THE CRIMINALIZATION OF INDIVIDUALS WITH SEVERE PSYCHIATRIC DISORDERS

Nowhere in our society is the debacle of deinstitutionalization felt more than in our criminal justice system. While well intentioned, reform efforts meant to protect the liberties of people with mental illnesses resulted in many of the most severely ill going without needed treatment. That, along with major cost-shifting by the states to the federal government following the advent of Medicare and Medicaid, has led to the largest component of today’s health crisis: The criminalization of Americans with severe psychiatric illnesses. In fact, America’s jails and prisons are now surrogate psychiatric hospitals for thousands of individuals with the severest brain diseases. -Mental Illness Policy Org.

In the years since the Reagan administration closed mental health residential institutions and many community health care clinics, the national rate of the incarcerated individuals with severe mental illness has soared. Many jails across the country hold more mentally ill people than hospitals do. This means that jail administration has become one of the biggest costs for local government. Also, jails are not the best place to recover from mental illness.

Most jail inmates with serious mental illness have charges against them for misdemeanors such as trespassing, disorderly conduct and threats. However, many are charged with domestic violence, a felony, because they may have damaged property or threatened a family member or roommate. Alcohol and drug related charges are also common for people with brain disorders because these issues regularly co-occur. Police also use “mercy bookings” as a way to try to “protect” people with the severest forms of psychiatric illness from being victimized or respond to pressure from local businesses to “clean the streets” of undesirables.

Another statistic shows that half of all inmates who complete or attempt suicide in prison have been previously hospitalized for treatment of mental illness, and the ratio of failed attempts to deaths stands at 20 to 1.

CIT programs in Clark County mean that about 80% of Vancouver police officers and a majority of Clark County Sheriff’s deputies have been trained in the 40 hour course. The Clark County Sheriff’s office also offered the first Corrections CIT program in Spring 2015 and will have a second program in the fall. Corrections officers from Clark, Cowlitz, and a number of other counties in WA and OR participated in this well-received 40 hour training. Clark and Cowlitz Counties both have active Mental Health Courts and Skamania County is hoping to start that service. NAMI SW WA and Columbia River Mental Health Services and other agencies in the area are exploring ways to create a Diversion Center and mobile mental health units. These units would help law enforcement officers to reduce both the visits to hospital Emergency Departments, as well as visits to jails, for the many individuals in the area who live with mental health disorders. We hope to meet the 45% reduction in jail bookings that has taken place in King County because of similar efforts.

It was hoped that providing medication to jailed individuals, and then connecting them to psychiatric services when they were released would ensure that they were not involved with the justice system again. However, recidivism rates among the mentally ill are now reaching more than 50 percent and new ways of ensuring that people are not incarcerated due to actions related to their mental illness are being explored.

It is important to note that meeting financial, physical, and emotional needs of the mentally ill, and not just treating the mental illness, is needed to ensure successful integration into the community and to help people become employed, become contributing members of society, and reduce future interactions with law enforcement.

NAMI believes that everyone should be able to access whatever treatment they need to help prevent interactions with police, and if interactions do occur, communities should provide options to divert them to treatment and services, before they are arrested and after they are arrested. NAMI is a partner in The Stepping Up Initiative, a national campaign to encourage counties to reduce the number of people in jail who have a mental illness. For more information and how you can become involved see www.nami.org/stepuptogether.
Dear Members and Friends of NAMI SW WA,

We have lots of excitement going on at our office this month as we prepare to open an office in Cowlitz County and move from our present location in Clark.

