



National Alliance on Mental Illness

nami

Skagit

JULY 2018– Newsletter funded by Skagit County Public Health Services

Contacts: Marti Wall 360.770.5666 or Dayna Telidetzki 360.708.8452

www.namiskagit.org

Newsflash !!

NAMI Skagit's OPEN SUPPORT GROUP has moved and is back at the Skagit Valley Hospital in the Sauk Conference room (just south of the cafeteria on the same hallway). It meets each 4th Tuesday of every month (next is July 24th) from 7 – 9pm. We welcome family members, partners, and supportive friends as well as those living with mental illness. Just come. Questions? Call Marti Wall 360.770.5666

Other NAMI Skagit Support Groups

Peer Support Group meets on the 4th **Thursday** of each month from **7 – 8:30pm (July 26)** in the Library of the Anacortes United Methodist Church, 2201 H Ave. (Park in back and enter through the downstairs doors) This group is primarily for those who have a mental illness. No need to sign up; just come. Questions? Call Diana Dodds at 360.424.8224

Family Support Group of Stanwood/Camano Island meets the 1st **Monday** each month from **7 – 8:30pm (Aug 6th)**. This group is **only** for the family members/partners of those who live with a mental illness. No registration required; call for current location. Julie Melville at 360.941.0996 or Julie Bell at 360.426.7422.

Did You Save the Date for “Mental Health at the Intersections”?

Registration is now open for the **Annual NAMI WASHINGTON Conference**, this year at the Yakima Convention Center in Yakima. It starts at 1pm on Sept 28th and ends at 6pm on Sept 29th. You may go online to www.namiwa.org under “programs” and find Annual Conference 2018 to register. You will also find the information about reserving a hotel room, and info about the topics and speakers. Earlybird prices are through Aug. 26th.

NAMI Skagit is offering four (4) scholarships this year to those NAMI Skagit members living with a mental illness who have not attended a NAMI Conference in the past two years. Registration, hotel for Friday and Saturday nights, and transportation are covered. Deadline for scholarships is August 25th. Contact Marti Wall at 360.770.5666

What Can We do about the Opioid Epidemic!?!?

Skagit County, in collaboration with the Swinomish Indian Tribe, the Northwest Addiction Technology Transfers Center, the North Sound Behavioral Health Organization and the North Sound Recovery Coalition, is hosting **a substance use disorder and recovery education symposium** on **Wednesday, Sept. 26, from 3:30 to 8:00 p.m.**

The goal of this event is to help our community better understand substance use disorders and determine what each of us can do to strengthen our homes, neighborhoods and families. We also want to create community conditions that are more supportive of long-term recovery.

Cost is \$10 per person and dinner is included (a bargain). Look for more info in the August newsletter and local media for registration information. Start asking your friends and neighbors and put a table together and come.....we need our caring community to participate.

Remember, substance use disorder and mental illness often go together. It's time to do battle.

Early Psychosis and Psychosis

Most people think of psychosis as a break with reality. In a way it is. Psychosis is characterized as disruptions to a person's thoughts and perceptions that make it difficult for them to recognize what is real and what isn't. These disruptions are often experienced as seeing, hearing and believing things that aren't real or having strange persistent thoughts, behaviors and emotions. While everyone's experience is different most people say psychosis is frightening and confusing.

Psychosis is a symptom, not an illness, and it is more common than you may think. In the US approximately 100,000 young people experience psychosis each year. As many as three in 100 people will have an episode at some point in their lives.

Early or first-episode psychosis (FEP) refers to when a person first shows signs of beginning to lose contact with reality. Acting quickly to connect a person with the right treatment during early psychosis or FEP can be life-changing and radically alter that person's future. Don't wait to take the first step and prepare yourself with information from tip sheets on www.nami.org.

Symptoms

Early Warning Signs Before Psychosis

Early psychosis or FEP rarely comes suddenly. Usually, a person has gradual, non-specific changes in thoughts and perceptions but doesn't understand what's going on. Early warning signs can be difficult to distinguish from typical teen or young adult behavior. While such signs should not be cause for alarm, they may indicate the need to get an assessment from a doctor.

