



# NAMI

National Alliance on Mental Illness

# Four Seasons

May 2012 Newsletter



## Reminders

*The general education meeting is held the 3rd Saturday of each month @ 10:15 a.m. to 12 p.m. at the Pardee Education Center at Blue Ridge Mall – Four Seasons Blvd.*

**May's Meeting: May 19th - Guest Speaker Julie Huneycutt** - Read program write up below. Hope to see you there!

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**Polk County Consumer Peer to Peer Group** – New group forming - please call Ren @ 828-223-1835 for info if interested.

**NAMI Four Seasons Support Group** for family members or caregivers of an adult with a mental illness on: The 4th Saturday of each month at 10:00 a.m. at Grace Lutheran Church – corner of 6th Ave & Blythe. Co-facilitators are Bob Andersen and Joe Gernoske.

**Polk County Family Support Group** meets the first Monday morning each month. We meet in the Columbus community. Presently there is an average attendance of between 4-6 persons. We send e-mail reminders the week before. For info please call Annie @ 864-457-7278.

## Letter from the NAMI Four Seasons President

by Adrienne Brady

May is Mental Health Awareness Month and NAMI Four Seasons has been working hard to improve our visibility in the community, not just for May, but for all the months of the year. NAMI members are attending the Mental Health Round Table, CFAC (Consumer Family Advisory Committee), Caring Case Meeting at Interfaith Assistance Ministries and preparing to work with the Support Network of WNC and Resource Center to produce a Health Fair in 2013. All of these opportunities allow us to share information with the various agencies as well as tell them about NAMI and introduce our support and education programs. In turn, we learn from them helping us to be a much more helpful information source for those seeking assistance.

We are planning to bring Mental Health First Aid classes to the community and members as well as offering it to agencies who deal with the mentally ill on a daily basis.

Please take a moment to review the talent search letter (page 3), members and friends we need your help.

### **May is Mental Health Awareness Month**

*People with mental problems are our neighbors. They are members of our congregations, members of our families; they are everywhere in this country. If we ignore their cries for help, we will be continuing to participate in the anguish from which those cries for help come. A problem of this magnitude will not go away. Because it will not go away, and because of our spiritual commitments, we are compelled to take action.*

*~ Rosalynn Carter*

## NAMI FaithNet - What is it?

An information resource initiative of NAMI members, friends, clergy and congregations of all faiths who wish to create faith communities who are welcoming and supportive of persons and families living with mental illness.

There is a four-part training curriculum provided by NAMI FaithNet to encourage and equip NAMI members to engage with and share their story and NAMI resources with local faith groups. Bill & Bonnie Kinschner in Asheville have formed a local Faithnet Community - Mountain Faith Initiatives.

### DID YOU KNOW....

The magnitude of mental illness in this country is staggering. A recent study by the Substance Abuse and Mental Health Services Administration (a public health agency within the Department of Health and Human Services) confirms reports that **one in five adults in the US live with a mental illness**, with people ages 18 to 25 having the highest rates. **These illnesses of the brain affect all of us**, regardless of age, gender, economic status or ethnicity.

Mental illness affects the mind, body and the spirit. **It is a real, common and treatable illness.** Mental illnesses are far more common than cancer, diabetes, heart disease or arthritis.

**Our faith communities can be an important part of the recovery process** through education, support and by helping individuals and families feel part of a caring community.

### What You Can Do:

- Look for community events to highlight mental health issues.
- Educate yourself and your faith community about mental illness.
- Help your faith community become a caring congregation for persons living with a mental illness and those who love and care about them.
- VISIT THESE WEBSITES FOR RESOURCES AND INFORMATION:

National Alliance on Mental Illness [www.nami.org](http://www.nami.org)

NAMI Four Seasons [www.namifourseasons.org](http://www.namifourseasons.org)

NAMI Faith Net [www.nami.org/namifaithnet](http://www.nami.org/namifaithnet)

Mental Health Ministries [www.MentalHealthMinistries.net](http://www.MentalHealthMinistries.net)

Pathways to Promise [www.Pathways2Promise.org](http://www.Pathways2Promise.org)

One Mind Mental Illness Ministry [www.onemindmentalillnessministry.com](http://www.onemindmentalillnessministry.com)

In the Asheville/Hendersonville Area contact:

Mountain Faith Initiatives at [mountainfaithinitiatives@yahoo.com](mailto:mountainfaithinitiatives@yahoo.com)

**NAMI Four Seasons would like to hear from interested members who would like to bring this initiative to their local congregations.**

## NAMI Four Seasons' Talent Search/Survey

Dear NAMI Four Seasons Member,

Thank you for your continuing support and to new members, welcome. This letter is intended to reach out for your help as we work to keep NAMI Four Seasons doing what it has always been called to do...educate, advocate, support.

