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The Iris

 **DAMI** | Wisconsin



A View from 2020

Paula Verrett and Dave Zanon host a virtual Peer Support Group training

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Annual Conference 2021 Postponed

We regret to inform you that we will not be hosting our 2021 conference this April. However, we will be evaluating our options for a potential conference this fall. Thank you for your patience as we navigate this difficult time. We miss seeing you in-person and hope to connecting soon.

February is Black History Month

How does this relate to mental illness? Mental illness doesn't discriminate by your background or race, but access to care might.

Additionally, many black people experience historical or generational trauma caused by 400 years of slavery followed by segregation and racism. Historical trauma is the cumulative emotional and psychological wounds that are carried across generations due to slavery, genocide, erasure of culture, or forced relocation.

To learn more about black mental health, follow us on social media.

Depression Tips

Shower. Not a bath, a shower. Use water as hot or cold as you like. You don't even need to wash. Just get in under the water and let it run over you for a while. Sit on the floor if you gotta.

Moisturize everything. Use whatever lotion you like. Unscented? Dollar store lotion? Fancy 48 hour lotion that makes you smell like a field of wildflowers? Use whatever you want, and use it all over your entire dermis.

Put on clean, comfortable clothes.

Put on your favorite underwear. Cute black lacy panties? Those ridiculous boxers you bought last christmas with candy cane hearts on the butt? Put them on.

Drink cold water. Use ice. If you want, add some mint or lemon for an extra boost. I always use lemon.

Clean something. Doesn't have to be anything big. Organize one drawer of a desk. Wash five dirty dishes. Do a load of laundry. Scrub the bathroom sink.

Blast music. Listen to something upbeat and dancey and loud, something that's got lots of energy. Sing to it, dance to it, even if you suck at both.

Make food. Don't just grab a granola bar to munch. Take the time and make food. Even if it's ramen. Add something special to it, like a soft boiled egg or some veggies. Prepare food, it tastes way better, and you'll feel like you accomplished something.

Make something. Write a short story or a poem, draw a picture, color a picture, fold origami, crochet or knit, sculpt something out of clay, anything artistic. Even if you don't think you're good at it. Create.

Go outside. Take a walk. Sit in the grass. Look at the clouds. Smell flowers. Put your hands in the dirt and feel the soil against your skin.

Call someone. Call a loved one, a friend, a family member, call a chat service if you have no one else to call. Talk to a stranger on the street. Have a conversation and listen to someone's voice. If you can't bring yourself to call, text or email or whatever, just have some social interaction with another person. Even if you don't say much, listen to them. It helps.

Cuddle your pets if you have them/can cuddle them. Take pictures of them. Talk to them. Tell them how you feel, about your favorite movie, a new game coming out, anything.

Your absolute best won't ever be good enough for the wrong people. At your worst, you'll still be worth it to the right ones. Remember that. Keep holding on. In case nobody has told you today, I love you and you are worth your weight and then some in gold so be kind to yourself and most of all keep taking one more step, then one more step.



President's Comments

Kay Jewell, MD, President, NAMI Wisconsin Board of Directors

As we celebrate our 40th Anniversary – our history and accomplishments, it's also the time to look ahead to what we want to accomplish in the next 40 years; but we'll start with the next 5 years – better yet, the coming year! It's time to brainstorm how we want to move forward and we need your input, your experiences, and ideas!

Last year, the number of people experiencing mental health challenges almost doubled. We found creative ways to meet the growing need - we shifted to offering virtual support groups and classes but there are people still needing NAMI's support. It's created a sense of urgency about addressing the gaps in services we're able to provide to people throughout the state.

As we proceed with strategic planning, we will be addressing the unmet need, as well as gaps, in the groups of people we're not reaching. We'll be identifying creative ways to address both in the coming months and years.

The heart of our work is the education and support provided by volunteers in our communities – in-person and virtually. We know there are gaps in what we provide: there are counties, especially in the central/northern parts, where there are no Affiliates to offer services. There are Affiliates who are only able to provide limited programming in their area. Many of these are areas where the need for NAMI is most pressing because they have limited or no mental health support in the health care system – limited number of therapists, no psychiatrists.

