat you like a prisoner rather than a patient." (Ex has mental health



Behavioral Health Survey Results

March – April 2014

issues.) You can call up Axis or Crossroads "hey I need some help" "well okay, let's get you an appointment for next month." "for my wife to get help in a timely manner she has had to go to the emergency room and tell them she's feeling suicidal in order to just to talk to someone. It makes you not want to ask for help when you do need it."

- Equal access for all ages to extra curricular programs that are not outwardly titled behavioral health programs but are deeply embedded with life lessons in wellness. ie. SOS program.
- Most people wait until there is a crisis before they reach out for help. We must engage the schools more, especially teachers, to help them understand how to detect problems they see or experience in schools. Working to combat denial is important!

4. *When you think of behavioral health, what comes to mind? How does it look to you? What do you see around you? What is hard about it?*

- That people lead balanced lives: able to deal with normal stressors in ways that are not harmful to any area of their lives.
- How well people cope or not with daily living
- Good and bad ways to reach euphoria. Good and bad risk taking. developing friendships and if necessary a structured support system Living with a purpose: exercise, diet, enjoyment of life
- What comes to mind is how difficult it was to get started in our care process and how little assistance actually came from the community. We had to find our own way. No one wanted to offer any info
- The ability to recognize healthy and unhealthy life choices, and the ability to make a better choice.
- I think that my age group often deals with issues by "self medicating", which often time inflates behavioral health issues. Cultural numbness to substance abuse and that it's effects are long lasting
- Our kids are healthy and supported. People are inspired. A community that values each other as individuals but also supports each other when we are in need of anything. No one is left out.
- Behavioral health is evident in a community by a decrease in community violence (including DV, SA, aggravated assaults, child fatalities), homelessness, etc., & an increase in community support.
- Lonely, isolated individuals who feel outside the community, who see no hope or path out of their circumstances. There is a huge stigma both within the health care system and in the community.
- Limited access.
- Mental and behavioral health providers, methods and standards of practice continue to pathologize normal human behaviors into diagnosed "disorders." Semantics matter. "Medical" histories stick.
- I think about being able to prioritize in life. With a busy schedule, it's difficult to make time for the things that contribute to wellness. It can be hard to find balance.
- Most of it appears to be generational in families and secondary to poverty, lack of education, hopelessness, leading to substance abuse and around and around we go. How to stop the cycle.
- Need to have community events without alcohol
- Quality behavioral health is to greet each day with purpose. Best sustained when the returns are not to ones self but to the world about you. Givers have a better sense of wellness than takers.
- Denial that there's a problem, then stigma and reluctance to get help when the problem is identified. Finally, responsible substance use and mental health has yet to become the norm in society.
- Good behavioral health looks to me like self esteem, happiness, productivity, integration into the community. Difficulties: self, cultural, or community generated isolation and substance abuse
- Comfort; peace; ease. We are complex & often and someone to help us process - if it can't be through healthy relationships then professionals can help - they are not as avail to us as drugs and alcohol
- People suffering on their own
- Inner peace....ability to cope with stress of daily life in healthy ways. In Durango the haves push up cost of living for everyone else, the have-nots become locked in cycle of dependence.
- The combined challenge of stigma, lack of availability (financially and timeliness), and transportation.
- Admitting the problem
- I see many people with untreated mental health issues trying to cope. The most difficult parts about mental health are effects on relationships, visibility and recognition as legitimate.
- From my experience, I see funding sources as the largest barrier.
- I currently see a lack of accountability and knowledge of community resources of primary care practitioners to honestly address contributing factors of toxic stress, depression and anxiety beyond treating symptoms with medication. I feel the strengths in our community include access to a huge variety of quality physical and spiritual activities. I do not see the community utilizing these activities (i.e. rec center, Devo, DYSA,



Behavioral Health Survey Results

March – April 2014

etc.) to help connect the benefits of physical activity and connection to other individuals in the community as part of emotional/ behavioral health. I haven't noticed a consistent presence within our district schools to education young people about emotional health and an integral part of overall health and well being, or an effort to educate families about these benefits beyond a focus on reducing childhood obesity.

