



"Family Solutions"

SPECIAL POINTS OF INTEREST:

- Over 742,000 Ohioans are addicted to alcohol.
- 285,000 are between ages 12 and 25. The remaining 457,000 are over 26 years old.
- There are nearly 2.3 million binge alcohol users a month in Ohio.
- 1.6 million of these are over 26 years old.
- Tobacco companies spend over \$2 million/day advertising in Ohio

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YHRC TIMES

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Intervention Considerations

By Mandy Parkinson

I spent a week with an old friend last year, and was alarmed at her level of alcohol consumption. She drinks from the time she wakes up until she goes to bed at night. Daily. She never appeared to be "drunk." She is self-employed, and she drove to, and showed up on time for, her appointments, carrying her wine along in a cola bottle or lidded mug. Nothing non-alcoholic passed her lips, except for an occasional cup of coffee, which, I suspect, was spiked. She refers to herself as "a functioning alcoholic."

I have known her since adolescence, and years ago wondered how she could drink so much more than other people. Now, I know.

It's called tolerance, which is the biological process that requires increased amounts of a substance to get the desired effect.



Concerned about a friend or loved one?

Back home, a mutual friend and I shared concerns about our dear friend's health and discussed what to do. We thought about setting up an

"Intervention," but concluded that since she feels she is functioning well enough (although she isn't really), and therefore has no problem (although she does), we would be pointing out the obvious (you drink too much) and an Intervention would be unsuccessful. Since I work in a counseling agency that specializes in substance abuse, I decided to ask our professionals their opinions regarding the Intervention process.

Our Executive Director, Robert Zeh, Ph.D., said, "Interventions can be very effective if done appropriately. A professional who has staged an

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Sign of the Times by Mark Woods, TTS-C

May 3, 2007 will mark the first day of full implementation - rule and enforcement - of Issue 5 - Smoke-Free Ohio which was passed this past fall by Ohio voters. While the law has been in place since December, Ohio legislators have only recently agreed on enforcement rules and policies to operate the law. This enforcement will hold all Ohio businesses to the

smoke-free indoors standard, including private clubs and bars. While this is exciting to the overwhelming number of Ohio voters that supported the tobacco prevention effort this Fall, related news is not as promising.

Most significantly, recently-elected Gov. Strickland, a psychologist by training, has included in his proposed budget, soon to be leaving the

House for the Senate floor, the securitization of tobacco settlement dollars. Strickland is supporting Ohio taking a one-time, lump-sum payment for the balance of dollars due from the 1998 Master Settlement Agreement with the major cigarette manufacturers. Importantly, the Governor's plan DOES NOT include using any of the secured dollars toward (cont. pg. 2)



Employee Spotlight - Angie Giltner



Smile, Its Spring!

Angie Giltner is the coordinator of the YES group based out of the Wooster office of Your Human Resource Center.

Angie is a Licensed Social Worker and Chemical Dependency Counselor. Angie is also in charge of the Urine Screening process at YHRC.

Angie is quick with a sense of humor and is always smiling. Her supports are her "darling husband," John, best girlfriend Janel, father, brothers, sister-

in-law and "fantastic aunt, Shirley (who taught me everything I know about being an incredible aunt)" and cousin Lori.

Angie has always wanted to take an Alaskan cruise and loves scrapbooking and Vegas! Angie's only reading is the Bible. Angie's favorite movies are comedies, but she also loves crime dramas. The Lion King is her favorite movie ever ... HAKUNA MATATA!

Angie's goal is to retire and travel the U.S. with her husband. She is most proud in her life about her niece Rebecca (5), nephew Jacob (2) and niece Emma (almost 1). "They are the light of my life & I love them more than anything!!"

If you see Angie, smile back because she is already smiling at you.

Over 20,000 Ohioans lose their lives to tobacco-related illnesses annually. The 2006 Adult Tobacco Survey reports that 79% of Ohioans think settlement funds should be spent on tobacco interventions.

Sign of the Times (cont.)

prevention or reduction of tobacco use in the state. This is disturbing because the settlement was intended to produce a remedy for tobacco-caused damages to our citizens. Despite our quit programs in Wayne County at YHRC, Goodwill, the YMCAs of Orrville and Dalton, Amish-specific prevention and cessation program operated out of

our Holmes County office or the quit assistance provided by YHRC staff at the Holmes County Health Department, tobacco remains the number one cause of preventable death and huge financial burden in Ohio.

Our programs and others around the state have made significant impacts and will continue to do so, but funding

stress resultant from the state taking these dollars from their intended purpose may decrease service availability making it more difficult for those wanting to quit to do so and those we wish to protect from starting to be reached.

For more information on this issues or for help quitting, call Mark Woods, Program Coordinator at 330-264-9597.

