



# NAMI News

The County's Voice on Mental Illness 10730 Connecticut Avenue, Kensington, MD 20895

March 2005

Volume 27, Issue 3

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## Dr. Julia Frank on Bipolar Disorder

NAMI Montgomery County was privileged to host Dr. Julia Frank, Associate Professor of Psychiatry and Director of medical Students at George Washington University, on the topic of bipolar disorder. Dr. Frank has 20 years of outpatient psychiatric experience and has several family members who suffer from mental illness.

Dr. Frank talked about the difficulty of accepting the diagnosis of bipolar disorder. The stigma of having a mental illness is problematic, but bipolar disorder is somewhat different in that there is a group of celebrities and very successful people who suffer from it. Most people experience several episodes of mania and depression before they are able to accept the diagnosis. She notes that mania is "leadership behavior to the 'nth' degree," with a strong feeling of being in control. Thus a person who is experiencing mania rejects the notion that he or she is actually out of control.

Another barrier to acceptance is the reluctance of many people to rely on medications for their well being. In addition, the medi-

cations carry many unpleasant side effects. Due to recent advances, it is no longer necessary for someone to have a movement disorder weight gain because of their medications.

Alternatives or adjuncts to medication for the depressed phase of the disease include light therapy, and omega-3 fatty acids such as those found in fish oil and flaxseed oil. Dr. Frank acknowledged that people using light therapy must use it daily and that omega-3 supplements aren't usually enough and must be combined with medication. There is also a daily rhythm therapy in which the consumer is careful to maintain the same daily routine and good sleep hygiene.

Dr. Frank stated that there is a difference between rescue and maintenance medication. What works in a hospital isn't appropriate for when the client is out in the community. In hospitals clients tend to be sedated but as an outpatient the individual

*(Continued on page 3)*

### SPONSOR THE NEWSLETTER—

Thanks to the generous donations of the people whose names you see highlighted each month on our cover, we are able to cover most of the cost of printing our much valued newsletter! Please consider making this tax deductible and vital donation in memory or in honor of a loved one or cause. Your participation is a loving link tying you, your loved ones and all NAMI families together. Call us! 301-949-5852.

### General Education Meeting — Thursday, March 10, 2005

## Crisis Services in Montgomery County

### Speakers:

**Dudley Warner**, Montgomery County Crisis Center  
**Joan Logan**, Montgomery County Police Department

Social Hour: 7:30 p.m., Program: 8:00 p.m.

Location: Cedar Lane Unitarian Church, 9601 Cedar Lane, Bethesda 20814

The cost of printing this issue of the NAMI News was donated by

**Joanne Milobsky and Alison Malmon**

*In memory of Brian Malmon*

If you value our NAMI News and would like to help our cause by donating an issue, we are eager to discuss this with you. Call Susan or Leah in the NAMI office.

**The calendar of events has moved!  
Please see the insert in this newsletter.**

## **NAMI Support Groups**

### **Family Support**

2nd Wednesday of each month, 2:30-4 p.m., Unitarian Universalist Church, 100 Welsh Park Drive (off Mannakee St), Rockville. Contact: Ursula 301-384-8100

4th Tuesday of each month, 7 p.m., NAMI office. Contact: NAMI office 301-949-5852

2nd Saturday of each month, 9:30 a.m., Mont. General Hospital Conf. Room C, 2nd Floor (Community Learning Center) Contact: Helen 301-963-9472.

### **Child & Adolescent Family Support**

2nd Tuesday of each month, 7:00—8:30 p.m., NAMI Office. Contact: Brenda Bickel 301-949-5852

### **Spouse Support**

Group meets one Friday each month, 7 p.m., NAMI Office. Contact: Bill 202-482-1287.

## **NAMI C.A.R.E. is Coming!**

**NAMI C.A.R.E. Support Groups for persons with mental illness will be launched this June !**

### **About NAMI C.A.R.E.:**

- NAMI-C.A.R.E. is a peer-based, mutual support group program for individuals facing the challenges of recovering from any serious mental illness.
- Led by consumers, for consumers, NAMI-C.A.R.E. employs guidelines and principles of support designed to empower its members.
- NAMI-C.A.R.E. is not illness-specific, and welcomes persons with all psychiatric diagnoses.
- A support group model that focuses on allowing all participants to share their experiences and learn from each other in a safe and confidential environment

**Are you interested in facilitating? We are looking for dependable individuals** interested in volunteering as support group leaders. Support group leaders must commit to one year of facilitation, and will work in teams of two. Locations and times of support group meetings will be determined according to the availability of facilitators. Training will be provided for those chosen to facilitate.

