ONE-CENT TAX PLAN MAKES A LOT OF SENSE

From the CEO
Scott Burgess

A vivid picture stands out in my mind that illustrates vital needs in our community. It’s a simple image—four Collier County Sheriff squad cars lined up outside of our Emergency Services Center. So, what’s wrong with this picture? A lot.

The squad cars are backed up because there are people in the back seats in desperate need, with mental health and/or drug addiction emergencies. They’re waiting because our intake rooms are full. They are literally taking a back seat to the services they need right now.

It’s a picture of the rapidly growing mental health needs in our community, and of our limited capacity to meet those needs. Also, that’s four squad cars that should be on patrol, not waiting indefinitely to leave their troubled passengers in our capable hands.

That’s why I’m urging everyone in Collier County to vote YES for the one-cent sales tax in November. The tax would last seven years or until $490 million is raised, whichever comes first. The funding will address critical needs in our community, including roads and bridges, a technical training center at Florida SouthWestern State College, and a new forensic and evidence building for the Sheriff’s Office.

And for David Lawrence Center, $25 million would go toward a new 55,000-square-foot expansion to greatly increase our evaluation and treatment capacity. This is desperately needed. According to the state’s formula, a county our size should minimally have 100 crisis beds, and we currently have 30.

Our community has roughly doubled in size during the last 20 years, and is expected to double again over the next 20. With such growth comes a rapid rise in the number of people with mental health and substance use issues. DLC is falling behind that pace, and we must catch up.

I cannot stress enough what a great opportunity this is for us—not just for DLC, but for our community on many fronts.

It’s vital to invest in addressing these critical community safety, health and wellness needs. And the investment is just one penny at a time—approximately 30 percent of which will be paid for by those visiting our community.

To learn more, check out OneCollier.com. And please come by our facility to see the plans for our new building. Either I or one of our staff members will gladly fill you in.

Thank you!
DAVID LAWRENCE CENTER
BOARD OF DIRECTORS
2018 - 2019

Scott Burgess
President / CEO

William O’Neill, Esq.
Chairman

Earle K. Borman Jr.
Ed Boyer
Reisha Brown, MD
Russell Budd
Rob Edwards
Polly Keller*
Robert P. Magrann
Mary Morton, CPA
Sheriff Kevin Rambosk
Michael V. Reagen, Ph.D.
Stephen J. Spahr
Pablo X. Veintimilla
Jeffrey Yun

*Honorary Board Member

MISSION
Restoring and rebuilding lives by providing compassionate, advanced, and exceptional mental health, substance abuse, and integrated healthcare solutions, available to all.

VISION
To lead the way in transformational care so every individual assisted can achieve what is possible.

When Mary’s father passed away, she was hit hard by grief and depression. She wasn’t getting much sleep, and as a result, she’d been late or absent from work multiple times, and she’s falling behind on deadlines. Now she fears she might get fired.

When Justin found out his wife was having an affair, he was overwhelmed with anger and moved out. He won’t discuss it with anyone, and his rage is getting the best of him—even at the office. His work is suffering, but he doesn’t know where to turn.

When Bill’s son dropped out of school, Bill and his wife didn’t know what to do about it. Worried that their son was doing drugs, they had no idea what they were going to do next. Racked with worry, Bill bombed on a major project at work, and his boss is upset.

Mary, Justin, and Bill are each valuable employees at their places of work, but they’re all falling behind with these personal challenges. They are all good candidates for David Lawrence Center’s Employee Assistance Program (DLC-EAP).

A number of local businesses have contracted with David Lawrence Center to provide counseling and other assistance to employees in need. The DLC-EAP program provides a confidential resource for resolving personal, family, and work-related concerns before they may become full-blown crises. And the struggles don’t have to be job-related; the program will help an employee with relationship issues, addictions, depression, anxiety, stress, parenting, grief, transition to retirement, and much more.

Companies consider employees their most valuable asset, and it’s in everyone’s best interest if those employees are in good health—physically, mentally, and emotionally. That’s why many companies provide not only health insurance benefits, but an EAP plan too.

How does it work? An employee struggling with an issue can make a confidential call to the DLC-EAP department, where a compassionate counselor will:

- Work with you to understand and clarify your needs
- Refer you to qualified professionals and helpful resources
- Follow up to see if you have received the help you needed

DLC-EAP services are free to employees and their immediate families, as part of a comprehensive benefits package provided by their employers.

To learn more, visit www.dlceap.org.

