Walk with us for mental health

Join us for NAMIWalks Your Way: Delaware United.

We’ll cheer on each other while raising funds to drive NAMI’s free, top-rated programs, and build a community of hope.

The main walk location is in New Castle County at Bellevue State Park, Wilmington in the Figure 8 Barn. Check-in begins at 9:30 a.m. May 7. Pop-up walk locations include:

- Delaware State University in Kent County, check-in at 10 a.m.
- SUN Behavioral Health in Sussex County, check-in at 8:30 a.m.

Join us for pre-walk activities such as: mental health resource fair, food trucks, a cappella group performance, face painting and more family fun.

SPONSOR

3 reasons to become a NAMIWalks 2022 sponsor

Sponsorship opportunities are available for NAMIWalks 2022. By being a sponsor, your organization can:

1. Promote awareness of mental health and reduce stigma.
2. Raise funds for NAMI’s free, top-rated mental health programs.
3. Build community and let people know we’re in this together.

We need you and your leadership. Download sponsorship: namidelaware.org/namiwalk22.

REGISTER | SPONSOR: namidelaware.org/namiwalk22
Dear Friends,

Spring is fast approaching! For many of us, it’s a welcome time of warmer weather, nature coming alive and an opportunity to enjoy the outdoors. One way you can enjoy the outdoors is to take advantage of our NAMIWalks Delaware United event on Saturday, May 7, 2022. We will have events in all three counties, and we would love to have you involved. You can even join us virtually to support the walk by raising awareness and fundraising to continue our critical services to the community.

Please also join us this spring as we strive to eliminate the stigma associated with mental illness by raising awareness! Support us in May for Mental Health Awareness Month and during NAMIWalks Delaware United.

With gratitude,
Josh

Joshua Thomas, Ph.D.
CEO/Executive Director

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Lauren Evans | Events Coordinator

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Merton Briggs | Senior Director of Housing & Facilities
Marie LaFevre | Senior Housing Manager
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Jenn Ford | Assistant Director of Advocacy & Education, Education & Support Programs Focus
Sue Mulhern | Assistant Director of Advocacy & Education, Corporate, Organizational & Faith Community Partnerships Focus
Nyemade Boiwu | Fellowship Program, Equity & Inclusion
Jacqueline Contreras | Multi-Cultural Engagement Coordinator
Estevan Garcia | Multi-Cultural Engagement Coordinator
Wesley Ingram | Programs Manager
Gregory Nemes | HelpLine Coordinator

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All organizations want engaged, healthy, motivated employees, yet we frequently miss signs and symptoms of potential mental health conditions in colleagues. Sometimes, people are uncomfortable sharing their symptoms or situation at work for fear of judgment or career setbacks. When unaddressed, mental health challenges for the person, or their family, can upend employee behavior and productivity.

As someone who spent almost 35 years working in corporate environments with undiagnosed mental health conditions (until 2017), I experienced the “before, during and after” diagnosis processes. I recall occasions when I was not adding as much value as I’d wanted because I couldn't focus, I felt physically unwell and my enthusiasm had waned.

Grow and understand
I was very fortunate to work for an amazing corporation that allowed me time off to grow and understand how to live with my chronic anxiety and depression. I discovered that my medical diagnoses are much more common than I imagined and that “chronic” does not mean always active or detrimental to my personal and professional life. In fact, my diagnosis and my journey are among the most hopeful and beneficial experiences of my life.

Once I returned from medical leave, I decided to share my story. I found many people and managers who had similar experiences, understood my initial hesitancy to share, and actively supported me to partner with NAMI Delaware to create a Mental Health Awareness and Advocacy at Work program. Please know that not everyone will need time off and, if I had gotten help sooner (early intervention is SO important), I might not have had a medical crisis.

Employee wellbeing
NAMI Delaware is here to increase understanding of mental health conditions; stimulate open, productive conversation; educate; and connect your organization to resources that support your workplace culture and employee wellbeing.

We offer programs that:
1. Teach how to recognize potential signs and symptoms in family and friends, and the importance of early intervention
2. Focus on differing experiences for children, youth, young adults and adults with diagnosed and undiagnosed conditions
3. Share stories from people “who have been there”
4. Provide support groups for family members and for peers as well as specialized groups for underrepresented communities
5. Deliver customized presentations in English and Spanish. Topics include:
   • Let's Talk: Mental Health and Self-care in the Workplace
   • Feeding Your Flame: Addressing Signs of Burnout
   • Workplace LGBTQ+ Allyship: Importance and Tips
   • Let's Talk About the Stigma of Mental Illness

NAMI Delaware also has certified teachers for Adult and Youth Mental Health First Aid © and QPR © (Question, Persuade, Refer), a suicide prevention seminar.

