



NAMI Indiana

National Alliance on Mental Illness

Featured Topic: Spirituality & Mental Health

Spirituality Linked With Mental Health Benefits: Study

If you're not in touch with your spiritual side, here's a good reason to start: It may hold benefits for your mental health.

A small new study shows that regardless of what religion you ascribe to, spirituality in general is linked with greater mental health. In particular, spirituality in the study was linked with decreased neuroticism and increased extraversion, researchers found.

"With increased spirituality people reduce their sense of self and feel a greater sense of oneness and connectedness with the rest of the universe," study researcher Dan Cohen, an assistant professor at the University of Missouri, said in a statement. "What was interesting was that frequency of participation in religious activities or the perceived degree of congregational support was not found to be significant in the relationships between personality, spirituality, religion and health."

The researchers analyzed several survey results, which included information from 160 people. Forty of them were Buddhists, 41 were Catholics, 22 were Jews, 31 were Protestants and 26 were Muslims, according to the study, which was published in the Journal of Religion and Health.

Recently, a Gallup-Healthways study showed that people who are religious report better health than their less-religious counterparts, HuffPost Religion reported.

Specifically, that study examined how health was better among people who considered themselves "very religious" compared with those who considered themselves only moderately religious or nonreligious.

They found that the "very religious" scored themselves slightly higher than the moderately religious and nonreligious in areas of quality of life, access to doctors, healthy habits, emotional health and job satisfaction. However, the nonreligious people scored their physical health higher than the religious people in the study, HuffPost Religion reported.

www.huffingtonpost.com/2012/08/26/spirituality-mental-health-religion_n_1821766.html

Support Groups in Your Community

All NAMI support groups are offered at no cost to participants and are open to the public.

Participants must be at least 18 yrs. of age.

No registration or referral is necessary.

For a complete listing see www.namiindiana.org

2014 Winter Newsletter

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NAMI Indiana Calendar of Events

February 10: 8am

Youth Mental
Health First Aid

February 11: 6:30pm

Affiliate Support Call

February 14: 10am

NAMI Indiana Board
Meeting

February 18: 10:30am

Public Policy
Committee Meeting

March 11: 6:30pm

Affiliate Support Call

March 18: 10:30am

Public Policy
Committee Meeting

March 20:

Criminal Justice Summit

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NAMI Indiana • NAMI Indiana Criminal Justice



Message from the Executive Director

Josh Sprunger, Executive Director, NAMI Indiana

As we move into the middle of winter, it's important to reflect on the fun and connections we cultivated during the summer, and on the hard work and preparation we undertook in the fall to prepare for a new year. I want to highlight a little bit of that activity.

NAMI Indiana is a key partner for the State of Indiana in developing new Systems of Care for children and youth in Indiana. Here's what we know: too often families facing serious barriers to treatment and supports fall through the cracks. The good news: for the first time, parents and youth affected by these challenges have participated in high-level discussions around planning and policy with the Division of Mental Health and Addiction, the Department of Child Services, and juvenile justice agencies. During the summer, Indiana completed its first strategic plan to address these gaps, and family members were integrally involved in shaping that plan. Because of that participation, of which many of you helped to facilitate, Indiana received a large federal grant to build new services and systems. We are moving forward. Your experiences, and willingness to connect, are making a difference.

We convened a dynamic state conference this year to cap off the summer and launch the fall season. More than 200 participants, family members and those living with mental illnesses, got information on the latest research on intervention for early psychosis, and heard William Cope Moyers tell his story of recovery and the support he received from his family and peers. Check this newsletter on page 9 to read about those powerful advocates and leaders who we honored with annual awards. You, leaders, volunteers, and members are the engines of our organization. Workshops on new programs for peer support, family involvement in the juvenile justice system, life-stage planning for caregivers, and new approaches to recovery stimulated great conversations and connections among us.

During the fall, we invested in preparation. NAMI is undertaking a massive effort across the country to "re-affiliate" with local affiliates and state organizations. The goals of the project are to fertilize our local grassroots organizations to create stronger programs, stronger organizations, and solid foundations for service to our volunteers and members. At this moment, your local leaders are engaging new discussions about their vision, their boards and volunteer leaders, and their relationships with other groups in their community. This hard work reflects a colorful process of change and a future of new growth. Our values at NAMI Indiana speak to social justice, experience, and vision. We trust and thank local family members and leaders who so desperately want to give back and grow. That's what makes us who we are.

