



Mental Health Notes

Mental Health Association
in Ulster County, Inc.
PO Box 2304
Kingston, NY 12402

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MEMBERSHIP MATTERS

MHA membership is not only a source of strength and support that allows us to maintain our current services to hundreds of individuals including families and children, but also the flexibility to respond to the needs of the entire community.

MHA members are partners and ambassadors as we together advocate for optimal mental health and work toward the elimination of stigma.

We know that mental health matters to everyone. You can help us to continue our mission and to improve the mental health of our community by becoming a member of the MHA.

BECOME A MEMBER: TOGETHER WE CAN MAKE A DIFFERENCE

MHA MEMBERSHIP APPLICATION

☐ Partner..... \$1000 or more

☐ Advocate..... \$500 or more

☐ Educator..... \$250 or more

☐ Patron..... \$100 or more

☐ Sponsor..... \$50 or more

☐ Friend..... \$35 or more

☐ NEW MEMBER ☐ RENEWAL

Name: _____

Address: _____

City/State: _____

Zip Code: _____

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Your donation is tax-deductible. Memberships are annual from date of inception. Please make your check payable to MHA in Ulster County and mail to PO Box 2304, Kingston, NY 12402. For more information, call (845) 336-4747 Ext. 123, or visit www.MHAinUlster.com to make a credit card donation. Thank you for your support!

THE MHA MISSION

To engage all people in optimal mental health by providing innovative programs and services that prevent, heal, educate and advocate.

Mental HealthNotes

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Building Healthy Relationships

**Mental Health Association
in Ulster County, Inc.**

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MESSAGE FROM THE CEO



Ellen Pendegar, CEO

Enriching Mental Wellness is the primary focus at MHA. In this edition of our newsletter, we are highlighting the role of relationships and social connections as one of the cornerstones for mental health and life enjoyment. Let's take a moment to review "where this all begins" in our life. As human beings, we are building relationships the minute we are born. We learn to form relationships and bonds with our parents or caretakers before the cognitive or thinking part of our brain is capable of understanding what we are learning. Don't you wonder about the times that you meet some people and there seems to be an instant connection, and you want them to stay in your life? Or the opposite can happen: you meet someone and you are immediately "turned off." Could these reactions be from memories of our earliest experiences with relationships?

The infant's first task is to reach out to parents and caretakers and to find ways to provide satisfaction to them. Infants must rely on these relationships in order to get what they need to stay alive. We learn "to give and take." Our survival needs are primary. If these survival needs are not met, a human being must struggle with this deficit until a way is found to "correct" it. Therefore, MHA understands and focuses on the strengthening of the parent/caretaker and child bond. MHA wants to offer an array of support and skill-building opportunities that a parent or caretaker needs to provide for their children. We want to give children the healthiest first encounter with another human being. Last year, MHA partnered with MHANYS and MISN (Maternal Infant Services Network – serving Orange, Sullivan and Ulster Counties) to provide information

on Peri-Natal Mood Disorders to new mothers. Maternal depression interferes in healthy development of the mother/child bond, therefore, identifying and treating maternal depression is extremely important.

Being a parent or caretaker is the most important job in the world. In order to do it effectively, it challenges you and demands that you "rise above" your own needs. My mental health gets better everyday witnessing the efforts of adults doing that for their children, the caretakers' mental health gets better every day that they make those efforts – and I know that the children's mental health gets better every day that their needs are the focus. As parents and caretakers, you know that you only have a precious short time to provide this to your children on a daily basis (although the need for you to provide for your children in this way never goes away – I don't care if you are 50 or 60 years old)! Let MHA help support your care of the children entrusted to you. Demand that MHA keep improving our services in the relationship we have with you. We can all be better!!! Our children's lives depend on it.

**Mental Health Notes
is published biannually by MHA:
the Mental Health Association
in Ulster County, Inc.
PO Box 2304, Kingston, NY 12402**

**Visit our website:
www.MHAIUlster.com**

MHA's Wellness Workshop Series

WELLNESS ASSESSMENT

Workshop Series Summer Introduction

Participants in this introductory workshop considered their feelings of wellness on dimensions of physical, emotional, social, spiritual and mental wellness. Information was provided on setting wellness goals and developing plans to increase wellness.

