Building 2015 ANNUAL Bert Mark

REPORT





Building hope is a good theme for what our amazing staff does every day. The Bert Nash Center provides comprehensive mental health services to more than 5,000 people in Douglas County by responding to needs, restoring lives and building a healthy community.

Our walk-in Access Center for first appointments responds to needs each day for 10 to 12 new people who come in our doors for the first time every single business day. They come because they hope for something better.

Our WRAP program (Working to Recognize Alternative Possibilities) has had two sources of funds —Douglas County and your donations. I'm so thankful to report that Jan. 1, 2016, we added a third source of funding — the city of Lawrence. Because of that support provided and your increased giving, not only are we going to maintain our presence with the WRAP program, but after eight long years, we will finally have WRAP clinicians back in some of our elementary schools.

And I could talk all day about our successes in building a healthy community. During 2015, we certified 354 people in Mental Health First Aid and taught community partners like USD 497 and University of Kansas staff, Boys and Girls Club, faith organizations and local law enforcement. If that's not building a healthier community, I don't know what is.

Now many of you know that my retirement is on the horizon in the next few years. And I'm committed to continue to add to our list of accomplishments and build hope for our future until my very last day — but it's going to take work.

Many of you have heard me say this, but our staff really has borne the brunt of continued state budget cuts and we desperately need to be able to recruit, retain and reward expert staff that provide the support and services our community depends on. And although the city's new support will allow us to add a handful of WRAP positions — there are still more schools we're missing. There are more kids that need access to WRAP so we can focus on prevention instead of intervention.



And for the past year, our community has been researching the best way to address some very troubling statistics. Here in America, if you are receiving mental health treatment someplace where you are spending the night, it is probably a jail or prison. If you have a serious mental illness you are 10 times more likely to be incarcerated than in a hospital.

Currently in Lawrence, if someone with a mental health problem is in crisis, their after-hours options are frequently just the emergency room or jail, based on their actions. We need to do better. Our community will do better, by addressing the needs specific to Douglas County and establishing a 24/7 restoration or crisis center. This will only happen with our continued partnerships — with the county, the city, law enforcement, judicial system, healthcare organizations and community groups.

We couldn't do what we do without your support. To those members of our Celebrate Bert Nash Society who have made significant pledges to the ongoing sustainability of the Center and our work — we really can't thank you enough. Your support builds the hope for our future.

I invite each of you to continue to build that hope — through your voices, your support, and your dedication to making a difference. Building hope comes in different forms and you may not see the immediate effect, but the ripple of that hope will be felt for years to come.



In the fall of 2013, Buddy was an honors student, an officer in academic clubs and involved in business school activities. He was determined to make something of his life.

Then things went bad.

There was a breakup with a girlfriend. He started falling behind in school. He wasn't sleeping well. He was stressed out. Things were it so personally. It's a condition I have, but it's piling up. Then in April 2014 he had a physical not the end of the world. You just deal with it." confrontation with his father.

"He became enemy No. 1 for whatever reason," Buddy said. "I think a lot of it was imagined on my part. We had an argument where I ended up putting him in a chokehold. My parents didn't know what to do, so my mom called the police."

Buddy was arrested and spent a night in jail. About a week or so later, a similar incident occurred, only worse. This time, Buddy trashed his own apartment, including lighting a T-shirt things; it helps to keep you on track." on fire. He then went over to his parents' house and got into an altercation with his dad again. Like the previous time, the police were summoned. Buddy was arrested. Upon release from jail, he was ordered to the state hospital in Osawatomie. He had to drop out of school. Over the next four months, he was sent to the state hospital three times. After he was released their son received. the third time, he was put on an outpatient treatment order to receive services at the Bert Nash Community Mental Health Center.

It changed the direction of his life.

"That's really what got me on the slow and steady path to recovery," Buddy said.

A first, Buddy didn't want to accept that he

had a mental illness. He was diagnosed with bipolar disorder.

"I was kind of in denial about it," he said. "I think a lot of people are that way, because of survive the illness on their own. I totally underthe stigma. But then you realize if you have a broken arm, you go to the doctor. That helps to out ever having the chance to live a normal life sort of look at it from that aspect and not take

Which is what Buddy has been doing. When he began coming to the Bert Nash Center, he participated in both group and individual therapy. He continues to see therapist Juliet Nelson, leader of the Bert Nash dialectical behavior therapy team.

