Providing HOPE

through a full spectrum of services to the most vulnerable in our community
MISSION
Improving the quality of life of people vulnerable to mental illness and addictions by providing a broad continuum of care.

VISION
A healthy community in which people thrive while managing symptoms of mental illness and addictions.

FOCUS
We serve the most vulnerable in our community: low-income people with serious and persistent mental illness, providing a full spectrum of services to an ethnic, age, and gender diverse population.

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Dear Friend of Navos,

In 2013, Navos was pleased to have many unique and exciting opportunities to expand and improve our programs and services to meet community need. Some of the year’s highlights include:

- We continued to be leaders in the integration of Primary Care and Mental Health services. Our primary care clinic, imbedded in the Burien Mental Health and Wellness Center, now has over 900 patients. By providing a “healthcare home” we are saving lives and reducing the expense and frequency of emergency room visits among the low income adult population we serve (those with serious and persistent mental illness).

- With partners Mithun Architects and BNBuilders, we began the design and construction of a new Behavioral Healthcare Center for Children, Youth and Families on Lake Burien (the current Ruth Dykeman Children’s Center campus). In 2010 and 2012, respectively, Navos merged with Ruth Dykeman Children’s Center and Seattle Children’s Home, resulting in a significant increase in expertise and breadth of services so we may more effectively treat the young and very vulnerable clients whose families look to us for help. The entire first phase of the new campus, including programs relocated from Seattle Children’s Home currently located on Queen Anne, will open by December, 2014. See page 6 for more details.

- Our organization stayed at the forefront of implementing the Engagement Model of Care (also called Trauma-Informed Care), an approach that ensures safe, calm, and secure environments with supportive care from staff that value and respect the client’s voice and aspirations. To that end, we implemented daily community meetings for our patients in the inpatient facility, and created comfort rooms for adult inpatient and youth residential programs. A comfort room is a designated space that is designed in a way that is calming to the senses and where the user can experience visual, auditory, olfactory, and tactile stimuli. A comfort room is furnished with items that are physically comfortable and pleasing to the senses in order to provide a sanctuary from stress. Importantly, comfort rooms reduce the need for the use of seclusion and restraint. See page 8 for more details.

- We expanded our infrastructure and administrative capacities to support the growth of our critical programs. We are continuing to improve on the use of our electronic medical records to ensure we have a solid foundation for quality care and our capacity to report improvements in wellness that result from that care.

Thank you for partnering with us as a supporter of Navos and for caring for the people we serve. Success is achieved through the hard work of our dedicated employees, volunteers, Board of Directors, the commitment of you, our funders and donors, and the remarkable resiliency of our clients.

David M. Johnson, Ed.D, LMHC
Chief Executive Officer
## The Continuum of Care

Providing Individualized Care and Family Support

### Infant and Child (0-5)

Our program promotes healthy social and emotional development early in life by working with families and caregivers to increase their confidence and capacity in parenting.

- Child-parent therapy with an emphasis on the child-parent relationship
- Counseling for families involved with dependency court
- Professional consultation to early childhood service providers

### School-Age Children (6-12)

Our family-centered services strive to create a successful transition throughout each child’s development by introducing the necessary tools and skills to make this journey easier for both the child and their family.

- Family therapy and parenting strategies
- Office, community, and school-based counseling
- Peer support for parents and caretakers
- Residential treatment

### Youth and Young Adult (13-21)

When teens and young adults face situations like family problems, trauma, drug and alcohol abuse, or just the everyday issues with growing up, we work to wrap around their families and support networks to help maximize potential for recovery.

- Office, community, and school-based counseling
- Chemical dependency prevention and treatment
- LGBTQ youth empowerment program
- Peer support for parents and caretakers
- Residential treatment

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**Parent:** “While I am still learning how to be a parent, I am more confident in what I am doing, and my relationship with my daughter is so much better.”

**Parent:** “Our therapist has helped us through such hard times and is always there for us. She listens and makes suggestions that truly work for my family.”

