Dear Families, Friends, and Neighbors,

You continue to be in our thoughts as the Covid-19 virus keeps us apart physically. Our hearts go out to those who have lost loved ones and those who are sick. We thank all the workers who are risking their own health to take care of our family members and to keep us afloat.

Calls to our helpline have increased tenfold. We’re hearing from DC area folks with mental illness and their families and from out-of-town families whose relatives with mental illness have traveled to DC because it is the seat of power. Every caller is concerned about finding treatment and services for themselves or their loved ones during this time of uncertainty. We are in uncharted waters.

We are advocating for safe and accessible services on all fronts, wherever you may be living at this critical time—at home, in a group home, homeless shelter, hospital, or jail. We are advocating for personal safety for the people providing services to you—family members, care providers, or case managers.

NAMI DC and other DC mental health advocates have written to the Council, Mayor, and key administrators urging non-discrimination in access to medical treatment for those with any disabilities, including mental illness. Our next letter will push for budget support for critical services and for the needs of health care workers and family providers.

We want to hear from you. You can help us with these efforts: call 202-546-0646 or email namidc@namidc.org to tell us which of your mental health services are working for you and which are not. And tell us about any other help you may need to stay safe.

We’ll keep sharing ideas about how to stay safe and where to get important necessities—like food and phones—during these anxious, unsettling times.

Finally, if you are fortunate enough to be less financially hurt by the current situation, you can help NAMI DC keep working. Just go to NAMIDC.org to DONATE.

We look forward to hearing from you and to seeing you when the time comes again.

Jean Harris, President
Maximizing the Power of Treatment

By David Thurston

As most of you will know, NAMI DC hosts a weekly support group for people with mental health diagnoses as well as for their family and friends. [Note: Groups are suspended during DC’s social distancing restrictions.] On Wednesday nights, we often discuss what it means to understand that recovery is a process. Mental health recovery should be a deeply active process requiring the full engagement of a person seeking treatment, and often their circles of support.

The importance of viewing mental health treatment as a dynamic in which everyone is engaged in co-creating a positive outcome can hardly be over-emphasized. When those of us with diagnoses approach psychiatry or therapy passively, we tend to get poor outcomes, muddling through treatment with our providers assuming we are doing ok if we are at least not psychotic.

It is crucial not to accept mediocrity. For almost five years, that was the space I lived in. I disengaged from friends and social movement organizing, and found that I could occupy most of my time playing spades on the internet. My brother and sister-in-law had a baby boy, and I had to be dragged to the hospital to see him.

When we accept mediocrity, we get mediocrity. We get psychiatrists over-medicating with intense anti-psychotics just to keep the most acute symptoms in check. We wander through sessions of therapy avoiding the core issues that may be holding us back. We disconnect from communities of support that can help empower us all to aspire to live full and healthy lives.

We must allow ourselves to trust our therapists and psychiatrists, while knowing that we run the risk of being burned if a provider lets us down. In such cases, we can always find someone new, and learn to once again move at the speed of trust.

I find that I get the most out of my sessions when I make tight bullet-pointed notes before any session. Thinking through what you want to bring to the table is a valuable exercise. It also challenges your providers to step up their game. Invariably, I have found that I get the best medication adjustments and therapy sessions when I do just this.

During my five-year depression, I survived an incredibly frightening suicide attempt. It took years for me to recover my will to live a full life. Today, I work primarily as an arts organizer and ad-hoc mental health navigator in social justice organizing in DC. I share this on the off chance that appreciating the low I emerged from might give a reader hope about achieving subliminal or suppressed aspirations.

Living with an acute mental health condition does not mean we have to give up our dreams and creative aspirations. By maximizing our recovery, we maximize our ability to be present for friends and family, and to take on meaningful projects to contribute to reshaping our complicated world.

Don’t let the pandemic distract you from our local elections!

Five DC Council seats are at play in the June 2 primary. Council members approve the city budget, legislate services, and oversee agency performance.

Stay safe. Vote from home this year with a mail-in ballot. And keep mental health services in mind as you vote.

Request a mail-in ballot before May 26
• online at www.vote4dc.com/ApplyInstructions/Absentee,
• via a mobile app (Vote4DC), or
• by calling (202) 727-2525 or (202) 741-5283.