"I'm doing individual therapy, I'm on medication, and I have a lot more self-awareness, which is key to a lot of it," Buddy said. "It helps to have someone else's perspective on

He's also getting along with his parents.

"We get along better than ever," Buddy said. "They know my behavior at that time wasn't really me. There was a reason for it. They underalso find help. stand that I have a medical condition, something a lot of people have, and it can be managed."

Buddy's parents are grateful for the help

"Buddy was lucky to have gotten sick in Lawrence," his mother said. "After his third hospitalization, his recovery became a joint effort between the court system, his parents and Bert Nash. He had the most compassionate and caring team at Bert Nash that one could hope for. I don't know that he would be where he

is today without his 'team.' Just the 'one-stopshopping' was a tremendous help to us. I honestly do not know how other people

stand how and why they would just give up with-... the meds, the loss of friends, the financial and legal hurdles, physically getting the needed recovery medications on their own without financial resources would be overwhelming. Just figuring out which ones to take when would be overwhelming. A good mental health center that is there to help these people is a very important part of a community."

After taking time off from school to focus on his recovery, Buddy has since resumed taking business classes and hopes to earn a graduate degree in accounting.

"Buddy is a great success story," said his Bert Nash therapist Nelson. "He has made amazing progress."

Buddy knows he's not alone in his struggles, and he wants to encourage others that they can

"I've developed a lot of empathy for people who have struggles," Buddy said. "You realize there are people from all walks of life, all sorts of economic and social conditions. Sometimes life is just too much to handle; it doesn't matter who you are or how strong you are. That's when you need someone to help you. What really helps is knowing there is a place like Bert Nash."





In the summer of 2015 while working with the Lawrence City Commission on the 2016 budget, I had the opportunity to help restore funding to the WRAP (Working to Recognize Alternative Possibilities) program serving the Lawrence Public Schools. In doing so, I was able to support with policy our community's commitment to the success of the WHOLE child. As a teacher, I work with students every day who face barriers to their academic successes, many of which are entirely or at least partially beyond the lens of their classroom teachers. For a long time this problem was dumped into the lap of school counselors. As federal and state policy have put an increasing value on standardized testing and bureaucratic demands have grown on public schools over the past two decades, the job description of counselors has grown increasingly academic (some would say bureaucratic) in nature all at the expense of actual "guidance counseling." Consider the real life cost of such policy. Within our community nearly 1 in 5 children have at least one diagnosable mental or addictive disorder, all while the U.S. Department of

THAT'S A WRAP.



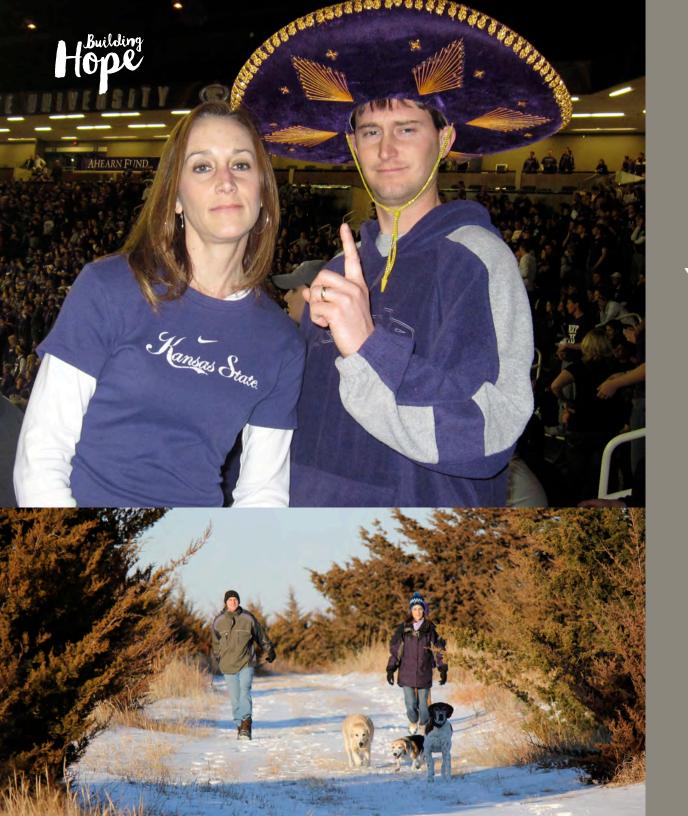
Education reports that as many as 65 percent of the nation's students diagnosed with an emotional disturbance will ultimately drop out of school. In providing the mental health services within our school buildings that WRAP can provide, we are able to better enable our students to find success both in the classroom and beyond, as they become productive contributors to our community.