**Client:** “Being here has really helped me. I can feel and see the improvement in myself and it feels awesome.”

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Hannah was the featured speaker at the Seattle Children’s Home “A Magical Night” gala in November. Hannah and her therapist posed for pictures.

“I was born into a horrible family. My mother was a drinker, smoker and addicted to prescription pain pills, and tried killing herself a few times. My dad also drank and was addicted to drugs. When I was little my parents divorced so I spent weekends with my dad and weekdays with my mom. One night when I was with my dad, he raped me. I was only four years old.

When my mom found out she moved my sister and me to live with my aunt in Washington. I was scared. I was in a new state, a new house and in a new neighborhood. When I started school, I didn’t know anyone. I was so sad and lonely. When I would come home from school I would run in my room and lie down and cry.

In middle school I met a girl who became my friend, and she had some weed and said I should try it, so I did. From then on I was smoking, and soon afterward I was drinking. One day I found a razor and while I was crying I carved a broken heart on my wrist, because that was how I felt.

Another time when I was really sad, I couldn’t take it anymore, and I threatened to kill myself. I was in and out of the psychiatric hospital many times. But my cutting continued, so I was referred to the McGraw Residential Treatment Program at Seattle Children’s Home.

The therapists at McGraw helped me get through the hardest thing ever — overcoming my trauma. With their help I learned the skills I needed to cope with the trauma I experienced as a little girl.

I was discharged from McGraw, I am back living with my aunt and I am back in school. I finally feel like I’m ready to handle the world. I feel like I can handle anything hard that comes my way.”
Today, Jason has a good job, and is maintaining positive, non-abusive relationships. Jason has a good outlook on life. But at age 26, Jason had been incarcerated a number of times for various domestic violence charges.

If Jason continued on this path, he may have committed additional acts of domestic violence and received more significant jail time. Jason was referred to the Domestic Violence Treatment Program at Navos; he needed to change the pattern of abusive behavior that contributed to his relationship struggles.

During Jason’s group therapy sessions the group took time to look specifically at the impact of oppression on the development of black male identity, and how for some black men living in oppressive environments, violence starts to make sense and then generalized to personal relationships. Over time, Jason seemed to gravitate to this focus and was open to a deeper level of discussion and reflection. He opened up about his experiences as a young man growing up in a neighborhood where drugs and violence were the norm. He shared stories about family and friends who have been incarcerated. He was honest about how his views about women and relationships negatively influenced his intimate partnerships. Simply stated, he began a journey of accountability. Instead of talking about the actions of others and how he had been persecuted by them, Jason shifted his focus to himself and what he needed to accomplish to be the man he wanted to be. The father to a young son, and having been estranged from his own father, Jason was determined to be a better role model for his own child.

Client name and picture has been changed to protect client confidentiality.
## The Continuum of Care FOR ADULTS

### PROVIDING HOPE, RECOVERY, AND WELLNESS

<table>
<thead>
<tr>
<th>ADULT — INPATIENT (18+)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Utilizing trauma-informed care, our 68-bed inpatient facility is the difference between life and death for some of our community’s most acutely mentally ill residents who are in life-threatening crisis.</td>
</tr>
<tr>
<td>• Individualized treatment and comprehensive discharge planning</td>
</tr>
<tr>
<td>• 24-hour nursing and mental health services</td>
</tr>
<tr>
<td>• Art, movement, and group therapy</td>
</tr>
<tr>
<td>• Psychiatric and internal medicine services</td>
</tr>
</tbody>
</table>

### ADULT — OUTPATIENT (18+)

We help adults meet their desired goals of meaningful work, satisfying relationships, and contribution to society despite the challenges of mental and emotional illness. Navos is one of the first mental health centers nationally to offer a comprehensive Health Care Home where clients can receive both mental health services and primary care.

| • Case management with housing, employment, and other support services |
| • Medication management and co-occurring substance abuse treatment |
| • Primary care |
| • Peer support and training program |
| • Domestic Violence survivor and offender treatment |

