



# Brain Pages



The Newsletter of NAMI Greater Bloomington Indiana Area

Family and Friends Together Providing Support and a Voice on Mental Illness

Issue No. 5

May 2007



## Calendar of Events

May 3: Depression/Bipolar Support Group (St. Marks Methodist Church, 7pm)

May 7: TLC Support Group Meeting (First United Methodist Church, 7pm)

May 8: NAMI General Meeting (Monroe Library, 7pm)

May 10: Schizophrenia Anonymous (Fairview Methodist Church, 7pm)

May 17: Depression/Bipolar Support Group (St. Marks Methodist Church, 7pm)

May 21: NAMI-GBA Support Group Meeting (First United Methodist Church, 7pm)

May 24: Schizophrenia Anonymous (Fairview Methodist Church, 7pm)

## General Meeting Tuesday, May 8 with Bloomington Police

by Jill Bolte Taylor, Ph.D.

Hello Everyone! It looks like spring has finally arrived! Please place on your calendar our spring meeting on May 8, 2007 at 7pm in Rooms 1B/1C of the Monroe County Public Library.

We have a very special evening planned. Captain Mike Diekhoff and Officer Jim Witmer, from the Bloomington Police Department, will share with us the status, accomplishments, as well as the hopes and dreams of the CIT (Crisis Intervention Team) Training that has been going on for the past two years here in Bloomington. These gentlemen will share with us their personal and professional interests in CIT and what we can do to help promote this ongoing program in our town.

For those of you who may not be familiar with CIT, NAMI National has been promoting this program for more than ten years. It is a program whereby members of law enforcement can better understand how to interact effectively with someone who may be experiencing a different perception of reality. One of the goals of CIT is for officers to determine if an individual is in need of mental health treatment or incarceration. As we all know, it is not illegal to have a brain disorder. Individuals require medical treatment, not imprisonment. Various subjects are included in the training, ranging from legal issues to medical issues. In addition, NAMI family members have been invited to participate in these trainings in order to offer a familial perspective of families in psychiatric crisis.

We would greatly appreciate your attendance at this meeting. It is very important that we show our community support in the ongoing CIT efforts by our police department. I look forward to seeing you on Tuesday, May 8 at 7pm.

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*Brain Pages* is the official newsletter of the NAMI local affiliate in the Greater Bloomington Area.

For information or questions, please contact Kat Domingo, this issue's newsletter editor.

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*NAMI-GBA wishes to thank the Center for Behavioral Health for helping to underwrite this issue of the newsletter.*

# Family Self-Care

by Lee Strickholm

The NAMI Family to Family Education program spends one of its class sessions exploring how having mental illness in the family affects other family members. Parents, siblings, spouses and offspring are each impacted in unique ways, when a family member is ill.

Parents often deal with crisis situations while trying to meet the needs of well family members. They often struggle to find a way to balance responsibilities of work with responsibilities of care. Siblings may struggle to cope with the disproportionate attention given to the sibling who is ill, and they witness disturbing psychotic breaks and personality changes in their brother or sister. Spouses experience the loss of an intimate confidant and co-worker in the home, and frequently take on the dual role of single parent and primary caregiver. Young children are often confused and many experience shame when friends encounter their ill parent. All these families bear the social stigma of having a "strange" family member.

A new independent film, *Canvas*, is a portrait of a family, based on a true story that offers a sensitive, informed, and realistic picture of familial dynamics when managing mental illness. The effects of mental illness on the family members of

those who are psychiatrically diagnosed, are often ignored or misrepresented by the media. This film recreates the director's own experiences as a 10-year-old boy whose mother had schizophrenia. Joe Greco consulted with NAMI and others in the mental health community while writing the script and directing the film. A review of the movie in the current edition of *Schizophrenia Digest* says that "its knowledge and sympathy are rare qualities in a genre that all too often chooses exploitation over the facts." Watch for an announcement of future Bloomington showings by the Ryder film series.

Attending a Support Group is a positive action that can help families lead more balanced lives. For information about local support groups contact Lee Strickholm, 812-339-5440 or leestrick@aol.com.