David Lawrence Center is a not-for-profit, 501(c)(3) organization and is accredited by the Joint Commission on Accreditation of Healthcare Organizations. The Center is funded in part by the State of Florida Department of Children and Families (DCF), the Department of Housing and Urban Development (HUD), Collier County Department of Housing, Human and Veteran Services, and private donations made through fundraising efforts.
SUCCESS STORY

Living Recklessly
I was high for half of my life . . . until a cold-turkey detox in jail convinced me to turn things around. But I couldn’t have done it without DLC.

By Aaron

How many times can a person hit rock bottom before they finally realize they’ve got to do something about it?

For me, I’ve almost lost count. I’ve overdosed five times. I’ve been in detox nine times, including about five times this year. I’ve been in and out of halfway houses and rehab centers and the courts. I’ve tried everything from alcohol to opiates to heroin.

I’ve basically been high for half my life. I started when I was 13, when my parents, who had both been sober for decades, both relapsed into drugs and alcohol. Things got crazy, and before long, I was doing drugs with my parents.

I kept it up through my teen years—I barely finished high school due to multiple suspensions and expulsions—and into my early twenties. I was living recklessly for years, on a constantly downward spiral. I’m 25 now.

Back in January, I started googling ways to kill myself that would be painless. I bought some heroin off the streets that I knew had fentanyl in it. I knew that combination could kill me, and I just didn’t care.

Drug charges landed me in jail, where I had to detox cold turkey. It was brutal, but honestly, I think it was a blessing from God. Because that was the “rock bottom” I needed to finally turn things around.

I knew DLC could help

I had been to David Lawrence Center a number of times, but never wanted to do the hard work of recovery. It was a pattern of recovery-relapse-recovery-relapse for years.

But something dramatic had happened while I was in jail: I finally realized how I was completely ruining my life. So I decided to take rehab seriously this time, and I knew DLC could help.

At DLC, I started a 12-step program and got the therapy I needed. They put me on naltrexone (brand name Vivitrol®) to help me beat my drug addiction. It was given as a shot that lasts about a month. The chemical helps by stopping the euphoria and sedation you get from alcohol and opioids.

It’s almost like a miracle drug. Before I was on it, I could never stay sober for more than a few days. Now I’ve been clean for six months.

Bottom line: David Lawrence Center has literally saved my life, and this time, I’m pretty sure I’ve turned the corner for good.

“Bottom line: David Lawrence Center has literally saved my life, and this time, I’m pretty sure I’ve turned the corner for good.”

– AARON

I still need to finish the 12-step program. I want to go back to school and become a certified addiction counselor and help people who are going through what I’ve been through. I want to be involved in the recovery community, and hopefully intervene with people at a young age so they don’t waste so much of their lives.

I wouldn’t be here without David Lawrence Center. They’ve helped me get back on my feet, and steered me in the right direction. I’m now the happiest I’ve ever been.

Supporters like you make success stories like Aaron’s possible. Thank you for your support!

AWARDS

Annual Recovery Month Awards Ceremony

David Lawrence Center’s annual Recovery Month Awards Ceremony was a wonderful opportunity to celebrate individuals who have recovered from mental and substance use disorders, as well as recognize outstanding individuals and organizations in the community for advocating and helping others in need of recovery services.

THANK YOU TO OUR PRESENTING SPONSOR BLUE ZONES PROJECT – SOUTHWEST FLORIDA, AND TO OUR MEDIA SPONSOR HELLO SWFL. THANK YOU ALSO TO ALL OF OUR COMMUNITY PARTNERS WHO PARTICIPATED AT THE EVENT, AND TO THERESE O’SHEA, ANCHOR AT WINK-TV, FOR EMCEEING THE EVENING.

ALLEN WEISS, MD, HONORED AS A PREVENTION AND TREATMENT PARTNER; CAPTAIN BETH JONES, HONORED AS A PREVENTION AND INTERVENTION PARTNER; ROBERT CROWE, HONORED AS A RECOVERY COMMUNITY VOLUNTEER; LAURIE LYONS, HONORED AS A HOLISTIC TREATMENT VOLUNTEER; AND NANCY SCHEFFER (NOT PICTURED), HONORED WITH A SPECIAL LIFETIME RECOGNITION AWARD.
ISSUES & ANSWERS
DLC’s Experts Respond to Your Questions

Q. What about cell phones for children, even young ones, as a way to communicate in case of an emergency?
A. As there can be negative aspects of screen time, there are also positive things that can come out of having immediate access to a phone. Using a cell phone for an emergency is considered use on an as-needed basis—with emphasis on the word “need.” It’s all about balance: How much time is devoted to that screen compared to other activities that also stimulate the brain and help develop other skills? For example, you wouldn’t give your child free access to your bank account to use it as often as they desire, but you might limit them to $5 a day to buy snacks or lunch. There are apps and other technologies that can help parents and youth monitor, organize, and limit their screen time for non-emergency uses like social networking and games.