We have new resources: virtual classes and support groups able to reach people in counties with no Affiliate – and to provide them at the time they're needed. We also have untapped resources – volunteer teachers and facilitators who've been trained to offer classes and lead support groups but who aren't scheduled to offer services in their Affiliate this year. Our challenge is to address how NAMI

Wisconsin can work with our existing and untapped resources to reach people in these counties.

A second need is to identify the groups of people we're not reaching as well as we'd like: e.g. youth, 'transitional' (ages 18-25) and older adults, those from different cultures. NAMI Wisconsin has implemented programs to reach students in middle school and high school, to reach classrooms, and to provide support groups to peers. While we work to expand the availability of these programs throughout the state, we wonder who else aren't we reaching, what other new programs are needed?

We've only started to design and plan for the next year, the next 40 years - and we need you to help us with the process. We need to hear more from everyone in the state – about gaps you've experienced in your life, in your family or community that we should know about, your ideas about how we can reach and fill gaps with groups we're missing. We need you to help prioritize what we focus on in the coming months.

Please call my cell at (715) 345-1905 or share your thoughts by emailing me at president@namiwisconsin.org

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From Our Executive Director's Desk

Mary Kay Battaglia, *Executive Director*

NAMI Wisconsin will proudly celebrate our 40th anniversary this year. On September 24th, 1981 we officially became incorporated as AMI (Alliance for the Mentally Ill) of Wisconsin, Inc, the state affiliate of a grassroots organization that began in Madison through the hard work of some very amazing families.

November 13th of 1997 we officially changed our name to NAMI (National Alliance on Mental Illness) Wisconsin. While national NAMI celebrated their 40th anniversary in 2020, we did not officially start our state office until a year later. Our very own Nancy Abraham served as the first President and has been a driving force and advocate for us throughout these 40 years.

We will be celebrating this milestone with bits of history of NAMI Wisconsin throughout the year in each issue of our Iris. We cannot share the history of this organization without recognizing and being amazed at the strength, power, and determination of the families (and specifically mothers) who built this organization. Harriet Shetler and Beverly Young forged an alliance after meeting and sharing their experience of caring for their sons who lived with a serious mental illness. They formed a group in Madison in 1977, with ten families and they went to work... and I mean they moved mountains. It included writing 100's of letters and phone calls, starting a newsletter, soliciting funding, lobbying legislatures, advocating, developing programs, expanding local affiliates, establishing a national office based in Washington DC, and establishment of our state office in 1981. Without internet, cellphones, or Zoom these moms and families made all this happen over a four-year time frame! I cannot even imagine the herculean effort this movement took - and mind you this was an all-volunteer crew.

The poignant irony of this movement is scientists and psychiatrists from the 1920's – 1970's spent a great deal of time publishing theories that the primary cause of serious mental illnesses, including schizophrenia and bi-polar disorders, was essentially “bad mothers”. Overprotective, unloving, too much love, not enough love, you name it and there was a theory that moms were to blame for their children’s mental illness. It wasn’t until the 1970’s that research bared out the absurdity of these theories. Within the same decade, moms like Harriet, Beverly, and Nancy were rolling their eyes at these theories and marching forward with a movement to decrease the stigma, increase education, advocate for health care, lobby for better laws, and empower the family and person living with a mental illness to live their best life through self-recovery.

It is amazing to reflect on 2020, during the pandemic, and realize there was a lot of conversation about mental illness. Our Governor gave an address on mental illness, grants were awarded to help with mental health in schools, and NAMI supported 9-8-8 legislation to provide a crisis line specific for mental health.

Thank you, loving moms. Thank you, families and volunteers that bonded together and took action. We applaud your strength and tenacity. However, we still need families and peers! We need volunteers to join us to provide programming and advocacy in your community.

WE ARE NOT DONE YET!