Finally, we prepared for a winter of work in the State Legislature. A core group of volunteers and staff have laid the groundwork for new legislation on Crisis Intervention Team training expansion, and for new kinds of services for those in crisis or those released, many times before they are ready, from local hospitals and inpatient treatment. Our state-level NAMI public policy committee is guiding a process of substantial work with a bipartisan group of lawmakers who see this as the time to act. On January 21, NAMI members attended our annual Meet & Greet event at the Indiana Statehouse, sharing their stories and interacting with legislators interested in learning more and helping our cause.

In all of these projects, NAMI Indiana maintains a strategy to have family members and people living with mental illnesses at the helm. Thank you for your ongoing support and all you do for those we serve.



“The pain of severe depression is quite unimaginable to those who have not suffered it, and it kills in many instances because its anguish can no longer be borne. The prevention of many suicides will continue to be hindered until there is a general awareness of the nature of this pain.”

William Styron, *Darkness Visible: A Memoir of Madness*

News from the Program Director & Program Coordinator

Linda Williams, Program Coordinator NAMI Indiana

The last quarter of 2014 started off with the staff of NAMI Indiana attending the NAMI National Convention in Washington DC. What a great time to network and gather new information about the NAMI programs. After attending an Ending the Silence program there, we will strive to bring this program to Indiana in 2015. Ending the Silence is a mental health awareness presentation provided in the classroom for middle and high school age youth. It provides youth with the unique opportunity to learn about mental health directly from a NAMI trained team consisting of:

- A young adult living in recovery with a mental health condition (up to age 35)
- An adult living in recovery or family member of an individual living with a mental health condition

It teaches youth the early warning signs of mental health conditions. It also provides resources and tools to help the youth, friends and family members who may be experiencing symptoms of a mental health condition. If you are interested, contact Linda Williams, Program Coordinator at 800-677-6442 or lwilliams@namiindiana.org.

Many of the leaders for NAMI Indiana have been busy conducting education classes. There were 15 Family-to-Family classes that either began and/or ended in the last quarter of 2014. There were 4 Peer-to-Peer classes held during that time. Thank you to the volunteer teachers and mentors that made these classes possible!

Mental Health First Aid was offered and taught twice during the last quarter by NAMI Indiana. It is a public

education program that introduces participants to risk factors and warning signs of mental illnesses, builds understanding of their impact, and overviews common supports. This 8-hour course uses role-playing and simulations to demonstrate how to offer initial help in a mental health crisis and connect persons to the appropriate professional, peer, social, and self-help care. The program also teaches the common risk factors and warning signs of specific types of illnesses, like anxiety, depression, substance use, bipolar disorder, eating disorders, and schizophrenia. It is included on the Substance Abuse and Mental Health Services Administration's National Registry of Evidence-based Programs and Practices (NREPP).

Joanne Abbott and Linda Williams were trained to offer Youth Mental Health First Aid this last quarter. It is a course designed to teach lay people methods of assisting a young person who may be in the early stages of developing a mental health problem or in a mental health crisis. It targets people who have frequent contact with youth and young adults, such as parents, school staff, sports coaches, and youth workers/volunteers. This course will be offered February 10, 2015.

The staff put together and did a day-long training and presentation about mental illnesses for a large group of Service Coordinators from all over the country. Their role, among many, is to assist the elderly and people with disabilities who live in affordable housing locations. They help them access the needed and desired services to meet their physical and social needs. The group was very receptive and grateful for the information they received.

Policy News

Oct 11, 2014

BLOOMINGTON, Ind. (AP) — A new Monroe County mental health court is aimed at keeping people mentally stable and out of trouble and the community safe, officials said.

The new court also should save tax dollars, county prosecutor Chris Gaal said at a news conference.

Changes to Indiana's criminal code encourage communities to offer treatment and rehabilitation services to low-level offenders through probation and community corrections programs, and state funding will help pay for the Monroe County pilot program, The Herald Times reported.

The county community corrections program received a \$64,747 state grant to pay for a full-time probation officer and case manager to handle the mental health court caseload. Two local agencies, Centerstone and Amethyst House, received grants of \$83,201 and \$25,000, respectively, to provide services to people who will go through the court. An additional \$11,799 pays for computer software that will help measure the project's results.

Information from: The Herald Times, www.heraldtimesonline.com

Criminal Justice Update

Save the Date!

NAMI Indiana's Mental Health and Criminal Justice Summit is *Friday, March 20, 2015*

Crisis Intervention Teams in Indiana: Recently, NAMI Indiana attended Organization Day at the Indiana State House to educate legislators about CIT and the need for statewide coordination and technical assistance. To learn more, please visit www.namiindiana.org/criminal-justice/CIT.

