



MASON THURSTON SYSTEM OF CARE PARTNERSHIP

A REGIONAL FAMILY YOUTH SYSTEM ROUND TABLE PARTNERSHIP

OCTOBER 28, 2022 SUMMARY MEETING NOTES

A Youth Co-Tri-lead started the meeting and made the following requests for participants to:

- mute their device when not speaking;
- avoid over-talking by waiting for others to finish speaking;
- use chat or raise a hand if using video or say your name before speaking if not using video, when you want to make a comment;
- stay on topic as we move through the agenda;
- feel free to share a question or comment after each agenda item.

The convener read through the roster to sign in participants and this included the announcement of the new Co-System Tri-lead. Then the Youth Tri-lead read the vision, mission and eight-part comfort agreement, followed by the listening statement. This statement lets participants know they are listened to as we also focus on what the group has voted for as our area of focus and reminds the group that Tri-lead contact information is on every agenda.

The System Tri-lead continued and read the goals for the day.

- Area of Focus – Ending the Silence Presentation
- Area of Focus – Collection of Stories
- Peer Olympia Presentation
- Share Time

A Co-Family Tri-lead let the group know that the NAMI (National Alliance on Mental Illness) participant would start the Ending the Silence presentation. Following are some highlights from the presentation and comments from participants. The NAMI representative is referred to as 'the presenter' and 'she/her' in the notes.

- The presenter explained that NAMI is the largest grassroots organization in the country. She told the group that NAMI staff who would be presenting 'Ending the Silence' are not medical professionals or social workers but have lived experience. Also, that there would be a youth who will share their experience and that this is a presentation for parents/caregivers and there is also a version available for middle and high school students and one for school staff.
- The presenter then shared some personal information (below).

- She grew up in Olympia and was a student in the Olympia School District.
- She is presenting from home and has an emotional support dog.
- She volunteered for six years and is now working as staff for NAMI.
- Caregivers/Parents were asked questions as follows:
 - Have you wondered if your child was developing the same as others?
 - Have you ever worried about behavior or thought it was a phase?
 - How many of you have been overwhelmed by your child's behavior?
 - How many of you have ever felt frustrated while working with your child's school?
- The presenter said that if this is the case, then these are normal reactions and part of being an important person in your child's life and NAMI can provide resources.
- She shared that mental health affects everything, just like physical health. It affects all aspects of life in relationships and includes school life. The presenter shared that she was diagnosed with depression and Attention Deficit Disorder (ADD) when she was eleven years old. ADD was her big secret, not depression. She thought something was wrong with her and when she experienced early intervention, didn't like it. However, now she is grateful to them (family) for getting her into recovery. Her mental health was affecting her relationships at school and at home with her mother.
- The presenter then shared the following information:
 - One in five individuals will experience a mental health condition.
 - Most mental health conditions can affect mood, thinking and behavior
 - High school students with mental health needs are twice as likely to drop out as their peers.
 - Many don't get help when they need it and stigma is a big reason why they don't talk about it.
 - The earlier the intervention the better the outcome.
- She then discussed how caregivers/parents can tell if their child's behavior is a mental health condition with the following points:
 - It is about intensity, duration and level of distress. How much it affects a youth's ability to carry out their daily activities.
 - Example; there is an upcoming test and worries about a test can be normal but if it is extreme worry and there is no relief after the test and it happens for every test then it fits the criteria.
 - The presenter shared that she showed patterns of perfectionism by doing and re-doing homework and it affected her relationships.
 - What you see at home and school can be different.
 - The presenter said that she was sad, hopeless and angry at home.
- The presenter then shared an example of a youth seeming to be isolated and playing video games and asked if this was a mental health condition or not? Here are some responses from individuals in the group:
 - A parent talked about being in a rural area where being online is an activity for youth. This parent shared that she believes that where we live needs to be considered. She

knows other people in the neighborhood and what the norms and the social structure are for where we live.

- The presenter said that teens are finding connections online during COVID.
- She shared another example of a youth being argumentative and disrespectful to adults which leads to losing privileges and asked if people in the group thought that this was a mental health condition? Here are some responses:
 - A parent shared about their teen, saying that this is part of their mental health condition.
 - Another parent said they have a friend who has teens that are like this and they've also had a life change that has affected them. She then thanked the presenter because she said that the mother doesn't think anything is wrong.
- The presenter shared another example about a youth wearing long sleeved shirts and pants in warm weather and asked if this was a mental health condition? There was one response from a parent saying they thought this was a mental health condition.
- She then discussed suicide and the need to care for yourself. Also, that the causes are complex and determined by many factors. Here are some highlights:
 - Highest rate of suicide is for the LGB population.
 - Note: (LGBTQIA+ is the acronym typically used)
 - Risk factors can include:
 - Talking, writing or drawing about death.
 - Talking about having no reason to live and being a burden.
 - Loss of interest in the things they care about.
 - Suicide is never your fault. You can never control another person.
 - You can ask a person if they are thinking about suicide and it is a myth that asking that question causes it. It does the opposite. It lets them know that you are a safe person and it is okay to talk about it.
 - If the answer is yes, don't leave them alone and seek help immediately.
 - Stay with them if they threaten suicide. They may be more comfortable talking with you than their parents.
 - If the situation is non-life threatening, it is okay to talk with your child or child's friend. It is okay to talk with the friend's family.
 - Your role is not to diagnose your child. Just say I feel worried about your behavior. Stay calm, loving and don't use any 'shoulds'.
- The presenter then discussed empathy and sympathy and here are some highlights:
 - Empathy is perspective-seeking, staying away from judgement, recognizing emotion in other people, feeling with people. Empathy helps you understand and make a connection.
 - Sympathy is when we try to silver line it. Sometimes saying things like, ooh its bad, huh? We try to make things better.
- She then discussed communicating with school staff and shared the following:
 - Teachers spend a lot of time with your child. Reach out to them because they can notice things. Every school is different. Find out what works best with your school and