The following monthly workshops of this series were designed to help individuals work towards their own unique wellness goals in a variety of dimensions:

YOGA & BREATHING

Physical Wellness

Practice gentle yoga postures and learn new breathing techniques to enhance physical wellness.
TUESDAY OCTOBER 12, 1:00PM - 3:00PM

THE ART & SCIENCE OF HANDWRITING

Emotional Wellness

Explore your emotionality and personality by learning of the story your handwriting tells.
TUESDAY NOVEMBER 9, 1:00PM - 3:00PM

JEWELRY MAKING PARTY

Social Wellness

Join your friends in making one-of-a kind jewelry creations. Celebrate the season in good company.
TUESDAY DECEMBER 14, 1:00PM - 3:00PM

EXPRESSIVE ART

Spiritual Wellness

Get to know yourself in a new way in 2011! Journey in self-exploration through spontaneous art making.
TUESDAY JANUARY 11, 1:00PM - 3:00PM

WELLNESS TOOL BOX

Mental Wellness

Create an individualized wellness tool box with items that provide or symbolize comforts and coping skills.
TUESDAY FEBRUARY 8, 1:00PM - 3:00PM

*This Wellness Workshop Series is presented by
MHA's Education & Advocacy Department &
is hosted at MHA's Clifford Beers Center:
300 Aaron Court in Kingston*

Registration is required.

**To reserve your space for any or
all of the workshops in this series,
please call (845) 339-9090 Ext.115**

**Find Additional Groups & Services At
www.MHAinUlster.com**

Coherent Breathing **Timeless Relaxation Techniques Reinvented**

All too often we tend to not think about how we breathe. It is a natural occurrence that does not require much thought. Or does it? With the stress of daily living and busy lifestyles many of us tend to breathe short and shallow, without even noticing. However, there is now much data on how breathing deeper and longer may help our bodies better recover from stress. Coherent breathing is a method of deep breathing taken from many various eastern breath techniques, that helps balance the parasympathetic and sympathetic functions of the autonomic nervous system. In other words, coherent breathing helps restore the natural balance of our "stress system." The balance of these systems help yield mental and physical comfort, better communication, better performance, better sleep and more. So how can you learn to breathe coherently? It is the strategy of consciously controlling your breathing rate to 5 breaths per minute, with about 4 beats inhale, 4 beats exhale. To find out more about coherent breathing go to www.coherence.com.

The Power of "We"

Our connections to one another as human beings are essential components of our own wellness. Connecting with others is critical to our development and can have a significant impact on our wellbeing throughout our entire lives. People who consistently help other people experience less depression, greater psychological calm, and fewer physical pains. Also, people who feel connected to others report feeling happier and healthier, and may even live longer!

Did You Know?

In their 1956 *Psychiatry* journal article, "Mass Communication and Para-social Interaction: Observations on Intimacy at a Distance," social scientists Donald Horton and R. Richard Wohl identified a unique human relationship. They observed the phenomenon known as *para-social interaction* which occurs between viewers and the characters they view on-screen. They wrote that mass media, like radio, the movies and television, creates an illusion of face-to-face interactions between spectators and performers. These relationships become one-directional bonds, meaning that the audience feels an intimate bond with media characters, even though the characters we watch can never reciprocate these close feelings.

Today the media industry often encourages viewers to develop para-social relationships, and promotes the illusion that viewers feel like they know the characters or celebrities they watch on-screen. Popular sitcoms, newscasts, and talk shows appeal to us in part because of the characters that talk directly into the camera, giving us the sense that they are speaking to us personally. In essence, the human drive to connect with others is so strong that we feel close bonds to fictional characters!

From Seed to Salad

Transitions Program Celebrates Seasons

From the rich colors of the trees surrounding us in our "cornerstone" of New York state to our flannel blankets and back-to-school clothing, Autumn enveloped us in warmth. The season is a symbolic transition from the heat of the summer and into the chill of the winter.