CIT for Youth Expansion: Similar to the pre-arrest diversion focus of regular CIT, CIT-Y aims to reduce the number of youth with mental health needs who end up in the juvenile justice system. It trains common first responders to youth in crisis, such as school resource officers and other school personnel, how to effectively interact with children and youth in mental health crises, and what options are available in those situations. Six Indiana counties participated in CIT for Youth coalition training in June 2014 and are now in the process of developing their specialized CIT trainings for the 2015 calendar year.

Marion County Re-Entry Project: The Marion County Reentry Work Group has been awarded funds through a federal grant called the Second Chance Act, which supports programs aimed at improving outcomes and reducing recidivism for individuals released from prisons, jails, and juvenile detention centers. These funds will be used to assist Marion County residents with a diagnosed mental illness as they transition from a DOC facility back into the community. Services will be focused on the individual's access to mental and physical health treatment, housing, and employment opportunities. The grant is expected to serve 75 individuals in 2015. This grant is a result of Community Conversations regarding mental health and re-entry held in 2013 which were sponsored by Eli Lilly & Co, facilitated by Suzanne Clifford (now Executive Vice President of Behavioral Health at Community Health Network), and hosted by NAMI Indiana.

The Juvenile Detention Alternatives Initiative (JDAI): JDAI supports the reallocation of government resources away from incarceration of youth and toward community based services, including mental health treatment. As of the end of 2012, the eight counties in Indiana participating in JDAI saw a reduction in admissions to detention by 45% and a reduction in the average daily population (of juvenile detention centers) by almost 41%. During this time, re-arrest rates remained steady at 18%, indicating that utilizing community alternatives in lieu of detention does not increase the chance that a juvenile will re-offend or compromise public safety. We know that up to two-thirds of youth involved in the justice system have one or more diagnosable mental health needs that can be safely and more effectively treated in the community. For this reason, JDAI has launched a special working group on mental health and NAMI Indiana is thrilled to be at the table!

Science Digest

Aspirin shown to benefit schizophrenia treatment

October 20, 2014

European College of

Neuropsychopharmacology (ECNP)

Summary: Some anti-inflammatory medicines, such as aspirin, estrogen, and Fluimucil, can improve the efficacy of existing schizophrenia treatments, new research suggests. Research has shown that the immune system is linked to certain psychiatric disorders, such as schizophrenia and bipolar disorder. Research has shown that "antioxidants and anti-inflammatory drugs could not only reduce symptoms associated with the disorders but also prevent the appearance of neurobiological abnormalities and transition to psychosis if given early during brain development," experts say.

Why depression and aging are linked to increased disease risk

October 18, 2014

European College of

Neuropsychopharmacology

Summary: New research shows that both aging and depression are associated with a biochemical change in a gene on chromosome 6, the FKBP5 gene. This means that we may have found one reason for why risk for aging-related diseases, such as cardiovascular diseases and neuropsychiatric disorders, are worse in chronically stressed and depressed individuals.

Fish intake associated with boost to antidepressant response

October 20, 2014

European College of

Neuropsychopharmacology (ECNP)

Summary: Up to half of patients who suffer from major depression do not respond to treatment with Selective Serotonin Reuptake Inhibitors. Now a group of researchers has carried out a study that shows that increasing fatty fish intake appears to increase the response rate in patients who do not respond to antidepressants.

Springboards and NAMI FaithNet

*“The experiences of our lives are not a key to the past, but to the future.
The experiences of our lives become the mysterious and
perfect preparation for the work HE will give to us to do.”
Corrie Ten Boom*

Corrie Ten Boom was no religious sentimentalist. She knew the darkness and evil of Auschwitz, yet faced life afterwards with hope and expectation. Many individuals and families impacted by serious mental illness (SMI) also emerge from the irrational prison of mental illness with purpose and hope. “Life is worth living. I don’t understand why this happened but I’m going to use what I’ve learned to help others.” NAMI FaithNet offers NAMI members and friends an opportunity to do just that - use their life experiences as a springboard to something beyond themselves.

That “something beyond themselves” may include becoming a NAMI FaithNet volunteer advocate/educator. NAMI FaithNet is an information-exchange network equipping NAMI members, clergy and congregations to create more supportive congregations & to realize the value of faith in coping with SMI. NAMI FaithNet trains affiliate members to share their hopeful stories and valuable information about NAMI programs and services.

