

Spring 2011

INDEPENDENCE

A Quarterly Publication for Friends of Vinland National Center



Trauma-Informed Services p6

Vinland Directory

Executive Director

Mary Roehl
763.479.4521

Associate Director

Duane Reynolds
763.479.4538

Operations Manager

Colleen Larson
763.479.4514

Outreach Manager

Scott Franzen
763.479.4519

Admissions & Referrals

Chemical Health

Outpatient Services Manager

Annette Pearson
763.479.4560

Clinical Services Manager

Rick Krueger
763.479.4506

Admissions Supervisor

Greg Chamberlin
763.479.4553

Intake Counselors

Denice Heimbuch
763.479.4508

Carole Steffl

763.479.4512

Supportive Housing

Lodge Coordinator

Gina Chamberlin

Therapeutic Exercise Services

Fitness & Wellness Manager

Jeff Willert
763.479.4505

Vocational Services

Vocational Counselor

Peggy Martin
763.479.4551



VINLAND
NATIONAL CENTER

3675 Ihduhapi Road
PO Box 308
Loretto, MN 55357-0308

Phone: 763.479.3555
Fax: 763.479.2605
Web: vinlandcenter.org

Vinland Board of Directors

President

Gerald Seck
*Larkin, Hoffman, Daly
& Lindgren, Ltd.*

Secretary

Patrick Coleman
*Minnesota Historical
Society*

Treasurer

Mike Martin
*Minnesota Cable
Comm. Assn.*

Tracy Beckman

*Augsburg College,
Fmr. Senator, Minnesota
Legislature*

Dave Edmunds

*Edwards Kraemer &
Sons, Inc.*

Yngve K. Hanisch

*Advocate
Oslo, Norway*

Lu Hoffman

Community Volunteer

Neena Ingvalson

Community Volunteer

Kate Knuth

*Conservation Biologist
Representative, State
of Minnesota*

Arthur Leon, M.D.

*School of Kinesiology
University of Minnesota*

Peter Moe

*Minnesota Landscape
Arboretum*

Erin Munson

Community Volunteer

Jim Netland

Community Volunteer

Margaret Perryman

*Gillette Children's
Specialty Healthcare*

Christine Rice

*Minnesota State Colleges
& Universities*

Karin Knoll Roof

*Principal, MedLinX
Consulting*

Arild Sandsten

*Drobak Consultants
Drobak, Norway*

Allan Seck

Placor, Inc.

Denise Seck

Community Volunteer

Debra Thornton

Attorney

Bill Weller

*Great American Real
Estate Company*

Rachel Wobschall

University of St. Thomas

Independence is a quarterly publication of Vinland National Center. The magazine currently reaches 4,000 subscribers. Articles may be reprinted if the source is credited and Vinland National Center is provided with copies. Permission to photocopy is unrestricted. For a free subscription, please contact Vinland's Marketing & Communications Associate Amy Miller at amiller@vinlandcenter.org.



Printed on paper consisting of post-consumer recycled products.



Printed using soy-based ink.

Contents

On the Cover

Chemical health clients and their families participating in the Family Renewal Program

2 / Proven Success

Letter from Executive Director

3 / Client Success Story

Vinland Graduate John Shares His Story of Success in Recovery

4 / News Around Vinland

6 / Trauma-Informed Services

An Approach to Treatment Aimed at Reducing Triggers and Avoiding Re-traumatization

9 / Continuing to Grow

Vinland Welcomes New Staff and Interns



Proven Success

Letter from Executive Director

At Vinland, we are very proud of our impact on the community. We interview our clients upon arrival and six months after they graduate from our program:

- 92 percent of our chemical health clients report abstinence or reduced use after completing our program.
- 80 percent of our chemical health clients complete treatment, compared to the statewide average completion rate of 57 percent.
- 81 percent of our chemical health clients report an improvement in their quality of life after completing our program.

I think these numbers speak for themselves! I hope you share in our pride about these amazing results. Thank you for your continued support!