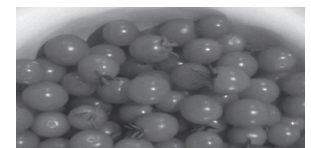


*Transitions Coordinator
Courtney Beaupre
in the garden with
Ellen Pendegar & Shawn Doyle*

Our community was lucky to have been eased through this transition by MHA's Transitions Program, helping us celebrate the changing seasons in our new community gardens.

Early this past spring, the group prepared small plots of land and started a compost bin. Friends and supporters joined the group in planting seeds later in the spring, and helped to weed, water, nourish and maintain the gardens throughout the summer. The Transitions Program hosted a festive iced tea party in the garden to welcome both the community and the crops. An abundance of grape tomatoes and fresh basil were harvested and shared by all who helped.

As the spring began its departure, the Transitions Program took their harvest and took to the kitchen. They divided into two teams and challenged one another to a Cook-Off. The challenge was to create a dish featuring the garden fresh tomatoes and basil with a few additional mystery ingredients. The chefs worked within their teams collaboratively and joyfully to experiment with new ingredients and create natural, healthy dishes. MHA staff judges tasted the dishes prepared by the two teams which included pasta with homemade tomato sauce, garlic toast with tomato basil bruschetta, and the wining dish, chicken with marinated tomatoes and basil couscous. The food was delicious and no one left empty-handed: each team was awarded a big bright sack of freshly picked grape tomatoes!



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Congratulations to all the new & returning board members!



Out of The Darkness

Community Walk On The Walkway Over The Hudson

From both the Ulster side and the Dutchess side of the Walkway Over the Hudson, our communities walked together this fall. Participants in Out Of The Darkness Community Walks across the country walk to increase national awareness about depression and suicide, to honor loved ones and support survivors, and to advocate for mental health services and issues. Walking helps to support the American Foundation for Suicide Prevention (AFSP) and their research and education programs to prevent suicide and save lives. Visit:

www.OutOfTheDarkness.org





Early Attachment Bonds

Building Early Connections

Popular culture portrays to us that all strong relationships are grounded in strong friendships. Experts advise us that we should choose life partners who contribute to the relationship an atmosphere of honesty, forgiveness, communication, trust and patience. We seek out counselors or therapists who try to cultivate healing and therapeutic relationships with us by providing genuineness, empathy, and unconditional positive regard. The message is clear: human beings crave a sense of security from other human beings. In fact, one might argue that the human species would be extinct if newborns were left alone after birth to fend for themselves, as are certain birds, reptiles and fish. Before we even enter the world, we depend on other human beings to help meet our needs. Humans are social creatures by nature: we need each other. It is, therefore, no surprise that our deepest sorrows and greatest joys in life involve our interpersonal relationships.

It has been theorized that our first relationships in early life provide us with information and expectations about the nature of our future relationships. The idea is that as babies we form a critical bond, or attachment, with our primary caretaker, and that this relationship leads us to develop an understanding of how our needs are to be met. In essence, attachment theorists suggest that we develop a “template,” for what relationships are and how they function, that we then carry with us and relate to future relationships.

It appears that there are key components of the relational atmosphere that enhance the development of healthy attachment bonds. These components can be understood

4 Types of Attachments

Secure Attachment- forms when an infant finds a secure base in her caregiver, knowing that he will be there to help protect her from her environment. For instance, the securely attached infant is able to explore a room alone when the caregiver is nearby. She may be upset when separated from her caregiver but is comforted when he returns. 60-65% of 1 year olds in the US have secure attachments.

Resistant Attachment- an insecure attachment where the infant may show anxious or ambivalent responses. This type of attached infant will not explore a room alone even with the parent present. They also may show a much stronger reaction to a parents departure and may show resistance when the parent returns. About 10% of 1 year olds in the US show resistant attachments.

