

What is NAMI?

The National Alliance on Mental Illness is a national organization designed to assist families coping with mental illness of family members. Nearly 60 million Americans experience a mental health condition every year. Mental illness impacts the lives of at least one in four adults and in 10 children across the United States.

People living with mental illness need help and hope: they need a community that supports them, their families and their recovery.

NAMI is the nation's largest grassroots mental health organization dedicated to building better lives for those with mental illnesses.

Local NAMI affiliates help support the families and individuals coping with mental illness. Formal membership is not required.



What Does NAMI-Alger Marquette Offer?

Family Support Group—a comfortable, non-threatening opportunity to share common experiences, and to work toward improving the quality of life for individuals with mental illness. This group also helps to establish friends and support networks that can provide help during a time of crisis.

Educational programs—monthly educational meetings with speakers and local experts who provide current and up to date information. Discussions and questions and answers are always welcome.

Family-2-Family—a 12 week program provided by locally trained members designed to help families and individuals develop skills for supporting and assisting ill members and their families.

Information—NAMI also has educational materials on mental health resources for persons with mental illness and their families. NAMI provides several magazine subscriptions to the local libraries in Marquette, Negaunee, and Ishpeming.

Advocacy - NAMI members meet with politicians, teachers, professionals to help shape public policy for people with mental illness and their families. We work with grassroots volunteers to give them the tools, resources and skills necessary to save mental health supports in Michigan and nationally.

OUR PURPOSES

- To provide social and psychological support to those affected by mental illness/biological brain disorders and their families and friend.
- To work toward improving the quality of life for individuals with mental illness
- To educate the public to dispel myths and overcome the stigmas associated with biological brain disorders/mental illness.
- To advocate for/with people with mental illness and their families at local, state, and national levels.
- To work with service providers of services to persons with mental illnesses.
- To support community services in housing, income maintenance, day programs, and social networks for person with mental illnesses.
- To be part of a growing recovery movement in the Upper Peninsula, Michigan and the United States.



Additional Resources

Interested in Joining NAMI-AIM?

NAMI-Alger Marquette meets twice monthly at 129 W. Baraga Avenue in Marquette from 7-9 pm—usually the second and last Mondays of the month. (June, July, August meetings are the second Monday only.) Membership is not required to attend the meetings.

If you are interested in learning more about our local NAMI chapter or to get accurate times, and dates for meetings, please contact Louise at 906-235-0231 or lous_peace@yahoo.com

If you are interested in joining NAMI-A/M please complete the information below and send along with membership type to:

NAMI-Alger Marquette
PO Box 262
Marquette, MI 49855

Membership dues are currently \$35 per family or \$3 for an open door membership. Both memberships include subscriptions to the award winning magazine from NAMI national, The Advocate, plus state and local newsletters. All memberships help support our organization.

Name _____

Address _____

Optional:
Phone _____

E-mail _____

NAMI-Alger Marquette is supported by dues, fundraising activities, and local agencies. As a local grassroots organization, NAMI-A/M relies on volunteers, dues and donations to sustain our activities. Consider becoming a part of our organization to provide help and hope to those in need.

Websites:

Local NAMI chapter: www.namiam.org

NAMI Michigan: www.namimi.org

NAMI National: www.nami.org

A few suggested readings:

Amador, Xavier. I Am Not Sick, I Don't Need Help

Capps, Donald. Understanding Psychosis

Torrey, E. Fuller. Surviving Schizophrenia

Warner, Judith. We've Got Issues. For families of children with mental and emotional issues.

Wood, Jeffrey, Getting Help: The Complete and Authoritative Guide to Self-Assessment & Treatment of Mental Health Problems

The following journals are available at Peter White Public Library, Negaunee Public Library and Carnegie Library: esperanza which covers topics on major depression and anxiety; SZ which covers topics on schizophrenia and bp magazine which covers topics on bipolar disorder.

FOR MORE INFORMATION
ABOUT NAMI-ALGER /
MARQUETTE CALL:

906-235-0231

906-360-7107

NAMI-Alger Marquette
National Alliance on Mental
Illness



NAMI

Support Group
FOR PEOPLE WITH MENTAL
ILLNESS AND/OR THEIR
FAMILIES

AFFILIATED WITH THE
National Alliance on
Mental Illness &
NAMI Michigan



You may know CPR and the Heimlich maneuver. You can call 911. But can you administer first aid in a mental health crisis?

