



# NAMI Frederick

National Alliance on Mental Illness

Find Help. Find Hope.



December 2013

NAMI Frederick Friends,

*Where are we personally – this December 2013?* I hope we find ourselves anticipating enjoyable holiday times. And I hope that Thanksgiving set the stage for an enjoyable time with family and friends.

*And where is NAMI Frederick County?* We continue our community service of “helping individuals and families affected by mental illness.” We offer a diverse set of programs – noted here and described elsewhere in this newsletter. Additional program information is always available on our website at [www.namifcmd.org](http://www.namifcmd.org). You may also email inquiries to [info@namifcmd.org](mailto:info@namifcmd.org) or call our the NAMI Frederick Helpline at **240-379-6186**.

We have just finished our fall program of Family-to-Family education classes, sustaining many families with this series of twelve classes. Led by trained instructors, detailed information and techniques for understanding and dealing with a loved one’s mental illness are presented and discussed. We are now in the midst of planning the spring program of classes to begin early in 2014. Please let us know of your possible interest by emailing [F2F@namifcmd.org](mailto:F2F@namifcmd.org) or by calling our NAMI Frederick Helpline.

We continue with our Family and Friends Support Groups on the first Thursday and third Wednesday evenings of each month. These are ever so helpful forums for families in crisis and for those who might offer their personal experience in support of others. Please check our website calendar for specifics.

This spring we will offer two Community Education Lectures by experts in their fields: The first entitled “Bipolar Disorder and Severe Irritability in Children and Youth” and the second, “Supported Employment for Adults with Mental Illness”. Read more detailed information about these upcoming events in this newsletter.

Our NAMI mission continues with other programs such as hospital visits to FMH’s Behavioral Health Unit, responding to inquiries on our telephone helpline, maintaining our website, telling others about NAMI in various public forums, participating in our major fundraiser NAMIWalks, and publishing this newsletter!

We **thank you** for being a part of the National Alliance on Mental Illness in Frederick County. And please do note that all these activities rely on volunteer assistance in order to make them available - at no cost! What might **you** like to do? NAMI offers free training for class teachers, support group facilitators, and other positions. Please let us know how you are able to help by calling or emailing today! We try to advertise all our programs in a timely way on our website’s calendar and via email to Frederick County NAMI members and friends. If you are interested in volunteer opportunities or would like to be included our email and mailing distribution list, please let us know by emailing [info@namifcmd.org](mailto:info@namifcmd.org) or by calling **240-379-6186**.

Take care, and do well!

*Gerry Blessing*

Gerry Blessing  
NAMI F.C. Board President



## Did you know...

- Mental illnesses are biologically based brain disorders.
- Mental illness is more common than cancer, diabetes, or heart disease.

NAMI Connection is a recovery support group program for adults living with mental illness that is expanding in communities throughout the country. These groups provide a place that offers respect, understanding, encouragement, and hope. NAMI Connection groups offer a casual and relaxed approach to sharing the challenges and successes of coping with mental illness. Each group:

**Is offered free of charge**

**Follows a flexible structure without an educational format**

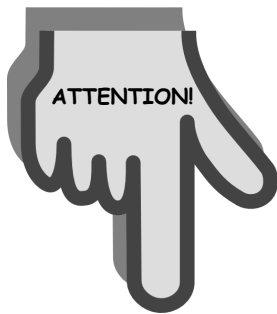
**Does not recommend or endorse any medications or other medical therapies**

All groups are **confidential** - participants can share as much or as little personal information as they wish.

Our local Connection group resumed monthly meetings in August and September, but has been unable to continue due to the lack of available facilitators (two facilitators are required for each meeting). We hope to start again after the holidays, but we need more volunteer facilitators to go through the required NAMI training (two days in the Baltimore, Columbia or Rockville areas). For more information, please email [supportgroups@namifcmd.org](mailto:supportgroups@namifcmd.org).

