



DR. TERRY JOHNSON

NAMI Far North welcomes Dr. Terry Johnson as our guest speaker August 20. Treatment resistant depression will be the subject of his talk. Dr. Johnson came to Sandpoint and Bonner General Health just over a year ago from North Dakota where he practiced for thirty years. His specialty is adult psychiatry. Please mark your calendar and join us to learn from this special guest at the NAMI Far North general meeting August 20 at 6 p.m. in the Bonner General Hospital classroom. The public is welcome.

HELP WANTED

Do you have a passion for improving the lives of people with mental illness? Do you have some professional or practical skills that you are willing to give to support the mission of NAMI Far North. Our organization needs volunteers like you to serve on the NAMI Board and or to participate in other ways. Please contact Catherine Perusse for more information cmperusse@gmail.com.

CIVIL COMMITMENT NON-EMERGENCY AND EMERGENCY

This is the third in a series of educational articles about civil commitment in Idaho.

“Mental Illness” as defined in the Idaho statutes is “a substantial disorder of thought, mood, perception, orientation, or memory, which grossly impairs judgment, behavior, capacity to recognize and adapt to reality (that) requires care and treatment...” and whether, as a result of that mental illness, he or she is gravely disabled or imminently dangerous to self or others, or lacks insight into the need for treatment.

If the situation is not an emergency, such as when an individual is not threatening immediate harm to him or

herself or others, the process of instituting a civil commitment is begun by the filing of an application with the court. The application can be filed by a friend, relative, spouse or guardian, a licensed physician, prosecuting attorney, other public official of a municipality, county or state, or the director of a facility where the person may be a patient. The application must be accompanied by a certificate of a Designated Examiner stating that he or she has personally examined the subject of the application and has come to the conclusion that the person is mentally ill as defined above.

In an emergency situation, a peace officer may take an individual into detention without a prior court order if there is reason to believe that the person is gravely disabled due to mental illness or his or her continued liberty poses an imminent danger to himself or others, as evidenced by a threat of substantial physical harm. This is sometimes called a ‘mental health hold’ or ‘protective custody’ and requires a higher level of dangerousness than that required for a non-emergency situation.

An emergency hold, ‘protective custody’ or ‘mental health hold’ is often the event that initiates the civil commitment process, which consists of several ‘layers’ of examination and review. The first action may be when a person is taken into custody on the basis of reason to believe that he or she is gravely disabled due to mental illness or his or her continued liberty poses an imminent danger to himself or others. Within twenty-four hours of having been taken into custody for observation, diagnosis, evaluation, care or treatment, a patient must be examined to determine whether he meets those criteria. This determination is made by a Designated Examiner, generally an employee or contractor with the Department of Health and Welfare, and submitted to the court for a temporary custody order requiring the person to be held in a facility. It is prohibited to hold such a person in a unit that is used for the detention of people charged with or convicted of crimes. In other words, under Idaho law, one cannot be held in jail while receiving an examination to

determine whether he or she meets criteria for being in a mental health hold.

A Designated Examiner (D.E.) is a psychiatrist, psychologist, psychiatric nurse or social worker or other professional who is qualified by training and experience in the diagnosis and treatment of mental or mentally related illnesses or conditions, and has been designated by the department of health and welfare in accordance with rules established in Chapter 51, Title 67 of the Idaho Code. The initial examiner is sometimes called a ‘Junior D.E.’ and is called in for the initial assessment in the emergency room or hospital where the person is in protective custody. The Junior D.E. is responsible for the decision as to whether the person meets the definition of mental illness above.

During the court-approved temporary custody following this determination, it sometimes happens that the person receives appropriate medication, is relieved of stressors that contributed to his or her crisis/emergency situation or in some other way is de-escalated and no longer presents reason to believe he or she is gravely disabled or imminently dangerous. The person is then released from protective custody with, it is hoped, referral to appropriate support, housing and care.

Our next article will cover the judicial process that leads to involuntary hospitalization of a person with mental illness.

Special thanks to Linda Hatzembuehler, Ph.D., ABPP, Associate Vice President & Executive Dean Division of Health Sciences, Idaho State University.

—Ruth McKnight, Esq
NAMI Far North board member

PRESIDENT’S MESSAGE MOVING INTO ADVOCACY!!!

