



# DAKOTA MEDICAL FOUNDATION

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## 2018 ANNUAL REPORT

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A growth-oriented organization does three things well:

1. It invests in its core competencies and outlines a clear path to impact.
2. It surrounds itself with smart, passionate, engaged people.
3. It rapidly innovates to see what works and discards what doesn't.

While we did all three this year (to varying degrees of success), the third item defined our 2018. When we look back five, 10, or 20 years from now, it's our hope that this period in Dakota Medical Foundation's history will be defined by our desire to be 10x thinkers and doers. We want to improve things by a factor of 10 instead of by just 10 percent. It's the difference between revolution and evolution.

When we were approached by a pioneering physician and a philanthropic entrepreneur this summer to help develop a new concussion-treatment protocol for local student-athletes, we could have come up with 1,000 (short-sighted) reasons to not get involved:

"Giving Hearts Day is right around the corner."

"We're hosting too many trainings this month."

"That's not in the budget."

Instead, we saw the incredible potential for hyperbaric oxygen therapy to transform the lives of not only kids in our region but also our local veterans. Hundreds of HBOT treatments and dozens of patient testimonials later, we see that we really are on the cutting edge of a revolutionary treatment.

For years, we've heard from the people on the front lines of the fight against addiction: All the resources in the world don't matter if they're not being connected to the people who need them.

The FirstLink community navigator, a position DMF helped develop and fund alongside Sanford and Essentia, is a truly innovative way to solve that problem. No longer will those who

suffer from the terrible disease of addiction bear the additional burden of having to research treatment options and understand the complexities of insurance coverage. We believe the navigator can serve as a model for countless other communities around the country.

Our approach with Giving Hearts Day has always been to maximize impact. From the introduction of online giving to teaching charities to raise their own match dollars, we're always exploring new ways to grow the region's largest day of giving in exponential, not just incremental, ways. We believe our new Charity Champion program, which recruits volunteers to become ambassadors and megaphones for charities, is a game-changer.

By giving charities, businesses, and donors the resources and encouragement to become evangelists for the causes they care about, we're creating a self-perpetuating social network that will do exponentially more good than we could ever do on our own. Word-of-mouth marketing is gold, and we're sitting on a pile of it in our volunteer Champions.

The 10x mindset can now be seen across DMF's innovation portfolio. From P5 Performance's holistic workplace wellness model to the scalable fundraising resources being developed by Impact Foundation to Lend A Hand Up's introduction of online fundraising to compete with platforms like Go Fund Me, each and every one of our major initiatives is laying a foundation to solve problems in large-scale ways.

And we must never forget why we're doing all of this. Let the following stories serve as a reminder of the people impacted by DMF's investments and efforts, and let them inspire you to join us and do more.

We work by and through others to scale impact, and we're grateful for all your help. Together, we're improving health and quality of life in our region.

**J. Patrick Traynor, JD**  
Executive Director

**Seth Novak**  
Board Chair

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# Making Workplace Wellness Great

## A Chat with P5 Chief Architect David Hunnicutt

With hundreds of organizations and thousands of employees engaged, Dakota Medical Foundation's workplace wellness initiative took some huge steps in 2018. Hear from the man behind P5, and meet some real-life companies that are all in.



*P5 Performance Chief Architect David Hunnicutt*

### What is P5, and why is it important?

P5 is an evidenced-based, user-friendly approach to helping employers create healthier, higher-performing organizations. The P5 model was developed exclusively by Dakota Medical Foundation, and currently, there is nothing like it in the U.S.

The primary reason this initiative is so important is that recent research indicates that about 80 percent of all employees, in every type of organization, are disengaged. This means their jobs largely consist of a tragic pattern that goes something like this: Get up, go to work, go home, go to bed.

Needless to say, both employers and employees are searching for a better way. We believe P5 is that better way.

### What do the five Ps stand for?

The P5 model is very straightforward and consists of five individual Ps: **Purpose, People, Places, Practices, and Performance**. Here's a quick breakdown of each:

**Purpose:** It's been said that the two most important days in a person's life are the day they are born and the day they find out why. This is the essence of the first P, Purpose. If employers expect to engage their people, they have to be committed to helping each and every person discover and put into practice their own individual purpose.

**People:** Each night, 90 percent of an organization's most valuable assets walk out the front door. A great culture is what keeps them coming back. Employers understand this. In this component of the P5 model, employers discover

how they can maximize their people's potential so that everyone - individuals, coworkers, and clients - win.

**Places:** We are all largely a product of our environment, and it's especially true of the workplace. Think about it: People are going to spend more time at work, commuting to and from work, preparing for work, and buying clothes for work than any other human activity. With this in mind, if people spend 10 hours a day in a substandard workplace, it stands to reason that it's going to take a significant toll.





Hunnicutt teaching attendees of a P5 training about the power of purpose.

## How can employers take advantage of the P5 Performance initiative?

To help all of our participating P5 partners, we've created a very clear path to impact.

First, employers begin by taking a comprehensive assessment known as Thrive-in-Five. This assessment was again developed exclusively by DMF and is quite unique.

By answering about 90 questions, business leaders and P5 members obtain a score. Armed with this information, they can not only compare their score to the total number of points possible, but they can compare their scores against the group's average (as well as with the top 20 percent). To date, more than 300 organizations have completed the inventory. This makes this assessment the largest database of employer performance that exists in North Dakota and western Minnesota.

The third P of the P5 Model shows employers how to create great work environments for everyone.

**Practices:** Here's a newsflash: Contrary to popular belief, it's not that difficult to understand how people can get healthy and stay healthy. In fact, addressing four simple things – getting enough physical activity, eating the right foods, not smoking, and managing your weight – can largely prevent 80 percent of all chronic disease.

As a result, it makes sense for employers to address these four items. By doing this well, they can make the healthy choice the easy choice for each and every employee, which is key to helping people develop and maintain healthy habits.

### 5 TRAININGS

offered in 2018

### 400+ BUSINESS LEADERS

from across state attended  
a training this year

### 300+ ORGANIZATIONS

have now completed  
Thrive-in-Five inventory

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“We help employers avoid this all-too-common mistake, and that’s the real value of this great initiative from Dakota Medical Foundation.”

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**Performance:** The fifth and final P is Performance. Performance is the culmination of executing the other four Ps. Said another way, when you give people purpose and you treat them the right way – with a great environment (place) and healthy practices – high performance naturally manifests itself.

The biggest challenge is that most employers make the critical mistake of trying to address performance first without having the other four Ps in place. When they do this, employees feel strong-armed, employers feel shortchanged, and the whole thing breaks down. We help employers avoid this all-too-common mistake, and that’s the real value of this great initiative from Dakota Medical Foundation.

## A **Business** Excited About P5 **Gate City Bank**



**Mission:** To provide a welcoming atmosphere and a commitment to making the lives of their customers and team members better by investing in them and their communities for a better way of life

**Why they're using P5:** To improve employee health and evolve their workplace culture

**Some P5-inspired changes:** Met with HR department to ensure they're hiring people who want a "calling" and not just a job, marketing team currently creating customized "acts of kindness" cards

**What they like about program:** "When the five Ps were broken down, and we looked at each of those areas, we just felt it was a perfect fit. (We needed) to see what we do well but also look at areas where we needed to improve our culture within the five Ps."



*VP of Culture Amanda Torok*

Once an organization has obtained their score, they can take part in P5 trainings. In 2018 alone, DMF offered five separate, in-depth trainings for area business leaders. Engaging, interactive, and insightful, these highly informative trainings have been attended by more than 400 different business leaders from across the state. Based on the comprehensive evaluations, it's safe to say these trainings have been a home run for everyone involved.