The City of Kelso recently offered NAMI SW WA space in a building they own at 109 Allen Street. We will take possession of the building on July 1 and begin some clean up on it with our partners in the community, the South Kelso Neighborhood Association (SKNA) which will share the space with us and possibly one or two other small nonprofits in the area. The rent is right ($10 per month) and the location is terrific with adequate parking and quick access to the greater Kelso/Longview community, the freeway and to county and city government offices. The building has been empty for a number of years so we will have a great deal of cleanup to undertake. Volunteers are welcome to contact us to get involved as we spray wash the outside bricks, install our NAMI SW WA sign, paint trim outside and some non-brick walls inside, move furniture and prepare to be open for business with our first newly formatted STRivE psychoeducational group on July 2nd. Other programs will continue here including our Family Support Group, a new Connections support group for individuals with a mental health diagnosis, individual short-term counseling for those not yet connected with a community therapist. Family to Family and BASICS classes are planned for the fall. Please join us!!! We will schedule an open house once we are settled. Remember that all our services are free of charge.

NAMI SW WA has also signed a lease for new office space at Tower Mall at 5403 East Mill Plain Boulevard. We are very excited about this move, as well because we are more than doubling the size of our offices, giving us a bit of room to grow as we move to the net iteration of health care here in SW WA. We take possession of this space on July 10th and hope to be open for business there around July 15th. We will also be located much closer to a number of our partners in mental health and health care with SeaMar and Catholic Community Services recently establishing office space at the same location. We are thrilled with the accommodations this new space offers to us...lots of room for our classes and support groups, some small rooms for our short-term counseling program. This program is going very well as we work to enable residents to get enrolled with community therapists We will now also have adequate space for our interns and numerous volunteers so they will not have to share a desk with others that is smack dab next to another desk. Our open house for this office will take place after Labor Day.

Equally important to our lives at NAMI SW WA is that we have hired Melinda McLeod as our Executive Assistant. Melinda comes to us with a long and impressive work history with for-profit and non-profit companies. She is very experienced in IT, writing and editing, time and efficiency management, and customer service. It is a great pleasure to have her join us. After just one week on the job she has already added significant benefits to our office, and we look forward to having her with us for a long time. Please help us welcome her.

Best to all, Peggy

From the Director’s Desk
JAILING PEOPLE WITH MENTAL ILLNESS

In a mental health crisis, people are more likely to encounter police than get medical help. As a result, 2 million people with mental illness are booked into jails each year. Nearly 15% of men and 30% of women booked into jails have a serious mental health condition. The vast majority of the individuals are not violent criminals—most people in jails are have not yet gone to trial, so they are not yet convicted of a crime. The rest are serving short sentences for minor crimes. Once in jail, many individuals don't receive the treatment they need and end up getting worse, not better. They stay longer than their counterparts without mental illness. They are at risk of victimization and often their mental health conditions get worse. After leaving jail, many no longer have access to needed healthcare and benefits. A criminal record often makes it hard for individuals to get a job or housing. Many individuals, especially without access to mental health services and supports, wind up homeless, in emergency rooms and often re-arrested. At least 83% of jail inmates with a mental illness did not have access to needed treatment. Jailing people with mental illness creates huge burdens on law enforcement, corrections and state and local budgets. It does not protect public safety. And people who could be helped are being ignored.

Helping people get out of jail and into treatment is a top priority for us. NAMI believes that everyone should have access to a full array of mental health services and supports in their communities to help prevent interactions with police. These supports should include treatment for drug and alcohol use conditions, and supports like housing, education, supported employment and peer and family support. If individuals do come to the attention of law enforcement, communities should create options to divert them to treatment and services—before arrest, after arrest and at all points in the justice system. When individuals are in jail, they should have access to needed medication and support, should be signed up for health coverage if possible and should get help planning their release to ensure they get back on track.

How NAMI is Helping Solve the Problem
NAMI believes that by partnering with criminal justice leaders, county and state leaders and mental health professionals we can help people with mental illness get the support and services they need to stay out of jail.

The Stepping Up Initiative
NAMI is a partner in The Stepping Up Initiative, an exciting national campaign to challenge counties to reduce the number of people with mental illness in jails. NAMI joins other national organizations calling on counties and communities nationwide to address this problem.

Crisis Intervention Teams (CIT) and Other Local Programs
NAMI Affiliates around the country partner with local law enforcement on crisis intervention team (CIT) programs to help police recognize a mental health problem and get people to treatment.

