Sunday
May 17, 2015
Vera Katz Eastbank
Esplanade
(near SE Water and SE Main)
Portland, Oregon
Register prior to walk.
Walk begins at 1:00 pm

JOIN US!

1. To walk or be a virtual walker. Go to www.namiwalks.org/northwest. Click on big blue button “register to walk.” Select what kind of walker you want to be. Select team and follow instructions to join that team.

2. To donate to a team. Go to www.namiwalks.org/northwest. Click on big blue button “donate.” Click on Team tab. Select Team’s name. Follow instructions to donate.

3. To donate to an individual who is on a team. Go to www.namiwalks.org/northwest and click on the big blue button “donate.” Click on individual tab. Search by individual’s name and click on it. Follow instructions to donate.

4. To donate cash either by an individual or business. Make checks out to NAMI SW WA. Mail checks to

NAMI SW WA—NAMIWalks WA
PO Box 5353,
Vancouver, WA 98668

THANK YOU SO MUCH FOR YOUR SUPPORT!
Dear Members and Friends,

May is Mental Health Awareness Month and NAMI SW WA has many exciting events planned in the next few weeks, many of which will carry over into June. We hope you will join us to demonstrate your support of the work we do in our three counties.

On Sunday, May 16th we will be joining NAMI supporters across the nation as by walking for all those affected by mental health disorders...both the individuals with diagnoses and their family members, caregivers, and friends. NAMIWalks is our largest fundraising event of the year and funds from this help us keep our doors open and able to carry out the programs we offer. The walk is in Portland and the details can be found on page 1. If you have not joined a team, please do so right away. We ask for donations, however if you cannot afford a donation you are still welcome to walk with us. It would be wonderful to have 1,000 people from SW WA join the thousands of walkers from the rest of the Portland Metropolitan area to show our combined support for those who come to NAMI for services.

Our NAMIWalks efforts continue into June when we will also walk, or walk virtually, with the Washington NAMI in Redmond, WA on June 7. We are raising funds from businesses around our region to support this walk. If you own a business or have good connections with businesses that might be inclined to donate to this worthy cause, please let us know and be the connection between that business and NAMI SW WA to help us raise the funds we need to keep offering the services we offer.

We are also busy planning for the Jean Lough conference that is scheduled for Thursday, June 25th. Publicity is going out now about this conference titled Families in Crisis. Our format for this conference is to have several guest speakers talking about the issues of families who support adult family members with mental health diagnoses. Breakout sessions will set some achievable goals and the group will determine one or two actions that can be implemented and worked on by the larger communities over a period of a few months before we gather again to assess the achievements of helping to make a difference for these families.

Please join us for these and our other regular activities. Check our bulletin board to get more details on upcoming events.

Best regards to all and I hope to see all of you at the Walk on the 16th.

Peggy
DO YOU KNOW YOUR ACEs SCORE?

You don’t? Don’t worry, most people today have never even heard of ACEs. ACE stands for Adverse Childhood Experience and is an event such as abuse or neglect that happens to an individual as a child. These events include physical abuse, verbal abuse, sexual abuse, as well as physical and emotional neglect. An ACEs score is obtained through a simple yes or no 10 question quiz. The more yes’s children have in their lives, the higher the chances are that any child will engage in poor health behaviors as an adult including drugs, alcohol, or unsafe sex. It increases the likelihood of criminal behavior and mental illness. A high ACEs score also increases the risk of other chronic illnesses such as asthma, diabetes, coronary heart disease, cancer and autoimmune disorders. Most importantly, because of all the effects of ACEs, an individual’s life expectancy may be decreased by up to 25 years. However, when thinking about Adverse Childhood Experiences parents should also consider that genetics play an important role in these outcomes and some children are born with a natural resiliency that provides protection.

Let’s get more specific. Ask yourself, as a child did you live with an alcoholic or drug abuser? Did you often feel that no one in your family thought you were important or special? Were your parents divorced or separated? Did you ever witness your mother or step-mother being pushed, slapped or hit with an object thrown at her? Those are just a few of the questions you would find on the quiz, and if you answered yes to any of those questions then you have had an adverse childhood experience.

On the opposite side of the negative experiences is resilience. After taking an ACEs quiz, the same individual would then be asked the positive things in their life, such as did you feel loved as a child by parents or others helping to care for you? Did you feel liked by neighbors or other family members? Did someone care about whether or not you’re attended school or was noticed for being capable? Answering yes to any of those questions gives you protective factors that help balance out the negative. The more protective factors you have, the more resilient you are, and the better equipped you will be at overcoming the negative experiences in life.