Having completed the trainings, it's time for employers to implement what they've learned. This is the real power of this initiative in that employers learn by doing, all with the practical pathway provided by DMF. This year, DMF has developed a four-week comprehensive "Path to Purpose"

campaign, which culminates in Giving Hearts Day. In only the first year, we anticipate that more than 150 employers will take part.

Last, but certainly not least, we're gearing up to offer some very cool things in 2019, including a comprehensive training manual, a full-day summit on the power of mindset, an employee health letter that can be distributed to every working person in North Dakota, a comprehensive health screening, and a couple of dynamic, health-promoting apps.

Needless to say, we're extremely excited about the road ahead.



*Chief Development Officer  
Marcia Paulson*

## A **Charity** Excited About P5 **Great Plains Food Bank**



**Mission:** End hunger in North Dakota and Clay County, Minnesota, within next 20 years

**Why they're using P5:** More effectively develop company culture and values

**Some P5-inspired changes:** Forming employee-driven innovation impact teams to better include perspective of all team members, implementing drinking water filtration systems, launching a wellness committee

**What they like about program:** "P5 serves as a great umbrella and a language we can use in our organization when we're talking about all that is engagement. We have a lot of things going on, and it felt a little scattered. P5 really helps us pull it all together in a way that makes sense."

# Annual Financial and Investment Report

As of and for the years ended  
September 30, 2018 and 2017

Dakota Medical Foundation is diligent in its choice of investment firms and closely monitors the structure of its portfolio for risk, long-term stability, and performance, as carefully outlined in our investment policies. DMF's chosen firms predominantly use a "manager of managers" approach, rigorously selecting and overseeing proven individual asset managers. DMF assets are conservatively invested and broadly diversified. DMF has the income stream to operate initiatives, provide grants, and meet operating expenses without liquidating long-term investments during market lows.



Finance and Investment Committee  
Chair Cindy Keller

	FISCAL YEAR 2018	FISCAL YEAR 2017
<b>BALANCE SHEETS</b>		
<b>Assets</b>		
Cash and investments	\$103,499,600	\$103,133,485
Receivables and other assets	\$727,009	\$924,177
Property and equipment, net	\$4,069,534	\$4,315,912
<b>TOTAL ASSETS</b>	<b>\$108,296,143</b>	<b>\$108,373,574</b>
<b>Liabilities and Net Assets</b>		
Payables and accrued expenses	\$814,469	\$911,559
Long-term debt, including current maturities	\$2,142,307	\$2,565,351
Unrestricted net assets	\$91,737,509	\$92,500,887
Restricted net assets	\$13,601,858	\$12,395,777
<b>TOTAL LIABILITIES AND NET ASSETS</b>	<b>\$108,296,143</b>	<b>\$108,373,574</b>
<b>CHANGES IN UNRESTRICTED NET ASSETS</b>		
<b>REVENUES, GAINS, (LOSSES), AND OTHER SUPPORT</b>	<b>\$5,577,556</b>	<b>\$7,937,404</b>
<b>Functional Expenses</b>		
Program costs	\$5,282,991	\$4,578,863
General and administrative	\$848,000	\$734,977
Fundraising	\$209,943	\$168,924
<b>TOTAL EXPENSES</b>	<b>\$6,340,934</b>	<b>\$5,482,764</b>
<b>INCREASE (DECREASE) IN UNRESTRICTED NET ASSETS</b>	<b>(\$763,378)</b>	<b>\$2,454,640</b>

# Mayors *Blue Ribbon* Commission on Addiction

**Tim Mahoney**  
City of Fargo

**Johnathan Judd**  
City of Moorhead

**Bernie Dardis**  
City of West Fargo

**Chad Olson**  
City of Dilworth

**Kory Peterson**  
City of Horace

Coordinated by Dakota Medical Foundation

## ANNUAL UPDATE

### What Brought Us Together

In fall 2016, there was no more ignoring it: The nationwide addiction epidemic had reached our community's front door and had done so with a vengeance. In Fargo alone that year, police responded to nearly 70 overdose calls, 15 of which ended in death. With addiction of all kinds ravaging the metro, we knew something had to be done, and we knew we had to do it together.

Coordinated by Dakota Medical Foundation and with overwhelming support from the mayors of Fargo, Moorhead, West Fargo, Dilworth, and Horace, the Mayors Blue Ribbon Commission on Addiction was formed. The commission consists of caring community and agency partners from both Cass and Clay Counties, including families battling addiction, government officials, healthcare workers, faith communities, and addiction providers.

Today, our community is proud to report significant progress in the ongoing battle against this terrible disease.



## 2018 Blue Ribbon Commission Highlights\*

\*As of December 2018

### Prevention

#### ▼ The Need

Driven by both overprescribing and easy accessibility, dozens of people in Cass and Clay Counties have died from opioids since 2016.

#### ▲ Progress

The number of opioid-related deaths has been more than cut in half in Cass County, from more than 30 deaths in 2016 down to 15 in 2017. This is due in no small part to both Sanford Health and Essentia Health decreasing new opioid prescriptions by more than 40 percent and Cass and Clay Counties combining to increase the number of local drug take-back sites and events from five to more than 25.

#### ▼ The Need

Due to the use of contaminated needles, local hepatitis rates have soared in recent years. In Cass County alone, there were more than 190 cases in 2016 and nearly 240 cases in 2017, a one-year increase of more than 25 percent. Additionally, of those 2017 cases, more than 85 percent of people reported injection drug use.

#### ▲ Progress

The Good Neighbor Project Harm Reduction Center, which opened in June 2018, offers syringe exchange services, as well as hepatitis screening. The center currently has more than 220 enrolled clients. The Center also does naloxone training to prevent overdose deaths and has reported more than 25 lives saved from naloxone since opening.

### Early Intervention

#### ▼ The Need

For those with addictions and their families, it can be overwhelming to navigate the vast and complex world of addiction services and get connected with the appropriate providers. Often, they don't know where to start or even what's available to them.

#### ▲ Progress

The FirstLink community navigator was launched in September 2018 and has served approximately 30 individuals so far. With her



extensive knowledge of available resources, Jennifer Holtz will be a tremendous asset to those seeking help for a variety of addiction and behavioral health issues. She will also help reduce the burden on crisis and emergency services.

#### ▼ The Need

In 2016, there were nearly 35 opioid-related deaths in Cass and Clay Counties. Many of the deaths were due to a lack of access to the overdose-reversal drug naloxone.

#### ▲ The Progress

Driven by a Fargo Cass Public Health campaign, naloxone training has been provided to nearly 600 local first responders, shelter staff, schools, law enforcement agencies, and families, and nearly 200 naloxone kits have been distributed. The Harm Reduction Center has reported 10 saves already due to expanded naloxone availability.

### Treatment and Recovery

#### ▼ The Need

Our criminal justice system was never designed to treat people with addictions. To help alleviate some of that burden, we must divert substance users away from corrections when possible. We must also connect those in treatment with adequate transitional housing, as more than 30 percent of local people suffering from addiction are homeless.

#### ▲ Progress

F5, Crossing Homes, and Redemption Road are now able to provide recovery-supportive housing to more than 100 individuals in Fargo-Moorhead, with additional transitional housing available at Sharehouse and Crossing Homes.



*Pastor David Vernoy on Redemption Road Ministries residents: "I want their floor to be my ceiling. They can have a quicker, more vibrant recovery because I plowed the field and planted, and they get to reap that harvest."*

## Blue Ribbon Commission Spotlight: Redemption Road Ministries

As a former addict himself, Pastor David Vernoy knows all too well the role stable housing plays in recovery.