It's easy to tell when someone is having a heart attack or choking, or can't breathe. But what does depression look like? Or anxiety? What would you say to a person you know who says they are thinking about suicide? How can you help in a panic attack?

Mental Health First Aid is an 8-hour training course that teaches you how to help someone who is developing a mental health problem or experiencing a mental health crisis. People across the country - in all 50 states and the District of Columbia - are trained in Mental Health First Aid. They know how to identify, understand, and respond to signs of mental illnesses and addictions.

This course is delivered by certified Mental Health First Aid USA instructors who complete a 5-day training and meet certification requirements.



www.MentalHealthFirstAid.org

YOU COULD BE THE HELP SOMEONE NEEDS. GET TRAINED.

MENTAL HEALTH FIRST AID IN Marquette

LEARN MORE. CONTACT US:

Enter [name]
[email]
[phone]
[web address]

Mental Health First Aid USA is coordinated by the National Council for Behavioral Health, the Maryland Department of Health and Mental Hygiene, and the Missouri Department of Mental Health.



MENTAL HEALTH FIRST AID™



www.MentalHealthFirstAid.org



COURSE TYPES



ADULT: The adult Mental Health First Aid course is appropriate for anyone who wants to learn how to help an individual who may be experiencing a mental health crisis or concern. The course is available in English and Spanish.



YOUTH: Youth Mental Health First Aid reviews the unique risk factors and warning signs of mental health problems in adolescents ages 12-18. It emphasizes the importance of early intervention and covers how to help an adolescent in crisis or experiencing a mental health challenge. The youth course is intended for anyone 16 years or older to learn how to help young people.

MENTAL HEALTH FIRST AID TEACHES

- Risk factors and warning signs of mental health concerns.
- Information on depression, anxiety, trauma, psychosis, and substance use.
- A 5-step action plan to help someone developing a mental health concern or in crisis.
- Available evidence-based professional, peer, and self-help resources.

Mental Health First Aid is listed in the Substance Abuse and Mental Health Services Administration's National Registry of Evidence-based Programs and Practices. Studies show that individuals trained in the program increase their knowledge of signs, symptoms and risk factors of mental illnesses and addictions; can identify multiple types of professional and self-help resources for individuals with a mental illness or addiction; increase their confidence in and likelihood to help an individual in distress; and show reduced social distance to individuals with mental illnesses.



Included in SAMHSA's National Registry of Evidence-based Programs and Practices

4 REASONS TO BECOME A MENTAL HEALTH FIRST AIDER

1. **To be prepared:** Just as you learn CPR, learn how to help in a mental health crisis.
2. **Mental illnesses are common.** 1 in 5 adults in any given year.
3. **You care:** be there for a friend, family member, or colleague.
4. **You can help:** people with mental illnesses often suffer alone.



ALGEE: The Goal is the Mental Health First Aid

WHO TAKES THE COURSE?

The course helps anyone who wants to learn how to provide initial help to someone who may be experiencing symptoms of a mental illness or in crisis. The course gives people tools to help friends, family members, colleagues, or others in their community.

- College/university leaders
- Educators/school administrators
- Human resources professionals
- Nurses/physician assistants/primary care workers
- Public safety personnel
- Members of faith communities
- Social services staff and volunteers
- Policymakers
- Substance abuse professionals
- Social workers



NAMI Alger/Marquette Affiliate Newsletter Winter 2015-16

Notes from the Chair

By Louise Wilcox, Chairperson, NAMI Alger/Marquette

As 2015 winds down and 2016 looms in the near future – our local NAMI group is making changes. Much as my heart is dedicated to serving those living with mental illness, my schedule says I can't continue as the Chairperson. So with heavy heart, for my loss, but excitement for what the next president and officers will bring – this will be my last article. But I will continue to be involved and participate in activities and provide education and support!

Our local chapter offers great opportunities for member support and education while reaching out to the community. There continues to be a great need to educate the public – especially in schools. With enough interest we hope to train presenters for "Ending the Silence" geared toward middle and high school youth, "In Our Own Voice" sharing your story with a variety of audiences, and "NAMI Homefront" a new education program for Military/Veteran Families. We are seeking a grant to help with training costs and continue to successfully raise money through our fund-raising activities.