In May I started this series of articles on the predictable stages of emotional reactions families go through when impacted with mental illness among family members.

In May we discussed the first stage of “dealing with the catastrophic event”.

In June we discussed the second stage “learning to cope”.

Now, the third predictable stage is “Moving into advocacy”.

After we **understand** how to deal with

the event/diagnosis and learn how to cope with it, we begin to gain a solid, empathic sense of what our family members suffer in their illness. With our fear behind us, we find we can grasp what the inner experience of illness is for our loved ones. We gain real respect for their courage and fortitude.

We can finally **accept** that bad things do happen to good people. We surely wish this trouble had not come into our lives, but it did, and we can accept our misfortune. It is not our fault; it is not their fault. It is a sad and difficult life experience, but we will hang in there and manage. With this measure of acceptance, we can now focus our anger and grief and work to confront the system that has often failed us. We are ready to “come out”. We are ready to fight discrimination and to change the world that shames the mentally ill and their families. We join public **advocacy** groups, we get involved. What we need at this point is activism, restoring our balance in life, and the responsiveness from the system that NAMI helps provide.

Remember that none of these states are wrong or bad. They are all normal reactions everyone experiences when struggling to cope with serious illness and trying to deal with critical disruptions in their lives. This process is ongoing – for most of us it has taken years. The process is also cyclical. We will start it all over again every time our relative has relapsed, or suffered a serious attack. We sometimes have difficulty communicating with each other and agreeing on what to do.

There is **hope** when we see that we do progress through pain and grief to acceptance. —*Amber Snoddy, President NAMI Far North*

CRISIS INTERVENTION TEAM (CIT) UPDATE:

Venues and the keynote speaker are being confirmed for Region 1 CIT Academy #7. The Steering Committee will meet again on Sept 9; the Curriculum Committee will begin meeting shortly thereafter.

NAMI Far North is sending Bonner County Sheriff's Deputy Aaron Walker to the CIT International 2015 Conference October 14-16 to network with leaders from CIT programs across the country and attend educational presentations. Information he brings back will be used in planning Academy #7.

The Idaho CIT Work Group will meet by video conference with sites at each of the 7 DHW offices on July 23. NAMI

Idaho is funding a conference call for the De-escalation Train the Trainer Committee to meet prior to the video conference to set standards for trainers of trainers in programs through-out the state.

—*Ann Ferguson Wimberley, M.D. (retired)*
Region 1 NAMI CIT Coordinator

NAMI FAR NORTH CONNECTION:

I struggle with and am in recovery from Manic-depression, O.C.D. (Obsessive Compulsive Disorder) and a Mixed Anxiety Disorder. As part of my recovery, I facilitate the NAMI Far North Connection group.

During my first mental hospitalization I was told that depression was anger turned inward. It made me mad that they said that. Ha. I didn't understand or agree. After all; ask anyone who knows me and they will tell you that I am a happy, caring person; not an angry person (just don't ask my immediate family).

While at the hospital for clinical depression they noticed that I started smiling and trying to help others instead of working on myself. They realized that subconsciously I was putting on a mask of happiness while hiding my painful emotions inside. I was given a piece of paper which had many types of faces on it. They put a small piece of scotch tape on each side of my mouth. Every time I felt the tape tug, I was to stop, analyze my true feelings, and circle the correct face. It turned out that anger was the # 1 emotion.

“*Getting the Best of your Anger Before it Gets the Best of You*”, a book by Dr. Les Carter, has helped me in many ways. I learned what the definition of anger is and why I experience it. How to make anger my ally and not my enemy. Anger is not wrong in itself. It is the way that I express it that can be good or bad. How I can channel my anger in a positive way to make it a strength, a way of standing up for myself; that is when good change happens. I learned what behaviors make anger an enemy and how to express anger in constructive ways. I learned that I can argue fairly. I learned not to let anger get the best of me because with the proper tools I can learn to control the emotions that I have been given.

I learned that I can be angry, but still be good.

For comments or questions email me at dannjanburt1@gmail.com or call 208-263-7928.

