



National Alliance on Mental Illness

NAMI Southwestern IL

* SUPPORT * EDUCATION * ADVOCACY * RESEARCH *

NAMISWI Website: namiswi.org
NAMISWI E-mail: info@namiswi.org
NAMISWI Phone: (618) 798-9788

December 2010

EXECUTIVE DIRECTOR

Mark Rudolph



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NAMI Southwestern Illinois
proudly serving the 12 counties of:

- Bond
- Calhoun
- Clinton
- Greene
- Jersey
- Macoupin
- Madison
- Monroe
- Montgomery
- Randolph
- St. Clair
- Washington

LET'S PARTY!!!

NAMI Southwestern Illinois Invites You to Our Annual Holiday Party
- Food and Fun for Everyone -



- WHEN:** Tuesday, December 14th, 2010 at 6:00PM
- WHERE:** Collinsville Senior Citizens Center, 420 East Main St., Collinsville Illinois 62234
- WHY:** Because your NAMISWI Board loves to celebrate the season with our devoted members
- WHAT:** There will be food served, presents given, games played and Board Member introduced
- HOW:** Call the office at 618-798-9788 to make your reservation for a great dinner and evening

Reservations are required no later than December 6th -Call Today!

- Dinners are free for Consumers who are NAMI members in good standing.
- Consumers who would like to join NAMI that night can pay \$3.00 to become a NAMI Member and then can enjoy their free dinner that night.
- Dinners for Non-Consumers are \$10.00 payable at the door.
- NAMI Memberships will be available that night also.

We again will be collecting Christmas gifts for Chestnut Health System, Community Counseling Center (CCC), and Alton Mental Health Center (AMHC). Ideas for Chestnut and CCC are gloves, sweatshirts, toiletries, gift cards for Walmart, Target, K-Mart etc. Monetary donations are suggested for AMHC because of contraband articles. With the monetary donations, AMHC Staff will purchase appropriate gifts for their consumers.

Come join in the holiday festivities with your fellow NAMI Members. It's a wonderful time and you'll be glad that you were part of it!!!

CRISIS HOTLINE NUMBERS

Calhoun County
Jersey County
Northern Madison County
Community Counseling Center
Crisis Hotline **(618) 465-4388**

Eastern St. Clair County
Southern Madison County
Chestnut Health Systems
Crisis Hotline **(618) 877-0316**

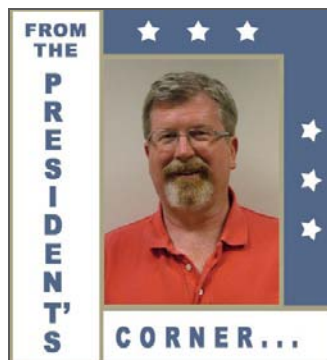
Hotlines open 24 hours.

All St. Clair County
Call For Help
Crisis Hotline **(618) 397-0963**
Eastern St. Clair County
has two Crisis Hotlines:
Call For Help **(618) 397-0963**
Chestnut **(618) 877-0316**

Greene County
Locust Street Resource Center
(217) 854-3166

TABLE OF CONTENTS

Page 1	- Let's Party!!! - Crisis Hotline Numbers
Page 2	- Table of Contents - President's Article - Drug Switching - NAMISWI Info
Page 3	- Other Support Meetings
Page 4	- Advertisers
Page 5	- NAMI Project Leaders - NAMI Southwestern Illinois - Newsletter Deadline Date - Calendar of Events - Join NAMI - NAMISWI Llama's Message
Page 6	- Executive Director's Article
Page 7	- On a Mission - Depression & Anxiety: Exercise Ease Symptoms
Page 8	- Allsup Explains Little-Known Facts...Benefits
Page 9	- Stress, Depression & the Holidays: 10 Tips for Coping
Page 10	- Continued - 10 Tips for Coping - Hour Story: One With the Homeless - Letter to the Editor - NAMI National Convention News - NOTE CHANGE - NAMI Connection Meeting
Page 11	- Pact to Decrease Number of Persons with Mental Illness in Nursing Homes - December Adult "Ask the Doctor" Call - "B1"
Page 12	- NAMISWI Meeting Locations and Times



...*Rob Roennigke*

A big thank you to the NAMISWI members who attended the NAMI Illinois teacher training on November 12th – 14th. We now have new teachers for the following courses:

- **Family to Family:** Lynn Jarman; Phyllis Stevens; Larry Stevens
- **Basics:** Kimberly McClellan; Eugene Luster
- **Support Groups:** Mary Ann Miller

These volunteers represent NAMI at its grassroots' best! NAMI classes and support groups save lives; these teachers fight mental illness and win. Abe Lincoln would be proud of you!

Your Board accepted the unqualified CPA audit of our financial records. A big thanks to Lynn Glauber and Mark Rudolph! Including this audit with our United Way application improved our chances dramatically.

Please join your fellow NAMI members at the Christmas party. It's a great time to catch up with old friends and to make new friends.

