



Bradley Hospital
A Lifespan Partner

SPRING 2015

Free the Future

A PUBLICATION FOR FRIENDS AND SUPPORTERS OF BRADLEY HOSPITAL

Reflections from an OCD Milieu Therapist



Tom Kelley working with patient

Imagine your family has an unwanted guest living with you 24/7. It is the enemy, taunting your child with scary thoughts that result in repetitive, compulsive behaviors to keep bad things from happening. This is the hallmark of Obsessive Compulsive Disorder (OCD), and for the child who suffers, and their family, this unwanted guest quickly begins to rule their lives. Desperate for help, families travel from all over the world to Bradley Hospital for one of the most successful OCD treatment programs for children and adolescents ages 5-18. With a long waiting list, the Intensive Program for Obsessive-Compulsive Disorder uses a milieu-based intensive treatment model (treating OCD wherever it occurs, not just at the hospital), providing treatment three hours a day, five days a week, including home-based services. Meet Tom Kelley, a milieu therapist in our OCD program. Tom works daily with patients and their families helping them battle the paralyzing anxieties and fears at the core of OCD. He shares an insider's perspective on the program:

“When kids come into the program, they’re scared to death. They’ve been suffering with anxiety for so long; they don’t know what’s going to happen. I always assure them they aren’t going to tell me anything that I haven’t heard. They all come in ashamed of the thoughts in their head and the bizarre behaviors they do to make sure nothing bad happens. When I tell them I know other kids who do the exact same thing, it helps them to relax and feel more comfortable.”

My typical day either begins or ends at the patient’s house, working with the child and family. The rest of the time, I am working with them at Bradley Hospital. Going to the homes we can help them face their fears and compulsions as they happen. Take for example one patient that was so afraid of being contaminated, he would shower for 2-3 hours every morning and couldn’t touch some of his favorite things. His OCD caused him to miss out on school and playing with his favorite toys. His hands and arms were raw and red from over-washing. Using a form of cognitive behavioral therapy called exposure and response prevention (ERP), I worked with him to break down the shower routine and attack his anxieties. Gradually, we were able to take parts of the routine away from his OCD and give back control to the child.

This is a job you never really leave ... even when you go home at night. In some ways, we become a part of their family—and when the program is completed you know you’re sending them off as a different child. It’s always great when a patient comes back and tells the new program group how he beat OCD and that they can too.

Knowing patients are on the waiting list to get into the program is really hard. But because of limited staff and space we just can’t reach every child who needs us right now. It’s hard to see patients waiting, knowing they aren’t getting any better as they wait.”

THE HEALING ARTS

Through the world of healing arts, children who might not verbally express their emotions can still share what they are feeling in a way that is safe and comfortable for them. Extending beyond traditional art therapy, healing arts bring patients into the world of movement, performance art and improvisation, yoga and music. These alternate forms of therapy have quickly become a favorite for patients and staff alike at Bradley Hospital.

Jordan Butterfield of Trinity Repertory Company makes weekly visits to the adolescent inpatient unit and teaches two acting classes focusing on improvisation, acting and playwriting. Improvisation allows the group to initiate conversations and analyze body language, tone of voice and gestures. Patients build confidence, learn how to express their emotions in a healthy way, and have fun with their peers. "I tell them I'm preparing them for life and for their day. You wake up every day not knowing what you're going to say to your parents and therapist. You have to listen and create. They learn eye contact and body language and it turns into a social skills or coping skills class. They learn how to cool down and have an outlet to experience feelings," Jordan shares. "There is lots of laughing and some of the patients and staff don't want me to leave, wishing I could be there twice a week!"

"Giving our patients alternative ways to express themselves is an essential part of treatment. Being exposed to multiple forms of artistic expression gives patients not only hope, but increased self-esteem. Having new skills and tools to navigate their worlds once they leave Bradley Hospital is invaluable," says Maegan Gubata, Director of Healing Arts at Bradley Hospital. "Utilizing the arts as a source of healing helps patients find their voice when words are sometimes just not enough."

Movement through yoga and dance are also much loved elements of the healing arts program. Shri Yoga of Pawtucket teaches six yoga classes a week to a variety of patient groups at Bradley Hospital, as well as hosts students from the Children's Residential and Family Therapy program at their studio for a weekly class. Yoga brings them more than just increased physical strength and balance; it builds emotional strength and balance as well. It is also a phenomenal stress reducer and is just plain fun. From yoga, improvisation and music, patients are able to experience a break from their normal routine and look forward to the alternative forms of expression. They build mastery of skills which increases self-esteem, improves social skills and often decreases feelings of frustration.

