



nami

Southwest Washington

National Alliance on Mental Illness

www.namiswwa.org

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NAMI Warm Line M-F 9am-5pm
(360) 695-2823
Mental Health Ombuds:
(360) 397-8470
(866) 666-5070
Teen Talk: (after 4pm)
(360) 397-2428
Crisis Lines:
(360) 696-9560
(800) 626-8137

Mental Health Awareness



Month featuring NAMI Walks



The month of May is packed full of events centering around mental health issues. This is just a reminder of the many special events in which NAMI SW WA...and we hope each of you who do or who have received services will participate. In addition, NAMI staff and volunteers will be conducting numerous outreach programs throughout the three county region.

The biggest events for us are the NAMI Walks events. Members and friends of NAMI SW WA can participate in either of the two walks. One is held in the Seattle area at the Kirkland Park Marina in Kirkland, WA. The start time for this walk is 9:30 am. The other walk is with our friends across the Columbia River, the NAMI Walks Northwest beginning at 1 pm on the east side of the Willamette River in Portland. If you are walking in either, please arrive early for the festivities and registration. You can support NAMI SW WA at either Walk; just be sure to register as a walker for us. You can also be a virtual walker and provide financial support.

May events include:

- May 3:** Mental Health Awareness Run/Walk: Lake Sacajawea, Longview: 10 am
- May 7:** Burgerville: 6700 NE 162nd Ave, Vancouver, WA 98682 5-8pm
- May 8:** Earth Glaze & Fire: 2106 Main, Vancouver 4pm-7pm
- May 9:** Walk Registration: Peace Health Hospital Lobby, Vancouver: 4:30 -7:30 pm
- May 14:** Burgerville 8320 NE Vancouver Plaza Dr, Vancouver 98662 5pm-8pm
- May 18:** NAMI Walks: Kirkland Park Marina, Kirkland: 9:30 am
- May 18:** NAMI Walks: Eastbank Esplanade, Hawthorne Bridge, Portland: 1 pm
- May 21:** 2200 E Fourth Plain Blvd. Vancouver WA, 98661
- May 22:** Earth Glaze & Fire: 2106 Main, Vancouver WA 4pm-7pm

NAMI VOLUNTEER ORIENTATION

Every 4th Friday of the Month
Beginning May 30th: 1:00pm- 2:30pm

A volunteer orientation will be held on the 4th Friday of every month at the NAMI office in Vancouver (8019 NE 13th Avenue) if it doesn't Interfere with a holiday. Volunteers are appreciated and needed to help with many tasks. If you are interested in answering the Warmline, cleaning the office, facilitating support groups, and many, many other tasks, please contact NAMI at (360) 695-2823, email office@namiswwa.org, or stop by the office to request a volunteer application.

From the Directors Desk

Dear Members and Friends,

This has been another busy month for NAMI SW WA. At the beginning of the month our much-loved Board President resigned from her position and from the Board because she accepted a job as CFO with a non-profit in Seattle. The good news is that she has a wonderful job that will allow her to continue her work in mental health; the down side is that we will miss her deeply but hope to work closely with her and her new employer in the future. The other good news is that our Vice-President, Ann Donnelly, was willing to step into the role of President. Ann has been with NAMI SW WA Board of Directors for four years so knows the organization, its goals and needs, very well. Her leadership skills are already coming to the forefront and we know she will be every bit as successful in her new role as Stephanie was. One of Ann's first tasks was to run our bi-annual Board Retreat where some significant decisions were made including our board expansion to our maximum of 15 members over the next year with population-based representation from each of our three counties, leaving a few open spaces in case we expand to five counties next year as the RSN consolidation continues.

Ellery Holesapple, our MSW Intern from University of Southern California, has completed his time with us. He will graduate on May 17th in Los Angeles and is busy job-hunting in SW WA. His dual certification with Substance Abuse/Chemical Addiction and Social Work will be very helpful to him as our community moves toward integration of services. Ellery will continue to volunteer with NAMI, facilitating at least one support group at Clark Corrections and teaching Family to Family, most probably at the VA. To replace him, a new intern will start on May 19th. Daryn Nelsen will begin her time with NAMI getting trained as a facilitator/educator for some of the NAMI programs such as BASICS and Family to Family as well as for our local programs such as STRivE. Please stop by to introduce yourself to Daryn. Next month we will have a short article about her and her plans with NAMI.

