



NAMI-Blue Ridge Family Alliance News September 2003

Upcoming Meetings

Informal Support Group Meetings:

5:30pm – 6:30pm on First Thursdays
September 4, October 2, and November 6

Speaker Meetings:

5:30pm – 7:00pm on Third Thursdays

September 18: Blue Ridge Clubhouse

Evadne Deeds, Director of Blue Ridge House, will describe the clubhouse programs and tell us how the Friends of Blue Ridge House give valuable support to the clubhouse staff and clients.

October 16: Region Ten Services

John Pezzoli, Director of Behavioral Health Services at Region Ten CSB, will give details on the restructuring of Region Ten, along with an overview of the agency's services to the mentally ill population of the area.

November 20: New Medications

Dr. Ken Brasfield, an expert in psychopharmacology who is a consultant to Western State Hospital, will give us important information about the new medications.

**All meetings are held in the Board Room of the
Region Ten Building, 800 Preston Avenue.
Visitors are welcome.**

**Congratulations and thanks to BRFA
member Margaret Grove, who was named
Junior League "sustainer of the year."
Because of this honor, she was awarded
\$250 for NAMI-Blue Ridge Family Alliance.**

**National Depression Screening Day
Thursday, October 9, 2003**

**Watch for announcements
in your local newspapers.**

President's Message

By the time you receive this newsletter, it will be close to the first of September, which more or less signals the end of the summer. The UVA students have returned, and the back to school frenzy has begun all over Charlottesville. NAMI-Blue Ridge Family Alliance is also once again ready for a year full of support, education, and advocacy for better mental health services for those in need. We meet, as always, each first and third Thursday of the month. The first Thursday of the month is the support meeting—a gathering of families helping families coping with serious mental health issues—and the third Thursday of the month features an invited speaker who fuels us with the education we need to help us understand those issues. If you cannot come to the meetings and are in need of advice and help, please call the local NAMI-Blue Ridge Family Alliance phone number (434-970-1257) and leave a message. Your call will be returned as soon as possible.

An article recently appeared in the Richmond Times Dispatch, and I thought it would interest you. It reports that the Justice Department has closed its investigation of Western State Hospital, ending a 13-year probe into Western State and the four other Virginia institutions for the mentally ill or retarded. Governor Warner has been notified that the state has made "significant improvements over the years in the service it provides" at Western State, yet he is cautioned, "not to scrimp on money to hire and train hospital staff." Investigations at the other four state institutions— Central State Hospital in Dinwiddie Co., Eastern State Hospital in Williamsburg, Northern Virginia Training Center in Fairfax County, and Northern Virginia Mental Health Institute in Falls Church— have also been closed with the stipulation that improvements in patient care will continue.

In 1999, Western State was found to be "chronically understaffed and chaotic," but a panel of experts has recently found major improvements in psychiatric, psychological, and nursing services at the hospital, prompting Governor Warner to announce that "we are proud of the behavioral health care service provided by Virginia's publicly funded facilities." Val Marsh, Executive Director of NAMI-VA, stressed her concern, though, as Western State downsizes its number of beds and patients are moved from hospital care to community care.

We look forward to seeing you all in September and throughout the coming year.

All Best - Sally Rinehart

NAMI-Blue Ridge Family Alliance

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NEWSLETTER

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This newsletter is published quarterly. Persons wishing to contribute an original article are asked to contact the editor at (434) 589-2885.

WORLD WIDE WEB

(Monticello Avenue site)
<http://avenue.org/brfa>

(Charlottesville Community Calendar - Family Alliance meetings information)
www.chvillecalendar.com

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The 2003 NAMI Annual Convention June 28 – July 1

By Jean Scanlon

The national meeting in Minneapolis had a reported attendance of 2,500. As expected, top physicians in the mental health arena delivered encouraging talks on the latest medical progress in the areas of medicine, brain imaging, genetics, chemical and hormonal disturbances, cellular and molecular transference of information, and the electrical circuitry of the brain.

On an up-beat note, there were speakers who have overcome mental illness, including Miss Arizona in the Miss America contest, who is now entering law school, and a superstar who has recovered.

Presentations concerning the needs of the mentally ill were given by judges, lawyers, policemen, and prison and hospital administrators, who are all coping with street people, half of whom are mentally ill.