Avoidant Attachment- the avoidant infant does not form a secure bond with the parent. Often they are uninterested in exploring and are not particularly wary of strangers. They do not appear to be very stressed when parents depart and seem to be disconnected from their parents. Up to 15% of 1 year olds in the US have avoidant attachment.

Disorganized-Disoriented Attachment- a newer fourth classification that appears to be predominantly in high-risk family settings and is also associated with later emotional problems. These infants may have been separated from their parent for some period of time. They may act dazed or freeze and seek contact then pull away. These infants may not have found a strategy to regulate their emotions. Up to 15% of 1 year olds in the US have disorganized-disoriented attachment.

as the degree to which the relational atmosphere provides a sense of safety, security and acceptance. Caregivers who consistently reinforce feelings of competence have a positive effect on the child's self-concept, and self-concept is the foundation upon which our mental health lies and is at the core of our social and emotional development.



2010 - 2011 WINTER WATCH

Presents for Patients

Please join us for our Annual Holiday Gift Drive to spread holiday cheer to people of all ages in MHA community based programs, Ulster County residents at Hudson River Psychiatric Center and local inpatient settings. You can help by dropping off new, unwrapped gifts to MHA's Client Services Office, 300 Aaron Court in Kingston. For additional program details or to make a financial contribution for Presents for Patients, please call (845) 339-9090, Ext. 123. For people who are separated from their loved ones during the holidays and to many without family and friends nearby, your gift has special meaning



As we enter into the winter, Ulster County agencies collaborate to remind us to stay self-reliant and help our neighbors in taking preventive measures to keep safe and warm. Winter Watch tips for saving money and energy, home maintenance, and consumer safety advice include strategies such as reversing the direction of ceiling fans, changing filters in forced hot air heating systems, budget billing for fuel, and keeping vents and radiators free of obstructions. Look for the Winter Watch informational brochures posted throughout the county.

For information on Available Resources Contact:

HEAP Home Energy Assistance Program

(845) 334-5436

After Hours Emergency

(845) 331-1671 Kingston

(845) 338-3640 Other Towns in Ulster County

Nutritional Program

(845) 334-5200

Office for Aging

(845) 340-3456

Dept. of Health, Heating Complaints & Rentals

(845) 340-3010

UCAT Transportation

(845) 334-8458 or (888) 827-8228

Welcoming Moms into Motherhood New Mommy Gift Bags distributed in Ulster County

This year the MHA partnered with Maternal Infant Services Newtork (MISN) in welcoming moms into motherhood with New Mommy Gift Bags. Mothers birthing babies at Kingston Hospital were given a free bag containing gifts and information for mother and child. The Ulster County Health Department contributed onsies that reminded moms to keep babies' homes smoke-free. MHA contributed baby bibs that reminded moms of the importance of self-care. Also in the gift bags were breastfeeding and infant care information, as well as information on hormonal changes, the baby blues, and perinatal mood disorders provided by MISN. For more information about Maternal-Infant Services in Ulster, Sullivan and Orange Counties, visit www.misn-ni.org.



MHA HAPPENINGS

AWARDS & HONORS

Martha Steuding Honored For Leadership & Lifetime Achievement



*Martha Steuding,
Program Director of Education & Advocacy
& Lifetime Achievement Award Recipient
Poses at the YWCA's 2010 Tribute to Women*

In addition to receiving the Lifetime Achievement Award from the YWCA, Ms. Steuding was also honored with the 2010 MHANYS Staff Leadership Award. She is described by her staff as a visionary, striving to engaging all people in optimal mental health.

Ms. Steuding earned her BS and MS degrees from SUNY New Paltz and has served as a founding member of the Ulster Chapter of NAMI, as a board member for NYAPRS, as volunteer director of Christopher Robin Nursery School, as a founding member of the environmental groups Grass Roots and OLIVE, and as trustee for the Olive Free Library. As an employee of MHA for nearly 27 years, Ms. Steuding's accomplishments have spanned from program development initiatives to progressive community collaborations, including the creation of MHA's Education and Advocacy department, Community Psychoeducational Training series and the ACES Supported Education program.