We often define whether or not we are "healthy" based upon the overly simplistic notion of physical well-being. If my arms and legs work and my nose doesn't run, I tell people that I'm "healthy." For many people living in our community; however, the ailments they face are far more hidden to the purview of the general public, but no less severe to their overall health and no less impactful to their day-to-day existence. We know as teachers that the younger we can begin to teach a child academic knowledge such as foreign language skills, the better our chances are at success. With regards to mental health treatment, the data is no different. As a young kid growing up in Lawrence, I faced many

"We are so very fortunate in this community to have a resource like Bert Nash and a program like WRAP to serve the needs of our students."

of the same personal challenges some of my students face today. These elements, which manifest themselves without necessarily providing a physical warning sign for others to see, can grab hold of a young person and derail them so quickly. They act indiscriminately — there is no "stereotypical" mental health patient, no typical socioeconomic class, race or religion. I will never know fully the degree to which my time as a young man spent talking with WRAP counselor Aimee Ziegler changed my life, but I know it did. We are so very fortunate in this community to have a resource like Bert Nash and a program like WRAP to serve the needs of our students.





ARE YOU THINKING ABOUT KILLING YOURSELF?

By Karrey Britt, Lawrence-Douglas County Health Department Communications Coordinator

Mental Health First Aid is life-changing and can be life-saving.

I took the course at Bert Nash Community Mental Health Center five years ago when I was a health reporter for a television station and newspaper. I wanted to be better educated about mental health because I interviewed people who suffered mental disorders, attempted suicide, and had lost loved ones who died by suicide. I wanted to make sure I was asking the right questions and sending the appropriate messages through my stories.

Additionally, I took the class to help friends, family and colleagues. I personally knew of loved ones who had depression, anxiety, substance abuse and eating disorders. I was one of them. As a teenager, I suffered from anorexia.

The truth is 1 in 4 adults suffer from a mental illness in a given year. The good news is these illnesses are as treatable as a physical

"If the answer is 'yes,' then ask if there's a plan. If he or she has a plan, then seek professional help."

illness. We just need to be more educated about or "Are you thinking about killing yourself?" them and we need to talk about them.

The instructors emphasized to ask the question.

That's where Mental Health Aid First Aid comes in. It's a class that can help anyone — whether you are a reporter, pastor, police officer, wife, son, friend or stranger. It gives you the skills to help someone who may be developing a mental illness or experiencing a mental health crisis. You learn the risk factors and warning signs for mental illnesses, strategies for how to help someone, and where to turn for help. Like other first aid classes, there is a mnemonic — or memory device — for the action plan. It's ALGEE:

- Assess for risk of suicide or harm
- Listen non-judgmentally
- Give reassurance and information
- Encourage appropriate professional help
- Encourage self-help and other support strategies

The class had a profound effect on me professionally in the field of communications and personally.

One aspect of the class that I will never forget is how to help someone who is at risk for suicide. I learned that if I suspect someone may be at risk of suicide, it is important to directly ask about suicidal thoughts. For example, "Are you having thoughts of suicide?"

or "Are you thinking about killing yourself?" The instructors emphasized to ask the question without dread or without expressing negative judgment. If the answer is "yes," then ask if there's a plan. If he or she has a plan, then seek professional help.

At 8:05 p.m. on Sept. 23, 2015, I received a text message that my younger brother was missing. The next 24 hours were like a horrific nightmare as I learned he had been suffering from depression and he had talked about suicide. Then, I received the phone call that I had been dreading. Looking back, I believe Mental Health First Aid helped me cope with the situation as it unraveled and enabled me to help family and loved ones in a time of crisis.

My brother was 34 years old, married, had earned a doctorate in fine arts, and had two sons, ages 2 years and 5 months. Four days before his death, we had attended a college football game together. We laughed, joked and gave each other high-fives. I had no idea at the time that he was suffering from depression.

Later, I learned he had not only talked about suicide but also his plan — it just wasn't with me. I wish with all my heart that he had said something to me.

My hope is that more people take this class. It could be life-saving.



