It's Island Time!

Join us for the 2014 NAMI Texas Annual Conference, which will be held on November 7th & 8th in Galveston, Texas. An engaging line-up of speakers is planned, so be sure not to miss it! Discounted hotel room rates are available at this time. Registration information and additional details are available at www.namitexas.org.

View the conference flyer...

View the speaker list...

Statewide Mental Health Poetry Contest Winners Announced

This year, more than 100 poems were submitted from across Texas by adults living with mental illness, their friends, and their family members.

Read one of the winning poem entries...

Letter from the Executive Director

Find out the latest NAMI Texas updates...

Affiliate Spotlight

NAMI Denton County became the first NAMI Affiliate in the nation to be offered re-affiliation by NAMI through Standards of Excellence. Find out how they successfully completed the process.

Get tips for your Affiliate...

Ask-A-Cop

Sr. Corporal Herb Cotner and Sherry Casumano, RN, LCDC, MS, answer questions regarding the role of police officers in responding to mental health crises and how individuals with mental illness can avoid arrest.

Learn more about this issue...

Journey of Hope

Through her experiences with childhood trauma, substance abuse, Bipolar Disorder I and borderline Personality Disorder, Teena Adler learned to take control back in her life and become a peer mental health leader.

Read her inspiring story...
Statewide Mental Health Poetry Contest Winners Announced

The Texas Department of State Health Services Mental Health and Substance Abuse Division, National Alliance on Mental Illness (NAMI) - Texas and Mental Health America of Texas are pleased to announce the winners of this year's Adult Mental Health statewide poetry contest!

2014 marked the third year for this contest, which is held each May in observance of Mental Health Awareness Month. This year more than 100 poems were submitted from all across Texas by adults living with and recovering from mental illness, their friends, and their families. The contest judges -- which included representatives from NAMI Texas, Peer Support Services Staff, and DSHS staff -- would like to extend their sincere thanks to each poet who submitted their work for consideration in the 2014 contest.

2014 Winners (listed alphabetically):

Eace Bee
Pflugerville, TX
“The Church House”

Lee Joseph Chernoff
Dallas, TX
“Wacked”

Alan S. Garrett
Saint Jo, TX
“Rex the Bipolar Cat”

Martha K. Grant
Boerne, TX
“How to decommission that ragged army”

Marylou Thompson
San Antonio, TX
“I Saw Orion Last Night”

Congratulations to all the winning poets!

Rex the Bipolar Cat
Alan S. Garrett

Rex was a cat
And a total basket case,
Always climbing the curtains
And trying to give chase

To something inside
He couldn't quite see,
‘Til one day he noticed,
"What’s inside is just me."

You see he didn’t quite know
That something was wrong.
It took others to notice
He sang his own song.

Sometimes he felt manic;
Other days he felt low.
His moods changed quite quickly,
He never did know.

Then one day came a friend
Who said to the cat,
“Rex, I think you’re bipolar,
You may need help to see that.”

So he went to a place
Where help did arrive,
And Rex soon realized
It wasn’t a lie.

It took several sessions
And some medication, too,
But it made him feel better
About all that he knew.

He then went to therapy
In the form of a group,
And found there were others
Who had been there, too.

There was Benny the dog
And Crystal the cow,
And all sorts of creatures.
Rex could only think, “Wow!”

He learned a valuable lesson
From his new group of friends,
That he wasn’t alone
In this world he was in.
Letter from the Executive Director

Dear NAMI Texas Supporters,

Summer is in full swing! Fourth of July celebrations and vacation time! It’s also the perfect time for us to reinstate our NAMI Texas e-Newsletter!

This issue marks our return to a digital format, which is not only beneficial to the environment—it’s a great way for us to share stories with you in a timely fashion. We want to bring you content that is both interesting and relevant to your lives. That’s why our e-Newsletter features articles such as personal recovery success stories, news from Affiliates around the state, interviews with professionals in the mental health field, and the latest announcements from NAMI Texas.