Drug Switching: Tell Us Your Story

NAMI of Southwestern Illinois has been learning about the issue of drug switching, which is the practice of a pharmacy or doctor giving a patient either a generic alternative or a so-called therapeutic equivalent. However, these alternatives and equivalents are usually slightly different than the brand name and therefore can be harmful to the patient. Nationally, NAMI has endorsed proposals that would ban incentive-based drug switching. Since the switch to generics can save money, some doctors are under pressure to prescribe generics instead of the drug the patient needs. With mental health drugs, certain drugs are effective for certain people and alternatives with even a slight difference can produce unintended, negative results. We believe that the patient and the physician in partnership to be the primary determiners of care.

NAMI Southwestern Illinois is looking for stories of drug switching in our region because we are reviewing Illinois state legislation in advance of possible state legislation in 2011. The state legislation would be focused on protecting mental health patients by requiring a doctor to be notified or to approve drug switching.

Please send your confidential stories about drug switching to NAMI Southwestern Illinois, Attn: Mark Rudolph at 2100 Madison Ave, 4th Floor, Granite City, IL 62040 or call (618) 798-9788 or send to Mark by e-mail at mrudolph@namiswi.org.



NAMI Southwestern IL

Gateway Regional Medical Center
2100 Madison Avenue, 4th floor
Granite City, IL 62040

E-mail: info@namiswi.org

Website: namiswi.org

Phone: (618) 798-9788

Fax: (866) 332-5338

Mark Rudolph, Exec Dir: mrudolph@namiswi.org

**Tough Times Never Last;
Tough People Do!**



NAMI Southwestern IL Support Meetings

* BELLEVILLE * EDWARDSVILLE *
* GRANITE CITY * LITCHFIELD * MARYVILLE *

Check the last page of this newsletter to find the NAMISWI meeting time and location that fits your schedule best.

You are not alone.....attend a support meeting!

OTHER LOCAL SUPPORT MEETINGS

(The support group meetings listed below are not affiliated with NAMISWI.)

NAMI Cupful: 4th Saturday of each month, 2:00-4:00PM, 1505 Market Ave., East St. Louis. Call Pamela Perry, Central Comprehensive Mental Health, at 618-274-0881 (work) or (314) 868-8031 (home) for more information.

St. Louis Obsessive Compulsive Disorder Support Group: 3rd Saturday of each month, 10:00AM, St. John's Mercy Medical Center, McAuley Room South, 615 S. New Ballas Rd., Von Gontard Conference Center. Speakers start at 10:00AM and support groups meet from 11:00AM till noon. For more information, call (314) 842-7228, ext. 3.

DBSA (Depression and Bipolar Support Alliance) of Madison County Meeting: Every Monday 7:00PM, Anderson Hospital, Maryville, IL, next to the cafeteria on Lower Level B, Classroom B. Contact: Diane Pisko at (618)667-8781 or by e-mail at dbsamc@yahoo.com for more information.

DBSA of Southern IL: Every Tuesday, 7:00PM, St. Elizabeth Hospital, 211 S. 3rd St., Belleville, IL, 7th Floor, Room 722. Contact: Stephen Dayringer (618) 406-9989.

DBSA of Belleville: Every Saturday, 12:00PM, St. Elizabeth Hospital, 211 S. 3rd St., Belleville, IL, 7th Floor, Room 722. Contact: Tod Jurke (618) 567-0986 or Susy Higgerson (618) 719-5950.

DBSA of St. Clair County-Woman to Woman Support Group: Every Thursday, 1:00PM, LINC Inc., #1 Emerald Terrace, Suite 200, Swansea, IL. Contact: Kristina Stevenson (618) 567-0986

"With Hope in Mind" Support Group: for family members or caregivers; meets the 4th Tuesday of each month from 7:00-8:30PM at Christian Hospital Northeast (CNE), 11133 Dunn Road, St. Louis, MO, Room 2100. For more information contact Larry Daniels at (314) 830-4642 or 314-660-9093.

Karla Smith Foundation Support Group for family and friends of persons with mental illness: 1st & 3rd Thursday of each month, 7:00-8:30PM, Peace Chapel, 10101 W. Main St., Belleville. For more information call Tom or Fran Smith at 888-KSF-HOPE or ksf@karlasmithfoundation.org.

Karla Smith Foundation Suicide Survivor Support Group: 2nd & 4th Thursday of each month, 7:00 – 8:30 p.m., Peace Chapel, 10101 W. Main St., Belleville. For more information call Tom or Fran Smith at 888-KSF-HOPE or ksf@karlasmithfoundation.org.

Southwestern Tourette Syndrome Support Group of TSA Illinois: 2nd Monday of each month, 6:30 – 8:00 p.m., Copper Creek Christian Church, 2184 Vadalabene, Maryville. Child care available. For more information contact Amy Shirley at (618) 656-2135 or amyshirley72@hotmail.com.

"It's About Us", Community Counseling Center, 2615 Edwards Street, Alton, Wednesday 3-4PM, for consumers only, must be 18. Call Katie at 618-550-4231 or Dan at (618) 550-5178.

Karla Smith Foundation Suicide Survivor Support Group for family and friends of people who have died by suicide: 2nd and 4th Monday of each month, 7:00-8:30PM, Copper Creek Christian Church, 2184 Vadalabene Drive, Maryville. For more information, call Tom or Fran Smith at 888-KSF-HOPE or ksf@karlasmithfoundation.org.