### **Can Fish Oil Reduce Psychotic Disorders?**

In the February 2010 issue of *Archives of General Psychiatry*, an article discussed a European study which found that Omega-3 fatty acids greatly reduced the number of young adults who developed psychosis. The clinical trial looked at young people who were teetering on the brink of psychosis and concluded that the subjects who took fish oil capsules (rich in omega-3 fatty acids) greatly reduced their risk of developing a psychotic disorder. Although only 81 subjects participated in the study, the results were very promising. Additionally, some researchers believe that taking Omega-3 could possibly prevent young children with a predisposition for psychotic disorders from ever developing the illness. Further research is being conducted.  
[www.ncbi.nlm.nih.gov/pubmed/20124114](http://www.ncbi.nlm.nih.gov/pubmed/20124114)



**We are no longer putting membership expiration dates on the address labels, but we will continue to mail out membership renewal reminder postcards.**

### **There are Two Ways to Join NAMI or Renew Your Membership**

1. Join online at [www.namifcmd.org](http://www.namifcmd.org) and pay with a credit card.
2. Mail a check to NAMI of Frederick County, 4 **East Church Street, Frederick, MD 21701.** Please include this form.

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

\_\_\_\_\_ Individual/Business Membership \$35.00

\_\_\_\_\_ Limited Income Membership \$3.00

# Common Mental Illnesses at a Glance...

**Mood Disorders** — Includes all types of depression including *Major Depression*, *Dysthymic Disorder* & *Bipolar Disorder*. Mood disorders are also known as “affective” disorders.

**Personality Disorders** — Includes *Antisocial Personality Disorder*, *Borderline Personality Disorder*, and *Avoidant Personality Disorder*. Persons with personality disorders have rigid and maladaptive thinking and behaviors.

**Eating Disorders** — Includes *Anorexia Nervosa* (distorted body image, intense fear of gaining weight), *Bulimia Nervosa* (pattern of bingeing & purging-- overly concerned with body shape and weight), and *Binge Eating Disorder* (food addiction, emotional eating).

**ADHD** — *Attention Deficit Hyperactivity Disorder* is one of the most common disorders in children and teens. Symptoms include difficulty focusing, extremely active physically, and difficulty controlling behavior.

**Anxiety Disorders** — Includes *Generalized Anxiety Disorder* (severe worrying about everyday events), *Social Anxiety Disorder* (intense fear of social situations), *Panic Disorder* (feelings of terror, “panic attacks”), *Post-Traumatic Stress Disorder* (PTSD), *Obsessive-Compulsive Disorder* (OCD), and phobias.

**Phobias** — An irrational fear of something. Includes *Specific Phobia* which centers on a particular situation (fear of flying, fear of bridges, etc.) or a particular object (spiders, dogs, etc.) A phobia is categorized as an anxiety disorder.

**PTSD** — *Post-Traumatic Stress Disorder* (PTSD) often occurs after experiencing or witnessing a traumatic personal event such as domestic abuse, natural disaster, rape, auto accident, terrorism, or military combat. Symptoms can include flashbacks, nightmares, being easily startled/scared, and irritability. PTSD is an anxiety disorder.

**OCD** — *Obsessive-Compulsive Disorder* (OCD) involves repetitive, irrational rituals or thoughts (hand washing, arranging items, hoarding, counting, etc.) that seem impossible to control. A person with OCD feels they must engage in their repetitive behavior or else something bad will happen to them or a loved one. OCD is an anxiety disorder.

**Schizophrenia** — *Schizophrenia* is a psychotic disorder that interferes with a person’s ability to think clearly, relate to others and manage emotions. Symptoms can include a distorted sense of reality, delusions (false beliefs), visual hallucinations (seeing things that are not real), auditory hallucinations (hearing voices), disorganized speech (inability to generate a logical sequence of ideas), and severe anxiety or fearfulness.

**Bipolar Disorder** — *Bipolar Disorder* is a mood disorder that causes dramatic shifts in mood, energy and the ability to think clearly. Generally a person experiences extreme highs and lows, alternating between episodes of *mania* (surges of energy, euphoria, increased talkativeness, pleasure-seeking and/or risky behavior, racing thoughts, decreased amount of sleep), and *depression* (extreme sadness, loss of interest in activities, loss of appetite, feeling hopeless, suicidal thoughts). Severity of mania and depression varies from person to person, and can last one day or several months. A person who experiences a severe bipolar episode often has psychotic symptoms such as delusions and/or hallucinations.

