

National Alliance for the Mentally Ill
 **NAMI CHALLENGER**
 The Nation's Voice on Mental Illness Albuquerque's Quarterly Newsletter

Contact us at 256.0288 or NAMI_ABQ@juno.com

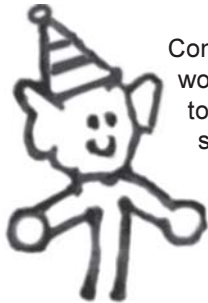
Winter 2005

Hot Cocoa Anyone?

By Michelle Holtby



What's this you say? A guide? (Not to be confused with a personal shopper). An answer to my prayer? A miracle? Whatever you may choose to call it, your trustful, charming and insightful elf has arrived. Many prefer to call me Michelf. (Stepping up on soapbox). I consider it an honor to share a wide variety of tools that perhaps you will consider using during this holiday season and through the remaining winter months. It's my hopes that these tools will help you breathe easier, help save you both time and money (no, I'm not the one footing the bills!) and bring you to a place where you can enjoy daily relaxation no matter what situation you encounter. So, shall we begin our journey?



Come on in. I invite you to join me on this most wonderful journey. It's okay. I'm very friendly, love to laugh and have some good advice I'd like to share with you. So, go on and get yourself a cup of hot cocoa, tea, bottled water, or whatever your choice of beverage is. It's okay, go on now, I'll be here waiting for you. Now, let's sit down and relax. Close your eyes and breathe deeply.

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Complex PTSD

By Kevin Rexroad, M.D.

I have been educating my clients weekly about Complex Post-Traumatic Stress Disorder (PTSD) for the psycho-educational component of the Intensive Outpatient Program. Each week I find myself adding more structure to the simplicity I am trying to create, and realizing more the complexity of my clients' lives. My goal is to allow my clients to create their own self-defining story and remove baggage given to them by others (family or mental healthcare practitioners) that have labeled them over the course of their lives and their illness. Each week I lose more hold on psychiatric diagnoses and symptoms, and move closer to seeing complex life stories.

My concept of Complex PTSD is to allow the client to develop a life story of psychiatric illness that is consistent and encompassing. In understanding their current situation, they can take into account the effects of genetic predisposition, biological and neurochemical effects, medical or somatic conditions, environmental or social development periods, and psychological tendencies. Perhaps components of their life story develop under rules of chaos theory. Perhaps each event is the product of predetermined fate. Regardless, the client

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New Mexico Takes Lead on Mental Health Courts

By Karen Solomon, Attorney at Law

Jails were built to detain criminals, bad persons, who willingly and willfully (transgress) the civil and social laws. 'The mentally ill' are innocents, guilty of nothing but laboring under disease. Jailing the mentally ill makes as much sense as jailing someone for contracting tuberculosis." (As quoted from Dorothea Dix, a former Boston schoolteacher who was advocating against the criminalization of the mentally ill in 1842).

Recognizing the need for accommodation of defendants with mental illnesses, the first mental health court in the United States was started in Broward County, Florida, in December, 1998. Mental health courts have a unique role in the justice system because they bring together criminal justice, mental health, substance abuse and other social service agencies to provide an alternative to the traditional criminal justice system.

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ERRATUM

Please note that we inadvertently attributed an article by Lorette Enochs in our last newsletter to Dr. Marc Perry. Dr. Marc Perry had not seen the article on page 6 of the 4Q2004 *Challenger* entitled 'Is Your Healthcare Provider Meeting Your Needs?' We apologize to Dr. Perry and to the author for our mistake.

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Complex PTSD

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needs to be the one who determines their own story. As the mental healthcare practitioner, I should be a tool for building the story.