HOPE FLOATS

2015 was a year Megan Smith will never forget.

It was also a year when her faith and the skills she learned from therapy at the Bert Nash Community Mental Health Center were put to the test.

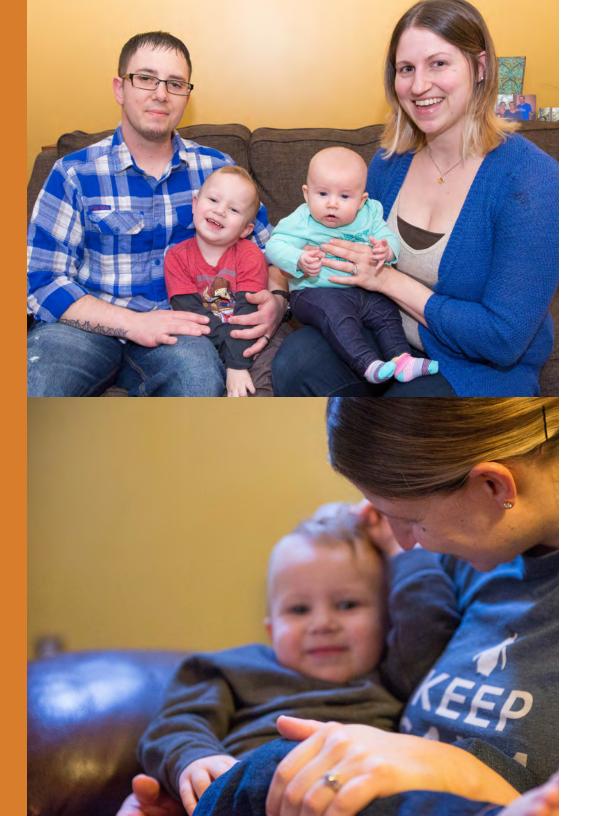
And it was those skills and her faith that helped her get through what turned out to be a very challenging — and scary — time.

Megan and her son Liam, 2, had just returned from the grocery store on July 27 when her phone rang. The caller was someone from her husband's employer. Megan was told Chance, who was a welder, had been involved in a work accident and was being transported to Lawrence Memorial Hospital.

So Megan, who was pregnant, loaded up Liam and drove to the hospital, only to learn Chance wasn't there and he wasn't en route. Instead, he was being flown to the University of Kansas Hospital in Kansas City, Kan.

"At that point, I really didn't know what was coming, but that it was more serious than I could imagine," Megan said. "I have a strong faith, so I just started praying ... and crying."

Megan arrived at the KU Hospital and anxiously waited for news about her husband. After what seemed like an interminable wait, a doctor informed Megan about Chance's condition. His skull had been crushed between the frame of a cargo truck he was working on and the truck axle.



"We've had some setbacks, which are to be expected. But we've stayed strong through it all, and I have a strong support team around me, like Bert Nash. Keeping that hope alive in you makes things that much easier to get through."

"The doctor said it was pretty serious. He told us there was quite a bit of head trauma and Chance had head fractures pretty much everywhere," Megan said. "At that moment, we didn't know what the future held for us. When Chance's grandmother, who had been a nurse, heard what had happened she expected him to be on a ventilator for months."

Turned out, Chance was on a ventilator for only 24 hours. He was sedated when Megan finally got to see him, but he was alive. The first time he saw her, he rubbed her hand with his thumb. As serious as Chance's condition was, Megan believed he would be OK and they would get through this.

She was right.

On Sept. 28, Megan gave birth to a healthy baby girl, Autumn. Four weeks earlier, Chance came home from the hospital.

He still had paralysis on the right side of his face, much like having suffered a stroke. He had hearing loss in his right ear. He had cranial nerve damage. His right vocal cord was paralyzed. He couldn't smile. He had double vision. But he was alive, and he was home.

"The doctors said it was a miracle," Megan, 26, said.

Chance celebrated his 30th birthday in the hospital by having surgery, the first of three he has undergone since the accident. He under-

went occupational and physical therapy after being released from the hospital and he continues to receive speech therapy.

There have been post-accident complications. Chance's pituitary gland was damaged in the accident. He has thyroid problems and his body doesn't produce adrenaline, which means he will take medication for those issues for the rest of his life. His short-term memory was affected. He has constant ringing in his right ear. But to look at Chance, his outward appearance shows no physical evidence of the accident.