"When you look at the continuum of care for addiction treatment, housing is a piece that can't be left out," says the 42-year-old founder of Redemption Road Ministries, a Fargo recovery ministry working to help those suffering from addictions transition back to civilian life. "(When I was using), I did anything I could do to stick a needle in my arm five times a day. It didn't matter if I had to break into a house or steal a car. I'd go to jail, get released, go right back to a dope house and get high, and get arrested for something else."

Whether coming from jail or a treatment center, this kind of recidivism is common among those with addictions, Vernoy says, and is exactly the kind of thing that he and his Redemption Road team are working to prevent.

"There's (not enough) placement after treatment," explains Vernoy, who, upon moving to Fargo a few years ago from out of state, was shocked at the lack of transitional housing services available to those in recovery. "You're releasing people back into the same environment they just came out of. (Transitional housing) can really put the door stopper in that revolving door. The reason it's grown as much as it has is because it's been such a huge need."

With eight houses opened in Fargo since 2015 and more than 80 beds now available, Redemption Road combines a recovery-stable environment with faith-centered programming. And while providing low-cost housing – less than \$450 a month total for rent, cable, and utilities

– is a central part of the ministry's services, what makes Redemption Road different, Vernoy says, is its more holistic approach toward recovery.

"(Housing) is vital to the recovery process, but we're really focused on life transformation," he says. "This is an environment and a family setting where they can learn to cope with life again. It gives people a safe, sober place to come out to where they can get re-acclimated not only to community but to recovery itself."

Another important aspect of the program, he explains, is that there's no expiration date on a resident's stay.

"It's really designed so that when you're ready to make that transition (to civilian life), we're there and can help," he says. "However long it takes for you to build that foundation you can start building your life on, that's how long it takes."

As for the longer-term options available to them once they do leave Redemption Road, that's a work in progress.

"One of the hardest things right now is that an individual comes to us, spends six months or a year, and they're ready to transition," says Vernoy, who hopes to eventually open a wrap-around recovery center that provides the full continuum of care to those with addictions. "But what am I going to transition them to? That's the hard part right now. If there isn't any long-term housing, then you have to develop long-term housing."

### ▼ The Need

The chronically addicted were not being adequately connected to the proper services and often ended up in the care of local emergency rooms.

### ▲ Progress

With transportation provided by the North Dakota Department of Human Services, the Mobile Outreach Program is a coordinated system that helps connect the chronically addicted with effective treatment and shelter options.

### ▼ The Need

Medication-assisted treatment (MAT) is a scientifically proven method that improves addiction-recovery effectiveness by more than 80 percent. Understanding that people cannot will themselves out of addiction, expanding access to methadone, suboxone, and vivitrol is essential, as is connecting those in treatment with the proper psychosocial services and support.

### ▲ Progress

Community Medical Services opened in April 2017 and is the only methadone clinic in Cass County. It now has more than 275 clients and is able to bill North Dakota Medicaid. They are working toward Minnesota Medicaid coverage and will open a Moorhead clinic when that takes place. Local suboxone prescribers now include: five at Sanford Health, three at Essentia Health, and three at Family Healthcare. Vivitrol is also now available through Prairie St. John's.

## 2019 PLANS

As a community, we're proud of what we've accomplished to this point, but we know there's much more work to do. Following an October 2018 strategic planning meeting, here are some of our top goals for the coming year:

### PREVENTION

1. Following the release of its first actionable report, LevelUp Fargo, a coalition of caring community members devoted to reducing youth substance use, will continue to drive interventions to increase positive social connections among youth.
2. Moorhead and Dilworth have both secured community partners to develop activities to reduce youth substance use in Clay County.

### EARLY INTERVENTION

1. We continue to work with Cass and Clay County providers to ensure that a continuum of services is available to pregnant women with addictions.
2. We plan to work with all local healthcare providers to develop a formal process for connecting people with addictions to the most effective treatment options.

### TREATMENT AND RECOVERY

1. To reduce recidivism rates for those recovering from addiction, we'll be partnering with corrections and addiction providers to ensure the formerly incarcerated have access to the right resources.
2. As we continue to stress the importance of housing in the addiction-recovery process, it's essential that we develop stable and affordable long-term housing options.

## North Dakota Dental Foundation

# Mission of Mercy 2018

For two days in September, patients from across the country lined up at the Bismarck Event Center to receive volunteer dental care at the state's first-ever Mission of Mercy event. Organized as a joint effort between the North Dakota Dental Association and North Dakota Dental Foundation and with help from more than 120 partners, 45 dental chairs were set up with a goal of providing care to 600 people in need. More than 900 patients were eventually seen, receiving care valued at more than \$560,000.

While not a long-term solution, Mission of Mercy made a difference in the lives of each and every patient. The event also provided much-needed oral health education and raised awareness of the importance of oral health both in the community and for policymakers. It was a true statewide community event that energized the dental community to continue to look for collaborative solutions to reduce barriers to care.

## How It Came Together



**1 FULL YEAR OF PLANNING**



## ▼ Meet Some Patients



▲ Before  
After ▶



### Claudette

**Residence:** Mandan, ND

**Work needed:**

Two and a half front teeth broken – needed roots of two removed and the other half removed

**Her experience:**

"From check-in to the end, everyone made you feel comfortable and at ease. It was wonderful. I would do it again in a heartbeat."



▲ Before  
After ▶



### Kerry

**Residence:** Richardton, ND

**Work needed:** Needed replacement for missing front tooth, two fillings, and repair work on an additional tooth

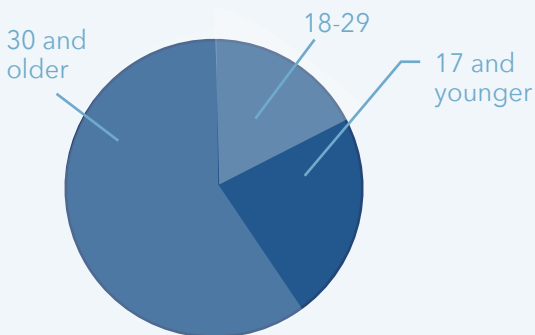
**Her experience:** "It (was) very, very beneficial. I got a tooth, and I also got two fillings done (and) got one other one fixed. I am so thankful."

## Fast Facts

- More than 40 percent of the patients said they had dental pain.
- 20 percent reported that they had sought dental care in the past at an emergency room or emergency clinic.
- Nearly three-quarters of the patients reported they had no insurance to pay for their dental care.
- Only 7 percent of patients indicated they were eligible for government assistance or Medicaid.
- Only about 15 percent said they were covered by dental insurance.
- 4 percent had never been to a dentist.

## Results

### Patient Demographic Breakdown



**98%**

cited cost as a factor in not obtaining dental care.

**916 SEEN**

**961** extractions

**358** composite fillings

**72** amalgam fillings

**48** root canals

**203** cleanings

**56** sealants

**60** appliances

**\$560,000+**  
WORTH OF DENTAL CARE



Lynne Olien (R): "It gets different. It gets to the point where you still think about it a lot, but it doesn't consume every waking and sleeping moment like it did at the beginning."



# Justin Broke the Silence

Lynne Olien stands on a snow-packed path just off the main entrance of Riverside Cemetery in Fargo, facing the headstones of her two youngest sons but looking at nothing in particular. Despite the overcast November day, she wears a pair of thick, black sunglasses that hide the eyes of someone who wants to be anywhere but here.

"Honestly, I only come out here a few times a year," she continues. "It's just too much."

On the left lies Nathan, who passed away in 2002 at the age of five after a battle with a neurodegenerative disease, and on the right lies Justin, who she buried in the spring of 2016.

It's not what you'd expect from a mother standing at her children's graves, but then, radical honesty has become something of a mantra for Lynne Olien.