However, to make these happen, we need YOU – your caring, your experience, your willingness to help those that NEED you. Now is the time to become active in our affiliate and share your commitment to support and educate those living with a mental illness. During the summer we offered 2 monthly support groups. Beginning in January, 2016 we will offer a Support Group meeting on the 3rd Thursday of each month – in addition to the 2nd Monday of each month. We need help with being a group facilitator. With enough of us signing up, we would only have to facilitate once every 2-3 months. We will also offer training on how to be a facilitator. Please contact myself or Cindy to say "Yes, I will sign-up to facilitate a group every 2-3 months." Training info will be posted on our website and announced at meetings. If you haven't had the opportunity to visit our website, please do. Jennifer has done a wonderful job creating a site with local information including our bylaws, helpline, upcoming events, and articles of interest. If there are events or news items you want posted, please submit to Cindy or myself.

This year our local NAMI Walk – The Solidarity Stroll – raised \$500.00 of which we keep 80%. We just completed our Younker's Community Day sale and sold 200+ books which will bring in \$1000.00+. In the Spring we hope to have a joint venture with the Rapture Center as another way to bring in funds to provide training, programs, and support. Thank you to everyone for the support and who attended our picnic/stroll.

-Louise Wilcox, Chairperson 906-235-0231

New Approach Advised to Treat Schizophrenia

abridged from an article by Benedict Carey for The New York Times, Oct. 20, 2015

More than two million people in the United States have a diagnosis of schizophrenia, and the treatment for most of them mainly involves strong doses of antipsychotic drugs that blunt hallucinations and delusions but can come with unbearable side effects, like severe weight gain or debilitating tremors. Now, results of a landmark government-funded study call that approach into question. The findings, from by far the most rigorous trial to date conducted in the United States, concluded that schizophrenia patients who received a program intended to keep dosages of antipsychotic medication as low as possible and emphasize one-on-one talk therapy and family support made greater strides in recovery over the first two years of treatment than patients who got the usual drug-focused care.

The report, to be published on Tuesday in The American Journal of Psychiatry and funded by the National Institute of Mental Health, comes as Congress debates mental health reform and as interest in the effectiveness of treatments grows amid a debate over the possible role of mental illness in mass shootings.

Its findings have already trickled out to government agencies: On Friday, the Centers for Medicare & Medicaid Services published in its influential guidelines a strong endorsement of the combined-therapy approach. Mental health reform bills now being circulated in Congress “mention the study by name,” said Dr. Robert K. Heinessen, the director of services and intervention research at the National Institute of Mental Health, who oversaw the research.

In 2014, Congress awarded \$25 million in block grants to the states to be set aside for early-intervention mental health programs. So far, 32 states have begun using those grants to fund combined-treatment services, Dr. Heinessen said.

Experts said the findings could help set a new standard of care in an area of medicine that many consider woefully inadequate: the management of so-called first episode psychosis, that first break with reality in which patients (usually people in their late teens or early 20s) become afraid and deeply suspicious. The sooner people started the combined treatment after that first episode, the better they did, the study found. The average time between the first episode and receiving medical care — for those who do get it — is currently about a year and half. The more holistic approach that the study tested is based in part on programs in Australia, Scandinavia and elsewhere that have improved patients' lives in those countries for decades. This study is the first test of the approach in this country — in the “real world” as researchers described it, meaning delivered through the existing infrastructure, by community mental health centers.

The drugs used to treat schizophrenia, called antipsychotics, work extremely well for some people, eliminating psychosis with few side effects; but most who take them find that their bad effects, whether weight gain, extreme drowsiness, or emotional numbing, are hard to live with. Nearly three quarters of people prescribed medications for the

disorder stop taking them within a year and a half, studies find.

"I'm very favorably impressed they were able to pull this study off so successfully, and it clearly shows the importance of early intervention," said Dr. William T. Carpenter, a professor of psychiatry at the University of Maryland School of Medicine, who was not involved in the study.

Dr. Mary E. Olson, an assistant professor of psychiatry at the University of Massachusetts Medical School, who has worked to promote approaches to psychosis that are less reliant on drugs, said the combined treatment had a lot in common with Open Dialogue, a Finnish program developed in the 1980s. "These are zeitgeist ideas, and I think it's thrilling that this trial got such good results," Dr. Olson said.

In the new study, doctors used the medications as part of a package of treatments and worked to keep the doses as low as possible minimizing their bad effects. The research team, led by Dr. John M. Kane, chairman of the psychiatry department at Hofstra North Shore-LIJ School of Medicine, randomly assigned 34 community care clinics in 21 states to provide either treatment as usual, or the combined package.