We are looking for your hidden talents. Volunteering a little of your time and talents helps to lighten the load, as we have several projects in the works. Please answer the following survey and tell us your talents that others might not know about, self taught, hobbies or careers. E-mail the information to [info@namifourseasons.org](mailto:info@namifourseasons.org) or mail to P.O Box 2108, Hendersonville, NC 28793-2108.

<i>Volunteer Projects</i>	<i>Description</i>	<i>How might your talents, skills assist with this project? Do you have suggestions for this project?</i>
Real Estate	Assist in searching for affordable Office Space	
Event Planner/Coordinator	As needed	
Organizing skills	Coordinating volunteers	
Fund Raising	Ideas	
Writing/ Editing Skills	Monthly newsletter, write a book review, write a personal story	
Saturday Informational Program	Ideas for presentations	
Bookkeeping/Accounting Skills	As needed	
Computer Skills/Media Skills	Are you computer savvy? Do you use Face book? <b>Join Good Search!</b>	
Brochure Distribution	Distribute brochures to various locations	
Website	Content and Links Ideas	
Public Relations	Write news releases	
Telephone Tree	Alert our members to events	
Hobbies	Baking/Photography/Quilting, etc.	
Medical Career – Nurse/Doctor	Committee Representative/Assist with Information Line	
NAMI Faithnet	Help with this initiative in your local church. Call to find out how 1-888-955-6264	

Name(s): \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Best time to contact you? \_\_\_\_\_

### **Education Meeting - Saturday, May 19<sup>th</sup>**

by Adrienne Brady, President NAMI Four Seasons

Julie Huneycutt, mother of a daughter who died from a drug related death, has become very active in our community on issues regarding substance and prescription drug abuse and prevention. Learn about the Mother Bear Community Action Network a national outreach and education support program for families facing mental health and addiction challenges.

The Meeting is open to all those who are suffering from a mental illness as well as their family members/partners and friends. Call 1-888-955-6264 for more information.

### **Task Force Meeting – Monday May 7th**

Meeting will be held at Pardee Education Center at 5:00pm. We will have two police officers who will cover exactly what happens when they are called out to a crisis situation concerning a mentally ill person.

### **Disability Awareness Day – Saturday May 19th**

Blue Ridge Mall, Hendersonville - NAMI Four Seasons will be there to offer information and answer questions and hand out our new brochures.

### **NAMI Family-To-Family Program**

by Adrienne Brady, President NAMI Four Seasons

The Family-to-Family Education Program is a Free 12 session course on mental illness that includes ways to understand the illness and how to help the person who has the illness. It also helps the family overcome the difficulties of living with severe mental illness.

This highly effective and widely praised education course developed by NAMI member Dr. Joyce Burland has been attended by more than 3200 family members across North Carolina. An important aspect of the course is that it is taught by specially trained family members who have “been there”.

**Next class begins: September 10, 2012. *Registration is required.* Please call 1-888-955-6264 for more information.**

#### **The class curriculum includes:**

- Current information about schizophrenia, major depression, bipolar disorder (manic depression), panic disorder, obsessive-compulsive disorder, borderline personality disorder, and co-occurring brain disorders and addictive disorders
- Up-to-date information about medications, side effects, and strategies for medication adherence
- Current research related to the biology of brain disorders and the evidence-based, most effective treatments to promote recovery
- Gaining empathy by understanding the subjective, lived experience of a person with mental illness
- Learning in special workshops for problem solving, listening, and communication techniques
- Acquiring strategies for handling crises and relapse
- Guidance on locating appropriate supports and services within the community
- Information on advocacy initiatives designed to improve and expand services

## REPORTS

**April 3<sup>rd</sup> Board Meeting:** 5:00pm – 7:00pm, Clubhouse, Woodridge Ave, Hendersonville

**Treasurer's Report** – After discussion of property assets, a request was made for everyone to report any whereabouts and possession of NAMI property that must be listed for tax purposes.

**President's Report** – Three NAMI members attended an Interfaith Ministries Open House in March. A very impressive group of 25 organizations were in attendance, such as The Healing Place, Mainstay, and Manna. Our group needs a new rep to attend their monthly meetings. Contact Adrienne for more info. 828-685-8620.

Our new Board member, Kim MacNish completed the Family-to-Family Trainer sessions and is planning to co-facilitate a new Family-to-Family class series to begin in the fall in Henderson County.

A Family Fun Day, scheduled for Dec. 8, needs a NAMI volunteer to work with a planning committee, headed up by the Family Support Network of WNC. This will be our first participation in this event, and is another opportunity to acquaint families with our affiliate.

The next Four Seasons Board meets Tuesday, May 1.

## Protect Your Heart with Yoga

Source—Everyday Health

What do flexibility, stress levels, and a hangover all have in common? They can all be treated by yoga.