"After Justin's suicide, so many people commented (about how) they couldn't believe we made it public that it was suicide," says Lynne of Justin, who was a 17-year-old junior at West Fargo Sheyenne High School when he took his own life two and a half years ago. "Why wouldn't we? There is nothing to hide. (Justin's father) Curt and I were both very adamant, from the night of the suicide on, that we were not going to hide it."

It's a brave choice, and one that more and more families are making.

Take this excerpt from the obituary for a 15-year-old Pennsylvania girl:

*"Yes, Sadie took her own life, she hung herself. It is hard to fathom that someone so young could be so troubled. Sadie was seeking help, she was in counselling [sic] and taking medication, but it was all too much for such a young soul to live with."*

Or for this 62-year-old Tennessee doctor:

*"Dr. Paula Margery Sandler, 62, died at home in Memphis on April 20, 2015, of suicide. We ask that you open your heart and offer compassion without judgment for those that suffer from illness rooted in stigma, trauma or shame; this was how Dr. Sandler practiced medicine. Sadly, she succumbed to severe depression, leaving behind bereaved friends, patients and colleagues."*

For the Oliens and countless other families around the country that suicide has touched, the challenge is fairly straightforward: How do we solve a problem this big if we can't even talk about it?

Now the 10th leading cause of death in the U.S., suicide has reached epidemic levels. With an estimated 1.3 million attempts in 2017 alone – 50,000 of which were successful – it continues to ravage communities across the country, sparing no age, class, or gender. In fact, for the 17-year period between 1999-2016, North Dakota

saw the highest suicide rate in the country, increasing nearly 60 percent during that time.

Yet despite the scope of the issue and everything we now know about its root causes – depression, anxiety, and PTSD, among others – a very real stigma persists. Still relatively few people view "I have diabetes" and "I'm bipolar" in the same way.

"It's no different than having cancer," Lynne says. "It's not something people can control. It's the wiring and the chemical imbalances in the brain. It doesn't make you weird."

That's the part that still gnaws at her about Justin's suicide, she says, is that he couldn't just ask her for help the same way he did, say, when he broke his leg as a 15-year-old.

"Justin was apparently very good at hiding things, which we didn't know," she says of the high-achieving, musically gifted Eagle Scout. "He had a girlfriend he dated for the last year and a half he was alive, and he would come to me all the time about stuff that was going on with her. But he would never ever come to me about stuff that was going on with him, which is still, to this day, very difficult for me."

"Kids and teenagers, especially, think they're all powerful and think they can handle everything. They don't realize this isn't something they can fix by themselves, and they just continue to hide it."



One teddy bear for each of the Olien boys



*While the link between high achievement and high-functioning depression might seem counterintuitive, Justin Olien's mom, Lynne, says that, in many ways, it fits the personality type.*

*"Your high-functioners are typically your perfectionists," says Lynne, who notes that Justin suffered from high-functioning depression. "Everything has come easy to them, and now they're struggling with all these issues and feelings going on in their brain and don't know how to deal with it."*



*The Olien boys: Nathan (L), Justin (R)*

That's why, when the Oliens approached Dakota Medical Foundation in 2016 about starting a fund in Justin's honor, they wanted awareness to be priority No. 1. As Lynne puts it, she didn't want even one more family to have to go through what her family did.

"We definitely wanted to raise money, but more than anything, for us, it was (about) keeping not just kids, but people in general, alive, and helping them realize that there are other decisions than taking their own life," says Lynne, whose family started Break the Silence with the \$5,000 in memorials from Justin's funeral. "It's about getting in front of people and letting them know it's socially acceptable to talk about the fact that people are dealing with anxiety and depression."

Justin's Break the Silence has seen some incredible successes over its first couple years.

Lynne and the rest of the team have raised more than \$62,000 total, \$40,000 of which helped fund a full-time mental health professional at West Fargo's L.E. Berger Elementary, the school Justin attended as a child. They've also awarded \$7,500 in scholarships to West Fargo high school students pursuing mental health careers and

oversaw the installation of a memorial bench at West Fargo Sheyenne High School

One thing in particular that's been a boost to the fund is Giving Hearts Day. In 2017 – the fund's first year participating – Justin's Break the Silence raised nearly \$17,000, followed by more than \$17,000 last year, funds they've put to work right away.

"The donations and financial part are important because you need them to continue to run your program," Lynne says. "The people who were at the end of our driveway (the night Justin died), they tell his story now. We get donations from these peoples' aunts, uncles, and cousins on Giving Hearts Day. Because they have shared the story with so many people, these people have taken it on as their own, too."

Some of the fund's success can also be attributed to Lynne's candid, vulnerable approach. She estimates that she's presented 10 times to West Fargo teachers over the past couple years and says there hasn't been a single time that one of them hasn't come up to her afterward to talk about their own struggle with mental health.





Justin Olien's bench at West Fargo Sheyenne High School



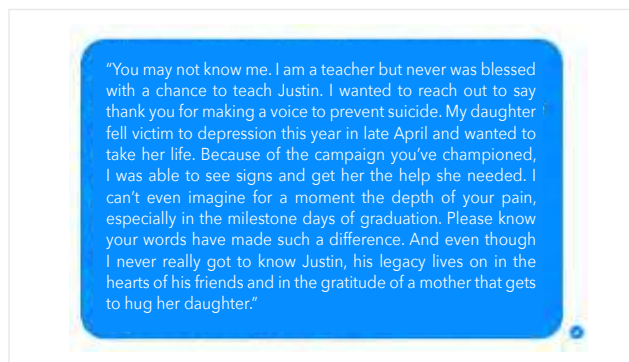
National Suicide Prevention Lifeline  
Call 1-800-273-8255

These "Stop. Listen. Talk." bracelets have become an important part of Justin's Break the Silence efforts to remind kids to get help when they need it, says Executive Director Lynne Olien.

"We want people to stop, listen both to each other and to what's going on inside their own head, and then talk to somebody, whether it's an adult, a medical professional, whoever."

"At the last one, a teacher came up to me, and we talked for 45 minutes," says Lynne, who often uses the Justin's Break the Silence Facebook page to post honest but encouraging messages about mental health and suicide. "And she said, 'Listening to you talk about high-functioning depression made me realize that's what I've been dealing with myself. And I'm going to go get myself some help.'"

"Once you put it out there and start talking about suicide and depression, it's amazing the number of people who come to you with their stories and tell you, 'I've dealt with this myself' or 'I have a family member who's dealt with this.'"



One of many Facebook messages Lynne has received since starting Justin's Break the Silence

And while she's immensely proud of all the fund's accomplishments, Lynne says they pale in comparison to the most important one: the 11 people, including a number of Justin's classmates, who credit Justin's Break the Silence with saving their life.

"I think the thing that strikes me most is not just the 11 people who are alive; it's the ripple effect," says Lynne, pointing to the more than 1,000 people who attended Justin's funeral. "Look at the number of people who are touched by every person. For us, there's Justin, then there's us, and the circle just goes (out and out)."

"It makes me so sad that we didn't know about Justin, but it makes me so happy that there are people who are alive because of him. As sensitive as his heart was, he would be really pleased to know there are people being helped because of him."

As for how everyone else can help? Lynne has a simple request.

"Tell people Justin's story," she says, wiping away a lone tear. "Tell people your own story – whatever it takes to make them stop and think about it."

In 2018,

**70 PERCENT**  
of DMF members participated  
in member match

**\$300,000+**  
raised through  
member match



# The Faces of Lend A Hand Up 2018

Since its inception in 2008, Lend A Hand Up has not only provided a fundraising toolkit to help those experiencing a medical crisis, it's provided a platform to bring out the very best in the people of our community. From a young family dealing with a cancer diagnosis to a survivor paying it forward, here are just a few of the countless lives the program touched in 2018.