- How your health affects body and mind. Self-medicating and excuse making Poor coping skills To much acceptance and avoidance
- Most people tend to compartmentalize behavioral health, not recognizing that all health or medical issues have a considerable behavioral component. We need to educate the public about this and how providing more resources to the more severely affected persons or families benefits the community as a whole.
- This issue hits close to home. As an RN with children affected by these issues, I see potential behavioral health problems on the rise. Early identification and support is lacking.
- The hardest thing about developing healthy communities is the lack of education about and understanding of our roles and responsibilities in keeping our environment healthy.
- Actually, the term "behavioral health" doesn't bring much of anything to mind. There must be a better term or terms. I have a fairly clear sense of what mental health is and physical health. Behavioral health? It sounds like something out of a college Sociology textbook.
- When I look at behavioral health I think of my current situation and how long it took me to ask for help. Yes, the stigma and the denial were evident, but it was more about finding support and knowing who to talk to and where to go for help. What I see around me are probably a whole lot more people not willing to admit they have any type of problems that require treatment. What is hard about this perception is that many people could be in whatever type of recovery needed if they would see how much better their lives could be with treatment.
- When I think of behavioral health, I think of the various aspects of living that contribute to whether I feel well or not. I think about financial stability, stress levels, opportunity for fun and free time. I don't personally find anything hard about behavioral health but I can imagine for someone with depression, or financial difficulties or a substance use problem there are lots of hard things to deal with on daily basis.
- The ability to be grounded in your community and relationships
- Self-management of behaviors that affect long term well being
- I think of being able to juggle responsibilities and relationships in a way that is productive and stable and gets to a positive outcome.
- Stigma of "having to see a counselor" is a BIG problem. BH in the primary care office seems to be more acceptable to most of our patients since we started this model a few months ago.
- Crime
- When I think of behavioral health, my definition coincides with the SAMSA definition and is holistic and requires prevention! However, while MDs and nurses are one point of behavioral health contact, it's important to include other behavioral health providers, such as psychologists, school counselors, licensed professional counselors, and licensed clinical social workers. According to the Behavioral Health, United States, 2012, report (samsa.gov), the majority of mental health services providers to adolescents were counselors (at 21.3%). The American Counseling Association defines counseling as a professional relationship that empowers diverse individuals, families, and groups to accomplish their wellness, educational, career, and mental health goals. This definition helps remove stigma and emphasizes empowerment. I see a lot of poverty in our area and a lack of resources to reach and empower these people to reach their goals and behavioral health.
- I see people needing help every day that are not getting it. The help offered is not friendly or inviting sometimes. People start out there but get discouraged or stop going. When I think of behavioral health I think about meeting the needs of the whole person. Living in Durango is tough enough but for those with behavioral health issues it must be impossible.
- Because I work in the field, what comes to mind is SAMHSA's 8 dimensions of wellness. In addition, I think of preventing and treating substance abuse and mental health disorders, along with the community supporting its members to make healthy decisions (before a condition reaches the category of a disorder) about physical activity, healthy eating, adequate sleep, sustainable financial decisions, etc.
- "Behavioral" health is a relatively new term many do not understand. It takes in mental health. We generally know "mental" health. We must reeducate people about the whole picture, of a person who demonstrates (usually) behavior that is not healthy or constructive. Behaviors that are potentially dangerous, are often ignored or denied. And, most people do not know what to do about that.
- It should be based on the person as a whole, and physical health affects behavioral health and vice versa as well as spiritual and intellectual.
- Happiness 2. a smile 3. general well being 4. finding those in need, because they are often hidden with their pain



Behavioral Health Survey Results

March – April 2014

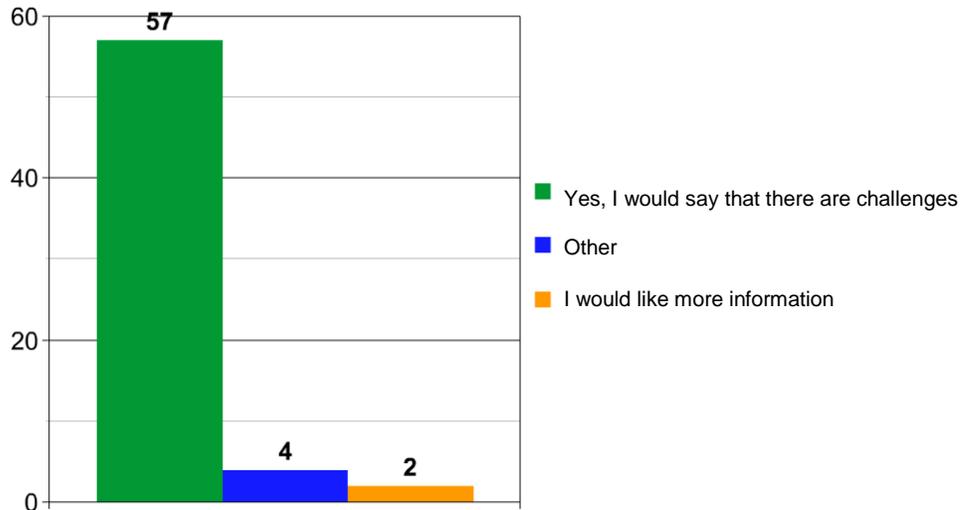
- Since I am a health professional and work with this type of pt almost on a daily basis I see that we have a lack of understanding from the community that we have lack of resources. that encompasses, finance, support a place to stay. We have axis and they only take the pt when it is convenient for them. They are useless. they pt basically has to be well before they take them. All those beds that are a waste of space. i never hear what we are doing in the community for the kids that have all the addictive behaviors. i think many get lost in the system or lack of system. When you get put in jail or get in trouble with the law that is when you hear hear about resources. it doesn't feel like we are pro active. Realize it is a big job.
- Too many people falling through the gaps in care, poverty,
- People pretend everything is fine. No one wants to appear vulnerable. Our regional cultural ethic carries with it an expectation of self-sufficiency, which often leads to self blame (see our county suicide rates, particularly for working age men). And then there is alcohol and other drugs.
- Mental health issues and substance abuse seem to go hand in hand, resulting in legal issues, money issues, . I sometimes think too many people are "labeled" with a mi diagnoses, then it becomes sort of a self-fulfilling prophecy for both the client and others.
- Environment that supports "healthy choices" in all areas of life; balance; grounded, supported
- Example at Manna: should be more of a "leg up" than a "handout". Function should be help empower more with skills, etc. Reduction of perceived classist divisions would enhance behavioral health at the community level.
- My biggest concern would be the apathy from the community. you'll see a homeless individual standing downtown holding a sign up, needing assistance, and people just pass them by. "As I hang around manna, less than 10% of the people that will break down and actually hold up a sign actually want something other money for drugs or alcohol." I had to stand in front of walmart for about an hour to get \$8 to get money for gas after recently becoming homeless. There is a huge problem with drug and alcohol abuse. Very few actually need the money for what they have the sign out for.
- BH that I see when I think about it on the streets and working in the trenches I see all these homeless people that are getting bullied, harassed, self-medicating getting thrown into jail or getting tickets instead of getting the help they need. I saved my boyfriend's life 3 years ago, I called 911, and said there is something that is broken in his body that has broken his mind. they put me in handcuffs and tried to charge you with first degree assault for saving a man's life (local Durango Police) Didn't have CIT (certified trained for people with disabilities) Police don't have the training that they should. People are getting tickets for everything and they can't pay, they have to go to Hilltop and pay for tickets, have to pay \$25 for every urinalysis. If you miss one test other than for a medical reason they will force you to do a UA, pay \$30. courts are ordering this and for money. It's a money maker/trap. It is proven that program is at least a 90% failure rate.
- Stigma... when someone is really struggling with mental health, it is apparent to everyone around, but most everyone else tries to hide it and won't acknowledge their struggles.
- A person's state of mind - if they are happy, fulfilled, satisfied in their lives.
- All have stresses and times of isolation/craziness. With sleep and support we have resilience. With clinical mental disorders (depression, mania, bi-polar) there is less clarity and hope.
- We have one Mental Health facility that is often very difficult to access for people of all ages, especially for people with little or no income.
- That we are functioning at our highest capacity in body, mind and spirit
- Someone who is not stable emotionally or physically. It could look like someone acting irrationally or without regard of others. Something that could be hard about it is that the person could get help but may refuse for some reason or another.
- It can look like a perfectly normal person, but an interaction with them can be stressful, even if you don't know why. It can be difficult to spot if you don't know what to look for (signs and indications).