Research published in the journal *Medical Hypotheses* looks at the many ways in which yoga can have significant benefits for our brains. The study shows that yoga can be used as a treatment for many stress-related conditions, such as high blood pressure, depression, anxiety, and cardiac disease. Other studies have also shown yoga to help ease chronic back pain, relieve symptoms of menopause, help people sleep, and also improve moods and decrease stress.

“Western and Eastern medicine complement one another and yoga is known to improve stress-related nervous system imbalances,” said Chris Streeter, MD, an associate professor of psychiatry at Boston University School of Medicine and Boston Medical Center who worked on the study. “This paper provides a theory, based on neurophysiology and neuroanatomy, to understand how yoga helps patients feel better by relieving symptoms in many common disorders.”

Researchers from Boston University School of Medicine, New York Medical College, and the Columbia College of Physicians and Surgeons believe that stress-related conditions result in chemical imbalances in the brain, which include the low activity of the gamma amino-butyric acid (GABA).

Researchers explained that low GABA activity is connected to illnesses such as epilepsy, chronic pain, depression, anxiety, and post-traumatic stress disorder.

The researchers believe that doing yoga will increase GABA activity, “resulting in amelioration of disease symptoms.

“This has far-reaching implications for the integration of yoga-based practices in the treatment of a broad array of disorders exacerbated by stress,” they report.

Another study published recently in *The Journal of Behavioral Health Services and Research* looked at secondary school students and reported that yoga appeared to help them control and prevent feelings of anger and fatigue. Researchers in this study commented that yoga has “the potential of playing a protective or preventive role in maintaining mental health.”

### **Mental illness and the media: Are we making progress?**

Source: Magpie Media - July 1, 2011

Press isn't all bad. An increasing number of mental health consumers, caregivers, and professionals want their stories told. But it's apparently one step forward, two steps back when it comes to spreading a balanced depiction of mental illness to the general public. Just when sensitivity might have been on the rise, another real-life violent crime by someone with a mental illness makes the news.

Months after he allegedly killed six people and attempted to kill Congresswoman Gabrielle Gifford's in Tucson, Arizona, on January 8, 2011, the exact diagnosis of Jared Lee Loughner (as of press time) remains unknown. Loughner's unremorseful, smiling mug shot took up half the front cover of newspapers across North America, at least one of which cited Fox News host Glenn Beck as branding Loughner “not just a nut job, but a left-wing nut job.” That's not the greatest vocabulary to be using, whether the perpetrator is mentally ill or not.

In this age of political correctness, the media uses more respectful terms to describe people of varying ethnic backgrounds, women, homosexuals, and the mentally handicapped even if they have committed a violent crime. Might those with a mental illness, too, merit a less judgmental vocabulary?

“It's an emotionally loaded area,” says Gordon Paul, PhD, a Cullen Distinguished Professor of Psychology at the University of Houston in Texas, “particularly when you see things like the tragedy in Arizona now. People are coming out of the woods wanting to put a label of schizophrenia on the shooter and use that as an explanation of the bad things he did.”

Imbalanced or inaccurate portrayals of people with a mental illness affect the innocent among them—who make up the vast majority. From children's cartoons to blockbuster films, the entertainment industry has for decades featured “crazy” people as disheveled types, violent seductresses, mad scientists, comic relief, or helpless and depressed females and other stereotypes. Sadly, people with mental illness are among the readers and viewers of these depictions and they are well aware of the stereotypes.

Studies have found a definite connection between negative portrayals of mental illness and how the public treats those with mental illness.

### **Truth and lies**

The piece of truth that's lacking in media portrayals is this: Mental illness is much more common than people think, and violent acts by people with mental illness are very rare. It has long been proven that mental illness by itself is a poor predictor of violence, ranking well below other factors including drug and alcohol use, history of violence, or poverty.

“Ninety percent of the time, based on what I've read, the media's portrayal of a person with schizophrenia is that we need to be very suspect: You need to be careful and make sure they are taking their medication—they have a broken brain,” says Chris Summerville, chief executive officer of the Schizophrenia Society of Canada. “And the media will offer out one of these rare occurrences ... granted, President William McKinley was killed

by someone with psychosis and John Lennon was killed by someone with psychosis.”

Those cases are tragic. They are true. Yet they still only represent a fraction of the mentally ill population, most of whom never commit a violent act, Summerville says. If most of the people with a mental illness were violent, we’d know it.

“One in 100 people in Canada has schizophrenia,” Summerville continues. “Out of 33 million, that’s 330,000 people. If all those myths and misperceptions were true, our whole country would be taken over, like by aliens from outer space.”

Instead, he says, we are three times more likely to be struck by lightning than by someone with schizophrenia. Just as TV and magazines regularly showcase people diagnosed with cancer living active lives—and not necessarily dying in palliative care—Summerville would like the mass media to depict mental illness in a more balanced way.

