



Newsletter of the
Mental Health
Association in
Michigan
(MHAM)

The Advocate

MHAM's Statement on Racism & Equality

The Mental Health Association in Michigan considers racism to be detrimental to the individual, collective mental health, and well-being of persons of color. MHAM understands that racism undermines mental health. MHAM is committed to anti-racism in all that we do. The time is now for those systems that are inhabited by racism and discrimination to be reformed and MHAM is committed to working toward that end.

Mental Health Matters Everyday

"Give yourself the same care that you give to others and watch yourself bloom."

The Sprouting
Sunflower



April 2021 **This issue**

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What is Trauma Informed Yoga?

In 1999, traumatologist Dr. Bessel Van Der Kolk, MD, was investigating ways to address the potentially damaging health effects of having weak Heart Rate Variability ("HRV" – the regularity or irregularity of the time-interval between heartbeats – which had been found to be indicative of the body's ability to manage stress). He had discovered that not only his trauma-survivor patients, but also he, had "un-robust" HRVs, and thus a reduced ability to manage stressful situations which was deleterious to their long-range health. Van Der Kolk suspected that Yoga might be a possible body-oriented practice that might increase the "robustness" of one's HRV, but he couldn't find any solid studies that showed Yoga's effectiveness as a stress management tool. At the very same time, Van Der Kolk was approached by David Emerson, a neighborhood Yoga teacher who had been teaching Yoga to Veterans. Emerson was interested in doing a study on the stress management benefits of Yoga for trauma survivors, and he proposed that they develop a research project at Van Der Kolk's

Trauma Center, working with patients there. The peer-reviewed research they did developed a framework and rationale for offering Trauma-informed Yoga to survivors of extreme trauma.

For the most part, the Yoga practiced in the West is understood to involve the practice of mindfully moving through or situating oneself into a variety of forms, or poses, called, in Sanskrit, "Asana." The practice of moving oneself into Asanas is called Hatha Yoga. Hatha Yoga, however, is only one of the 8 Limbs, or aspects, of traditional Yoga practice. The limbs are:

- The **Yamas** is the foundational study of ethical and behavioral considerations: non-violence, truthfulness, developing a sense of sufficiency, self-restraint, and non-covetousness.
- The **Niyamas** are ethical considerations that have to do with lifestyle, self-care and spiritual practice: cleanliness, contentment, focus and perseverance, self-study, and acceptance.

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- The practice of moving oneself into **Asanas** is called Hatha Yoga - the practice of mindfully moving through or situating oneself into a variety of forms, or poses.
- The 4th Limb is **Pranayama** – the development of an awareness and management of, of one’s life-force, the breath and energy in the body.
- Pratyahara** means withdrawal of the senses from the outside world.
- Dharana** refers to concentration.
- Dhyana** is the practice of meditation.
- Samadhi** is ecstasy, bliss, and the ideal tend result of ongoing practice: the attainment of ultimate peace.

Trauma could be defined as this: Psychological trauma is the damage caused by an event or series of events that are so overwhelming the individual doesn’t have the emotional resources to manage them. Trauma is not the event itself, say a rape or a car accident or a battle in war, but injury caused to the person’s psyche by the event. The extent of the injury/trauma evidences itself by the body-mind’s subsequent adaptive or self-protective, behavior and/or physiological responses, from simple irritability, to rage, to depression, to anxiety, hyper- vigilance, freezing, withdrawal, numbing, and a sense of disempowerment, depersonalization, and dissociation.

Trauma Informed Yoga is formulated to work at that non-verbal level by giving the survivor an intentional opportunity to choose to explore (and even affirm)- through the methodical practice of Asana, Pranayama and Pratyahara - sensation, movement, resistance, their own sense of feeling safe or unsafe, their own sense of volition – all of which they might avoid due to the discomfort those things create for them - and allowing them to gradually experience sensations directly as they are occurring, and eventually to choose to connect with, and ground themselves again within their body-minds. This is the goal of Trauma-Informed Yoga. It takes time, consistency, support, and ongoing practice.