5. *Using this data, would you say that our community has behavioral health challenges that need to be addressed?*



Behavioral Health Survey Results

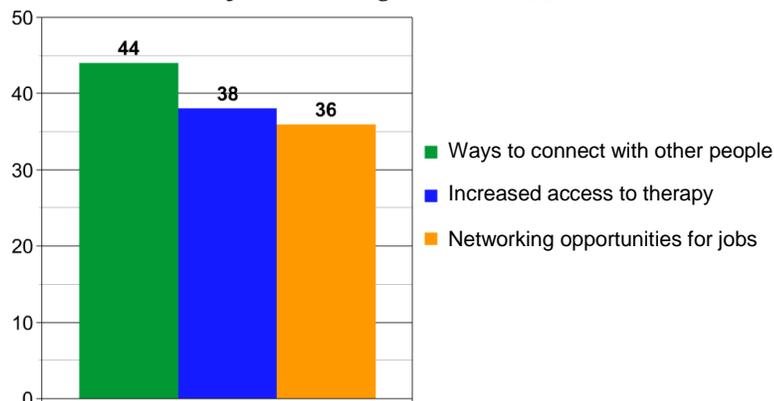
March – April 2014



Addition comments

- Decline to answer
- Leading question/set up
- Regardless of numbers, let's make help available in a way that it will be accessed by those who need it
- Question skipped due to lack of time.
- Promote healthy foods!!!! Promote local farmers!!
- No time to answer this question (alternatives are unaffordable. DPD is out of control and abusive and not properly trained.)
- I believe many of these issues are societal - our culture of nanotechnology being god creates stress and destroys our ability to communicate effectively.
- "Between 2010 and 2011, 8.5% of children ages 2-14 years received treatment or counseling from a mental health profession. Between 2010 and 2011, 23% of children ages 1 – 14 had difficulties with emotions, concentration, behavior or getting along with others
- Do awareness sessions for teachers, ministers, law enforcement and families to show what "depression" and substance abuse looks like, and where people can get help with these issues.

6. Please select your top THREE recommendations for what can we do to support the behavioral health of adults ages 20 – 45 in our community.



The top three recommendations are: ways to connect with other people; increased access to therapy; and networking opportunities for jobs.



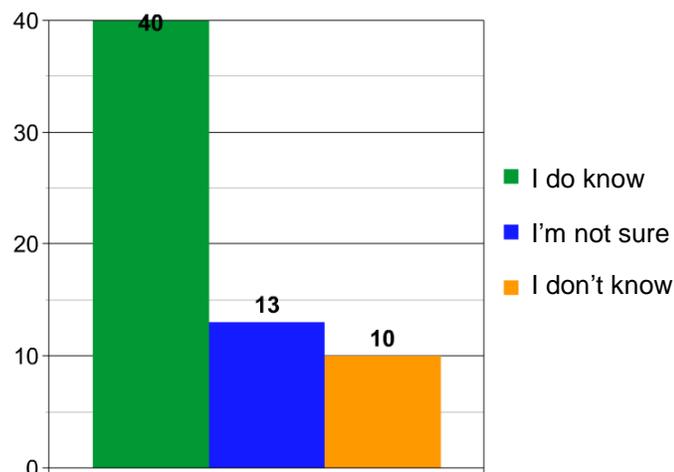
Behavioral Health Survey Results

March – April 2014

Additional comments

- Look at our own privilege and oppression and biases especially how we view younger people in the community
- Would prefer not to do "group therapy"; increased access to individual therapy
- Work, housing, daycare,
- Support the development of behavioral health in children
- Support groups including Al Anon and Al A-Teen.
- Private payer coverage for BH
- presence of more jobs; creation of true community; reduction of substance abuse
- Liveable wage, affordable housing
- Info all over the place about mental health issues and how they can help each other by referrals, reporting - they almost always reach out to their friends in some way.
- Increased awareness and acceptance
- I just left this age group (I'm 46 y.o) and none of these strikes me as really the best answer to behavioral health issues in the age group, although I don't know what is.
- Help people know how to build "community" and create a sense of belonging.
- Find funding for more clinicians, as many of our resources seem to be maxed out and overwhelmed.
- Early identification and prevention
- Decrease the stigma re needing help with substance abuse problems and/or mental health issues.
- Create job opportunities
- Classes not just in exercise but in life living, relationships, and character development. Classes that extend beyond the persons self but to their place in a whole community.
- Awareness of programs already available to the public.
- At Manna: one of the Break the Chain activities, See it Stop It program. Started parenting group, art group, all related to help people get medications, the right connections, etc. You can get in to the therapy services but the people don't know what they
- After 5 PM and weekend appointments for working people receiving MH services
- Affordable therapy. Transportation
- Affordable job training for specialized skills that local employers are looking for; rent control
- Access to things where people don't have to pay an arm and a leg to go. Functions, therapy, groups. When people have to look at adding another expense it's easy to say No.