Since our articles are designed with you in mind, we’d love to hear your thoughts about our e-Newsletter! What kinds of stories would you like to see included in future issues? What would be most useful to you at this time? Send your comments and suggestions to our Office Manager, Kelly Jeschke, at kjeschke@namitexas.org.

I also want to take this opportunity to personally invite you to attend our annual NAMI Texas Conference, which will be held in Galveston on November 7th & 8th. Our Conference Planning Committee is hard at work to make this year’s conference our best yet! The NAMI Texas Conference is an excellent way to learn more about mental health issues, connect with leaders in the field, and most importantly to support one another in this very important cause. Be sure to check out our conference flyer link in this e-Newsletter issue for more details. We hope to see you there!

Executive Director, NAMI Texas
Affiliate Spotlight: NAMI Denton County

NAMI Affiliate leaders throughout Texas have been hard at work to meet the new operational requirements set forth by NAMI. Established to strengthen and protect NAMI Affiliates, the Standards of Excellence requirements are based on best practices, IRS and legal requirements, as well as operations practices that will contribute to greater consistency across NAMI, NAMI State Organizations, and NAMI Affiliates.

“A solid organizational framework is a necessary support for program...development, outreach, education and fundraising,” explained Yvonne Broach, who served as Vice President of NAMI Denton County during the Standards of Excellence process and has since become President of the Affiliate. “The Standards of Excellence can spur leaders to consider their Affiliate’s mission statement and whether they have developed policies and the means to enable them to follow through with its aims and purposes.”

While a number of our NAMI Affiliates in Texas have made significant progress toward the successful completion of Standards of Excellence, NAMI Denton County has emerged as a leader in the project.

Determined to get an early start, NAMI Denton County invited a NAMI Texas representative to a board meeting in February 2013 to discuss the Standards of Excellence initiative. Under the leadership of Esther Fidler, Former President of NAMI Denton County, their Affiliate committed itself to the process and began the groundwork.

Over the course of the next year, their leaders updated, revised, and posted the necessary documentation for review. However, their journey through the Standards of Excellence process was not without roadblocks. They first needed to learn about the initiative and how it related to their work within the community.

“The www.namitexas.org/soe website section was the most helpful resource we used. I listened to every recording and read all the documents posted or linked to on the site,” said Broach.

Their Affiliate also relied on the assistance of professionals within the community to tackle some of the more challenging requirements. They enlisted the help of a website developer, obtained a legal review for their Bylaws, and secured pro-bono assistance for their financial review. Ultimately, they attributed their success to a dedicated President and Board of Directors.

Broach had the following advice to share with other Affiliates: “Begin by reviewing the Standards of Excellence list of requirements, then go to the www.namitexas.org/soe materials. Compare your existing documents, materials and records with the standards and their requirements, and bring them up to date. Start posting things on the NAMI Profile Center so review of your documents can proceed while you move on to the rest of the standards. It is also helpful to have one or two people focus on...Standards of Excellence and bring updated documents to the Board for approval on a regular basis. Be prepared for the process to take a lot of time.”

An undertaking as extensive as the Standards of Excellence does take time, but it was well worth their effort.

In June 2014, after a series of state-level documentation reviews, NAMI Denton County went on to become the first (and, so far, the only) Affiliate in the nation to be endorsed by a NAMI State Organization and offered re-affiliation by NAMI. This represents a significant milestone for both the Standards of Excellence project and NAMI Denton County.

“Completing the Standards of Excellence puts our Affiliate on more solid footing to continue working on our mission and goals,” said Broach. “The leaders and members can be proud of this accomplishment.”
**Ask-a-Cop**

**Contributors:**

**Sr. Corporal Herb Cotner** is a 25 year veteran of the Dallas Police Department. He has served Dallas PD as a CIT officer and is the department’s Crisis Intervention Mental Health Liaison. Sr. Corporal Cotner is also the Vice President of NAMI Dallas.