Our move to get Coordinators in place is almost complete. We still have some positions open; they are listed in this newsletter so if you have time, energy, and the ability to help us out, please call our office. If a position that you think you would like to be involved in is already filled, we might have a need for a Co-coordinator; all Coordinators will also need team members so if you are not ready for a big job, please take a smaller one. NAMI SW WA is moving toward a blockbuster year with events happening daily throughout our region. We need all of you working with us to ensure that we can offer the same services to others that have benefited you. Please, please join us. In addition, if you want to become a NAMI educator or facilitator let us know. If you are bilingual in Spanish/English also contact us. We are going to partner with NAMI Yakima to begin training volunteers and then offering programs in Spanish.

Most importantly, May is Mental Health Month. Our NAMI Walks take place in both OR and WA on Sunday, May 18th. You can join a team and walk at either location or you can be a virtual walker if you prefer to be elsewhere on that day. The important thing is: this is our biggest fundraiser of the year. So sign up for one of our teams online at www.namiswwa.org or send a check to us marked *NAMI Walks contribution*. Please help us reach our fundraising goal this year!!! It is only through your generosity that we can keep our doors open and continue offering the many services we offer, at no charge, throughout the year.

Thanks so much, and I hope to see you at our offices in either Clark or Cowlitz Counties or at the NAMI Walks or other events in May such as the Mental Health Walk/Run in Cowlitz County on May 4th.

Peggy
Executive Director, NAM SW WA

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Ann Donnelly

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Cindy Falter

Parent Partner

Lyn Pattison

MSW Interns

Alyssa Rice

Daryn Nelsen

County Coordinators

Clark

Danette Elpel

Cowlitz

Frank Randolph

Skamania

Becky Anderson

NAMI COORDINATOR TRAINING

Friday, May 9th, 11:00am-2:00pm
Lunch Included

educating school-aged children about people with disabilities.

Hi! My name is Connie Brittain, and I am a new volunteer with NAMI but have been in and out of the office for a number of months now. I have agreed to become the Volunteer Coordinator at NAMI SW WA. I will be assisting NAMI Coordinators who need volunteers for their projects and other needs. I am happy to be involved with NAMI and look forward to my new role as Volunteer Coordinator. I have over 25 years of experience working with people who have disabilities. I have worked as a Peer Support Volunteer Coordinator at the Traumatic Brain Injury Project Santa Clara Valley Medical Center, in San Jose, California. I have also worked at several independent living centers as well as with programs ed-

NAMI SWWA is working hard now to fill all the Coordinator positions that will enable our organization to better move ahead with the many programs and activities that are going on and planned for the future. Our current Coordinators are listed in the column next to this article. We still have several Coordinator and/or Co-Coordinator positions that are unfilled. If you have the time and energy and are willing to commit yourself for a significant period of time please let the office know of your interest. Our Coordinator training will be held on Friday, May 9th from 11-2 at that Vancouver office. Please contact NAMI at 360-695-2823 if you are interested in participating in any of these volunteer positions.

Open Coordinator Positions:

- Media/ PR
- NAMI Walks: 2015
- Data Management
- Parents and Teachers as Allies (PTA)
- Newsletter
- Project
- Warmline

Open Co-coordinator Positions:

- Development Fund Raising
- Year End Respite Event (holiday event for consumers)
- Public Policy Education
- Class Preparation Team

Volunteer Coordinator

Connie Brittain

Class Preparation

Jeannie Bays

Development/ Fundraising

Danette Elpel

Education

Heidi Bjurstrom

Support Services

Eric Johnson

Outreach

Sandy Frischman

Heidi Bjurstrom

Burgerville Events

Wayne Pattison

Martha Vogeler

Library Coordinator

Martha Vogeler

Nancy Marsh

Year-end Respite Event

Cindy Falter

Membership

Charla Struys

Public Policy

Danette Elpel

Depression in the Elderly: In Tim's own Voice

! Although depression in the elderly is common, this should not be taken as an indication that it is normal. This area is one that piques my own interest and concern as it brought on my mothers fatal heart attack four years ago this month. It also now plagues my 92 year old father who lives alone and is prone to social isolation. My concern for his situation leads to daily visits, but his refusal to see a doctor for his symptoms makes the scenario all the more difficult for me to bear.

Late life depression affects about 6 million Americans 65 and older, but records show that only about 10% receive treatment. Reasons for this can be attributed to the fact that the elderly often present the symptoms of depression differently. I know that in my mother's case doctors seemed "fooled" by confusing her symptoms with the effects of multiple illnesses and the medicines that were being used to treat them. A hospice nurse working one on one with her was the first to bring the issue to our attention.