## BENEFICIARIES

### Henrik Westerholm Family



*Henrik Westerholm Family*

### Jordan Dravitz Family



*James Dravitz - Jordan's dad (left),  
Laura Dravitz - Jordan's grandma  
(right)*

## MEDICAL CHALLENGE

**Acute lymphoblastic leukemia (ALL):** A type of leukemia that starts from white blood cells in the bone marrow, the soft inner part of bones

**Biliary atresia:** A rare liver disease that causes the bile ducts to swell and become blocked

## STORY

After showing some mild symptoms of anemia, Dan and Janna Westerholm brought their 3-year-old son, Henrik, into the walk-in clinic just after Christmas 2017. Not long after, Henrik was diagnosed with acute lymphoblastic leukemia (ALL), which was resistant to treatment and therefore required a bone marrow transplant. Henrik's brother, Harrison, turned out to be a match and, in late summer 2018, Henrik underwent a transplant at Mayo Clinic in Rochester. He's now in remission and doing well.

Born a smiling, healthy baby in February 2018, Jordan Dravitz's skin began looking jaundiced as a 2-month-old. Following some inconclusive labs at a Fargo hospital, she was transferred to the Twin Cities for a liver biopsy, which revealed she was suffering from biliary atresia, a rare liver disorder that eventually causes the liver to fail. While Jordan was able to receive a liver transplant in August, Jordan's parents have made several trips to the Twin Cities before and after her transplant, further adding to their emotional stress and medical expenses.

## BENEFIT TYPE

Dinner benefit, silent auction, bake sale

Dinner benefit, silent auction

## REFLECTIONS

**Dan Westerholm:** "Dakota Medical Foundation and programs like Lend A Hand Up make this community a place you really don't want to leave. Because you can have events like this happen in your life, and they're manageable. The emotional side of it with the kids and the health side of it are scary, but the support is there to deal with it. We appreciate it."

**James Dravitz:** "It's been really nice to have a support system, not just family but volunteers and organizations like Lend A Hand Up that have been able to help us when we've barely been able to help ourselves."

**Laura Dravitz:** "(Lend A Hand Up) is the first program I ever knew that never took anything away from the giving process. They never asked us for anything ... And boy, do I want to give back to them because they are awesome."



## SUPPORTERS

## Jason Boutwell



Jason Boutwell

## Shannon Fettes Farha Family



Denise Scufsa - Shannon's twin sister (left), Patrick Farha - Shannon's husband (center), Kathy McCracken - Shannon's sister

## CONNECTION TO PROGRAM

Jeff McKinnon online campaign champion

Family member passed away from leukemia in 2016, family is first-ever Angel Sponsor

## STORY

During a trip to Mexico in 2014, Jason Boutwell began experiencing constant abdominal pain that he assumed was a pulled muscle. It turned out to be his appendix, which ended up bursting, and during the series of surgeries he underwent, it was discovered that he had appendiceal carcinoma. The cancer, which laid him up for about six months and caused him to lose more than 50 pounds, led his friends and family to plan a Lend A Hand Up benefit for him, which he never forgot. He's now one of Lend A Hand Up's biggest and most active advocates.

When Shannon Fettes Farha went into the walk-in clinic in summer 2015, her family couldn't have imagined she'd be gone a little more than a year later. Her difficulty breathing turned out to be a leukemic mass, the likes of which her doctors had never seen before, and while she underwent a stem cell transplant later that fall, it never took. Six months going back and forth to Mayo Clinic in Rochester, Minnesota, left the family with a long list of medical bills and expenses and led them to host a Lend A Hand Up benefit in fall 2015. Shannon passed away in August 2016, but her spirit lives on through the annual pulled pork feed her family now holds in her honor.

## HOW THEY GIVE BACK

Serves as a Lend A Hand Up Ambassador, organized a benefit for friend and former Bison football teammate Jeff McKinnon, attends numerous area benefits throughout the year

Family and friends host the annual Shannon Fettes Farha BBQ Dinner & Social, which nets about \$6,000 on average, and donate the proceeds to Lend A Hand Up

## REFLECTIONS

**Jason Boutwell:** "I feel I have something to give back to the program in the sense of: been there, done that. Initially, when I got involved, it was simply to attend other peoples, benefits so I could say to them, 'Hey, you were just diagnosed with cancer six months ago. I was, too (at one point). I just ran six miles this morning, and I'm feeling like a million bucks.' It gave me an opportunity to give somebody the same boost that I got and say, 'You can do it.'"

**Denise Scufsa:** "To see the support Shannon got back when she started (treatment), to be able to give that back to somebody, you can't even really describe the feeling it gives you. To be able to be a part of that gift, that's why we do (the BBQ) every year because Shannon would've wanted this."

**Patrick Farha:** "(Lend A Hand Up) helped us incredibly. We'd be in debt without it. We had to pay for the housing (in Rochester), which was not cheap, plus we had a mortgage. Then there was the food, gas to drive down there and back, everyday stuff like toiletries, and on and on."

## 2018 Medical Challenges

CANCER 66%

ORGAN FAILURE 11%

OTHER 11%

PREMATURE BIRTH DEFECT 7%

ACCIDENT 7%

In 2018,  
**\$1.8 MILLION**  
raised for 44 families



Since 2008,  
**\$15.5 MILLION**  
raised for 495 families

# HBOT: A New Standard of Care for Concussions

For years, concussion sufferers have had few options other than to rest and wait until symptoms subside. One doctor and Dakota Medical Foundation are working to change that.

When Colleen Geraghty's son woke up one morning last year, he could barely open his eyes.

"He couldn't even be near light," says the mother of four.

After an errant ball to the head at lacrosse practice the afternoon prior left her son feeling a little off, Geraghty spent the night monitoring his symptoms.

"I looked at his eyes, and they looked a little off but not enough to be alarming," she recalls. "I asked him some questions, and he answered everything. He never threw up, never lost consciousness."

She suspected it was a concussion but wasn't sure until the following morning when the "tough, no-nonsense" 16-year-old needed sunglasses just to sit under the fluorescent lights of his pediatrician's office. After his doctor confirmed it was, in fact, a concussion, Geraghty says they were basically sent home and told to let him rest in a dark room for as long as it took and that there was nothing else they could do.

She was given the same advice the year before when her then 8-year-old daughter spent more than three weeks recovering on the couch after an accidental kick to the head during a soccer game. Frustrated, she got on her computer and started doing some research.

"Not only was it a helpless (feeling)," Geraghty says, "I was just downright annoyed."

She came across a doctor who was taking a more proactive approach to concussions with something called hyperbaric oxygen therapy, or HBOT. By the next morning, she had her son in Dr. Daphne Denham's office

to undergo the first of what would eventually be four hyperbaric treatments.

"When he went in, he rated his pain around a nine (on a scale of 0-10)," Geraghty says. "The condition he was in, I can't imagine him being like that for multiple weeks. He didn't want to be around sound, light, anything. He was sensitive to all of it. (During the first session), he was in for maybe an hour and ten minutes, and he came out laughing with his pain at a one or two."

The most amazing part? By the end of the next week, he was fully back to his normal school and sports schedules.



*A hyperbaric chamber at the Healing with Hyperbarics Clinic in Fargo*

## What Is HBOT?

While HBOT is currently FDA-approved for 14 different medical conditions, including carbon monoxide poisoning and burns, its role in treating concussions is still being established. Right now, major insurance providers won't pay for it.