# San Diego 2007: A Glimpse of Workshop Offerings

*This year, NAMI's National Convention will be in San Diego, CA, from June 20-24. Below are descriptions of several workshops which we hope will tempt you into joining us for an educational weekend!*

## *Neuroscience Perspectives on Recovery*

Within limits, the brain is an organ that to a remarkable—and very practical degree—shapes and reshapes itself as we live, learn, and behave. A substantial literature supports this assertion. Consequences for recovery from mental illnesses such as schizophrenia, bipolar disorders, anxiety, and major depression are profound and will be pursued in this workshop. Materials covered will include appropriate background information and state-of-the-art ongoing research, but will always be presented in a manner geared to the education layperson.

## *Evidence-based Practices for Children*

We now know a lot about effective treatments for many early-onset mental illnesses. Yet, these interventions often fail to reach those children and families who need them most. The failure to use effective treatment interventions outside of academic and research centers has widened the gap between what we know works and what is done in clinical practice. NAMI is working to close that gap by educating and information about evidence-based practices (EBPs) in children's mental health because we know that educated and informed families are in the best position to advocate for the most effective and appropriate interventions for their child.

## *NAMI'S Support Group Initiative*

NAMI's recovery support group initiative is a large scale, comprehensive, multi-dimensional effort to bring facilitator training and support group development and implementation to NAMIs across the country. Participants will be introduced to the regional and headquarters-based staff charged with program roll-out, hear from trained facilitators about the benefits

they've obtained, and have an opportunity to ask questions about this ground-breaking undertaking.

## *Mental Illness and the Arts*

This symposium will address artistic expression and its ability to act as a vehicle for helping people with mental illnesses improve self-esteem, come to terms with the symptoms of their illness, take control of their lives, debunk negative stereotypes, and enrich all our lives.

## *Quality Care for Racial/Ethnic Communities*

Racial and ethnic communities in the United States experience significant challenges accessing and receiving quality mental health care. This symposium will explore ways to improve the quality of care for multicultural populations. Particular attention will be given to workforce issues, public education, meaningful involvement of consumers and families, and best practices in service delivery for multicultural populations

## *Employment*

For many consumers, getting and keeping a job is central to the recovery process. However, current estimates hold that as many as 85% of Americans living with serious mental illnesses are unemployed. This symposium will examine current research on effective interventions that promote successful vocational outcomes, including supported employment and access to ongoing supports and services that enhance long-term job retention. This symposium will also examine current efforts at the Social Security Administration to address disincentives in income support and health care programs that too often penalize consumers who have earnings above eligibility restrictions.

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# Book Review:

## *A Street is Not a Home*

by Al Strickholm

This book by Robert Coates, a judge in San Diego, discusses the homeless problem in America. Judge Coates dealt daily with the homeless who appeared in court for often trivial offenses - which mostly offended those who were disturbed by the homeless appearing in their backyards.

The invent of psychotropic medicines promoted the closings of our US mental hospitals and patient's care was transferred to community based Mental Health Centers. Instead of transferring the money saved from these hospital closings to designated Centers, funds were drastically reduced.

This ultimately resulted in inadequate care for the mentally ill. Many of these folks had a difficult time coping with a new bureaucratic system, and ended up as street people. By 1980, homelessness on our streets had become a major crisis throughout the nation, which was compounded by the Social Security welfare reforms of 1980 to 1982. A further contribution to the homeless situation was the reduction of funds for HUD, which was involved in creating affordable housing. With time, the net result was that with no change in minimum wage, and fewer affordable housing units,

the housing market became unaffordable for many, even those on disability.

Judge Coates discusses the whole array of the homeless categories. In particular, the book has an extensive discussion on the problems of the mentally ill, who comprise almost 50% of the street homeless. A good fraction of homeless are women, often with children, who face the additional problems of assault and rape. Having faced these problems in the courtroom, Judge Coates discusses efforts to energize city power brokers to address the problem. He describes having politically powerful people join him in spending time living as, and among the homeless. In dirty clothes, no money, and a ragged beard, he describes the problems of figuring out where to sleep, where to obtain a meal, and how to find a bathroom other than the city street (a legal offense), obtaining a shower, and the many other difficulties the homeless face in their day to day living.