7. *Do you know what resources are currently available in the community to help people with mental health and substance abuse problems (both legal and illegal substances)?*





Behavioral Health Survey Results

March – April 2014

- Known resources
- Axis Health Systems, private counseling and AA
- AXIS mental health; new integrated health clinic; private therapists
- We have an integrated care Axis clinic, private counselors and therapists, primary/urgent/emergency medical care, other Axis services, and nonprofits (SASO, Second Wind, Alternative Horizons). However, mental health care that accepts Medicare is difficult to access. There is also still a large gap in services and access to services.
- Various telephone hot lines. Atu center at Mercy. Many people in other counties are placed in jails if not able to access the ATU.
- Various support groups, lots of opportunity for physical activity for those in Durango or the immediate area (not as much available "in the county"), MH agency (though access to services a considerable barrier)
- There are AA, Alanon, drug treatment groups. A lot of employers offer counseling. Crisis care at Axis.
- The ones I know about are thru Axis and their new integrated care clinic, the SBHC's, and I know that if it is a legal matter then there are other court recognized groups and classes.
- SJBHD, Axis, fee-for-service treatment options with private practitioners.
- School Counselors, Axis, Mercy, individual counselors and therapists
- Numerous support groups such as AA, NA and churches Axis Health System Mercy and ASH in emergency or urgent care facilities Health centers in the grade schools and FLC
- Not enough. AXIS primarily and Access is a big issue.
- Not enough help for people with substance abuse issues, we need a residential inpatient, long term care facility to help people with their substance abuse, substance abuse also leads to mental problems, ie depression, which can turn into suicides.
- Lots depending on the need- SASO runs groups for survivors of childhood sexual assault and adult survivors as well as an on-going group. Alternative Horizons has a full time therapist that works with children 4-18, teen, and adults who have been survivors of intimate partner violence, Axis has crisis services as well as Mental health outpatient programs, Axis ATU, Axis substance abuse and many other like voc services. There are a ridiculous amount of people in mental health private practice (some licensed and not, some qualified and not.) Other community organizations like South West Center for Independence offer peer support groups. Manna offers case management, The new Axis community clinic (but it takes weeks to get in, or so I'm told by clients,) Fort Lewis has a counseling center. Durango High School has their clinic as well as the Summit Program. Department of Human services offers case management as well as individual therapy play therapy, and family therapy.
- La Plata Youth Services -- needs to have more resources to expand Axis -- mental health services numerous private therapists School Based health Centers Detox Open Sky etc
- I'm sure there is more but: Axis mental health. Detox through Axis. Mercy ER. Private psychiatrists, psychologists and counselors. Al Anon. Narcotics Anonymous. Overeaters Anonymous. Other support groups. Church based support groups. Grief counselors (can support problems related to grief that can lead to behavioral health issues). Police/legal intervention. The guy in north Animas Valley that rents to people on probation at the former hotel. Hotlines (Suicide, Domestic Violence, etc) Many programs are outside the Durango area: Inpatient mental health at Pueblo. Cedar (Center for Dependency, Addiction and Recovery at CU-Anschutz campus). "Family Week" at Cedar in Denver (a 5 day program for families affected by addiction. Cost \$600. It's excellent.) Etc.
- If someone with those problems asked me for help, I would probably refer them to Axis Health (247-5245)
- I know that most people have heard of AA, and there are other groups listed in the newspaper. Most end up in the legal system and I do not think there is any help there, which there should be. Axis is the major agency dealing with mental health issues, I think. Churches also should be a resource, but usually are not. The reality is that there are many, many symptoms, besides substance abuses that can indicate someone who might need help.
- I know from a work perspective, but many times when we try to get these pts out of the hospital or find them shelter due to being homeless, or no one has money so no one will take them. then I think what resources are out there. I think people are trying to make it better, but if there is no money you can only do so much
- ED UC Axis health AA Peaceful spirits Faith-based services Specific support groups such as cancer spouses, Alernon, respite care groups, and others
- AXIS; private practice counselors/therapists; EAP numerous non-profits that offer support with free food, parenting, housing, etc. unlimited outdoor paradise for exercise & communing with nature!
- AXIS/New Day, Hilltop, Peaceful Spirit, private providers



Behavioral Health Survey Results

March – April 2014

- AXIS,AA,NA,refralsfrmfaith comnities,schoolSWrs,RYFS,BOCES,Denier VAclinic,cmnty integrated,NAMI,cmnty prgms@Manna,Alzheimers spt, SWCntrfrIndependence,CmntyConctns,nursinghm,Cotgageorge,indpt therpst
- Axis, private counselors, Peaceful Spirit
- Axis, preferred counseling, many services are at alpine bank, DVR, Riversong Sage (does art painting, has very few medicaid openings) I am trying to get Riversong/sage certified so that they can take more Medicaid. crossroads.
- Axis, peacefu spirit, detox ctr, clinivians and therapists
- Axis works hard to provide care in conjunction with multiple other non profit supportive organizations. The framework is present and needs to be supported. It appears CHAC is looking to set up new structures instead of supporting the existing framework.
- Axis Health Systems; private counselors; medical professionals; AA; some employee assistance programs
- Axis health--but wide perception is that timely appointments only if money and speak English Crossroads--residential care Private providers: again need money and to be white (200 char not enough)
- Axis Health, RMOMS, Balance...
- Axis health systems, counseling and crisis assistance
- Axis Health Systems provides the majority of behavioral health services, and San Juan BOCES provides support to children through the school system.
- AXIS Health Systems including New Day treatment Loads of private therapists and counselors (\$) Employee Assistance Programs School-Based Health Centers School Counselors Indian Health Services Peaceful Spirit NAMI Alcoholics Anonymous Can find resources on SWConnect.org
- Axis Health System: Therapy, med mgmt, ATU, Detox, New Day, CM, IDDT, DBT, & pain mgmt groups, etc. Riversage, Harmony, Durango Counseling, LPYS, Wilderness Therapy, Phoenix Program in DHS, AA, NA
- Axis health is the main one, AA group therapy, counseling centers
- Axis health is pretty much it. There are a few counselors in the area that will take some insurance but if you have insurance and especially medicaid you are VERY limited in options
- Axis Health I know there are some other substance abuse programs in our area but I do not know where they are located or the name of the program.
- Axis and private therapist
- Axis and its therapists and programs Private therapists and programs Court-based services Limited school-bases services SUCAP-based services
- Axis and Crossroads, I have utilized Axis a few times myself final comment: Thank you for being here and trying to assist those of us in need. (from Manna) Because most of won't ask for help because of the stigma.
- AA, Al-Anon, Alateen, Overeaters Anonymous, Axis Mental Health, therapists, and school counselors.