### OLDER ADULT (60+)

Our services help older individuals live full, rewarding, and safe lives. We partner with our clients, their families and support systems to develop a safety net of care and community. Our team comes to individual residences, adult family homes, or assisted living facilities in order to meet our clients where they are.

| • Assessment and 24-hour crisis support |
| • Case management, from intervention to individualized psychiatric care |
| • Peer support groups |
| • Residential treatment |

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**Client:** “If it weren’t for Navos, my mind wouldn’t be where it is today, thanks to the staff and doctors for helping me get better.”

**Client:** “I received the chance for a new beginning with the help I received at Navos. Through my recovery I have reconnected with my family, friends, and community.”

**Client:** “I rely on the staff at Navos to help point me in the right direction, and give me the help I need.”
We are proud to be building a new Behavioral Healthcare Center for Children, Youth & Families on our Lake Burien campus. Through this project, we will integrate and expand services for vulnerable youth and families by bringing together programs provided by Navos with our partners, Ruth Dykeman Children’s Center and Seattle Children’s Home. The center will provide programs for young children, school-aged youth, teens, young adults and families; and create a safe, therapeutic environment where children who have suffered abuse, neglect and other significant traumas receive the treatment and support they need to heal.
New Behavioral Healthcare Center for Children, Youth, and Families

The 7.5-acre campus will include space for outpatient programs for children, youth and families, housing and support services for young adults transitioning from foster care to independence, inpatient and residential treatment programs for children and teens, a primary care clinic, a school for youth in residential treatment, outdoor recreation areas, space for other youth service providers, and studios for adjunctive therapies including art, dance and music. The natural setting on Lake Burien and a comprehensive continuum of services will provide a protected sanctuary for healing and hope.

A new program, Independence Bridge, will provide housing and support services for young adults 18-24 years old aging out of foster care and at risk of homelessness. Independence Bridge will provide affordable, stable housing and access to a range of individualized support services including mental health services, chemical dependency treatment, primary medical care, employment services, educational support, life skills mentoring, financial planning, legal advocacy and peer support, giving them a strong foundation for their independent adult lives.

For more information or to tour the new campus, please contact Alice Braverman at alice.braverman@navos.org or call 206-933-7032.
Treating Trauma

At Navos, we help low-income children, youth and adults with emotional and mental health issues to improve their lives. The vast majority of the people we help have experienced severe trauma during their life including abuse, violence, neglect and victimization, often beginning in childhood.

Trauma results from an event, series of events, or set of circumstances that is experienced by an individual as physically and/or emotionally harmful or threatening. This has lasting adverse effects on a person’s functioning and mental, physical, social, emotional and/or spiritual well-being. Navos is a leader in implementing a new trauma-informed model of care (TIC) throughout all of our programs and campuses – creating a therapeutic, healing environment and eliminating potential triggers that could re-traumatize people in our care.

Inpatient treatment can trigger anxiety, fear and violent behavior among individuals with trauma histories. The use of seclusion and restraints can further traumatize patients as well as caregivers.

As a critical component of TIC, we have replaced rooms that were used for seclusion and restraint and instead, created comfort rooms in our inpatient programs for both youth and adults. The comfort rooms are calming spaces designed to facilitate the patient’s learning to practice self-regulation and stress management. Comfort rooms are more respectful of patients than seclusion and restraint, which can be experienced as punishment. They provide patients with the opportunity to learn and practice their own coping mechanisms and self-regulation skills.

WHAT IS TRAUMA-INFORMED CARE?

Behavioral health services that incorporate:

- A thorough understanding of the profound neurological, biological, psychological, and social effects of trauma and violence on the individual.
- An appreciation for the high prevalence of traumatic experiences in persons who receive mental health services.
- “Universal precautions” by providing programs and services that are sensitive to a trauma survivor’s individual vulnerabilities and triggers.
“I am Susan, I have a bipolar disorder, and I am on my journey to recovery.