—*Jan Burt, Connection facilitator*
NAMI Far North Board Member



KEYHOLES

The metaphor “Keyholes” is an invitation to you the reader to view the world from the perspective of one person living with a diagnosis of mental illness. In the last issue of the Advocate, Victor Vosen humorously bribed Aunt Edna to share 5 insights which countdown from...

#5 Modern Life is Horribly Complicated

There's a million laws on the books, and probably twice that in unwritten societal rules and etiquette in the court of opinion; then there's all those holy laws we are supposed to observe in the Bible or Koran, or Vedas, what have you, as if everything else wasn't enough. So we're up to several million rules we are to observe or we'll go to hell. But our car engine needs repairing and what with some of the proprietary tools, we need a dealership license just to repair our own engine. We decide to try to get a job to pay for the repairs instead... and guess what... **More Rules**. Even for simple things like say you want to run free from the oppression of clothes, there's a ruled form for that, too, because hey only we mentally interesting would want to do that in public. And then they label you when you try to escape whatever mental torment you're feeling.

A few interesting sources for rules :
--Victorian Etiquette <http://www.logicgmt.com/1876/etiquette/etiquette.htm>
-- Library of Congress <http://www.loc.gov/law/>
--613 laws of Torah <http://www.jewishvirtuallibrary.org/jsourc/Judaism/mitzvot.html>
--Nudist (naturalist) resort <http://www.rocklodge.com/visiting-single-form.htm>

Four more keyholes of insight from Aunt Edna will follow.

—*Victor Vosen*
NAMI Far North Board Member

UPDATE ON CRISIS CENTER:

Concerned people in North Idaho are disappointed with the recent announcement that the new regional

behavioral health crisis center will not be located in Coeur d'Alene as hoped. According to a press release "It was an extremely difficult decision to make because there is a great need in all three of these communities for a crisis center", said Ross Edmunds, administrator for the Division of Behavioral Health at the Idaho Department of Health and Welfare.

By email Ed Morse, House District 2, commented "It is unfortunate that we did not get more support from our legislative delegation for the new mental health crisis center facility originally planned for Coeur d'Alene. This facility will provide better services for the mentally ill, at much lower costs to taxpayers by removing mental health crisis patients from the emergency rooms and jails".

Luke Malek, House Seat 4A stated by telephone " We all would have liked for the crisis center to be located in CDA. Now we hope that Idaho Falls will become a successful model, increasing the chance in the future that North Idaho will be the site of a behavioral health crisis center".

The Idaho Legislature appropriated \$1.52 million ongoing from State general funds and \$600,000 in one-time federal money for the center in the 2014 session.

Once established, the center will be accessible to all residents on a voluntary basis. It will operate around the clock, every day of the year and will be available to provide evaluation, intervention and referral for people experiencing a crisis because of serious mental illness or a co-occurring substance use disorder.

**HOUSE RESOLUTION 3717
From Pete Earley...**

"If you are wondering what is happening to Rep. Tim Murphy's *Helping Families in Mental Health Crisis Act*, also known as House Resolution 3717, you are not alone. Here's the latest.

About two weeks ago, Democrats who oppose the bill sat down with Rep. Murphy and his supporters. That meeting was called after the Energy and Commerce Committee Chairman, Rep. Fred Upton (R-Mich.), privately warned all sides that he wouldn't move the bill forward unless a "consensus" was reached. If the bill doesn't get released from Upton's committee by the end of July, it will die and Rep. Murphy will have to start over when a new legislative year begins". Please read the remainder of the article at www.petearley.com If you are reading this newsletter, this bill effects you.



CONDUIT OF CARE UPDATE

Conduit of Care, the newest project of NAMI Far North to support our mission of improving the lives of people with mental illness, is experiencing incredible grassroots support. CoC will provide

gifts of comfort and care to people while in State Hospital North. In the past month, Sandpoint Super Drug donated a big bag of socks. The people of Bonners Ferry are stepping forward with their typical generosity. The women of Trinity Lutheran Church plan to donate 35-50 quilts a year. The ladies of St Mary's Episcopal Guild donated \$300 to purchase underwear. The four church (United Methodist, Trinity Lutheran, Free Methodist, and Nazarene) Vacation Bible School chose Conduit of Care as their mission project. Each day the children made their offerings of personal hygiene items, socks, etc., and coins (totaling \$100). The staff at State Hospital North is very supportive of the project and helpful in working out the details. Everyl Carper, MSW, Unit 4 Clinician stated "It has been a great privilege and fun to be a part of this project that is now becoming reality. I look forward to seeing the smiles on the patient's faces as they reap the benefits from a community that cares about them and has not forgotten them."