8. *What strategies do you think should be developed in the community to help people with mental health or substance abuse problems?*

- Comprehensive educational campaign regarding resources and reasons to use them
- Provide no cost services; Provide alternatives to law enforcement system for mentally ill more services and substance abuse treatment programs for youth More case management for mentally ill
- Reduce stigma and make access a breeze.
- We don't really have a rehab here...maybe that could be looked at. 4 Corners doesn't cut it for suicidal people and/or substance abuse.
- More inpatient facilities which take Medicaid
- Talking about it openly and in a way that doesn't pass judgement. Letting the general public know that it's okay to have feelings and need help- to be vulnerable without repercussion.
- Education about the effects of substance use of all levels, low, moderate, severe. Support groups to promote positive self-esteem for youth, and adults.
- Inpatient substance use facility & youth ATU/shelter, more affordable housing, more job opportunities, & diverse semi-structured community gatherings to discuss and attempt to heal historical trauma.
- Integrated care everywhere linked by a HIE living wage ordinance more affordable housing more affordable preschool: not just daycare
- I think a regional perspective may help. Since there is mobility in many counties often services are not distributed to address the overall needs. I wonder if La Plata Cty shares a greater burden?



Behavioral Health Survey Results

March – April 2014

- Continue coordinating between the various organizations, groups, & services. Support clinicians as a severely at-risk population, not "Use and discard" as an organizational standard.
- Open and honest dialogue.
- Safe places to go for in house treatment, counseling then a step down, half way a house program of support. A wrap around model. Job assistance, day care for kids, educational opportunities .
- Reduce stigma and increase positive opportunities
- More collaboration and creation of wellness education to all ages between government, non-profit, private and alternative components.
- Working with youth on de-stigmatizing seeking help.
- Adequate (widely used, evaluated, and referred) behavioral health screening, number of professionals, and timely appointments.
- Increase the presence in the community (with a focus on how you can help a friend to get people to the tables at all school functions, rec centers..) Axis must hold a hand or 2. Not enough rm here.
- More community and meaningful support systems fair wages, access to employment less glamorization of substance use -- this town is out of control! access to quality mental health care
- more coordination b/w agencies so that individuals are managed as part of a system instead of consumers of separate services receivers of free services should be required to give back in some way
- Encourage exercise/outdoor rec.
- More free programs
- Offer ways for people to connect with other people on a real level, not just court mandated therapy
- Increased awareness, visibility, discussion, normalization, acceptance.
- Lower the stigma, find more funding for clinicians so they can focus more on each individual. Education and awareness in a de-stigmatizing way.
- Better community awareness. Better online resources (SW Connect is very cumbersome and does not always meet the needs of people seeking information). More visibility of community resource to increase "word of mouth" referral process.
- Identification and motivation through the integration of behavioral health an family medical and dental care.
- As in many areas, there is a lack of sober living communities here. Education regarding addiction as a disease should be emphasized in order to reduce the stigma. You don't make a diabetic "feel bad" about their disease do you? Access issues; could be financial, timing, location, etc.
- Early education and continued provision of accessible and affordable support. Decriminalization of mental health problems - the justice system is clogged with people who have behavioral health problems. Development of a comprehensive view of life as a part of a healthy environment.
- This question calls for a whole lot of reflection requiring more time than I have available to put into it. Offhand, however, I would suggest reaching out to all of the religious groups in this area and asking each of them to select a person in the church to attend a group dealing with this question.
- Ongoing in-patient and out-patient treatment within our community. Outreach programs through articles, publications, or radio spots to get the word out to people in need of help. Involve those folks most affected by the programs to help develop effective tools to reach other people in the community.
- Increased outreach for education and support in their recovery process. Liveable wage and affordable housing. Limit increase of additional liquor stores. Block that stupid bill that talks about bars staying open until 4:00 am. Affordable treatment options
- Increased coverage and access to BH. I would also prefer that Medicaid was not limited to Axis but that there were other options
- Remove the stigma of getting help; increase the availability of low-intensity help like peer support groups for people in high risk situations
- Sliding scale payment options to make care more affordable (or free) so that cost is not a barrier. more options for places to go for help so that it is more easily accessible.
- Therapy and interventions for those at risk
- Better or more effective rehab or counseling programs
- PREVENTION and education. School-wide screenings for anxiety and depression for our young children would be very helpful. Increased funding/legislation for public schools and school counselors (with reasonable case loads, the American School Counselor Association recommends a ration of 1 school counselor for 250 students), increased access to services, including transportation for at-risk, poor and even middle class families. Do focus groups and ask the target population what they need and want!
- I think there needs to be a supportive, caring place where someone can go and be seen without having to wait or being told they cannot be seen for several months. I think someone should have access through a



Behavioral Health Survey Results

March – April 2014

navigator to all the possible resources available to them. There are many barriers in this community (transportation, wages, housing.....)

