

LCMH *from A7*

Chief Scott Shepherd. “So we might have a little more insight on people because we’re a small town and that does help us determine what would be the best course of action.”

Though officers have training in de-escalation, their primarily role in this capacity is to direct people to the care they need.

“I think it’s important to understand that in servicing mental health, I don’t know that we provide anything more than a mechanism to get people to where they may get help,” Shepherd said. “We’re not clinicians and we’re not doctors so we don’t have the ability to go, ‘Yes, this is bi-polar’ or ‘This is depression.’”

Even so, suicidal cases are potentially dangerous for officers and a degree of discernment is required in each situation.

“There are times when people are armed with whatever weapon they

choose to grab,” Shepherd said. “We have to determine what is going to happen if we do nothing to taking them physically into custody and what all of that looks like in between.”

For less severe cases, City of Cottage Grove has been known to strike deals with people who need a nudge in the right direction.

“The municipal court judge has sentenced people to time in our jail for certain crimes within town and he has offered time-for-time off their sentence if they are able to complete a mental health program,” Shepherd said. “I think that’s a huge thing because then you don’t get the snowball effect.”

Overall, Shepherd feels the police force’s close relationship with local organizations has helped direct the flow of people with challenges to the proper channels, much of which is owed to the relatively broad opportunities the small city offers.

“I don’t want to say it’s as good as it can be,” Shepherd

said, “but I perceive that there are probably places that don’t have as much as us even though there are times that we want more. And I think that everybody that’s in Cottage Grove is pretty good about collaborating with each other.”

Unfortunately, the city still has its share of those who fall through the cracks for one reason or another. Shepherd recalled individuals with mental health needs who struggled even when care was provided.

“There are people who have received a lot of service. They’ve received housing. They’ve received treatment. They’ve been afforded opportunities,” he said. “I don’t know where that disconnect is there. I just know that there was housing and now there’s not. There were daily meds and now there’s not. So getting somebody a place to be is a good end goal, but it doesn’t ensure success.”

Whatever the reasons, it is still hard to argue that the city suffers from a dearth of programs. Local organiza-

tions like South Lane Mental Health provide a core support mechanism for the community.

“When I look at Cottage Grove, we have so many of these great resources,” said Sands. “The key is recognizing those people that are falling through the cracks and feeling ostracized by that community.”

For some, simply walking through the front door can make all the difference.

‘Soaking in the care’

Local resident David Smith (not his real name) found himself in a downward spiral of psychological pain and challenges which had grown to seem insurmountable since moving to the area years ago.

Smith had gone as far as planning where and when to end his life, giving himself a one-year deadline before deciding to go through with it.

“So I had a date to make a date,” he said. “You stop seeing possibilities and you know your pain ends. The pain begins for other people, though.”

At his daughter’s urging, Smith decided to walk into South Lane Mental Health for help.

Though Smith initially came in for help regarding a disability application, the nonprofit was quick to pick up on a deeper problem.

“They have a little 10-point test — really simple questions to gauge the danger of when someone is considering a suicide,” said Smith. “I didn’t have a schedule, but I had half the questions answered. I knew when and where I would do it.”

Though a premeditated schedule to end one’s life is certainly a red flag, some suicides can be owed to impulsivity as well.

“I was in that place where the last couple of pieces could have come together,” said Smith. “Fortunately, we were able to put it together so that I could keep making appointments.”

Smith’s first challenge was to identify symptoms and face difficult realities about his material and psychological needs.

“It can be discouraging to have to evaluate and docu-

ment just how bad things are,” he said. “You have to acknowledge that you may never get to the level contribution that you want or that those expectations demand, but it doesn’t mean you’re not contributing. People are still valid even when they’re not contributing.”

Smith recalls that it took some time for the therapy to start showing benefits, but the wait ultimately paid off.

“Time. Talking over what had happened. Being able to unload some of it,” he said of the healing mechanisms. “It put me back in a place where I could have some normal function. ... So it did start to feel good.”

Now a year and a half into his therapy, Smith says his recovery is within grasp as he’s seen a dramatic change in his condition, both physical and mental. An issue with seizure-like symptoms went into complete remission this spring.

“Down to zero of the pseudo-seizures,” Smith said. “Then also the depression largely lifted and I was able to try doing things again. ... I became convinced by the care that was happening to me that there was validity to me — that I was worth caring about. And so I began to see that it might be possible for me to participate again.”

One of the major steps in his recovery has been a commitment to get back into the workforce. In job searching, Smith has found vocational training.

“The school felt great. I got through it and I’m now looking for new employment,” he said. “I’m pretty confident that it’s going to wind up working out.”

If he hadn’t walked into South Lane Mental Health, Smith is certain nothing would have changed.

“No therapy, no vocational training, no employment prospects,” he said. “I would’ve just remained stuck.”

Part of Smith’s process was accepting the prospect of a new frame of mind.

“They’re job is to change your mind — literally. So I needed help changing my mind about the futility of the circumstances,” he said. “I needed to change my

mind and decided to open my heart a little to new possibilities. ... In the same way that people will decide on a whim to do the suicide, I decided on a whim to break out and get a job.”

Smith also found revelation in the idea that the drive to find an end could be fulfilled by just ending that chapter of his life rather than his life altogether.

“It wasn’t required that that be the end of me,” he said.

The mere fact that someone showed interest and care in his well-being was also an uplifting and forward-moving ingredient to healing. Smith strongly encourages people to simply reach out, even if they have no intention to begin therapy.

“If you’re suicidal and unable to bring yourself to go in, at least make the phone call,” he said. “When you can’t be persistent, there are people who will be persistent for you.”

Smith credits South Lane Mental Health with its adaptability, working with his particular situation to find solutions.

“So whatever the issues are, they’ll start trying to work and find resources to ameliorate them,” he said.

For some, the humility required to reach out for help can be a hurdle, but Smith is now a proponent of healthy dependence.

“When you’re out of the internal resources to continue responding to your life, it works to borrow someone else’s to just carry on for a while,” he said. “And even if you feel like nothing is changing, it is changing. You’re soaking in that care and after a while it adds up.”

Moreover, soaking in that care is in itself proof positive of one’s validity and worth among others.

“When you’re suicidal, you start imagining nobody is going to miss you, but you will be missed. You will definitely be missed,” said Smith. “Even if people are actually upset with you and your normal interactions tend to be kind of negative, people don’t want you done and gone.”

In a small town, one mustn’t reach far to find support. Commitment by strangers to others’ well-being reverberates noticeably throughout the city and work among the local care providers sets the tone for establishing a harmonious network.

“I think that we have a great place here. I think it’s a good place to raise a family,” said Shepherd. “Like any place, we have problems. Mental health issues are one of them, but there are places that have it much worse and we’ve got it pretty good.”

The National Suicide Prevention Lifeline provides 24/7 support for those in distress and can be reached at 1-800-273-8255.



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