Complex PTSD consists of: **1.** traumatic life experiences (either overt, blatant traumas or covert, subtle traumas), **2.** situational stressors causing the manifestation of psychiatric symptoms, and **3.** genetic and biological attributes of the person. As psychiatric symptoms occur due to situational stressors, they are directly influenced by the previously experienced traumas and disproportionate to the severity of the stressors. In other words, any person responding to a situational stressor will react from instinct and past experience, but for the person with Complex PTSD the past experience has altered their ability to respond without being misguided from fear, guilt, or shame. Additionally, these people will have had neurochemical changes and possibly even developmentally altered brain structure due to early trauma, and both of these factors may alter their ability to respond to stress appropriately.

I feel the concept of Complex PTSD provides a framework that permits people to construct their own life story, a story with meaning and purpose, a story telling of their creation and existence. The concept does risk perpetuating the substitution of labels for complex life stories. However, the label may allow healthcare practitioners to see clients with this disorder as living the complexity of their situation without simply disregarding them as a 'snapshot list' of diagnoses. The client may then be able to pull the fragments of their existence together and be whole. 🌀

WINTER EVENT

Professor Samuel Keith, UNM

Department of Psychiatry, to Speak on Schizophrenia

Jane B. Lancaster, President, NAMI Albuquerque

NAMI-Albuquerque's Winter Event has been scheduled for Thursday, February 17th, at 7:00PM in Keller Hall (in Popejoy Hall) at the University of New Mexico. Dr. Samuel Keith has agreed to give us a talk on current research on schizophrenia. The talk will be followed by a coffee and cookies reception. There is plenty of free parking for evening events in the parking lots along Central Avenue between Girard and Cornell. Tickets will be on sale through *Tickets.com* and its outlets (Raley's, Western Warehouse) and at the Popejoy Box Office and the Pit Box Office beginning in December. Tickets will also be on sale at the Popejoy Box Office on the evening of the event one hour beforehand. Tickets will be \$10.00 for regular admission, \$5.00 for consumers and \$5.00 for students. For further information call the NAMI-Albuquerque offices at **256-0288**.

NAMI-Albuquerque is delighted to have the opportunity to honor Dr. Keith. He is a nationally recognized authority on schizophrenia and a founding member of two key mental health organizations: The National Alliance for the Mentally Ill (NAMI National) founded 25 years ago and the National Alliance for Research on Schizophrenia and Depression (NARSAD). 🌀

New Mexico Takes Lead on Mental Health Courts

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Pretrial Services Officer Peter Boyles, in conjunction with Bernalillo County Metropolitan Court Judge Kevin Fitzwater, began the first New Mexico misdemeanor Mental Health Court in December, 2002, serving people diagnosed with either mental illnesses or traumatic brain injury and accused of misdemeanors. A similar program was started shortly thereafter in the New Mexico Second Judicial District Court by Peter Boyles and Judge Neil Candelaria; this court serves people with mental illnesses who are accused of felonies. The two programs are among a handful of mental health courts around the country, with the national number increasing steadily. A children's mental health court is in the making in Bernalillo County.

In order to participate in Mental Health Court, one must first be found competent to stand trial. The legal standard for competence was defined by the U.S. Supreme Court case *Dusky v. United States*:

A person is competent to stand trial when he has "sufficient present ability to consult with his lawyer with a reasonable degree of rational understanding and he has a rational as well as factual understanding of the proceedings against him."

At any point in the criminal proceedings, an attorney, judge or other interested party who is aware that a defendant may not be competent to stand trial may raise the issue of the defendant's competence. The defendant's competence will be assessed by a psychologist, a psychiatrist, or other qualified professional recognized by the court. If this professional finds a defendant incompetent, the court may dismiss the case. If the professional finds a defendant competent, the defendant has the option of trying his case or being considered for mental health court participation.

People who might be suitable candidates for trial in the mental health courts undergo a test period under Pretrial Services supervision to determine whether they would be able to complete Mental Health Court. People who complete this trial period successfully are inducted into Mental Health Court; others have their cases remanded for trial.

Participation length depends upon the severity of the charges, a person's criminal history, and participation lapses, for example, for incurring new charges. Severe infractions result in one's expulsion from the program and the remanding of one's cases to trial.