We also work on a variety of jail diversion programs, re-entry programs, and provide education and support to individuals and families at risk of involvement it the justice system.

Support to Families
NAMI’s Helpline responds to more calls from worried families about a loved one in jail than any other issue. We provide resources and referrals to legal services.

In the News
May 21, 2015, The Huffington Post
It's Outrageous: Jails and Prisons Are No Place to Treat Mental Illness; Just Ask Paton Blough by Mary Giliberti

Taken from https://www.nami.org/Learn-More/Public-Policy/Jailing-People-with-Mental-Illness
In My Own Voice
By R.S.

Let me first start off by introducing myself. My name is R, and I learned of NAMI SW WA and the STRivE group at the Clark County Work Center through a former group member. The first thought I had was “There’s nothing wrong with me”. “I’m alright as far as my mental stability goes”. I am however, always eager to learn new things about life and myself. My first attendance at the group was on 10-14-14, and I continue to go to this day. The words "mental illness" are a bit frightening to most people, including myself. The facilitators put me at ease by referring to the course as a mental health group because of the wide variety of topics that are discussed.

I have never actually been evaluated by a psychiatrist or psychologist to determine if I have symptoms that should be considered a disorder. Thank God for that, RIGHT? 😊 The truth is that through the STRivE program, I have found that I can relate to most all of the topics in some way. I would dare to say, or at least believe, that most of today’s society, in all walks of life can affiliate themselves to one or more of the topics which are addressed and discussed in group.

The topics cover many health related issues such as Family Relationships, Setting Boundaries, Communication Skills, Cognitive Thinking and Behavioral Therapy, Breaking Habits, Stress, Personal Responsibility, Depression, Domestic Abuse etc. The great thing about these groups is that they are open for discussion on any troubled situation that someone may be experiencing or have dealt with in the past. No matter what kind of day I’m having, I always feel better when I leave group.

The NAMI SW WA facilitators have provided me with ample amounts of information on the topics that are usually chosen by the group. I have always felt comfortable enough to share and give feedback in group. I have more compassion for people that I really don’t know but have heard their stories. I have learned to try and see the other side of people, their view points, and circumstances. NAMI SWWA has given me the tools which I can use to help me better understand some of the crises that not only I deal with, but many other people do as well.

I believe it is the overall structure of NAMI that allows people to learn new coping skills, feel safe enough to open up and share their experiences with others, to better themselves and live a happier life.

During my life, I have experienced times of anxiety, depression, insomnia, stress, addiction and failed relationships. Thanks to NAMI SWWA, I can now consciously recognize my emotions for what they are. I can evaluate my thoughts which in turn affect my behavior. There are so many combinations of symptoms that contribute to my happiness and unhappiness as well as my overall health. The information that I now have can assist me in what direction I need to go.

I have a lot more to learn about life and the conditions and situations that come with it. I hope to one day take what I have learned and share this information and my experiences with others. Perhaps I can even speak on the behalf of NAMI SWWA. Thank you NAMI SWWA and those who have shared their stories with me.

My total appreciation,

R
In My Own Voice
by G. E.

In America, the penal system is unequipped to handle the sheer volume of inmates in general. Take into account the mental instability of your average inmate and what’s left is a scary place.

I suffer from PTSD, and a concrete box stuffed to the point of inhumane is the ideal condition to create an outburst. It is also exactly where they put me. After being threatened, I struck an inmate and found the legal repercussions far outweighed the possibility of getting stabbed. Turning a 60 day sentence into a 6 month stay that cost me my job, home and freedom was just the beginning. The restitution, fines and probation are still my main focus. To think this all could have been avoided if someone (myself included) would have placed me in a pod where there was more segregation.

When my anxiety levels are high as a result of a PTSD episode, I am hypersensitive to threats in particular because of the violence involved in the main case of my PTSD. I am on edge, scared and jumpy as another inmate decides to accost me. So many thoughts going through my head as my fight or flight defenses are raised I made a bad call and struck him. This resulted in bodily injury to him before I knew what happened.

