



DATES AND EVENTS

SHARE AND CARE

Do you need someone to talk to? Would you like some of your questions about mental illness answered? Our support group for family and friends of the mentally ill meets **every** Tuesday at 6:00 PM at Arden House, 1552 Colorado Street, Glendale, at the corner of Colorado and Lincoln. We encourage you to come. Limited parking available on the street. Please enter through the front door.



IMPORTANT NOTICE **Verdugo Mental Health Parking** **Changes** **Our New Building is Coming !**

On or shortly after March 12, 2007, construction will begin on the new VMH clinic building. Construction will make the parking lot unavailable for use for one year.

VMH has made arrangements for parking at the Eagle Rock Plaza at the corner of the 2 Freeway and East Colorado Street. A shuttle will transfer people from the parking area to the clinic and back on an approximately every 15 minute schedule. The parking area is located to the rear of the West side of the plaza on the upper level adjacent to the Macy's store. An identified shuttle pick up point will be located near the Macy's store in an alcove which was previously an entrance to the building. The pick up point at VMH will be at the Glen Roberts Child Study Center driveway.

MONTHLY NAMI MEETINGS AND EVENTS

Tuesday, March 6, 2007, Speaker Meeting.
Share and Care – 6 pm to 7 pm.
Speaker – 7:15

John L. Adam RN, from Glendale Adventist Hospital, has 29 years of professional practice in both inpatient and outpatient settings, serving individuals experiencing mental illness.

Tuesday, April 3, 2007, Speaker Meeting.
Talking to the Brain: Joy Lunt and Niki Davis.

WORDS FROM THE PRESIDENT

Jonée Shady

Incompetency

I recently went to visit my brother who is still on court leave at Riverside County Jail. I have gotten the routine down although wait time on the phone is still inexcusable. There have been times when the phones in the visiting rooms don't even work and if there were other visitors at the same time, one of us would be out of luck and not be able to talk to our relatives. I also was present when a court doctor and public defender were conducting interviews and I heard every question and every answer. Aren't inmates also entitled to confidentiality when talking to doctors and lawyers?

Enough griping as the focus of this article is meant to share some thoughts as to what I see as progress with regard to my brother's condition. On my last visit, Nick started off by telling me that the doctor from the hospital came to interview him. I believe this was a court appointed doctor from Riverside County but my brother assumed she was from the State Hospital. I asked him what the interview was about but Nick quickly responded that he didn't want to waste our visit talking about the interview. I reminded Nick that I was interested and it wouldn't be a waste of time for me. We went on to talk about my week, food. At one point I even sang him show-tunes. But then a funny coincidence took place. No one announced that visiting was over and we went into our second hour of time. Well, now what would we talk about?

It was during this time that a court appointed doctor was interviewing other inmates. We could hear the questions and that was when Nick started to tell me that these were the same questions that the doctor had asked him earlier that day. In the past, Nick would quickly change the subject when I tried to discuss any aspect of his illness or charges. In fact, he has forgotten that he had been arrested and that his stay at Atascadero was as a result of his plea to charges against him. What I found interesting this day was that despite the fact that he now believes he's 119 years old and that to stay in the hospital would be best for him, he was willing to discuss with me this interview with the doctor.

Do you know why you are here? Do you know what
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WORDS FROM THE PRESIDENT

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your mental disability is? Are you ready for CONREP(Conditional Release Program)? "I am here because they committed me." "They say I'm schizophrenic." "Yes, I think I'm ready for CONREP." So does this mean that he realizes he is in a mental institution? Has he understood what it means to be diagnosed with schizophrenia? And despite this, he does seem to understand that there is a possibility that he will not always be in the hospital?

For the first time ever, I felt safe in speaking some truths to my brother about his condition. After asking him how he felt about what was said in the interview, I was able to explain what I knew about his situation. I explained about his arrest and his sentence; I explained about how he was sent to Atascadero; I even went so far as to explain how he had to understand about schizophrenia and medication compliance if he had any hope of being accepted to CONREP. To my surprise, Nick did not react defensively or aggressively as he has in the past when trying to discuss truths about his condition. He simply wanted to know when I was told all this. "Oh they told you that too? But it's not true." I told him he could take a look at his file and he would see it all there. I asked him if he was mad. He said no but then started to whisper in the phone. I told him I couldn't hear him and asked why he was whispering. "Oh, you heard that too?" "Yeah, you were just whispering." "No, I wasn't."

So there you have it; the voices are back and he wants to go. "Isn't visiting over? I think it is over, I better go." We say goodbye and I leave.

But as I leave, I am grateful that someone forgot to end visiting. I hope that it was some compassionate sheriff who wanted to extend my time. I am grateful to finally have an honest conversation about what I know about Nick's condition. But more importantly, I realize that there seems to have been some progress with Nick's situation in spite of his constant delusions and lack of insight. It appears to me that he may be gaining insight as never before as he been so willing to speak



The *GAMlgram*, the Community's Voice on Mental Illness, is published by NAMI Glendale to educate its members and the general public about issues affecting the mentally ill.