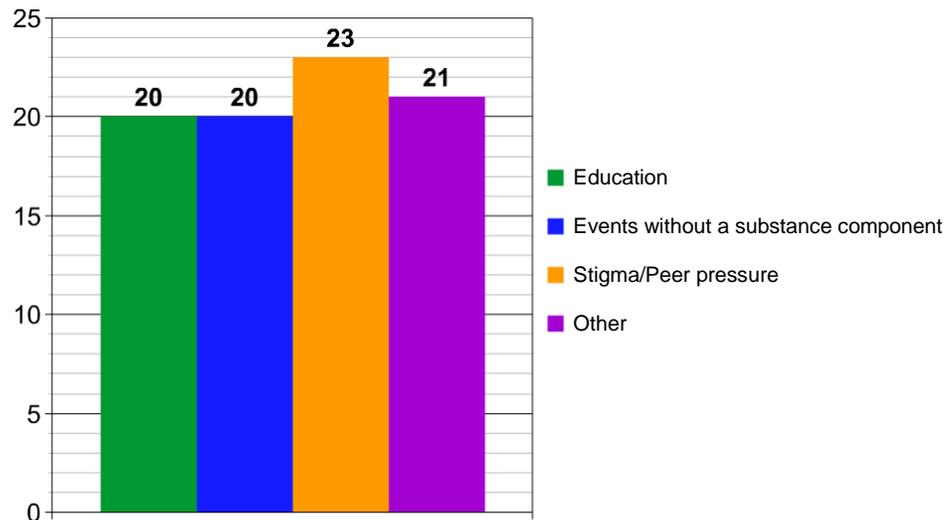
- Decreasing stigma is huge. Increase the frequency and comfort of the community conversation so that discussion of these issues is "normalized" like discussion of diabetes or heart disease. Along with community conversation and social marketing, resources need to be increased so that when people do ask for help (especially youth!) access to resources is easy, private, and quick.
- More readily available information, through the newspapers, TV, information sessions, schools, law enforcement agencies, medical offices, and churches. It will take a major "campaign" in our community, including every technique we can think of.
- More practitioners, Paying practitioners, offering more training and resources for practitioners, making it affordable and accessible, there are a lot of issues around transportation
- Find the needy and offer the help they need.
- I'm not sure. Educate the community to the real problems we have here as in placement, finance, homeless, etc. I would have to think about this one. It isn't just durango that there is a problem. i realize it is nation wide.
- Access to care
- Help people see both mental health and substance abuse problems as MEDICAL problems, not moral degeneracy or demonic possession.
- in patient rehab, home visits for people need mental health help, transportation . better housing, higher paying jobs
- Additional resources available to all (again regardless of socioeconomic status, location, gender, sexual preference, etc.)
- Creating job opportunities; some of our social support is "too easy"--too easy to get handouts, get food, etc. Activities and recreation is more centered around younger people and physical activity. When you can't participate in those activities, there are limited or select alternative. More intellectual activities to connect with and learn about our natural surroundings and history. (This is an example of increasing activities/hobbies.)
- For every individual it's going to be a different need. once they lock them up they don't help them to get help after that. Help them get help and support after they get locked up, something that is NOT a group setting. Create a safe place for them to go to sleep it off before they get arrested. If you're drinking you can't go to the shelter, so what do you do?
- I have sat down with all the state's/counties represented at resource seminars...the women's resource center does have services for men AND women. the family center WILL give you help even without children in your home. We need more programs like these. More that are related to the issues that are affecting the people's lives. Every person is different and you can't treat them all the same. Can't put them in the same box. Nobody has brought up the issue that now where all of our new doctors are located all over by Sonic it's going to require a \$1 bus pass r/t and when you're only allowed 4 passes/week and can only get them at Manna, if you cant' get the trolley, you're screwed.
- Greater community awareness and commitment around general wellness as a whole.
- Help decrease the stigma of mental health; more affordable access to services
- To avoid terrorists or school/community shootings, I recommend an extensive educational campaign to be kind and respectful to all. I recommend close engagement and mentoring to any and all.
- Greater accessibility to programs, prevention and education from an early age
- Free access to services, families that are educated in these issues, a value community wide that we value BH and it is not a stigma
- All have access to timely, quality healthcare home that includes wellness-health promotion programs to develop or maintain optimal level well-being; medical, behavioral and oral care when needed.
- Financial resources
- People with past in mental health issues that have come out of it that can help those dealing with such issues.
- Income-based counseling, education on prevention/treatment
- Lack of recognition that substance abuse is quick solution and fun. People who lack meaningful relationships and purpose rely on abuse and poor perception to compensate, build ego, and get through.