My parents did the best that they could. I don’t blame them for not understanding how their choices and behavior affected me, but the emotional and mental abuse they inflicted on me when I was young has affected me through my adult years.

I was diagnosed with bipolar disorder when I was a teenager; the process of accepting and learning to live with it has been a long one. I have suffered from depression for over thirty years, while battling thoughts of suicide. I have been on and off medication for many years, and struggled to find a counselor I wanted to stay with.

I began with Navos a little over 2 years ago. At first, I really couldn’t see myself coming here, I felt I didn’t belong! I finally gave in, and started taking Dialectical Behavior Therapy classes, which is a treatment designed for individuals with self-harming behaviors and suicidal thoughts. I started to see a counselor again. I began to understand that perhaps I did belong here, and I started to focus on my recovery.

Last February, I suffered a subarachnoid hemorrhage, a form of a stroke. All strokes are bad, and this was no exception. I spent five days in the hospital. The good news is there were no aneurysms and with time I recovered.

This event deeply affected me. It made me realize I needed to focus on me, my recovery, and my life. So, I began to work in earnest with the tools I was learning at Navos. I have learned to let go of the past and live mindfully. I am taking the tools I have learned from the classes and my counselor and applying them to my life, every day.

Life can be difficult. Sometimes we need support. I got mine at Navos.”

Client name and picture has been changed to protect client confidentiality.
Kathy is a domestic violence survivor. She has a long history of abusive relationships, most recently with the father of her youngest child. Kathy fell into a deep depression that became so unmanageable and all-consuming; she started having thoughts of suicide.

Kathy was referred to the Domestic Violence Program at Navos. With the help of her therapist, Kathy began a long process of healing. “By talking about my past trauma, I began to cleanse my mind and soul,” Kathy says. “My therapist helped me understand that I never learned to set healthy boundaries for myself, and that a lifetime of abuse made it easy to fall into unhealthy relationships and patterns.”

Since Kathy started in the program, she has ended all relationships that are harmful to her. She has a home, a good job and big plans for her future. Kathy says, “I have come so far in such a short time. I am no longer a victim of domestic violence, I am a survivor. I no longer sense that I am destined for greatness, I know I am.”

Client name and picture has been changed to protect client confidentiality.
Financial Information

TOTAL VALUE TO THE COMMUNITY: $54,116,000
- Outpatient and Specialty Services: 45%
- Residential Services: 16%
- Inpatient Services: 25%
- Management and General: 13%
- Fundraising: 1%

TOTAL REVENUE: $52,374,000
- State and County Public Mental Health: 69%
- United Way: 1%
- Medicare: 8%
- Medicaid: 13%
- Private insurance and self-pay: 5%
- Other revenue, interest, and contributions: 4%

Demographics Served

TOTAL SERVED: 11,499*

INCOME (VS. NATIONAL POVERTY LEVEL**)
- Below Poverty Level: 72%
- At Poverty Level: 14%
- Above Poverty Level: 2%
- Not reported: 12%

AGE RANGE
- 0-5: 3%
- 6-18: 35%
- 19-24: 6%
- 25-59: 40%
- >60: 16%

RACE/ETHNICITY
- African (Ethnic): 3%
- American Indian: 2%
- Asian/Pacific Islander: 6%
- Black/African American: 13%
- Hispanic: 16%
- Multi-Racial: 10%
- White/Caucasian: 50%

GENDER
- Female: 54%
- Male: 46%

* In collaboration with our consortium partners. **Currently $23,850 for a family of four.
We are grateful to the individuals, families, corporations and foundations for their investments in support of our mission. This list reflects gifts made between January 1 and December 31, 2013.

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2013 NAVOS REPORT TO OUR COMMUNITY
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We serve clients all across King County. Many services are provided in schools, nursing homes, primary health care settings, child care centers, and in the homes of our clients — wherever our clients will be most comfortable receiving our help.