



nami

Southwest Washington

National Alliance on Mental Illness

The Official Newsletter of NAMI Southwest Washington

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Inside this issue:

Learning to Face the Diagnosis of a Family Member	3
Increase Your Energy	4
Denial	5
BASICS Class to start in Nov.	5
Parents and Teachers as Allies	6
Caught in the legal system?	7
The How and Why of Movement	8
SWBH Mental Health Adv. Board	8
Posttraumatic Stress Disorder (PTSD)	9
My Son & Schizophrenia: One Dad's Highlight	10

NAMI HOLIDAY CELEBRATION: DECEMBER 6th

If you haven't signed up for the holiday celebration at the Leupke Senior Center on Friday, December 6th please do so quickly. Space is limited to 300.

As always, we are excited about this major community event especially for people living with a mental health diagnosis and their family members. Each mental health provider agency in Clark, Cowlitz, and Skamania Counties has sign-up sheets, so when you are at your next therapy session do sign up, or call your provider agency directly or call us at (360) 695-2823. We will need your name, the names of your family members who will come with you, and the ages of all attending so gifts can be age appropriate.

The evening will begin at 5:30 when everyone enters the big ballroom at Leupke Senior Center at 1009 E McLoughlin Blvd in Vancouver. If you are coming from Skamania County the bus from the Senior Center can bring you to Vancouver and take you home again that evening to prevent people from driving on the narrow, twisting State Road 14. The bus will stop in Washougal to pick up guests there as well.

Tables will be set in the decorated ballroom, and, as soon as we can manage, a turkey dinner with all the trimmings will be served. If you are vegetarian, or if you have children who don't like turkey, we will have an option of tasty mac and cheese.

During the evening we will have entertainment with musicians hosting sing-alongs to favorite holiday songs, however our featured entertainment includes two special acts. The Battleground High School Jazz Ensemble will be singing their wonderful renditions of a wide variety of music. This will be followed by a very special comedy act that features people living with mental illness who do comedy routines across the Pacific Northwest as the Stand-up for Mental Illness group. Sometime during the evening, Santa will arrive to pass out gifts to those with a mental health diagnosis and to the children, and tickets will be drawn for special gifts for special people. As always, everyone will leave with a hand-made stocking stuffed with goodies.

We look forward to seeing you all there, but, remember, you have to sign up ahead of time to attend, and the tables are filling quickly. Please sign up today!

See you on December 6th.

CONTACT US!

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Resources:

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

From the Directors Desk

«GreetingLine»

October has been a really busy month with lots of fundraising to help us maintain all our programs. Our Burgerville events have been fun for our volunteers and staff, alike. Our Board Vice-president, Ann Donnelly, and her husband, Michael, also hosted a really great breakfast fundraiser this month. They served wonderful home-made scones, deviled eggs, fruit, and granola to the many walkers, runners and a few bikers who came to Vancouver Heights to enjoy the lovely fall leaves on what turned out, eventually, to be a wonderful sunny day. The scones were so popular that NAMI is considering offering baskets of scones to businesses or individuals who make a significant donation to NAMI through a pilot fundraiser. Let us know if you might like to participate!

NAMI SW WA has offered to host the annual NAMI WA conference in August 2014. We met with our state NAMI office staff to begin planning. I was astounded to hear that WA State only has 1200 NAMI members. Although we get some funds from memberships that help us keep our doors open (for the \$35 membership we keep \$15, NAMI WA gets \$10 and NAMI National gets \$10), the issue that concerns me much more than the money is the fact that it is impossible for NAMI to be true advocates for change if we only have 1200 people in the State of Washington who support our actions through membership. My new goal for SW WA is to build up our membership so that we can go to our local officials, our state officials, and our legislators at the federal level to request positive changes in legislation and program funding that support mental health services. I want to be able to say that we have thousands, or tens of thousands, of NAMI members in Clark, Cowlitz, and Skamania Counties, alone, who support NAMI and want better, more accessible services for those diagnosed with mental illness. In the future, when you call our office for support, our staff and volunteers will first provide that help but will also now ask if you are a NAMI member. We will offer to send you an e-newsletter and point out the membership form on the back page. We will point out that we have two levels of membership, \$35 and \$5, making membership affordable to almost everyone.