Now that the medical staff is involved, it is only a matter of time before the cops get involved. I am taken and questioned. The investigator was pleasant, but only after the Sergeant berated me briefly, the ever popular “good cop, bad cop”. An officer spoke to me and said, “we will be pressing charges because you broke his jaw and we are not paying the medical bill. So I was going to be convicted of assault, not because of justice, but because of budget.

Weeks go by and I am convicted of assault 3. I find that I will be in community custody for 1 year past release. All told, with restitution fines and court fees, the bill tallied in at just over $32,000. Now I am unable to travel to South Caroline to a job I had. So now I must find a decent paying job locally to pay back this astronomical amount of money.

The penal system is unequipped to facilitate the number of inmates in general. Take into account the mental instability of your average inmate and what’s left is a scary place. As an inmate, you find out how to stay safe from both the guards and the cons but sometimes you dodge one bullet just to step on a grenade.

I think about my time in custody in Clark County as a learning experience in which I learned that my PTSD is something that potentially could cost me more than I’m willing to lose.

Beginning Friday, July 17
1:00—3:30 pm
At NAMI’s new office.
5411 E. Mill Plain
Vancouver
Call (360) 695-2823 to reserve a spot.
WE ARE MOVING!

July 1
COWLITZ OFFICE
109 Allen Street
Kelso, WA  98626

July 15
VANCOUVER OFFICE
5411 E. Mill Plain
(Town Plaza)
Vancouver, WA  98661
West Side of Building

We are looking for furniture to furnish our new offices.

- Tables and chairs for groups
- Desks and desk chairs
- Bookcases
- Office dividers

Call Lyn at (360) 695-2823 if you can donate any of these items or would like to donate tax deductible funds.
Psychoeducation and tools for a successful and sustained recovery from mental illness.

Support for friends and family of people who have a mental health diagnosis.

Support for families of military personnel who are struggling with mental health issues.

Peer support group for those affected by mental illness.

MENTAL HEALTH THERAPY for the uninsured and underinsured. Limited term.
Vancouver Tuesday, Wednesday, Thursday
Provided by Janet and Jean

MENTAL HEALTH MEDICATION CONSULT
By appointment.

BENEFITS CONSULT w/Cindy Falter
By appointment.

HELPLINE - 9-5 Monday-Friday
Vancouver—Call 360-695-2823.
Cowlitz—Call 360-984-6096.

Provides support and resources.

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Vancouver 8019 NE 13th Avenue
Beginning July 15th—5411 E. Mill Plain
(360) 695-2823

Cowlitz 109 Allen Street
Kelso, WA 98626
(360) 984-6096 or (360) 695-2823

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**WEEKLY CALENDAR—Vancouver**

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<thead>
<tr>
<th>DAY</th>
<th>EVENT</th>
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<td>STRive After Release</td>
<td>1-2:30 pm</td>
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<tr>
<td>TUESDAY</td>
<td>STRive Women’s Group</td>
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<td>FAMILY SUPPORT 3rd Tuesday</td>
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<td>FAMILY SUPPORT 4TH Tuesday</td>
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<td>STRive</td>
<td>6:00-7:30 pm</td>
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<tr>
<td>THURSDAY</td>
<td>CONNECTION Support Group</td>
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**WEEKLY CALENDAR—Cowlitz**

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<tr>
<td>MONDAY</td>
<td>Walking Towards Recovery</td>
<td>10:30-11:15 am</td>
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<td></td>
<td>Discussions on Wellness</td>
<td>11:30 am - 1:00 pm</td>
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<td>Connections Open Support Group</td>
<td>2:00 - 3:30 pm</td>
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<td>TUESDAY</td>
<td>Walking Towards Recovery</td>
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<td>Discussions on Wellness</td>
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<td>STRive Psycho-Educational Group</td>
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It’s Outrageous: Jails and Prisons are No Place to Treat Mental Illness
By Mary Gilberti, Executive Director of NAMI

Human Rights Watch has released a report, Callous and Cruel, on the "unnecessary, excessive, and even malicious force" used in jails and prison to control inmates with mental illness. It's an issue that NAMI has long been concerned with, except that it's more than an issue or a concern. It's an outrage that should shock the conscience of America and we need your help to change it.