Many families and individuals affected by mental illness acknowledge faith as a key component in their recovery and experience. An October 2013 report from the Treatment Advocacy Center cites a Baylor University study that found faith and spiritual care ranked second in their priority list of recovery needs. NAMI FaithNet seeks to equip clergy and congregations with knowledge and resources so they can create a safe place where people facing mental illness feel welcome, cared for and included. We affirm the value of both faith and medical science. NAMI FaithNet’s three-pronged emphasis on education, spiritual care and medical treatment is the kind of best-practice model which we encourage faith groups to offer.

Connections between faith communities and NAMI affiliates provide mutual benefits:

Religious communities benefit by learning how to relate to, support and refer people in their midst to mental health providers and to NAMI resources. NAMI affiliates will find new community connections with people who need its time-tested, life-changing education and support programs.

In the last three years, NAMI FaithNet has worked through NAMI Indiana to train at least forty NAMI members in *Reaching*

Out to Faith Communities. This five to six hour training (a springboard for mental health ministry) can be obtained either by down-loading the Power Point from www.nami.org/faithnet and going through the material individually or with a team of interested members from you affiliate, or by taking an in-person training. Team-building is the recommended method, for mutual encouragement and for sustainability and coordination of the program.

Two other springboards to help launch your affiliate’s outreach to faith communities, (besides your own life experience and *Reaching out to Faith Communities*), is a second PowerPoint presentation, *Bridges of Hope*, also available from the NAMI FaithNet web page. This one-hour program designed for clergy and faith community members answers three questions: *What is Mental Illness and its impact? What is the Role of the Church; and What is NAMI?*

The last springboard to mental health ministry which you MUST know about is coming in 2015: another NAMI FaithNet mini-grant opportunity. Small incentive grants of \$250 and \$500 will be available on application to buy equipment, supplies, food or printing costs for clergy and faith congregation education/outreach. Perhaps your affiliate wants to host a clergy training or luncheon. Perhaps you need to prepare a brochure to advertise your affiliate’s education and support programs to congregations and clergy in your area. Watch the NAMI FaithNet web page for the mini-grant announcement in late January or February.

If you or your affiliate have not discovered the rewarding “something more” work of NAMI FaithNet, we invite you to do so in 2015. Let your life experiences become the springboard for bringing hope and help to others.

For more information about NAMI Faith Net, contact carolejwills@gmail.com
www.nami.org/faithnet



Meet a Board Member

Marilynn Berry-Stamm RN,BSW,CLC

President, NAMI Indiana Board of Directors



I was born in Louisville, Kentucky. I came to Indiana by way of attending Anderson University where I graduated in 1975, with degrees in Nursing and Social Work. I worked for, what is now, IU Health from August 1975- August 2011. I worked in many areas and in various capacities at the ob-gyn department. These included in the newborn nursery, dealing with postpartum issues, in gynecology, at the women's clinic, as a bereavement counselor, in the postpartum home visitation program, as a childbirth educator, and as a lactation counselor. I have now worked for

a maternal- infant home visitation program, Nurse- Family Partnership, since October 2011.

My introduction to mental health concerns was at IU, through my interactions with women who developed perinatal mood disorders during pregnancy or the first year postpartum. Knowledge was rather scarce in the early days. We now know so much more and are able to support and provide better, more informed, services to women. In my current position, we often see the known statistics, of one in four families being impacted by mental illness. But, because of the information I have learned from NAMI, I am able to help my clients obtain care and navigate the mental health care system. This information is also utilized by my coworkers.

I have three sons: Matt currently resides in Richmond State Hospital; Cody, his wife Jaelyn, and their son Greyson live in Des Moines, Iowa; and Jory resides in Zionsville, Indiana. Matt's illness was my personal introduction to current mental health/illness care. After serving in the Marine Corp Reserve for four years and attending IU until his final semester, he was diagnosed with bipolar disorder in 2004. I then attended the NAMI Indianapolis Family-to -Family class, and my journey with NAMI Indiana began.

The knowledge and support I have received from my involvement has made an indescribable difference in my life. I have experienced the frustrations of lack of access to care, the lack of coordination of that care, the maze of insurance and support services, and the heartbreak of watching the changes the illness sometimes causes. But, through NAMI, I have been able to express my concerns to legislators, help share information through teaching the Family-to-Family class, talk with law enforcement, guest lecture at schools of nursing, and share information and support to persons with a mental illness and their friends and family members. The basic NAMI tenets of support, education and advocacy have, and are, truly making a difference in the lives of myself and others.

Thank you for the opportunity of serving as your President of the NAMI Indiana Board of Directors.

Local News

Research Finds Screenings Help Detained Youth with Mental Health Issues

November 6, 2014

INDIANAPOLIS - While Indiana is ahead of the curve when it comes to juvenile justice reform, a new study in the American Journal of Public Health indicates there remains room for improvement.