"To see him today having had that injury, you wouldn't know it," Megan said.

"It was a tough ordeal," Chance said. "But I'm doing great."

When she was in ninth grade, Megan went through her own struggles, but hers were mental instead of physical. She suffered from depression. She was sad. She cried a lot. She quit going to school. She self-harmed. She didn't have any hope for herself or her future. She even had a plan to kill herself.

A turning point came when she started going to group and individual therapy at the Bert Nash Center. She learned about dialectical behavior therapy (DBT), which helped her to change behaviors that weren't helpful and learn new coping skills. She also attended classes at the secondary therapeutic classroom, a col-

laborative effort between Bert Nash and the Lawrence School District. She started to smile again, on the outside as well as on in the inside.

"Therapy gave me hope," Megan said.
"Without that help, I may still be in that depressed state. I may not even be here today if I hadn't had that help. But through the skills you learn in DBT and therapy, it gives you power, which gives you hope you can get through it."

Megan's mom, Karen Glotzbach, is proud of her daughter and the maturity and growth she showed in dealing not only with her own issues but managing the challenges her family has faced.

"I have seen Megan go from those dark days of depression and not having the strength to be her own advocate, to an incredible woman, mother, and wife," Megan's mom said. "During Chance's long stay in the hospital, I saw one of the strongest women I know stand there and be an incredible advocate for her husband and family. I was very impressed, and proud, at the place Megan has come to. With the help of Bert Nash and all of the resources there, we got through some hard times and they really helped to give her another foundation to which she has grown from."



20 BY THE 15 NUMBERS



3,548

30% 18 & UNDER

15% 19-25 YEARS OLD

27% 26-40 YEARS OLD

21% 41-59 YEARS OLD

7% 60 AND OVER

\$11,347,948

OPERATING REVENUES

56% FEES FOR SERVICE

20% COUNTY FUNDS

9% STATE FUNDS

6% OTHER

3% GRANTS

3% CONTRACTS

3% ENDOWMENT **FUNDRAISING**

* The most common diagnoses were major depressive disorder and anxiety.

RESTORING LIVES

new admissions in 2015. We see clients of all ages, ethnicity and income levels.

52% 48%

BUILDING A HEALTHY COMMUNITY

335 people were trained in Mental Health First Aid.

people attended one of 31 Discover Bert Nash presentations provided to the community. **DISC**VER



GOI HOPE?



For a long time, Sean Sullivan was missing something in his life.

Hope.

He found it at the Bert Nash Community Mental Health Center.

"I really owe it to Bert Nash for giving me that hope," he said. "If it weren't for Bert Nash, I don't know where I would be."

Sullivan grew up knowing he was different; he just didn't know why.

"I always felt sort of socially isolated and like I didn't belong," he said. "I was kind of awkward growing up and not accepted by my peers. So I always struggled with depression."

Sullivan, 34, has lived with serious physical challenges his entire life, though they weren't discovered until he was in his mid 20s.

"I was born with agenesis of the corpus callosum, which means I'm missing the part of the brain that is responsible for interpreting and processing information and understanding instructions," Sullivan said. "I'm on the autistic case manager helped him get his own apartspectrum. So as well as the neurologic condition I was born with, I have a range of learning and mental disabilities. I've always kind of seen the world differently."

Sullivan began seeing a psychologist when he was 12. Originally, it was thought he had atten- supports local artists. tion deficit disorder. He was put on ADD medication and antidepressants. It was around that time that he first remembers having thoughts about suicide.

said. "I didn't have much hope for a better life for myself."

When he was in high school, Sullivan began experimenting with drugs. That went on for about 15 years as he graduated to harder and harder substances. He would also threaten suicide as a way to let others know he was hurting.

"I toyed with the idea of suicide, not necessarily to get attention but as a way of crying out for help," he said. "I had no hope. I could not see through the fog and I didn't know what else to do other than to say I'm going to end it all. I didn't know there was a reason to go forward. I didn't know there were people who cared."

Sullivan continued to struggle with substance abuse and depression. He checked himself into Stormont-Vail Healthcare in Topeka three times in three years. A caseworker at Stormont-Vail referred him to Bert Nash. Sullivan moved into Bridges, a Bert Nash transitional housing facility, and he started going through the intensive outpatient program at Bert Nash. After staying a couple of months at Bridges, his Bert Nash ment, which gave him a feeling of independence

Sullivan also started focusing on his art; he does abstract painting. He became involved in Percolator Lawrence, an organization that

"I have this purpose now. I feel like I am doing something meaningful in the community. I'm doing what I love, and I really owe it to Bert Nash for giving me that hope. If it weren't "I didn't feel normal. I felt inferior," Sullivan for Bert Nash, I don't know where I would be."