First Friday Social: for consumers on the first Friday of each month from 6:30PM-9:30PM at Sacred Creations, 129 Steiss Rd, Glen Carbon, IL 62034. For more information, contact Sacred Creations at (618) 792-2049.

The Belleville Group Family Voices is held on the first Tuesday of each month, 6:00-8:00PM at the CHASI Office, 120 East A Street, Belleville. Family Voices is a sub-group of the St. Clair County Youth Coalition and in collaboration with Family Voices Building Stronger Communities.

R.E.S.T. (Resources, Education, Support, and Training) is held on the third Monday of each month, 6:00-8:00PM at Senior Services Plus, 2603 North Rodgers, Alton.

SPECIAL THANK YOU TO OUR ADVERTISERS!!

Tell them you've seen their ad in our newsletter.



337 E. Ferguson Ave.
Wood River, IL 62095
Phone (618) 251-4073

Behavioral Health Alternatives provides Mental Health Case Management Services, which includes but is not limited to: Individual Therapy; Group Therapy; Medication Monitoring and Training; and Representative Payee Services. Call (618) 251-4073 for more information.



PICTURE YOUR AD RIGHT HERE!!

Place your business ad here for \$50.00 per year. Your ad will run each month in the newsletter which is received by approximately 350 people and emailed to almost 100 people. It is also put on website for the whole world to see!


Irwin Chapel
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Glen Carbon and Granite City



2615 Edwards St.
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www.cccnmc.org

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*The Regional Leader
in Behavioral Health*

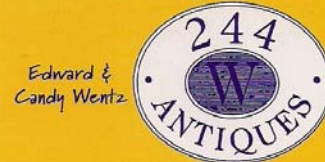
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Thank you...

**Chestnut Health Systems in Granite City and Community
Counseling Center in Alton who each month alternate
printing this newsletter as a service to NAMISWI.**

NAMI Southwestern IL Project Leaders

Alice Adcock.....	Family to Family Chair and Director
Sandy Crawford.....	School Liaison, Secretary and Executive Committee
Mary Gauen.....	Webmaster Chair
Matt Gauen.....	NAMI Southwestern IL Llama Artist
Lynn Glauber.....	Treasurer and Executive Committee
Steve Glauber.....	ByLaws Committee, Fund Raising Chair and Executive Committee
Jim Giger.....	Consumer Program Chair
Sandy Giger.....	Newsletter Editor/Chair
Tom Giger.....	Resource Guide Chair
Cindy Hall.....	Annual Awards Dinner Chair, Vice President and Executive Committee
Jim Isaac.....	Professional Outreach Chair and Director
Lynn Jarman.....	Grant Writing Chair and Director
Tom Johnson.....	CIT Chair
Carol Morrow.....	Newsletter Mailing
Anita Overturf.....	Consumer Program Co-Chair and Director
Lynn Piggot.....	Newsletter Mailing
Diane Pisko.....	Membership Records, Newsletter Labels, Advertisements, Immediate Past President, Executive Committee
Jane Roennigke.....	Basics Chair
Rob Roennigke.....	President and Executive Committee
Pat Rudloff.....	Support Groups Chair and Past President
Gail Shaw.....	Volunteer Chair and Director
OPEN	Legislative Chair and Director
Bev Watkins.....	Policy & Procedure Chair and Director
Rita Watters.....	Walk Chair



NAMI Southwestern Illinois

Abbreviated name: "NAMISWI"

Website: namiswi.org

E-mail: info@namiswi.org

Mark Rudolph, Exec Dir: mrudolph@namiswi.org

NAMI

Experience the Revolution

★ ★ ★ ★ ★ **JOIN TODAY!**

Call the NAMI Office at 618-798-9788 to have a membership form sent to you or download one from our website by clicking here:

<http://madisoncty.nami.org/namiswiMembershipAPP.pdf>

DEADLINE for the January 2011 issue of NAMISWI newsletter is December 15, 2010.

Please e-mail your article to Sandy at skgiger@hotmail.com on or before due date.



CALENDAR OF EVENTS

Last Day for Reservation for Christmas Party.....	Dec 6
NAMISWI Christmas Party.....	Dec 14
Madison County 708 Board Mtg, Edwardsville, 4:30PM.....	None
Madison County Board Mtg, Edwardsville, 5:00PM.....	Dec 15
Continuum of Care Meeting, Woodriver.....	Dec 16
Merry Christmas.....	Dec 25
Happy New Year.....	Jan 1
PIAT, SIUE.....	Mar 4-5, 2011

Have a Merry Christmas and a Happy 2011!!

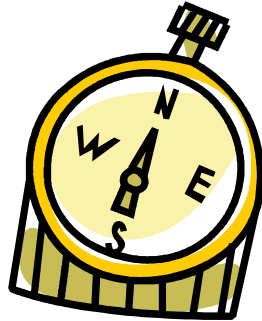




November 10 , 2010

**...Mark Rudolph,
Executive Director**

**WHERE
DO
WE
GO
FROM
HERE?**



I cannot believe that six months have passed since I joined the NAMI Southwestern Illinois Team. We have accomplished a great deal but have much still to do. I thought you might enjoy a brief summary of what has been accomplished and where we will focus our efforts in the next six months. Please know that all that has been accomplished is the work of the entire organization and not any one person.