— Molly Modzelewski, Licensed Mental Health Therapist

Q. Even for adults, what are some techniques to break our device addiction? I check my phone too often, and it distracts me from what needs to be done.
A. It is important to consciously fight that initial urge, because once you allow yourself to get distracted, it can be hard to “peel” yourself off to focus on other priorities. Recognize the initial urge when it arises and resist it. Still, you might justify to yourself why you should check it—we can be very self-convincing—and know that this is the precise moment you need to stop and redirect yourself for as long as you can. Another thing to consider is perhaps it has become too easy for us to check our phones during times when there are other priorities—such as meals, at work, and in live social settings. Be willing to put the phone aside, silence it, or even turn it off during those times. Typically, if it’s out of sight, then it’s out of mind.

— Angela Lopez, LCSW, Outpatient Services Clinical Supervisor

Q. Is there a correlation between technology and childhood obesity?
A. Compulsive video gaming can have negative effects on a developing mind or body. Health risks and concerns include:

- **Sedentary lifestyle:** Long periods of sitting in front of a device can take a toll. The lack of physical exercise involved in gaming may lead to weight gain or weight loss, poor posture, and an increased risk of type 2 diabetes.
- **Lack of social engagement:** Video games don’t prepare children for socializing and interacting face-to-face with peers. Learning to interact with others in real-world settings is a vital life skill.
- **Attention/concentration problems:** The rapid movements and fast action of video games may promote loss of concentration and decreased interest in activities that require more focused and prolonged attention.
- **Avoidance of developmental tasks:** Teens must learn how to confront painful emotions and awkward social experiences. Role-playing video games can help children learn traits that may help with social interactions with others. But when gaming is used as an escape, it stunts the process of growing up.
- **Increased aggression or violence:** Children who play a lot of games focused on combat, fighting, or violence may display signs of aggression. Parents must be aware of the content of video games, which are subject to a rating system similar to one applied in movies.

— Karen Buckner, LCSW, Director of Children’s Community Services

#STANDUP FIREFIGHTERS

Thank you to the Lehigh Acres Fire Control & Rescue District for passing out DLC #STANDUP wristbands to children who attended the back-to-school fundraiser at Mugs ‘N’ Jugs in Lehigh Acres. We appreciate your support in encouraging more people to #STANDUP to address the importance of children’s mental health! For more information about DLC’s #STANDUP campaign—and to request your own free wristband—visit www.standupdlc.org.
Help for Troubled Students

Sen. Kathleen Passidomo is “Legislative Leader of the Year” after passing a bill to provide every child in Florida schools with access to mental health services.

When State Senator Kathleen Passidomo was asked to chair a committee on education spending in Florida, she rounded up teachers and superintendents from around the state and asked one simple question: What is your greatest need?

She was expecting some of the usual answers—salary increases, a new football stadium, building improvements, updated classrooms, etc. But those weren’t the responses she heard.

“Without exception,” says Passidomo, “every single one of them said, ‘We have a mental health crisis in our schools, and we need help.’ We need funding for mental health.”

Passidomo and her team convinced the legislature to pass a bill for $79 million—about half of what was needed, but a very promising start—to dramatically improve the mental health system in Florida’s pre-K–12 public schools. As a result, Passidomo was recently named the 2018 Florida Behavioral Health Care Legislative Leader of the Year, awarded by the Florida Council for Community Mental Health (FCCMH).

Scott Burgess, President and CEO of David Lawrence Center who also serves on the FCCMH Board, presented Passidomo with the award at an August conference in Orlando.

“Senator Passidomo is such an incredibly appreciated champion across the state and most certainly by DLC and me,” says Burgess. “We are honored to partner with her in bringing more much-needed care to children, families and adults across our state.”

A grateful Passidomo said, “It’s an award that my appropriations committee should be receiving, frankly. I’m glad to know the hard work they did is recognized.”

The award, which hangs in Passidomo’s Naples office, includes a hand-drawn image of a heart by a teenage girl who received services at DLC. Passidomo says an inscription on the award describes that the heart represents how she has “a new lease on life, a new heart.”

The recognition comes for legislation that may not have passed were it not for unforeseen—and tragic—circumstances. The bill wasn’t getting much traction, and Passidomo was presenting her final bill, with all of its parameters, on the floor early in the afternoon of February 14. The bill seemed like it had stalled when suddenly, the room started buzzing—legislators anxiously looking at their phones, talking amongst themselves, some of them even leaving in a hurry.