Key politicians were present at the banquet, and, fortunately for me, the head of the European Alliance for the Mentally Ill was seated at my table. He said that there are 27 countries in their alliance. With this kind of international cooperation, major advances in the treatment of mental illnesses are certainly bound to occur.

Next year's annual convention will be in Washington DC. That city will be much more accessible to us, and no doubt more of us can plan to attend. I have to say that I came home really enthused at the growth that has occurred since I last attended a national convention ten years ago. As we say here in Virginia, "come-on, go with us" next year.

Medication News

The FDA has granted approval to Novartis to market Clozaril for the treatment of recurrent suicidal behavior in individuals with schizophrenia or schizoaffective disorder. This is the first time any medication has been approved for use in treating suicidal behavior.

A tribute to Caitlin Wright From Val Marsh, NAMI-VA

Dear Friends:

It is my sad duty to report that Caitlin Wright-Binning, deputy director of NAMI-VA from 1995 to 2001, died on Friday, July 25, of cancer. She was 37 years old.

Many of you reading this already know about Caitlin's passing away. It is clear that many people knew how special a person Caitlin was. It was common knowledge that her love, sacrifice and deep compassion helped thousands of consumers and families across Virginia. She helped NAMI-VA accomplish many things. The following is but a meager list:

- 1) She is the primary reason that Gloria Huntley's death at Central State Hospital reached public eyes to become a national scandal.
- 2) Caitlin was a major force in helping transform Virginia's human rights watchdog, the Department for Rights of Virginians with Disabilities, into a more independent agency.
- 3) Caitlin insisted NAMI-VA introduce legislation to help consumers found Not Guilty by Reason of Insanity for minor crimes. Because of her, we now have a law that prevents consumers from serving "life sentences" in state mental hospitals for misdemeanors.
- 4) Caitlin was adamant that Medicaid eligibility for Virginia's consumers was far too harsh.
- 5) Caitlin became THE EXPERT on Programs of Assertive Community Treatment (PACT) in Virginia.
- 6) Caitlin was one of the finest case managers and clinicians I've ever met. She helped thousands of individuals and families get people into the hospital when in crisis, get into decent housing, gain access to medication, have acceptable treatment and discharge plans, and receive treatment instead of jail time.
- 7) She made our state NAMI Helpline among the finest in the nation with her exceptional skills, her ability to teach others, and her absolute dedication.
- 8) She genuinely loved consumers and knew how to communicate with even the most ill among them.

So here's but a small tribute to you, Caitlin. Your infectiously wonderful spirit will remain in many people's hearts.



The Widespread Effects of Depression

Depression is one of the leading causes of disability worldwide. That's the word from the National Institute of Mental Health (NIMH), the component of the federal government that studies mental illnesses.

You probably know depression as a medical condition that primarily affects the brain. Its symptoms include a persistent sad, anxious or "empty" mood, feelings of hopelessness, pessimism and worthlessness, and a loss of interest in hobbies and activities once enjoyed. But according to Dr. Husseini Manji, chief of NIMH's Laboratory of Pathophysiology, the psychological symptoms of depression are just the "tip of the iceberg." Because the brain is the body's "control center," the effects of depression spread throughout the body, often resulting in problems with sleep, appetite, energy level, motivation, and concentration. Performing everyday activities can be an enormous challenge for people who are depressed.

A Devastating Illness

"Depression needs to be recognized as a devastating illness," Dr. Manji explains. "It can occur with other diseases, but it is a very real medical condition in its own right." Research shows that depression increases the risk of death for people of all ages. For those with other illnesses such as type 2 diabetes or infections, depression can make symptoms worse. Elderly people with depression may be at higher risk for Alzheimer's disease, and depression may increase their chance of going into a nursing home.

No one knows better the ravages of depression than the estimated 20 million Americans of every age who suffer from depression. Although women and older people seem to have higher rates of depression, depression can strike anyone at any time. Those who have recently experienced a traumatic event, such as a divorce, job loss or sudden death of a loved one, may be at higher risk.

More Than Stressed Out

Dr. Manji emphasizes that depression is not a character flaw, a lack of willpower or a sign of emotional weakness. "You can't simply wish or will depression away," he says. "A prolonged case of the blues that interferes with normal functioning is usually the result of a chemical imbalance in the brain," he explains. That's why treatment is so important - and the sooner the better. There are a variety of treatments that work, including medications and psychotherapy. NIMH researchers and others are constantly looking at new ways to treat and prevent depression. If you think you may be depressed, seek professional help and learn ways to cope to help you feel better. Don't let depression keep you down.