It's a one- to two-hour medical treatment during which a patient breathes 100 percent oxygen in what's called

a hyperbaric chamber. During “the dive,” the pressure in the chamber is increased to an amount that’s about the equivalent of riding in an airplane, and the result is a dramatic increase in the amount of oxygen in the patient’s blood. HBOT does three things, in particular:

- 1) Hyper-oxygenates tissue
- 2) Resolves swelling
- 3) Reduces inflammation

Denham’s been treating wound-care patients with HBOT for more than a decade, and for the past three years, she’s successfully treated more than 150 concussion sufferers at her practices in Northbrook, Illinois and Fargo. Trained as a general surgeon and as someone who’s seen significant brain injuries over the course of her career, she says her initial interest in HBOT was fueled by a desire to find a better way to treat head injuries

### Getting Proactive with Concussions

“Naysayers will say, ‘You’re treating patients who are going to get better and didn’t even need it.’ After seeing what I’ve seen, it makes me really wonder about this belief that the vast majority of people just get better on

their own,” says Denham, who cites a 2018 Centers for Disease Control report that found that at least 30 percent of patients who suffered a mild traumatic brain injury (concussion) still had persistent symptoms one month after the injury.

As Denham explains, in the U.S., the current standard of care is to recommend rest until a patient is symptom-free. There is, however, a growing movement to take a more proactive approach. Just this past year, the U.S. Department of Veterans Affairs announced it will offer HBOT as a treatment option for a small number of veterans with PTSD.

“No one is taking – at least in a uniform, large-scale way – what some have called the aggressive treatment approach instead of wait-and-see, where you treat the symptoms and manage the problems,” she explains. “It’s worked far better than I ever thought. What’s stuck with me most is when a kid comes in with minimal symptoms and then comes out and says, ‘Wow, I didn’t realize how bad I was. It’s that immediate. It’s that dramatic.’

“My whole goal, from knowing what happens from injury to the next week, is to stop the injury progression. We’ve had some kids in for a treatment three to six hours after their concussion who will never know what extent their injury would’ve been because we were able to stop it. And eventually, that’s what I want: concussion in Friday night football, you’re in the clinic at 8 or 9 o’clock Saturday morning.”

#### A More Technical Look at How HBOT Works



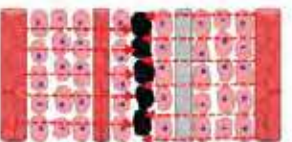
**Figure 1**

Normally, each cell is able to receive the necessary oxygen for regular function.



**Figure 2**

This figure demonstrates tissue after a trauma. With an injury, some cells are not able to get enough oxygen. Cells die (black) and some are injured (blue). Blood vessels may also be pushed closed by swelling (grey).



**Figure 3**

This figure demonstrates tissue under hyperbaric conditions. Oxygen is able to travel to the cells that need it, even if the blood vessels are closed. Swelling goes down, too, which may open some of the vessels back up. Dead cells are still dead though.



**Figure 4**

After several hyperbaric treatments, new blood vessels can grow into the injury, if needed. All cells are getting better oxygen, so they can begin to remove the dead cells.

### Details of the Concussion Care Initiative

It’s Denham’s frustration with some of the medical community’s laissez-faire attitude toward concussions, as well a nudge from North Dakota entrepreneur Gary Tharaldson, that brought her to Fargo to open a hyperbaric clinic and lead the Concussion Care Initiative with Fargo-based Dakota Medical Foundation.

#### Concussion Standard of Care: A Comparison

Current Concussion Standard of Care	HBOT Concussion Standard of Care
Rest for an indefinite period of time until athlete becomes symptom-free	Receive HBOT and return to all normal athletic and academic activity in as little as a few days

The initiative, which kicked off this past fall, seeks to improve the standard of care and access to treatment for people in the region who experience a concussion. It focuses on ensuring HBOT is available free of charge to up to 100 local student-athletes participating in activities ranging from football to hockey to dance, with an ultimate goal of ensuring that all children participating in sports receive the most effective concussion treatment possible.

The initiative's first step has been to conduct a pilot program and study, the goal of which is to gather data about concussion treatment best-practices. Instead of thinking about how to manage concussions, Denham says, the goal is to find a way to treat them.

Denham's state-of-the-art Healing with Hyperbarics clinic on 45th Street – the only one of its kind in Fargo-Moorhead – not only features six medical-grade hyperbaric chambers; it also has a separate room for eye-testing, which is overseen by Grand Forks-based optometrist Dr. David Biberdorf. Eye-testing is an essential part of the concussion treatment protocol, Denham says, and since more than 85 percent of concussion patients have eye complaints, they'll be using this eye testing both pre- and post-concussion treatment.

"This will document objectively the effectiveness of HBOT," she says. "By performing pre- and post-treatment eye testing, we should be able to collect the objective evidence to support what we are observing subjectively. The opportunity we have in Fargo should completely change the discussion from concussion management to concussion treatment."

The opportunity to be a part of this kind of cutting-edge study and ensure a higher level of safety for players is something Fargo Shanley High School Head Football Coach Troy Mattern says he's excited about.

"We just want to be proactive," says Mattern, who just completed his 19th year of coaching and his second season with Shanley. "Any time you're talking about player safety and health, especially concussions, and being able to be on the forefront of it, we're all on board for that. We want to show our parents and families that we take concussions seriously."



*Concussion Care Initiative Director and HBOT expert Dr. Daphne Denham*

"Maybe down the road, hyperbaric could ... get our kids symptom-free a lot quicker and back to play. And if something does happen, we have protocols or procedures in place that can help them get to where they're not going to have long-lasting symptoms."

## Concussions and Our Region

The implications of concussions go far beyond the playing field. According to a recent CDC report surveying nearly 15,000 kids, approximately 15 percent of high school athletes experienced a concussion in the past year, and 6 percent suffered more than one.

Another CDC report documents that nearly 15 percent of concussion sufferers needed academic help a year after their concussion. Yet another study found that people who suffered a traumatic brain injury before the age of five or between the ages of 16-25 have an increased risk for dependence on alcohol and drugs.

Looking at those numbers in the context of this region and the nearly 27,000 North Dakota high school student-athletes, that's an opportunity to help more than 4,000 concussed kids in the 2018-19 school year. That's a potentially significant impact.

"What's the (economic) cost (of concussions)?" asks Denham, who has been producing monthly reports throughout the DMF concussion pilot. "I expect we're going to find out that it's cost-effective to treat all concussions, as we look at what North Dakota has spent on post-concussion education services, as well as addiction services."



While a goal of successfully treating a larger number of kids is a given, Denham says her aim is to completely change the discussion around what concussion treatment looks like:

"We'll be asking student-athletes: If you thought there was a treatment for a concussion and you weren't going to be sentenced to your room in the dark for three months and could go back out and play, would you be more willing to say, 'Hey I'm kind of goofy. It's probably not that bad, but my brain's worth it. Let me go get checked out and have treatment.' Would you be more willing to report?"

DMF President Pat Traynor thinks so.

"Kids will more readily report if they know this treatment works," Traynor says. "From a parent's perspective, one of our biggest fears is having our children seriously injured in sports. With the long-term impact of concussions abundantly clear, we're hopeful that a new standard of care can be developed locally to ensure our children can lead normal, healthy, active lives. We want access for all to the best treatment possible."

### The Future: HBOT Center of Excellence

While initial data from the Concussion Care Initiative combined with countless positive patient testimonials suggest that HBOT is highly effective at treating concussions, there's still much work to be done to convince third-party payors that the treatment is valuable and cost-effective.

To this end, DMF is looking into establishing an HBOT Center of Excellence to ensure access to HBOT and continued objective studies.