**Autism Spectrum Disorders** — *Autism Spectrum Disorders* are defined by a set of behaviors that can range from mild to severe. Symptoms can include impaired social interaction, difficulty interpreting facial expressions and tone of voice, unusual interest in a specific activity, and lack of eye contact. Also known as *Pervasive Developmental Disorders*, the autism spectrum disorders are *Autism* (most debilitating), *Asperger Syndrome* (milder symptoms), and *Childhood Disintegrative Disorder* (more dramatic loss of motor, social & language skills). The most severe cases of autism spectrum disorders are marked by extremely repetitive movements or self-injurious behaviors.

*Life’s greatest disappointments cannot break us if we lead with love.*

-Connie Schultz

# Thankful

By Susan T. Holt

Now that I've completed four years of night school, I find myself back on the NAMI Frederick County Board of Directors. I snuck my way in to the board, cleverly expressing three purported reasons for my return. First, I sneakily told them I belonged there because of my dual diagnosis, schizoaffective disorder and eating disorder, established when I was 18. Second, I cleverly described to them my feeling them to be a *sangha*, a group of like-minded individuals with whom I shared beliefs and experiences. Finally, I deceptively explained to them that this was an ongoing opportunity to serve the greater good and grow my skills and talents in a forward-moving community that achieves good works in my town of residence. Whoops! All of those reasons were completely legitimate. Maybe they did the right thing voting me on the Board the night of November 14, after all.

Looking back, I wish NAMI had been present where I grew up in New York, so that my parents had had such a supportive organization to turn to when I began to fall apart at 16. It would have helped them to have someone who could supply resources, education, and support. They perhaps would have felt sustained by the organization's many forms of advocacy. They might even have become involved; it's a possibility. A sangha would have done my family good.

Amazingly, NAMI has brought families of the mentally ill together, resulting in families supporting other families, much to their benefit. Indeed, NAMI has done more, bringing mental illness into the open, and it makes

those involved feel less alone. This is true for the individual with mental illness as well as the family. All can share information, and learning about mental illness and treatments is invaluable. Knowledge and wisdom are very practical commodities. Support groups are invaluable for anyone who is suffering. Again, that includes the individuals and also the families. Finally, social and political advocacy can change lives too. I point out the parity thrust initiated by President Obama in November 2013. As someone who has paid out of pocket for all levels of psychotherapy for the last 20 years (knock on wood I can keep this up), that is an amazing governmental shift. Additionally, gentle ripples will inevitably carry all these good works farther and even farther as people start to realize the Frederick affiliate is not giving up on the mentally ill, and neither is NAMI Maryland or NAMI National.

I am grateful to stalwart NAMI for being there for me. I enjoy attending and contributing to meetings, sharing thoughts through writing, and working on the affiliate website. I am deeply appreciative of the friends I've made through the resulting relationships, and they have since proved to be long-term associations. Friends made in my first stint on the board four years ago are still very dear to me. The great thing is that they and my more recent acquaintances accept Susan H. with her diagnosis. Respect her, even I, feeling respected, pass that along to others with the illness.

NAMI brings us together to serve, and those who are supported often find opportunities to give back as well. As a result, I would say that efforts in the name of NAMI, though the organization is not perfect, are a worthwhile endeavor. Working with NAMI, more people accomplish more good in supporting those with mental illness and their families than they could on their own. For that I am thankful.



## Did you know...

- One in four adults—approximately 61.5 million Americans—experiences mental illness in a given year.
- Although military members comprise less than 1% of the U.S. population, veterans represent 20% of suicides nationally.



NAMI Frederick County is an all-volunteer affiliate with no paid staff ~ just volunteers. Are you interested in facilitating a support group? Teaching *Family-to-Family*? How about serving on our Board of Directors? Maybe you'd like to be a NAMI volunteer at FMH? Or how about getting your co-workers together and form a walk team for our annual *NAMI-Walks* fundraiser in May? If you can spare a little time, we'll find a volunteer spot you feel comfortable doing. We'd love your help, whatever you can do! If you are interested in volunteering, please contact Gerry Blessing at [gerry.blessing@namifcmd.org](mailto:gerry.blessing@namifcmd.org)