Thanks for all your support. This has been an incredible month with lots of great activities and programs. And, if you are not a member yet, please join! There is a form on the back page of this newsletter.

Do stop by to visit us at our office in Vancouver. New Volunteers are always welcome. If you want to be involved with meaningful volunteer-work please call (360) 695-2823 or come by our office 2801 Fort Vancouver Way.



Peggy McCarthy
Executive Director

Peggy McCarthy
Executive Director

*Even if I knew that
tomorrow the world
would go to pieces, I
would still plant my apple
tree.*

LEARNING TO FACE THE DIAGNOSIS OF A FAMILY MEMBER

In Candy's Voice

The NAMI Family to Family program has comforted, supported, and educated me in ways I could never have imagined. Having grown up with a mentally ill father I thought I knew plenty about mental illness. I knew my dad was different. I knew that his behavior was odd and even embarrassing. But what I never knew was the likelihood that my children, who were linked to him genetically, could suffer the same fate. So many times I would say that my son was just like my dad without realizing the truth of what I saying.

Parenting my son was quite the challenge and those challenges increased into his adulthood. Recently a severe crisis drove me to seek support, not just support from a therapist but from peers. I needed support from others who knew what I was going through. I needed support from those who had mental illness and could tell me what life is like for them. I needed support from other parents who yearned for a "normal" child and who could relate to the sadness and stress I felt. I needed to understand what was going on and what, if anything, I could do.

I am only in week six of the program, but I am already armed with an arsenal of tools. I am learning about the causes and symptoms of the range of mental illnesses. I am obtaining problem solving strategies to assist my loved one. I am learning about the enormous amount of resources available should the need arise. I am learning how to cope, and I'm gaining compassion, not just for my son, but for the multitudes of ignored and misunderstood people suffering with mental illness.

In Jean's Voice

I finally feel like someone understands what I'm going through. The bonding and support of the teachers and other group members have helped me cope. I am so grateful to NAMI and the teachers for putting together this priceless program. I urge anyone who has a loved one with mental illness to take the program.

I have a son who was diagnosed with paranoid schizophrenia about sixteen years ago. At first I was unable to talk to anybody about this problem in our lives. We tried several different doctors until one did a thorough evaluation and prescribed a medicine that worked much better than any of the others he had taken previously.

During all these years I found that knowledge was empowering to me. I took the Family to Family course at NAMI and this program gave me the opportunity to learn a great deal about mental illness and about schizophrenia. In Family to Family, people with a family member diagnosed with mental illness join together to learn, to talk, and to support each other. I found that every one else in the class had gone through much the same thing as I had. It is a great program.

Family to Family is very thorough, covering all forms of mental illness as well as medications to treat it. It is also very helpful listening to other peoples' feedback.

KNOWLEDGE IS POWER.

Note from NAMI: The next Family to Family classes will be after January 1st, 2014. We hope to hold sessions in each of our three counties, with classes probably in Vancouver, Longview, and Stevenson. If you are interested in participating call the NAMI office (360) 695-2823 to get your name on a list. We like to enroll a minimum of ten per class but can take up to twenty.

*Find a place inside,
where there's joy and the
joy will burn out the pain.*

*In a gentle way,
You can shake the world.*

Mahatma Ghandi

Increase Your Energy by Eating the Right Grains

There is a simple way to increase your energy and, at the same time, help lower your blood pressure, improve your cholesterol levels and reduce your risk of dying from preventable disease. And the best news, is that you don't even have to leave the kitchen table to do it!

Consider replacing the refined grains in your diet with whole grains. What are whole grains? They are cereals and seeds that have not been milled or processed. The outer layer, contains healthy oils, fiber, and protein. The nutrition in whole grains is released slowly and continuously, leaving you feeling energized and full for much longer. They are an excellent source of dietary fiber, protein, iron, potassium, and manganese.