DMF's vision, according to Traynor, is to build a sustainable charitable model that will provide HBOT to all people in North Dakota and northwestern Minnesota who need it, regardless of their ability to pay.

"As a health foundation with roots in innovative care, DMF is always looking for ways to improve health and quality of life for people in our region," he says. "We're partnering with doctors who have seen first-hand the effects HBOT can have on their concussed patients."

In partnership with community medical providers, the Center will ensure access to treatment centers in North Dakota and northwest Minnesota and potentially beyond. In addition to concussions, one initial focus area will be the use of HBOT to treat local veterans suffering from PTSD.

## DMF Concussion Care Initiative Data\*

### TOTAL

103  
PATIENTS  
TREATED

562  
TREATMENTS

### BY CONCUSSION TYPE:

#### ACUTE

- 68 patients
- 241 treatments
- 3.54 treatments per patient

#### CHRONIC

- 28 patients
- 160 treatments
- 5.7 treatments per patient

#### ACUTE ON CHRONIC

- 7 patients
- 53 treatments
- 7.7 treatments per patient

\*As of January 2019



# DMF Center of Excellence Stats

With its meeting rooms, training center, and teaching kitchen all available free of charge to area nonprofits, the multi-use Dakota Medical Foundation building is a true community space. And why wouldn't it be? We know that we're just one small piece of the puzzle as we work together to improve health and quality of life in our region.

This year, we're proud to report that nearly 15,000 people used the space to train, collaborate, and advance their organization's mission.

"If we didn't have places like Dakota Medical foundation donating these rooms, there would be little change because there's nowhere to make the change happen."

Shawn Gibree,  
*Returning Citizen, Jail Chaplains*

- ▶ **2018**  
Nonprofits **265**  
(**33 new organizations**)  
Events/meetings **583**  
Individuals **14,617**
- ▶ **SINCE 2013**  
(**BUILDING OPENING**)  
Nonprofits **454**  
Events/meetings **1,218**  
Individuals **51,000+**



Jail Chaplains Executive Director Gerri Leach (R) with returning citizen Shawn Gibree (L). Leach says returning citizen is the "more respectful" term her organization uses when referring to former inmates.



FEBRUARY  
14

# Giving Hearts Day The Gift That Keeps on Giving

Now in its 12th year and a bonafide cultural event in the region, Giving Hearts Day has become a true gem that communities across North Dakota and northwest Minnesota can celebrate. Here's one charity using the day to maximize its impact.

When Shawn Gibree helped serve cake at Cass County Sheriff Paul Laney's retirement party in November, it was the culmination of a long, strange, unlikely journey. In fact, it was only a year prior that he was in the depths of a drug-fueled depression, hooked on meth and ready to check out for good.

"It was pretty bad," recalls Gibree, who broke a 13-year run of sobriety following his mother's cancer diagnosis and his son's graduation. "I was probably trying to kill myself more than I was trying to get clean. I was putting more and more in my body and hoping I didn't wake up."

Following an especially heavy night of using, Gibree found himself back in the familiar confines of the Cass County Jail, at his rock bottom and "ready for something different."

What he found was Mike Sonju, the longtime head chaplain at the jail and one of the leaders of the Fargo nonprofit Jail Chaplains, which provides inmates with bible studies, mentoring, and faith-based Living Free small groups.

Sonju gave him a Bible and, as Gibree describes it, some much-needed structure.

"It gave me hope," says Gibree of Jail Chaplains, who jokes that it was the free doughnuts that initially lured him to his first meeting. "I started putting the work in. I started reading the Bible and got more plugged in. I started doing the programs, did a bunch of stuff at the jail, (got) certified through the state for peer support. Little by little I started turning my life around."

Gibree is just one of the hundreds of Cass County inmates that Jail Chaplains serves each year. Founded in the late '70s by then-Cass County Sheriff Don Rudnick and volunteer pastor Curt Frankhauser, Jail Chaplains has seen tremendous growth over the past four decades.

The nonprofit now provides more than 20 hours of faith-based programming at the Cass County Jail each week, is helping fight the community addiction epidemic with its Living Free groups, and has even developed a benevolence

fund that helps returning citizens transition back into the community after completing their sentence. In 2018 alone, Jail Chaplain programs saw more than 11,000 attendees.

While countless volunteers and community partners have played a role in Jail Chaplains's success, one in particular has really helped it to think bigger and expand its reach, according to Executive Director Gerri Leach.

"I can't separate Jail Chaplains from Impact (Foundation)," says Leach, who became director in 2013. "Impact and Dakota Medical Foundation are a part of Jail Chaplains. They've not only helped us learn how to raise funds; we've been to workshops to (learn to) tell our story well, and our board has done trainings. One of my favorite workshops is the elevator speech. It's learning to say, in 60 seconds or less, what we are. I use it when I do thank yous to people on the phone."

"Things like the three Rs: recruit, retain, and reach. They provide resources that, as a small nonprofit, we couldn't (otherwise) afford to connect with."

Then there's Giving Hearts Day, which Leach says has been a godsend.

"Probably the greatest gift Giving Hearts Day has given us is that it's taught us that you can raise funds in the first quarter of the year," says Leach, who adds that Giving Hearts Day has become Jail Chaplains' single-largest fundraiser and accounted for about one-third of its 2018 operating budget. "The first quarter of the year is typically the lowest-income quarter because everyone is done with end-of-year giving, and so teaching us that we can do that is powerful. Scott (Holdman) and the team at Impact Foundation have taught us how to break through that barrier."

And the benefit is much more than just financial, says Leach.

"Giving Hearts Day has really been the impetus to develop all the additional training," she says. "It's become more than just one event. It's a recruiting tool, and it's a friend-making tool."

## The Impact FundingLogic™ Six Elements of Success



### Transformations

View fundraising and its challenges differently for breakthrough performance.



### Targets

Set effective targets to measure and multiply your fundraising efforts.



### Trends

Know the trends and uncover key insights to drive your overall fundraising success.



### Tools

Select and maximize the right fundraising activities to achieve greater impact.



### Tactics

Move the needle forward on your fundraising by establishing a clear focus.



### Teams

Create a healthy culture to move your fundraising performance to new heights.

## Giving Hearts 2018: Another Year of Growth\*



	2018	2017
<b>Total raised</b>	<b>\$13.2 million</b>	<b>\$10.7 million</b>
Individual donors	28,000	21,800
Total donations	63,700	51,000
Online donations	\$5 million	\$4.3 million
Check donations	\$3.6 million	\$2.7 million
Match dollars raised by charities	\$4.4 million	\$3.1 million
Average raised online per minute	\$3,450	\$2,950
Average gift amount	\$141	\$138
Average number of nonprofits donors gave to	2.3	2.3
Average new donors for charities	39 percent	36 percent

*\*Some figures are approximate.*







## Did You Know?

*One in 10 children will be sexually abused before their 18th birthday.*

*90 percent of child sexual abuse is committed by someone known by the child or their family.*

# A Paradigm Shift In Child Sexual Abuse Prevention

## 4 Questions with Anna Frissell

### About Pledge to Protect

In the past, child sexual abuse education has been primarily directed at helping children be wary and to tell adults about inappropriate behavior. And while this education continues to be very important, we know that perpetrators use profound manipulation to enforce secrecy, overpowering any ability a child might have to disclose. Pledge to Protect arose to provide much-needed adult-focused resources that will help community members become wise parents and protectors.