State Hospital North in Orofino admits 275-300 people a year. Admission is by involuntary commitment. The average stay is 70 days.

We seek community partners to join us with care and compassion. For information about how you can help, please email namifarnorth@yahoo.com. Cash donations may be sent to NAMI Far North, Conduit of Care, PO Box 2415 Sandpoint, ID 83864. NAMI Far North is a 501(c)3 charitable organization.

BECOME A MEMBER OF



NAMI Far North

Membership in NAMI Far North entitles you to membership in NAMI and NAMI Idaho. You will receive the NAMI Advocate magazine as well as the NAMI Far North Advocate newsletter.

Name _____
 Address _____
 City, State, Zip _____
 Phone _____
 Email _____

Optional Information:

I AM A: _____ CONSUMER _____ FAMILY MEMBER _____ FRIEND
 _____ MENTAL HEALTH PROFESSIONAL _____ OTHER

MEMBERSHIP TYPES (check one)

- INDIVIDUAL / FAMILY MEMBERSHIP (\$35.00 annual fee)
- PROFESSIONAL MEMBERSHIP (\$35.00 annual fee)
- OPEN DOOR MEMBERSHIP (\$3.00 annual fee) (full annual membership for individuals and families on limited income)
- SCHOLARSHIP MEMBERSHIP (full annual membership is paid by anonymous donor for individuals and families unable to afford the Open Door Membership)
- I want to make a tax-deductible donation to NAMI Far North

Directory:

The NAMI Far North membership directory is intended to facilitate communication and support among NAMI Far North members. It will only be distributed to NAMI Far North members who are current in their dues and who have consented to have their names and contact information published in the directory. It will not be distributed to anyone else for any purpose.

Would you like to be listed in our directory? _____ YES _____ NO

Make checks payable to NAMI Far North and send to:

NAMI Far North • P.O. Box 2415 • Sandpoint, ID 83864

You may also give your application and check to a NAMI Far North board member at a monthly meeting.

NAMI FAR NORTH 2014 CALENDAR

<p>JULY</p> <p>7/28 Bonners Ferry Family Support Panhandle Health District 6-8:30 pm</p> <p>AUGUST</p> <p>8/6 NAMI Connection Sandpoint Gardenia Center 11:30 Lunch 12-1:30 Support Group</p> <p>8/20 Regular Monthly Meeting Bonner General Hospital 6 pm: Dr. Terry Johnson 7-8:30 Family Support 7-8:30 NAMI Connection</p> <p>8/25 Bonners Ferry Family Support Panhandle Health District 6-8:30 pm</p>	<p>SEPTEMBER</p> <p>9/3 NAMI Connection Sandpoint Gardenia Center 11:30 Lunch 12-1:30 Support Group</p> <p>9/17 Regular Monthly Meeting Bonner General Hospital 6 pm: To be announced 7-8:30 Family Support 7-8:30 NAMI Connection</p> <p>9/20 NAMI Idaho Regional Conference Coeur d'Alene</p> <p>9/22 Bonners Ferry Family Support Panhandle Health District 6-8:30 pm</p>	 <div style="border: 1px solid black; padding: 5px; text-align: center;"> <p>YOUR MEMBERSHIP IS VITAL TO THIS GRASSROOTS ORGANIZATION</p> <p>Send your completed application (page 3 of this Newsletter) and membership dues of \$35 (Open Door membership: \$3) to NAMI Far North, P.O. Box 2415, Sandpoint, ID 83864."</p> </div>
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Gini Woodward, Editor
 Donna Brosh, Graphics
 If you do not wish to continue receiving this newsletter, please email namifarnorth@yahoo.com

NAMI Far North meets the third Wednesday of every month from 6:00 to 8:00 p.m. at the Bonner General Hospital Classroom.



For more information about NAMI, please go to www.nami.org

Find help. Find hope.

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 Sandpoint, ID 83864

