



A U T U M N 2 0 0 3

Partnership in Youth Services Awards



Keynote speaker Lynn Doyle, host and executive producer for CN8's "It's Your Call with Lynn Doyle" (back row, 3rd from right), and Ron Bernstein, president and CEO of Foundations Behavioral Health (back row, 4th from right) congratulate the winners of the Partnership in Youth Services Awards.

Over 100 community service leaders, non-profit organizations, and local governmental leaders attended the Foundations Behavioral Health "Partnership in Youth Services" luncheon ceremony held at the Aldie Mansion at the Heritage Conservancy, in Doylestown in October. The event honored 10 non-profit community programs that are making a difference in the lives of local children with monetary grants of \$1,000 each.

The winners were:

- Bucks County Council, Boy Scouts of America
- The Bucks County Youth Center, Residential Services Unit
- Building a Better Bensalem Today (Today, Inc.)
- Central Bucks West High School
- Child, Home and Community, Inc.
- The Council Rock School District - Theodore Sloane Alternative Program For High Risk Students
- Lower Bucks Family YMCA "Y-Zone Teen Center"
- QUDC School of Special Education
- Valley Youth House
- A Woman's Place

Special Equestrians Offer Vocational Training to Foundations' Students



Special Equestrians are a non-profit therapeutic horseback riding and carriage-driving program for children and adults with physical, mental, social and emotional disabilities. Founded 21 years ago, Special Equestrians serves over 400 individuals each year. The group offers specialized programs for individuals with autism spectrum disorder, community outreach to increase disability awareness in the schools, and vocational training.

"We collaborate with other organizations to help at-risk youth," says Sharon Herz-Freilich, director of Special Equestrians. "It's rewarding to have students from Foundations Behavioral Health participate in our vocational training program to improve their job skills."

A new Special Equestrians pilot program for seniors, "Silver in the Saddle" provides seniors with the ability to do exercises that increase mobility, alleviate symptoms of depression, and improve overall strength.

For more information or to join Special Equestrians' group of 200+ volunteers, call 215-918-1001.



Ask the Doctor

About Teen Violence



Mary Ann Venezia, M.D.
Staff Psychiatrist
Foundations Behavioral
Health

Q: *IS ANGER NORMAL?*

A: Anger is a normal pervasive emotion. Anger can be a powerful motivating force, both on an individual and societal level. Expressed appropriately, anger can promote understanding and cooperation. In addition, being able to accept anger is a marker of emotional health and leads to satisfying and lasting relationships with others.

Q: *WHAT HAPPENS IF ANGER GETS OUT OF CONTROL?*

A: Persistent unresolved or outwardly aggressive anger can be extremely destructive. If anger becomes the predominant way that individuals communicate with each other, there can be no meaningful resolution of conflict. The end result is an accumulation of resentment and rage that is potentially explosive. Anger may become an illness in and of itself. Poorly expressed and out of control anger precludes satisfying and successful relationships with others and can sometimes be a segue into the judicial system.

Q: *WHAT ARE SOME OF THE PSYCHOLOGICAL REASONS THAT KIDS TURN TO VIOLENCE?*

A: Freud said that depression is anger turned inward. Likewise, explosive anger and the violence accompanying it may have roots in the childhood experience of unrelenting sadness, abuse, neglect and abandonment. Such children may begin to view their world and those in it as adversaries and develop a powerful defensive anger that feeds on itself and eventually erupts into violence. It is difficult for teens who were challenged with significant emotional trauma in early childhood to allow themselves the luxury of working through pain that may be buried under nearly impenetrable anger.

Q: *HOW CAN YOU TELL IF A KID IS PRONE TO VIOLENCE?*

A: Children who lack healthy relationships with adults and peers and who present themselves as virtually

alone against the world are at risk. They may talk about violence, collect information about violence and be preoccupied with violent music, movies and games. They may use drugs and alcohol, have a history of depression and suicide attempts or other self-destructive behavior. They blame others for their actions and refuse to take responsibility for their behavior. Impulsivity and a strong attachment to delinquent peer groups are also risk factors for violent behaviors.

Q: *DO ALL AT-RISK CHILDREN BECOME INVOLVED IN VIOLENCE?*

A: No. Children may show all or some of the characteristics mentioned above and never become violent. The presence of risk factors, however, should alert us to the need for assessment and intervention as soon as possible.