There had been a mass shooting at Marjorie Marjory Stoneman Douglas High School across the state in Parkland. Seventeen students and staff members were killed, and another 17 injured. The shooter, Nikolas Cruz, had a history of mental illness and strange behavior.

The bill—Senate Bill 7026, Mental Health Assistance Allocation—quickly passed. Shortly thereafter, Governor Rick Scott stated he expected that each student in Florida has access to a mental health professional at school by the 2018-19 school year.

Passidomo, a Republican who represents the 28th district (which includes Naples and Collier County), says the bill helps to create “a statewide coordinated program for mental health. [School districts] need to create a plan and adhere to certain parameters, including partnering with a local mental health facility.”

She notes that DLC was already setting an excellent example by partnering with local schools, law enforcement, government, and other community organizations to address mental health.

“David Lawrence Center is a terrific community resource,” she says. “I’m proud to have them here. The entire community benefits from their presence. They’re shining stars.”

5TH ANNUAL CHIP IN FOR DLC GOLF TOURNAMENT
OCTOBER 26, 2018
11:30 A.M. TO 7 P.M.

DLC YOUNG EXECUTIVES ELEVATE – WELLNESS SERIES FITNESS BOOTCAMP
DECEMBER 8, 2018
8 TO 10:30 A.M.

6TH ANNUAL DLC SOUND MINDS™ MENTAL HEALTH SYMPOSIUM
MARCH 23, 2019
10 A.M. TO 12 P.M.
STAFF PROFILE

Defending the Defenseless
Mariana Perez has always looked out for the little guy ... and still does so, serving a community in great need at DLC’s Immokalee office.

Mariana Perez used to get into fights as a little girl growing up in Colombia ... not because she was a troublemaker, but because she was looking out for those in need.

“Since I was very young, I always felt the need to be with people who were bullied,” she says. “I was always defending them. I used to get in fights for them, because I thought it was unfair. It’s just something that’s always been with me.”

And it still is. Today, Perez defends the relatively defenseless as Clinical Coordinator at David Lawrence Center’s Immokalee office. She’s serving a community of mostly immigrants—many of them undocumented—who often feel lost and alone in American culture while facing extreme poverty, language barriers, and the day-to-day demands of life. Many struggle with alcohol problems.

For her selfless efforts, Perez was recently named a Distinguished Healthcare Diversity Advocate by the National Diversity Council.

“‘Our community is mostly farmers from Central America and Haitians,’ she says. ‘Many are undocumented. They have little to no education. They’re very poor. They’re hungry; they get a lot of their food from food pantries. They live in old, broken-down trailer homes, often several families in the same home. Their lives are hard.’

And Perez dives right into the middle of it with joy day after day, making the commute from Naples—one of the most affluent communities in America—into the heart of crushing poverty and living conditions. She’s still defending those who are beaten down.

The bilingual Perez, who was also DLC’s 2016 Employee of the Year, makes an effort to learn about the cultural backgrounds and unique needs of those she serves.

“The recognition goes to those “who have made a difference in the diversity and inclusion realm through their research or achievements, and exemplify the ability to excel in the healthcare field.”

Perez has been with DLC for eight years, including the last seven in Immokalee. She loves the people she serves, a demographic that faces a constant uphill battle. Many of them are “bullied” by the hurdles they face on an ongoing basis.

“When you work with a multicultural approach, you have to be able to understand the client. It’s not about my way of seeing them. It’s how they see themselves.”

– MARIANA PEREZ

The recognition goes to those “who have made a difference in the diversity and inclusion realm through their research or achievements, and exemplify the ability to excel in the healthcare field.”

Perez has been with DLC for eight years, including the last seven in Immokalee. She loves the people she serves, a demographic that faces a constant uphill battle. Many of them are “bullied” by the hurdles they face on an ongoing basis.

“Everybody thinks that because we all speak Spanish, we’re essentially the same culture, and that we all see everything the same,” she says. “But that’s not true. There are big differences from culture to culture. Somebody from Cuba might say ‘I feel nervous,’ but what they call ‘nervous’ we call anxiety.

“You have to learn what different words and phrases mean in different cultures. You have to learn to read between the lines. You have to learn to ask good questions so you can better understand them. You learn to identify with them.”

It’s her heart’s mission—she says it’s her calling—to put herself in their shoes.

“When you work with a multicultural approach,” she says, “you have to be able to understand the client. It’s not about my way of seeing them. It’s how they see themselves.”