Current Staff Members

- Mary Kay Battaglia, Executive Director
- Stacey Mohr-Johannsen, Associate Director
- Crystal Hester, Public Policy & Advocacy Director
- Ellie Thompson, Communications & Events Director
- Helyn Luisi-Mills, CIT/CIP Director
- Gina Leahy, Administrative Coordinator
- Megan McLachlan, Program Coordinator

History in the Making

Celebrating 40 Years



Pictured (from left to right): Nancy Abraham, Beverly Young, Harriet Shetler

How the First AMI Started

Excerpt from *The AMI Letter*
August 1982

Tennis and a red sweater started a family support/advocacy organization in Dane County that has spread across Wisconsin with seventeen groups to date and led to the founding of National AMI with headquarters in Washington, D.C.

A tennis partner of Harriet Shetler who was also a friend of Beverly Young suggested that the two women might share their experiences of having sons with schizophrenia.

In order to meet at the University of Wisconsin Union for lunch, since neither one knew what the other looked like, Bev said she'd wear a Get-the-Red-Out Wisconsin sweater so that Harriet could identify her. This saved AMI because they became confused about the meeting spot and circled around for some time until Harriet plunged in and asked if Bev could be Mrs. Young.

After two months of conducting a two-person support group, the mothers found a few other families with the help of Harriet's county supervisor whom she had talked to about the operation of the county mental health board. Supervisor Elaine Ginnold also happened to work at Goodwill Industries and knew another family with a mentally ill son. This family, the late Ben Lenske and Joan also knew another family... and so it went until we collected twelve persons for a dinner meeting on April 13, 1977, at the Cuba Club Restaurant on University Avenue in Madison.

Even on that first night, there were charter members who joined as friends rather than as families with a mentally ill member. A DNR public relations man became second vice-president and helped us get valuable TV exposure. His wife was our first secretary. One member had a mentally ill nephew. Five families had mentally ill sons.

That night, we chose the name, the Alliance for the Mentally Ill, with the acronym, AMI, meaning friends in French. A West Side Church was offered as a meeting site and the second Wednesday of each month was decided upon for our meetings. The name, the place and the time remain unchanged to this day five and half years later.

Charter member Don Kreul offered to draw up papers so that AMI could be chartered as a not for-profit organization, enabling AMI to avoid paying sales taxes and ensuring that gifts would be tax deductible. Bev worked on incorporation papers and by-laws using those of the Madison Association for Retarded Citizens (MARC) as a model.

Read more in the next Iris Newsletter or at www.namiwisconsin.org/40years

You Spoke, We Listened: 2021-2022 LEGISLATIVE PRIORITIES

NAMI Wisconsin is a grassroots organization which means our legislative priority and agenda come from our members. Before the start of each legislative session, we survey our members on what's important to them. These priorities then become the crucial issues we advocate for over the next two years. Here are the top five issues you expressed were important to people with mental illness and their families. Thank you for all who participated by voicing your opinions!

1.



Strengthen relationships between law enforcement and communities by expanding Crisis Intervention Training, promoting a co-responder model and alternatives to transport for emergency detentions.

Pass a broad range of initiatives to increase the behavioral health workforce, especially psychiatrists in rural areas and communities of color. Support employment opportunities for certified peer specialists and trained community health workers specializing in mental health.



2.

3.



Provide access to affordable, community-based treatment services. Expand access to care through funding peer-run recovery services, regionalized crisis stabilization centers, CSP and Department of Health Services Community initiatives.

Prevent people from entering and returning to jail and prison. Reduce criminalization for people with mental illnesses by ensuring treatment programs such as Treatment Alternatives and Diversions (TAD) and specialty treatment courts are expanded.



4.

5.



Expand BadgerCare to 138% of the Federal Poverty Level (FPL). Urge Governor Evers and our Legislature to accept federal funds for BadgerCare in order to provide more Wisconsinites with access to affordable mental health care and services.