Ms. Steuding's vision and leadership has recently inspired the establishment of the Ulster County Task Force on Co-occurring Disorders and the Ulster County Eating Disorders Coalition. With dedication and passion, Ms. Steuding continues to inspire others and advocate for mental health and wellness for all.

2010 Mental Health Award Recipients:

Mike Adesso Memorial Award

Institute for Family Health

In recognition of their efforts in creating suicide safer communities by training over 300 of their staff in the Hudson Valley in suicide prevention.

Harry Hall Memorial Award

PEOPLE Inc.

In recognition of more than 20 years of service as a consumer-run mental health organization, and for their leadership in the promotion of mental health wellness and recovery.

May Evans & Lucille Pritchard Endowment Funds Scholarship

Jason Farina

The Scholarship for \$500 is presented to an exceptional college student from the MHA service area who is pursuing a degree in the Mental Health field. Jason is a recent graduate of SUNY Ulster and is currently pursuing a Bachelor's Degree at SUNY New Paltz.

Certificate of Recognition

George Heidcamp

In honor of his recent graduation from SUNY Ulster with an Associate's Degree in Human Services.



*Steve Miccio, Terry Murray, Leslie Miller,
Rhonda Garcia & Sean O'Connor of PEOPLE, Inc.*

Perinatal Mood Disorders

Understanding Maternal Depression

Pregnancy and the birth of a baby, while often positive and welcomed events, bring about hormonal changes in the mother, and have a profound impact on her life. Perinatal Mood Disorders can interfere with the joy of new motherhood, and may impair a mother's ability to bond with her baby. Perinatal Mood Disorders encompass a wide range of mood disorders that can affect a woman during pregnancy and after the birth of her child. Perinatal Mood Disorders include prenatal depression, the "baby blues," postpartum depression, and postpartum psychosis.

It is very important to treat maternal depression. There is evidence that links untreated maternal depression to detrimental effects on children. They are at higher risk for developing serious developmental, behavioral, and emotional problems. When a depressed mother goes untreated, the whole family is affected, and the quicker the mother gets treatment, the better the prognosis for the entire family. The good news is that even the most severe forms respond well to treatment, the earlier the better.

Prenatal Depression

Approximately 10% to 20% of pregnant women experience depression during their pregnancies. Symptoms include crying and weepiness, sleep problems, fatigue, appetite disturbance, loss of enjoyment of activities, anxiety, irritability, and decreased fetal bonding or attachment.

The "Baby Blues"

As many as 80% of new mothers experience a mild depression, colloquially called the "baby blues," within a few hours or days of giving birth. These feelings are common and are linked in part to rapid hormonal changes following birth. The "baby blues" usually go away on their own in just a few weeks. Symptoms include crying jags, feelings of sadness or vulnerability, exhaustion, trouble falling or staying asleep, mood swings, anxiety, irritability, frustration, and insomnia.

Postpartum Depression

Postpartum depression is distinct from the "baby blues." It is a more serious form of depression that affects between 10% to 20% of women, and may appear anytime within the first six months following delivery. Postpartum depression is more severe and longer-lasting than the "baby blues" if left untreated. Symptoms of postpartum depression can include uncontrollable crying, persistent sadness, feelings of inadequacy or guilt, loss of appetite, insomnia, irritability, moodiness, anxiety or panic attacks, difficulty concentrating, and lack of interest in the baby.

Postpartum Psychosis

Approximately 1 or 2 out of a 1000 women experience postpartum psychosis. Symptoms usually appear suddenly within the first 2-3 weeks following birth. Postpartum psychosis is marked by symptoms such as hallucinations,

delusions, severe insomnia, paranoia, confusion, mania, delirium, suicidal or homicidal thoughts, extreme anxiety and agitation, and having obsessive thoughts about or hearing commands to harm the baby or other children. *Postpartum psychosis is a severe, but treatable, emergency and requires immediate medical attention.*

Risk Factors

Any type of stressful life event in the mother's life may signal a risk factor for maternal depression or perinatal mood disorders. Risk factors include prior episodes of postpartum depression, depression during pregnancy, personal or family history of depression, unplanned pregnancy, complications during pregnancy or childbirth, preterm birth, abrupt weaning, poor support from a partner, being a single parent, having a history of severe PMS, experiencing multiple life events, social isolation, history of childhood trauma or abuse, and substance abuse.