As part of the study, the stays of more than 25,000 juveniles were examined. Indiana is one of only two states that have implemented mental health screenings in juvenile detention centers.

Professor Matt Aalsma, a study co-author and associate professor at the Indiana University School of Medicine, says his team found particularly high rates of mental health issues and inconsistencies in available services. He says their findings also suggest youths need to be connected with mental health services after they return to their communities.

The findings were published in the October issue of the American Journal of Public Health.

www.publicnewsservice.org/2014-11-06/youth-issues

Mental illness Costs Marion County Jail Millions

November 18, 2014

INDIANAPOLIS (WISH) — One of the largest mental health facilities in Central Indiana isn't a psychiatric hospital — it's the Marion County Jail. When I-Team 8 Chief Investigative Reporter Karen Hensel rode along with Indianapolis Metropolitan Police Department officers, there were five mental health calls in just one hour.

"There's a tremendous cost," Col. Louis Dezelan of the Marion County Sheriff's Department said of the jail becoming a mental hospital.

Dezelan said of 2,300 Marion County Jail inmates, 40 percent have a mental illness. With that population alone described as mentally ill, the jail distributes 700 prescriptions every day.

In 2012, Indiana cut over \$24 million, or 9 percent, from its mental health budget.

The National Alliance on Mental Health documented it as the second biggest cut in the country.

wishtv.com/2014/11/18/jails-become-the-new-asylums/

In Our Own Voice

Submitted by Tom Holloway

At the age of 25, before my first son was born, I began to notice occasional bouts of a panic feeling, and feeling like I was going to lose control. That would happen sporadically enough that I wasn't worried. I was sure it would go away soon, maybe I was just worried about my unborn son or maybe it was the relentless rain preventing us from getting our crop planted on time.

Looking back, this was the beginning of years of my roller coaster ride of debilitating emotions, while trying to deny all of it. I constantly tried to figure out what in the world was wrong with me. I would experience weeks or even months with no symptoms whatsoever and during these times I would convince myself that I was fine, nothing ever happened and I was sure that I would never experience any such symptoms ever again, only to have my hopes crushed, to find myself once again in the valley. Every time this would happen I would tell myself that it was over and I was all better. In my complete silence I knew there really could be nothing wrong with me. Things like this just don't happen to people like me. I had a good childhood, good parents, no abuse, nothing! I was working hard, by now I had a beautiful son, I was working constantly chasing my dreams, "doing good", doing nothing that would have caused the terrible symptoms that had manifested into the horrific feelings and thoughts I was having.

After nearly a decade of denial, multiple diagnoses, strained relationships (business and personal), switching pills, switching psychiatrists, and with practically no vitality or will to live, I desperately began reading (and finally using the internet) everything about mental illness and the most common diagnoses that I received (Borderline Personality Disorder, Chronic Depression). I had become very comfortable with the thought of suicide. If it wasn't for the fear of abandoning my (now) two awesome sons, I would no longer be here.

Without really realizing it I had become a student of

mental illness. When I wasn't sleeping 16 hours a day or more, I was reading, researching, while clinging to the last little bit of hope I had looking for a reason to keep living this nightmare. I basically would call psychiatrists, psychologists, hoping to find "the one". After receiving what I felt was little interest in helping me, I called a "Life Coach" that I found that, to begin with, basically just had a catchy professional website which described her personal recovery from Borderline Personality Disorder. I called her with diminishing hope that there was anyone out there interested in helping me. After listening to her briefly, she convinced me, that for me, recovery was going to be a process, not just a pill or just a psychologist, or just a psychiatrist, but quite probably a lengthy process, a process that involved several different methods of learning how to recover. Luckily, as part of the process, she recommended looking into NAMI. At first I was very uninterested in that recommendation, basically stemming from natural skepticism, and not knowing what NAMI was. It was several months before a friend I met through my life coach talked me into meeting him in Chicago for the NAMI National Convention. I actually went and didn't back out at the last minute like I had for so many years on so many occasions. I will admit I was impressed and encouraged. Wow! I had no idea! Finally! As cliché as it sounds, you would have thought NAMI was created for me! The resources, programs, people, etc. and from a grassroots non-profit!!! In just a few years NAMI has reached far. From prisons to family members of the mentally ill, they are certainly making a difference in people's lives through education, compassion, and understanding.