Judge Coates is clearly one of those remarkable people who with concerted effort, was able to mobilize not only individuals, but the city government to improve the plight of the homeless. He describes successful efforts in San Diego, despite

the obstacles encountered. He points out that much of the initiation came from efforts of dedicated individuals, foundations, religious groups, and unfortunately not from city officials. He is disappointed that there were political groups which promoted misinformation about the homeless - defining them as bums and alcoholics who get what they deserve. Almost half of the homeless population are mentally ill, including veterans (25%), teen runaways (10%), women (15-20%), and those who could no longer find affordable housing. The true hobos were only 5%. He describes what can be done to aid the homeless mentally ill, such as legal items, voting rights, etc.

Judge Coates spent 2 years writing this book and describes how the homeless problem can be won, providing there is the public will. The book is not only a commentary on public attitudes toward homelessness but also a valuable reference on how to promote public involvement. For his effort, he deserves an accolade and given a medal. I give it 5 stars.



*Prometheus Books, Buffalo, New York, 1990, 356 pages*

# Homelessness and the Mentally Ill

by Jill Bolte Taylor, Ph.D.

I am no stranger to mental illness. I was motivated to grow up to become a brain scientist because one of my older brothers had been diagnosed with the brain disorder schizophrenia. Over the last 25 years, my family has spent many birthday and holiday celebrations inside the walls of our various Indiana State Mental Institutions. Consequently, I know the roads to Evansville State Hospital, LaRue Carter and Logansport State by heart.

Like typical schizophrenia, my brother's disorder is cyclical. He is well and behaves normally when he is taking his medications, but as soon as he stops taking his meds, for whatever reason, he spirals rapidly into a world of raving insanity. Sadly, over 60% of people diagnosed with schizophrenia, do not recognize that they are ill. As a result, many people with severe mental illness do not take any medication and end up as the homeless on our streets.

Earlier this week, I was walking down Kirkwood on my way to the Monroe County Public Library when I came upon a young man who was bouncing up and down on an ice-cold street bench. I'm guessing he was in his early twenties. With all of his worldly possessions scattered on the snow-covered

ground, he poked aimlessly into the space around him, angrily snapping directives to someone who was visible only to himself. As he distorted his face and grimaced with what I perceived as total dissatisfaction, I stood silently appalled - not only that I could find this perfect example of severe mental illness right here on the streets of Bloomington, but that we, our community, would allow our children to become so desperately ill and not give them help.

In order for any two of us to communicate with one another, we must share a certain amount of common reality. This means that our ability to perceive information from the external world, process and integrate that information, and then have some sort of output as thought, word, or deed, is 100% dependent upon the health and well-being of the cells making up our brains and nervous system.

Research shows that the longer the brain continues to exist in a state of insanity, the more debilitating and long-term the illness will be. As a result, it is critically important that we treat our brains with medication and cognitive therapy as soon as they manifest symptoms.

We are all dependent on our brains to make decisions about how we want to be and how we

want to live in the world. When the organ that makes the decisions is the organ that is ill, then it is the responsibility of a sane and compassionate community to help our ill become well. Statistics indicate that mental illness is an equal opportunity disease such that anyone, of any race, of any religion, of any gender, and at any age, can develop a problem.

Because many individuals who have a mental illness do not like the way they feel inside their own skin, they often choose to self-medicate with illicit drugs and alcohol. As a result, many individuals who are severely mentally ill also have a co-occurring substance abuse disorder. These people are disproportionately represented in the chronic homeless population.

Our local NAMI Greater Bloomington Area affiliate is working in cooperation with the Brain Stigma-Busters to help raise awareness that the brain is just like any other organ in the body and that it too can become ill. We are working in conjunction with our local Bloomington Police to provide CIT (Crisis Intervention Training) to our community law enforcers so that when they are called to interact with our ill loved ones,

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## 2007 Convention Workshops

*continued from page 3*

### *Decriminalizing Mental Illness*

In a nation which received an overall grade of “D” on NAMI’s “Grading the States” report, it should come as no surprise that burdens on criminal justice systems are greater than ever. Despite this, there are glimmers of hope. Strong leaders have emerged to speak out against the injustices of incarcerating people for the “crime” of having a mental illness. These leaders are showing that there is a better way – linking people with treatment instead of punishment and ensuring that incarceration is a win/win proposition for all concerned – communities, the criminal justice system, and, most important, consumers. This session will feature several national leaders in the effort to decriminalize mental illness.