“Do they ever interview someone with schizophrenia who’s doing well? I don’t think I’ve ever seen that.”

### **Progress in the information age?**

An article in the New Republic about the Loughner case, published on January 10, 2011, presented the assailant as disturbed and possibly a product of a faulty mental health system. Journalist Jonathan Cohn wrote that mental health is probably the most neglected in the U.S.

“The stigma around mental illness isn’t what it once was, but it still exists,” Cohn wrote, citing the National Alliance on Mental Illness (NAMI) as saying many case managers have nearly 100 clients and don’t do anything for them until an emergency arises. “It should go without saying that most mentally ill people are not violent—and that those who are violent might not be if they received appropriate treatment. But too often they don’t get it. And that’s when tragedies occur.”

The article concludes with a rhetorical question: “Would a better health care system have averted the massacre in Arizona?”

Gordon Paul has been interviewed numerous times about mental illness throughout the years and has noticed a shift. “Certainly reporters, when I talk to them, are much more educated these days than they were 10 or 15 years ago,” he says.

In recent years, Canada’s Globe and Mail has featured several articles on mental illness. Topics have included early intervention among teens; peer support groups; depression and rage among caregivers; loneliness in the psych ward and the importance of family visits; and the problem of “freedom to be sick” laws that prevent people from getting treatment. A week-long series in the summer of 2008 talked about the fact that 70 percent of people with severe mental illness (in Canada) are working despite their illness; how one-third of general hospital beds are filled with mentally ill patients; how Canadian jails and penitentiaries have become a place to warehouse the mentally ill; and the vicious circle of mental illness and addiction.

As horrible as the Loughner story is, it has generated a flurry of high profile, healthy discussion. On CNN’s State of the Union on January 16, practicing psychologist Fred Frese—who also has schizophrenia—told the TV audience: “You have happy drunks, you have sad drunks, and you have mean drunks. It’s the same with us. Fortunately, I happen to be a happy psychotic. But some of my ‘brothers and sisters’ are quite sad, and some—



when they become symptomatic— engage in behaviors that can be quite threatening.”

He spoke with compassion about the shootings in Tucson, saying it was unacceptable that Loughner went untreated to the point where he snapped to such a violent degree. “We, the mental health community, cannot abandon these folks anymore. We’ve got to establish relationships, keep up with them. If we start taking care of psychotic folks we won’t have disasters like this.”

Roxanna Green, heartbroken mother of nine-year-old Christina-Taylor Green, who Loughner is accused of killing, said in an interview that she wanted the killer behind bars. Surprisingly, though, only days after the shooting, she also sounded surprisingly understanding when she said, “People out there that have a problem just have to find a different way to deal with it. There’s a lot of people who are mentally ill out there and there’s a lot of warning signs, and I hope we can learn from this.”

As the public becomes better informed about mental illness, the people affected by it increasingly want to “come out” and share their stories. They tell them in books, for instance, such as Susan Inman’s *After Her Brain Broke: Helping My Daughter Recover Her Sanity*, (Bridgeross Communications, 2010); and Claire Berman and Ken Steele’s *The Day the Voices Stopped: A Schizophrenic’s Journey from Madness to Hope* (Barnes & Noble, 2001). It also doesn’t hurt when celebrities make the news. We all know about Brooke

Shields’ postpartum depression and Britney Spears’ stints in the psychiatric health care system. But probably the biggest new influencer on public perception is the Internet. A quick You Tube search brings up scenes from *A Beautiful Mind*, the award-winning film about mathematician John Nash who was diagnosed with schizophrenia.

By its very nature, the Internet presents—if not necessarily a balanced view—a limitless view. Alongside the You Tube video, the curious viewer can select many more video clips—more from the same movie or from *A Brilliant Madness*, a documentary featuring interviews with the real John Nash, or from other clips about schizophrenia unrelated to John Nash. Viewers are also privy to comments that random viewers have posted, which range from insightful to insulting but, regardless, present a multitude of viewpoints.

The Internet also gets the message of mental illness out in a more organized way, such as CAMH’s Transforming Lives campaign ([transforminglives.ca](http://transforminglives.ca)), where people “come out” and tell their stories of recovery.

As Kismet Baun said on behalf of the Canadian Mental Health Association to the *Globe and Mail* in 2008, “If media exposure brings mental illness out into the mainstream and makes it less taboo, then we’re all for it.”

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Information Line Available M-F 8:30-5:00

Visit us online: [www.namifourseasons.org](http://www.namifourseasons.org)

*NAMI Four Seasons is a two county affiliate and grassroots organization. Our mission is to provide support, education and advocacy for families affected by mental illness in our local communities. Membership consists primarily of family members, friends of people who have mental illnesses, and mental health professionals. We are a 501C3 organization and rely on memberships, donations, and grants.*