ENDOWMENT BOARD

Front row, from left, Alice Ann Johnston, Chair Linda Robinson, Cindy Maude and Judy Wright. Back row, from left, CEO David Johnson, Beverly Billings, Michael McGrew, Gary Sollars, Mike Treanor, Carol Hatton, Kelvin Heck and Kelly Welch. Not pictured: LaRisa Chambers, Jane Fevurly, Rachel Monger and Beth Stella.

INVESTMENT COMMITTEE

(No photo) Chris Anderson, Carolyn Shelton, Chuck Warner, Chair Kelly Welch and Jide Wintoki.

GOVERNING BOARD

Front row. from left, CEO David Johnson, Elizabeth Sheils, Chair Cindy Maude and Jane Fevurly.
Back row, from left, Steve Glass, Reed Dillon, Brad Burnside and Don Grosdidier. Not pictured: Barbara Ballard, Sue Hack, Ken McGovern and Bob Morse.



Elizabeth Sheils has been to plenty of medical doctors over the years.

Not always with the best results.

Which is one of the reasons she ended up using Health Connections, the Bert Nash Community Mental Health Center health home.

"I just felt as if my doctor wasn't listening to me," Sheils said. "My therapist at Bert Nash, who is now part of the Health Connections team, suggested I go to Heartland. I did, and I had a really good experience."

Bert Nash and Heartland Community Health Center have a reciprocal relationship to provide integrated care for their clients, combining access to mental health and physical health services. Health Connections helps do just that. The program coordinates client care and connects clients with community resources that are available.

Health homes are a relatively new concept that came out of the Affordable Care Act.
Bert Nash started its health home program in August 2014. One of the goals of the program is to reduce emergency-room costs by providing coordinated care, encouraging people to live healthier lifestyles, and connecting people to resources.

For Sheils and others with a mental illness, connecting with the right services can have a long-lasting impact.

"I've always been concerned about the fact

that people with mental health issues die earlier than the rest of the population," Sheils said. "I've lost four or five friends whose deaths I think would have been preventable if there had been a Health Connections program then."

Studies show people with serious mental illness die 25 years earlier than other Americans, primarily due to treatable medical conditions.

"One reason for that statistic is that people with serious mental illness don't receive health care," said Alisha Christian, Health Connections nurse care coordinator. "We are constantly reminding people that lifestyle choices are important: exercise, quit smoking, eat healthy."

As part of the Health Connections program, Sheils and Christian communicate at least once at month, or more often if necessary.

"I call her when I have problems," Sheils said of Christian. "I feel like I have a support system behind me. I can talk to her about anything. Without Health Connections, I would not receive help so quickly."

For Sheils, who was diagnosed with mental illness when she was a graduate student at the University of Kansas, it's nice to know help is available whenever she needs it.

"I feel safe for the first time," she said.

"Just that peace of mind of knowing that
Health Connections is an advocate for me helps
me feel better. It relieves a lot of fear that I will
die early."



THANK YOU TO OUR DONORS

The Bert Nash Center is grateful to these donors who have made a remarkable investment in the work we do and the health of our entire community. Thank you to these donors who contributed nearly \$718,390 in the 2015 calendar year.

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CELEBRATE BERT NASH SOCIETY

To build a stronger foundation for expanding our programs and provide a stable future for the Bert Nash Center, we established the Celebrate Bert Nash Society in 2012. Since then, the Society has grown to 78 individuals, couples or businesses who have pledged at least \$1,000 a year for five years toward the Center's ongoing operations. We are very grateful for their solid commitment to sustainable funding for the Center and health of our entire community.