Advocacy Updates

Crystal Hester, Public Policy & Advocacy Director

NAMI Wisconsin Weighs in on State Budget

During the months of November and December, NAMI Wisconsin had the opportunity to provide input on the upcoming state budget. The state budget, which runs for two years, is by far the most important piece of law that is passed in a legislative session. It provides funding for essential programs and services that are utilized by people with mental illness and their families. Due to COVID-19, Governor Evers decided to hold four separate virtual listening sessions to allow Wisconsinites to call in and express what they would like to see in the next state budget.

Each of the four sessions had a different theme: Healthcare and Public Health; Environment, Infrastructure, and the Economy; Criminal Justice Reform; and Our Kids and Education. A NAMI Wisconsin staff member, board member, or affiliate leader was present at each of the four sessions and discussed important issues such as: access to services, telehealth and broadband expansion, jail diversion, school and community-based treatment programs, supported employment, CIT, mental health workforce, and more.

The Governor is set to give his budget address in February and from there the bill will be passed down to the legislature's Joint Finance Committee where additional edits will be made. We have a ways to go before the budget is signed into law. It's important for NAMI members to be a part of the budget process every step of the way.

For more information or questions about the budget, contact Crystal Hester at 608-268-6000 or crystal@namiwisconsin.org



February 25th, 2021 from 1:00 – 3:00 PM | Free Virtual Event | Registration Required

Action Online is NAMI Wisconsin's annual advocacy day. It's your chance to speak directly to your legislators and tell them how they can help improve the mental health system. You are not alone – you can make a difference!

Action Online Itinerary:

- Panel of Mental Health Experts
- NAMI Wisconsin's 2021 Legislative Priorities
- NAMI Smarts for Advocacy (Learn how to tell your story of mental illness to legislators)
- Meetings with Legislators

Join us to make a difference in the lives of those affected by mental illness!

Register for free at www.namiwisconsin.org/action-online

A Rosy Red Future

A Short Story by Terry Matera

Trigger warning: Suicidal ideation

I pumped frantically on my nicotine inhaler. I glance over and look out the psychiatric ward window. Lake Wingra is not uplifting. It seems too hectic. A mental illness, now a wish to die. Tears become hot. Oh, well. Toughen up Terry, I remind myself. It is past dinner hour and I hear the clumsy food carts rapidly rolled down

down

down to the inner

bowels of the hospital. The next morning my psychiatrist signals to me it's time to hit the therapy room. "Underneath all of this you do want to live," he says kindly.

"I don't."

That evening I perch alongside the window. My spot. My solitude. Soon, there's a clamor, singing and laughter. I stroll down the hall, mildly curious. In the dining room I see tables heaped with bingo cards.

"Oh, great," I mutter in disgust. Then, I spy something on the awards table. It is a pearl, white flashlight embossed with gorgeous red roses. I gotta have it. Badly!

I lift a bingo card up and clutch it as I make my way to the farthest table. Competitive spirit ignites. Soon my card is full. Could it possibly be a blackout? I wonder as veins pulsed along each side of my neck.

"Blackout!" I holler.

A nurse puts her arm around my shoulders and whisks me away to the awards table. Picking up my flashlight with great reverence, I scurry back to my room. I find my unopened hostess cupcakes. I place them on the table where my beloved flashlight once lay.

Soon there's a sharp jab to my ribs. I turn around and see the elderly, rail thin man who never speaks. "Thank you," he whispers to me. "I gotta have it," he grins.

That night I am hot and sweaty in my bed. I bare down to my underwear. I seek the center of my bed. I soon feel cold, flat rocks beneath me. Then, a chilly mist covers my parched lips. I feel tranquil, you know. I kind of like this place...

The next morning, I am up and at 'em. I shower putting volumes of shampoo on my hair. I turn the water tap to extra warm and sit. Next, I look at the unwashed heap of clothes next to my dresser. Finally, I find a clean, very white lacy blouse. I pull it on, then shrug into unwrinkled blue, denim capri shorts.

Today I match my doctors ever-energetic pace step by step. "Somethings changed" he says with a smile.

"I want to live to be 100 years old," I smile back.