Behavioral Health Survey Results

March – April 2014

9. What do you see as the biggest gap in responsible substance use?



Additional comments

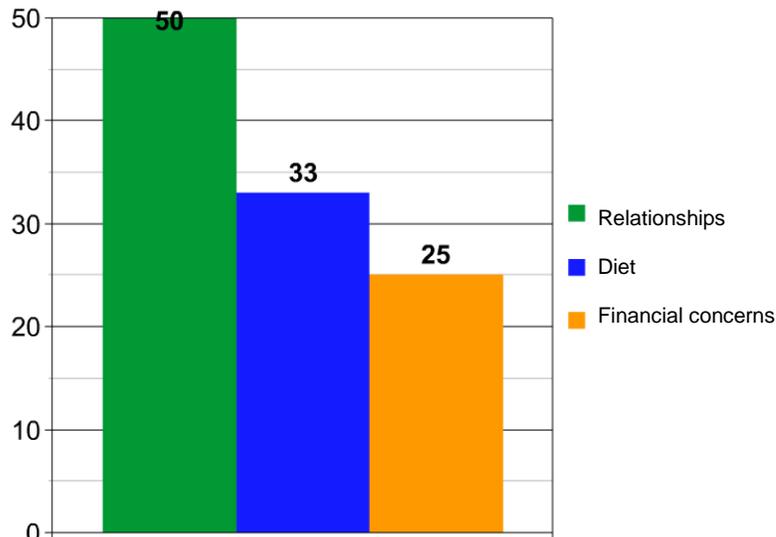
- There is no such thing as "responsible" substance use...
- Speaking only of pot: I fear that legalization is misinterpreted by kids and some adults to mean mj carries no negative impact. Responsible use is necessary same as with alcohol.
- Self-medicating because it's proven that over 82% (2009) are self-medicating due to misdiagnosis (or are NOT being diagnosed)
- Recent legislation legalizing marijuana seems to be very popular in La Plata County. This will lead to a significant increase in behavioral health and other problems related to marijuana use. The community needs to quickly jump on board with prevention
- Political interference in public health matters.
- Mental health treatment
- It seems like almost every event in Durango revolves around alcohol.
- I think that we have grown up with binge drinking being a norm for going out instead of responsibly consuming alcohol. Generally among my peers, if your're not drunk- it's a wasted night at the bar.
- Hard to know. a variety of drivers can occur. Without a needs assessment it would be difficult to say.
- Family dysfunction resulting in trauma in childhood
- Dysfunctional family issues that are not being addressed by the individual.
- Depression/poor coping skills for stress
- Boredom and loneliness
- Balanced education beyond just say "no", Then you must provide the alternative to occupy the persons time, mind and purpose. They need something to say yes to.
- Alternative coping skills and activities for those at-risk
- Addiction is caused by your environment, peer pressure. someone has to hit rock bottom before they'll ask for help. but you're around people that are using so even when you learn about responsible substance use you don't see the bad things happening to them
- A more stimulating alternative that's healthy.
- "Responsible substance use" strikes me as a contradiction in terms.



Behavioral Health Survey Results

March – April 2014

10. Which top *THREE* factors affect your overall health?



Additional comments

- Self esteem, life satisfaction, too much junk food
- Quality sleep
- Heredity
- Give rec passes
- Emotional state
- Relationship (friends or family or loved ones) that care. Find sense of hope.
- Home environment, pets, location of home.
- Having an overall sense of purpose

11. *If you can think of one, please give ONE idea or priority that can help improve responsible substance use in our community*

- Incentivize responsible use by discounts for not only DDs but also the "one drink" folks
- I believe youth will always choose to experiment and most adults perceive that as normal, so they don't react until the youth struggle. Need to change this acceptance level by adults.
- That's not even a real thing. If you're using substances of any kind, including alcohol, you've already gone too far.
- Make mental health services more available. People are self medicating and using to cope with stress and trauma.
- Continuing education on the consequences of drinking too much or taking too many drugs. I know it's not always good to focus on the negative, but it does work as a filter for people who have big goals
- Reaching the youth who are at risk (e.g. homeless, using, abuse, neglected) inspire them to want to live!! Find out what they want.
- Local inpatient substance use treatment center
- Integrated care where provider actually personally asks about ALL substance use and educates patient on health and mental health risks. Not just ask on a history form.
- I think the prescription drug abuse issue could be one area to focus. Providing help for people that is readily available.
- Redirect focus on two legal substances, alcohol and marijuana use. Create powerful stigma against them in community leadership versus legitimizing promotional events for their overuse. Not prohibition, but greater focus on their adverse effects.
- Activities without alcohol. (2)



Behavioral Health Survey Results

March – April 2014

- Keep talking about it/public reminders/
- Give a potential abuser an obvious and easy alternative that fills the void that drew them to the substance in the first place. It's all about that first decision based on input at the time.
- Eliminating the social stigmas that discourage people from getting help.
- Educate the community about wide-spread availability and use of substances. Connect the dots between substance abuse and suicide, failure to get/keep employment, educational issues where appropriate.
- Respectfully educating people and education involving the sellers of the substances (they can provide info on getting abuse help at their shops etc - yes they will. Sorry that's two but both education
- Reduce glamorization... seriously, yoga and a pint?
- Media campaign highlighting successful Durango grown athletes and others promoting all the other positive outlets available here
- Educate parents and adults how to teach, display responsible marijuana use.
- Stop having big drinking fests downtown every weekend in the summer. limit the amount of alcohol that can be consumed at these events.
- Substance free events, and public support of those in recovery or working toward abstinence.
- Start earlier with education versus abstinence amount elementary school students. Avoid the "Never Do Drugs" language that cause students to tune out. Now that our state has three legal substances to manage (alcohol, nicotine and marijuana), the message is further mixed and confusing for young people. Our young people cannot avoid viewing adults as hypocrites with regards to substance use and we should focus on the dangers of rising use of opiates, meth and stimulants that have serious health and mental health repercussions, particularly for young people.
- Change the norm-not cool, not condoned Have hard consequences
- Recognize that that most users are not trying to get high, but are trying to medicate themselves to relieve significant symptoms. Providing alternative means of symptom relief including appropriate medication, counseling, therapy groups, access to good nutrition, exercise, improved relationships, meaningful work, spirituality is the holistic approach.
- Sober living community
- Integration into personal development rather than stigmatization and arbitrary criminalization. For example, Europeans traditionally served wine at meals thus it was a normal part of life rather than a artificial threshold requiring initiation.
- Getting people to ask themselves why they are using in the first place.
- Increasing assets for youth is a proven method of preventing and reducing youth substance use. Increase pro-social opportunities for youth, give them meaningful roles, increase service-learning as part of the curriculum in schools (not community service hours for graduation credit).
- de-glamourize abuse, make moderation "cool" among kids
- more education re how to identify if someone (or self) has a drinking or substance problem - seems like many folks think their use is not a problem when in fact it would probably be defined as a problem behavior by a specialist
- Focus more on alcohol - not marijuana
- Low cost activities for those at-risk, that should include a treatment component. Most substance use is comorbid with another mental health condition so teaching coping skills and providing treatment for the co-occurring mental health conditions is also very important.
- Quit making it so ok. The papers report on partying, the community including young people talk about how drunk they get or stoned. Quit making it socially acceptable.
- Pass local legislation to capture local medical and recreational marijuana taxes and use them for local prevention and treatment. Do it now before a different precedent is set.
- Stop allowing any alcoholic beverages at all public events, especially on the streets. There are just too many fundraisers in this town that provide alcohol. We even see alcohol being sold at evening events at the Children's Discovery Museum. What message is that sending??
- changing the stigma that "it's ok to drink alcohol in high school".
- A practical, specific guide to what constitutes responsible substance use.
- I would like to see axis used to its potential
- Life is about balance...everything in moderation
- Help people see dependence/addiction/abuse as a medical problem.
- make many events nonalcoholic, as this town is gotten ridiculous re alcohol. you can get a pint of beer for a pint of blood (in the past) just outrageous. This community encourages binge drinking, drinking of all kinds, talk about bad examples, even the children's museum is allowed to have alcohol (outside) what does that say. We are telling our children they cannot have fun as an adult without alcohol!