Not registered? Register now! It’s easy at https://dcboe.org/FAQS/Voter-Registration
Beyond Medicine: New Therapies for More Fulfilling Lives

Many people with lived experience of psychosis find it hard to connect with others or to manage a job even after disruptive symptoms, like hallucinations, have been relieved through medication.

Some may have difficulty concentrating and remembering, “reading” others’ emotions and following social cues, thinking and responding quickly, or making sound decisions—skills that enable us to feel at ease with those around us, build relationships, and engage successfully in our life pursuits.

Dr. Matcheri Keshavan, winner of NAMI’s 2019 Research Award, has devoted much of his career to exploring the changes in the brain that often make life more difficult for people who have experienced severe mental illness or other physical conditions that affect mental functioning.

In his presentation at the Research Awards program, Dr. Keshavan explained that the brain is “plastic”—it can change throughout a person’s life. For example, brain activity related to a function (like speech) can be moved to a different location in the brain; the proportion of grey matter in the brain can change; and synapses, the brain’s electrical connections, can strengthen or weaken over time. Under the right conditions, the brain can make new connections that compensate for losses.

For more than two decades, researchers have been investigating how this brain plasticity can be harnessed and directed to improve thinking skills. Dr. Keshavan’s studies have focused on schizophrenia, and especially on early interventions in this illness. One product of this ongoing brain research is cognitive enhancement therapy, in which life skills are developed through brain “training” and social education.

Processing speed, decisionmaking, and recognition of emotions in facial expressions are some of the areas that the cognitive enhancement therapy can improve. In practice, the therapy has two components:

- Brain training using specialized computer software—specially designed computer games—to encourage the formation of new synaptic connections.
- Group social practice and activities to improve social skills and fluency.

The treatment shows especial promise with early intervention. While many medical interventions have failed to meet their promise in the past and caution is surely warranted, the possibility of improving the prospects and enriching the lives of people recovering from serious mental illness is exciting indeed.

**Future Directions?**

“Are we ready to prescribe cognitive training to patients? It is one thing to have a highly promising evidence base emerging from clinical trials; it is another to know how to translate those findings into real-world treatment settings where models of implementation and reimbursement for cognitive remediation and/or cognitive training approaches are few and far between. Tools and education for clinicians that can allow them to assess and understand patterns of cognitive dysfunction in their patients are needed.

“Cognitive training is a highly scalable and low-cost intervention, provided knowledgeable clinicians and staff can offer the necessary degree of support and guidance to patients. Ideally, cognitive training can be offered either as stand-alone cognitive treatment or as part of a broader enriched “remediation” program, depending on the needs of the individual; ….”

*Psychiatric Times, 36:3, Sophia Vinogradov MD*
Stress and Anxiety Rising? Reach Out for Support!

Mental Health Supports

In a psychiatric emergency  If anyone is in present danger—call 911—tell the dispatcher you have a psychiatric emergency and need a trained psychiatric crisis intervention responder.

For intervention in a psychiatric crisis without present danger in DC, call 202-673-9319. Available 24/7.

In a personal crisis  National Suicide Prevention Lifeline—24/7, free and confidential emotional support.

- Call 1-800-273-TALK (8255)
- Or chat: https://suicidepreventionlifeline.org/chat/
- Or text HELLO to 741741
- If deaf or hard of hearing, TTY at 1-800-799-4889

For peer support  Free and confidential, Monday–Friday, 10 am–6 pm ET.

- Call the NAMI Helpline 800-950-NAMI
- Or text NAMI to 741741

For mental health assessments and services  In DC, call 1-888-7WE-HELP (1-888-793-4357)

Essential Services Provided Under Covid-19

DC Health Link has a special enrollment period so someone without health insurance can get coverage now. If you live in DC and are uninsured, call 855-532-5465 for help.

Visit the city’s one-stop shop for services and guidelines during this crisis: https://coronavirus.dc.gov/.

- Click on “Recovery” for unemployment resources.
- Click on “Food” for Student Meal Sites, Meal Deliveries for Seniors, Supplemental Nutrition Assistance Program, WIC, special grocery hours, etc.
- Click on “Resources” for information about childcare, health guidance, learning at home resources for families, and under “Public Resources” for covid-19 guidance.

Free Outdoor Meal Services To Go

To check for current information, call the COVID-19 Hotline (202-576-1117).