To apply to be a support group leader please prepare a resume and contact Sarah O'Brien at the NAMI office.

## **Other Support Groups**

### **For Consumers:**

#### **All Disorders:**

- On Our Own of Montgomery County has a drop-in center, many activities and sharing groups. Call 240-683-5555.
- Recovery, Inc. offers free weekly support group meetings for people with all types of mental, nervous and emotional problems. Saturdays 10:30-12:30 pm, Saint Mark Presbyterian Church, 10701 Old Georgetown Rd, Rockville. Call Carole (202) 269-2725. For additional groups, call (301) 431-1818 or check [www.recovery-inc.org](http://www.recovery-inc.org).

#### **Schizophrenia**

Thursdays 6:30-7:30 p.m. Hughes United Methodist Church, Wheaton - Call Linda 301-571-7386

#### **Schizophrenia/Schizoaffective**

Thursdays 6:30-8 p.m., Wildwood Baptist Church, 10200 Old Georgetown Rd., Bethesda. Contact: Richard 301-977-3507

#### **Depression/Bipolar/Schizoaffective**

DRADA (Depression and Related Affective Disorders Assoc.). Main number: 410-583-2919.

- Bethesda chapter of DRADA is a peer support group for people with a primary diagnosis of depression or bipolar disorder. Group meets from 7-9 p.m. on alternate Wednesdays at Christ Lutheran Church, 8011 Old Georgetown Road, Bethesda. For more information, contact Richard Lewis at (240) 401-2764.
- Tenleytown Group, contact Kristin at 202-885-5653.
- Georgetown University Group, contact Barbara at 301-926-6913.
- George Washington University Group, contact Alvin at 301-975-3169.

Potomac Ridge Mood Disorders Psychoeducation Group. Ongoing group for adults suffering from depression. Tuesdays, 6-7 pm. Call 301-251-4539 to register.

#### **Obsessive Compulsive Disorder**

1st and 3rd Tuesdays, 7:30 pm, 2424 Reedy Dr., Wheaton, Rm. 223. For information call Bruce 301-497-1589.

### **For Families and Friends:**

#### **All Disorders:**

Family Support—every Thursday except the 2nd Thursday of each month, 7:30 p.m., Bauer Drive Rec. Center. Contact Susan at 301-738-2448 to confirm that group is meeting.

#### **Borderline Personality Disorder**

Metro Washington Borderline Personality Disorder Education and Support Group. For information call Diane at 301-469-6101.

#### **Depression/Bipolar/Schizoaffective**

Potomac group meets 1st and 3rd Fridays. Call Diane at 301-299-4255. For additional groups in Montgomery County, Call DRADA (Depression and Related Affective Disorders Association) at 410-583-2919

**OCD:** Families meet in area homes. For info. call Nancy at 301-340-1452.

#### **Suicide/Grief Related Support Groups**

Yellow Ribbon Suicide Prevention Program - Call Mary McCausland 301-530-4761.

Seasons—Cedar Lane Unitarian Ch. 2<sup>nd</sup> Weds of each month. Call Corrine Melton 301-460-4677 or Doug Tipperman 301-330-4984.

Griefworks—Contact Celia Ryan 301-871-3478.

## Bipolar Disorder, continued

*(Continued from page 1)*

should be moving back into life. The consumer needs to develop a realistic, sustainable sense of self.

Dr. Frank pointed out that “the illness brings on stressors that bring on the illness.” An example would be a bad relationship that leads to relationship stress that leads to an episode of the illness.

Dr. Frank said that consumers with bipolar disorder are more vulnerable to substance abuse. Resisting substance abuse is the hardest thing to live with. Also, finding the right drug at the right time is crucial. One also needs to find a physician who is respectful but will be firm when necessary.

Questions were taken during the second half of Dr. Frank’s talk.

### **Q: What is the difference between Bipolar I and Bipolar II?**

A: In Bipolar I, there are separated episodes. The ups last at least a week and are destructive. Bipolar II is a broad category. It is a depressive illness and affects more women. Individuals with Bipolar disorder II have repeated depressive episodes and there are only mild episodes of mania.