"The Healing Arts Program allowed me to slow down and take a break ... to breathe and escape a long stressful day," one child recently said. "When I'm doing these activities, I feel relaxed and calm."

Jordan Butterfield

BRAIN CHANGES IN KIDS WHO CUT THEMSELVES

It's an epidemic across the country: young people are cutting themselves with sharp objects like razor blades, nails or glass, not as a way to commit suicide, but as a way to physically distract themselves from their emotional pain. While cutting is not done to kill themselves—and is thus not considered a suicide attempt—cutting does increase the risk of suicide in the future. Determining who is at this increased risk is critical for mental health professionals, as startling new data from the Center for Disease Control shows that suicide is now the second most common cause of death for young people in the US (second only to preventable accidents).

At Bradley Hospital's Pediatric Mood, Imaging and NeuroDevelopment (Pedi-MIND) program, researchers are examining the brain changes behind cutting and first time suicide attempts. To do this, they are collecting MRI brain scans of teens who have cut themselves but have not yet attempted to end their lives. They will then follow these teens for 18 months to see which kids keep cutting, and which kids make a suicide attempt. The underlying belief is that the brain scans of those who do not attempt suicide will look different from those who do try to end their lives.

"If we can identify what is going on in the minds of the kids that cut themselves, and what brain changes are associated with making a subsequent first suicide attempt within a year and half after the scan, we have a way to improve the way these very at risk kids can be diagnosed and treated," explains Pedi-MIND Director, Daniel Dickstein, MD. "We hope to find the brain change that predicts if a first time suicide attempt will be made because preventing a first attempt is the most important thing we can do. If they don't make a first attempt, they won't make another."

Dr. Dickstein's team is currently seeking funding for this project, including from the National Institute of Health (NIH), and to date, six patients have been scanned. Each patient's family has expressed how important this research is and how they hope it can one day help families like theirs.



Daniel Dickstein, MD

The clinical and treatment implications of this research could be huge. *"If biology can help guide us in knowing who will make a first suicide attempt, it could one day be used in emergency situations," says Dr. Dickstein. "With this science, maybe we could get suicide off the list of top causes of death. This would mean a lot to me, not only as a psychiatrist but as a parent as well."*

Dear Dr. Dickstein,

I don't want to be overly dramatic, but you saved our family in every way a family can be saved. You stood by us for a long time. You never quit on us, even after our teenage daughter screamed at you in the waiting room, when even I thought "who would want to take this on?" There were so many challenges. But you gave us tools, helped us develop skills we didn't have, and you gave us all hope. You empowered us as a family and we are stronger for it. We are happily on the other side and for this we are grateful. Our daughter is doing so well and is now a student in college.

Thank you for being our hero. You were always there for us.

We will always be grateful to you,
A Bradley Family



Sydney shared her experience as a patient at Bradley Hospital during the 2014 Bravo Bradley Gala. Below is her poem, chronicling her experience with cutting and how with Bradley's help she is standing strong. Thank you, Sydney!

The Beginning

I have fought wars in that bathroom.
 Wars.
 Skin versus blade.
 Which will defeat the other?
 Which will come out on top?
 Most days, the razors win.
 The razors know the weaknesses,
 the soft spots that call for them in deepest night
 right before waking from a good dream.
 They know the war tactics.
 They are experienced in hand to hand combat
 and they know where to aim the gun.
 They know how to shoot.
 And they are strong.
 But today...is different.
 Today,
 I stand.
 Soldiers behind me,
 Future ahead of me,
 I stand.
 Yes, I have fought mighty wars in that bathroom.
 On that cold tile floor,
 with a decision.
 I have battle scars to prove it.
 But today, the white flag will not rise.
 No.
 I rise.
 Onto my feet,
 Still, I rise.
 And I fight the war with strength.
 I fight the war with hope.
 I fight the war with every intention of winning.
 Yesterday, I was weak.
 Tomorrow, I may be weak.
 But today, I am strong.
 Today, I have won the war.

SAVE THE DATE



**Bravo
Bradley**

Next Stop: San Francisco!

Friday, June 5, 2015
Rhodes on the Pawtuxet

PRESENTING SPONSOR 

For more information, please call 401-444-3761 or visit
giving.lifespan.org/BravoBradley.



Bradley Hospital
A Lifespan Partner