*It is never too late to be
what you might have
been.*

George Elliot

Whole Grains		Gluten-Free Whole Grains	Refined Grains
Amaranth	Oats	Amaranth	White flour
Barley	Popcorn	Buckwheat	White rice
Brown Rice	Quinoa	Millet	White bread
Buckwheat	Rye	Montina	Degermed cornflower
Bulgur	Sorghum	Oats (not always GF)	Enriched flour
Emmer	Spelt	Popcorn	
Farro	Teff	Quinoa	
Flaxseed	Triticale	Rice	
Grano	Wheat berries	Sorghum	
Kamut	Whole cornmeal	Teff	
Kañiwa	Whole wheat	Whole-grain cornmeal	
Millet	Wild Rice	Wild rice	
Montina			
Muesli			

Look for whole grains in the bulk bins or dry goods section of your local market, where many will cost just pennies per serving. Stretch your dollar farther by blending the more exotic varieties with brown rice, buckwheat, and quinoa. Experiment to find your favorite flavor combination!

If you can cook rice or oatmeal, you can easily cook other grains. Substitute whole grains in place of white rice or pasta, add them to soup and casseroles, toss cooked grains into salads, or serve them for breakfast and enjoy like oatmeal.

Here is an easy recipe for Quinoa Pancakes:

1 cup of cooked quinoa
1 egg
1/4 cup of ricotta cheese
1 TBS honey
1 Tsp cinnamon

Add a handful of shredded coconut, dried fruit or nuts for variety!
Mix all ingredients together in a medium bowl. Cook on hot griddle using 1/4 cup of the mix for each small pancake. Cook on both sides until golden brown. Serve with maple syrup and your favorite fresh fruit for a fantastic breakfast, full of protein and energy!

*The best way out is
always through.*

Robert Frost

Denial

by Jerry Malugeon

Denial is defined as an emotional defense mechanism to help us cope with a stressful situation that could potentially overwhelm us with pain, distress and fear. It can be a good thing when it is used for a brief period of time to help us adjust to an unexpected and painful circumstance until we manage to find an effective way of dealing with the challenge. The emphasis here is on the word "brief." A stressful situation can be initially overwhelming, so at first glance we often avoid looking squarely at the enormity of a problem in order to buy us some time to come up with a plan or method of handling the troubling condition.

Denial is a short-term tool only. Once we're past the initial phase of the situation, a careful examination of the problem is necessary in order to develop and implement a rational, appropriate and successful response. A continual state of denial, however, is inappropriate and in some circumstances, as in refusing to be of help to someone with a brain illness, it can be fraught with risks.

Companions, family members and caregivers who remain in denial are actually doing a major disservice to

their ill loved one. A loved one who continues to exhibit symptoms that are dysfunctional, upsetting and clearly inappropriate needs to see a doctor. And if those around that loved one can't recognize those symptoms and what they might represent, how will that loved one ever get the medical attention they may very well need? Companions who are inattentive and passive to a loved one's developing destructive behavior often succumb to a kind of willful blindness. Sadly, that willful denial often proves gravely unfortunate to someone with an undiagnosed and untreated brain illness.

The consequences of ongoing blind denial are many, all of them negative and some of them irreversible. Companions with inadequate knowledge about mental illness need to become informed about their loved one's illness as well as the many successful treatments now available. They need to learn that recovery with symptoms management is an obtainable goal when loved ones, companions and professionals all work together.

Knowledge is the tool to use. Discard denial...in the long run it's a dead end.

BASICS Class to Start in November

BASICS Class is a traditional NAMI class that has been held around the US for many decades. It gets updated frequently with new information to keep it relevant to each new audience.

BASICS is geared toward parents and other caregivers for children with a mental illness diagnosis ranging from ADD and ADHD, autism spectrum disorders, to depression, anxiety, behavior disorders, as well as bipolar and schizophrenia. The class includes overviews

of the disorders and helps the class participants learn the skills to make sure their children get a diagnosis and receive treatment and medication options. It includes information about human development, especially the development of the brain.