### **Q: What about vagus nerve stimulation as a treatment?**

A: This is an old treatment for epilepsy. To date research has only shown it to be effective for treatment resistant depression. We don’t know if it is safer than what we have now for treating depression.

### **Q: What about transcranial magnetic stimulation or hypnosis?**

A: The effects of transcranial magnetic stimulation are not long lasting and hypnosis is not commonly used to treat bipolar disorder.

### **Q: Why do medications sometimes stop working?**

A: Medicines don’t have the same response over time. That has to do with how the body metabolizes (breaks down) the drug, especially in times of high vs. low mood. SSRI’s such as Prozac can lose efficacy over time. In addition, if the individual has a dramatic change in body weight, the medication dose may need to be adjusted.

### **Q: Please discuss the possible renal complications with lithium.**

A: Lithium is the only drug that lowers suicide rate. An individual will not experience kidney failure on lithium alone. The renal complications from taking lithium, such as needing to urinate often, are unpleasant but not life threatening. On lithium, the thyroid has to work harder to stay at normal levels so clinicians try to keep patients at the high end of normal thyroid range. It is important to remember that there is a narrow therapeutic level. The window is .5 – 1.2. Above 1.5 is toxic. Twice the normal dose of lithium can be fatal. Consumers should know the difference between normal side effects and toxicity. Dangerous side effects may arise if there is excess salt depletion (possibly through sweating) or if the consumer forgot s/he took the medicine and took an additional dose.

Dr. Frank also spoke about the drugs lamotrigine and depakote. They are both mood stabilizers. Lamotrigine is the only anticonvulsant that treats bipolar disorder without weight gain. When using those drugs, especially together, the doctor must monitor the patient’s blood level. If blood level goes up too quickly, the patient may get an inflammatory vascular rash that can be dangerous. A possible side effect of depakote is pancreatitis. One can use the enzyme amylase to test for pancreatitis

### **Q: How can a young person with bipolar disorder be successful in college?**

A: In college students frequently pull “all nighters”. It is a time when relationships break up. People can get hurt quickly. A person with bipolar disorder might consider going to college when they are older. Some colleges like the University of North Carolina have services for students with special needs. Simon’s Rock College in Great Barrington, Mass. has services for students with special needs.

### **Q: If we have mental illness in the family, when should we take our kids for a psychiatric evaluation, if at all?**

A: If a family member has a concern that a loved one may have a mental illness it is never too early for a consultation with a psychiatrist. Dr. Frank recommended the book “Mood Swing” by Ronald Fieve. This is a common sense, down to earth book. She also noted that there is no objective test for bipolar disorder. On the other hand, with depression, one can observe endocrine changes and be more certain of the diagnosis.

### **Q: How do you differentiate anxiety from mania?**

A: There is a difference between anxiety and mania. In mania, the consumer says “there are things to do and I’m handling it”. There is the feeling that they are in charge. With anxiety, the consumer says “there are things to do and I’m not handling it.” There is a feeling of helplessness. These two states can co-exist and overlap.

In response to a question about her availability as a clinician, Dr. Frank said that she works with adults in a clinic that doesn’t take insurance but she is looking for teaching patients who are willing to be interviewed by medical students. If you are interested in this opportunity, please call the NAMI office.

*Article written by Rochelle Banta.*

## Advocacy News

The Advocacy committee met on February 17. Ed Francell discussed the importance of developing a funding stream for the public mental health system that has a single point of entry into the Montgomery County system. The committee voted to support giving the highest priority to people with serious mental illnesses in the County budget and to increase funding for expansion, development and improving the Assertive Community Treatment Team (ACT) It was recognized that we

need more detailed information before we could testify before the County Council.

We, therefore, are asking the Crisis Center:

- How much money is provided in the County budget for the Crisis Center, including how much is provided for the ACT Team?
- How many people does the Crisis Center serve per year?
- How many are referred to the ACT

Team? How many are referred that the team is not able to serve?

We are especially interested in the ACT Team, because it is designed to serve those people who have a diagnosis of a serious mental illness who have repeated hospitalizations and do not respond to treatment. These people tend to end up in jail, emergency rooms and hospitals, all very expensive options for the community.