People unfortunately often end up in jail or prison when they don't get effective treatment for mental illness. In another report this year, Incarceration's Front Door, the Vera Institute of Justice found that more than two million people with mental illness are booked into county jails alone, but as many as 80 percent don't get treatment after they arrive.

Imagine putting people in jail when they experience a heart attack. Imagine a family being told that a spouse, son or daughter has suddenly experienced a psychiatric crisis and as a result faces a prison term. One in five adults experiences a mental health condition at some point in life. No American family is immune from risk. There is no one solution to the horrors presented in the Callous and Cruel report, but the prescription includes getting people living with mental illness the right help in their communities before the criminal justice system ever gets involved. It includes providing the right kind of treatment and supports in jails or prisons. It includes discharge planning and community services after release so that a person doesn't return.

Reform requires investment, but it doesn't take a rocket scientist to realize the economic absurdity of our present system. In Wayne County, Michigan, for example, it costs $31,000 annually to house a person living with mental illness in jail, while community mental health services would cost about $10,000. One key reform we need is nationwide expansion of crisis intervention team (CIT) programs for law enforcement. CIT trains police officers to respond more safely and humanely to individuals experiencing mental health crises by using "verbal de-escalation" skills and taking them to where they can get medical care rather than to jail. This leads to better outcomes.

Callous and Cruel recommends that jails and prisons adopt strategies that suit the "unique needs and vulnerabilities of prisoners with mental disabilities." These must include CIT for Corrections which some states already have adopted and a prohibition on the use of solitary confinement on prisoners with mental illness.

Better outcomes include recovery and wellness. Criminal justice reform means understanding that recovery involves treatment, hard work and courage and requires community support.

NAMI is currently working to pass legislation in Congress, S. 933 and H.R. 1854, the Comprehensive Justice and Mental Health Collaboration Act, to provide support for state and local law enforcement and correctional training, jail diversion and community reentry programs. We are also working with the National Association of Counties, the Council of State Governments Justice Center, the American Psychiatric Foundation, police associations and many others to challenge state and county leaders to adopt reforms. The effort is called the Stepping Up Initiative. Step by step, we can save both lives and money, but it is going to require everybody's help, including yours. So sign up today.

In addition, help us pass S.933 and H.R.1854. Please take action today. Let's work together to end the callousness and cruelty of the current system.
7 THINGS TO REMEMBER ABOUT MENTAL HEALTH

By Sandy Smith

Although we all experience and interpret life in different ways, there are a few universal truths for those living with a mental health condition. These are just a few examples of simple mental health realities everyone should know.

Mental Health Conditions are Real—Mental illnesses are just as real and valid as physical illnesses. Whether there are malfunctions in the brain or in the body, people need proper diagnosis and treatment. Many early deaths are also attributed to mental illness in the form of suicide.

It’s Not a Personal Weakness—We know that the brain is the organ that controls the processes and systems in our bodies. Malfunction of the brain can affect one’s thinking skills and intelligence, emotions, feelings, and relationship skills.

Everyone is Different—Each case is unique, as all individuals are unique. Even among people with the same diagnosis, every person will experience it differently. Not every person will exhibit all the common symptoms of their particular disorder. And what symptoms they do experience may vary in intensity and severity. Each person will be affected in a different way because of their own unique nature and personality.

You Can Help Your Family Member or Friend—If one of your loved ones lives with a mental health disorder, it is critical for their recovery that you give them compassion, respect, understanding, encouragement and support. Be careful not to pressure or force your loved ones to do things. You can’t tell other people how to think or feel just like you can’t say when a person is ready to work.