When I arrive home, I proudly show my mom my flashlight. Next, I put it on my dresser next to my alarm clock. Symbolic, I think. *A rosy, red future.*

Hope for your Health

Chrissy Barnard, Peer Leadership Council

Having hope during these challenging times may seem a bit of a stretch right now, yet having hopefulness has many physical health benefits too. It reduces pain, or at least the perception of; lowers blood pressure, reduces your risk of a heart attack, protects against chronic illnesses, and can help you heal from injury or illness. Plus, studies are now being done on how hope can change neurochemistry because without hope, it can create a cascade of negative thinking and long-term effects on both our physical and mental health.

So how can we build hope in ourselves? First, always know that there is hope even in difficult situations. Second, seek help in building hope whether through an inspiring book or podcast, reconnecting spiritually, enjoying some time in nature, a positive friend or even a therapist. Third, try to reframe any negative thoughts or patterns with positive ones even though that may be difficult to do. Fourth, remember the things that can be controlled and try not to dwell on things that are out of anyone's control. Lastly, forgive yourself any wrong doings and practice self-care.

Thank you 2020 donors!

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Brat Fest Jeff Schroeder
Brookfield Congregational Church
United Church of Christ
Carthage Activities Board
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Affiliate Spotlight NAMI Racine

Since 1979, NAMI Racine County has been dedicated to providing signature NAMI programming to all who need support. Since that time, our “little affiliate that could” has been through varied changes, expansions, and partnerships within Racine County.

We currently have a small staff of high-energy individuals who, in a year of transition and uncertainties, have braved all sorts of adventures and experiences. NAMI Racine has strong oversight from a dedicated volunteer Board of Directors and devotion from peer facilitators, donor partners, and members.



The biggest challenge that NAMI Racine faces is the continued uncertainty of the COVID pandemic. From the concern that our members are likely experiencing social isolation, to the widespread mental health needs of the community, we remain committed to meeting these challenges head on. For example, while the vast majority of our support groups and educational programming like Ending the Silence (ETS) are being conducted virtually, we have reached out to our generous funding partners to upgrade our technology to allow for safer, more secure, and more efficient means of doing so.

Likewise, NAMI Racine began our monthly Virtual Speaker Series in May, with topics such as LGBTQ+ mental health, Chapter 51 commitment, elder mental health, and children’s mental health. We’ve been fortunate to have a variety of guest panelists and experts present on these panels. We’ll continue to offer this virtual series monthly throughout 2021.

Mental Illness Awareness Week 2020 was a meaningful time for NAMI Racine. We kicked off with a “Go Green Monday!” event. We hosted a virtual legislator candidates’ forum (with nonpartisan focus on mental health priorities); posted “Sharing Day” pics on our Facebook page; hosted a live virtual panel with Rep. Bryan Steil about his co-sponsoring the 988-implementation mental health emergency line; and hosted a virtual discussion featuring Dr. Jamie Roberts from Rogers Behavioral Health. The week closed with a Friday night vigil at the Racine courthouse and a proclamation from the County Executive.

We’re in the midst of expanding ETS for Students; ETS for Educators; and ETS for Families to schools, churches, and other agencies in Western Racine County. We’ve gotten warm reception and invitations from new partners in Union Grove, Burlington, and Yorkville. And, speaking of students – we continue bringing the NAMI Nursing Panel to local nursing students. For the first time, we also hosted a group of ‘virtual clinical’ nursing students in partnership with their fearless, talented mental health instructor.

Holiday activities included our first annual “Virtual Trivia Night”, with the theme of Christmas trivia. The winning team received the trophy pictured (featuring “It’s a Major Award!” and mini leg lamp references to “A Christmas Story”). Out of nine teams featuring local agencies, board members, staff, families and friends, eight teams tied for last place (that’s what happens when we wagered everything on the final question!), with the winning team scoring one point!



Did we mention that in this flurry of activity, NAMI Racine hired a new Executive Director in January 2020? Together with our Program Director and Office Manager, we hope to continue to provide strong representation from NAMI Racine for our community, among NAMI affiliates, and to all persons impacted by mental illness.