Our name change is complete except for some tax filings. We have new Bylaws, enacted our Strategic Plan, and developed policies and procedures. We just completed our first audit with a clean report. We now have new computer systems although we still desperately need a new copier. We have a new website under construction and new email addresses. We have installed and are learning software called GiftWorks which will not only help us in our fundraising efforts but will serve as a general database for membership, newsletters, media contacts, event planning and volunteer management. It is a powerful tool and we are just scratching the surface of its capabilities. We have people getting trained to teach our classes and run new support groups. Fundraising is off to an acceptable start with a great Walk that attracted new donors. We submitted an application for United Way Membership. The United Way is a wonderful organization and Membership would be an honor so think positively. Lastly, we added a few new board members that are just dynamic.

I call all that the “fixin’ to get ready” work and once done allows us to focus on the future. There are two areas that will be getting the most attention over the next six months.

1. Community Outreach – There are many, many individuals and families out there that are in desperate need of what NAMI has to offer but they don’t know how to access the help. If we are not helping others then we will NOT thrive as an organization. So, my task will be to reach out to a

diverse cross section of the community such as Psychiatrists, Psychologist, Counselors, Therapist, Special Education Professionals, Law Enforcement, Health Care Providers, Clinics, and Government Agencies to educate them on all that NAMI has to offer through our free classes and support groups. I also want to focus on telling the NAMI story to service clubs such as the Lions, Kiwanis, Optimists, Knights of Columbus and, of course, our faith community. I need your help to get this done so if you have specific persons or groups that you would like me to contact please call or email me. Through building relationships we can grow membership, enhance collaborations, build our donor base, and – ultimately - fulfill our mission!

2. Raise Money – All of NAMI’s programs are free to the participants but that does not mean that there is no cost to do them. The Board has set a goal to have a development program that raises \$75,000 each year from all sources. GiftWorks will be the structure that will let us grow our development efforts in the following areas:
 - a) Individual Donations – statistics show that the long term health of a non-profit is not from grants or special events but from faithful individuals who give every year and provide for their chosen charity in their estate planning. We need to add an annual appeal that goes out at the same time every year. Many employers have a matching gift program so please ask at your work if they do.
 - b) Special Events – Our Walk is a “special event” and is a great “friend raiser” as well as a “fund raiser”. We can grow that event but really need to add another special event in the spring and are looking for ideas! Maybe a concert, spaghetti dinner, trivia night, 5K run, Dinner Auction or???? Would you like to create and run an event? Call me!
 - c) Grants – We are in a very good position now to start submitting grant applications to corporations, foundations, and governmental entities (like the Mental Health Boards). If have any ideas in this area, please let me know.

There is an old proverb that says “He who does not know where he is going is sure to end up there”. We know where we want to go and that is to be in a place where we can help everyone whose life we touch. With hard work, your support, and a little bit of luck we will get there!

On a Mission:

NAMI's Outreach to Veterans and Their Families

Educators bringing NAMI Family-to-Family program to the Veterans Administration have already touched veterans and their families across the country with NAMI's unique brand of education and support.

"The military needs someone who can tell families how it is," says Char Cate, an Air Force veteran, NAMI advocate and co-teacher at one of the classes in Virginia. "The first thing my students say is, 'Why did it take so long for us to find something geared towards families?'"

Sheila Boone leads Family-to-Family classes made up of veteran and community families in Michigan. "The mixed classes work because the program is so well organized. Families do a wonderful job identifying with each other and bonding." She has noticed some themes common among veteran families: "They're starved for information. They're not getting the support they need because some feel they must hide their family member's mental illness."

Brenda Piper, an instructor with NAMI North Carolina, says Family-to-Family's well rounded program is uniquely suited for outreach to veterans' families. "Post-traumatic Stress Disorder (PTSD) is not the only issue in these communities. A lot of military families are finding that the veterans contend with depression, bipolar disorder, substance abuse or a combination along with PTSD."

Family-to-Family is not the only NAMI educational program reaching out to veterans. Samuel Hargrove, who served both in the U.S. Army and the National Guard, says he used to hide his mental illness behind a mask. Now on full disability because of his mental and physical issues, he wishes he was able to return to active duty but has found a second calling in NAMI programs like In Our Own Voice and Peer-to-Peer. "I'm on a mission," he says. "I can help NAMI reach out to veterans, and NAMI has been so honest and welcoming with me."

Depression and Anxiety: Exercise Eases Symptoms

Some realistic tips to help you get started & stay motivated.

by Mayo Clinic Staff

You have anxiety or depression — and exercise seems like the last thing you want to do. But once you get motivated, exercise can make a big difference.

Exercise helps prevent and improve a number of health problems, including high blood pressure, diabetes and arthritis. Research on anxiety, depression and exercise shows that the psychological and physical benefits of exercise can also help reduce anxiety and improve mood.