Depression in the elderly can increase the risk of cardiac disease and bring about a greater chance for stroke and heart attack. My own mother lost her ability to speak following a series of strokes and finally communicated her unhappiness by way of

(Continued on page 4)

Family Support Group

Don Greenwood
Teri Robinson
Kay Roberson

Connection Support Group

Eric Johnson

Teen Support Group

Alyssa Rice
Charla Struys

STRivE Support Group

Angie Corrl
Lyn Pattison
Ilse Shurmans
Peggy McCarthy

Corrections H-Pod

Tom Cousino
Ellery Holesapple
Eric Johnson
Ilse Shurmans
Charla Struys

Corrections Workcenter

Peggy McCarthy
Ilse Shurmans

Parent Support Group

Lyn Pattison

Register to Walk!

The NAMI Northwest

Walk is on

May 18th

in Portland

sign language to those caring for her. Depression can also reduce the ability of the elderly to rehabilitate from other illnesses, causing overall health problems to escalate.

Of particular concern to me is the fact that depression increases the risk of suicide for elderly white men. The suicide rate for this age group is more than twice that of the general population. As the elderly are expected to slow down, often the warning signs of increasing isolation and lack of activity are overlooked amongst the whole scheme of a person’s medical condition. Other factors that may increase the risk of depression are related to hypertension, cardiac irregularities, cancer, dementia and chronic pain. Certain combinations of medicines and decreased blood flow to certain parts of the brain may in turn produce chemical changes in the body that can bring on the likelihood of depression.

So what course of treatment can best be followed to make the remaining portion of a person’s life more tolerable? Therapists have found a number of different remedies, including medication, psychotherapy, and even electroconvulsive therapy to be of help. Antidepressants that work with younger people may be equally effective with the elderly, but take longer to work. The effects of these must also be taken into consideration when used in combination with other prescriptions a person may already be taking. Side effects can cause dizziness that leads to potential falls and the dangers associated with bones that are already brittle due to age.

Although psychotherapy can produce very positive effects, especially in those who are experiencing problems with medications, social interaction alone can often be just as beneficial. In any event, the effects of cognitive therapy and antidepressants can greatly increase the chances for positive outcomes if closely monitored. ECT has been found to be helpful in patients who cannot take medications or are experiencing problems with the daily functioning of eating, bathing, and grooming.

Stigma attached to depression in the elderly can often be even greater than that of younger populations. Their families may also miss the warning signs or blame them on the normal reactions of the aging process, ie. loss of the quality of life, and fear of death. Physical complaints may lead the elderly and their support systems to lose hope and feel that “there is really nothing that can be done. “ Unhappy life events, the loss of a spouse or friends and social isolation can further ramp up the effects of depression at this age.

The emphasis on proper treatment for this chronic condition is something that must be faced. As baby boomers deal with the end of their parents lives and their own aging process, it becomes all the more critical that these matters be addressed. *(My father was able to remain in his home until undergoing a psychotic episode which resulted in his being hospitalized. He passed away four weeks later.)*

In the Service of Others: History and Federal Laws

This article is the first in a series of articles on how service animals assist those with invisible disabilities. These articles are written by an owner-trainer of a medic alert service dog for an invisible disability.

The Seeing Eye®, founded in 1929, is considered America’s first facility to train service dogs. In the 1960s, the use of dogs to enhance the lives of people with disabilities other than blindness became more widespread. In 1975, Bonnie Bergen founded Canine Companions for Independence for a variety of mobility disability issues. Today, service animals provide a wide variety of tasks for people living with visible and invisible disabilities. Dogs for Invisibility Disability founded its organization to

Our website has a lot of new features and content:

- **Subscribe to our Newsletter online**
- **Subscribe and/or view our monthly calendar**
- **See upcoming events**
- **Get an overview of our Support Groups and Classes**
- **See our Facebook and Twitter Feed**
- **Donate!** *(if you want your donation to go to the NAMI Walk or a specific program add a comment*

Need help finding a therapist?

Got to

therapists.psychologytoday.com

Is a great tool/search engine to help you find a therapist in your area, and narrow the results down by approved insurance, specialization, and other selectors

assist those with disabilities that may not be immediately apparent. These disabilities include mental health conditions such as bipolar disorder, PTSD, chronic depression, anxiety disorder, agoraphobia, and personality disorders as well as physical disorders such as diabetes, seizures and cardiac problems. Invisibility service dogs are trained to not only alert the owner of a medical emergency but to also provide assistance with various personal tasks that can be difficult for the owner. To learn more about these tasks, Joan Froling of Sterling Service Dogs compiled a comprehensive list of tasks that a psychiatric service dog can perform to assist its owner that can be found at: www.iaadp.org/psd_tasks.html.