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 Editor: Jane S. Hancock
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to me about his illness. He was curious, he was calm, and he was attentive. I do believe that this is progress and again will reaffirm the hope that we need as we advocate for our loved ones.

RESOURCE INFORMATION

- ❑ (PMRT) Psychiatric Mobile **Response Team**, (626) 2582004 for **crisis management**, Monday-Friday 8 am – 5pm. At other times use the Access Line.
- ❑ Access Line, 24-hr: (800) 854-7771 for information and consultation, and for Psychiatric Mobile Response Team **After Hours** and **Week ends**.
- ❑ (MET) operates 5 PM to 1 AM. Call Local Sheriff Station (or 911 if dire emergency) to request MET response. For general information: (562) 9037530.
- ❑ Family Advocate: John Griffin (213) 637-2311.
- ❑ LA Police/Mental Assessment Response Team System – wide Mental Assessment Response Team (SMART.)
- ❑ Mental Evaluation Unit (MEU) call (911) to request the MEU response.
- ❑ IF YOUR LOVED ONE IS ARRESTED CALL: DMH Jail Mental Health Services: John Davis, District Chief (213) 229-9991.
- ❑ Inmate Information Center (213) 473-6080 or (213) 473-6100.
- ❑ Jail Inpatient Unit: Neil Ortego, MD (213) 893-5391.
- ❑ Suicide Prevention Center, Crisis Line 24hrs 7 days (310)391-1253..
- ❑ **Friendship Line**: a toll free telephone help-line, run by people with mental illnesses seven days a week, 365 days a year, offers information about mental health resources and connection to crisis lines. Specially trained peer supporters are now available from 6 to 10 p.m. during the week and from 10 a.m. to 10 p.m. on weekends and holidays. Give us a call at **888-448-9777**.

DBSA GLENDALE – A SUPPORT GROUP for those suffering from depression and bi-polar disorder and their loved ones

Glendale Adventist Medical Center
 1509 Wilson terrace, Glendale
 Thursdays 6 – 8 pm
dbsaglendale@yahoo.com
 818.209.8442

Depression and Bipolar Support Alliance
www.dbsalliance

FYI: BUSINESS ITEMS VOTED AT RECENT MEETINGS

Voted to accept slate of officers as presented by the nominating committee.

Authorized \$2500.00 check to Verdugo Mental Health for their Walk.

Approved the amendments to the by-laws.

Do You Blog?



NAMI StigmaBuster Alert:
February 9, 2007
Contact: smarch@nami.org

General Motors Pulls TV Ad

We've won!

Shortly after the special StigmaBuster Alert was sent to NAMI advocates today, General Motors (GM) announced a decision to pull and modify its Super Bowl "suicide" television commercial. The portrayal of a robot's suicide, and any implication of suicide, will be removed.

StigmaBusters who responded to the earlier alert by checking the GM Web site quickly reported that it had been dropped.

"GM's decision is a victory for all of the mental health and suicide prevention community," said NAMI executive director Michael J. Fitzpatrick. "We've made the point that mental illness and suicide are to be taken seriously and that we will not be marginalized."

"We are especially grateful to the American Federation on Suicide Prevention (AFSP) and Suicide Prevention Action Network (SPAN), who with NAMI, have led protests of the advertisement over the last week."

"GM is a giant corporation. We have educated them. It could not have happened without the support of our grassroots."

Thank you for all your efforts, all the time!

Stella March, National Coordinator
 NAMI StigmaBusters

Join NAMI StigmaBusters. Please visit our web site at www.nami.org/stigma

Help bust the stigma and discrimination against all persons with a mental illness!

Administrative Coordinator Position

The Los Angeles County Coordinating Council (LACCC) is seeking a full time experienced Administrative Coordinator to facilitate designated projects associated with the LACCC and local National Alliance on Mental Illness (NAMI) Affiliates. **Qualifications:** B.S. Business or equivalent with applicable skills and experience in the Non Profit sector.

This position must have knowledge of existing community agencies providing services to the Mentally Ill, etc., be computer literate with excellent organization, presentation, communication and record keeping skills. Some knowledge of web hosting is desirable. Excellent planning and delegation skills with the ability to develop an outreach distribution plan to reach un-served populations in the local community utilizing affiliate volunteers. Knowledge of NAMI is required. Bilingual English/Spanish a +; attend monthly meetings within the Department of Mental Health and NAMI organizations is required and other duties as assigned.

Essential Duties:

- Organize and prepare for monthly committee and board meetings of the LACCC.
- Develop and maintain general information files on each local NAMI Affiliates
- Identify and schedule presentations to be conducted by NAMI affiliates to community organizations
- Develop an outreach plan to identify and distribute NAMI brochures, newsletters in the community; i.e., hospitals, libraries, schools, colleges, clinics, jails, churches, restaurants, etc., and schedule volunteers to assist with distributing information
- Schedule volunteers to attend specific meetings occurring within the Mental Health community including the Mental Health Commission and others as assigned
- Maintain and post a calendar of NAMI activities and other pertinent information on the website.
- Coordinate speakers for panel discussions within the Twin Towers facilities.