Conditions of participation are similar to those of probation: no alcohol, no possession of deadly weapons, weekly visits with a Pretrial Services officer, and monthly visits with the judge, among others. One additional condition that makes participation different from regular probation is that one must be in treatment for the duration of the program, through a physician, counselor or therapeutic group. Extra help comes in the form of case management.

Nationally as well as locally, mental health courts are a success. Re-offending rates of those who complete the program are substantially lower than that among the remaining criminal

justice system population. As of July 1, 2004, after the first 20 months of the program, 289 referrals were made to misdemeanor Mental Health Court, 121 were inducted into the program, 43 were wait-listed and eventually inducted, and 64 had graduated. Three of the 121 who were inducted were remanded for non-compliance with program requirements, one of 121 inducted was transferred to District Court for felony Mental Health Court participation, and 19 incurred new charges during participation. Among the graduates, five incurred new charges; eight of 121 inducted didn't complete the program. Many of remaining 48 have graduated since July.

In the writer's experience, participants largely report that people in the program has been beneficial to them, often substantially so. A few people have claimed that the program has saved their lives in giving them the support they needed.

Karen Solomon is the attorney who represents Public Defender clients at Bernalillo County Metro Court Competency and Mental Health Courts.

Vote For the Silver Ribbon Stamp

Do you want to support a postage stamp for Mental Health awareness?

Here is a model letter that you could copy and send to the Postmaster General if you would like to join in with this advocacy activity.

John E Potter
Postmaster General and CEO
US Postal service
475 L'Enfant Plaza
Washington DC 20260-1200



Dear Postmaster General
Please approve, and announce this year, the proposed 'Silver Ribbon' Brain Disability Awareness first-class postage stamp. This will help fight stigma and discrimination; it will build broader public support for treatment and recovery from mental illness.

President Bush and the US Surgeon General have both spoken out strongly for increased public education. The president's New Freedom Commission on Mental Health recommended a national campaign to reduce stigma, which the Department of Health and Human Services has now launched. The postal service can support these efforts to address the public health crisis resulting from barriers to treatment caused by stigma.

The Silver ribbon postage stamp in an idea whose time has come. It will contribute to raising public awareness and will help the one in five Americans who experience a brain disorder at some point during their lifetime.

Sincerely,

NAMI member

*You could also copy this letter to the **Citizen's Stamp Advisory Committee** at the same address above.*

You may cut and paste this letter from our website too!

A Book Review

The Curious Incident of the Dog in the Night-time

Author Mark Haddon, Review By Rosalind Arden

In fans of Sherlock Holmes will enjoy the title of this novel by British writer Mark Haddon. Published simultaneously as a work of fiction for children and as a novel for adults, the book shot quickly to best-seller status and is now sold in forty countries.

The story starts with the discovery of a dead dog. The scene is set for a detective story with a difference. As readers, we slowly piece together the background to the narrator's family history, and to fate of the hapless dog, but our eyes and ears in the story, the teenage boy, doesn't always see or hear what we do. He lives in a different world from us; he has an autism-spectrum disorder.

Asperger's syndrome is the name given to people who have a form of autism combined with the capacity to function highly in certain domains. Our narrator is a whiz at mathematics and logical problem-solving, but is unable to construe or predict emotion in other people. Imagine how puzzling human behaviour must seem to someone unable to read the facial expressions of emotion!

The author has first hand experience of children with mental health disorders. He said in an interview about his book..."It's about how little separates us from those we turn away from in the street. It's about how badly we communicate with one another. It's about accepting that every life is narrow and that our only escape from this is not to run away (to another country, another relationship, a slimmer, more confident self) but to learn to love the people we are and the world in which we find ourselves.

I found this short book utterly compelling, sweet, moving and clever. Does it replicate authentically, the inner state of a person with Asperger's syndrome? I don't know, but it does force the reader into adopting another perspective, to see life through another lens, and that is inevitably enriching. There is humour too, and dignity; our narrator is courageous; he is our hero. In the Sherlock Holmes story that gave the book it's intriguing title, the dog did *not* bark; Holmes reveals how attentive we should be to normal behaviours when they don't happen. In this book the title is worn lightly both as a joke, and as a metaphor for life.