It is important to remember that service animals are not pets but animals trained to assist their disabled owner in doing tasks designed to lessen the effects of the owner's disability. If legally qualifying as a service animal, the IRS allows expenses for service animals to be tax deductible as they are considered medically necessary healthcare expenses. Service animals are given other federal and state protections that ensure owners receive equal access to public places and activities. Put simply, our laws recognize that having a disability is no reason to isolate a person using a service animal from living a rich, full life.

There are three major federal laws protecting service animal accessibility that include: Americans with Disability Act (ADA) that lists the federal definitions and requirements for trained service animal public accessibility. ADA is silent on the issue of service animals in training and allows each state the right to make its own laws regarding the rights of service animals in training; Air Carrier Access Act (ACAA) that allows service animals to accompany owners on commercial airlines; and Fair Housing Act (FHA) that requires housing entities to admit and not discriminate against owners who have any type of assistance animal regardless of whether or not it is trained and regardless of whether or not it is a service, emotional support, or comfort animal for a disability-related need.

Service animal is defined in ADA to mean only a service dog but an exception exists for miniature horses. Though given the same accessibility rights as their owners, ADA requires the animal must be trained to perform tasks directly related to the owner's disability. Therefore, companion or therapy dogs are not legally considered service animals. Service animals must be housebroken and stay in control at all times or the public premises staff can ask the owner and their service animal to leave for any "legitimate" reason. The public establishment must give the owner the opportunity to return to conduct their business but without the disruptive service animal.

For nearly 100 years, service animals in the United States have played an invaluable role in ensuring those with visible and invisible disabilities lead productive lives. But more needs to be done to ensure equal access for everyone wanting to benefit from having a service animal. In the next article in this series, we will look at Washington State law regarding service animals and point out inconsistencies between this state and other surrounding states that mean that people living in Washington are at a significant disadvantage when it comes to service dog accessibility.

Earth, Glaze & Fire—NAMI Benefit Events

Earth, Glaze & Fire, a paint-your-own ceramics studio at 2106 Main St, Vancouver, WA 98660 is partnering with NAMI SWWA in fundraising and in a volunteer-driven project coordinated by Pat Turpyn. On May 8th and 22nd the studio is hosting pottery events for NAMI supporters to create pottery pieces for pendants and bracelets to be created by our volunteers. If you are interested in attending these fun events please call (360) 695-2823.



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- You can search for us by our name **NAMI** or by our non-profit number **87058**.

- Then, every time you shop and use your Rewards Card, you are helping NAMI earn a donation!

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For more information, please visit

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communityrewards](http://www.fredmeyer.com/communityrewards)

Self-Advocacy is the Key in Mental Health Recovery

Mental health providers serve an invaluable role in treating and guiding recovery from mental health issues but do we, as consumers, advocate appropriately for the care they provide us? We tend to place more emphasis, research and care on buying a car than we do on our own healthcare needs. With the large number of treatment methods available today from CBT, DBT, somatic psychotherapy, psychoanalysis, group therapy and drug therapy to name a few, consumers can feel lost and helpless in guiding their own treatment. While this article is not designed to cover all aspects of consumer mental health advocacy, it is intended to help you think about how to become more involved in ensuring your needs are met and progress towards recovery continues. That can mean seeing several therapists before finding the *right fit*; and once the *right fit* is found, it requires diligence and nurturing to keep the relationship on track.

Where to start ultimately depends on one key component – trust. Nothing can progress without it. Developing this takes time and an active dialogue between provider and consumer. Remember, they are providing you with a service and it is OK to communicate dissatisfaction in an assertive (not aggressive) manner if that service isn't working. Whether that means restructuring the type of care they provide or assisting you in finding another provider who can best meet your needs, the goal is to work toward a healthy, productive life feeling confident and supported.

A healthy dialogue starts at the beginning of the relationship by interviewing the provider to determine whether or not they have the right training and temperament to guide your recovery. What questions should you ask? Start with general questions about their education, credentials, special training and experience.

Ask the provider:

- How long you have been treating people with issues similar to mine?.
- Do you have special training in one method of treatment? Can you explain how it works?
- If the treatment method isn't working for me, do you have the flexibility to incorporate other methods, or discard the method completely?
- Can and will you refer me to alternate resources if you can't assist me with an issue?
- How will we know if and when my treatment is progressing?

