NAMI Walks 2014 a Big Success

NAMI Walks NW on May 18th was the biggest walk so far for Oregon and SW Washington. We are waiting to get figures from NAMI WA for their walk that takes place in the Seattle area every year.

NAMI SW WA is very grateful that we have the opportunity to walk locally rather than having to drive the distance to and from the Seattle area for an event that is not only a great deal of fun, but is energizing and very important in our consumers’ recoveries. It was terrific to walk with over 3,000 other people all with the same goal to destigmatize mental illness. While the majority of walkers were from the three main Oregon counties in the Portland area, NAMI SW WA had a fair number of walkers as did Eugene and Salem.

The NAMI Walks NW goal is to raise $210,000 and the hope is that this amount will be reached by the end of the drive. If you have not sent your pledge please do so; if you still want to contribute send your donation to us at NAMI SW WA and put NAMI Walks on the check. You can also stipulate whether you prefer to have your contribution go to the Walk in OR or WA. Thanks ever so much. We intend to make the Walk even bigger next year.

NAMI SW WA is looking for several go-getters who loves to carry out plans for a big event to coordinate our contributions to both walks. We are looking for a couple of people to work as a team for the next year, gathering corporate and organizational donors as well as individuals who will join teams and gather donations from their peers, coworkers, families and friends. If you can commit time and energy to this, please let us know by calling (360) 695-2823 and talk to Peggy or Connie, our Volunteer Coordinator.

Please donate today!
Dear Members and Friends,

May, National Mental Health Month, was an extremely busy month with many special events throughout the month. Ann Donnelly, our Board President, and I spent time doing outreach with a variety of faith-based organizations, and Judge Zimmerman, Board member, was busy helping to organize the local Hazeldell Parade where NAMI SW WA had a table and was able to meet many people from the community to talk about mental health and mental illness. Cowlitz County Board member, Frank Randolph, worked hard on our second Cowlitz Forum held on Tuesday, the 28th. The topic for this forum was Care for the Elderly with Dementia and Alzheimer’s. This forum was done in partnership with Cowlitz County Guidance Association and Lower Columbia Mental Health. Ann and Judge Z are busy preparing for the Clark Forum on June 24th to which the candidates for Sheriff are invited to present and discuss their views on mental illness as it relates to that office. (See the Bulletin Board, page 7) This is possibly the most important elected position within the county for any family that is dealing with mental health issues. Please attend the forum and select your favorite candidate carefully. Most importantly, VOTE in the primary election August 5th.

In May NAMI SW WA launched SEE ME in Skamania County. We presented two sessions to two groups of first responders: the staff, and the volunteer EMTs and paramedics. The group also trained two separate classes of EMTs in training in Clark County. The program was received very favorably, and we have been asked to return in the near future to do more training with these groups. See the story about SEE ME on page 5. See the Bulletin Board for our June schedule for other presentations. This program focuses on reducing stigma in the general population and in providing those who interact with the public to be better able to respond to people with a mental illness diagnosis who may be in crisis or who, because of the interaction may be triggered into a crisis.

I want to thank all of you who have updated your NAMI membership or who have recently joined NAMI SW WA. Membership is such a big issue for NAMI across the nation. I am very pleased to announce that NAMI National is also putting effort behind increasing membership; we cannot do what we need to do in the realm of advocacy without your help in this. In order to have any significant effect in the nation, in states, in counties, or cities and towns, we must have tens of thousands of members in each local jurisdiction. If you are not a member, please join today.

Lastly, I want to thank all our friends in SW WA who supported us in the NAM Walks efforts that took place in the Seattle area on May 17th and in Portland (the NW Walks) on May 18th. We greatly appreciate your support by actually walking or simply donating as a virtual walker. We had a great group of walkers from SW WA in Portland as well as Walks volunteers. We are looking for a NAMI Walks Chairperson or people for 2015. Please consider helping us with this. We need committed people for this who will be in it for the year, gathering businesses and organizations throughout SW WA who will become sponsors for us, as well as creating teams. This is our opportunity for some great fundraising and as we expand our services and reach we must increase our funding significantly. If you have experience or want to gain experience doing a major fundraising effort, please contact us.

Thanks so much for your support of NAMI Southwest Washington,

Peggy
Personality Disorders

Everyone has problems getting along with other people some of the time. Personality disorder is a term for several behavior patterns that make it consistently difficult for people to get along with others, regardless of the circumstances. Most people with personality disorders do not receive mental health treatment unless they harm themselves or commit a crime. However, they are a precursor to mental disorders and can result in suffering and impairment. The Diagnostic and Statistical Manual of Mental Disorders (DSM) defines a personality disorder as an “enduring pattern of inner experience and behavior that deviates markedly from cultural expectations, is inflexible and pervasive, has its onset in adolescence or early adulthood, is stable over time, and leads to distress or impairment.” It lists 10 personality disorders and assigns each one to ‘clusters’ A, B, or C.