NAMI Delaware would like to partner with you to help end the stigma.
Contact Sue Mulhern, SMulhern@namide.org for more information.
NAMI Delaware adds equity and inclusion fellow, welcomes Nyemade Boiwu

NAMI Delaware announces the addition of Nyemade Boiwu as senior fellow for equity and diversity.

Nyemade is an award-winning speaker, writer and digital content expert with extensive experience creating training programs for corporations and nonprofit organizations. She was named NAMI Delaware's 2020 Volunteer of the Year.

“Continuing to work with NAMI Delaware brings me great joy,” she said. “I have dealt with my personal demons and am grateful to share my skills with any – and all – people in Delaware who face mental health challenges, for which we can be a tremendous resource. Equity, diversity and inclusion are key components to making our entire society healthier … and I’m excited and committed to devote my energy to realizing that goal.”

Vision and wisdom
Nyemade, born in Liberia and raised in upstate New York, brings a wealth of personal and professional experience to this post. For 14 years, she held leadership roles at a major financial institution where she led employee network groups, including Toastmasters and the Diversity and Inclusion Network.

“We couldn't be happier to welcome Nyemade to our team,” said Dr. Joshua Thomas, executive director of NAMI Delaware. “She not only has the life experience, but also the vision and wisdom to develop programs with inclusion and equity as her main goal.”

In this particularly difficult time, where diverse communities have been hard-hit with mental health concerns, she will ensure our clients have resources to help them through their struggles and reach a sense of balance.

In addition to her financial industry background, Nyemade has been a columnist for National Black Guide and a host and guest blogger for various podcasts.

NAMI coordinates veterans training

NAMI Delaware coordinated another successful Veterans Response Team (VRT) training with partner agencies New Castle County Police Department and the Wilmington Veterans Affairs Medical Center Police Department on Jan. 11 and 12.

VRT training is an opportunity for officers who have completed the 40-hour Crisis Intervention Team training and who are veterans. This 16-hour training teaches military veteran first responders effective and peaceful strategies to help fellow veterans who may be experiencing mental health crises. Using their shared military experiences, VRT officers learn to de-escalate these potentially tragic encounters and help find peaceful solutions.

The 11 officers trained in January, representing departments across the state, increase Delaware’s VRT ranks to 98.
In Delaware – like the rest of the country – our children are in crisis.

Delaware has experienced a marked rise in the need for psychiatric services to combat childhood mental health and behavioral issues either caused or exacerbated by COVID. Making the situation worse is the sobering fact that fewer doctors are training for and practicing child psychiatry.

Hope, however, is on the horizon, compliments of the Delaware Child Psychiatric Access Program (DCPAP).

Seeking treatment
For years, NAMI Delaware has seen a trend of more families seeking treatment, support and advocacy for childhood mental health conditions. The suicide rate among young people is rising in Delaware, as it is nationally. The pandemic has made this situation even more concerning, substantially increasing the number of families seeking services and support for their children and adolescents.

“COVID has created a situation where kids aren’t able to be kids,” said Dr. Richard Margolis, DCPAP’s medical director. “When their families are stressed, which they certainly have been during the pandemic, kids are stressed. And when kids are stressed, their families are stressed. It really is a vicious cycle.”

Today, only about 20 active child psychiatrists serve Delaware’s population of more than 255,000 children under age 18, mirroring a national paucity of child psychiatrists. Many of these specialists are dedicated to hospital work and are often unavailable for outpatient or consultative services.

Because childhood mental health issues can manifest in several ways, most pediatricians and primary-care providers don’t have the resources to thoroughly examine and address these issues in a timely manner.

Access to services
That is why the state of Delaware, Division of Prevention and Behavioral Health Services developed DCPAP, which gives pediatric primary-care providers access to child psychiatry tele-consultation and educational services to provide better and more prompt treatment for their patients.

DCPAP allows doctors to address their patients’ care without waiting for limited specialized services. It also offers pediatric primary-care providers (pediatricians, family physicians, nurse practitioners and physician assistants) training and tools that help them better understand and treat patients who show mild to moderate behavioral challenges.

Through DCPAP, four leading child psychiatrists provide consultation and training services to any registered pediatric primary-care provider. Requests for a consultation are answered within 24 hours.

Register for training
More than 275 pediatric primary-care providers have registered on DCPAP’s website. NAMI Delaware encourages any pediatric primary healthcare practice to register and take advantage of DCPAP’s training programs, including the Virtual Office Hour where information can be shared in a communal setting via Zoom. We are also excited about DCPAP’s broader training programs for other mental health professionals, social workers and educators who are often the first to confront a child's mental health challenges.

NAMI Delaware is convinced that innovative programs such as DCPAP can help better serve the increasing number of families dealing with a child’s or adolescent’s mental health needs.