**Sherry Cusumano**, RN, LCDC, MS is the President of NAMI Dallas and Executive Director of Community Education and Clinical Development at Green Oaks Psychiatric Hospital in Dallas, Texas. She’s been trained in the Memphis Model CIT Program and has worked closely with the Dallas Police Department to assist in providing CIT training to numerous law enforcement agencies in the region.

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**Q: Why are law enforcement officers responding to people experiencing mental health crises?**

A: Fifty years ago, people with serious mental illnesses often were committed indefinitely to state psychiatric hospitals. States and courts began to find that these hospitals were often abusive and not humane environments for long-term care, and ordered many people released to community-based mental health services. With the advent of de-institutionalization there was an unanticipated upswing in the number of homeless people in our communities and the number of crisis calls coming into our law enforcement agencies. This should not have been a surprise since the infrastructure to provide care did not shift to community mental health systems as many individuals were “freed” from the state psychiatric hospitals. With this reduction in mental health services, law enforcement and the criminal justice system have been on a forty year learning curve to better identify and respond to mental health crisis situations.

Family members and the community at-large were unprepared to help these individuals living with serious mental illness with their complex needs. Those struggles at times have become frightening and even unsafe for those not trained to identify and appropriately respond to a mental health crisis. People with a mental illness who come off medication can be unpredictable and sometimes dangerous.1 Those are the times when people call 911 out of a concern for the safety of themselves and their loved ones. Law enforcement is now part of the treatment team since they are frequently the first responders. Law enforcement agencies are responsible for providing for a safe community for our citizens and are required to respond when they receive a call for assistance. In the absence of 24/7 crisis mental health services, law enforcement are required to respond to calls for assistance.

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**Q: If I have to call the police for assistance for myself or a loved one, what can I do to avoid an arrest?**

A: We are strong believers that the best way to avoid an arrest is to prevent the crisis event. We always suggest that individuals and their families track crisis events and follow up with each other so they can figure out patterns and triggers to act on before the crisis. If you can act on Monday instead of waiting until the crisis event on Friday, then more options are available. You can contact a peer program, mobile crisis unit, a crisis line, group session, doctor’s office, or take an action that might have worked in the past.

We all know that sometimes, in spite of our best efforts, situations can escalate into a crisis; everyone should have a crisis procedure carefully prepared and documented ahead of time. NAMI’s Family-to-Family course includes a section which contains a “Crisis File” that can be used to prepare for such emergencies. Many NAMI
Affiliates have published crisis procedures that they give to their members to assist them in their preparation for those times when a crisis can’t be prevented. Every time a crisis is prevented through proactive intervention and assistance, it reduces the likelihood of contact with law enforcement and an arrest. Every time that an individual goes in to a crisis, the odds of an assault, injury or arrest are increased. Through crisis intervention team (CIT) training, many law enforcement agencies are doing their part to decrease the odds of such events happening. When an assault does occur, most jurisdictions require officers to arrest an individual, in compliance with family violence laws.

This article was reprinted with permission from the National Alliance on Mental Illness (NAMI). To view the original article, visit the following webpage at:

http://www.nami.org/Template.cfm?Section=CIT&Template=/ContentManagement/ContentDisplay.cfm&ContentID=145845

1 Statement was added after original publication date.
**Journey of Hope:** Teena Adler

The onset of my mental health symptoms started at a very early age after the traumatic events of seeing my mother, aunt, and uncle stabbed repeatedly by my biological father at the age of five and being sexually assaulted by a family friend’s father at a sleep over at the age of six. I endured dissociations, mania, depression, anxiety, night terrors, irrational thoughts, self-harm, and suicidal ideations as a child before being incorrectly diagnosed at eleven years old as having Depression. This diagnosis was given to me at my first of many inpatient stays at a psychiatric hospital after a suicide attempt. I will forever remember being put in a strait jacket and injected with Haldol at the age of eleven years old. I still struggle with this experience every day of my life and it is a constant reminder to me that I need to take care of my mental health on a daily basis so that I am not put in this situation ever again. I believed that if I could just take the medications that I was prescribed and keep my doctors’ appointments that my life would be normal again. I strived for this normalcy anyways because in reality I had no idea what normal was. I only knew what my life had been up until my diagnosis and that was traumatic, chaotic, and dysfunctional and all I knew was that I wanted to make that go away. I struggled severely for twenty one years after my original misdiagnosis was given and incorrect treatment was started.