Trauma-informed Yoga teachers are trained to:

- Create an environment of safety, trustworthiness and transparency
- Create classroom values for collaboration and mutuality
- Support and encourage empowerment, voice and choice
- Be versed in and recognize cultural, historical, and gender issues

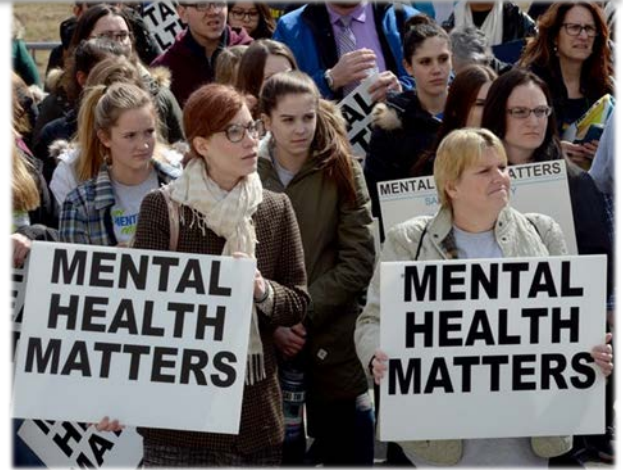
These conditions should be established in a Yoga Classroom, whether they are working with a population of “walk-ins” in a public Yoga class, or working in a mental health setting alongside a mental health professional.

Beyond this, once safe conditions are established in the classroom, the student is free to begin to develop an awareness of their physical being, *Continued on page 4*

Eligibility for COVID Vaccine Expands Across State

On March 8th, the eligibility for COVID-19 vaccines was expanded to individuals 50 and above with who have an underlying medical condition. The expansion also included parents or guardians who care for children with special health care needs. MHAM has been active in advocating to prioritize individuals with mental health conditions for eligibility for a vaccine. This expansion goes a long way to accomplishing that goal for these families.

Beginning April 5th, anyone 16 or over will be eligible to receive the vaccine.



Governor's Executive Budget Recommendation

In February, Governor Whitmer presented her budget recommendation for FY 2021-2022 to a joint committee of the legislative appropriations committees. There were a number of items proposed by the Governor that will impact mental health services if enacted. These items include:

- \$90 million increase for children's' mental health services. This increase is a result of a large legal settlement from a class action lawsuit that claimed the state failed to fulfill its legal obligation under Medicaid program to provide intensive home and community based mental health services to children and young adults.
- \$29.1 million for the first year of the phase-in costs for placing 17-year-old offenders in juvenile facilities rather than adult facilities per the Raise the Age legislation.
- \$26.4 million for Certified Community Behavioral Health Clinic Demonstration (CCBHC) Implementation. This will be a 2-year demonstration project to establish 14 Certified Community Behavioral Health Clinic sites across the state to provide integrated behavioral and physical health care services to adults and children with mental health issues.

Boilerplate changes included in the Governor's recommendation include:

- Expanding the reporting data required by CMHSPs (Sec.

8-904)

- Reallocation of withdrawal of CMHSP Funding, New section, and language (Sec. 8-940)

Further, Sec. 8-1875 was maintained in the Governor's recommendation. This language prohibits the department from subjecting drugs that are carved-out or not subject to prior authorization procedures as of January 22, 2020 and are recognized for the treatment of a psychiatric, HIV or AIDS, epilepsy, or seizure disorder, or organ replacement therapy.

House and Senate Passes Controversial Budget Supplemental

The Senate and House agreed this week on a plan to spend \$2.3 billion to support businesses and help cover their costs incurred over the last year, including a property tax relief program. Additionally, the bill that now moves to Gov. Gretchen Whitmer supports an increase to direct care worker hazard pay, vaccine distribution and continued COVID testing funds. In fact, the direct care worker hazard pay adjustment would increase from the current \$2 per hour to \$2.25 per hour beginning March 1 and running through Sept. 30, 2021.