The links between anxiety, depression and exercise aren't entirely clear — but working out can definitely help you relax and make you feel better. Exercise may also help keep anxiety and depression from coming back once you're

feeling better.

How does exercise help depression and anxiety?

Exercise probably helps ease depression in a number of ways, which may include:

- Releasing feel-good brain chemicals that may ease depression (neurotransmitters and endorphins)
- Reducing immune system chemicals that can worsen depression
- Increasing body temperature, which may have calming effects
- Exercise has many psychological and emotional benefits too. It can help you:
 - Gain confidence. Meeting exercise goals or challenges, even small ones, can boost your self-confidence. Getting in shape can also make you feel better about your appearance.
 - Take your mind off worries. Exercise is a distraction that can get you away from the cycle of negative thoughts that feed anxiety and depression.
 - Get more social interaction. Exercise may give you the chance to meet or socialize with others. Just exchanging a friendly smile or greeting as you walk around your neighborhood can help your mood.
 - Cope in a healthy way. Doing something positive to manage anxiety or depression is a healthy coping strategy. Trying to feel better by drinking alcohol, dwelling on how badly you feel, or hoping anxiety or depression will go away on their own can lead to worsening symptoms.

What kind of exercise is best?

The word "exercise" may make you think of running laps around the gym. But a wide range of activities that boost your activity level help you feel better such as gardening, washing your car, or strolling around the block and other less intense activities. Anything that gets you off the couch and moving is exercise that can help improve your mood.

How much is enough?

Doing 30 minutes or more of exercise a day, for three to five days a week can significantly improve depression symptoms. But smaller amounts of activity — as little as 10 to 15 minutes at a time — can make a difference. It may take less time exercising to improve your mood when you do more vigorous activities such as running or bicycling.

Do I need to see my doctor?

Talk to your doctor to make sure you know which activities, how much exercise and what intensity level is OK for you. Your doctor will consider any medications you take and health conditions you have. He or she may also have some good advice about getting started and staying motivated.

If you exercise regularly but anxiety or depression symptoms still interfere with your daily living, see your doctor or other mental health provider. Exercise is a great way to ease symptoms of anxiety or depression, but it isn't a substitute for psychotherapy, medications or other treatment.

Allsup Explains Little-Known Facts about Applying For Social Security Disability Benefits

SSDI program carries requirements that can make it difficult to receive disability benefits

Belleville, Ill. – Sept. 16, 2010—The Social Security retirement program is top of mind as baby boomers age into eligibility, but the Social Security Disability Insurance (SSDI) program is a significant safety net for taxpaying workers when they experience a severe or permanent disability, according to Allsup, a nationwide provider of Social Security disability representation and Medicare plan selection services.

This year, 206.5 million workers are insured for retirement benefits. In comparison, there are 152.4 million workers who are insured in the event of a disability, and 7.8 million people received Social Security disability benefits last year.¹

“Many people know about Social Security retirement and their eligibility by age, but fewer realize they may be eligible for Social Security disability benefits,” said David Bueltemann, supervisor of senior claimant representatives at Allsup.

One of the common misconceptions is that the SSDI program is means-based, meaning that only lower income individuals are eligible. Not true. SSDI is a payroll tax-funded, federal insurance program. It was enacted in the 1950s and provides monthly benefits to individuals who can no longer work because of disability.

While millions of people are covered under the SSDI program, it does carry a number of requirements that add to the difficulty in receiving these benefits. Allsup has outlined the following little-known facts about SSDI to help explain why Social Security disability benefits can be hard to get.

1. You must be currently insured to receive SSDI benefits. “You might think of this like your car insurance, it only covers your car accident if you’ve paid the premium,” Bueltemann said. “When you work, your payroll taxes are the premium that you pay for Social Security Disability Insurance.” You are considered “current” in your coverage if you’ve had enough earnings during the past 10 years. To be currently insured for SSDI, you must have 20 quarters of coverage for the past 10 years on record with the Social Security Administration (SSA). You can earn up to four quarters every year. In 2010, you can “buy one quarter” by making \$1,120 in wages.

2. You also must be fully insured. In basic terms, you must have at least 40 quarters of coverage. These 40 quarters of coverage could have been earned over your entire working career, as long as you meet the “currently” insured condition.

3. You can apply for SSDI anytime after your disability occurs—as long as your disability is long-term, permanent

or terminal. “Some disabilities are progressive, and the decision to stop working isn’t made immediately,” Bueltemann said. “This means someone might not apply for SSDI until some time after their initial diagnosis. Individuals should apply for SSDI only when they can no longer work.”

Note: There are additional risks from waiting too long to apply for SSDI benefits, including the risk of losing your “currently insured” status. There also is a time limit of 12 months for receiving retroactive benefits. For instance, if you became disabled in the summer of 2006, but did not apply for benefits until winter 2007, your retroactive benefit will only go back 12 months.

4. Disability benefits eventually convert to retirement benefits. After you reach full retirement age, which ranges from 65 to 67 depending on your birth date, any disability benefits you are receiving convert to retirement benefits. You can apply for disability benefits up to the date you attain full retirement age.