A

by Ron Friedrich, MD

After I recovered from a bout of severe depression / anxiety in 2001, I felt a need to share what I had learned. A phone call to

Mary Tabor eventually led to my training for NAMI's *In Our Own Voice* program in July 2003. Fifteen of us were taught how to give effective presentations to community groups. During the training I met some special people and made new friends. It is inspiring to see people with mental illness face a crowd of strangers and tell their stories. It's courageous!

My co-presenters and I have spoken to diverse groups in a variety of places such as churches, civic groups, students, staff and patients with mental illnesses in hospitals. Each presentation has been warmly received. We do our best to provide accurate information, our personal stories, and a message of hope. We hope that we've helped a little to reduce the stigma by putting a human face and individual story on mental illness.

Sometimes a health crisis can lead to personal growth that would not otherwise occur. The author, Richard Bach, wrote: "every problem has a gift for you in its hand". The gift to me has been this opportunity to be a passionate advocate for the mentally ill. Another benefit has been getting to know the other presenters.

If you would like more information about becoming a NAMI IOOV presenter, contact Mary Tabor at **856-0175**.

NAMI Albuquerque Needs Your e-mail Address!

Please give us your e-mail address. We are building an e-mail address contact tree for our special events. Because the *Challenger* is published quarterly, we have no way to send our membership reminders of special events, notice of changes in time or place, or last minute cancellations. We would love to be able to reach all of you who are on e-mail with a single click on *send*.

We promise not to clutter your mailboxes with nonessentials. All you have to do is to send us an e-mail to Billie Hayes at Billie4433@comcast.net or Jane Lancaster at jlancas@unm.edu

DONATION

We would like to acknowledge the kind donation to the NAMI-Albuquerque office of a microwave oven from Diane and Paul Cox – thank you to both of you!

HOT COCOA ANYONE?

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(Okay, please open your eyes now and continue reading.) Let go of your thoughts from the day. Focus on your breathing and be aware of the sights and sounds that surround you.

Are you comfortable? If not, for heaven's sake, move!

The biggest change I'm implementing this year is to look at the word "coping" in a different light. We all have ways of "coping" with things. I don't like this word and it didn't enter my vocabulary until I was diagnosed with bipolar disorder 3 1/2 years ago. I don't cope. I live. My coping techniques are my self-care choices. Along with taking good care of myself, I'm choosing to make positive changes in how I live through the holiday season and beyond. Perhaps you may find one or more ideas on this list that appeal to you:

1. Self-care means you are #1 and the rest of the world can wait. What are your choices to take good care of yourself? Find out and do them! Perhaps reading, taking a walk or watching a good movie?
2. Choose activities and social events that you really *want* to do, not *have* to do. (You'll be happier you did this and it will considerably reduce your stress level.)
3. Shopping: go early, on-line, make your own gifts or go to arts and craft fairs.
4. How about inviting a group of friends over for a potluck dinner instead of buying each person a gift?
5. Volunteer: many organizations need extra help this time of year. (As a bonus, you'll feel better by giving back to the community.)
6. Exercise, sleep and sunlight- let's get moving, people! Put on those tennis shoes, and take your dog, cat, or ferret for a walk. Enjoy our beautiful New Mexico weather.
7. Try to maintain your regular schedule.



I wish each of you a calm and relaxing holiday season. And whenever needed...get another cup of hot cocoa and raise a toast to taking good care of yourself. — *Michelf*



What is WRAP?

By Phyllis Ortiz

The Wellness Recovery Action Program (WRAP) is a structured system for monitoring uncomfortable and distressing symptoms and, through planned responses, reducing them.



After fifteen years of high achievement and enjoying life, Mary Ellen's life took a turn that resulted in confusion and pain. She turned to her psychiatrist who couldn't offer her any new information on how to get her life back. Her medical doctor tried very hard to convince her that the severe pain and other difficult and mysterious symptoms were "all in her head."