## Hope Springs Eternal by "Dean" Lawrence Friedman

They say hope springs eternal. A minister at Springfield told me people have to have hope. I did wonder if people actually do have to have hope. I was so down at that point I wondered what for? With Spring here, I guess it is time to have renewed hope for the future. It is the time of rebirth and regrowth and a certain amount of counting one's blessings after the dreariness of the winter months.

I myself find that with the better medications now out and a good counselor to talk to, perhaps my major problems are now resolved. I am hoping to be able to take care of myself for years to come, maintain a modest lifestyle and perhaps mainstream more into the community and further from the mental health system. I am also hoping for a steady girlfriend or wife as I am getting older now and need a life's companion.

Perhaps others at this time would like to assess what they would like for their own short and long term goals. Letting go of the past and concentrating on the future (for even hope can get one through difficult times), is a good thing and perhaps the Spring is the best time to do that.

## EDUCATION PROGRAM ANNOUNCEMENTS

### Family-to-Family Teacher Training

NAMI Montgomery County and NAMI Maryland will sponsor a 3-day training program for those interested in teaching the Family-to-Family class in Montgomery County. Training is scheduled for May 13-15 in Baltimore.

Teacher training is free (including room, board, and materials) to persons who have taken the Family-to-Family 12-week training program and who commit to teaching two Family-to-Family courses in Montgomery County during the next two years.

Being a Family-to-Family teacher is a very important way to serve NAMI and to reach out to other family members who need the information and support that this class provides. To register, contact Frances at 301-949-5852, ext. 4, or e-mail [fshuping@namimc.org](mailto:fshuping@namimc.org).

### Family-to-Family class is beginning this month!

12-week class for families of adults who have a mental illness.

Tuesday, March 8, 7:00-9:30 p.m., St. Mark Presbyterian Church, 10701 Old Georgetown Road, Rockville, MD. Pre-registration is required. E-mail [fshuping@namimc.org](mailto:fshuping@namimc.org) or call 301-949-5852, ext. 4.

### Peer to Peer Recovery Education Course Filling Up Quickly... Call Now!

Now registering for the Spring session beginning Wednesday, April 27th at Warner Memorial Presbyterian Church in Kensington. For more information contact Sarah O'Brien at 301-949-5852 or [sobrien@namimc.org](mailto:sobrien@namimc.org).

## A New Place to “Drop In”

An interview with Miriam Yarmolinsky, Coordinator for the Affiliated Santé Group Drop-In Center, by Rochelle Banta

The Affiliated Santé Group, located at 700 Roeder Rd. in downtown Silver Spring, has been chosen to establish and host a consumer-run drop-in center. The Silver Spring Drop-In Center, is funded by the Montgomery County Department of Health and Human Services (DHHS), Core Services Agency (CSA) and the state Mental Hygiene Administration (MHA). Miriam Yarmolinsky is the Drop In Center Coordinator. She is also a NAMI member and worked on the steering committee of the drop-in center prior to becoming the Center coordinator.

The center will serve primarily down-county residents, adults who have been impacted by severe and persistent mental illness. The Center is hoping to partner with NAMI, On Our Own of Montgomery County, The Santé Group Companies, Threshold Services, St. Luke's House, and other organizations that primarily serve people with mental illness, as well as some universities and hospitals. Ms. Yarmolinsky hopes to also liaison with the state and county DORS (Dept. of Rehabilitation Services) which helps disabled individuals with funding, education, and employment.

Potential Center members will be interviewed by the Center Coordinator. Ms. Yarmolinsky has been distributing “Consumer Interest Surveys” to potential Center members to indicate what

kinds of activities they would enjoy, and whether they would be willing to volunteer. The Center aims to be consumer driven, and its functions may change over time. Currently, the center is a free service.

Some of the Center's proposed services under discussion are: cooking classes, creative arts, peer support groups, outings, resources, and a speakers bureau (featuring speakers from NAMI and other relevant organizations to speak on a topic of interest to consumers). Ms. Yarmolinsky said they hope to have outings with group discounts to movies and plays. The center would ideally bring in resources from the outside and centralize them. For example, there is an art center (CREATE Arts) in downtown Silver Spring that hosts a program, Studio Downstairs, where people experiencing mental health issues can create visual art in a supportive atmosphere. Studio Downstairs is directed by a licensed clinical social worker. Ms. Yarmolinsky stated that the Drop-In Center could have some sort of arrangement with Studio Downstairs.