BASICS provides attendees with the tools that will be needed to take care of and support their loved one. These skills include record keeping skills such

(Continued on page 6)

*You change your life by
changing your heart.*

Max Luxado

**ARE YOU A
NAMI MEMBER
YET?**

(Continued from page 5)

as tracking the various documents they receive during diagnosis and including daily charting of behaviors to help the psychiatrist and other healthcare providers make a diagnosis. Participants also learn the role the school system should play as well as learning information about the juvenile and adult justice system as teens transition into adulthood where they may be more likely to participate in activities that may involve the law.

Participants also learn new problem solving and communication skills and how to prepare for crises that often occur in the lives of people with mental health diagnosis.

BASICS is the first in a series of NAMI classes to teach parents and caregivers how to become advocates for their child. You are the one who has to fight for help at all levels: social, treatment, medication, and education. It will be your role to help your child stay in recovery.

Our class will start in November. It is tentatively planned to take place on three consecutive Saturdays from 9 am to 3 pm. Two very experienced NAMI volunteers will share teaching roles. If your child has been diagnosed with a mental illness, please call 360.695.2823 to sign up for the class. People who have attended the class in the past call it their lifesaver!

*What great thing would
you attempt if you knew
you could not fail?*

*Failure is the condiment
that gives success its
flavor.*

Truman Capote

PARENTS AND TEACHERS AS ALLIES MAKES ITS DEBUT

On October 22 NAMI SW WA Parents and Teachers as Allies trained volunteers presented for the first time in public for a small audience at Truman Elementary School in Vancouver. Six of the seven people trained in September participated in the program. We all agreed it was a great experience and feel ready to go out to more schools in the next months.

The goals of the program are to raise awareness amongst faculty/staff and parents/caregivers about the signs and symptoms of mental illness in children and to help reduce the stigma of mental illness in the community. The hoped for results will be less bullying in schools, earlier and better diagnosis of mental health problems in children, and an enhanced ability for children to be successful in school because they are getting appropriate care for their condition.

The presenters who told their personal stories included Angie, Keri, and Mar-

tha whose stories of living with mental illness since childhood deeply affected the audience. Because the audience was small in number it allowed for a truly spirited discussion about children and mental illness, medications, access to care, parental response to a diagnosis or potential diagnosis for their child, and community resources including the NAMI BASICS class.

As with many NAMI classes pre- and post-assessments are completed. They showed that attendees learned important information from the program.

If you are a staff member of any school in SW WA or have a child/children in school/s please help us make contact with that school so we can make two presentations: first to the faculty and staff, the second to parents and other community members. Call or email the name of the school, your name, the name of the principal and whether you are willing to make the first connection with us about the PTA program.

Caught in the Legal System? From Tim Krueger

A recent NAMI blog featured an article by Dr. Catherine Cerulli, an activist for victim's rights and University of Rochester professor of psychiatry. She is a former prosecutor and has been working on issues concerning domestic violence and child abuse as well as suicide and homicide since the early 80's. As an ombudsman and NAMI advocate, I have met some of my clients for the first time behind bars. Most are stunned, delusional and confused at the course of events that brought them there. They usually have little or no knowledge of what to expect as they "go through the process." In her article, Catherine answers some frequently asked questions by clients which must be traversed before any mental health problems can be addressed, I felt that it may be helpful to pass on some of Dr. Cerulli's tips and practical advice for navigating the system.

Though each case is different, one major factor affecting those entering the legal arena concerns whether the defendant has been arrested on the spot or if s/he has received a notice to appear. Persons who have been arrested and are being held must have an arraignment within a given timeframe. First court appearances involve the reading of your rights and the charges against you. The acquaintances of an attorney will also be addressed, the individual's ability to pay for one, and the nature of the charges against the person. If they involve assault, the person may have a restraining order placed against him/her as well.