For anyone who ever feels the need to reach out, just reach out no matter what. From the bottom of my heart I truly believe this, if I can do it, anybody can. Yes, for me recovery is a process, a long but a worthwhile process, a very rewarding process thanks to the people I have met and organizations like NAMI.

Next Newsletter in Spring

We welcome submissions to the newsletter. Submissions can include poetry, prose, consumer experiences, stories, local advocacy, mental health notes, book nook suggestions and articles, etc.

Please send submissions to Paul Khoury at pkhour@namiindiana.org.

Submissions may be edited.

Thank You Volunteer Program Leaders!

NAMI Indiana wishes to recognize those volunteers that make possible programs and support groups across the state:

Peer-to-Peer Mentors for classes that ended or started this fall/winter

Indianapolis: Ann E. Ruth & Jennifer Green

Elkhart: Marcia Hamood & David Smail

Lafayette: Pam Kiser & Kurt Harker

Fort Wayne: Kim Burdick & Mike O'Neil

Family-to-Family Teachers for completed classes this fall/winter

South Bend: Gail Bondo & Janey Aaron

Indianapolis: Peggy Cougill & Priscilla Hamill

Milan: Cheryl Dalton & Ruth Collins

Madison: Jeff Pflug & Jessica Montgomery

Columbus: Annette Kleinhenz & Sonnie Warnick

Fort Wayne: Kathy Bayes & James Williams

Lafayette: Luci Keazer & Phil Trice

Bloomington: Laura Jesseph & Cathy Korinek

Elkhart: Gwen Preheim-Bartel & Dena Miller

Muncie: Mary Bedel & Vicki Hunter

Anderson: Phil Parris & Pamela Parris

Evansville: Diane Arneson & Suzanne Lawrence

Frankfort: Grace Moore & Dick Moore

Jasper: Carol Gramelspacher & Conni Harness

Support Group Facilitators

Kokomo: Jim Buchanan, Karla Buchanan, Jeff Nelson, Bryan & Julie Mohr & Diana Birkey

Delaware County: Pat Bennett, Larry Bennett, Mary Bedel, Marcy Meyer, Marsha Burden, Vicki Hunter

Bloomington: Al Strickholm, Lee Strickholm, Daunna Minnich, Laura Jesseph, Kathleen Mickel, Jill Giffin, Jan & Sherry Owens

West Central: Amy Brinkley, Angela Hartman, Cecie Kraynak, Doug Fletcher, Emily Fogle, Jenny Hawkins, Joy Mabbitt, Jules Kauffman, Lisa Barner, Pam Kiser, Shirley Chapman, Tracy Cooks, Beth Moore, Charlotte Warner, Grace Moore, Dick Moore, Joe Kraynak, Kitty Haffnaer, Tracy Johnson, Pattie Wollenburg

St. Joseph: Lisa Anderson, Gail Bondo, Kris Monagle, Ginny Nawrocki, Gene Sherry, Carol Yergler, Lisa Kruczek, Leslie Nemeth, Kathleen Sweeney

Evansville: Diane Arneson, Sam Luzader, Rhonda Back, Larry Back, Sue Lawrence, Melinda Long, Shannon Long, Zachary Alcorn, Judy Omer, May Gregg

Jasper: Carol Gramelspacher, Nancy Habig

South Central: Linda Ricke, Virginia Botu, Martha Butler, Susan Cook

Indianapolis: Sara Walker, Linda Davis-Hampton, Sue Bessmer, Amanda Morey, Bill Spann, Betty Spann, Francita Spann, Joanne Abbott, Donna Yancey, Mike Kempf, Mary Kempf, Linda Slinger, Gary Baney, Elsa Sands, Toni Pickard, Marianne Ries, David Clifford, Eddie Journey, Annie Ruth, Mary Horne-Porter

And many more who wish to remain anonymous.

Affiliates: Please send us your active support group facilitators so that we can recognize them in future newsletters.

NAMI Indiana is a NIMH Outreach Partner

National Institute of Mental Health (NIMH) Updates:

www.nimh.nih.gov/news/science-news/2014/groundbreaking-suicide-study.shtml

Science Update

October 10, 2014

A groundbreaking study will help researchers learn more about ways to treat people experiencing suicidal thoughts. Nearly 20,000 patients will be able to participate in a trial that draws from other successful interventions for depression and suicide. One of the treatments being tested was developed with the help of other patients.

Depression Deconstructed – NIH Study

October 17, 2014 • Press Release

A drug being studied as a fast-acting mood-lifter restored pleasure-seeking behavior independent of – and ahead of – its other antidepressant effects, in a National Institutes of Health trial. Within 40 minutes after a single infusion of ketamine, treatment-resistant depressed bipolar disorder patients experienced a reversal of a key symptom – loss of interest in pleasurable activities – which lasted up to 14 days. Brain scans traced the agent's action to boosted activity in areas at the front and deep in the right hemisphere of the brain.