Q: *WHAT CAN EDUCATORS, ADMINISTRATORS AND PARENTS DO?*

A: Children must be given a clear and consistent message that ultimately violence does not lead to conflict resolution and a positive outcome. Adults must lead by example and teach youth when and how to express their feelings effectively. The mere expression of anger in words may go a long way towards defusing and deescalating violence. Children should be encouraged to understand an angry response and ask questions about it. Is it proportionate to the situation? Are there factors exacerbating it? Are they really angry at something else? Children must have a sense that their efforts to express themselves are appreciated and their feelings validated, even if they do not immediately result in resolution of conflict. They should be taught patience, tolerance, compassion and negotiation from an early age. Recognize positive accomplishments and encourage active involvement at home, school and in the community to enhance self esteem.



HELP FOR TEENS IN CRISIS
24/7

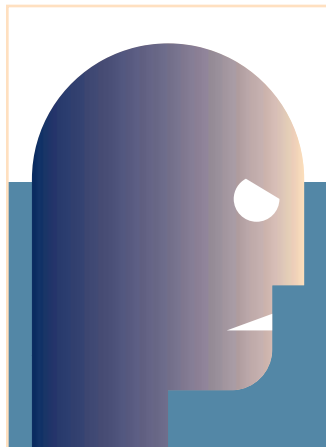
FOUNDATIONS
BEHAVIORAL HEALTH

215-345-0444

FBH.com

Managing Anger Constructively

Excerpted from the book,
"LifeWorks: Behavioral Health in the Classroom"
published by Foundations Behavioral Health



Being open, honest and direct is the most effective way of expressing your anger. This is often difficult, however, because when you're confronting the source of your anger, your emotions sometimes get the best of you. You want to appear composed, but it's hard to stay calm. Keep these important skills in mind:

Recognize and acknowledge the fact that you're angry. Remember that anger is a normal, human emotion, and that it's okay to feel angry. In fact, it's healthy to express anger without being aggressive.

Make sure that you haven't misunderstood what the other person has done. If you're sure that the source of your anger is intentional, think about it for a while and try to figure out why it made you so angry. Talk about it with an uninvolved person, and decide whether you really need to confront the person with whom you're angry. Sometimes, however, they escalate in your mind, and that's when you probably need to express your anger.

When appropriate, express your anger directly and specifically. Pick a good time and tell the person why you are angry. Be succinct and to the point, focusing on the specific behavior that triggered your anger. Keep your voice firm but not confrontational, and make direct eye contact. Don't attack or blame the person. Try not to say anything you'll regret later.

Avoid "black and white" thinking, and use "I" statements. Instead of saying things like "You never___," say "I'd prefer that you'd___, because then I'd feel___," or "I feel angry when you___." This puts the focus on your feelings instead of blaming or confronting the other person. When you use "I" statements, you are empowering yourself.

Aim your expression of anger toward negotiation. When you express your anger, you are naturally deepening your relationship with the person with whom you are angry. Hopefully, when the situation is resolved, your relationship will be better, stronger and more positive.

To order a copy of the book: "Lifeworks: Behavioral Health in the Classroom" (\$19.95)
call (215) 345-0444, x132 or visit www.fbh.com.

Save the date: Friday, May 14, 2004



Foundations Behavioral Health's Annual professional development seminar, *Explosive and Non-Compliant Kids: Specific Strategies for Students with Difficult Behaviors* will be held on Friday, May 14, 2004.

Keynote speaker: Ross W. Greene, Ph.D., author of *The Explosive Child: A New Approach for Understanding and Parenting Easily Frustrated, "Chronically Inflexible" Children*. Dr. Greene is Director of the Collaborative Problem Solving Institute in the Department of Psychiatry at Massachusetts General Hospital and Associate Professor in the Department of Psychiatry at Harvard Medical School.