If you or your family member/loved one has been released from jail, but has to appear in court, good planning will be helpful. Planning to visit the courthouse should be done in advance. Courthouses can be hectic and chaotic. If a person with mental illness is ordered to appear, there will need to

be some support to get them there and bring them home. Parking is usually scarce and navigating your way through metal detectors and emptying pockets, etc. can wreak havoc on those with fragile states of mind. Courthouse visits can last for extended periods of time and if a person is mentally fragile already, they can be unnerving. Plans for taking along necessary medications and food to get through the day are a must. If you feel that this may be way over the top for your range of patience, or that of a loved one, special accommodations can sometimes be made. Under special circumstances the defendant's appearance may be waived. This is especially true if the individual's family is attempting to get them into residential treatment.

If your loved one who is arrested has a mental illness, specialty courts may place the accused in some sort of a diversion program. These situations usually wind up with a plea bargain and a treatment plan. There are times when the charges may be dropped if it is in the best interests of justice. Families should not lose hope, but remember that this is no time to panic. Legal justice in this country can be a very long and drawn out process. Work with your defense attorney and try to stay as rational as possible. The stress of the situation and the long list of tasks that need to be taken care of may make it difficult or hard for you to engage with your loved one who must appear in court for others to engage with you, however remember that this is a time when help from outside is most needed.

Advocating for your family member involves being as stable as possible and allowing yourself to be a good resource for your defense attorney handling the case. Do not despair if you're dealing with a public defender. They are in court every day and are the accused's best representative. Because of numerous

(Continued on page 8)

*A #2 pencil and a dream
can take you anywhere.*

Joyce Meyer

*A compliment is something
like a kiss through a veil.*

Victor Hugo

(Continued from page 7)

time constraints, contacting your attorney may prove difficult. Call early in the day or try to convey your query electronically by obtaining your attorney's fax or email information. It may help to get attention to your needs if you call the office to alert someone that you are sending information via email and give them time when you will send it so the attorney or staff can be expecting it and retrieve it in time for a court appearance.

It's especially important to connect with the attorney as early as possible and advocate for having those with mental illness diverted into a specialty court. And finally, even though legal privilege prevents attorneys from talking to you or your family, it shouldn't stop you from talking to the attorney. You can still let the attorney know what's going on, how accurately your loved one is presenting the facts of the case, and if the person's mental condition is deteriorating in such a fashion that communication is becoming difficult or impossible.

Call the NAMI Office to
get a reservation for
the Holiday Party
(360) 695-2823

The Why and How of Movement: In Eric's Voice

(Note: Eric has been trained in and has practiced Tai Chi Ch'uan, or as most of us know it, Tai Chi for a number of years. It is through this practice and knowledge that he became a "shoulder jumper" in which he combines his tai chi moves with his skills with a hoop (hula hoop) to perform very skilled and beautiful movements of the hoop over his shoulders and around his body. Eric will be sharing both his skills with tai chi and his skills with his hula hoop at various NAMI events in the future including several support groups and other activities.)

Do you ever feel stuck or trapped in a situation and unable to move? To be alive you have to move. It is the quality of the movement that helps determine the experience we are having.

What I mean by quality is related to physics. Physics is the science of matter and energy and how they interact. The interesting thing about physics is that everything is both matter and energy. Our bodies are made of energy and matter. When this energy is free in its movement, that is, when we don't restrict the movement of energy in our bodies, we feel free. When we do not rest right or take care of our bodies, we lose the control to feel that freedom.

Freedom needs to be balanced by its polarity of responsibility. We can choose where we want to put the emphasis at any time in this relationship. We can change the quality of movement by feeling the effect of gravity momentum and flexibility of the body. If you twist your body in a certain direction, the body will feel the tension produced by the twist. If you then relax the body, those muscles that were twisted will turn themselves back to their natural relaxed position. This feeling of the body moving by itself is the feeling freedom.

*I haven't failed. I have just
found ten thousand ways
that don't work.*

SWBH Mental Health Advisory Board by Becky Anderson

We held our monthly meeting on October 23, 2013. Every month we have a presentation from an agency in the community that is involved in mental health services. This last month the presentation was made by the program manager for PACT (Program for Community Treatment).