With the right support, treatment, and healing, people with mental illness will know when they are ready to do something, including work. They are not just being lazy. And some people never recover from mental illness; others only partially recover. To provide support, you may need to equip yourself with education and knowledge.

You Can Fight Stigma—You can’t control what other people think, say, and do, but you do have control over yourself. Even if you don’t know someone who lives with mental illness, you can do your part to help by spreading the truth, reducing stigma and increasing public awareness about this health problem. Please support these efforts just as you would for breast cancer or any other physical disease.

You Are Not Alone—I know that all I have said is true because I have first-hand knowledge and experience. I am a person who lived for many years with severe symptoms of serious mental illness. Many people live happy, healthy and productive lives despite a mental health condition.

There Is A Lot of Information and Resources—For more information about mental health research visit National Institute of Mental Health (NIMH) (www.nimh.nih.gov/index.shtml). Information and opportunities to get involved can also be found at NAMI’s website (www.nami.org). You can learn (http://stage.nami.org/Learn-More). You can find out how to support yourself or a loved one (http://stage.nami.org/Find-Support). Or you can see how to get involved and make a difference in your community (http://stage.nami.org/Get-Involved).
Review of "31 Stories for 31 Days" By Susan Correa

When I was asked to read, "31 Stories for 31 Days," posted on the National NAMI website, I was certain it would be a heartbreaking account of those with mental illness who endure devastating treatment from law enforcement and the justice system. Indeed, the system is broken and needs to be completely overhauled, but these stories turned out to be testimonies of resilience and hope. This in no part excuses the horrible conditions those with mental illness have often suffered, but the personal accounts of brave men and women who have overcome histories of illness and incarceration and gone on to lead productive lives are indicators of a brighter future for many.

David is just one example. He began having psychotic episodes at 16. His parents started taking NAMI Family to Family courses when this occurred, but things continued to go downhill for him until he committed 3 felonies and ended up in jail, spending 6 weeks in isolation while psychotic. Finally, he was sentenced to 25 years, with all but 10 suspended as a "guilty by mental illness" offender. He was transferred to a Forensic Hospital Unit. His loving parents drove 120 miles every weekend to visit him and help him every way they could with his struggle, but, ultimately, the outcome has been up to him. After 4 years, he was paroled to a treatment facility. After spending time in jail and the hospital, he decided to take charge of his life. Through the help of 12-step programs, volunteers, case workers, therapists, and a wonderful parole officer, he is setting goals and having successes. He is taking responsibility for his life and sticking to his treatment plan. Others, too, have been able to turn horrible stories of incarcerations and struggles into catalysts for changing their lives. As many a loved one knows, it is a choice they must make themselves.

Other stories are written by police officers, judges and other advocates who are working hard to improve things so the mentally ill receive the services they need. Judge Steven Leifman, of Dade County, is just one. In his words, he has become the "gatekeeper to the largest psychiatric facility in Florida - the Dade County Jail." Statistics are staggering. Florida is home to the largest number of people with serious mental illness of any urban area in the U.S. Over 20,000 people in need of mental health treatment are arrested there each year. The county spends $80 million dollars a year to house and treat them. He is struggling to bring about better services, but the task is daunting. Hope also lies with the heroic efforts of police officers, corrections officers, social workers and others who are being instructed all around the nation in Crisis Intervention Training classes. There, they learn to de-escalate situations in ways new to many seasoned public servants. Many other programs, public and private are there when the client is ready. Clearly, I was given a more positive outlook about this serious situation by investing time to read the "31 Stories in 31 Days." I would love to sit and listen to any one of these individuals elaborate more about either their personal struggles and triumphs or their efforts to bring humane treatment to the mentally ill.

You need to tell Social Security ...

If you have an outstanding warrant for your arrest for the following felony offenses:
- Flight to avoid prosecution or confinement;
- Escape from custody; and
- Flight-escape.