5. You must meet the Social Security Administration’s definition of disability to receive SSDI. The definition of “disabled” can vary among state and local government agencies. The SSA has its own definition of disabled. The federal agency uses a five-step process to determine if you qualify for disability benefits.

6. Two out of three people are denied SSDI benefits with their initial application. The SSDI program has strict requirements for receiving benefits, but you can appeal this initial denial of benefits. You also can get assistance with your SSDI application. Allsup provides representation services for people whether they are just beginning their application or they already have been denied a couple of times. Keep in mind that 90 percent of claimants reaching the hearing level, or their second appeal, choose to have a representative on their side.

7. You can increase your chances of award with a representative. “In the same way you get help with your tax return, Allsup helps people with their SSDI applications,” Bueltemann said. “Allsup representatives use their knowledge and experience to help claimants get through the process more quickly and with less hassle. Our team of professionals will answer your questions along every step of the process.”

If you have questions about whether you are eligible for SSDI benefits, please contact the Allsup Disability Evaluation Center at (800) 279-4357 for a free evaluation of your situation.



Stress, Depression and the Holidays: 10 Tips for Coping



Stress and depression can ruin your holidays and hurt your health. Being realistic, planning ahead and seeking support can help ward off stress and depression.

The holiday season, which begins for most Americans with Thanksgiving and continues through New Year's Day, often brings unwelcome guests — stress and depression. And it's no wonder. In an effort to pull off a perfect holiday, you might find yourself facing a dizzying array of demands — parties, shopping, baking, cleaning and entertaining, to name a few. So much for peace and joy, right?

Actually, with some practical tips, you can minimize the stress and depression that often accompany the holidays. You may even end up enjoying the holidays more than you thought you would.

Recognize holiday triggers

Learn to recognize common holiday triggers, so you can disarm them before they lead to a meltdown:

- *Relationships.* Relationships can cause turmoil, conflict or stress at any time, but tensions are often heightened during the holidays. Family misunderstandings and conflicts can intensify — especially if you're thrust together for several days. On the other hand, facing the holidays without a loved one can be tough and leave you feeling lonely and sad.
- *Finances.* With the added expenses of gifts, travel, food and entertainment, the holidays can put a strain on your budget — and your peace of mind. Not to mention that overspending now can mean financial worries for months to come.
- *Physical demands.* Even die-hard holiday enthusiasts may find that the extra shopping and socializing can leave them wiped out. Being exhausted increases your stress, creating a vicious cycle. Exercise and sleep — good antidotes for stress and fatigue — may take a back seat to chores and errands. To top it off, burning the wick at both ends makes you more susceptible to colds and other unwelcome guests.

Tips to prevent holiday stress and depression

When stress is at its peak, it's hard to stop and regroup. Try to prevent stress and depression in the first place, especially if the holidays have taken an emotional toll on you in the past.

1. Acknowledge your feelings. If someone close to you has recently died or you can't be with loved ones, realize that it's normal to feel sadness and grief. It's OK to take time to cry or express your feelings. You can't force yourself to be happy just because it's the holiday season.
2. Reach out. If you feel lonely or isolated, seek out community, religious or other social events. They can offer support and companionship. Volunteering your time to help others also is a good way to lift your spirits and broaden your friendships.

3. Be realistic. The holidays don't have to be perfect or just like last year. As families change and grow, traditions and rituals often change as well. Choose a few to hold on to, and be open to creating new ones. For example, if your adult children can't come to your house, find new ways to celebrate together, such as sharing pictures, emails or videotapes.
4. Set aside differences. Try to accept family members and friends as they are, even if they don't live up to all your expectations. Set aside grievances until a more appropriate time for discussion. And be understanding if others get upset or distressed when something goes awry. Chances are they're feeling the effects of holiday stress and depression too.
5. Stick to a budget. Before you go gift and food shopping, decide how much money you can afford to spend. Then stick to your budget. Don't try to buy happiness with an avalanche of gifts. Try these alternatives: Donate to a charity in someone's name, give homemade gifts or start a family gift exchange.
6. Plan ahead. Set aside specific days for shopping, baking, visiting friends and other activities. Plan your menus and then make your shopping list. That'll help prevent last-minute scrambling to buy forgotten ingredients. And make sure to line up help for party prep and cleanup.
7. Learn to say no. Saying yes when you should say no can leave you feeling resentful and overwhelmed. Friends and colleagues will understand if you can't participate in every project or activity. If it's not possible to say no when your boss asks you to work overtime, try to remove something else from your agenda to make up for the lost time.
8. Don't abandon healthy habits. Don't let the holidays become a free-for-all. Overindulgence only adds to your stress and guilt. Have a healthy snack before holiday parties so that you don't go overboard on sweets, cheese or drinks. Continue to get plenty of sleep and physical activity.
9. Take a breather. Make some time for yourself. Spending just 15 minutes alone, without distractions, may refresh you enough to handle everything you need to do. Take a walk at night and stargaze. Listen to soothing music. Find something that reduces stress by clearing your mind, slowing your breathing and restoring inner calm.
10. Seek professional help if you need it. Despite your best efforts, you may find yourself feeling persistently sad or anxious, plagued by physical complaints, unable to sleep, irritable and hopeless, and unable to face routine chores. If these feelings last

Tips for Coping (Continued from Page 9)

for a while, talk to your doctor or a mental health professional.