Further, the legislature Another \$347.3 million for epidemiology and laboratory capacity contingent funds cannot be spent or distributed unless the governor also signs Senate Bill 1, which limits the effectiveness of an emergency public health order issued by the director of

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the Department of Health and Human Services (DHHS) to 28 days, unless the Legislature approves an extension.

The Legislature approved spending of \$2 billion of federal education money under House Bill 4048. However, \$800 million of that amount is tied to House Bill 4049, which stipulates only local health departments could close schools for in-person instruction or halt school sports based on specific criteria in the bill. The bill passed without support from the state or local health departments. It is unclear what the governor's options are with the language in the legislation that ties funding to limits on the state's pandemic powers. Gov. Whitmer has also been clear that she wants the full \$5 billion of federal money from 2020 allocated, a result that is not reflected in the bills heading to her desk.

MHAM is monitoring the state budget process and will provide regular updates.

The Power of the Consumer Voice

The idea that individuals with behavioral health conditions might know what they need to heal is one that has been evolving over many years. The disability rights movement, which began in the early 1970's commencing with the creation of centers for independent living (CILS), has promoted the importance of a person-centered approach to behavioral health treatment and supports. Over forty years later, the movement toward listening to the person served is gaining momentum. Fortunately, mental health and physical health care providers are adopting a philosophy that values the "voice of the consumer" in his/her care and treatment. Taking the time to listen to patients is a practice that medical care providers are finding to be valuable. The benefits of listening is discussed in an ebook called, "The Power of the Patient Voice: How Health Care Providers Empower Patients and Improve Care Delivery", that was released this month by the NEJM Catalyst. The NEJM Catalyst is a group of health care providers who are focused on innovations in health care. You can find the booklet at:

<https://catalyst.nejm.org/toc/catalyst/current>.

The Mental Health Association in Michigan supports the voice of the persons served by all providers of mental health and substance abuse treatment, private or public. The persons served include adults, children, youth and their families and supporters.

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of their breathing patterns, and of the reactions - aversions to a particular pose or breathing practice, or perhaps a sense of comfort.

Ideally the student, with time and practice, will develop a sense of embodiment and groundedness that was not available to them before they began exploring movement, sensation, breath, and interoceptive awareness in the safe environment of the Trauma Informed Yoga classroom. Change happens little by little, over time, and should be looked at not as a magic cure all. The goal of Trauma Informed Yoga is NOT that the student has an instantaneous cathartic release (in fact it is just the opposite!). It is NOT a substitute for traditional talk therapy - Trauma Informed Yoga is beneficial because it is experiential rather than talked through cognitively. It can be looked at as more of a workshop in exploration of the non-verbal aspects of being for the trauma survivor: the body-mind's aversions, preferences, movements, sensations, inner awareness. The student can learn to recognize and work with their own nervous system's inclination to be reactive or triggered in a physical sense, they can develop more of a sense of personal volition, can learn to manage reactivity, and, eventually, can learn to live lives that are more physically grounded, balanced and whole.

Marianna Maver is a State of Michigan Licensed Massage Therapist specializing in massage for stress management and stress related pain. She is also a Trauma-Informed Yoga Teacher, and an Overcome Anxiety facilitator. She is a graduate of Hope College in Holland, Michigan and earned her Master's of Art in Teaching Degree in Elementary Education from National-Louis University in Chicago, Illinois.