**Cluster A (odd, bizarre, eccentric)**
- Paranoid Personality Disorder – a pervasive distrust of others, including family and friends
- Schizoid Personality Disorder – this person is disconnected and distant and prone to brooding and fantasy.
- Schizotypal Personality Disorder – characterized by oddities of appearance, behavior, speech, and thinking patterns such as in schizoid personality disorder.

**Cluster B (dramatic, erratic)**
- Antisocial Personality Disorder – prone to men, is a disregard for the feelings of others, and social guidelines and responsibilities
- Borderline Personality Disorder – this disorder is characterized by unstable relationships, emotional instability, outbursts of anger and violence when confronted with criticism.
- Histrionic Personality Disorder - these people depend on the attention and approval of others and often seem prone to dramatizing
- Narcissistic Personality Disorder – this disorder is characterized by a grandiose sense of self-importance, a sense of entitlement, and a need to be admired.

**Cluster C (anxious, fearful)**
- Avoidant Personality Disorder – this person is anxious because they believe they are socially inept, unappealing or inferior, and they fear being embarrassed, criticized, or rejected
- Dependent Personality Disorder – this is described as a lack of self-confidence and an excessive need to be taken care of
- Obsessive-compulsive Personality Disorder – this person has an excessive pre-occupation with details, rules, lists, order, organization or schedules

Personality disorders are notoriously hard to treat and do not go away without treatment, however research suggests that dialectical behavior therapy (CBT) and cognitive therapy can help people with the need for therapy.

**What does your brain need to be healthy?**

Our brains are one of the most complex biological structures we know. The adult brain weighs about three pounds and many has nutritional needs to keep it healthy.

**Fatty Acids** – Your brain is 2/3 fat and needs a steady supply of fatty acids to keep cell membranes intact and to insulate the nerves. The best fats are Omega-3 fatty acids and the best source for these are fish, flax seed, and walnut oils. Supplying
these nutrients may decrease the possibility of Parkinson’s and Alzheimer’s disease, and will also help with depression. Saturated and trans fats may actually be harmful to the brain. Cut these from your diet as much as possible.

**Antioxidants** – Antioxidants, like vitamins C, D, and E, help protect delicate brain tissue from damage by free radicals. Eat blueberries, strawberries, spinach, kale, oranges, sweet potatoes, eggplant, grapes, and some dark chocolate for antioxidants and nutrients. Everyone, especially those of us who live in the Pacific Northwest should take oral Vitamin D3 in an oil capsule. There is no known way to overdose on Vitamin D and, because it is not only essential for brain health and helps to reduce depression but protects us against cancer and other conditions, we should each take at least 1000 IUs (international units) per day.

**B-Complex Vitamins** – B complex vitamins help reduce inflammation within blood vessels that decreases blood supply to the brain. This can damage brain cells that control coordination and reaction speed. To keep B vitamin levels high, eat lean meat and dairy. Some healthy plant proteins can be found in tofu, beans, nuts, and quinoa.

**Protein** – Foods high in protein help balance blood sugar and ensure that your brain gets a steady supply of glucose. Proteins also ensure a supply of tyrosine that helps supply neuro-transmitters such as dopamine and norepinephrine, brain chemicals that affect your mood and energy levels. Protein comes from meat, fish, eggs, dairy, whole wheat grains especially quinoa, and beans. Eat moderate amounts of complex carbohydrates like whole grain rice, wheat and oats to help keep glucose levels steady.

**In Training for Another** by Danette Elpel

Last month’s newsletter article discussed the main federal law concerning service animals, the American’s with Disabilities Act (ADA). ADA allows each state the right to make its own laws regarding service animals in training. Allowing both trained and “in training” service animals equal access removes the confusion and ambiguity currently existing under Washington state law. Forty-six other states legally protect the right of public access for service animals in training. Washington offers no legal protections for service animals in training. Therefore, a disabled person with a service animal “in training” can be legally denied access of their service animal to any public place. Employers and others can also legally discriminate against disabled persons with service animals in training under current Washington law.

Dogs are the main type of service animal used by disabled people. It is essential that service dogs in training train in a variety of public locations. Dogs trained in one setting may need further training to carry out the same task in another setting. For example, my trained service dog can sit quietly under the table while I have a meal at home but, early on, he needed further training in a restaurant setting that has more distractions. And once he mastered one restaurant, he needed the same reinforced training when going to a different restaurant. Now, if I haven’t been to a restaurant for a while, he still needs a few extra minutes to adjust and may even need additional training. Washington state law is silent on whether or not this situation means the service dog is “in training” or not.