You cannot receive regular disability benefits, or any underpayments you may be due for any month in which there is an outstanding arrest warrant for any of these felony offenses, for the months a person is confined for a crime, but any family members who are eligible for benefits based on that person’s work may continue to receive benefits.

Social Security benefits usually are not paid to someone who commits a crime and is confined to an institution by court order and at public expense. This applies if the person has been found:
- Not guilty by reason of insanity or similar factors (such as mental disease, mental defect or mental incompetence); or
- Incompetent to stand trial.

If you violate a condition of parole or probation under federal or state law. You cannot receive regular disability benefits or any underpayment that may be due for any month in which you violate a condition of your probation or parole.

NEED HELP WITH BENEFITS?  Call to make an appointment with Cindy, Peer Benefits Specialist.
Bulletin Board

- **Are you looking for a place to volunteer?** We have a place for you. Some of the ways you can help are:
  - Call-in list for special projects.
  - Volunteer Coordinator position (1 day per week).
  - SEE ME Coordinator (2 days per week).
  - Teen Support Group facilitator.
  - STRiV Group leader.
  - Volunteers to help move the office.

Please contact Lyn if you need more information or are interested in these positions.

- **LOOK FORWARD** to a parent workshop called “**Building Confident Kids**” which will focus on teaching children resiliency skills. Tentatively scheduled for July 23rd, watch for more information.

- Watch for next month’s newsletter and more information on the **Jean Lough Symposium, Families in Limbo**. The symposium, held June 24, was very well attended and much work was accomplished towards solving the presented problems. We will focus our August newsletter on those results. The new task force that will come out of the symposium will also address the issues.

- Watch **The Columbian** for our public awareness campaign about mental health and NAMI SWWA. Thanks to The Columbian for providing us with this wonderful opportunity.

- Watch local TV to see our short public awareness clip that should air beginning this summer.

- **Family-to-Family** will be offered beginning July 17, 1-3:30 pm, at our new office at 5411 E. Mill Plain (Town Plaza). This 12-week class provides education and support for families, friends and caregivers of adults with a mental health diagnosis. Call (360) 695-2823 to reserve your spot!

Hello Cowlitz County Friends,

We are delighted to announce that the Kelso City Council voted to approve our low cost lease of the city owned building at 109 ALLEN STREET KELSO, WA. We are ever so grateful to the Council, to Steve Taylor Kelso City Manager, Amy Mullerlaille Assistant to the City Manager, and everyone else who had a hand in making this happen. This will allow NAMI SWWA to be more visible and open to the public, much more accessible to those we serve and to greatly expand our support groups and community outreach. We also wish to extend a big thank you to Carlos Carreon, Director of Cowlitz County Health & Human Services and his staff, for their hospitality and support of NAMI during our stay.

We will be leaving the Public Health Building by June 30th and setting up camp in our new space until we find furniture and equipment donations and get things put together. We are so fortunate to have a great group of volunteers to assist us throughout this process. My final thanks goes out to Chris Bornstedt, a strong NAMI supporter, who told us months ago about this potential new home for NAMI and encouraged us to pursue it.

Already we have our new July calendar out introducing some new daily groups. Our Office Hours will be 10am-4pm Monday-Friday, and we welcome everyone to stop in to say hi. Watch for our Open House later on in the month after we get settled in.

Until next month, remember that WELLNESS is a journey, requiring vigilance and daily commitment to yourself and your health. It’s easier to stay the path when joining with others that are also working toward being their kindest and healthiest selves. Be well..... Janie
Help support the one in four Americans who will be affected by mental illness this year.

Thank you for being part of the team!

□ ANNUAL MEMBERSHIP - $35.00
□ OPEN DOOR ANNUAL MEMBERSHIP - $3.00

(No one is refused membership due to economic hardship)

□ DONATION $ ____________

We are a registered non-profit organization 501(C)(3) and donations are tax deductible.

Name: _____________________________________
Address: ___________________________________
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Thank you for being part of the team!