If you want to nominate your affiliate for the spotlight, please contact Stacey Mohr-Johannsen at stacey@namiwisconsin.org.

Ask the Doctor

Dr. Joshua Babu

With the New Year comes the tradition of making resolutions, goals for accomplishments that a person sets for themselves to complete. Though these are often made initially with zealous determination, it's an all too common occurrence for that initial drive to fizzle out into disappointed failure over time. In regards to mental illness or substance use disorders, such goals might be to overcome depression or anxiety by learning new skills, to quit an addiction, or to break other maladaptive habits that can ruin your occupational goals or interpersonal relationships.

Why does this happen so frequently, time and time again? It's usually because the resolution is kept too private, either with the person making the resolution or perhaps with another few people at the most. It's easy to make promises with yourself because there's not really much that is working to keep you accountable.

I want to describe two dynamic forces for you to make sure you are successful with your resolutions this year.

First is about expectation. For success to be achieved, you have to expect it. A desire in itself will not elicit the needed change. Change occurs when new behaviors are initiated.

And new behaviors will not get initiated if people don't expect those new behaviors to cause change. The definition of insanity is often said to be repeating the same set of behaviors over and over again and expecting different results. Tragically, all that can actually be expected are the same unwanted results. However, if you perform a different set of behaviors, perhaps even the complete opposite of the existing behaviors, doesn't it stand to reason that something new could be expected? And perhaps, that something new, will be something better than before. When you make a resolution, think about what new sets of behaviors you need to work on to actually change your existing pattern of behaviors.

Second is about reputation. People are creatures of reputation. We want to be consistent with the reputation we think about ourselves and how others see us. Let me give a few examples. A person who thinks of themselves and is known as short tempered will only react in an uncontrollable way whenever they are frustrated. They don't expect something different of themselves and so never actually put in the hard work needed for actual change to occur. A person who thinks they're good for nothing and society doesn't value them will never overcome their addictions to become a productive member of society. Conversely, a person who thinks they are kind will try to do their best to act that way even when they are angry. A person who knows their potential value to their family, their friends, to

society, may strive harder to maintain or create a brand new positive reputation.

So how do you create a reputation to help your goal of living out a resolution? Well, first don't keep a goal to yourself only. Tell your loved ones, tell your friends, tell your boss, tell your co-workers, tell your students, tell your congregation members. Write down your resolution as a mission statement and the ways you intend to accomplish it each day. If you have a bad day, write down what went wrong and how you intend to find a solution to the obstacle.

If you keep a weakness, a limitation, or a bad habit in the dark, it'll always be easy to cover it up if you fail because no one else knows. This is one of the main reasons why our resolutions fail. To succeed in making a productive resolution, you must shine a spotlight on that which you think is a limitation or habit you want to improve. By telling the world about your resolution, now you have something to keep you accountable. Even when you don't feel like working on your resolution, you will just because now the world expects you to work on it. So for example, if you want to quit smoking cigarettes, tell as many people as you can that you want to be an ex smoker by such and such date. You'll be amazed at how much more determined you will be to succeed at this goal now because people want to be consistent with what they tell others and the reputation that they are trying to build. In this case, you're trying to build a reputation as an ex smoker. You can do this for any goal. Be a better student. Be a more loving father. Be a less demanding partner. Be a better friend. Be less judgmental. Be a former addict. Be someone who manages their anxiety by working on CBT skills.

Telling the world about your resolution is not weakness. In fact, it's a tremendous example of being courageous by admitting a fault that you want to improve and by telling others, you model this courageous behavior and that also drives you to fulfill your resolution because you want to be consistent with that modeling behavior.

So with this New Year, think about these two powerful forces and make them work for you as you think about what you want to improve. Share your resolution with others so you can be held accountable to achieve your goal.

Expect that doing something different will get you a different result. Shine a spotlight on your resolution and tell as many people as you can what you're working on, in this way you have something to be accountable for and you will automatically try to be more consistent in following that goal!



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