Letter from the President & CEO

Marianne Huff

It is difficult to believe that one year ago this month, March of 2020, the state of Michigan and other states across the country were implementing mass quarantines due to the evolving pandemic that occurred due to the proliferation of the novel coronavirus, COVID-19. COVID-19 officially arrived in our state on March 10, 2020 with the confirmation of the first case of the virus. As of March 20, 2021, 624,811 cases have been confirmed, causing 15,897 confirmed deaths according to the Michigan Department of Health and Human Services. The state has also announced that the vaccine will be available to all adults age 16 years of age and older beginning March 22, 2021. MHAM, along with multiple statewide advocacy organizations representing persons with disabilities, advocated a

Even though we are gaining ground on the virus with the invention of a vaccine, the long-term mental health effects that the virus has had upon Michigan citizens remains to be determined. During the pandemic, it was noted that the state-wide quarantine increased isolation. An increase in the rates of substance abuse and use, insomnia, and physical health concerns contributed to the negative mental health impact of COVID-19 according to an article that was published in the December 2020 edition of the National Institute of Health Pub. Med. entitled, "Preparing for the Behavioral Health Impact of COVID-19 in Michigan". According to the article:

As summarized in Table Table11 [1], the ramifications of COVID-19 on mental health are extensive and have the potential to impact large proportions of the Michigan population. An April survey of 24,155 Michigan residents found 79% of respondents reported concern about stress, loneliness, anxiety, and/or depression, with 29% indicating that they were "very" or "extremely" concerned about these mental health symptoms [70]. These concerns may be well-founded, as 32% of Michigan adults endorsed symptoms of an anxiety or depressive disorder in a June 2020 study [71]. Though widespread, these mental health impacts may be particularly negative for specific groups and likely deadly for many due to exacerbations of suicide risk factors. Available Online: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7721546/>.

MHAM's goal is to ensure that there is equal access to quality mental health care and treatment for all Michiganders who struggle with mental health conditions. We do this by continuing to bring the needs of those who struggle with mental health conditions to the forefront of the consciousness of policy makers, legislators, and the public. We invite you to participate in our work with us.

Thank you for your ongoing support. Remember: Mental Health Matters Every Day.

Sincerely,

Marianne Huff, LMSW

Educational Webinars

MHAM is working to provide more public education about matters related to behavioral health care.

On April 13, MHAM will host a webinar about how yoga is being used to help individuals cope with Post-Traumatic Stress Disorder (PTSD), trauma and other forms of stress. On May 18, MHAM will host a webinar talking about how improvisation comedy can help with anxiety and depression.

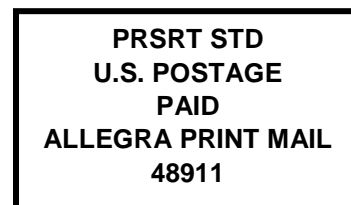
On April 26, MHAM will have a virtual community conversation about the criminal justice system and mental health with panelists such as Keith Barber, the Corrections Ombudsman and Pat Streeter, attorney, and member of NAMI—Washtenaw County. Please watch your email for announcements about our virtual events.

Visit our website www.MHA-MI.com for more information.



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In case you are not familiar with The **Mental Health Association in Michigan (MHAM)** or you have not heard about our history, we wanted to make certain that we let you know who we are and why we exist. We exist because of individuals with mental health conditions. We know that Mental Health Matters Every Day.

MHAM is an organization representing a broad base of people working together to advocate with and on behalf of individuals with mental illness. MHAM incorporated as a non-profit entity under Michigan statutes in 1936 and holds 501(c)3 tax-exempt non-profit status with the Internal Revenue Service. MHAM maintains a non-partisan posture in its social action and public efforts. MHAM is affiliated with the Virginia-based Mental Health America (formerly known as the National Mental Health Association).

MHAM is the state's oldest non-profit organization and the only statewide, non-governmental agency concerned with the broad spectrum of mental illness across all age groups. The Association's mission is to improve care and treatment of mental illness; promote positive mental health; and prevent the onset of mental disorders. We do this through policy analysis and advocacy with government, primarily at the state government level in Lansing.

MHAM works by gathering and interpreting information about mental health problems and conditions to the public and individuals who shape public policy in Michigan.

MHAM works by evaluating a variety of public and private mental health services; making recommendations for improvements in these programs; and stimulating demonstration projects to link individuals to needed services.

MHAM works by making available to the public, as well as providers and recipients of mental health services, educational literature covering all aspects of mental health and mental illness.