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Marilyn Bittenbender & Kelvin Heck Eunice & Steve Ruttinger

Dru & Bill Sampson

Sally Hare-Schriner & Dan Schriner Carolyn & Steven Schroeder

Catherine Shenoy

Pam & Dolph Simons Patricia Roach Smith & Eric Smith

Marsha Smith

Robin & Shirley Martin Smith

Connie & Gary Sollars Beth & Val Stella

Janice & John Storey Stephanie & Philip Struble

Sidney & Tod Sutton

Nancy & Scott Thellman Elinor & Michael Tourtellot

Treanor Architects Teresa & Mike Treanor

Kevan & Gail Vick

Phyllis & Dan Watkins Beverley & George Wilson

Judy & Jack Wright

Susan & Takeshi Yoshida



"It takes a noble person to plant a tree that will one day provide shade for those whom he may never meet."

In Honor of Elaine Taylor (1924 -2015)

The effects of a legacy gift, like the one Mrs. Taylor designated to the Bert Nash Center, will be felt and remembered for generations. Our community will be a healthier place and lives will be changed because of Mrs. Taylor. We raise a cup of tea in her honor and memory!

In Honor of Bert Nash Health Connections Anonymous

In Honor of Peter Curran Lawrence Rotary Club

In Honor of David Johnson Alice Ann & Don Johnston DCCF Management Grant Fund of the Douglas County Community Foundation

In Honor of Lawrence Police, Fire, and Medical Departments Carol & Michael Deaver

Julianne Johnson & Judy Pollock

In Memory of Sandra Jane Shaw Barbara L. Watkins

In Memory of Joyce Wineinger C.M. & I.D. Coleman Shirley & Charles Modesitt

WRAP GETS BIG GIFT.

An anonymous person donated \$50,000 to the Bert Nash Center. The money was earmarked for the WRAP program.

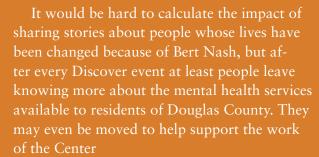
During the past three years, more than 1,600 people have attended a Discover Bert Nash event — a community outreach program that highlights stories about people whose lives have been changed through services they received at the mental health center.

At each of the more than 100 Discover Bert
Nash events that have been held, one of the
recovery stories that is shared involves WRAP
(Working to Recognize Alternative Possibilities), a program that places a mental health
clinician in schools.

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for the gen
and say that

"The idea with WRAP is to intervene with kids who might not get services." Schools realize the psychological and emotional problems that kids have can have a big impact on the educational process."

Charlie Kuszmaul – WRAP team leader



One such person, who chose to remain anonymous, after attending one of the Discover Bert Nash events, donated \$50,000 to the Bert Nash Center. The money was earmarked for the WRAP program.

"That was gratifying to get that gift," said Bert Nash CEO David Johnson. "We have been working to tell the story about WRAP and the importance of providing services to kids. The donor preferred to remain anonymous, so all we can do is assume they had connected with WRAP in some way. We're using the gift as a continued incentive to make sure we are telling the story about WRAP, because you never know how it will touch people. But I think the increased funding is a direct result of sharing our story."

On the behalf of the WRAP program and the entire Center, Johnson expressed gratitude for the generosity of the anonymous gift.

"You'd like to be able to go to this person and say thank you, because we are so excited to receive this gift and we are so thankful to the donor," the Bert Nash CEO said. "This gift will make a big difference in the WRAP program."

Besides the \$50,000 donation, the city of Lawrence included \$335,000 for the WRAP program in its 2016 budget. The city money funded five new WRAP positions.

Janice Storey, Child and Family Services director at the Bert Nash Center, is grateful for the local support that keeps the WRAP program growing, because the needs of kids are also growing.

"This really speaks to the city's commitment to making sure the children in this area are getting their needs met," Storey said of the city funding for the WRAP program. "And without the partnership with the school district there would not be a WRAP program. We've seen a growing number of kids coming to Bert Nash for services and we're seeing kids coming in at a younger age and with more acute needs. As the needs of kids have changed, the school district has been very open to talking about how we continue to address those needs. So this funding is really good timing and speaks to what the community is willing to do to make sure kids' needs are met."



335

people were trained in Mental Health First Aid in 2015, including these groups: DCCAA, District Attorney & Community Corrections, First United Methodist Church, KU Housing, Law enforcement, Lawrence School District, and Women's Fresh Start Project

Visit bertnash.org for schedule of upcoming classes.





Rep. Lynn Jenkins was presented with a National Council Behavioral Health Champion Award in December at the Bert Nash Center. The 2nd District congresswoman has been instrumental in the introduction and championing of the Mental Health First Aid Act and securing funding for mental health training for fiscal year 2016.