Ms. Yarmolinsky said that she would like the Center to advocate for people with mental illness through partnerships with other organizations. The Center will provide a safe haven for people who have had difficulties, and

a sense of community. The idea is to get people involved in the community and gain more mastery over their own lives.

The Center's hours are currently Tuesdays from 4 to 7 p.m. and Saturdays from 1 to 5 p.m. Many programs, such as day treatment and psychiatric rehabilitation programs, are open only until 3:30 p.m.; and usually not on weekends or holidays. This center will fill in some of the gaps of evenings and weekends. Some of the preliminary data from consumer interest surveys shows that many people also prefer afternoons and evenings to socialize.

The Silver Spring Drop-In Center is located on the second floor of a six-story building in downtown Silver Spring, Maryland, also at 700 Roeder Rd. The center is metro and bus accessible. It is next to a county parking garage which costs 50 cents an hour; parking is free on weekends. The Center first opened Tuesday, February 8<sup>th</sup>, and was well attended, mostly by people already in day programs at Affiliated Santé Group. For more information on Center membership and/or to volunteer, please contact Miriam Yarmolinsky at (301) 589 – 2303 ext. 311 or e-mail [myarmolinsky@santegroup.org](mailto:myarmolinsky@santegroup.org) to arrange for an interview.

**NAMI WALKS** ★ ★ ★ ★ ★ ★ ★ ★  
FOR THE MIND OF AMERICA

**The Walk Registration Forms are here!** If you would like to walk, please call or e-mail the

NAMI office and we will send you a registration form. If you would like to have your own team (even two people can be a team), please let us know. If you can't walk, please consider making a donation to support our efforts. Make checks payable to “NAMI Maryland” and send them to our office in Kensington.

## LEARNING ABOUT BIPOLAR DISORDER IN CHILDREN

In early 2000, Dimitri Papolos, MD, and Janice Papolos published a surprise best seller called "The Bipolar Child." [copies of which are available in the NAMI Library] The book was groundbreaking in every sense of the word, from its deceptively simple title that sent a wake-up call to the psychiatric community to its heart-wrenching case studies that validated the pain and heartbreak of many thousands of parents.

From his years in research and clinical practice with families and their youngsters experiencing bipolar disorder, Dr. Papolos now names a core set of three symptoms and behaviors – basic to all humans, "but they're writ large," with these children.

1. Episodic and abrupt transitions in mood accompanied by rapid alternations in levels of arousal, emotional excitability, sensory sensitivity and motor activity. Four mood states are identified as mania/hypomania, anger, depression and anxiety. Mixed episodes "are associated with overlapping features of the primary mood states." (Present most days over 12 months, causing fundamental impairment in one or more settings.)

2. Poor modulation of drives. This includes aggressive, sexual, appetitive and acquisitive, resulting in behaviors that are excessive for age or context. (Present most days over 12 months, causing fundamental impairment in one or more settings.)

3. At least four of the following disturbances (present over 12 months): Excessive anger and oppositional/aggressive responses. (These kids have trouble responding to "no," waiting their turn, or

adopting to changes in plans or routines, among other things); poor self-esteem regulation (They can go from a sense of being the most powerful person in the world to being the worst person in the world.); sleep/wake cycle disturbances; low threshold for anxiety; low threshold for arousal (They can go from zero to sixty in a nanosecond and back again into a state of complete boredom); executive function deficits (including mental, emotional and motor activity inflexibility).

### SLEEP

Kids with bipolar disorder often find themselves caught in a deadly cycle of being unable to arouse themselves in the morning and being too revved up to go down for the night. According to Dr. Papolos, kids with bipolar disorder tend to experience sleep inertia, where they feel literally chained to their beds in the morning. They generally come alert at about 11 o'clock, and as the day goes on they get more and more energy, until about four in the afternoon when, as one parent told Dr. Papolos, "the rocket thrusters go off." Over the course of the evening, the kid is still accelerating, making re-entry and bedtime a virtual impossibility. They tend to be night owls – when they don't have to get up for school the next day they sleep, later and later in the day.