### *Youth Suicide*

This special symposium will address the existing public health crisis in youth suicide, the third leading cause of death in people between the ages in of 15 and 24 in America. Research shows that 90% of those who commit suicide have a diagnosable and treatable mental illness. Tragically, the overwhelming majority of youth living with mental illnesses fail to be identified or to receive mental health treatment. The Columbia Univer-

sity is helping to address the under-identification of mental illnesses in youth through their TeenScreen program, which is now operating in more than 400 schools across the country. This special seminar will look at the science behind the TeenScreen program and mental health screening, and will explore the value of mental health screening for youth in our nation.

### *Below the Neck: Physical Health & Mental Illness*

Sometimes we are so focused on treatment for our mental health issues that we forget that our heads are attached to our bodies. We need to consider what goes on below the neck and make physical health a priority in our lives. In this session, we’ll focus on practical strategies for achieving better physical health as part of recovery.

**Join us June 20-24, 2007 in San Diego! [www.nami.org](http://www.nami.org)**

## HARVARD PSYCHIATRY BRAIN COLLECTION

Did you know that when you sign the back of your driver’s license to donate your organs, the brain is NOT included?

**Sign up as a brain donor!**

1-800-BRAINBANK

[www.brainbank.mclean.org](http://www.brainbank.mclean.org)

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## Homelessness and the Mentally Ill

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they can do so with compassion and specialized training in how to de-escalate a potentially dangerous situation. In addition, many of our NAMI members are volunteers for the New Leaf New Life programs going on at the jail. If you would like to become involved please contact me at 812-335-0459 or email us at [nambloomington@insightbb.com](mailto:nambloomington@insightbb.com)



# NAMI WALKS

★ ★ ★ ★ ★ FOR THE MIND OF AMERICA

Now that spring has sprung, it is time to start thinking about getting outside and enjoying the fresh air! What better way to spend quality time outdoors than walking for the Mind of America!

NAMI Indiana's second annual NAMIWalk will take place on June 9, 2007 at the Major Taylor Velodrome. Bring friends and family for a fun event as we work to eliminate the stigma associated with mental illness.

Join an existing team or form your own! This is a fundraiser for our NAMI Greater Bloomington affiliate. We encourage you to raise money to help support and develop our local affiliate. NAMI was recently awarded an "A" grade from the American Institute of Philanthropy ([www.charitywatch.org](http://www.charitywatch.org)).

For information, contact Jill Taylor at 812-335-0459 or [jill.taylor@insightbb.com](mailto:jill.taylor@insightbb.com).

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## Not yet a member of NAMI-GBA? Join today!

Your annual membership includes newsletters from NAMI National, NAMI Indiana, and NAMI Greater Bloomington Area, as well as access to NAMI's wealth of resources and information.

- \$25.00 Individual
- \$35.00 Family
- \$3.00 Consumer
- I want to support NAMI-GBA with a tax-deductible gift of \$\_\_\_\_\_

**Please make checks payable to NAMI Greater Bloomington Area  
P.O. Box 7794, Bloomington, IN 47407  
[www.namibloomington.org](http://www.namibloomington.org)**

I am interested in:

- Learning about volunteer activities
- Arranging for speakers for my organization, church, or other group
- Being a speaker about mental illness

Name \_\_\_\_\_ Home Phone \_\_\_\_\_  
 Address \_\_\_\_\_ E-mail \_\_\_\_\_  
 \_\_\_\_\_ Preferred method of contact \_\_\_\_\_

# **May is Mental Health Month**

NAMI Greater Bloomington has teamed up with the Mental Health Alliance to raise awareness about mental health in our community. Visit our book displays in the Monroe County Public Library and the Indiana University Wells Library and come meet us every Saturday morning at the Farmer's Market.

**“The mental health of our society  
is established by the mental health  
of the brains making up our society.”  
(Jill Bolte Taylor, *My Stroke of Insight*, 2006)**

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