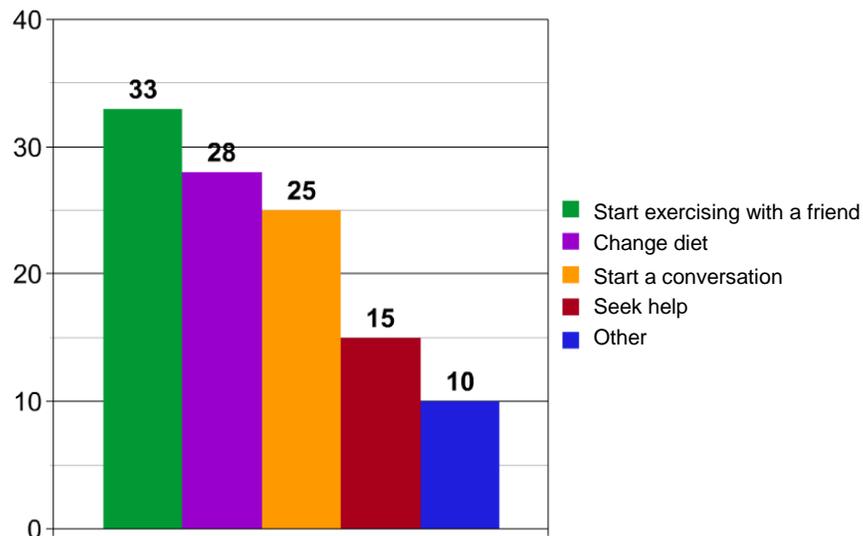


Behavioral Health Survey Results

March – April 2014

- more of a preventive approach vs. punitive/reactionary, so more education?
- education, as early as possible
- that's the problem. those of us with an addictive personality we can't always grasp WHEN it's time to stop. Really figuring out a way to never get into the cycle of addiction is the biggest way to help. But it's everywhere...everyone has their own little vice. Just some have better vices than others. I would probably say healthy, creative hobbies. There's plenty for people to do it's just a matter of people getting out to do it.
- Professional community and the community as a whole offering more events with a responsible substance use option or without substances present AND that are not just for "families with children."
- when people go to the counseling with court orders if they admit they had a relapse and they're trying to talk it out and they're getting reprimanded while other people are getting away with it. I admitted that I drank and it caused major problems. solution would be: you don't bring them because everybody is going to fall one time or another. if the person that's being paid to support you is not supporting every person equally then they're not doing their job. Axis changes counselors like they change their underwear. I hate Axis. Counselors are constantly changing creates stress, insecurity, lack of trust, anxiety. then you can't get to the deeper issues. My daughter was taken from me with PTSD. what are you doing for these people coming back from war, what is social services doing? They're getting all this money for putting kids into foster care. (Instead of helping rebuild their families.)
- Education about responsible substance use.
- Acceptance and hope. Provide something with deeper meaning and better pleasure. SA is instant gratification and that needs something instant and better.
- Include alcohol less in downtown events. Interesting to try a fair or event without alcohol?
- work toward an even number of non-alcoholic sponsored events as alcoholic sponsored events

12. Which TWO of these would you prioritize to improve wellness in your life or help someone else to improve his or her life?



Additional comments

- You keep working on your "plan" while others are moving forward to provide actual solutions.
- The above reflects me and I am doing the above. Diet is harder than exercise.
- Start exercising with or without a friend.
- Point out people who demonstrate very unhealthy behaviors. Don't just laugh it off.
- model moderation
- meditate everyday
- Means of reducing overall stress and activities that provide an outlet for stress management



Behavioral Health Survey Results

March – April 2014

- Look at the 8 components of wellness and set goals for each area. Then select timelines and ways to reach the goals. This would be very empowering for those wanting to improve wellness in their lives.
- increase awareness of support groups for people in high stress situations, like families affected by cancer or loss of a loved one
- I do all of the above and refer friends and others to do the above all the time.
- I already provide opportunities for others to find alternatives to an unhealthy lifestyle and when I give them the chance I receive the benefit of feeling well also. A win win for us all.
- helping other people, bayfield community programs through family center are the first of their kind--get the community involved in these programs for a monthly community dinner, etc.
- Have honest discussion with health care provider
- Fun, healthy social events and activities NOT centered around alcohol and drug use.
- find community... still searching!
- exercise alone for the mental clarity
- diet/exercise should be together
- Attend Al Anon. It's free!
- Address diet concerns things like food dye, foos allergies can present "mental health" issues. Medications are not always the answer. Speak to a doctor
- Challenge my mind.
- more activities for youth
- Volunteer-give back to community