Even a trained service animal may have setbacks – either because the animal hasn’t used a task for a while or the animal may experience behavioral or environmental changes that require more training. For example, I have a trained service dog that, due to behavioral changes at age two, needed refresher training on how to
Integrity is doing the right thing even when no-one is watching.

enter a crowded room. His trainer has seen the need for reinforced training at this age many times before due to developmental changes many dog breeds go through. Again, the law is silent as to whether this is considered a dog “in training”. Because the law is unclear, I did this refresher training in Oregon. Oregon provides disabled people with service animals the same protections whether the service animal is “in training” or trained. If Washington state law allowed protections for both situations, there wouldn’t be uncertainty in this type of situation.

Another problem to consider: an employer cannot refuse to hire or fire an employee simply because the employee has a trained service animal. This is considered employment discrimination under the law. However, if the service animal isn’t fully “trained”, the employee has no legal protection from being fired for having a service animal. This is true even if the service animal may be performing tasks that are necessary to assist the disabled person before the animal is fully trained.

The amount of uncertainty and confusion caused by current state law prevents trainers in Washington from legitimately performing valuable public access training. Most importantly, Washington state law allows those wishing to discriminate against a disabled person with a service animal in training the ability to do so. NAMI’s SW Washington affiliate will work toward clarifying Washington state law to allow for the same protections for service animals in training that are currently given to trained service animals.

Thank you for your comments and suggestions. Given the feedback on this legal issue, the next article in this series weighs the benefits and drawbacks of enacting a law that requires public access certification for all service animals. If you want to learn more about or work on this policy effort call our office at (360) 695-2823

Sharing Experiences and Empathy for Mental Illness Education (SEE ME): A new NAMI SW WA Destigmatization Program

In early winter, 2013, Sandy Frischman came to NAMI to talk about her recent voluntary hospitalization for depression, one of many over the years. She recounted a number of issues, some good and some that certainly did not help her move out of her deep depression and into recovery. Once again, Sandy is very realistic about her diagnosis of major depressive disorder (MDD). She has been living with it for most of her adult life. She is now living on long-term disability from her last employment. She is very encouraging to others who are in the same situation as she tells them to understand and believe that disability is a payment from the government for people who cannot work. Instead you are being paid to stay home and take care of yourself and maintain recovery, because disability payments cost much less than frequent hospitalizations or trips to the ER.

After several meetings, Sandy kept pushing and pushing us to find a way to make the lives of people in a mental health crisis easier. Part of Sandy’s recovery maintenance program includes a neighbor who was in training to become certified as an Emergency Medical Technician (EMT). They talked about what Sandy wanted to do. Then, Sandy came to NAMI with the idea that we create a program that could reach out to first-responders such as EMTs, fire-fighters, hospital ER staff, as well as to corrections staff, businesses, civic organizations and other sites. This is will be a program, in which NAMI will train participants to be less fearful of people with a diagnosis of Mental Illness and provide them with skills that can be used if they are interacting with (Continued on page 6)
people in crisis when the situation needs to be diffused.

For the past four to five months, a group of volunteers including Heidi Bjurstrom, Mike Jackson, and a few others have worked with NAMI staff to create this program. It launched on May 14th with two trainings for EMTs and paramedics in Skamania County. The program consists of a short educational presentation followed by presentations made by a panel of people living with various mental health diagnoses. Depending on the audience, we choose speakers who live with the conditions that the audience is most likely to encounter in their day-to-day activities. Our first presentations included Sandy who talked about major depression and Keri Stanberry who talks about her diagnosis bipolar disorder. We introduced these audiences to schizophrenia though an interactive demonstration that NAMI uses in Family to Family. The entire program will gather data from pre- and post-tests to ensure that we are actually teaching the audience important information. In addition, we will follow up with random interviews with participants to determine how or if they are using the information presented.

SEE ME is booking sites throughout our three county area. This program will be in addition to the targeted Crisis Intervention Training (CIT) given to Clark police officers and sheriff’s deputies and that is sponsored by NAMIs throughout the United States and the NAMI Parents and Teachers As Allies (PTA) destigmatization program that is offered to schools.

If you are an employer, a member of a church or civic organization, employed in healthcare, part of a first-responder team please let us know when we might come to present to you and your colleagues.

Introduction to Daryn Nelsen, MSW Intern at NAMI SW WA: In Daryn’s Own Voice

Where does one start to tell you about me and my background? First and foremost I am a true blue Washingtonian. Born in rural Eastern Washington, I have wandered far but have come back to the Evergreen State. I have been a resident of Clark County for eleven years. I decided four years ago to finish a second college degree. Graduating from Ashford University in 2013 with a BA in Psychology, I entered into the Masters in Social Work Program at the University of Southern California in the fall. I will graduate with my MSW in November 2014.