This is a program that goes through Columbia River Mental Health Services.

*You can change the world,
one smile at a time. It
doesn't take much to touch
a life and even turn it
around, so don't under
estimate the kindnesses
you sprinkle through each
day. They are the kind that
can heal hearts and make
new dreams grow.*

*Do not let what you
cannot do interfere with
what you can do.*

John Wooden

The presenter (Jeremy Honsowetz MA, LMHCA) walked us through what is involved and the criteria they use for screening and admitting their clients. The population they serve includes people with diagnoses of schizophrenia, bipolar disorder, or co-occurring disorders.

PACT bases their treatment on the individual's status and needs. They will actually go to their clients' homes or where ever the client would like to meet to talk to them and counsel them

The PACT staff are specialists in case management, therapy, vocational rehabilitation, peer support, chemical dependency and/or dual diagnosis, and/or medication management and include the services of a psychiatrist and nursing staff. Their goals are to reduce or eliminate symptoms of mental illness and minimize or prevent recurrent episodes, along with a number of other goals.

If your loved one has any of the above diagnoses the PACT program might be a place to check out for a treatment program. To apply call Columbia River Mental Health (360.993.3000) to request an intake interview.

Family to Family Class by Becky Anderson

We started our class in September and have what we think is the perfect group of people; three couples and six individuals.

We are entering our 7th week, and so far we have covered Problem Solving, Medications, The Brain, and Different Types of Mental Illness. The class on October 23rd is about Inside Mental Illness, which includes an empathy workshop.

We have had good discussions about mental illness and the effect it has on the family and each individual person. Our goal is to get the class attendees to participate as much as possible so they are involved in reading the hand-outs, discussions, and sharing information

about what has and has not worked for them.

One thing we have learned as educators, is that no two families are alike in their problems. They might be similar, but as a family unit, each has a wide variety of issues to deal with.

We look forward to continuing our class and we hope our future classes will yield as much good information as these have. NAMI SW WA now has ten F2F educators to ensure that we can reach those in need in all three counties.

Educators for the current class: Becky Anderson and Rebecca Anderson

Posttraumatic Stress Disorder (PTSD)

Posttraumatic stress disorder, or PTSD, as it is commonly referred to, can be seen in people of any age, from the very young child to the elderly. It is estimated that about 7.7 million adults suffer from PTSD. It sets in after the individual has gone through a particularly terrifying, harmful or potentially harmful ordeal that happened to that individual or to a

loved one of the person. The mental health community became aware of PTSD because of the many wars that have been going on around the world, however war is not the only cause of PTSD, although PTSD is a common diagnosis for many veterans. PTSD can occur after any situation in which a person

(Continued on page 10)

(Continued from page 9)

might be or has been harmed including car accidents, severe punishments by parents or other authority figures, muggings or robberies, or any other situation where a person's natural response mechanism of fight or flight kicked in causing a surge of stress hormones to be released. Many of us are able to have our bodies return to normal within minutes or hours after the incident that caused the stress to occur in the first place, however many others find that they remain in this hyper-reactive state for long periods of time. These people may be diagnosed with PTSD.

Flashbacks, where the person relives the experience, bad dreams, and scary thoughts are all symptoms of PTSD. People with PTSD may feel numb, guilty, anxious, or want to avoid people or places that might make them relive the memory. They may be depressed and lose interest in life. They are easily startled, overreacting to loud noises or noises that remind them of the situation/s that brought on the PTSD in the first place. Children with PTSD might show

symptoms such as bedwetting, refusing to talk, or being overly anxious about leaving an adult they see as a protector even if their protector is the one causing the stress in the first place.

People with a history of mental illness are at greater risk for PTSD, however many people with PTSD had no other condition prior to this diagnosis. Simply seeing or being part of a violent event can trigger the onset of PTSD. Getting good psychosocial support after a traumatic event can help prevent the onset of PTSD.