### 2018 Accomplishments

- Comprehensive review of child sexual abuse research and prevention measures completed by NDSU
- Evidence-informed curriculum designed for easy understanding by wide-ranging audiences
- Trainers recruited in community

### 2019 Goals

- Full-scale community education to launch in spring, including a website for broad prevention resources
- Second curriculum for youth organizations to learn best-practice policies ready for summer launch
- Train 2,000 in first six months



### What will be the role of Pledge to Protect in our community's efforts to end child sexual abuse?

Through an innovative curriculum, we're going to deliver awareness and training to every adult in our community. If everyone has the knowledge and information, then we have a much better opportunity to change culture and behavior. This isn't just for teachers or parents either; it's for everyone. The information we deliver might be a little bit different depending on their level of expertise or what their interaction is with kids, but it's basically the same information, over and over, to large groups so that we can get the information out and build awareness.

### Why do you and the steering committee see prevention as such an important piece to this puzzle?

At our center, we have children and families come in every day that are the victims of trauma, and you can't do this work very long before you start to wonder how you can do something to stop it. We've always done prevention. We've always worked to help kids and families build a foundation so that, when they leave, they're better equipped to avoid this kind of situation in the future, to know more about their own bodies, and to know more about how to report things. But the primary prevention work is seminal, where we're trying to stop the abuse from happening.

### You say this problem goes beyond just victims. Can you elaborate?

(Child sexual abuse) should be taboo and unacceptable in our culture. The trouble is that, in order to stop it, we need to have a society that helps the people who are doing it. As soon as you turn (abusers) into monsters, nobody wants to help them.

One-third of (abusers) we see are under the age of 18. So much research tells us that if you can intervene with individuals under the age of 18 who are engaging in this kind of behavior, 97 percent of them will never offend as an adult. That alone, think how much we can change. We can take one-third of the bad guys and turn them into good guys right there. It's really important to have the conversation on the level of the child and change the way the society thinks of it rather than go after each individual offender.

### This is a huge, complicated problem. Are you optimistic that it's one we can solve?

I firmly believe we can stop it. It may be 20 years before we eradicate it in our community, but I think we can do it. I know there may always be a very small portion of the population you're not going to stop - and they probably need to be locked away - but for most of the individuals who act out inappropriately, I believe that if we can intervene soon enough, we can make a difference with their behavior. And, again, if we can provide adults with the tools to know how to recognize (abuse) and know what to do about it when you see it, that we can stop it.

# 5 Steps in Grooming

Nearly 90 percent of abusers are known to the child and often the parents as well. Abusers coerce relationships and use what's known as "grooming" to isolate, sexually abuse, and then coerce the child to keep their secret.

1

## GAINING ACCESS

Some abusers seek ready-made relationships with kids, including jobs, volunteer positions, or situations where they're surrounded by children.

2

## TARGETING

This involves preying on more vulnerable children and focusing on kids with higher gullibility, higher stress, and lower self-esteem.

3

## DEVELOPING TRUST

Through individualized activities like babysitting, tutoring, and coaching, abusers will develop a relationship with not just a child but their parents, too. This creates the perception of a "special" relationship, allowing the abuser to gain a special kind of access and manipulate accordingly.

4

## INTRODUCING TOUCH

An abuser attempts to desensitize a child to their touch by tickling, wrestling, or engaging in other seemingly innocuous contact to test whether they will resist or tell.

5

## PROMOTING SECRECY

Silence and secrecy are essential ingredients in any abuser's grooming strategy and are often developed before any physical contact actually takes place. The motivation is typically to scare, confuse, and distance a victim away from loved ones.

# Dakota Medical Foundation: A History

55 YEARS OF EXCELLENCE AND INNOVATION

## 1960s

### The Beginning

#### '62

- Dakota Medical Foundation formed to own and operate Dakota Hospital
- IRS approval granted

#### '63

- Groundbreaking held
- Fundraising begins, guided by 40 original members

#### '64

- Nearly \$2 million Dakota Hospital opens with more than 75 beds and roughly 10 doctors



## 1970s

### The Expansion

- Dakota Hospital becomes known for hip and knee joint replacements
- Hospital expands to more than 180 beds

## 1980s

### The Second Expansion

- Dakota Hospital adds nearly 100 more beds, bringing total to 265
- Open heart and neurosurgery capabilities are added to hospital and kidney dialysis expands
- 14 satellite clinics are added in North Dakota and Minnesota, laying foundation for future DMF programming and membership

## 1990s

### The Sale

#### '94

- DMF sells half of hospital to for-profit company based in Houston

#### '96

- DMF awards first grant

#### '98

- Other half of hospital sold to same for-profit company, bringing DMF's endowment to nearly \$95 million

## 2000s

### The New Era

#### '00

- Pat Traynor hired as DMF president



- Board adopts first strategic plan, focusing on medical and dental care access with an emphasis on children

#### '01

- DMF matching begins
- Nearly 25 lives saved with AED Initiative
- Charitable giving funds established at the Foundation

#### '02

- DMF launches statewide initiative that connects thousands of uninsured families with low-cost health coverage

#### '04

- First scholarship funds aimed at healthcare workforce development created

- DMF provides \$400,000 to enroll more than 50 nursing students in the tri-colleges

#### '05

- With support from the Alex Stern Family Foundation, DMF founds Impact Foundation to provide development, resources, and government-contract procurement assistance

**'07**

- New Impact website launches that allows nonprofits to receive online donations

- Lend A Hand created to provide resources and match funds for volunteer-led benefits for families in medical crisis

**'08**

- DMF's flagship event, Giving Hearts Day, launches and mobilizes area nonprofits to secure more than \$475,000 in the 24-hour give-a-thon's first year

**'09**

- With a strategic focus on chronic disease prevention, DMF partners with Blue Cross Blue Shield of North Dakota to start statewide worksite wellness program
- Along with community groups, DMF launches CassClayAlive!, bringing active living and healthy eating habits to local schools and childcare facilities

## The 2010s The Endless Opportunity

**'11**

- DMF and Impact release an updated transfer of wealth study that projects \$95 billion will be given to North Dakota charities over the next 50 years

**'12**

- DMF celebrates 50th anniversary
- Breakthrough Idea Challenge funds innovative health-improvement ideas from the public
- Giving Hearts Day expands west, with 10 Bismarck organizations participating
- Ground is broken for a new state-of-the-art, collaborative DMF building

**'13**

- DMF Center for Excellence and Innovation opens, allowing area nonprofits a space to hold meetings and events
- Alex Stern Family Foundation sponsors the board room, with significant gifts also coming from Gate City Bank and SEI Investments

**'14**

- \$6.3 million gift establishes North Dakota Dental Foundation fund at DMF

**'15**

- Giving Hearts Day becomes statewide event and nears \$7 million in total donations
- New Giving Hearts Day website replaces manual distribution of donations to nearly 300 charities and funds

**'16**

- DMF founds Pledge to Protect, uniting more than 25 area organizations in the fight to end child sexual abuse



- To combat community addiction epidemic, DMF coordinates and launches Mayors Blue Ribbon Commission on Addiction
- Nearly 15,000 individual donors contribute on Giving Hearts Day and the event continues to grow, raising nearly \$8.5 million
- SAMHSA Drug Free Communities Grant received, allowing LevelUp Fargo to be funded
- DMF launches innovative workplace wellness initiative called P5 Performance, which is tasked with creating healthiest, happiest workplaces in the country in our own backyard

- Lend A Hand Up celebrates one decade and nearly \$13.5 million raised for families over its lifetime
- Approximately 15,000 people use the DMF building and more than 400 meetings are held
- DMF partners with North Dakota entrepreneur Gary Tharaldson and Dr. Daphne Denham to establish the Concussion Care Initiative, which provides concussed student-athletes with free hyperbaric oxygen treatment
- Giving Hearts Day sees most successful year yet, raising more than \$13 million for charities





## FAMILY OF INITIATIVES AND PARTNERSHIPS



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