But sleep is generally far from a relief. Kids with bipolar disorder tend to experience a range of sleep disturbances that include night terrors and nightmares – often with images of gore and mutilation and themes of bodily threat and parental abandonment – sleep walking, teeth grinding and bed wetting.

### PROBLEMS IN THE HARD DRIVE

Executive functions seem to be one of the least studied and most often overlooked contributors to academic and behavioral problems in children. These are the central processes that are most intimately involved in getting organization and order to our action and behavior. The frontal and prefrontal lobes are the seat of these activities, the very last part of the brain to evolve. Evidence suggests that the circuitry here may not be fully intact for kids with bipolar disorder. Some psychiatrists and neuropsychologists think many of them have disorders of written expression. In verbal communication there can be forgiveness for going off on tangents, whereas in writing there isn't. Starting in 6<sup>th</sup> and 7<sup>th</sup> grades, students are graded on how to write essays, a highly difficult and stressful task for them. The schools likely don't pick up the problem; the kids become oppositional and are viewed as having behavior problems.

At the same time, these kids lack the ability to organize things. Their rooms become landfills; their backpacks black holes. As Janice Papolos says, parents have to act as their child's frontal lobes. But while other kids are becoming autonomous in their journey to adulthood, parents of adolescents with bipolar disorder continue to organize their lives. This protracted dependency predictably results in acrimony in an already strained relationship.

*Notes from "McMan's Depression and Bipolar Weekly," October 20, 2004, Vol. 6, No. 25.*

### NEW ACQUISITION TO THE NAMI VIDEO/DVD LIBRARY

The NAMI lending library has increased by at least one very useful DVD this month! The Juvenile Bipolar Research Foundation contributed a copy of "Educating and Nurturing the Bipolar Child," a recorded presentation by Janice Papolos, co-author - with husband and psychiatrist Dimitri Papolos - of the popular book The Bipolar Child. This presentation was part of the fall 2004 JBRF conference in New Jersey. Material includes "cutting-edge information and powerful strategies for teachers and parents to enhance the bipolar child's ability to learn and to experience academic and social success." The DVD was shown at the February NAMI Child/Adolescent Family Support Group meeting and was very well received. It provided an effective launch for group conversation, sharing and mutual support. [Playing time = about 45 minutes]

The Juvenile Bipolar Research Foundation (JBRF) website has a wealth of information for parents, clinicians and researchers, from taking part in surveys to participating in studies to sharing clinical insights to providing diagnostic input. It also outlines other areas of its research program, including neuroimaging and neuroendocrinology: <http://www.jbrf.org>

## Did you know?

**NAMI MC has over 150 volunteers** working as Office and Thrift Store helpers, Support Group Facilitators, Family to Family and Visions for Tomorrow teachers, Peer-to-Peer mentors, In Our Own Voice presenters. Volunteers also serve on the advocacy, membership, outreach, fundraising and education committees and help with special events.



Won't you become a NAMI volunteer? Here are some current volunteer opportunities:

1. Organize a walk team and walk with us on May 1st!
2. Make calls to spread the word about our educational programs in March and April (see insert)
3. Provide written or oral testimony before the Maryland General Assembly regarding your recent personal experience of difficulty in obtaining appropriate housing for a loved one with a mental illness.
4. Serve on the NAMI MC Board or suggest someone who might like to serve.
5. Write a short review of one or more videos or books in our library.
6. Into party planning? Help us plan our Heroes Dinner on October 20, 2005.

### Welcome New Members:

Janice Armentrout    Sylvia Cabrera  
Jose Chamorro        Norman Peterson

## Share your Personal Experiences with Electroconvulsive Therapy (ECT)

Kitty Dukakis is collaborating with Larry Tye, former Boston Globe medical writer, on a book about ECT. Part of the book will look at Dukakis' personal experiences with ECT over the last four years. The remainder of the book will look at the experiences of scores of patients nationwide who have had ECT, for better or worse. If you are willing to discuss your ECT experiences with Mr. Tye or know of someone who is, please contact him at [ectbook@aol.com](mailto:ectbook@aol.com)

## Only a phone call away...



Montgomery County Department of Health and Human Services (HHS) has a new phone number for easy access to information about all HHS programs.  
**240-777-1245**

The U.S. Dept. of Health and Human Services' Substance Abuse and Mental Health Services Administration (SAMHSA) has launched the  
National Suicide Prevention Lifeline  
**1-800-273-TALK**

**Bethesda Beatnik's Dinner Club** for people with psychiatric disabilities, their families and friends

**Next Dinners:**  
**March 9 and 23, 6:30 pm**  
**Outback Steakhouse, Bethesda**  
For more info, call "Beatnik Pete" Warner  
301-279-2578.