- find out about accommodations (preferential seating, shortened assignments). Find out how to communicate and how often to communicate with school staff.
- Keep the school informed and keep up communications with both school and mental health professionals. Communicate about appointments.
- The presenter asked the group additional questions:
- Have you shared concerns with school staff and were told there is no problem?
 - Have you blamed the school or yourself for behavior problems?
 - Are you in denial about behaviors and don't want to acknowledge them?
 - A parent commented that they sometimes don't want to acknowledge and say 'oh man' because I didn't want to add that part to other challenges.
 - How many of you have become protective when your child is treated unfairly?
- The presenter said that these are common emotional responses to getting a mental health diagnosis for youth and families. Denial or overprotective anger with the school can be a normal response. Partnering with school staff is important. Early identification of challenges and open communication with school can be helpful. NAMI has a presentation on mental health education and this can be helpful for your student's school.
- She then talked with the group about resilience, well-being and resources as follows:
- She shared with the groups that her parents instilled a sense of humor and this helped with her resilience. She also volunteered and it can feel good to help others. Volunteering has been a big part of my life and the first thing I did in the outside world. My parents instilled this value.
 - Resources:
 - Family, friends, a trusted adult and faith community can be helpful resources.
 - My (presenter) resources included a psychiatrist, medical doctor, faith community, therapist and parents when I was young.
 - NAMI has additional programs for support. We have middle and high school presentations that fit into a school class period. We have a youth speaker and a presentation for school staff. NAMI Basics is for youth under 22 and is self-aced.
- The NAMI Youth Presenter shared her story and information:
- The youth shared that she is a 21 year old St. Martin's University student, part of the cheer squad, does arts and crafts, coloring and has an emotional support animal.
 - She attended high school from 2015 to 2019 and became paranoid and angry during a time when she was involved in an abusive relationship. Her partner controlled everything including clothes, music, nail polish. She wanted to be perfect and fit in. She was able to break ties with her partner but it took a lot. More details:
 - She was diagnosed with PTSD (Post Traumatic Stress Disorder) and was relieved to put a name to it. There was a lot of stigma around it.
 - She had trouble sleeping due to loss of control in her life.
 - It was hard to find others who were struggling with PTSD.
 - Loneliness made her feel lost.
 - Acceptance helped me to get help and move on with my life.

- She used medication and therapy. This took time and some medications did not work and some therapists were not a good fit.
 - Friends and family were supportive.
 - She worked with a therapist to remove symptoms.
 - Lost advocacy skills due to her abuser and it would have been easy to revert back to old ways away from home, but knew she could always call family/friends. She could always lean on people even during good times.
 - She had to learn what was normal and what was part of PTSD. Her emotional support dog has been important.
 - Getting involved with NAMI has been helpful and receiving a Young Leaders award.
 - Asking for extensions at school is not the end of the world.
 - She has experienced waking up and feeling joy.
 - Goals are to get a degree in psychology and go on to a Ph.D. and share her experience with the world.
- Questions, comments and answers:
- A parent said they've learned to say that an assessment is needed rather than to ask for an assessment. Alternative school has been great. He also talked about hospital emergency department visits with teen resulting in no beds available or sending his youth home.
 - A system participant asked about NAMI support groups/services.
 - The presenter said that there are lots of services for parents, peers and support groups for people with their own mental health condition called 'connections'. Ending the Silence presentations for students, staff and families. 'In Our Own Voice' presentation with adults talking about their own experiences. These have been presented at churches and St. Peter's (hospital) South. There are programs for loved ones, military and peer to peer. NAMI does education through presentations, classes and advocacy which includes training on how to talk with legislators. There are supports for caregivers and people under the age of 22 about warning signs and working with different systems.
 - The Squaxin Island Tribe participant thanked the presenters and said that it takes a lot of strength and helps with healing. She also said that it was mentioned that the NAMI data is pre-COVID and I hope that you get new data, especially about suicide. Rates are much higher for Native American youth and criminalization of trauma. There is a juvie to prison pipeline and presenting that type of data would be helpful. We are hoping to connect Native Behavioral Health with 988.
 - Note: Washington state discussed how staff with Tribal connections are available for 988 callers in the 11/2/22 Crisis Jam/Talk.
<https://talk.crisisnow.com/learningcommunity/>
 - A parent commented that there are more difficult students in schools. What type of support do you have for teachers along with being parents. How can you help with that?