Researchers call for coordinated care to address risks – NIH-funded study

October 8, 2014 • Press Release

Many patients with psychosis develop health risks associated with premature death early in the course of their mental illness, researchers have found.

Patients with schizophrenia are already known to have higher rates of premature death than the general population. The study found that elevated risks of heart disease and metabolic issues such as high blood sugar in people with first episode psychosis are due to an interaction of mental illness, unhealthy lifestyle behaviors and antipsychotic medications that may accelerate these risks.

NAMI Indiana Annual Statewide Awards

Presented at NAMI Indiana State Conference 2014

Media and Public Awareness Award: Dawn Davis

Presented to a person who informs or educates the public about mental illness and/or the lives of persons with mental illness.

The Gloria Goeglein Award for Public Policy: Jim Dilger, NAMI Indianapolis

Presented to a person who meets the needs of persons with mental illness in an exemplary fashion.

Outstanding Professional Award: Trina Randall

Presented to a professional who influences the mental health community or directly improves the life and well-being of those living with mental illnesses.

Patricia Wheaton Award:

Kathleen Sweeney, NAMI St. Joseph County

Presented to a person living with a mental illness who displays exemplary courage in recovery, educating and supporting all those affected by serious mental illnesses.

Member of the Year:

Marcy Meyer, NAMI Delaware County

Presented to members of NAMI Indiana who inspire and serve others in ways that reflect NAMI's mission and values.

Affiliate of the Year: NAMI St. Joseph County

Presented to a NAMI Indiana affiliate whose special projects have enhanced the goals and purposes of our shared vision.

The President's Award:

Prevention and Recovery Center for Early Psychosis

Presented at the discretion of the NAMI Indiana President of the Board to recognize extraordinary service with statewide impact.

Henry J. Marciniak Award: Seth Judd, M.D.

Presented to a second-year Resident in Indiana School of Medicine Residency Training Program in Psychiatry, based on documented consistent interest in the well-being of patients, empathy for the difficulties of family members, and excellent medical knowledge and skills.



NIMH Outreach
Partnership Program



www.veteranscrisisline.net/
ChatTermsOfService.aspx?account=Veterans Chat



Ask a Psychiatrist or Psychologist

What can we do as a family to help our loved one who is struggling with psychosis?

This is a commonly asked question. For obvious reasons, a psychotic illness can be quite traumatic for individuals living with them. For family and friends of individuals with psychosis, there are often feelings of loss and helplessness and one may be left unsure how to help a loved one towards recovery.

While there is certainly no easy road to recovery, there are steps that family and friends can take to help their loved ones in their time of need. The most important step is to get the person into treatment as early as possible. It has been consistently shown that the earlier a person is able to get into treatment the better their long term functioning and outcomes tend to be.

Once a person is in treatment there are still a number of ways that family and friends can support their loved one's recovery. In fact, family involvement is often one of the most pivotal forces behind recovery from psychosis. There are a number of vital factors which can help to promote recovery and importantly family and friends are often at the forefront. Maintaining social and friendship networks, working on stress management, medication and treatment compliance, and helping to provide a sense of feeling heard and supported are essential pieces of recovery that family and friends can work with the treatment team to provide.

Taking care of yourself is also important. As much as possible, continue your typical routine, and allow yourself social and productive activities with friends and family, work, and in your community. Attend support groups, but nourish other interests as well.

*Mike Francis, MD
Indiana University School of Medicine
Assistant Professor of Clinical Psychiatry
Eskenazi Midtown Prevention and Recovery Center for Early Psychosis (PARC)
Staff Psychiatrist*

Ask a psychiatrist or psychologist

Beginning in the next newsletter, we will be accepting questions from our readers. The questions will then be answered by professionals in the mental health field. If you'd like your questions answered, please email them to pkhour@namiindiana.org with "Ask a Doctor" in the subject line.