Perinatal Mood Disorders are treatable, and the earlier the better. Depending on the individual, a mother experiencing a perinatal disorder may benefit from counseling or psychotherapy, participation in support groups, exercise, changes to her diet or level of physical activity, medication, or some combination of these.

Adapted from Understanding Maternal Depression, NYSHD & NYSOMH & Postpartum Depression, MHANYS.

Latest Research: Nurturing Can Protect Against the Effects of Prenatal Stress

A mother's nurturing during infancy can protect against the developmental risks a fetus faces from prenatal stress caused by the hormone cortisol, a new study finds. Researchers recruited 125 women at an amniocentesis clinic in an urban maternity hospital, taking a sample of their amniotic fluid so that stress hormones in it could be measured. Among children showing an insecure attachment to their mothers, a high prenatal cortisol level was linked with shorter attention spans and weaker language and problem-solving skills. **But with kids who enjoyed secure relationships with their moms, any negative link between high prenatal cortisol exposure and kids' cognitive development was eliminated.**

The researchers say their study represents the first, direct human evidence that fetuses exposed to elevated levels of the stress hormone cortisol may have trouble paying attention or solving problems later on.

(ScienceDaily, 2/26/10, Mental Health America)

FAMILY MENTAL HEALTH & WELLNESS



It is easy for parents to identify their child's physical needs: nutritious food, warm clothes when it's cold, bedtime at a reasonable hour. However, a child's mental and emotional needs may not be as obvious. Good mental health allows children to think clearly, develop socially and learn new skills. Additionally, good friends and encouraging words from adults are all important for helping children develop self confidence, high self-esteem, and a healthy emotional outlook on life. *A child's physical and mental health are both important.*

Basics for a child's good physical health

- Nutritious food
- Adequate shelter and sleep
- Exercise
- Immunizations
- Healthy living environment

Basics for a child's good mental health

- Unconditional love from family
- Self-confidence and high self-esteem
- The opportunity to play with other children
- Encouraging teachers and supportive caretakers
- Safe and secure surroundings
- Appropriate guidance and discipline

Give Children Unconditional Love

Love, security and acceptance should be at the heart of family life. Children need to know that your love does not depend on his or her accomplishments. Mistakes and/or defeats should be expected and accepted. Confidence grows in a home that is full of unconditional love and affection. *Nurture children's confidence and self-esteem.*

Praise Them - Encouraging children's first steps or their ability to learn a new game helps them develop a desire to explore and learn about their surroundings. Allow children to explore and play in a safe area where they cannot get hurt. Assure them by smiling and talking to them often. Be an active participant in their activities. Your attention helps build their self-confidence and self-esteem.

Set Realistic Goals - Young children need realistic goals that match their ambitions with their abilities. With your help, older children can choose activities that test their abilities and increase their self-confidence.

Be Honest - Do not hide your failures from your children. It is important for them to know that we all make mistakes. It can be very reassuring to know that adults are not perfect.

Avoid Sarcastic Remarks - If a child loses a game or fails a test, find out how he or she feels about the situation. Children may get discouraged and need a pep talk. Later, when they are ready, talk and offer assurance.

Encourage children - To not only strive to do their best, but also to enjoy the process. Trying new activities teaches children about teamwork, self-esteem and new skills.

Make Time For Play

To children, play is just fun. However, playtime is as important to their development as food and good care. Playtime helps children be creative, learn problem-solving skills and learn self-control. Good, hardy play, which includes running and yelling, is not only fun, but helps children to be physically and mentally healthy. *Encourage children to play.*

Children Need Playmates - Sometimes it is important for children to have time with their peers. By playing with others, children discover their strengths and weaknesses, develop a sense of belonging, and learn how to get along with others. Consider finding a good children's program through neighbors, local community centers, schools, or your local park and recreation department.