Take control of the holidays

Don't let the holidays become something you dread. Instead, take steps to prevent the stress and depression that can descend during the holidays. With a little planning and some positive thinking, you may find that you enjoy the holidays this year more than you thought you could.

HOURLY STORY: One With the Homeless

Reporter spends hour carrying 'Will Work for Food' Sign

Local newspaper reporter from the Suburban Journals attempted to explore the life of a homeless person soliciting "Will Work for Food". He first checked with the local Police Chief to ensure that he would not be breaking any laws. He then started on developing a homeless person shabby look. Next he found a location on Route 157 in Collinsville near the I-70 off ramp across from McDonald; the time was 4:00PM. Once he was ready to start on his assignment, he had a newspaper photographer stationed a couple of hundred feet away to take photos as the assignment developed.

One impression that he got in a hurry was that most motorists went to great lengths not to look at him. Within the hour he spent posing as a homeless person, the reporter was given several half-eaten items of food, some of which were tossed to him in styrofoam boxes. All in all, only ten people responded to his "Will Work for Food" sign that were willing to give him money, food or water in the hour he spent holding his sign.

After this ordeal was reported in the Suburban Journals newspaper on October 12, 2010, the following Letter to the Editor was printed in response to this assignment.

LETTER TO THE EDITOR:

Hold all, even homeless, in high regard

Wednesday, October 27, 2010

I was pleased that the Suburban Journals reported on the harsh reality of homelessness that 495 children and adults living in Madison County experience as a way of life. The aforementioned 2010 statistics are results of an annual survey that is conducted by the Madison County Continuum of Care, a collaboration of organizations and community volunteers devoted to preventing and ending homelessness in Madison County. Though I was not surprised, it pained me to read that one individual offered reporter Jim Merkel partially eaten food. We have many problems in our world, but perhaps among the largest is that we often fail to hold our neighbors in unconditional high regard, especially our neighbors that don't have a place to call home.

As I read the article, I thought it portrayed one aspect of homelessness that our society is somewhat familiar with and that is one of a person on a street corner, holding a sign. I give credit to Mr. Merkel for his willingness to

investigate what life might be like for someone living on the street. The article did not, however, paint the entire picture of homelessness. I will never forget a conversation I had with a man employed at a Hardees located right here in Madison County. While waiting for my food, I decided to take a little informal survey on a housing fundraiser idea that I had. The man looked at me and stated with resignation in his voice that "It won't make any difference." I asked him why and his eyes filled with tears as he told me that he was living in his car. His experience is not unique. Many people in need of housing have jobs, have children and have found themselves in circumstances they wish they could escape from.

Let me finish by saying I was especially disappointed to read the online comments attacking a reporter for journalism efforts that I believe were made in good faith. Four of the five persons who took the time to respond just missed the point. So I am asking the Journals to please not miss the bigger picture. I am requesting an in-depth series on the diverse experiences of homelessness from the perspectives of a parent, an employee, a person living with a disability, etc. Thank you for considering this request.

AJ French, Executive Director
Sacred Creations, Glen Carbon

"NAMI National Convention News 2011 Location: Chicago, IL

NAMI members who register for the NAMI 2011 National Convention by Dec. 31 will pay just \$185 for a full registration--which includes all sessions, networking opportunities, health and wellness activities, special events and social functions. The 2011 Convention is scheduled for July 6-9 at the stunning Chicago Hilton Hotel--located across the street from Grant Park on the city's Magnificent Mile. For more convention information and to register, go to www.nami.org/convention.

**PLEASE
NOTE
CHANGE**

NAMI Connection Meetings

NAMI Connection has changed their meetings from weekly to bi-monthly meetings. The meetings will be held on the 2nd and 4th Thursdays of every month until further notice. December's meetings will be held on the 9th and the 23rd.

Any questions or for more information, contact Diane Pisko at 618-667-8781 or Pat Rudloff at 618-656-6781.

HAPPY NEW YEAR

Pact to Decrease Number of Persons with Mental Illness in Nursing Homes

Federal judge OKs historic agreement to serve people in community settings on September 30, 2010

A Chicago federal judge has approved a landmark agreement that will enable thousands of people with mental illness currently living in nursing homes to move into community settings that experts say are more appropriate and less expensive.

U.S. District Judge William Hart's 24-page order, signed Wednesday and made public Thursday, paves the way for sweeping nursing home safety reforms signed into law by Gov. Pat Quinn this year. And it sets in motion a schedule for state officials to offer about 4,300 mentally ill people the opportunity to move out of two dozen large nursing facilities known as institutions for mental diseases, or IMDs.

"It is a critical step in reforming an outdated system in Illinois," said Benjamin Wolf, associate legal director for the ACLU of Illinois, one of five legal organizations representing the mentally ill nursing home residents.

Hart's ruling gives final court approval to a consent decree hammered out between state authorities and a class of mentally ill nursing home residents who sued five years ago on the grounds that they were not being housed in the least restrictive setting appropriate to their disabilities, as required by federal law.