Salary: \$ 50,000 annually

Work Hours: Flexible 40 hour work week

**Job Location: Department of Mental Health 695
 South Vermont, Los Angeles, CA**

**Job Classification: Exempt salaried
 POSITION OPEN UNTIL FILLED**

Send resumes to:

LACCC Search Committee

wash350@msn.com

Fax number: (909) 593-9995

Mailing Address: 3500 Dune Lane

La Verne, CA. 91750-3569

COMMENTARY: MIKE MILLER**You Are Not Alone**

For some reason, a particular NAMI meeting stands out in my memory. Someone showed up at that meeting who has never been back. Nevertheless, his presence is indelibly stamped in my mind. He arrived a few minutes after the meeting began and sat quietly throughout. He bypassed his initial chance to share his story or explain why he was present. That evening the "share and care" session was fairly typical; a number of people sharing their stories and concerns including those who dealt with friends or loved ones who had severe depression, bipolar disorder and schizophrenia. A variety of experiences were described.

As the meeting was about to conclude, the man who had not spoken raised his hand. He told the group that he was a long-distance truck driver, that he had a teen age son who was acting different, that the family had no idea what was going on and that during his long distance drives he anguished for his son in the solitude of his truck. He then stood up, and despite his macho appearance and occupation, almost crying he told the group that he now thought his son was schizophrenic and that at least he knew others had similar problems, and he was so relieved to hear the stories of those in our group. He proceeded to hug everyone present thanking us for letting him know that, even far away in his truck, he is not alone.

Although this man has never come back and we are not sure how he even heard of NAMI, I am sure that he left better prepared to deal with his son and his son's illness. I am also sure that no matter what happens, his level of anguish and pain has been reduced. He knows that at such times, he is not alone. In fact, I can recall his words when he talked at the end of our meeting: "I thought I was all alone, that no one else had this problem, and now I know that is not true. Thank you all."

My remembrance of this experience causes me to think back on my own situation; probably not different from thousands of other people. We all feel alone. Usually this occurs at the beginning of the manifestation of the illness. Certainly, it can reoccur any time. Who is prepared, particularly when the mental illness arises later in life? In fact, this is often the cruelty of the illness. Our child, spouse, friend seems okay, they show promise and energy, opportunities abound and then the illness occurs. Why us? Why my child? This cannot be! None of my friends has this issue! Whether we call this denial or adjustment, it leads to feelings of alienation, aloneness.

Those of us who lived with mental illness for years and particularly those who have participated in support groups such as NAMI know we are not alone. The list of factors that belie aloneness is extensive:

We are not alone because we have our friends and relative (at least some) who understand and help.

We are not alone because there are medical professionals, clinics, licensed social workers, nurses, advocates, government, school officials and employees, and volunteers who work and participate to help those with mental illnesses and their families.

We are not alone because there are books, journals, magazines, and timely news articles that are increasingly alert to what is true, real and helpful to us and our loved ones.

We are not alone because there are some public officials who are sensitive to the plight of the mentally ill.

We are not alone because there are researchers all over the world battling to help.

We are not alone because there are many organizations and associations such as NAMI who focus solely on helping improve and support those afflicted with brain disorders and to help deal with all of the problems, including care and housing, caused by mental illness.

We are not alone because the media and law enforcement are increasingly improving their knowledge and handling of the many issues of mental illness.

For those who are religious or spiritual, we are definitely not alone and can draw strength from God.

I am not idealistic. With all of the above sources to stem being alone there can be problems and there are many failings: We need more sensitive public officials, law enforcement needs more and better training, too many people still stigmatize, the media sometimes distort and hurt. There are inept medical providers, misdirected drug companies, and organizations that sometimes forget their mission. Nevertheless, none of this is akin to the not so recent past where people were hush-hush about the world of brain disorders and mental illness. I can only imagine the night mare of true aloneness that must have pervaded our society during those years. Today, much more is in the open including the problems I referred to. We have a voice, we have people to talk to, we have each other, we have resources and others to share and care.

On any dark night while driving alone on the highways and by ways of our lives, somewhere somehow, no matter what, like the truck driver who came to NAMI, we can turn to others for help. We are not alone!

**JOIN NAMI – YOU ARE NOT ALONE
\$35.00 PER INDIVIDUAL OR FAMILY
MEMBERSHIP MAKES YOU A MEMBER OF THE
STATE AND NATIONAL ORGANIZATIONS.**

Make checks payable to NAMI Glendale and mail to
NAMIGlendale Treasurer, Wayne Baldaro, c/o Verdugo
Mental Health, 1540 E. Colorado, Glendale, CA 91205.
GAMlgram only - \$10.00