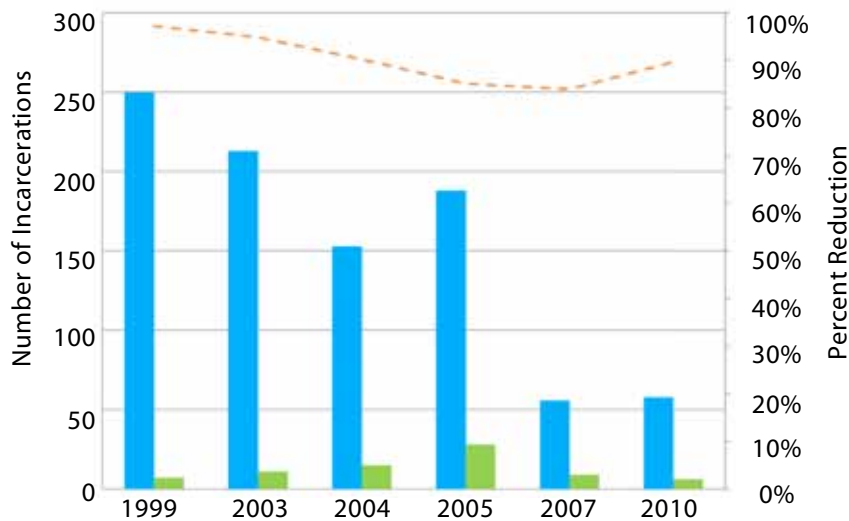
Mary Roehl

Mary Roehl
Executive Director

Did You Know?

- **3.2 million people** in the United States live with disabilities as the result of a brain injury.
- **Every \$1 spent on treatment saves society \$7** from reduced health care costs, reduced crime, and increased productivity, according to the Substance Abuse and Mental Health Services Administration. The financial cost of drug and alcohol abuse in the United States in terms of increased healthcare costs, increased crime, and reduced productivity, is estimated at **\$180 billion annually**.
- **25 percent** of adult stays in community hospitals involved **mental health issues** or **substance abuse disorders**.
- **29 percent** of people diagnosed with a mental illness have a co-occurring substance abuse issue.

Incarcerations Pre- and Post-Vinland Among Chemical Health Clients



	1999	2003	2004	2005	2007	2010
Incarcerations Pre-Vinland	250	213	153	188	56	58
Incarcerations Post-Vinland	7	11	15	28	9	6
Percent Reduction	97%	95%	90%	85%	84%	90%

Over the past 8 years, Vinland has saved the community more than **\$1.2 million** through reduced incarceration costs.*

*Based on 2005 Hennepin County Attorney's Study of an average 7-day incarceration with an average cost of \$200 per day.

Client Success Story

Vinland Graduate John Shares His Story of Success in Recovery

John grew up on a farm in northern Minnesota. He describes himself as a shy kid with a normal childhood. When he was 12 years old, he began drinking beer with his older brother. He enjoyed drinking and partying throughout high school and college. After college, John got married and he began working on his farm.

“I didn’t drink at bars,” he said. “I drank when I was working on the farm. I was working in the fields, all by myself, and nobody knew what I was doing. I would drink a pint of whiskey while I worked all day, then come home and pass out.”

John’s drinking became an issue between him and his wife. In 1990, he agreed to enter outpatient substance abuse treatment. He successfully stayed sober for the next seven years.

“One day I decided that I wanted to drink again, so that’s what I did. I can’t say there was any event that caused me to start drinking again. I don’t blame my drinking on anyone or anything.”

In 1997, John underwent major surgery to remove his colon and large intestine. He was prescribed narcotics to help him deal with the pain during his recovery, and John quickly began abusing his medications.

“The prescriptions were great because there was no alcohol on my breath.”

John continued to abuse prescription medications and alcohol over the next several years.

In April of 2006, he suffered a massive stroke. His stroke was caused by a blood clot in the right side of his brain, and the resulting brain damage caused paralysis on the left side of his body. John was diagnosed with thrombophilia, a blood clotting disorder. He was prescribed blood thinner medication to help prevent a future stroke.

John’s physical recovery after the stroke was slow. He spent the summer of 2006 in the hospital while

If you had told me five years ago that I would enjoy treatment, I would have said you were nuts. But I had a great time!

~ John
Vinland Graduate

undergoing physical therapy. His doctor told him he might spend the rest of his life in a wheelchair or a nursing home.

Taking the blood thinner medication meant that John could no longer drink. He knew he needed help to stay sober, so he entered treatment in Vinland’s Residential Chemical Health Program in the fall of 2006.

When John arrived at Vinland, his left leg was in a brace and his was walking with a cane. He was dedicated to the therapeutic exercise portion of his treatment program. By the time he left Vinland, John’s leg was out of the brace and he was able to walk without the cane.

“If you had told me five years ago that I would enjoy treatment, I would have said you were nuts. But I had a great time!”

After completing his treatment program, John moved into a LivingWorks Ventures’ lodge. LivingWorks, in partnership with Vinland, provides permanent supportive housing to adults with disabilities in recovery from substance abuse. John lived in the lodge for one year, and then he moved back home to northern Minnesota.