Now that you performed a self-evaluation, take the time to evaluate your children. Do your children have an ACE’s score? Is there room for improvement in supporting your child’s growth and resilience? The answer is yes even from the most successful parent because there are always things we feel we could do better. Parents should focus on the fact that it’s not the amount of toys a child has that makes them feel loved, but the support, the praise, hugs and smiles they get from you. It’s how you speak: do you sound angry or kind? Do you apologize when you know you have overreacted? There are steps that a parent can take early on to lessen negative childhood experiences and practices. They can put these strategies into place to prevent ACEs from occurring. If you are interested in attending a workshop to learn how to help your children, please watch for more information or call the NAMI office.
ADVERSE CHILDHOOD EXPERIENCE (ACE) QUESTIONNAIRE

While you were growing up, during your first 18 years of life:

1. Did a parent or other adult in the household often ...
   - Swear at you, insult you, put you down, or humiliate you?
   - Act in a way that made you afraid that you might be physically hurt?
   - Yes No  
   If yes enter 1 ________

2. Did a parent or other adult in the household often ...
   - Push, grab, slap, or throw something at you?
   - Ever hit you so hard that you had marks or were injured?
   - Yes No  
   If yes enter 1 ________

3. Did an adult or person at least 5 years older than you ever...
   - Touch or fondle you or have you touch their body in a sexual way?
   - Try to or actually have oral, anal, or vaginal sex with you?
   - Yes No  
   If yes enter 1 ________

4. Did you often feel that ...
   - No one in your family loved you or thought you were important or special?
   - Your family didn’t look out for each other, feel close to each other, or support each other?
   - Yes No  
   If yes enter 1 ________

5. Did you often feel that ...
   - You didn’t have enough to eat, had to wear dirty clothes, and had no one to protect you?
   - Your parents were too drunk or high to take care of you or take you to the doctor if you needed it?
   - Yes No  
   If yes enter 1 ________

6. Were your parents ever separated or divorced?
   - Yes No  
   If yes enter 1 ________

7. Was your mother or stepmother:
   - Often pushed, grabbed, slapped, or had something thrown at her?
   - Sometimes or often kicked, bitten, hit with a fist, or hit with something hard?
   - Ever repeatedly hit over at least a few minutes or threatened with a gun or knife?
   - Yes No  
   If yes enter 1 ________

8. Did you live with anyone who was a problem drinker or alcoholic or who used street drugs?
   - Yes No  
   If yes enter 1 ________

9. Was a household member depressed or mentally ill or did a household member attempt suicide?
   - Yes No  
   If yes enter 1 ________

10. Did a household member go to prison?
    - Yes No  
    If yes enter 1 ________

Now add up your “Yes” answers: _______ This is your ACE Score

HOW DOES WASHINGTON STATE RANK IN ACEs SCORES?

Research has found that the highest levels of risk for negative outcomes are associated with having experienced multiple adverse childhood experiences (ACEs). Nationally, a slight majority of children have not experienced any ACEs, but in 16 states more than half of children have experienced at least one ACE. In Montana and Oklahoma, 17 percent of children have experienced three or more ACEs. In Washington State, 53% of children have experienced no ACEs, 36% have experienced one or two, and 11% have experienced three or more. It is felt that these Washington statistics might be significantly higher due to the fact that the survey was conducted by Kaiser, and would have been based on middle-income children.

The most common ACEs in all 50 states are economic hardship, and parental divorce or separation. Nationally, just over one in four children ages birth through 17 has experienced economic hardship somewhat or very often. In Washington State economic hardship affects 25% of children ages birth 17, divorce is experienced by 21%, alcohol use and mental illness affects 12%, and 9% experience violence.

Traumatic childhood events, like abuse and neglect, can create dangerous levels of stress and derail healthy brain development—resulting in long-term effects on learning, behavior and health. A growing network of leaders in research, policy and practice are leading the
Resilience is all about being able to overcome the unexpected. Sustainability is about survival. The goal of resilience is to thrive.

Jamais Cascio

When we tackle obstacles, we find hidden reserves of courage and resilience we did not know we had. And it is only when we are faced with failure do we realize that these resources were always there within us. We only need to find them and move on with our lives.

A. P. J. Abdul Kalam

I think one thing is that anybody who's had to contend with mental illness - whether it's depression, bipolar illness or severe anxiety, whatever - actually has a fair amount of resilience in the sense that they've had to deal with suffering already, personal suffering.