Poetry and Prose

In a Dark Time

by Theodore Roethke

In a dark time, the eye begins to see,
I meet my shadow in the deepening shade;
I hear my echo in the echoing wood—
A lord of nature weeping to a tree.
I live between the heron and the wren,
Beasts of the hill and serpents of the den.
What's madness but nobility of soul
At odds with circumstance? The day's on fire!
I know the purity of pure despair,
My shadow pinned against a sweating wall.
That place among the rocks—is it a cave,
Or winding path? The edge is what I have.
A steady storm of correspondences!
A night flowing with birds, a ragged moon,
And in broad day the midnight come again!
A man goes far to find out what he is—
Death of the self in a long, tearless night,
All natural shapes blazing unnatural light.
Dark, dark my light, and darker my desire.
My soul, like some heat-maddened summer fly,
Keeps buzzing at the sill. Which I is I?
A fallen man, I climb out of my fear.
The mind enters itself, and God the mind,
And one is One, free in the tearing wind.

Where Does My Donation Go?

- ▶ \$40-materials for 1 person to take a 12 week Family-to-Family class or a 10 week Peer-to-Peer class at no cost to participant
- ▶ \$1,000-materials for a class of 25 to receive Family-to-Family at no cost to participant
- ▶ \$2,000-provides teacher stipends AND materials for a class of 25 to receive the Peer-to-Peer training at no cost to participant
- ▶ **AND** charitable donations support all advocacy initiatives at the Indiana State House and help make possible critical public policy work.

Join or Contribute to NAMI Indiana TODAY!

NAMI Indiana Membership and Contribution Form

As a member, you receive:

- ▶ Membership in the local affiliate, state organization, and NAMI national organizations
- ▶ Eligibility to vote in NAMI elections
- ▶ A subscription to *The Advocate*-NAMI National's quarterly magazine, and state/local publications
- ▶ Member discounts on brochures, videos, promotional items, and registration at the NAMI National annual convention
- ▶ Satisfaction knowing that you are an official part of the largest grassroots mental health organization in the country!

Individual/Family\$ 35.00
 Additional tax-deductible contribution\$ _____
 Total Enclosed\$ _____

 Name (First, Last)

 Mailing Address (city, state,zip)

 Phone

 Email Address

- Check Enclosed (make payable to "NAMI Indiana")
 Credit Card Number (Mastercard or Visa Only)

 3-digit security code(CVV)

 Expiration Date (mo/year)

 Signature

Return to:

NAMI Indiana: P.O. Box 22697; Indianapolis, Indiana 46222. Fax: (317) 925-9398

Open Door Memberships: if you wish to join as an official member of NAMI but would rather pay a lower rate to better meet your needs, please contact your local affiliate or our office to join for a significantly-reduced rate.

Going Green Saves Paper and Postage!

Do your part for the budget (and the environment) by receiving your copy of the newsletter electronically. Just send your email address to: pkhour@namiindiana.org

Affiliate News

NAMI of Elkhart County has had several big projects in the last two years. In 2013 we made a large file of mental health brochures to give to each of the clinics in the county that treat children. We want to emphasize the importance of treating mental illnesses early. The clinics can give the brochures to the parents of their children and youth who exhibit mental health issues.

This year, at the request of the police, we made files for each of the police departments in Elkhart County and also the Sheriff's Department. The law enforcement departments can use the files to give out mental health information to families who have loved ones in trouble with the law who show signs of mental issues, as well as use the brochures to help educate their officers.

We also collected books for the inmate library at the jail in 2013. They needed a lot of Spanish-English dictionaries, popular fiction books, as well as self-help books.

Submitted by Charlotte Fletcher,
President of NAMI of Elkhart County

The Mental Health Collaborative Network of Tippecanoe County presented a legislative forum on mental health issues on Monday, December 1, 2014. The forum was held at Mental Health America of Tippecanoe County, 914 South Street, Lafayette. The event was open to the public.

Attendees had the opportunity to: meet with elected officials and ask them questions, become informed about current legislative issues at the state level pertaining to mental health and addictions, learn legislators' priorities concerning mental health issues, and discover what can be done to impact mental health services.

The Mental Health Collaborative Network currently consists of representatives from Franciscan St. Elizabeth Health, Mental Health America of Tippecanoe County, NAMI West Central Indiana, St. Elizabeth School of Nursing, Sycamore Springs, Wabash Valley Alliance, and Purdue University Counseling and Psychological Services.

NAMI West Central Indiana sponsored two performances of the award-winning play "BOB" in early December. The events were free and open to the public.

"BOB" is a one-woman show written by and featuring Anne Pasquale, providing a window into the life of a family whose son has a mental illness. Pasquale based the play on her family's experiences. Performances were held at the Tippecanoe Arts Federation, 638 North Street, Lafayette, and at the Purdue Co-Rec, 355 N. Martin Jischke Drive, West Lafayette.

For information about "BOB" and Anne Pasquale, please visit her website at www.bobtheshow.com.

Submitted by Kristin Matz, NAMI West Central Indiana



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