Bethany Women’s Day Center (1333 N St NW), bagged meals, 7:30–8:30am and 12:00–12:30pm

Downtown Day Services Center (1313 New York Ave NW, in the park), Monday–Friday, bagged lunches, 11:00am–1:00pm

Loaves & Fishes (St. Stephen, 1525 Newton St NW) Saturday and Sunday, noon, bagged lunches

McKenna’s Wagon Service Pre-packaged dinner, daily, two locations:
5:15–5:45pm, corner of 2nd and H St NW
6:15–6:45pm, corner of 15th and K St NW

Miriam’s Kitchen (2401 Virginia Ave NW), daily.
Breakfast: 7–8am; Dinner: 4:30–5:30pm

National Community Church
Ebenezer’s Coffeehouse (201 F St NE), daily, boxed lunches, 1–3pm
DC Dream Center (2909 Penn Ave SE), Monday–Friday, boxed lunches, 12pm–4pm

So Others Might Eat (SOME) (71 O St NW) 8–10am in the parking lot, under the awning, daily, meal bags, each containing a hot breakfast and a cold lunch.

Mutual Peer Support Phone Tree!

Amidst this COVID crisis, NAMI DC is following best practices and not holding face-to-face support group meetings. In this moment, a few of us are setting up a weekly phone tree option for anyone who would like a way to stay connected.

This is a voluntary peer-to-peer support activity, and not an official NAMI DC initiative.

If you would like to get a call once a week, or if you would like to volunteer to make a few calls, please email david.thurston78@gmail.com.

If you are caring for someone with covid-19 at home, or for yourself, search online for “treating-covid-19-at-home mayo clinic” for guidance.
In Our Own Voice—Fighting Stigma
Sarah Strenio and Janiene Ausbrooks returned to American University on January 6 at the invitation of Police Captain Kevin Barrett, University Police and Emergency Management, to provide IOOV as part of the University’s police cadet crisis intervention training.

On January 14, Tim Hider and Janiene Ausbrooks presented IOOV to staff at the U.S. Government Accountability Office. The program was hosted by Cyndi Wagner, LPC, LCPC.

NAMI DC board members Susan Ousley, Secretary, and Jean Harris, President, attended “Agenda for Change: Unite. Connect. Act.,” a program addressing the lack of access to effective, affordable mental health and addiction treatment.

The event brought together a panel of policy makers, philanthropists, and advocates to highlight collaborative solutions to improve America’s struggling mental health and addiction care systems. The gathering was hosted by The Kennedy Forum on February 6 in the Russell Senate Office Building and co-chaired by former U.S. Representative Patrick J. Kennedy (D-RI) and former U.S. Senator Gordon H. Smith (R-OR), founders of Mental Health for US. NAMI’s CEO, Daniel Gillison, was among the speakers. The program is available at https://www.youtube.com/watch?v=mBaC63pvcnk.

Implementing the Medicaid 1115 Waiver Behavioral Health Transformation Demonstration
At the invitation of the DC Department of Health Care Finance, a group of six NAMI DC members met with representatives of DHCF and the Department of Behavioral Health Adult Services on February 28. A presentation outlined the progress of implementation, which is well underway. The meeting allowed an exchange of concerns and ideas about how these funds will be utilized to improve and expand services.

DHCF administers and oversees DC’s Medicare program, Medicaid program, and related quality assurance activities. DBH Adult Services staff manage the Mental Health Rehabilitation Services System, which provides mental health treatment in the community.
Now You’ve Recovered

© Charles A Cino

When you recover, what will you do?
When you recover, will you still be you?
Will you be stronger, will you be new,
When you recover from what you’ve been through?

Can life get better than it was before?
Will you realize your dreams and improve your score?
Will people still remember your name,
Or will they forget you because they’re ashamed?

Life in recovery may not be the same.
The rules may have changed in this brand new game.
You can pick up the pieces and make a new start,
And courage and hope keep you from falling apart.

The world all around you seems different and changed.
Things that once were now seem out of range,
But you can recapture your life and fulfill
The dreams that were lost when you took ill.

The journey to wellness takes time and is long,
And those that get well are exceptionally strong.
For depression can kill, but you have survived.
Your goal to recover has kept you alive.

Now you’re recovered, what will you do?
You suffered and conquered and saw it through.
Back from the black and abyss of despair,
It is time to move on; it is time to care.

