"That will consist of various community leaders that will come together on a regular basis to identify and prioritize issues in our community related to mental health and addiction," Shell said.

## Breaking the cycle

Of course, the specific needs of a patient can be complex and range greatly, but Reno Behavioral Healthcare Hospital is equipped to handle extended treatments for which traditional hospitals don't have the space or qualified staff.

"Our job is really to take care of people who are in an acute crisis," said Dr. Novia Anderson, director of clinical services at RBHH. "So, somebody may be experiencing suicidal ideations or have had an attempt. They may be experiencing a long-term chronic depression, anxiety, chemical dependency—substance abuse issues. Our job is to kind of stabilize and begin their process toward their recovery."

Anderson estimates about 80 percent of RBHH patients are referred from other medical hospitals or private

therapists, but anyone struggling with acute symptoms, mood or thought disorders can call for a free consultation at any time of the day or night.

"It feels like a conversation, you know. It's more of a, 'Tell me what's going on?' 'Tell me how long has that been going on for you?' 'What have you tried?'" Anderson said. "You're looking for those things that, it's become an issue if it's truly impacting your work, your relationships and your ability to laugh."

Patients might be referred to an outside community program if their symptoms don't warrant admittance to one of the in-house treatment programs, wherein they're separated by age and condition for their own safety and for more effective care protocols. RHBB also has the only Partial Hospitalization Program in Northern Nevada, wherein patients can receive care, attend meetings and socialize in a controlled space for part of the day, before being released on their own recognizance in the evenings.

"We have four units that are open right now," Anderson said. "We have a unit [for] mood disorders—so, it's depression, it's anxiety, those kinds of things. And then we have a thought disorder unit, which is where we would have people with maybe their first psychotic break or bipolar disorder with psychotic features. Then we have the adolescent and pediatric unit. We go 5 to 12 for our pediatrics and then 13 to 17 for adolescents. And then we have our substance abuse unit that is dealing with co-occurrence. So that means they could have substance abuse with depression or anxiety or any other diagnosis." RBHH also houses the only inpatient eating disorder clinic in the area, which, Anderson said, unfortunately only treats adult patients at the moment, but they're able to treat children with co-occurrence of eating disorders and other symptoms through their pediatric ward. Conversely, the hospital is also preparing to open a senior unit.

"For some people, it's beneficial to be with your own age group," Anderson said. "You have your own life experiences. You're kind of in that same stage with each other. They deal a lot with grief and loss, you know, beginning stages of dementia, anxiety, depression, all of those things."

Treatment can include traditional medication and talk therapy with doctors "The economy has been and licensed clinicians, but getting better, the patients also have access to recreation, including a population's growing, gym and basketball court, yoga and other physical but yet the mental exercises, as well as art, health and addiction music and dance therapy. The point, Anderson said, is issues continue to rise." to provide a structured environment to give patients the Steve Shell, CEO of Reno best chances for recovery **Behavioral Healthcare Hospital** 

outside of the hospital. Anderson has lived in Nevada since 1993, work-

ing at the Desert Parkway Healthcare Hospital in Las Vegas before returning to Reno when RBHH opened. She said she's personally witnessed how homelessness, addiction and mental illness are linked and have been exacerbated by the housing crisis and economic downturns in the city. Facilities like RBHH, she said, give patients the best chance of breaking the cycles that might have put them there in the first place.

"If you're hungry and you don't feel safe and you don't have a place to go, kind of, mental health is going to get pushed down to the bottom, and so that just makes this vicious cycle for all of us," Anderson said. "Growth is great, but with out of control growth, we lose the ability to put in that safety structure that I think we're missing."

In the end, however, Anderson believes that individuals with mental illness continue to be unfairly stigmatized in city politics and the media, often being cast as violent, untrustworthy or incapable of change. While RBHH can treat the symptoms, she hopes they can also change the public's perception of what it means to seek help.

"I think people are afraid to say 'I have a mental illness," Anderson said. "But we should get to the point where I can say that, and I can say that just like 'I have diabetes' or 'I have high blood pressure,' 'I have depression.' I'm hoping someday we get to that place where it's not seen as this big scary thing that we keep in the closet somewhere."

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