DCPAP was made possible through a five-year $2.225 million grant from the federal government, and the state hopes to continue the program when the grant expires. DCPAP believes that state legislation and/or pilot projects it has underway — such as collaborative-care billing through insurance providers, including Medicaid — will be the key to DCPAP’s long-term stability.

“It’s our goal to become indispensable,” Dr. Margolis said.

Learn more at DCPAP’s website
kids.delaware.gov/dcpap

A critical lifeline for Delaware children and their doctors
Meet our three new interns

Mercy Baffour volunteered with us in 2018 and has returned as an intern. She is passionate about mental health literacy and advocacy, particularly peer empowerment and access to patient advocates. She works in data and software engineering.

Elizabeth Clendaniel is a recent graduate of University of Delaware with a bachelor's degree in psychology. She wants to increase her experience working in mental health and learning about Delaware's resources. During her internship, she hopes to network with others in the field.

Our doctoral Intern, Diana Agnetti, is a Licensed Professional Counselor of Mental Health (LPCMH) working as a mental health counselor at Indian River School District in Selbyville. She is pursuing a doctorate in social science and prevention science from Wilmington University and is expected to graduate in December.

People on the move

Rita M. Landgraf
NAMI Advisory Board

President Joe Biden has nominated Rita M. Landgraf to be assistant secretary for aging in the U.S. Department of Health and Human Services. Landgraf joined the University of Delaware’s College of Health Sciences in 2017 as Professor of Practice and Distinguished Health and Social Services Administrator in Residence. She also serves as director of the UD Partnership for Healthy Communities, a cross-college, cross-state initiative.

From 2009 to 2017, Landgraf served as secretary of the Delaware Department of Health and Social Services under Gov. Jack Markell. She is also the former president of AARP Delaware, the former executive director of the National Alliance on Mental Illness Delaware, and the former executive director of the Arc of Delaware.

Photo courtesy of Delaware Business Times
Watch what you say: Words matter

Annie Slease, M.Ed.
Director of Advocacy & Education

We can all reduce the stigma of mental illness by paying closer attention to our language. Words have weight. They matter.

Remember the “R” word? The intellectual disabilities community has raised awareness about the impact of this harmful slur for decades. And while the “R” word has not completely vanished, its use has decreased considerably.

More work needs to be done to eliminate stigmatizing language. Consider the word “crazy.” How often do you hear it? Who uses it? In what context?

Incredibly stigmatizing
Using the word “crazy” to describe a person exhibiting symptoms of a mental illness is incredibly stigmatizing. This makes sense, of course, and thankfully, it’s less often used in this explicitly derogatory manner.

But what are the other ways the word “crazy” is used? Maybe it describes a 22-mile, bumper-to-bumper traffic jam. Maybe it’s used to remark about freezing, blustery winds that arrived suddenly and knocked out the power. Perhaps it’s used to respond to the lightning rate of speed at which the donuts in the break room disappeared.

More work to do
The word “crazy” is often used in situations that are considered undesirable, silly, unpredictable, frightening, unexplainable, strange or confusing. No matter how it is used, the word “crazy” perpetuates stereotypes about mental illness. And it’s not even helpful for conveying a clear message. Instead, it’s used in place of a more precise word choice.

In the work we do at NAMI Delaware, our staff sees the impact of stigma every day. We have taken the unified step of eliminating the use of the “C” word completely. But like the advocacy efforts for ending the “R” word, much remains to be done to raise awareness about the “C” word. Regardless of context, regardless of intent, the use of the word “crazy” inspires misperceptions about mental illness that perpetuate stigma. And stigma is the primary reason people don’t get help for mental illness.

Get started
If you would like to help end the “C” word, here are suggestions:

• Listen for the word. Take note of the times you hear it, who uses it, when and why. Consider what word could have been used instead and how a more descriptive and more appropriate word or phrase would have provided more information.

• Exercise patience when you hear this word. Sometimes, but not always, this could offer an opportunity for awareness. Or you may consider restating the message using a more specific word in place of the “C” word. That may lead to a more appropriate word.

• Engage friends and family in a discussion about this word. Ask what they think to get the conversation started. Generate a list together of other words that fall into the same category, such as the words “insane” and “psycho.”

Find out more about the impact of stigmatizing language:

accessibility.com/blog/disability-language-stop-using-these-words-now
NAMI Delaware Director of Advocacy & Education Annie Slease participated in a roundtable organized by Congresswoman Lisa Blunt Rochester to address the impact of COVID-19 on children and ways to improve children’s mental health services in Delaware.

Annie noted that parents and caregivers served by NAMI are desperate and exhausted. Their children are struggling; the families are struggling.