Kay Redfield Jamison

Part of resilience is deciding to make yourself miserable over something that matters, or deciding to make yourself miserable over something that doesn't matter.

Elizabeth Edwards

way in preventing adverse childhood experiences (ACEs) and mitigating their impact through building resilience.

How does resilience develop? There are multiple pathways to resilience. Resilience researchers continue to refine understanding about the ingredients and processes involved in supporting resilience. However, there is agreement about a variety of important individual, family and community conditions that support resilience. Here is a list of protective factors:

- Close relationships with competent caregivers or other caring adults
- Parent resilience
- Caregiver knowledge and application of positive parenting skills
- Identifying and cultivating a sense of purpose (faith, culture, identity)
- Individual developmental competencies (problem solving skills, self-regulation)
- Children’s social and emotional health
- Social connections
- Socioeconomic advantages and concrete support for parents and families
- Communities and social systems that support health and development, and nurture human capital

RESILIENCY SELF-ASSESSMENT QUESTIONNAIRE

This questionnaire will help you identify strengths, as well as making you aware of areas for improvement. Choose a number that best fits each statement:

4 = The statement is definitely true.
3 = The statement is, for the most part, true.
2 = The statement is only partly true.
1 = The statement is only occasionally true.
0 = The statement is completely false.

1.___ I have five supportive relationships in my professional life.
2.___ I can brainstorm other possible choices when confronted with crises at work.
3.___ At an emotional level, I accept change as a part of life.
4.___ I have goals and dreams for this year.
5.___ I take action on decisions.
6.___ I have hobbies or activities that express my creativity.
7.___ I have tried new activities this year.
8.___ I can list five personal strengths.
9.___ I have a strong sense that life is worth living.
10.___ I have self-care strategies for managing strong emotions.
11.___ I have positive self-talk messages.
12.___ I take care of myself regularly.
13.___ I am able to make meaning of suffering.
14.___ I have relationships of mutual support at work.
15.___ I am able to choose from a number of options to solve problems.
16.___ I thrive on change.
17.___ I have well-defined goals.
18.___ I solve problems quickly in my department.
19.___ I find my hobbies relaxing.
20.___ I enjoy trying new things.
21.___ I focus on my strengths.
22.___ Life is good.
23.___ I am able to express my feelings openly.
24.___ I have a positive view of myself.
25.___ Pain has shaped who I am.

_____ TOTAL SCORE

Evaluating your answers

All of the self-assessment statements were phrased positively. Individual answers of 3 or 4 would indicate a high degree of resilience in that area. Lower scores signify that attention and skill building are required.
BOOK REVIEW: ANSWERS TO DISTRACTION
By Edward M. Hallowell, M.D. and John Ratey, M.D.

This book about Attention Deficit Disorder (ADD), educates those of us who might confuse the condition with similar disorders. The authors, both on the Harvard Medical School faculty, lecture on the subject of ADD and also work with people who have ADD. Their book answers some of the many questions they have been asked about ADD. The authors state that the condition is not disease-caused; it’s a neurological condition that exists because of the way certain brains are wired. Brain-scan studies show biochemical anomalies as well as geographical or structural differences.

In the book are suggestions for both teachers and parents on how to work with ADD in the classroom or at home. Advice is also given on what not to do. The authors strongly recommend bringing humor into situations, where it can help defuse stresses in families and at school, and other places where dealing with people with ADD can be difficult. Most children are diagnosed by age seven, but much older people have been diagnosed with the condition, and some seem to outgrow the condition during adolescence.

Individuals with ADD are often very creative and talented. Using vision, inspiration, and perspiration, they achieve success, if they can retain focus. Techniques can be learned to help them focus on a task instead of being distracted by their thoughts or the activities going on around them.

With proper diagnosis, followed by treatment that is balanced between medication, such as Ritalin, and the use of guidelines related to conduct and behavior, most can achieve success in life. Certainly Benjamin Franklin and Thomas Edison, both ADD sufferers, were successful. Their lives give hope to present-day sufferers of ADD.

There is a great deal that can be learned from the book, now available in our NAMI library.

By Nancy Marsh

NAMI SW WA has been in the Daily News three times these past few weeks. One article reported on an outreach event where approximately 300 people showed up at Lake Sacajawea to enjoy a chili cook-off, hot dogs and to raise awareness of the issue of dual diagnosis as it pertains to mental health and addiction and affects at least 50% of all people with a mental health diagnosis. Local NAMI SW WA volunteers helped to serve and to provide NAMI information and resources available locally. A second article on April 17th, featured an interview with Daryn Nelsen-Soza where she discussed the expansion of services and the potential for a move to a new building. A third article on April 23 discussed NAMI’s advocacy to effect change for people with poor mental health.