Parents Can be Great Playmates - Join the fun! Playing Monopoly or coloring with a child gives you a great opportunity to share ideas and spend time together in a relaxed setting. Play for Fun! Winning is not as important as being involved and enjoying the activity. One of the most important questions to ask children is "Did you have fun?" not "Did you win?" In our goal-oriented society, we often acknowledge only success and winning. This attitude can be discouraging and frustrating to children who are learning and experimenting with new activities. It's more important for children to participate and enjoy themselves. **TV Use Should Be Monitored**- Try not to use TV as a "baby-sitter" on a regular basis. Be selective in choosing television shows for children. Some shows can be educational as well as entertaining.

School should be fun - Starting school is a big event for children. "Playing school" can be a positive way to give them a glimpse of school life. Enrolling them in a pre-school, Head Start, or similar community program provides an opportunity to be with other kids and make new friends. Children can also learn academic basics as well as how to make decisions and cope with problems.

Provide Appropriate Guidance & Instructive Discipline

Children need the opportunity to explore and develop new skills and independence. At the same time, children need to learn that certain behaviors are unacceptable and that they are responsible for the consequences of their actions. As members of a family, children need to learn the rules of the family unit. Offer guidance and discipline that is fair and consistent. *They will take these social skills and rules of conduct to school and eventually to the workplace.*

- 1 Be firm, but kind and realistic with your expectations. Children's development depends on your love and encouragement.
- 2 Set a good example. You cannot expect self-control and self-discipline from a child if you do not practice this behavior.
- 3 Criticize the behavior, not the child. It is best to say, "That was a bad thing you did," rather than "You are a bad boy or girl."
- 4 Avoid nagging, threats and bribery. Children will learn to ignore nagging, and threats and bribes are seldom effective.
- 5 Tell children the reasons why you are disciplining them and about the potential consequences of their actions.
- 6 Talk about your feelings. We all lose our temper from time to time. If you do "blow your top," it is important to talk about what happened and why you are angry.
- 7 Apologize if you were wrong. Remember, the goal is not to control the child, but for him or her to learn self-control.

Provide A Safe & Secure Home

It's okay for children to feel afraid sometimes. Everyone is afraid of something at some point in their life. Fear and anxiety grow out of experiences that we do not understand. If your children have fears that will not go away and affect his or her behavior, the first step is to find out what is frightening them. Be loving, patient and reassuring, not critical. *Remember: the fear may be very real to the child.*

Nervous mannerisms, shyness, withdrawal and aggressive behavior may be signs of childhood fears. A change in normal eating and sleeping patterns may also signal an unhealthy fear. Children who "play sick" or feel anxious regularly may have some problems that need attention. Fear of school can occur following a stressful event such as moving to a new neighborhood, changing schools, or after a bad incident at school.

From Factsheet: What Every Child Needs For Good Mental Health, Mental Health America

When You Have Questions Sharing Concerns & Seeking Help

Parents and family members are usually the first to notice if a child has problems with emotions or behavior. Your observations, along with those of teachers and other caregivers, may lead you to seek help for your child. The following signs may indicate the need for professional assistance or evaluation:

- Decline in school performance
- Poor grades despite strong efforts
 - Regular worry or anxiety
- Repeated refusal to go to school or take part in typical childhood activities
 - Hyperactivity or fidgeting
 - Persistent nightmares
- Persistent disobedience or aggression
 - Frequent temper tantrums
- Depression, sadness or irritability

If you suspect a problem or have questions, consult your pediatrician or contact a mental health professional.

Information or referrals regarding the types of services that are available for children may be obtained from: mental health organizations, hotlines and libraries, other professionals such as the child's pediatrician or school counselor, other families in the community, family network organizations, community-based psychiatric care, crisis outreach teams, education or special education services, family resource centers, health services, advocacy groups and organizations, self-help groups and support groups.