The team trained staff members at the selected clinics to deliver that package, and it included three elements in addition to the medication. First, help with work or school such as assistance in deciding which classes or opportunities are most appropriate, given a person's symptoms. Second, education for family members to increase their understanding of the disorder. And finally, one-on-one talk therapy in which the person with the diagnosis learns tools to build social relationships, reduce substance use and help manage the symptoms, which include mood problems as well as hallucinations and delusions.

For example, some patients can learn to defuse the voices in their head — depending on the severity of the episode — by ignoring them or talking back. The team recruited 404 people with first-episode psychosis, mostly diagnosed in their late teens or 20s. About half got the combined approach and half received treatment as usual. Clinicians monitored both groups using standardized checklists that rate symptom severity and quality of life, like whether a person is working, and how well he or she is getting along with family members.

The group that started on the combined treatment scored, on average, more poorly on both measures at the beginning of the trial. Over two years, both groups showed steady improvement. But by the end, those who had been in the combined program had more symptom relief, and were functioning better as well. The researchers expect to have lowered average doses in the combined program but had not yet finished analyzing that data.

"One way to think about it is, if you look at the people who did the best — those we caught earliest after their first episode — their improvement by the end was easily noticeable by friends and family," Dr. Kane said. The gains for those in typical treatment were apparent to doctors, but much less obvious.

Dr. Kenneth Duckworth, medical director for the National Alliance on Mental Illness, an advocacy group, called the findings “a game-changer for the field” in the way it combines multiple, individualized therapies, suited to the stage of the psychosis.

Tips for a Mentally Healthy Holiday Season

While the holidays are typically thought of as a time of joy and happiness, they also can be difficult because of stress and mental health needs. Stress experienced during the holidays is often due to our own expectations of ourselves to be all things to all people regardless of the physical, mental, and financial strain it places upon us. Statistics show we are especially vulnerable to illness and accidents when we are overly tired or under excessive stress.

How to Minimize Stress:

- Get enough sleep.
- Eat well and slowly.
- Avoid excessive amounts of caffeine.
- Recognize that alcohol, cigarettes, tranquilizers and other drugs increase stress.
- Plan regular exercise into your schedule
- Take time for yourself. Make an appointment with yourself to do something you enjoy.

Hints for the Holidays: Here are some ideas to make the holidays more meaningful and less stressful.

- Re-evaluate your family traditions each year to make sure they are still important to you and your family. Continue to celebrate your favorite traditions – and consider making a new one.
- Include someone who is alone, lonely, or in need on the holiday.
- Plan ahead and discuss plans in advance.
- Acknowledge feelings related to holidays and express them.
- Keep expectations realistic.
- Be flexible and allow for some changes in plans and participation, when possible.

NAMI Alger/Marquette calendar for Winter 2015-16

Following dates:

December 2015:

Budget Meeting Monday December 7th from 3-4pm with Board Meeting following from 4-5pm

Dec. 14th, 2015 Support Group Meeting

Dec. 28th, 2015 Post Christmas get together- election of new officers for 2016-2018. Bring your leftover Christmas goodies and be prepared to have some fun!!

January 2016:

Jan. 11th , 2016 Support Group Meeting

Jan. 21th , 2016 Support Group Meeting

Jan. 25th, 2016 Educational Meeting

February:

Feb. 8th, 2016 Support Group Meeting

Feb. 18th, 2016 Support Group Meeting

Feb. 29th, 2016 Educational Meeting

All meeting are from:7 to 9pm at the non-profit commons on Baraga Ave., Marquette. All meetings are open to individuals with a mental illness &/or family, friends, etc. of such individuals.

We are looking for volunteers to facilitate the extra Support Group meeting. We will train you on being a facilitator. For further information contact Cindy 906-360-7107 or check our web site.

**WELLNESS CORNER:
The Four Agreements
By Don Miguel Ruiz**

1. Be Impeccable With Your Word

Speak with integrity; say only what you mean, avoid using the Word to speak against yourself or others, Use the power of your Word in the direction of truth and love

2. Don't Take Anything Personally

Nothing others do is because of you, what other say is a reflection of their own reality, their own dream, when you are immune to the opinions and actions of others, you won't be the victim of needless suffering

3. Don't Make Assumptions

Find the courage to ask questions and to express what you really want. Communicate with others as clearly as you can to avoid misunderstandings, sadness and drama. With just this one agreement, you can completely transform your life..."

4. Always Do Your Best

Your best is going to change from moment to moment; it will be different when you are healthy as opposed to sick. Under any circumstance, simply do your best and you will avoid self-judgment, self-abuse and regret...