Thank you for having faith in me

by Nicholas Gordon

Thank you for having faith in me,
However hard it was.
An illness is compounded by
No one coming near.
Kindness can take courage when
You see what mania does.
Opening your arms to me
Unravels my own fear.

Copyright by Nicholas Gordon

For Edith Crouch (1944–2019) and
Others We Have Lost

by Jon Yoder

Where were you from, Edie,
Where have you wandered?
Was it Maryland, Virginia,
Or even Ohio
Where a brother lived?
We knew you so long
Yet cannot find your tracks through life.
Your soul is scattered all over.

You walked frail through this world
But with your head up, undaunted.
In talk you had a steel will
None of us could resist
That spoke of what you’d been through:

A mother with bipolar, perhaps.
Foster homes, homeless shelters,
Mental hospitals, a heart problem,
Paranoia, incontinence.
Living with nearly nothing.

A picture. I remember, now so long ago,
A picnic at the National Arboretum,
A pink and purple hanky on your head
Your right eye closed,
A fierce look in your left eye,
At peace there under the trees.

And at the Aquatic Garden,
Standing near my mother
As I capture you two
In that green extravaganza,
Your camera in your hand.
Again your right eye closed,
Neither of you smiling,
Two tough women in that place of lotuses.

And the time you slipped away, caught the bus
To see your brother, and then on
To New York City, to start afresh, excited,
Escaping the net of the mental health system
Maybe to be a few hundred miles
Nearer your estranged daughter,
Dreaming a new life where you had lived long ago.

Then, in December, you slipped away again,
Dropped like a stone in a dim hallway,
Home health aide at your side.
This time you did not return.

I will always remember your joy, your smile,
Your exclaiming, at the smallest bit of luck,
"Isn’t that wonderful!"
I will always remember our talks.
I will always remember you quoting the Bible.
I will always remember you singing hymns in the car.
Wherever you’ve gone, please stay near.

I am not alone in my tiredness or sickness
or fears, but at one with millions
of others from many centuries,
and it is all part of life.
Etty Hillesum

Mental Health Conditions and Related Health Risks: An Online Survey

Knowledge of Metabolic Risk in People with Mental Health Problems

My name is Margaret Knight and I am a Psychiatric Clinical Nurse Specialist and an Associate Professor at the University of Massachusetts Lowell. I am working with two colleagues from McLean Hospital and we are asking if you would participate in an on-line survey.

We are seeking people to participate in a study titled “Knowledge of Metabolic Risk in People with Mental Health Problems.” This study is being conducted on behalf of the University of Massachusetts Lowell and McLean Hospital Department of Nursing. The survey is for people who have been diagnosed with a mental health problem and for people (family or significant others) who are involved in the health care of someone who has a mental health problem.

We are interested in finding out how much people know about the health risks related to their mental health condition and its treatment.

The survey asks questions about knowledge related to cardiovascular health and diabetes and questions related to the monitoring of physical health by doctors and nurses who provide care to you. The survey is anonymous; and should take about 15–20 minutes to complete. You must be 18 years or older to participate.

The results of this survey will be used to inform psychiatric and medical providers about gaps in education and knowledge you need to stay healthy. This survey may also inform you about questions you need to ask your providers about your health status and how to improve your health.

To participate, go to
https://umasslowell.co1.qualtrics.com/jfe/form/SV_80MfUYLoMqduzvD

Thank you in advance.

Margaret Knight PhD, PMHCNS; Paula Bolton MS, APRN; Lynne Kopeski MSN, PMHCNS-BC

If you have any questions please contact
Margaret_Knight@uml.edu 978-934-4471
Staying Well in Difficult Times

It is normal, of course, to feel sad and afraid in times of trouble. But remember, powerful antidotes to fear and anxiety are all around us. These old standbys help us keep body, mind, and spirit healthy and strong, as they have done throughout history. And today, many free opportunities to connect with others are available online.

Music — Making it or just enjoying it, often

Dance — What is more Invigorating? Or learn tai chi or yoga; stretch, walk, run

Learning — Engage your mind with new knowledge and ideas — a book, a free online university course

Cooking and baking — Make old dishes for comfort, new ones for adventure

Mindfulness — Be here now — spring is calling you

Kindness — Take care of yourself and others

Reaching out — Family, friends, and neighbors, and NAMI DC at 202-546-0646. Reach out.