My personal vision of social work and mental health is that people can find hope, strength, resilience and empowerment when provided with integrity of the services, resources, and counseling. I feel that by providing tangible services, counseling, problem-solving skills, and healthy interactions, we are better able to accomplish our aspirations and achieve our goals. My vision is that I will be a voice for the care and treatment of consumers who are hidden and voiceless. I want to help foster education and awareness of mental health issues while advocating for public policies and strategies that provide an effective and well-funded mental health system that serves the community of both youth and adults.

Here at NAMI, I will be serving as an Intern working with the various programs that NAMI provides the consumer that are designed with dignity acknowledging the sacred worth and value of the person, the importance of human relationships and attachments in efforts to promote personal competence and further the causes of social justice.
It’s healthy to admit you’re not okay. It’s okay not to be okay. It’s brave. Be sad. But don’t let it win.

Have your moment, your day or week—then do something about it. Whatever you do, make it a choice. Happiness and sadness are proactive choices.

“Normal is an illusion. What is normal for the spider is chaos for the fly”

**Bulletin Board**

SEE ME will present at the following times and locations in June:

- **Thursday, June 5:** Clark County employees Brown Bag lunch in the Commissioners hearing room from 11 am to 1 pm
- **Wednesday, June 11:** Skamania County Sheriff’s Deputies in conjunction with Sgt. Kathy McNicholas, Vancouver Police Dept. CIT officer
- **Wednesday, June 25:** Clark County employees Brown Bag lunch in the Commissioners hearing room from 11 am to 1 pm
- **Thursday, June 26th:** Vancouver Lions Club, 6:30 to 7 pm 11603 SE McGillvray, Vancouver
- **Friday, June 27th:** Vancouver Lions Club, 11:30 to 12 noon 11603 SE McGillvray, Vancouver

Another Family to Family class, in addition to the one that is taking place at the VA, will begin on June 25th. The class will meet weekly on Wednesdays from 6:30 to 9:30 at the Vancouver NAMI office. Please call (360) 965.2823 to register. The VA Family to Family group meets weekly on Thursdays from 6:30 to 9:30.

Our Middle School Support Group meets weekly on Wednesday from 4:30 to 5:30 at the Vancouver NAMI office. The High School Support Group meets on Mondays from 4:00 pm to 5:30 pm at the Vancouver NAMI office. These are drop-in groups so if you are a teen who is struggling either because you have been diagnosed with any brain disorder (ADD, ADHD, depression, bipolar disorder, anxiety, etc.) please come to the grade-appropriate group. We look forward to seeing you there.

Friday, June 1 is a Volunteer Training time from 1-3 pm. We are asking anyone who volunteers with NAMI in any capacity to be at this session where we will make sure that we have up-to-date documents and contact information for you plus talk about new or changed procedures. If you cannot attend the meeting due to a conflict, illness, etc. please let us know (360.695.2823) so we can arrange another time to meet with you.

A training for volunteers who would like to become BASICS trainers will take place in Kirkland, WA the weekend of July 11th-13th. You must have raised or be current caregiver for a child who has been diagnosed with any mental health disorder. If you are interested in participating and are then willing to teach several BASICS classes during the next year, possibly in any of our three counties, please call our office and speak to Jenny about completing an application. You will need to apply and be interviewed. You will be provided with transportation, hotel accommodations and your training materials. All you have to do is be there for the entire training.

NAMI SW WA is hosting the NAMI WA 2014 Conference August 15-17 at the Red Lion at the Quay in Vancouver. An Art Show will be one of the Saturday events. It is open to any member of any WA affiliate. Participants may enter up to two pieces of art. Please read about it on the NAMI WA website or the NAMI SW WA site. If you have questions you can call Lynn Pattison at (360) 695-2823.

NAMI SW WA board members from Clark County are sponsoring an evening with the candidates for Sheriff on Tuesday, June 24th. The facilitated discussion will cover areas of interest to those in the community who are dealing with mental health issues and/or are interested in the impact that mental health plays our legal and judicial system that is under control of the sheriff including corrections. The session will take place at the County Office Building at 1300 Franklin Street in the sixth floor commissioner’s conference room beginning at 7 pm.
Help support the one in four Americans who will be affected by mental illness this year.

- **ANNUAL MEMBERSHIP** - $35.00
- **OPEN DOOR ANNUAL MEMBERSHIP** - $5.00
  (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: _________________________________
City: ____________________________
State & Zip: ____________________________
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E-Mail: _______________________________

NAMI Membership Includes:
★ NAMI National Advocate Magazine, quarterly
★ 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:

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Vancouver, WA 98668

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