Mary Ellen Copeland, author of the WRAP Plan, embarked on some detailed research. In her words she was "invited into the lives of people whose courage and persistence continue to impress and inspire me. Through this process of networking recovery information, I have uncovered ideas and strategies that, can create major life change. I use my WRAP plan consistently. It works very well for me."

The plan has six parts:

- **Section 1** is the daily maintenance plan
- **Section 2** deals with triggers of distress or discomfort
- **Section 3** deals with early warning signs
- **Section 4** is for when daily life is breaking down, (symptoms that occur when the situation has worsened but is not a crisis)
- **Section 5** is the crisis plan
- **Section 6** is the post-crisis plan

This curriculum is being taught all around the country and all over the world in mental health centers and other locations. There are some WRAP Groups offered by Certified WRAP Trainers in Albuquerque and Rio Rancho for people who want to put their WRAP plan together. The WRAP training is very inexpensive.

There is a free WRAP Support Group meeting once a month for people who have completed a WRAP plan and would like support as they implement it. Please call **888-0598** or e-mail phylliso@copper.net for times and locations or visit Mary Ellen's website at www.mentalhealthrecovery.com

Phyllis Ortiz is the WRAP Organizer for Region 5 with the Office of Consumer Affairs.

THERAPEUTIC FARM COMMUNITY PLANNED FOR ALBUQUERQUE

Casas de Vida Nueva, a non-profit state corporation, is planning to develop a farm community for at least 12 people diagnosed with a mental illness. A sense of belonging arises from living together, working in greenhouses or farming outdoors, caring for animals, and learning about permaculture. We will have a planning meeting at the NAMI office in early January. If you would like to help, please call Charlotte Back **298-5998**, or e-mail cwback28@aol.com



2005 Invisible Child Conference

Life with Autism and Asperger's syndrome will be discussed at an upcoming conference in Colorado. We're advertising this meeting because of its absolutely stellar line-up.

The invisible Child foundation supports families with Bi-polar disorder, OCD, Autism and other brain disorders.

Look at the conference program on the web at www.invisiblechild.org It's a very impressive looking meeting.



When: Saturday, Jan. 22, 2005

Where: The Westin Westminster Hotel, Westminster, Colorado.

Keynote Speaker:

Dr. Kay Redfield Jamison, author of *An Unquiet Mind*, *Night Falls Fast*, and *Touched With Fire*

Also featuring:

Temple Grandin, PhD, professor, Colorado State University and author of *Emergence: Labeled Autistic* and *Thinking in Pictures* speaking about her latest book, *Developing Talents*

Re-naming

Readers – we want to re-name the

CHALLENGER

Challenger newsletter. Since the name is now synonymous with a calamity in space, we want to think of something that better reflects our earthly hopes. If anyone has a suggestion, we'd love to hear from you! Contact us at **256-0288** or e-mail nami_abq@juno.com. Also tell us, what you want to see in this newsletter; we'd like some feedback about what is helpful and what you need.

NAMI Albuquerque Calendar Column

Winter Event

Dr. Samuel Keith to Speak - February 17th (Thursday) at 7:00pm Keller Hall (in Popejoy Hall) at the University of New Mexico. See page 2 for details.

Education Meetings for 2005

All meetings will be held at NAMI Albuquerque Office 6001 Marble NE Suite 7. They are 1- 1.5 hours long.

January 4th (Tuesday) at 7pm - *Recovery Inc.* see below.

February 1st (Tuesday) at 7pm - Michael F. Basarob, *Money Smart for Recovery*

March 1st (Tuesday) at 7pm - Rich Schwoebel and *Suicide Support* see below.

Recovery Inc. will demonstrate its self-help techniques at NAMI's Albuquerque headquarters on Tuesday, January 4, 2005, at 7pm. Recovery Inc., the nation's first self-help organization for the mentally ill, was formed in 1937 by the Chicago neuropsychiatrist Abraham A. Low and his patients.