John continues to exercise on a regular basis. “I still can’t use my left hand, so I’m not able to work. In a way, I’ve turned exercise into my full-time job.”

In 2010, John began taking taekwondo lessons to help improve his balance. Today, he has earned his white belt and he has participated in two tournaments.

For someone who was told he might spend the rest of his life in a nursing home, John has truly made a remarkable recovery! •

May Is Stroke Awareness Month

A stroke, sometimes called a brain attack, is a type of brain injury caused by a lack of oxygen to a part of the brain resulting in tissue death. Strokes can be caused by a ruptured blood vessel (hemorrhagic) or by a clot that blocks blood flow (ischemic).

According to the American Stroke Association, in the United States there are:

- 7 million stroke survivors.
- 795,000 strokes each year.
- 137,000 people who die from strokes each year, making stroke the third leading cause of death.

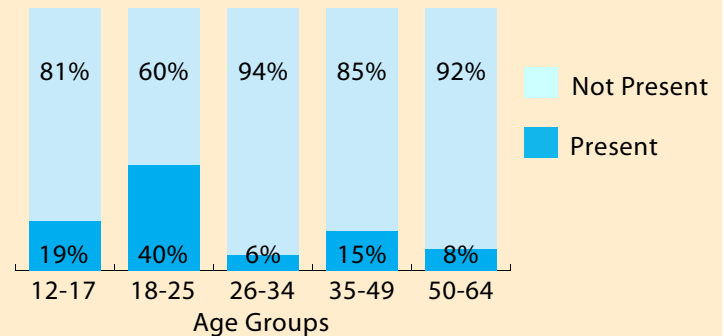
Substance Abuse and Stroke

High blood pressure is the leading cause of stroke. Alcohol and certain types of drugs increase blood pressure. Some drugs cause stroke by directly affecting blood vessels in the brain, while others do it indirectly by affecting other organs in the body, such as the heart or the liver.

Drug abuse is a leading contributor of stroke among people ages 18 to 25. Young people who abuse amphetamines are five times more likely to have a hemorrhagic stroke than people the same age who do not use amphetamines.

Excessive drinking may cause atrial fibrillation, which is a quick irregular heartbeat. Atrial fibrillation can

Presence of Substance Abuse Among Stroke Survivors



Source: SAMHSA, National Survey on Drug Use and Health, 2005. No data available for ages 65 and older.

cause the blood to form clots. If a blood clot travels to the brain, it may cause a stroke. In time, alcohol abuse can lead to high blood pressure, which is the leading cause of stroke.

Long-Term Effects of Stroke

Stroke is a leading cause of long-term disability. Depending on the area of the brain that was affected, a stroke can cause speech impediments, paralysis, vision loss, and memory loss. Damage to the right side of the brain can cause impulsive behavior, while damage to the left side of the brain can lead to cautious and indecisive behavior. Strokes occurring in the brain stem can affect physical movement on both sides of the body, but often do not impair cognitive function.

Sources: Centers for Disease Control and Prevention, National Stroke Association, American Stroke Association

Colette Struggled with Stroke, Depression and Alcoholism

In 1988, Colette was on vacation with her husband when she was rushed to the hospital for a ruptured brain aneurysm. She was lucky to survive, but unfortunately the stroke caused permanent brain damage. She spent the next several months in physical, occupational and speech therapy.

After completing her rehabilitation therapy, Colette returned to her everyday life, which included going

to work and raising her three children. Unfortunately, she continued to struggle with her brain injury. She was easily overwhelmed at work and frequently changed jobs. She applied for disability benefits, but her claim was denied. Her frustrations eventually led to depression and alcoholism.

➔ [Read Colette's story at VinlandCenter.org/ClientStories.](http://VinlandCenter.org/ClientStories)

“Expanding the Promise” Capital Campaign Update

We are excited to report that plans for the “Expanding the Promise” capital campaign are proceeding on schedule. Construction on the expansion is scheduled to begin on September 1, 2011. The latest artist renderings of the expansion are included on this page.

You can help make the expansion a reality with a financial contribution.

Your charitable donation of:

- \$126,000 would cover the cost of a green roof on the main entrance building.
 - \$55,000 would cover the cost of an elevator for our new building.
 - \$17,500 would build a client bedroom.
 - \$10,000 would buy dining room furniture.
 - \$2,000 would buy a new treadmill for the expanded fitness center.
 - \$250 would provide a new computer workstation for our clients.
- ➔ Support the “Expanding the Promise” capital campaign online at VinlandCenter.org/Donate.