**Just Hold My Hand**  
by Kevin Coyle

My world you cannot know  
The things I hear  
The things I see  
But your love I can feel

Just hold my hand  
Be with me  
Through the night and the day

I know you grieve  
To see me this way  
Trapped in this prison  
This affliction of mind  
But with you by my side  
I can make it through once more

## NAMI Invited to FCC

It is nice when NAMI is invited to share its message with others in the Frederick community. Barbara Angleberger, Assistant Professor of Psychology at the Frederick Community College, made this happen twice this year. Both NAMI and the Way Station — including client representation — were invited to her spring and fall semester Abnormal Psychology classes at FCC. We shared our stories, from both a personal and a professional perspective. The classes found the clients' personal life stories especially absorbing as they related to their struggles, successes, and hopes for the future.

Ms. Angleberger offered feedback from her students, future social workers and psychologists. She stated that the students felt these presentations were one of the highlights of their semester. She would like for us to return again in 2014. We in the NAMI Frederick community very much appreciate these opportunities to communicate with future workers in the field of mental illness.



### Did you know...

Twice as many people live with schizophrenia than HIV/AIDS, yet most people know very little about the disease. Schizophrenia affects approximately 2.5 million Americans.



**Wishing everyone a  
healthy and happy  
holiday season!**



### GUARD OF THE UNIVERSE

by Carolyn Young

When everything seems to be out of whack  
And I know that Satan is on the attack  
Or when the unexpected catches me off guard  
And life is getting a little too hard  
All I have to do is pray  
And the Guard of the Universe will show me the way.

When the river of life starts flowing too fast  
And feelings start creeping up of from my past  
Or when a chapter in my life has a never-ending page  
And all I want to do is break out in a rage  
All I have to do is pray  
And the Guard of the Universe will show me the way.

When the road in my life starts twisting and turning  
And I don't know what I need to be learning  
Or when the walls I've put up start to crumble and fall  
And I don't know what to do with it all  
All I have to do is pray  
And the Guard of the Universe will show me the way.

# Family Psychoeducation

Family Psychoeducation is a method based on clinical findings for training families, other care givers, and friends who are supportive of persons with mental illness to work together with mental health providers as part of an overall clinical treatment plan for their family members. This recovery focused group combines clear and accurate information about mental illness with training in problem solving, communication skills, coping skills and developing social supports. Family Psychoeducation has been shown to improve patient outcomes for persons with schizophrenia, bi-polar disorder, and other major mental illnesses.

According to the State of Connecticut Department of Mental Health and Addiction Services, the benefits of the Psychoeducation Group for families include enhanced coping skills, greater knowledge and insight into the disorder(s), reduced stress, conflict, isolation and loneliness, satisfaction with support and reduced medical illness, substance use or co-occurring disorders in themselves. Consumers benefit by large reductions in inpatient or residential admissions, more energy and motivation, better family relationships and support, more time spent working or successfully completing schooling and reduced dependence on drugs and alcohol.

According to the Encyclopedia of Mental Disorders, a large body of evidence supports the use of Family Psychoeducation as a "best practice" for

young adults with schizophrenia and their families. Research studies have shown reduced rates of relapse and lower rates of hospitalization among consumers and families involved in these programs. Other outcomes included increased rates of patient participation in vocational rehabilitation programs and employment, decreased costs of care, and improved well-being of family members.

Education is one of the four essential components of Family Psychoeducation, along with joining, problem-solving, and social network expansion. The first step is to participate in three joining sessions to make sure people fit the criteria for the group. The second step is the Family Psychoeducation Workshop which consists of an introduction to the Psychoeducation Group, Bipolar Disorder, and Schizophrenia. In the third step clients and/or their family members attend a Family Psychoeducation Group and receive support. In Frederick, The Family Psychoeducation Group meets on the 1st and 3rd Tuesday of the month. Additionally, BHP partners with the Way Station program called the Healthy Transition Initiative (HTI). The Way Station's HTI Team utilizes the principles and practices of the Transition to Independence Process and works with the Supported Employment Team. HTI serves individuals ages 16 to 25 with mental health needs or emotional disturbance. For HTI program information, please contact Katie Miller LGSW, Frederick and Washington County Program Manager, at 301-667-0633.