The ruling will bring federal court oversight to Quinn's push for alternative treatment and housing options for psychiatric patients currently housed in nursing homes. More than any other state, Illinois relies on nursing facilities to house younger adults with mental illness, including thousands with felony records. A recent Tribune investigation detailed incidents of violence and drug abuse in some facilities where psychiatric patients got little treatment or supervision.

In his ruling, Hart acknowledged a substantial segment of IMD residents or their families opposed the settlement because they feared the specialized facilities would close, leaving residents "out on the street" without medication or food.

But Hart said the consent decree "expressly provides that residents will not be left without appropriate housing options due to an IMD closing and that no one will be discharged from an IMD prior to appropriate housing arrangements being made."

Opponents of the consent decree also said in court papers that it "purposefully" lacked details on how the new housing and treatment would be administered. But Hart rejected that argument, too, writing: "The decree sets forth details of the type of community services to be offered. ... The level of detail in the decree itself is sufficient."

Under the settlement, every resident of an IMD will be offered an evaluation to determine whether he or she is eligible to be moved into a less restrictive setting and what is needed for that person to thrive there. The evaluation is voluntary, and residents can decline to take part and remain where they are.

All IMD residents must be offered an evaluation within two years and then annually after that. The settlement outlines a strict timetable for moving those who want to leave the IMDs — slowly for the first two years, then more rapidly as the state builds its capacity for serving and treating people in communities.

Those who move will be placed in so-called supportive housing — subsidized apartments or group homes where staff are on-site or visit frequently to provide therapy, job and life-skills training, substance-abuse programs, and case management.

Under the consent decree, state officials made a legal commitment to provide the housing and support services, and the court will appoint an expert to monitor compliance.

Hart agreed with state officials that the community care will be less costly for the state than housing people in IMDs, which are supported by 100 percent state funding. As people move into community-based settings, he wrote, the state will be eligible to receive federal Medicaid reimbursements for their medications and health care.

Hart ruled that the state must now pay nearly \$2 million in attorney fees and costs to the ACLU and the other groups that brought the case, but he called the amount "reasonable" given the years of litigation involved. The fees won't be kept by the attorneys, he said, but will go to advocacy groups for the disabled that supported the litigation.

Hart also noted that the U.S. Justice Department filed court papers urging him to approve the decree.

December Adult "Ask the Doctor" Call with Guest Daniel Weinberger--Dec. 10

Please join in for the monthly adult issues conference call with Dr. Ken Duckworth, NAMI's medical director, and guest Daniel Weinberger. Dr. Weinberger is board-certified in psychiatry and neurology through Harvard Medical School and George Washington University, respectively. He became chief of the clinical brain disorders branch of the National Institute of Mental Health (NIMH) in 1987. The work of his lab focuses on the basic neurobiological and genetic mechanisms of neuropsychiatric disorders, especially schizophrenia.
Topic: "Genes and Mental Illness: What's the Connection?"
Time: 11 a.m.-12:30 p.m. ET, Friday, Dec. 10

Call (toll-free from any phone): 1-(888) 858-6021, participant code 309918#. If you have any questions, please contact Bianca Ruffin at biancar@nami.org.

(Source: NAMI Friday Facts, November 5, 2010)



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◆ **BELLEVILLE**

Third Thursday of each month, a support group for **Family Members and Consumers** at the PSOP Bldg, 204 N. Church St, Belleville, IL, 7:00PM - 8:30PM. Contact Ron Szewczuk at 618-476-1771.

◆ **EDWARDSVILLE**

Fourth Tuesday of each month, a support meeting for **Family Members** at First Baptist Church, 534 St. Louis St., Edwardsville, IL 62025; use church parking lot entrance, 7:00 - 8:30PM. Contact Pat Rudloff at 618-656-6781.

◆ **GRANITE CITY**

First Tuesday of each month, **Family Members and Consumer** Support Group in the Pascal Hall Meeting Room (Ground floor between Lobby entrance & Gift Shop) at Gateway Regional Medical Center, Granite City, IL 62040, 7:00 - 8:30 PM. Contact Pat Rudloff at 618-656-6781.

◆ **LITCHFIELD**

Third Tuesday of each month, a support meeting for **Family Members and Consumers** at The Christian Church of Litchfield, 131 Yaeger Lake Trail, Litchfield, IL 62056, 7:00 - 8:30PM. Contact Pat Rudloff at 618-656-6781.

◆ **MARYVILLE - NOTE: Changed from weekly to bi-monthly meetings...**

2nd & 4th Thursdays of each month, NAMI Connection Group for **Consumers** at First Baptist Church, 7110 State Route 162, 2nd Floor, Room 244, Maryville, IL 62062, 6:30 - 8:00PM. Contact Diane Pisko at 618-667-8781 for more

PLEASE NOTE...

For questions about any of the meetings listed or inclement weather, call the contact person for that particular meeting or call NAMISWI Office at 618-798-9788.

NOTE

No NAMISWI Board Meeting in December

There will not be a board meeting on the second Tuesday in December. Instead on December 14, NAMISWI will hold its annual Christmas Party. Call the office with your reservation before Dec 6th. See article on page 1 for more information.

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