- Support groups are for and by peers. They include writing, art, networking, water cooler social club, employment, board games group with a lens of recovery and a seasonal group for struggles with the holidays. Most are in-person or hybrid using Zoom. Some focus on supported employment and supported housing. The support is about identifying what individual goals might be and exploring resources, applications and the peer can go with individuals to appointments. Peer Olympia does not provide direct support and the wait can be about 2-3 weeks.
- Resource computers are available for use in applying for jobs or anything that is resource-based recovery, such as housing and education goals for example.
- Family navigation is one-on-one support for caregivers, partners, friends of someone who works directly with an individual. We can help with support and navigating finding support for someone with a mental health condition or substance use disorder challenge.
- Recovery resource and referral is completely volunteer –run and most services are in downtown (Olympia) or nearby. We can help with how to get into a shelter, access to services and in general helping individuals find what they need.
- We are connected to Peer Washington and our services are in Kent, Spokane, Seattle and others are on the website.
 - www.peerolympia.org
 - Groups calendar: www.peerolympia.org/calendar
 - Contact: Dan Evans, Peer Services Specialist – Family Navigator
 - 360-292-5414 Direct Line
 - dan@peerolympia.org
- The Catholic Community Services participant welcomed Dan to the community and said that it is super exciting and they plan to visit Peer Olympia and find out how we can partner with you.
- The Behavioral Health Advocate participant let Dan know that she is newly a part of Peer Washington and used to be the Behavioral Health Ombuds. She said that she is glad to meet with anyone from Peer Washington and that it is wonderful to meet you and be a part of your organization.
- A parent said that they appreciate the information shared and the way it was worded, such as having a group that plays games. This is a good way to describe a support group without having to say it is a support group.
 - Dan responded saying that we do not provide direct services but help people to find answers. We use people first language.
- Another parent said that it looks like Peer Olympia is mainly for people with addictions and asked if there is room for youth that need help and direction?
 - Dan said that we have a global target for everyone in recovery. Individuals define recovery. It could be in recovery from the military, mental health or the justice system. There is no limit on how old an individual is but we cannot go younger for multiple reasons.
- A parent said that this has really been informative, very comprehensive and inclusive.

A Co-Family Tri-lead introduced share time and explained that it is time set aside for anyone in the group to talk about successes, challenges, questions, comments, information, updates or anything else you would like to share that brings joy to your life. This is also a time when questions or comments about today's goals/agenda are welcome.

- A parent shared that at one time they were considering moving and had to consider all the things that would change. We figured that Washington state had a ridiculous amount of resources. Our house didn't sell for whatever reason and we are meant to stay in Washington. This makes me happy and said and it helps me to help my son.
- Another parent said that this has to be the best meeting I've ever been a part of. Wow, I'm blown away. It is about supporting people and their mental health. The wording was great. My daughter has created an Instagram space so that youth are able to share anonymously and I think it is a great resource and so you can spread the word about that. I posted the link in the chat and it would be great to post (quarterly meeting) evaluations link in chat.
 - <https://instagram.com/loudmindsspeak?igshid=YmMyMTA2M2Y=>
- A caregiver said that the link is a good thing and to please encourage this youth to keep going.
- Another caregiver asked about having a live reel and it would be good to have a set time but it has to be what works for youth. This was meant to take over the youth meetings that were held in the past.
 - The parent of the youth who created the Instagram space said that she would ask her about this.
- A Co-Youth Tri-lead said that she appreciates all the support she had when she was struggling.
- There was an exchange between the Co-Family Tri-leads asking if there were any feelings about talking with schools about the NAMI presentation. One Co-Family Tri-lead said they would need to look at the brochures.
- A parent said they appreciated all the information that was shared.
- Another parent said that the schools provided a technical way to get into Skyward to schedule a conference. She called instead and it was easier to schedule a conference.
- A North Mason parent commented that their district would be done with conferences this week.
- The convener answered a question about upcoming meetings and said that they would be held on third Fridays instead of fourth Fridays in November and December due to the holidays.
- The convener also brought up Crisis Jam/Talk meetings that are held every Wednesday morning at 9 am and provide updates on 988. They are meetings where people from across the nation and beyond participate and sometimes there are speakers from Washington state.
 - Note: A meeting announcement/reminder was sent to the group so they would have the link and be able to sign up. <https://talk.crisisnow.com/learningcommunity/>

The Co-System Tri-lead let the group know that anyone can contact a Tri-lead with concerns or questions any time and their contact information is on the agenda. The Tri-lead then thanked everyone for their participation. She then announced that the next meeting will be held on November 18th and adjourned the meeting.