Hopefully, these questions serve as a foundation for you to develop your own questions personalized for your needs. While we look to our mental health providers to solve issues causing us great discomfort, we can't forget they are people too and lack the ability, as all people do, of reading our minds. Ultimately, the information they provide in answering these questions is important but not as important as HOW they answer the question.

- Do you feel part of the discussion or are you being talked down to?
- If you don't understand, does your provider explain in a caring tone or treat you as if you are stupid for asking?
- If you find it difficult to trust your provider or otherwise don't feel the relationship will benefit your recovery goals and want to change providers, does your provider offer to assist you in finding the right therapist based upon your expressed needs?

Working with a therapist is a two-way relationship enhanced by your participation and advocacy. The benefits of finding the right fit can mean the difference between suffering and recovery. You are worth the effort to ensure your needs are met!

www.fredmeyer.com/communityrewards

Bulletin Board

📌 A new **Family to Family** class will begin at the VA on 12th, May from 6:30-9pm. This class open to anyone in SW WA who wants to attend but is being held at the VA to make it more accessible to family members of veterans. Another Family to Family class will begin at the NAMI office in Vancouver on the 25th of June from 6:30–9pm. To attend either class, please call the NAMI office to preregister (360.695.2823). We already have almost twenty people on a waiting list and prefer to keep the classes under 15, if possible, so call as soon as you can to get in to one of these classes.

📌 The personal stories of some NAMI SW WA consumer volunteers and members are being recorded by VISTA member Jessica Ghiglieri for **Story Corps**. If you have never heard Story Corps stories tune in to OPB (91.5 radio) on Fridays to hear these wonderful offerings by people across the country. The stories will make you laugh and cry, with both emotions brimming over in a single story. Jessica has also recorded stories of homeless people in Vancouver. Stories are filed with the National Library of Congress and can be accessed by the public. Many thanks to our wonderful group of consumers who have been willing to share their stories of courage.

📌 Our new outreach program **SEE ME (Sharing Experiences and Empathy for Mental Illness Education)** will launch this month. SEE ME is the end result of a small group of committed volunteers headed up by Sandy Frischman and Heidi Bjurstrom and including Mike Anderson, Martha Vogeler, Charla Struys, and others who recognized the burden of the stigma of their diagnoses and want to do something about it. SEE ME volunteers will make presentations at a wide variety of sites including a brown bag lunch with county employees, Rotary Club, EMT training program and other sites in May and June. Many of the participants have recently been trained in *In Our Own Voice* and will use that training to talk about mental illness.

📌 **STRivE: Lessons in Living** support group is going strongly at a number of sites. Please feel free to come to this drop-in education and support group. **We have changed some times so please note the new times in Cowlitz and in Clark.** *In Cowlitz County the group meets every Thursday afternoon from 4:00 to 5:30pm (starting May 8th) at the County Health Department Ocean Beach Highway (Suite 1B).* In Vancouver STRivE meets at the 13th Street office on Wednesdays from 5:30-7:00 PM. STRivE is also being offered at the Clark County Corrections Re-entry program and in the Work Center. All these groups provide valuable tools that will help enable anyone to function better in daily life. Please join us!

📌 **Our Teen Support Group** for high school students meets on **Mondays from 4:00 to 5:30 PM**. All high school students who seek support and help are welcome.

Our schedule for our Burgerville Fundraisers in May is:

Wednesday, May 7th	Heritage Center (#44) 6700 NE 162nd Ave, Vancouver WA 98682
Wednesday, May 14th	Vancouver Plaza (#38) 8320 NE Vancouver Plaza Dr., Vancouver WA 98662
Wednesday, May 21st	Central Park (#27) 2200 E Fourth Plain Blvd. Vancouver WA, 98661



Challenges are what make life interesting and overcoming them is what makes life meaningful.

Joshua J. Marina

A big thank you to all of our Burgerville Volunteers so far

Martha, Wayne, Terry, Sandy, Keri, Jenny, Jeff, Oliver, Ricky, Felicia and especially

Sandra Besselieu, who's ability to engage customers helps make every event successful.

Help support the one in four Americans who will be affected by mental illness this year.

Thank you for being part of the team!

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- NAMI Membership Includes:**
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 - ★ NAMI SW WA Newsletter, monthly
 - ★ Member Discounts on NAMI Events & Materials,

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