“We are seeing there is not enough coordination, not enough options, not enough beds, providers, specialized staff for our kids, and not enough navigation or respite help for parents. Delaware needs MORE pediatric mental health resources and family crisis supports to meet the rise in demand,” she added.

Other conversation participants included representatives from Nemours Children’s Health, the Delaware Division of Prevention and Behavioral Services, Delaware Guidance Services for Children and Youth, Inc., Delaware American Academy of Adolescent and Pediatric Psychiatry, the Delaware Department of Education, and the Colonial School District Superintendent.

Congresswoman Blunt Rochester highlighted three of her bipartisan pieces of legislation:

H.R. 1397, the Telehealth Improvement for Kids’ Essential Services (TIKES) Act
- Provides states with guidance and strategies to increase telehealth access for Medicaid and Children’s Health Insurance Program (CHIP) populations
- Requires a GAO study to examine data and information on the impact of telehealth on the Medicaid population
- Requires a GAO study to review coordination among federal agency telehealth policies and examine opportunities for better collaboration as well as opportunities for telehealth expansion into early care and education settings

H.R. 4943, the Children’s Mental Health Infrastructure Act
- Provides funding to children’s hospitals for additional pediatric care capacity for behavioral and mental health services
- Supports costs associated with reallocating existing resources, including converting general beds to accommodate behavioral health patients, creating new capacity for “day hospital” care, and supporting the associated costs of meeting safety standards to protect children and adolescents

H.R. 4944, the Helping Kids Cope Act
- Provides funding to support pediatric behavioral health care integration and coordination
- Allows for flexibility to fund a range of community-based activities including community health workers or navigators to coordinate family access, pediatric practice integration, funding to support telehealth treatment, pediatric training for crisis response, mental and behavioral health urgent care, community-based initiatives such as school-based partnerships, and initiatives to decompress emergency departments
- Provides funding to support training and other workforce innovations at children’s hospitals, pediatric delivery settings, and other settings in multiple disciplines related to pediatric behavioral health
Kimberly is Senior Counsel – Health, Safety & Security at DuPont. She is passionate about removing barriers to access to mental health.

I was born in Flint, Michigan, and I grew up watching the once vibrant city plummet into a severe economic depression, devastating the people of the city. As a result of my experiences growing up in Flint, I became keenly aware that mental health struggles can create obstacles for people's ability to thrive or even recover from major setbacks; that many crises could have been avoided if people had gotten the help that they needed; that some people would like to get help but cannot afford it and self-medicate instead; that jails are full of people that are suffering; and that so many people struggle in silence, because they fear the shame associated with admitting that they need help or are not aware that their struggle is not solely caused by poverty - there may be a mental health component as well.

While my life today is vastly different than it was growing up, my experiences have influenced my passions, which is why I would like to join your advisory board. Today, I serve as Senior Counsel for DuPont, where I am the sole attorney overseeing all legal matters related to health, safety and security for DuPont operations worldwide. Before joining DuPont, I served as an attorney in the U.S. Department of Commerce and the U.S. Postal Service. In a former life, I was a mathematician, valuing pension and retiree healthcare plans, and helping employers fund the plans. I earned my J.D. from Indiana University Maurer School of Law, and I still teach and lecture there on occasion. I earned a B.S. in Mathematics from the University of Michigan. In addition to issues related to mental health, I’m passionate about the arts, rescuing animals, wildlife conservation and photography.

NAMI Delaware welcomes Kimberly Richardson as a new advisory board member

Fight stigma

Membership helps NAMI Delaware present more stigma-busting community awareness presentations each year. The voices of NAMI members strengthen the organization’s impact with local, state and national leaders and legislators to spread awareness, shape legislation and end the stigma of mental illness.

Please renew your membership – and ask a friend to join!
namidelaware.org/membership
NAMI Delaware hosts Days of Caring service projects for groups that want to help with housing improvements to our 76 properties.

In December 2021, a group from DuPont Corporation donated its time to help remove 1,760 pounds of leaves from one of our homes. We are grateful for the employees of DuPont Corporation for their hard work and positive attitudes!

If your business, civic group or organization would like to volunteer, please contact Merton Briggs, Senior Director of Housing and Facilities at mbriggs@namide.org.

Thank you for your support!

We appreciate how you have supported NAMI Delaware during difficult times. Now more than ever, Delawareans need help with mental illness. You’ve made it possible for us to continue to strengthen our mission to support, educate and advocate for people with severe and persistent mental illness in Delaware.

We are grateful to you.
The pandemic has affected our mental health.

1 in 3
Americans has reported anxiety or depression since COVID-19

1 in 5
Americans sought mental health help since COVID-19

1 in 4
U.S children shows symptoms of depression

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