YHRC



Stars

Birthdays—Winter

- Barb Frybarger (11/20)
- Paul Griffith (11/25)
- Carol Hahn (12/18)
- Jensen Hanna (11/22)
- Mathew Musgrave (1/12)
- Suzanne Snyder (12/29)
- Keith Waggoner (11/10)
- Bonnie Kirtland (12/16)

Anniversaries

- Kevin Bowen (4), Jody Calame (6), Angie Giltner (3), Sam Haramis (3), Patti Wendling (6), Jon Fishburn (1), Amber Harp (1), Angela McDowell (3), Mathew Musgrave (3), Patty Winrod (7), Mark Woods (3), Linda Yoder (3)

Birthdays—Spring

- Suann Bradley (3/5)
- Sam Haramis (2/22)
- Angela McDowell (2/13)
- Mark Woods (3/19)
- Linda Yoder (1/26)
- Paula Burkett (3/4)
- Michelle Reiheld (4/10)
- Samantha Loy (2/14)





Director's Report Robert Zeh, Ph.D.

Spring is here and it is time once again to think about planting our spring flowers.

In YHRC terms, this means working on our new agency plan. This year we will be working on new 1-, 3- and 5-year plans with the assistance of Goodwill. Bringing this plan into operation will guide the development of agency resources and the expansion of agency services through

the next 5 years. We are hopeful that our planning will bear fruit.

We have been working diligently on our Marriage Works grant over the last few months. This grant allows for the development of community marriage policies in Wayne, Stark and Medina counties. These policies will then be signed by religious leaders in the community as well as judicial officers and agency directors. The idea is to encourage people to participate in pre-marital

counseling in order to avoid marrying the wrong partner and to maintain their marriage through the use of other couple mentoring and outside counseling. The program is designed to reduce the number of failed marriages as well as the number of out-of-wedlock pregnancies.

I am particularly pleased with the efforts of three program coordinators—Bill Donaldson, Sonji Gregory and Bonnie Sander—who

have worked diligently with the faith-based community to gender consensus on the development of these policies. We are particularly proud of this first initiative between a public sector agency and the faith-based community. We look forward to seeing this project continue and to see a reduction in the number of community divorces and out-of-wedlock pregnancies.

“The program is designed to reduce the number of failed marriages as well as the number of out-of-wedlock pregnancies.”

Quality Assurance Mathew Musgrave, MSSW, LISW

With the coming of spring, YHRC staff will be again developing annual service plans with its funding sources such as the local county departments of job and family services and the Wayne and Holmes Counties Mental Health and Recovery Board.

One term that will be heard often this year and in coming years is “national outcome measure” or NOM. These measures are the major indicators of how good a job a human services organization, hospital, or other service – oriented organization is doing in achieving the results it has established for itself.

For the majority of alcohol and drug treatment organizations, the NOMs established by the federal government through agencies such as the Substance Abuse and Mental Health

Services Administration are significant, as these are recognized as the highest standard of achievement. These same national measures are typically valued and endorsed by agency accreditation bodies and state governments.

Some NOMs used locally are: number of clients exiting treatment with abstinence, length of stay in treatment, time to access 1st appointment, client satisfaction with services, cost effectiveness of services, and stability in consumer housing and employment.

As data is gathered over time, a typical picture – or data baseline – of the local treatment population will be visible to planners on local, state, and national levels. This knowledge will support construction of more exacting measures for confirming that services to those

consumers had desirable, positive effects.

And, applying national measures to local populations allow comparisons of the local service effectiveness with similar agencies at regional, state, and national levels.

Agencies achieving strong outcome results can share the methods leading to their services’ high achievement, and other provider agencies can alter their services accordingly.

The preparedness and ability to successfully apply NOMs will become increasingly important for local agencies as local and state governments award of state and federal tax monies based on service outcomes. In short, services will not be funded unless accompanied by a commitment to monitoring and achieving NOMs.



"Family Solutions"

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Intervention Considerations (cont.)

Intervention in the past should structure the event. The participants must not be accusatory or attacking. Instead, let the person know how their drinking has affected the people who love them, and its adverse effects on their job, their family, or other important relationships." Ideally, the person would then go directly from the Intervention into inpatient treatment or detox.

Paul Griffith, MA, LPC, LICDC, feels that Interventions were effective in the past, when inpatient treatment centers were more available, but that today, most people don't have the financial resources for inpatient treatment. He also said, "Be careful who is involved in the Intervention. If there is even one enabler in the room, it will all be

for nothing."
"Be very careful about your timing when implementing an Intervention," says Scott Self, LICDC. "It is difficult to treat a person who thinks they don't have a problem. Timing is everything.



Could an intervention help you?

If the person admits that, yeah, maybe they should stop drinking,

strike. Get them to a facility before they change their mind." All three agree that a confrontational type of intervention will put the person you want to help on the defensive, and will, ultimately, be unsuccessful.

If you think someone you love is alcoholic and wish to stage an Intervention, get an expert's opinion first. If you still feel you must intervene, make sure you have a professional present, and a place to take your loved one immediately, should they agree to treatment. It could be the most important thing you ever do.

For assistance with your own or a loved one's problems, please call us at 1-800-721-YHRC (9472).