### Correction:

In the February issue of the NAMI News, we neglected to credit Rochelle Banta for her excellent article about services for the homeless mentally ill. In addition, Rochelle has been interviewing providers throughout the county and her interviews will appear in the NAMI News in the coming months. **Thank you, Rochelle!**

Thank you to all of the members and friends of NAMI MC who gave generously in the second half of January 2005.

### Contributor (\$100-\$249)

Milton Herman, *in memory of Barry Buschell*  
Aspen Systems Corporation

### Friends (up to \$99)

Dr. & Mrs. Joseph Connor  
Phyllis Dickler, *in memory of Selma Carroll*  
Gary & Margy Lawrence, *in memory of Selma Carroll and Larry Cherkas*  
Carole Schulman, *in memory of Barry Buschell*  
Steve Mathis, *in memory of Doug Williams*  
and to support the *In Our Own Voice* program  
Stacy Weiner



**United Way**  
Campaign Participant

We would like to thank everyone who contributed to NAMI MC (#9273) during the Fall United Way/CFC Campaign.

In the last campaign we received over \$7500 in contributions through the United Way!

Although the United Way does not release names of donors until later in the year, we would like to acknowledge each and every donor. Your dollars will help us to further our mission to help those with mental illness and their families.

Young person with mental illness would like to start an informal social group for consumers ages 18-35. If you are interested, please contact the NAMI office at 301-949-5852.

### NAMI MC Wish List:

- Color printer
- DVD player
- Large (27") screen TV
- Modular furniture
- Conference table
- Set of matching conference room type chairs (at least 8)
- Laptop computer



# NAMI Montgomery County

*The County's Voice on Mental Illness*

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Web: [www.namimc.org](http://www.namimc.org)

Thrift Shop: 301-949-5731



United Way  
Campaign Participant

#9273

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## NAMI Montgomery County Board of Directors

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*Child & Adolescent Program Coord.*  
Frances Shuping  
*Family-to-Family Program Co-ord.*  
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*In Our Own Voice Program Coord.*  
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*Peer-to-Peer Program Coordinator*  
Elizabeth Salazar  
*Latino Outreach Coordinator*  
Leah Nichaman *Office Administrator*  
Micki Stern *Bookkeeper*  
Rhona Sollod *Thrift Shop Manager*

Become a part of a 25-year old grassroots organization — with over 220,000 national members and 800 members in Montgomery County alone.

### Membership Benefits:

- Support from people who understand
- Concurrent membership at local, state and national NAMI levels
- Our informative monthly affiliate newsletter
- Our influence in advocacy at County, State and Federal levels

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
E-mail: \_\_\_\_\_

### Membership Dues:

\_\_\_\_\_ New Membership \_\_\_\_\_ Renewal  
\_\_\_\_\_ \$35 Basic \_\_\_\_\_ \$50 Sustaining \_\_\_\_\_ \$55 Professional \_\_\_\_\_ \$100 Patron  
\_\_\_\_\_ \$1000 Lifetime \_\_\_\_\_ \$3 Open Door (Limited Income)

Additional contribution \$ \_\_\_\_\_  
TOTAL \$ \_\_\_\_\_ (dues and donations are tax deductible)

\_\_\_\_\_ Check enclosed

\_\_\_\_\_ Please charge my Mastercard/VISA:

Acct# \_\_\_\_\_ Expiration Date \_\_\_\_\_

Make check payable to: **NAMI Montgomery County (MD)**

**10730 Connecticut Ave, Kensington, MD 20895**

Please \_\_\_\_\_ Parent of Adult \_\_\_\_\_ Child of Mentally Ill Parent \_\_\_\_\_ Sibling  
Check: \_\_\_\_\_ Consumer \_\_\_\_\_ Parent of Child under 21 \_\_\_\_\_ Spouse  
\_\_\_\_\_ Friend \_\_\_\_\_ Mental Health Professional \_\_\_\_\_ Other