Encouraging people to seek help for early psychosis is important. Families are often the first to see early signs of psychosis and the first to address the issue of seeking treatment. However, a person's willingness to accept help is often complicated by delusions, fears, stigma and feeling unsettled. In this case, families can find the situation extremely difficult, but there are engagement strategies to help encourage a person to seek help.

It's important to get help quickly since early treatment provides the best hope of recovery by slowing, stopping and possibly reversing the effects of psychosis. Early warning signs include the following:

- A worrisome drop in grades or job performance
- Trouble thinking clearly or concentrating
- Suspiciousness or uneasiness with others
- A decline in self-care or personal hygiene
- Spending a lot more time alone than usual
- Strong inappropriate emotions or having no feelings at all

Signs of Early or First-Episode Psychosis

Determining exactly when the first episode of psychosis begins can be hard, but these signs and symptoms strongly indicate an episode of psychosis:

- Hearing seeing tasting or believing things that others don't
- Persistent, unusual thoughts or beliefs that can't be set aside regardless of what others believe
- Strong and inappropriate emotions or no emotions at all
- Withdrawing from family or friends
- A sudden decline in self-care
- Trouble thinking clearly or concentrating

Such warning signs often point to a person's deteriorating health and a physical and neurological evaluation can help find the problem. A mental health professional performing a psychological evaluation can determine if a mental health condition is involved and discuss next steps. If the psychosis is a symptom of a mental health condition early action helps to keep lives on track.

Psychosis

Psychosis includes a range of symptoms but typically involves one of these two major experiences:

Hallucinations are seeing, hearing or feeling things that aren't there such as the following:

- Hearing voices (auditory hallucinations)
- Strange sensations or unexplainable feelings
- Seeing glimpses of objects or people that are not there or distortions

Delusions are strong beliefs that are not consistent with the person's culture, are unlikely to be true and may seem irrational to others such as the following:

- Believing external forces are controlling thoughts feelings and behaviors
- Believing that trivial remarks events or objects have personal meaning or significance
- Thinking you have special powers are on a special mission or even that you are God

Causes

We are still learning about how and why psychosis develops, but several factors are likely involved. We do know that teenagers and young adults are at increased risk of experiencing an episode of psychosis because of **hormonal changes** in their brain during puberty. Several factors that can contribute to psychosis include:

(Psychosis con't)

--**Genetics.** Many genes can contribute to the development of psychosis but just because a person has a gene doesn't mean they will experience psychosis. Ongoing studies will help us better understand which genes play a role in psychosis.

--**Trauma.** A traumatic event such as a death, war or sexual assault can trigger a psychotic episode. The type of trauma, and a person's age, affects whether a traumatic event will result in psychosis.

--**Substance use.** The use of marijuana LSD, amphetamines and other substances can increase the risk of psychosis in people who are already vulnerable.

--**Physical illness or injury.** Traumatic brain injuries, brain tumors, strokes, HIV and some brain diseases such as Parkinson's, Alzheimer's and dementia can sometimes cause psychosis.

--**Mental health conditions.** Sometimes psychosis is a symptom of a condition like schizophrenia, schizoaffective disorder, bipolar disorder or depression.

Diagnosis

A diagnosis identifies an illness; symptoms are components of an illness. Health care providers draw on information from medical and family history and a physical examination to diagnose someone. If causes such as a brain tumor, infection or epilepsy are ruled out, a mental illness might be the reason.

If the cause is related to a mental health condition early diagnosis and treatment provide the best hope of recovery. Research shows that the earlier people experiencing psychosis receive treatment the better their long-term quality of life.

Treatment

Early or First-Episode Psychosis

Early treatment of psychosis, especially during the first episode, leads to the best outcomes.

Research has show significant success using a treatment approach called Coordinated Specialty Care (CSC). CSC uses a team of health professionals and specialists who work with a person to create a personal treatment plan based on life goals while involving family members as much as possible.