Dr. Low developed and applied his pioneering style of cognitive behavioral therapy with patients at the Illinois Psychiatric Institute and in his private practice. His system has helped people suffering from many types of nervous and mental disorders, ranging from anxiety to schizophrenia. The Recovery Inc. method is also a useful adjunct for people who are being treated with medications and can be followed in conjunction with other self-help and substance abuse treatment plans. Because Dr. Low understood how important a harmonious domestic life is to previously hospitalized psychiatric patients, he instructed the family of newly returned patients in Recovery Inc.'s techniques.

Richard L. Schwoebel will be introducing **Suicide Survivors**, a group that provides emotional and practical support to family members and friends who have lost a loved one through suicide.

At this meeting we will discuss the types of support usually provided by the group. Support includes:

1. Open discussions of shared experiences among those who have suffered a loss
2. Structured discussions led by local mental health professionals on particular topics or themes.
3. An emotional support framework for better dealing with the grief, guilt, trauma, stigma and despair associated with such a loss.

We will also discuss general topics and statistics related to suicide in New Mexico, reviewed from a few key perspectives including the absence of substantive information and prevention programs. Finally, we will tell you about new initiatives that are underway of particular importance to youth suicide intervention.

Michael F. Basarab will speak about **Money Smart for Recovery**, a consumer-driven program, which is designed to address one of the critical issues within the new world of recovery for the disabled community. The emerging model of recovery contains a major change in focus – from dependence to the development of skills for life long self-sufficiency. Certainly, in the disability community, independence does not have a standard that can be measured. However, all individuals can make a decision based on accurate, current information, to live as independently as possible. Taking into account progress over the past years with medications and therapy, an independence and full life can be created when sufficient education and support are available to address all areas.

Money Smart for Recovery is a resource that provides consumers with both the knowledge and skills to manage their own financial matters. It is geared toward all, regardless of their financial status. The course is designed to provide knowledge for making informed choices with their financial lives. Self-sufficient living is an individual choice, which consumers must define. The individual has to define and engage in activities to the best of their ability. Money Smart provides the foundation for making educated choices in the area of financial responsibility.

The program is divided into modules that cover all areas of individual financial management. It is the same program developed by the Federal Depositors Insurance Corporation (FDIC). The class meets for four weeks, once-a-week. Each session is three hours long. Class size is limited to 10 attendees in an effort to foster a supportive environment for new learning.

Attendance and information presented during the class includes a confidentiality agreement signed by the attendees and the instructor. This additional legal device assists with free and open discussion, which in turn permits effective education. Testing, both direct and indirect, is accomplished after each class and at the end of the course. Feedback is used to readjust and adapt the program to current needs. Upon completion, a certificate of accomplishment is granted by the FDIC.

I am certain that this program will have a major impact on the lives of consumers. The ability to decrease financial dependence will have an overall positive influence on other areas of the consumer's life. If we are indeed serious about our goals towards self-sufficient living, this program will surely provide a critical piece of the recovery puzzle.

Remember to visit our website at www.nami.org/sites/albuquerque



Get information about mental illness, medications etc. at NAMI-Albuquerque, 6001 Marble NE, Ste7. Free pamphlets are available. A lending library of books and tapes is available for members. The office is usually staffed by volunteers M-F, 10:00am – 1:00pm. Call before coming to the office, to check that it is staffed and open! More resources are available on our website at www.nami.org/sites/albuquerque, or e-mail John Matsko nami_abq@juno.com or call 256.0288

NAMI- ALBUQUERQUE FAMILY SUPPORT MEETINGS: Tuesdays 7:00pm-8:30pm at NAMI Albuquerque Office – 6001 Marble NE, Ste. 7

If someone in your family is afflicted with mental illness and you don't know where to turn, come to the support meeting for help.