NAMI SW WA presented at a recent Kelso City Council meeting about the services that are being offered locally. Presentation folders of information were provided to each Council member for further review. Peggy McCarthy, Suzanne Arnits, Janie Gislason, and Daryn Nelsen did a wonderful overview of the programs, services and potential for moving into a city owned building. Stay tuned for more on that in the days to come.

STRIVE groups are being well attended with several new members, and several returning members. As the organization continues to grow, new options are being proposed for more groups and additional programs.

24-hour Emergency Mental Health services are available free of charge to citizens of Cowlitz County. To reach them, please call: Cowlitz 24-Hour Emergency Mental Health Service (360) 425-6064 Toll-free (800) 803-8833 Hearing Impaired (800) 610-6868 Office Hours: 24-hours a day, 7 days a week Address: 921 Fourteenth Avenue, 3rd Floor, Longview, Washington 98632
Social Security Expands Hours Nationwide  Effective March 16, 2015, field offices will be open to the public for an additional hour four days a week. Mondays, Tuesdays, Thursdays and Fridays  9:00 am – 4:00 pm Offices will continue to close to the public at noon every Wednesday so employees have time to complete current work and reduce backlogs

Plan to attend the Jean Lough Annual Symposium June 25 at the Clark College Auditorium. The topic addresses will be “Families in Limbo,” and will look at a variety of situation families and caregivers of adults with serious mental illness face. Solutions will be generated and an action plan developed for our community. Call 360.695.2823 to preregister. This symposium is for mental health practitioners, educators, medical and substance abuse providers, law enforcement, families, caregivers and consumers. See the flyer on the back of the enclosed calendar for more information.

In Our Own Voice Training will be held at our office in late June and is currently being scheduled. NAMI In Our Own Voice presentations change attitudes, assumptions and stereotypes by describing the reality of living with mental illness. People with mental health conditions share their powerful personal stories in this free, 90-minute presentation. For more information or to sign up for this Saturday training, call (360) 695-2823.

Family to Family will start again in June. Location and time will be announced. Please call to be placed on the list. (360) 695-2823.

We will miss Daryn, but we congratulate her on her new position at SeaMar Community Health and her brand new MSW. She will still be seeing clients in Vancouver and Cowlitz and will continue working with HomeFront, NAMI’s signature program for families of Veterans and Service Members. Our best to you as you explore new avenues.

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10 COMMANDMENTS OF MENTAL HEALTH

1. Think positively; it’s easier
2. Cherish the ones you love
3. Continue learning as long as you have life
4. Learn from your mistakes
5. Exercise daily; it enhances your wellbeing
6. Do not complicate your life unnecessarily
7. Try to understand and encourage those around you
8. Do not give up; success in life is a marathon
9. Discovery and nurture your talents
10. Set goals for yourself and pursue your dreams.

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NAMI Family Support Group is a peer-led support group for family members, caregivers and loved ones of individuals living with mental illness. Gain insight from the challenges and successes of others facing similar circumstances. By sharing your experiences in a safe and confidential setting, you gain hope and develop supportive relationships. This group allows your voice to be heard, and provides an opportunity for your personal needs to be met. It encourages empathy, productive discussion and a sense of community. You’ll benefit through other’s experiences, discover your inner strength, and learn how to identify local resources and how to use them.

3rd Tuesday of the Month
7:00-8:30 pm
NAMI Office
Facilitated by
Don Greenwood

4th Tuesday of the Month
7:00-8:30 pm
NAMI Office
Facilitated by
Kay Roberson
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)

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

**Name:** ____________________________________

**Address:** __________________________________

**City:** ____________________________

**State & Zip:** ________________

**Phone:** (_____) ____________________________

**E-Mail:** ___________________________________

**NAMI Membership Includes:**
- NAMI National Advocate Magazine, quarterly
- NAMI Washington Friday Facts, weekly e-mail by request
- NAMI SW WA Newsletter, monthly
- Member Discounts on NAMI Events & Materials

Please return your payment and completed form to:

NAMI Southwest Washington
P.O. Box 5353
Vancouver, WA 98668

To use a credit card and join online, go to www.nami.org

Thank you for being part of the team!