Entrance View: The new building will connect to the north-side of the existing Women’s Wing and Main Entrance. The new building will form a U-shape around Vinland’s existing north parking lot.



Northwest View: The expansion will add 20 beds to Vinland’s residential chemical health program. The rooms will be on the top two levels of the building. The basement level will include a loading dock and a new kitchen.



Southwest View: This is the opposite side of the building from the Entrance View. The floor-to-ceiling windows will be the west-facing walls of the new reception and dining areas. The windows will allow for lots of sunlight and provide stunning views of Lake Independence.



Trauma-I

75%

Seventy-five percent of women and men in substance abuse treatment report histories of abuse and trauma, according to the Substance Abuse and Mental Health Services Administration (SAMHSA).

Informed Services

An Approach to Treatment Aimed at Reducing Triggers and Avoiding Re-traumatization

By Duane Reynolds, LSW, LADC, BCCR
Associate Director, Vinland National Center

Meet Emily, a 30-year old woman struggling with addiction. As a young girl, Emily often witnessed her parents arguing. The arguments involved a lot of shouting and pushing. If her parents had been drinking, then the arguments were especially violent: Emily witnessed her father beat her mother on multiple occasions. Emily was afraid of her parents when they drank because they would become physically rough with her, grabbing her by the arms and pushing her around.

When she was four years old, her parents divorced and her father moved to a neighboring town. After the divorce, Emily rarely saw or spoke with her father. Her mother had a string of boyfriends who abused alcohol and drugs, often in front of Emily. Many of the boyfriends were physically abusive towards Emily's mother. The police were often at Emily's house in response to domestic violence complaints.

When Emily was 12 years old, her mother moved out of state with a boyfriend and Emily was sent to live with her grandmother in another town. At her new school, Emily became friends with kids who used alcohol and drugs. Emily became sexually active at the age of 13. She did poorly in school, so she dropped out when she turned 16. Angry that she had dropped out of school, Emily's grandmother kicked her out of the house and Emily moved in with her boyfriend.

Emily and her boyfriend both used meth, and they sold drugs to support their habits. Emily was arrested numerous times before she turned 21. She was in and out of jail for a variety of offenses. At the age of 25, Emily attended her first treatment program, but she felt isolated from the other clients. She did not share stories about her childhood in groups or with her counselor. Subsequent attempts at treatment over the next 5 years had similar results.

At the age of 30, after another drug-related charge, Emily was court ordered to attend drug treatment at Vinland Center. This time, treatment was different for Emily. During her treatment at Vinland, Emily's counselor encouraged her to talk about her childhood and helped her process her feelings of shame and resentment surrounding her childhood trauma. For the first time ever, Emily felt comfortable sharing her story with other people.

Emily is a fictional person, but her story is a compilation of multiple clients I have met at Vinland Center. Stories like Emily's are the expectation when counseling individuals with substance abuse issues and co-occurring mental health issues.

What Causes Trauma?

Trauma occurs when someone's response to an external event overwhelms their coping skills. The more times an individual is exposed to traumatic events, the greater the impact on their mental and physical health. The types of traumatic experiences that lead to long-term mental health issues are usually caused by prolonged and repeated experiences that occurred before adulthood. These experiences can include sexual abuse, physical abuse, severe neglect, repeated abandonment, and psychological abuse. People who repeatedly witnessed these experiences are also victims of trauma. The long-term effects of trauma are disempowerment and disconnection from others.

Pervasive in Society

The Adverse Childhood Experiences (ACE) Study is a collaboration between the Centers for Disease Control and Prevention (CDC) and Kaiser Permanente. Between 1995 and 1997, more than 17,000 individuals



\$161 Billion

In 2000, ACE Study researchers estimated the cost of untreated trauma-related alcohol and drug abuse in the United States at \$161 billion.

provided detailed information about their childhood experiences of abuse and neglect. Researchers compared the incidence of childhood trauma to adult health and well-being.

Roughly one in five respondents to the ACE Study reported three or more traumatic childhood experiences. Researchers discovered that these individuals had higher rates of alcohol and drug abuse, depression, domestic violence, sexually transmitted diseases, and heart disease.

Post-Traumatic Stress Disorder

Among the general public, post-traumatic stress disorder (PTSD) is most commonly associated with combat war veterans, but it can develop in any individual who has survived a traumatic event. In fact, PTSD rates are highest among women who experienced childhood trauma. Over the course of their lifetimes, 10% of women and 5% of men will experience symptoms of PTSD.