Symptoms of Depression

Symptoms vary from person to person and vary over time. Not everyone who is depressed has every symptom. Some people have a few, and some have many.

- Persistent sad, anxious or "empty" mood
- Feelings of hopelessness, pessimism
- Feelings of guilt, worthlessness, helplessness
- Loss of interest or pleasure in hobbies and activities that were once enjoyed, including sex
- Decreased energy, fatigue
- Difficulty concentrating, remembering and making decisions
- Insomnia, early-morning awakening, or oversleeping
- Appetite and/or weight loss or overeating and weight gain
- Thoughts of death or suicide, suicide attempts
- Restlessness, irritability
- Persistent physical symptoms that do not respond to treatment, such as headaches, digestive disorders, and chronic pain

Tips for Coping With Depression

Depression can make you feel exhausted, worthless, helpless, and hopeless. Negative thoughts and feelings can make some people feel like giving up. It is important to realize that these negative views are part of the depression and typically do not reflect the actual circumstances. Negative thinking begins to fade as treatment takes effect. In the meantime:

- Break large tasks into small ones, set some priorities, and do what you can.
- Try to be with other people and confide in someone; it is usually better than being alone.
- Participate in activities that make you feel better. Mild exercise, going to a movie, a ball game, or participating in religious, social, or other activities may help.
- Expect your mood to improve gradually. People rarely "snap out of" depression, but they can feel a little better day-to-day.
- Postpone important decisions until the depression has lifted. Before deciding to make a significant decision, such as getting married or changing jobs, discuss it with others who know you well and have a more objective view of your situation.
- Remember, as your depression responds to treatment, positive thinking will replace the negative thinking that is part of the depression.
- Let your family and friends help you.

(July 23, 2003)

A Call for the Overhaul of America's Failing Mental Health Care System

The first presidential commission in a generation has reported the nation's mental health care system as "an unintended conspiracy to keep people disabled," according to Commission Chair Mike Hogan. With resounding agreement from America's advocacy leaders, the report issues goals and recommendations to effect a transformed mental health system.

"They've recognized that we cannot fix the system through incremental change, small tweaks," said Dr. Richard C. Birkel, NAMI executive director. "It really needs a fundamental rebuild. But, that's also the scary part. It is a massive vision; fundamentally different from what we've been doing the past 40 years."

Changes must be implemented at all levels of government and service provision. "This is not a problem that the President can address with the stroke of a pen," Dr. Hogan said. "The federal government has work to do, the states have work to do, and in my opinion there are things that can be done in local communities that don't have to wait for the federal government."

TRIAD, NAMI's Treatment/Recovery Information and Advocacy Database, boldly underscores the reports demand for sweeping system transformation. Surveyed individuals and families living with serious mental illness in America were the source of data for TRIAD's first report, *Shattered Lives*. A baseline depicting the face of mental illness in America, TRIAD reports personal accounts of the frustrations and unnecessary hardships Americans are enduring.

"It's time to hold the public mental health system accountable," said Birkel. "TRIAD was launched to monitor this system in crisis and hold policy-makers and providers, underwritten by our tax dollars, accountable."

In support of the presidential commission's call to action, Birkel said, "Each year forward we need to see progress in people's lives. This is the only way to hold ourselves, local, state and federal governments accountable: progress has to be measured in people's lives."

NAMI Virginia Membership Application Form

I (We) wish to join ____ or renew membership ____:

- | | | |
|--|------|-----|
| ____ Individual/Family | \$35 | |
| ____ Professional | \$35 | |
| ____ Open Door Members (for persons with limited income) | | \$3 |
| ____ Church/Synagogue/Civic Group | \$50 | |

I wish to support NAMI's work to improve the quality of life for people with serious mental illnesses.
I have enclosed my tax-deductible donation of \$_____.

Total dues and contribution: \$_____

Name_____

Address_____ City_____ ST_____ Zip_____

Telephone (optional)_____

Please make checks payable to NAMI-VA and mail to P.O. Box 1903, Richmond, VA 23218.

A portion of your dues will be forwarded to NAMI and to the local affiliate nearest your address.