CSC has the following key components:

- Case management
- Family support and education
- Psychotherapy
- medication management
- Supported education and employment
- Peer support

Psychosis Treatment

Traditional treatment for psychosis involves psychotherapy and medication. Several types of therapy have successfully helped individuals learn to manage their condition. In addition, medication targets symptoms and helps reduce their impact.

Remember, if you suspect early psychosis or psychosis, browse the www.nami.org website for all kinds of information and helpful tips. It is there to help you cope and find treatment.

(taken from the NAMI National website)



Are You Getting Outside?

Whether you are a family member or the person living with mental illness, going outside is usually a big help in recovery. Too hot, you say? Try before 10am and after 6pm. Water some plants and pull a few weeds, go for a walk or just sit outside and listen to the birds or read a book. I don't have anyone to go with me, you say? Call a friend or another family member, or take your favorite pet – even bearded lizards like to go out. What can I do, you say? Skagit County has a map of all the walking trails, and of course, there are lots of parks around in our 5-county area. Want something to do in the evenings? Head to any of the western facing parks and watch the sun go down creating a gorgeous sunset. Try any of the outdoor concerts sponsored by the local communities. To find locations and who's playing, go to the "gorskagit" website. You'll find the concerts in Mount Vernon, LaConner, Burlington, Sedro Woolley, and Anacortes—and they're not all on the same nights! Take a picnic or a snack and a friend, or just go by yourself. Wonderful!! Ruts and isolation are no friends to mental health and well-being. So, get outside.

PRESENTS THE POPULAR

FAMILY to FAMILY COURSE

September 17 through October 25, each Monday and Thursday,
6:30 – 9pm in Mount Vernon

This is a course for family members, partners and supportive friends of an adult (17 and over) living with a mental illness. It is designed to help all family members understand and support their loved one living with mental illness, while maintaining their own well-being. It includes information on the illnesses such as bi-polar, schizophrenia, depression, anxiety disorders, ADD/ADHD, borderline personality disorder, schizoaffective disorder, and other mental health conditions. Also covered are treatment options, medications, empathy, communication, advocacy, self-care, and more. Thousands of families describe the course as “life changing”, and it is taught by trained family members who themselves know what it is like.

The course is FREE, but pre-registration is required as class size is limited.

Please register by September 6th by calling
Reed Eckstrom at 360.927.6381 or Julie Bell at 360.420.7422





You are not alone!

And never have to be!

NAMI Peer-to-Peer Educational Program is a 5 week interactive course on recovery for any person with a mental illness. Teams of two trained "mentors" who are themselves experienced with living with mental illness, teach the course. The course uses a combination of lecture, interactive exercises, and structured group processes to promote awareness, provide information, and offer opportunities to reflect on the impact of mental illness. Topics include empowerment, disorders, stigma, story-telling, addictions, medications, spirituality, coping skills, relapse prevention, and advance directives.

The next course begins

**Monday, Sept. 10th and each Monday evening
through Monday, Oct 29th, from 6 – 8pm**

At the UNITED METHODIST CHURCH
1607 E Division St, Mt. Vernon WA. 98274
(SKAT Bus Route 206 Stop Division St and Clairmont)

Pre-registration is requested with room for 15 participants
and a minimum of 7 to start the class.

For more information please contact: Mark Dodds at (360)424-8224

NAMI Skagit
PO Box 546
Mount Vernon WA 98273

NON-PROFIT
U.S. POSTAGE PAID
Mount Vernon, WA

RETURN SERVICE REQUESTED

PERMIT # 13

Nami Skagit Membership Application and/or Donation

Name	Phone	Email
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Mailing Address	City	Zip
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Individual Membership (\$40)
 Household Membership (\$60)
 Limited Resources Member (\$5)
 Donation _____

I am: Living with a Mental Illness
 Parent of a son/daughter with MI
 Spouse/Partner of one with MI
 Other _____

Please make checks payable to "NAMI Skagit" and mail to:
NAMI Skagit, PO Box 546, Mount Vernon WA 98273