*"My favorite parts of the Family Psychoeducation Group are the style of the group, the non-judgmental and supportive atmosphere, and the productivity of the problem-solving process. In my experience, clients and their family members provide open and honest feedback when discussing problems, goals, and solutions."* -Kim Woodard

If you have questions about the Family Psychoeducation Groups, please contact the group leader Bill Clare, LCSW-C at 301-663-8263.



## Did you know...

- Mental illnesses are medical conditions.
- Just like diabetes is a chemical imbalance of the pancreas-- a mental illness is a chemical imbalance of the brain.

*"Life isn't about waiting for the storm to pass. It's about learning to dance in the rain."* -Leonard Cohen



## A Good Lesson for Everyone

While leading a seminar on stress management, the presenter walked confidently around the room with a raised glass of water. Everyone knew she was going to ask the question, 'Half empty or half full?' But she fooled them all.

*"How heavy is this glass of water?" she inquired with a smile. People called out answers ranging from 8 ounces to 2 pounds. "The absolute weight doesn't matter," she replied. "What matters is how long I hold the glass. If I hold it for a minute, that's not a problem. If I hold it for an hour, I'll have an ache in my arm. And if I hold it for an entire day, you'll probably have to call an ambulance for me. The weight is the same in each case, but the longer I hold the glass, the heavier it becomes." She continued, "That's the way it is with stress. If we carry our burdens all the time, sooner or later, as the burden becomes increasingly heavy, we won't be able to carry on."*

She then set the glass of water down on a table and just stood there. The room was very quiet. After a minute, she picked up the glass again and said, *"Just like the glass of water, you need to set your stress down for a while and rest before holding it again. When we're refreshed, we can carry on with the burden—holding stress longer and better each time practiced."* She finished by saying, *"So tonight, as early in the evening as you can, I encourage you to set down all of your burdens. Don't carry them through the evening and into the night. You can always pick them up again tomorrow if you need to."*

Contributed by Jane Kohlheyer  
NAMI Frederick Member

## SPRING COMMUNITY EDUCATION MEETINGS

### *Understanding Bipolar Disorder and Severe Irritability in Children & Youth*

Presentation by Dr. Kenneth Towbin, of the NIMH  
(National Institute of Mental Health)

- Common signs and symptoms of severe irritability in youth
- What parents can do to help a child who is struggling with irritability (severe temper tantrums and rages) and "hyper" behavior (distractible, hyperactive, trouble sleeping)
- Understanding treatment options
- Current research in pediatric psychiatry conducted at NIMH

**Tuesday March 18, 2014**

**Frederick YMCA – 1000 North Market Street  
7:00- 8:30 pm**

Dr. Towbin, M.D. is the Chief of Clinical Child and Adolescent Psychiatry in the Mood and Anxiety Disorders Program, the Intramural Research Program at NIMH. Dr. Towbin has extensive and diverse experience in child and adolescent psychiatry.

### *Evidence Based Practices in Supported Employment*

**Tuesday, April 15, 2014**

**Frederick YMCA – 1000 North Market Street  
7:00-8:30 pm**

NAMI Frederick County is pleased to offer these community education programs free of charge to our community. For more information, contact Linda Coyle at [lkcoyle@yahoo.com](mailto:lkcoyle@yahoo.com).



### **Did you know...**

- Approximately 20% of state prisoners and 21% of local jail prisoners have a mental health condition.
- Youth in juvenile justice systems: 70% have a mental health condition, 20% live with severe mental illness.
- Approximately 72% of homeless adults staying in shelters live with a mental illness.

# ***Family Support Groups***

**1<sup>st</sup> Thursday of Each Month**

**7:00-8:30 pm**

**Good Shepherd Lutheran Church  
1415 West 7<sup>th</sup> Street  
Frederick, MD**

**&**

**3<sup>rd</sup> Wednesday of Each Month**

**6:30-8:00 pm**

**All Saints Episcopal Church  
106 West Church Street  
Frederick, MD**

All NAMI support groups are free of charge.  
For more info email: [supportgroups@namifcmd.org](mailto:supportgroups@namifcmd.org)  
or check our website: [www.namifcmd.org](http://www.namifcmd.org)



**www.namifcmd.org**