One-third of people exposed to trauma develop PTSD. Men report higher incidences of trauma, but women are more likely to develop PTSD if exposed to trauma.

Symptoms of PTSD include re-living or re-experiencing an event, avoiding situations that remind a person of an event, feeling numb, and feeling anxious.

Common in Treatment

Research conducted in the past ten years has dramatically increased awareness about the prevalence of trauma among people seeking treatment for alcohol and drug abuse.

People dealing with the life-long effects of trauma are no longer seen as a subgroup. As the following

statistics reflect, trauma is pervasive in the treatment setting. According to the Substance Abuse and Mental Health Services Administration (SAMHSA):

- 75% of women and men in substance abuse treatment report histories of abuse and trauma.
- 97% of homeless women with mental illness report severe physical and/or sexual abuse.
- 12%-34% of individuals in substance abuse treatment have PTSD.

Trauma-Informed Services

Every individual seeking treatment for substance abuse, even those not showing symptoms of PTSD, should be asked about past trauma.

There is some evidence that patients with PTSD fare worse in traditional substance abuse treatment than patients with other types of co-occurring disorders. PTSD does not go away with abstinence from substances. In fact, symptoms are widely reported to become worse with initial abstinence.

For an organization to become a trauma-informed service provider, staff members must change their approach to interacting with clients. A common example is a shift from “What is wrong with you?” to “What happened to you?”

Dr. Roger Fallot, a clinical psychologist and a well-known developer of trauma services, identified the following core principles of a trauma-informed system of care:

- **Safety:** Ensuring physical and emotional safety.
- **Trustworthiness:** Maximizing trustworthiness, making tasks clear, and maintaining appropriate boundaries.
- **Choice:** Prioritizing consumer choice and control.
- **Collaboration:** Maximizing collaboration and sharing of power with consumers.
- **Empowerment:** Prioritizing consumer empowerment and skill-building.

Sources: Centers for Disease Control and Prevention, Substance Abuse and Mental Health Services Administration, National Council for Community Behavioral Healthcare.

Continuing to Grow

Vinland Welcomes New Staff and Interns

Renee

Vinland is pleased to welcome Renee Olson as the new administrative associate. Renee has a degree in business management from Rasmussen College in St. Cloud. Renee will be assuming the responsibilities of two part-time employees – Sally Gonko and Judy Tripp – who are both retiring.

Sally worked at Vinland for more than 23 years, and Judy worked here for 4 years. Best wishes to Sally and Judy in retirement!

John

John Piacquadio is a chemical health intern for Vinland's Outpatient Chemical Health Program located in Minneapolis. He is currently attending Hazelden's Graduate School of Addiction Studies. He has a dual bachelor's degree in fine arts and religious studies from the University of Connecticut.

"After I was laid off from my corporate job, I had time to think about what I really wanted to do. I decided to pursue addiction counseling," John said. "I'm not quite sure what I was expecting before my internship started, but my experience so far has really broadened my understanding about the challenges facing people living with brain injuries."

Pamela

Pamela Anderson is a chemical health intern for Vinland's Outpatient Chemical Health Program located in Minneapolis. She is currently earning a bachelor's degree in addiction counseling from Metropolitan State University. She expects to graduate in December 2011. In addition to being an intern, Pamela also works at Vinland as a Human Services Technician.

"I really like when former clients call or visit to let us know that they're doing well and that their lives are going somewhere," she said. "I hear from clients all the time that Vinland was a life-changing opportunity." •



1 / Renee Olson, new administrative associate

2 / John Piacquadio, chemical health intern

3 / Pamela Anderson, chemical health intern



3675 Ihduhapi Road
PO Box 308
Loretto, MN 55357-0308
VinlandCenter.org

Nonprofit Org.
U.S. Postage
PAID
Loretto, MN
Permit No. 4

Address Service Requested

Find Us Online



About Vinland National Center

Vinland National Center is a 501(c)(3) non-profit organization that enables individuals with multiple disabilities to live productive and fulfilling lives through a whole-person approach that addresses the mind, body and spirit. Vinland's programs include behavioral health services with a focus on substance abuse for people with cognitive disabilities, vocational services and supportive housing.



Donate Online

Make a difference!

Go online to learn how your donation can make a difference. Even a small donation can make a profound difference in someone's life.

Secure online donations

We use a secure online donation form for your convenience.

Questions?

Call 763.479.4545

VinlandCenter.org/Donate