Family-to-Family- Classes are forming now. Contact Laura Hand 265-8273

In Our Own Voice (IOOV)- People living with mental illness are available to speak about their experiences. Contact Mary Tabor 856-0175 for details on presentations.

CONSUMER SUPPORT MEETINGS:

Albuquerque Drop-in Center is a Consumer-run self-help and support center with a Computer lab, movies and dinner, food boxes, and employment help. Meetings are held Fridays noon-10pm, Sat and Sun 10am to 6pm at 1027 San Mateo Blvd SE Telephone 256-8289

The Depression and Bipolar Support Alliance (DBSA) Albuquerque support group meets Thursday 6:30pm - 8:30pm. Meetings are for patients/consumers and family members/friends at Trinity United Methodist Church 3715 Silver Ave. SE (one block south of Central,two blocks east of Carlisle) Phone 889-3632 or contact us at dbsa4albq@yahoo.com

Double Trouble in Recovery (DTR) is a twelve-step fellowship of men and women, designed to meet the needs of those having addictive substance problems as well as a psychiatric disorder. For information call Donald Hume at 256-4995 or email dhume@nm.net

Sunshine Group Meet Sundays from 5:00pm to 7:30pm at the Community Room, #D3, of the Kentucky Manor apartments at 437 Kentucky SE. Contact Mickey at 266-6042 or Maureen 232-3800

Survivors of Suicide (SOS) Meetings held second and last Monday of each month 4:00pm St. Paul Lutheran Church,1100 Indian School Road NE (just west of University Blvd.) Contact Richard Schwoebel 858-0277 or St. Paul's Church 242-5942

Suicide Survivors Support Group - Santa Fe

6pm-7:30pm. 1st and 3rd Thursday of each month at The Timothy Fleming building 2500 Cerrillos Rd. Across the street from the Artisan art supply store The facilitators are Janet Schreiber, PhD, Ruth Housman, MA, Barbara LoLordo, LPCC, and Joan Murphy. For more information please call Janet Schrieber at 577-8261, or Joan Murphy 476-7889

Albuquerque Recovery Inc. Group meets every Sunday 1:00pm at the Presbyterian Hospital, 1100 Central Ave SE in Southwestern Room A. For more information, call Larry at (505) 243-4514 in Albuquerque.

Santa Fe Recovery Inc. Group meets every Tuesday at 7:00pm Temple Beth Shalom, 205 E Barcelona, in the blue classroom across from the parking lot. Call Sarah at (505) 988-2748. Visit www.recovery-inc.org

The **Challenger** is a newsletter published quarterly by the **National Alliance for the Mentally Ill (NAMI)-Albuquerque.** It attempts to present a variety of views on issues relating to mental illnesses, with depression, bipolar and schizophrenia as primary interests. Ideas and articles are welcome. Articles do not necessarily reflect the views of NAMI. The right to edit material is reserved. The deadline for articles is the First day of December, March, June, and September.

Send articles to: c/o NAMI-Albuquerque
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Additional resources are available on our website at www.nami.org/sites/albuquerque or e-mail John Matsko at nami_abq@juno.com



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National Alliance for the Mentally Ill



The Nation's Voice on Mental Illness



BECOME A MEMBER OF NAMI-ALBUQUERQUE

2004 MEMBERSHIP AND/OR DONATION FORM

Detach this form and make checks payable to: **NAMI-Albuquerque**
 6001 Marble NE, Albuquerque, NM 87110
 Phone **(505) 256-0288** or e-mail **NAMI_ABQ@juno.com**

Name _____ Address _____
 Phone _____ City _____ State _____ Zip Code _____
 e-mail _____ If you wish to receive NAMI urgent news or a .pdf version of our *Challenger* newsletter

Please Check one:

- \$33.** Individual/Family Annual Membership includes local, state, and national newsletters and library privileges.
- \$3.** Consumer Annual Membership.
- Enclosed is a **donation of \$ _____** (NAMI-Albuquerque is a 501(c)(3) organization; donations are tax deductible)
- I prefer to donate and extend support as a non-member.