To be diagnosed with PTSD one must have the following for more than a month: at least one re-experiencing symptom such as bad dreams; at least three avoidance symptoms such as fear of going into crowds or into unfamiliar surroundings; at least two hyper-arousal symptoms such as ducking behind furniture after hearing a loud sound or crying uncontrollably.

The recommended treatment is talk therapy, however medications may also be used to reduce depression, anxiety, and other symptoms that may occur.

What counts is not necessarily the size of the dog in the fight, it's the size of the fight in the dog.

Dwight Eisenhower

My Son & Schizophrenia: One Dad's Highlights

Willamette River Bank Cliff: Somebody is chasing me and wants to kill me.

Broken Double-Glass Doors at Lowes at Midnight:

I need a pencil to write down a thought before it leaves my mind. Guns drawn.

Blackberry Thicket: Somebody is chasing me again. Where are my shoes?

Barbed Wire Security Fence: I will be out of here by my birthday. I'm out!

Oregon Burn Center: I am preparing for pain. It is coming.

Another Emergency Room, Minor in Possession, Assault, Theft, Criminal Charges, Misdemeanors, Crisis Intervention, CIT Trained Officer, Stitches, Juvenile Counselor, Another Failed Drug Test, Defense Attorney, Mental Health Court, Another Commitment, Another Hospital, Another Recovery Plan, Low White Blood Cell Count, Let's Try this Medication, More Side Effects, Circular, Education, Advocacy, Intervention, NAMI, HOPE.

Love and desire are the spirit's wings to great deeds.

Johann Wolfgang von Goethe

Bulletin Board

 NAMI SW WA is progressing with our expansion to include the three counties: Clark, Cowlitz, and Skamania. We have completed new draft Bylaws and found that our Articles of Incorporation with the State of Washington had not been updated since they were first filed with the state almost thirty years ago. We are filing new Articles as soon as they are completed and shortly after that happens the name change will become official, however we are already using the new name much of the time because we are already providing services to our expanded audience.

 We will be sending a survey to all NAMI members in WA to hear opinions about the NAMI WA Conference, held annually in August. NAMI SW WA will host the conference in 2014. We have a number of ideas for adjunct training courses for people in related fields of interest including law enforcement, corrections, the legal/judicial system, and education and will be testing the water to see how much interest there is in holding such programs. We are also very concerned about meeting the needs of NAMI affiliates, members, and friends of NAMI throughout the state. Please make sure you respond to the survey when it comes to you from our NAMI WA office.

 If you are not a member of NAMI, please, please complete a membership enrollment today and send it in to us with your check for either \$35 or \$5. All memberships are welcome, but we need to increase our numbers significantly if we are to play a significant role in advocating for changes in the mental health system. As our membership increases you can expect to see us become much more active at the county, state, and even national level as we push to make things work better and be more accessible to the people who need services, accommodations, and care. Thanks ahead of time for your support in this effort!

 Our next NAMI SW Board meeting has been moved to Monday, November 11th because Peggy will be participating in a NAMI National meeting of a small group of Executive Directors. The meeting will be held in New Orleans during the first week of November. This is her first opportunity to meet 39 other Executive Directors, to share plans, get questions answered, and to hear about expectations from NAMI National. Expect a news-filled report on this meeting in next month's newsletter.

 Please think about forming a NAMI WALK team for the biggest NAMI event of the year that takes place every May. Many affiliates use this event as their primary fundraiser; we hope to do the same. Our goal is to have a minimum of twenty teams each raising a minimum of \$1,000. Of course, many more teams and much more money is welcome. Teams can be online, where people don't actually walk at the events that we participate in in Portland, or in Seattle, or your team can walk at either site. A group of us walked in Portland last year covering the 5K trail along both sides of the Willamette and crossing two bridges. This year we hope to have a huge contingency from SW WA, including teams from every provider agency in the area. So, please begin planning your team now!

Kindness is magic.

*Grace is the beauty of
form und the influence of
freedom.*

Friedrich Schiller

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

Thank you for being part of the team!

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

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(No one is refused membership due to economic hardship)
 - DONATION \$ _____
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