If you'd like to receive an invitation to the event, contact:
Sheri Hartsoe at Foundations Behavioral Health,
215-345-0444, x132, sheri.hartsoe@fbh.com



Local Community Agencies

Foundations Behavioral Health 800-445-4722 • www.fbh.com
Bucks County Office of Behavioral Health 215-773-9313
Bucks County Suicide Hotline 215-340-1998
Bucks County School Watch Violence Prevention Hotline 877-888-7140
A Woman's Place Hotline 800-220-8116
Bucks County Children and Youth 215-348-6900
Parents Involved Network of PA 800-688-4226
NAMI of Bucks County/Chapter Hot Line 215-946-1152
Bucks County Peace Center 215-750-7220
Child Home & Community 215-348-9770
Bucks County L.I.F.E. Program 215-750-7651 • www.lifeinbucks.org
Bucks County Office of Mental Health 215-442-0760
Magellan - Bucks County Member Advocate 877-769-9784 x3942

Transforming Mental Health Care in America



Ron Bernstein (R) discusses mental health reform with Rep. Charles Pickering, Jr. (R-MS) in Washington, DC.

by *Ronald T. Bernstein*
President and CEO
Foundations Behavioral Health

We applaud "Achieving the Promise: Transforming Mental Health Care in America," the first Presidential Commission on Mental Health report in 25 years. The report, which draws public attention to mental health, focuses on critical issues impacting behavioral health systems, including growing pressure on the acute care system, parity, research, Medicaid reform, Medicare reform, IDEA reauthorization, and building systems of care for children. This report serves as an affirmation to those of us who work in the community mental health system and serves as a useful tool and guide for shaping mental health-care policy, funding and service delivery at state and local levels.

The Commission's findings confirm that there are many unmet needs and barriers that impede care for people with mental illness. The President noted that millions of Americans and their families live with mental illness everyday and that untreated mental illness is a great national problem. The stigma associated with mental illness often discourages consumers from seeking care, despite the existence of new drugs and therapies that have vastly improved the chances for effective treatment and recovery. Untreated mental illness can too often lead to homelessness, drug and alcohol addiction or incarceration.

The report acknowledges, among other issues, the challenges facing Americans who require acute behavioral health care. In recent years, access to acute care has become a concern as available beds in both the private and public sectors have declined, as emergency rooms in some areas have experienced backlogs, and as aftercare services have become scarce.


President Bush has declared his support for parity in mental health legislation and noted that even though advances have been made in the science of mental illness treatment, many health plans unfairly treat coverage for mental health benefits by imposing co-payments, deductibles or limits on inpatient and outpa-

tient visits that are more restrictive than those placed on physical illness. The President has a history of supporting parity legislation. In 1997 as Governor of Texas, he signed legislation into law that required plans to provide fair treatment to patients with severe mental illnesses.

"We envision a future when everyone with a mental illness will recover, a future when mental illnesses can be prevented or cured, a future when mental illnesses are detected early, and a future when everyone with a mental illness at any stage of life has access to effective treatment and supports - essential for living, working, learning, and participating fully in the community," said President George W. Bush.

Congressman Patrick J. Kennedy (D-RI), the leading advocate for mental health care reform in the House, has asked the House Republican leadership to lift its opposition to the "Paul D. Wellstone Mental Health Parity Act of 2003." The bipartisan legislation, which Kennedy has spearheaded in the House, would eliminate the arbitrary limitations insurance companies place on mental health care treatment.

With more than 10 million Americans facing serious mental illnesses, we are all touched in some way by the health, economic, and very human impact of these mental disorders. As a nation, we must continually work toward overall health by devoting adequate resources to both mind and body. We hope that the report of the President's Commission on Mental Health will provide momentum for policymakers to eliminate discrimination for people with mental illnesses and to provide the resources necessary to improve patient care.

As an organization serving the behavioral health needs of children and their families, it is our responsibility to ensure that effective treatment is received by those most in need. In a given year, about 5% to 9% of children have a serious mental disturbance. We are committed to developing and promoting solutions based on quality, compassionate, expert care. 

Editor's Note

Foundations Forum is published by Foundations Behavioral Health, a comprehensive system of behavioral health care serving Delaware Valley adolescents and their families. For more information on these topics or other adolescent behavioral health issues, call Foundations Behavioral Health at 215-345-0444 or visit our web site at www.fbh.com.

Publisher • Ron Bernstein
Editor • Beth Brody, public.relations@fbh.com
Designer • Robert Burger

This newsletter was made possible in part, by a grant from the Theodore B. Betz Foundation.

Foundations Behavioral Health is an independent, non-profit organization not affiliated with Doylestown Hospital.