In my tweens and teens I was constantly in trouble with my parents, my school, and with the police for running away from home. My casual drug use that began at the age of nine years old to numb my mental health symptoms had developed into a full blown drug addiction by the time I was fourteen years old. I had continued down a path of no return when one night I was gang raped at a party. After that night I no longer cared about what happened to me or if I lived or died. It was also that night that I met someone whom I thought was going to save me, but he ended up being the very person who was out to do me harm. I went to live with him thinking I would have a place to live and a way to get my life together, but unbeknownst to me he was a sex trafficker. I was sex trafficked from fourteen years of age until sixteen years of age all through Dallas, Houston, San Antonio, and Austin. I was able to escape after my trafficker went to prison for a parole violation. I struggled with this lifestyle on and off until 2006.

At sixteen years of age I went back home with my family and started counseling and medications again and went on to get my GED and started college. I met a lot of wonderful people as I tried to mend the pieces of my shattered life together. I was eventually correctly diagnosed at the age of thirty one after I set myself on fire in psychosis with Bipolar Disorder I and Borderline Personality Disorder with co-occurring disorders Post Traumatic Stress Disorder, Anxiety, and Attention Deficient Hyperactivity Disorder. After being given my correct diagnoses I started taking the correct medications, going to dialectical behavioral therapy, and Narcotics Anonymous, and other twelve step programs and support groups. I went to Green Oaks Hospital IOP after my diagnoses to get a better handle on my medications and treatment. It was there that I was introduced to NAMI Dallas. I started going to the peer support group meetings and volunteering at the NAMI Dallas office. I continued learning all that I could about my diagnoses to assist me in living an awesome life focused on my wellness despite my many triggers and quirks.

I became involved in leadership roles as I did not like the dysfunction that I saw in some of the programs that I was involved in. I knew that in order for me to make my recovery what I wanted and needed it to be that I had to get involved, take ownership, and change the things I did not like. Life for me now is all about choices and control. I have the choice of exactly how my life is going to be now. No one can decide that for me. Life is not easy by any means and I do still have very bad days, but the difference now is what I choose to do with my feelings and
I am now a NAMI Peer-to-Peer Mentor and State Trainer, NAMI Connection Recovery Support Group Facilitator, NAMI Provider Education Course Teacher, NAMI Dallas Board Member-At-Large, NAMI IOOV (In Our Own Voice) Presenter, NAMI Ending The Silence (ETS) Presenter, DBSA Dallas Support Group Facilitator, Texas Catalyst for Empowerment (TCE) Board Member (Region 2), Consumer and Family Advisory Council (CFAC) Co-Chair, Via Hope Certified Peer Specialist Advisory Council Member, and an Advanced Certified Peer Specialist. I have not been inpatient at a psychiatric hospital since my last admission on December 28, 2006. I maintain my mental health symptoms through therapy, support groups (NAMI Dallas, DBSA Dallas, Celebrate Recovery, Narcotics Anonymous, and Dual Recovery Anonymous), using my WRAP (Wellness Recovery Action Plan), and Exercise, doing Yoga, Mediation, and Mindfulness exercises.

I was helped, educated, and empowered by many wonderful people along my recovery journey and now I feel it’s my turn to pay it forward. I truly believe that it is paramount to give back to the community that I am a part of. That is one of the main reasons why I do the work that I do. My recovery played a huge role in me returning to college full time to continue my Social Work AAS and Substance Abuse Counseling AAS at Eastfield College and in pursuing my Bachelor of Social Work (BSW) and Master Social Work (MSW) at Texas A&M University Commerce.